

# Women and girls with a disability – Active Inclusion and Equal Opportunities



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01.

## 1. Introduction

Not-for-profit organisations working with or for people with disabilities are increasingly raising their voice about the issues women and girls with a disability face. The European Platform for Rehabilitation (EPR), as a European network of service providers for people with disabilities, joined the discourse launched by partner organisations such as the European Disability Forum (EDF) or EU institutions like the European Economic and Social Committee (EESC). Over the course of 2019, EPR raised awareness of the many barriers women and girls with a disability still experience nowadays in the European Union. Through an online campaign in social media and issuing this analytical paper, EPR calls for action to end the discrimination women and girls with a disability encounter and that prevents them from being full actors of our society and enjoying equal opportunities.

In this analytical paper, EPR looks into the existing EU and international policy frameworks to tackle such inequalities and provides recommendations for EU policy makers.

The EPR network, its Secretariat and membership, focuses on innovating and learning from each other about trends in services addressed to people with disabilities and working to improve service quality and that they are tailored-made; responding to specific needs. In this paper, EPR brings to light the main barriers confronted by women and girls with a disability; specifically, those related to the fields of work the EPR network engages with. As such, this paper focuses on the obstacles to access services such as those related to education, employment and health care. Additionally, EPR gathers and shares four good practices from its membership to illustrate with concrete examples services addressed at empowering women with disabilities. EPR believes that supporting and contributing to the sharing of good practices between EU Member States is one step forward to take action towards achieving active inclusion and equal opportunities for women and girls with a disability.

The paper unavoidably includes the scourge for both our society in general and for them in particular: violence women and girls with a disability can experience. This violence is a concrete consequence of the discrimination experienced by this target group as the specific services and good practices dedicated to combat it shared by EPR members show.

Finally, this analytical paper gathers brief conclusions on the above mentioned issues and presents EPR members' practices and projects as annexes.

### 1.2 Inequalities and people with disabilities

As defined in the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), '*discrimination* on the basis of disability is any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation.' The World Health Organisation (WHO) stresses that people with disabilities experience inequalities when they are 'denied equal access to health care, employment, education, or political participation because of their disability'<sup>1</sup>.

Following this definition, it can be argued that people with disabilities continue experiencing discrimination in Europe. Lack of fully inclusive policies and respect to the enjoyment of their human rights persist. They also see their dignity compromised being subjects of disrespect and violence due to their disabilities. Often, people with disabilities are denied autonomy 'when they are subjected to involuntary sterilization, or when they are confined in institutions against their will, or when they are

<sup>1</sup> World Health Organisation & World Bank, *World Report on Disability*, Malta, 2011. Online source: [https://www.who.int/disabilities/world\\_report/2011/report.pdf](https://www.who.int/disabilities/world_report/2011/report.pdf)



regarded as legally incompetent because of their disability'<sup>2</sup>. As any other citizens, people with disabilities 'have diverse personal factors with differences in gender, age, socioeconomic status, sexuality, ethnicity, or cultural heritage. While disability correlates with disadvantage, not all people with disabilities are equally disadvantaged'<sup>3</sup>.

While people with disabilities are generally exposed to stigma and discrimination, women with disabilities experience double discrimination due to their gender and their disability. Although in several countries attitudinal and environmental barriers against disability, not gender, are the major factor driving the disadvantage experienced by women with disabilities<sup>4</sup>. As reported by the EESC, women with disabilities do not enjoy equal opportunities to participate on an equal basis with others in all aspects of society. They are too often excluded, among other things, from inclusive education and training, employment, access to poverty reduction schemes, participation in political and public life, and a number of legislative acts prevent them from making decisions about their own lives, including their sexual and reproductive rights<sup>5</sup>. Austerity measures negatively impact women and people with disability in general resulting in multiple discrimination<sup>6</sup>. As a result, they face greater barriers to actively being included and participating in society and to the enjoyment of their rights as EU citizens.

In numbers, women with disabilities represent 16 percent of the total female population in Europe and 60 per cent of the overall population of persons with disabilities. This stands up for around 46 million of women and girls with disabilities in the EU<sup>7</sup>.

As much as some people are born with a disability, others can acquire them through their life course. Women, especially those living in the poorest countries and older people, are the target groups with higher presence of disability.<sup>8</sup> The United Nations Women (UN Women) affirms that the average prevalence rate of disability in the female population aged 18 years and older is 19.2 per cent, compared to 12 per cent for males, representing about 1 in 5 women.<sup>9</sup> The WHO published that 'estimates of moderate and severe disability prevalence are 11 per cent higher for females than males, reflecting somewhat higher age-specific prevalence in females, but also the greater number of older women in the population than older men.'<sup>10</sup>

As mentioned above, people with disabilities are not a homogenous group. Impairments are varied and of different percentage which has direct consequences on social inclusion and hence on having equal opportunities. People with higher percentage of physical and intellectual disabilities can experience more difficulties than others with lesser percentages to access education or employment due to lack of available services tailored to their needs. Within the diversity of people with disabilities, women with disabilities are also not a homogeneous group. Their diversity includes 'multiple and intersecting identities, such as being from a particular social class or ethnic, religious and racial background; refugee, migrant, asylum-seeking and internally displaced women; LGBTQI+ persons; women living with and affected by HIV; young and older women; and widowed women, across all contexts.'<sup>11</sup> As a

<sup>2</sup> Idem

<sup>3</sup> Idem

<sup>4</sup> United Nations Department of Economic and Social Affairs, *Realisation of the Sustainable Development Goals By, For and With Persons with Disability. UN Flagship Report on Disability and Development*, 2018.

<sup>5</sup> European Economic and Social Committee Opinion on *The situation of women with disabilities*, SOC/579 – EESC-2018-01639-00-00-AC-TRA (EN) 2/13

<sup>6</sup> European Parliament, Motion for a resolution on the situation of women with disabilities, 20.11.2018, [https://www.europarl.europa.eu/doceo/document/B-8-2018-0547\\_EN.html](https://www.europarl.europa.eu/doceo/document/B-8-2018-0547_EN.html)

<sup>7</sup> Idem.

<sup>8</sup> World Health Organisation & World Bank, *World Report on Disability*, Malta, 2011. Online source: [https://www.who.int/disabilities/world\\_report/2011/report.pdf](https://www.who.int/disabilities/world_report/2011/report.pdf)

<sup>9</sup> United Nations Women, *The empowerment of Women and Men with Disabilities. Towards Full and Effective Participation and Gender Equality*, United States, 2018.

<sup>10</sup> World Health Organisation & World Bank, *World Report on Disability*, Malta, 2011. Online source: [https://www.who.int/disabilities/world\\_report/2011/report.pdf](https://www.who.int/disabilities/world_report/2011/report.pdf)

<sup>11</sup> United Nations Women, *The empowerment of Women and Men with Disabilities. Towards Full and Effective Participation and Gender Equality*, United States, 2018.



result of multiple identities, women and girls can find themselves in situations of extreme marginalisation.<sup>12</sup>

## 02.

## 2. EU policies addressing women with disabilities

Women and girls with disabilities are often neglected from international and national laws and from those tackling the rights of persons with disabilities. These barriers from the system together with a lack of prioritising and adequately using data collected in relation to their situation perpetuates their invisibility and above mentioned marginalisation.<sup>13</sup>

The **United Nations Convention on the Rights of Persons with Disabilities** (UN CRPD) includes equality between men and women as one of its general principles. Article 6 on women and girls with disabilities recognises the multiple forms of discrimination they are exposed to, and calls for the full development, advancement and empowerment of women.<sup>14</sup> The European Union and its Member States have ratified the UN CRPD which entered into force in 2011.

EU Member States have also ratified the **Convention on the Elimination of All forms of Discrimination Against Women** (CEDAW, 1979). However, they have not ratified the Council of Europe Convention, also known as the Istanbul Convention, on preventing and combating violence against women. This Convention (2011) was the first legally binding instrument on this field in Europe. It built on the framework already established by the CEDAW with more detailed and concrete measures and specifically stresses the need to combat violence against women applied to Europe. Its acceptance implied governments obligations to adapt laws, introduce measures and allocate resources to fight against violence against women.<sup>15</sup>

As a consequence, tailored policy measures addressing the different and various types of disabilities and consequently barriers women and girls with disabilities face, backed up by adequate funding mechanisms to fulfilled them are still missing in the EU. As a result, women and girls with disabilities in the EU are lacking opportunities to be equally members of our society.

The **Charter of Fundamental Rights of the European Union** includes equality before the law, nondiscrimination and equality between men and women on the Articles 20, 21 and 22 respectively. It includes integration of persons with disabilities on its Article 26.

The European Parliament motion for a resolution on women and girls with a disability (2018)<sup>16</sup> called for more concrete action to implement the UN CRPD and its Article 6 in the EU and for the European Commission to lead within the future **European Disability Strategy** as motor for the active inclusion and achievement of equal opportunities of women and girls with disabilities in the EU. At present, the current evaluations carried out of the European Disability Strategy (2010-2020) showed more work needs to be done to significantly provide equal opportunities to women and girls with disabilities.

<sup>12</sup> Association for Women's Rights in Development, *Intersectionality: A Tool for Gender and Economic Justice*, Women's Rights and Economic Change, No. 9 August 2004, p. 2

<sup>13</sup> United Nations Women, *The empowerment of Women and Men with Disabilities. Towards Full and Effective Participation and Gender Equality*, United States, 2018.

<sup>14</sup> UN General Assembly, Convention on the Rights of Persons with Disabilities, adopted by the General Assembly, 13 December 2006. Available at: <http://www.ohchr.org/EN/HRBodies/CRPD/Pages/ConventionRightsPersonsWithDisabilities.aspx#3>

<sup>15</sup> Council of Europe, *The Istanbul Convention and the CEDAW framework: A comparison of measures to prevent and combat violence against women*, a working paper only for reference. Online source: <https://rm.coe.int/168059aa28>

<sup>16</sup> European Parliament, Motion for a resolution on the situation of women with disabilities, 20.11.2018, [https://www.europarl.europa.eu/doceo/document/B-8-2018-0547\\_EN.html](https://www.europarl.europa.eu/doceo/document/B-8-2018-0547_EN.html)



Positively, EU policies on disability increasingly focus on inclusion. Making public spaces inclusive means giving the opportunity for people with disabilities to move freely around their environment, having access to education and academia equally, enjoying equal opportunities and guaranteeing they are included in any strategical agenda such as, as United Nations Women points out, development agendas. Inclusion is of crucial to achieve a more equal society and overcome barriers for people with disabilities. In order to do so and be able to put forward change making active policies for people with disabilities in the EU, a good understanding of both inclusion and disability is necessary.<sup>17</sup> However, there is no universally accepted definition of disability at EU level<sup>18</sup>.

European Institute for Gender Equality (EIGE) includes disability in their reports and Gender Index every year. However, lack of data regarding women with disabilities remains a challenge for deep analysis and policy making.

## 03.

### 3. Barriers faced by women with disabilities: education, employment, health care services and violence

Following the opinion published by the EESC on the situation of women with a disability in 2018, both women and girls with disabilities continue facing multiple and intersectional discrimination due to, as mentioned previously, their gender and their disability.<sup>19</sup> They encounter barriers to participate equally in society. As UN Women states in their strategy towards empowering men and women with disabilities, these barriers persist due to lack of including adequate data and the use of it together with supporting evidence, legislation and policies; lack of design of accessible products, environments and processes; and inadequate access to education, justice, rehabilitation and habilitation.

Discrimination present in our societies mean additional barriers for women and girls with disabilities preventing them from their equal participation. Discrimination leads to barriers to education, employment, healthcare, sexual and reproductive health, social, political and cultural participation and access to justice.<sup>20</sup> It also prevents women from accessing equally social protection mechanisms.

In addition, wrongful stereotypes women with disabilities face lead to social isolation and exclusion.<sup>21</sup> Moreover, women with disabilities can experience unrecognisable and invisible forms of abuse non codified such as being removed of their mobility devices or having disability resources denied in the community or health appointments<sup>22</sup>.

<sup>17</sup> United Nations Women, *The empowerment of Women and Men with Disabilities. Towards Full and Effective Participation and Gender Equality*, United States, 2018.

<sup>18</sup> European Parliament, European disability policy, *From defining disability to adopting a strategy*, 2017. Online source: [https://www.europarl.europa.eu/thinktank/en/document.html?reference=EPRS\\_IDA\(2017\)603981](https://www.europarl.europa.eu/thinktank/en/document.html?reference=EPRS_IDA(2017)603981)

<sup>19</sup> European Economic and Social Committee Opinion on *The situation of women with disabilities*, SOC/579 – EESC-2018-01639-00-00-AC-TRA (EN) 2/13

<sup>20</sup> United Nations Women, *The empowerment of Women and Men with Disabilities. Towards Full and Effective Participation and Gender Equality*, United States, 2018.

<sup>21</sup> European Economic and Social Committee Opinion on *The situation of women with disabilities*, SOC/579 – EESC-2018-01639-00-00-AC-TRA (EN) 2/13

<sup>22</sup> European Parliament, Motion for a resolution on the situation of women with disabilities, 20.11.2018, [https://www.europarl.europa.eu/doceo/document/B-8-2018-0547\\_EN.html](https://www.europarl.europa.eu/doceo/document/B-8-2018-0547_EN.html)



### 3.1 Education

The right of people with disabilities to education is included both under the UN CRPD Art.24<sup>23</sup> and under the Sustainable Development Goals (Goal 4) as 'ensuring inclusive and equitable quality education and promoting life-long learning opportunities for all'.<sup>24</sup>

Looking at active inclusion and equal opportunities, it is needed to take into account that education is not only a fundamental right but crucial for every individual's development and full and effective participation in society.<sup>25</sup> People with disabilities experience barriers to accessing education such as: 'prejudice and discrimination, the lack of qualified teachers to accommodate their needs as well as inaccessible schools and educational materials'.<sup>26</sup>

Women and girls with a disability rates of accessing education are lower than those of men with disabilities. Girls access to education from primary to higher education settings is the lowest between all groups of children due to the discrimination they experience based on their gender and due to having a disability.<sup>27</sup> As the UN suggests, attitudinal and physical barriers against persons with disabilities are a factor explaining the low rates of trained women with disabilities.<sup>28</sup>

No data are however available on women and girls with disabilities specifically. In European schools and in different EU Member States, many girls and women with disabilities cannot access inclusive, high quality education in line with the UN CRPD. It has been demonstrated that the financial crisis has negatively influenced efforts towards inclusive education.<sup>29</sup>

Intergovernmental organisations such as the UN calls for a need of collecting data in order to put in practice targeted policy measures to ensure access to education for people with disabilities which prevent them from engaging in society fully and equally to others. Difficulties in accessing and lack of support to complete education have a subsequent effect for women with disabilities showing in low employment rates.

### 3.2 Employment

Women with disabilities experience more difficulties to access employment than their male counterparts. Men with disabilities are more likely to be employed. As shown by the statistics, employment rates mark of 52.8 percent for men with disabilities and 19.6 per cent for women with disabilities. In comparison with 64.9 percent for non-disabled men and 29.9 percent for non-disabled women. Working-age persons with disabilities experienced significant labour market disadvantage and worse labour market outcomes than working-age persons without disabilities.<sup>30</sup> In the EU, only 18.8 % of women with disabilities are employed. However, the social and economic participation of women with disabilities is essential for the success of Europe's overall economic and social strategy.<sup>31</sup>

In addition to the difficulties people with disabilities experience when trying to join the labour market, the differences on wages in comparison to employed people without a disability are striking. People with disabilities who are employed commonly earn less than other workers without a disability. Women

<sup>23</sup> United Nations Convention on the Rights of Persons with Disabilities (UN CRPD)

<https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-24-education.html>

<sup>24</sup> United Nations Department of Economic and Social Affairs, *Realisation of the Sustainable Development Goals By, For and With Persons with Disability. UN Flagship Report on Disability and Development*, 2018.

<sup>25</sup> Idem

<sup>26</sup> Idem

<sup>27</sup> Women Enable International, *The right to education for women and girls with disabilities. Facts*, United States.

<sup>28</sup> Idem

<sup>29</sup> European Economic and Social Committee Opinion on *The situation of women with disabilities*, SOC/579 – EESC-2018-01639-00-00-AC-TRA (EN) 2/13

<sup>30</sup> OECD, *Sickness, Disability and Work*, Paris, 2009.

<sup>31</sup> European Parliament, Motion for a resolution on the situation of women with disabilities, 20.11.2018, [https://www.europarl.europa.eu/doceo/document/B-8-2018-0547\\_EN.html](https://www.europarl.europa.eu/doceo/document/B-8-2018-0547_EN.html)





with disabilities often earn less than men with disabilities. This pay gap exists for women with and without disabilities. However, women with disabilities are worse off. On top of the pay, they experience the employment gap mentioned.<sup>32</sup> The pay gap for women with disabilities is twice as high as the pay gap for men with disabilities.<sup>33</sup>

Although in-work poverty is arising in some EU countries<sup>34</sup>, joining the labour market can contribute to being economically independent; included in society and able to contribute to it; and helps to feeling higher self-worth. Access to economical remuneration is not the only advantage of improving access to employment for people with disabilities. Given the demographical change the EU is experiencing with an increasingly ageing population, promoting and improving access to employment of people with disabilities would contribute positively to the EU economy. So will be unlocking employment for women disabilities. In economic terms, leaving people with disabilities behind employment leads to a loss of 3.7 percent GDP.

Barriers to employment for women with disabilities are linked to precarious livelihoods, unequal access to and control over resources, child care responsibilities and lack of access to maternity protection.<sup>35</sup> As EPR member Fundacion ONCE describes<sup>36</sup>, according to statistics women with disabilities are four times more likely to suffer gender violence than women without disabilities. The services and practice shared with the purpose of illustrating this paper show how employment plays a key role in empowering these women towards economic independence.

The right to work on an equal basis with others and the right to ‘just and favourable conditions of work’ are recognised in the International Covenant on Economic, Social and Cultural Rights (ICESCR) and the UN CRPD. The International Labour Organisation (ILO) points out that the right of people with disabilities to decent work, however, is frequently denied. Accessing the job market presents additional challenges for people with disabilities, mainly in terms of attitudinal, physical and informational barriers to equal opportunities. Higher unemployment and inactivity rates can also prevent people with disabilities to fully enjoy other recognised rights set forth in the UN CRPD, creating exclusion from the society and insufficient social protection.<sup>37</sup>

According to the European Commission progress report of the European Disability Strategy, persons with disabilities are overrepresented in part time work. Approximately 22.3 percent of people with disabilities work under 30 hours per week even if they report their willingness to work more hours, but they lack of opportunities to do so<sup>38</sup>.

Overtime, the situation of working women with disabilities has worsen compared to that of men. The figure for women facing in-work poverty was 10 per cent in 2007 and 12 per cent in 2014.<sup>39</sup>

### 3.3 Violence, sexually assault, forced sterilization

Persons with disabilities experience a heightened risk of violence, in part as a result of stigma, discrimination and exclusion from society. Persons with psychosocial disabilities experience even more

<sup>32</sup> World Health Organisation & World Bank, *World Report on Disability*, Malta, 2011. Online source: [https://www.who.int/disabilities/world\\_report/2011/report.pdf](https://www.who.int/disabilities/world_report/2011/report.pdf)

<sup>33</sup> See [https://blogs.worldbank.org/sustainablecities/pipeline-work-including-persons-disabilities-skills-development-and-employment-projects?cid=ECR TT\\_worldbank EN\\_EXT](https://blogs.worldbank.org/sustainablecities/pipeline-work-including-persons-disabilities-skills-development-and-employment-projects?cid=ECR TT_worldbank EN_EXT)

<sup>34</sup> Eurostat, online source: <https://ec.europa.eu/eurostat/web/products-eurostat-news/-/DDN-20180316-1>

<sup>35</sup> United Nations Women, *The empowerment of Women and Men with Disabilities. Towards Full and Effective Participation and Gender Equality*, United States, 2018.

<sup>36</sup> See Annex I

<sup>37</sup> European Platform for Rehabilitation, Analytical Paper on Employment and People with Disabilities, Brussels, 2019. See <https://www.epr.eu/wp-content/uploads/Employment-of-PWD-analytical-paper.pdf>

<sup>38</sup> European Platform for Rehabilitation, European Association of Services for Persons with Disabilities, Policy Impact Lab, *Employment Models within the Social Economy and their role in including persons with disabilities into the labour market and society*, Brussels, 2018.

<sup>39</sup> European Parliament, Motion for a resolution on the situation of women with disabilities, 20.11.2018, [https://www.europarl.europa.eu/doceo/document/B-8-2018-0547\\_EN.html](https://www.europarl.europa.eu/doceo/document/B-8-2018-0547_EN.html)





violence than persons with other forms of disabilities.<sup>40</sup> As mentioned in the introduction of this paper, women with disabilities experience double discrimination due to their gender and their disability which places them at a higher risk of gender-based violence, sexual abuse, neglect, maltreatment and exploitation. Women with disabilities are four times more likely to experience sexual violence, affirms UN women<sup>41</sup>. As EPR member Fundación ONCE stresses, women with disabilities may have less capacity to defend themselves, to express themselves, less credibility (especially those with mental health problems), less autonomous access to information and counselling, a higher dependency on third parties, less access to paid jobs or education, less self-esteem, fear of losing the career they are dependent on, or less financial independence. All the aforementioned circumstances make them especially vulnerable<sup>42</sup>.

Services addressed to women with disabilities exposed to gender violence have at the core of their practice to create opportunities to empower women out of the situation of violence they are in. To do so, accessing employment hence becoming more independent economically, managing their resources, being able to access childcare if they are mothers, will help them to build a new reality for themselves by themselves. EPR members Fundación INTRAS<sup>43</sup> and Fundación ONCE work on specific projects addressed to women with disabilities objects of gender violence. A co-production approach helps them to raise their voice, to co-design the services tailored made to their needs and to establish through groups direct connection with local authorities responsible of development and funding of the respective services.<sup>44</sup>

Persons with disabilities have equal needs to access sexual and reproductive health as those without disabilities and have similar requirements for family planning and childbirth<sup>45</sup>. As statistics show, 29 per cent of births by mothers with disabilities are not attended by a skilled health worker and 22 per cent of married women with disabilities have an unmet need for family planning. While examples exist of national sexual and reproductive health policies and programs that are inclusive of persons with disabilities, in most countries, persons with disabilities remain invisible in such frameworks, as well as in their monitoring and evaluation.<sup>46</sup>

Despite legal prohibitions, there are many cases of involuntary sterilisation applied to women and girls with a disability. Sterilisation without consent is used to restrict the fertility of some people with a disability, particularly those with an intellectual disability, almost always women<sup>47</sup>. Forced sterilisation means depriving women and girls with a disability of their sexual and reproductive rights. Legal frameworks and control mechanisms to ensure these illegal practices end need to be put in place so that, whenever sterilisation is requested, the rights of persons with disabilities are always respected above other interests. Involuntary sterilisation is considered a form of violence against women and girls with disabilities as contained in the UN CRPD (Articles 12,17,23,25). The UN CRPD legal framework shows that an individual's right to decision-making should not be replaced by decisions of a third party.<sup>48</sup>

Women and girls with disabilities experience higher exposure to sexual violence compared to women without disabilities and men with and without disabilities.<sup>49</sup> In numbers, 34 per cent of women with a

<sup>40</sup> United Nations Department of Economic and Social Affairs, *Realisation of the Sustainable Development Goals By, For and With Persons with Disability. UN Flagship Report on Disability and Development*, 2018.

<sup>41</sup> UN Women, Facts and Figures. Online source: <https://www.unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures>

<sup>42</sup> See Annex I.

<sup>43</sup> See Annex IV, V, VI.

<sup>44</sup> See Annex VI.

<sup>45</sup> United Nations Department of Economic and Social Affairs, *Realisation of the Sustainable Development Goals By, For and With Persons with Disability. UN Flagship Report on Disability and Development*, 2018.

<sup>46</sup> United Nations Department of Economic and Social Affairs, *Flagship Report on Disability and Sustainable Development Goals*, 2018.

<sup>47</sup> European Disability Forum and CERMI Mujeres, *Ending Forced Sterilisation of Women and Girls with Disabilities*, Madrid, Spain, 2017.

<sup>48</sup> Idem.

<sup>49</sup> United Nations Department of Economic and Social Affairs, *Realisation of the Sustainable Development Goals By, For and With Persons with Disability. UN Flagship Report on Disability and Development*, 2018.



health problem or a disability have experienced physical or sexual violence by a partner in their lifetime.<sup>50</sup> The access to support services and justice is difficult because of varied barriers such as accessibility to the reach the actual service like police stations, sign language interpretation or easy to read formats not available.<sup>51</sup>

### 3.4 Access to healthcare

Misconceptions about the health of people with disabilities have led to assumptions that people with disabilities do not require access to health promotion and disease prevention.<sup>52</sup> People with disabilities have the same general health care needs as anybody else and need access to mainstreamed health care services.<sup>53</sup> However, many experience multiple barriers to access healthcare.

As the World Health Organisation (WHO) affirms, 'health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity'.<sup>54</sup> The EU Charter of Fundamental Rights includes that 'everyone has the right of access to preventive health care and the right to benefit from medical treatment under the conditions established by national laws and practices. A high level of human health protection shall be ensured in the definition and implementation of all the Union's policies and activities'.<sup>55</sup>

Unequal access to healthcare can result in barriers to accessing education and employment. The WHO states evidence shows people with disabilities have higher unmet needs in accessing healthcare than people without disabilities contributing to make them a vulnerable group on health, education and later employment. The World Health Survey informs that 'men and women with disabilities are twice as likely to find that health care facilities and providers' skills are inadequate, three times more likely to be denied health care and four times more likely to be treated badly in the health care system'.<sup>56</sup>

Women with disabilities experience further difficulties than men with disabilities accessing healthcare. Furthermore, women with disabilities experience barriers due to non-accessible medical equipment preventing them from accessing equally women-related medical checkups such as those linked to breast or uterus cancer. Several studies found that women with disabilities receive less screening for breast and cervical cancer compared with women without disabilities screening because examination tables are not height-adjustable and mammography equipment only accommodates women who are able to stand.<sup>57</sup> Moreover, studies on women with disabilities have found that 'that self-perceptions regarding sexuality, painful past experiences associated with reproductive screening, and memories of themselves before disability were all barriers to seeking health care'<sup>58</sup>. In relation with sexual education and rights, the WHO highlights that 'women with functional limitations were less likely to be asked about contraceptive use during visits to general practitioners'.<sup>59</sup>

Women with disabilities, physical or intellectual, experience barriers to access 'primary care, including barriers to care, sex education, sexual abuse and consensual sexuality, contraception, screening for cervical cancer and sexually transmitted infections (STI), and pregnancy and parenting'.<sup>60</sup> The Gender

<sup>50</sup> European Parliament, Motion for a resolution on the situation of women with disabilities, 20.11.2018, [https://www.europarl.europa.eu/doceo/document/B-8-2018-0547\\_EN.html](https://www.europarl.europa.eu/doceo/document/B-8-2018-0547_EN.html)

<sup>51</sup> European Disability Forum, online source: <http://www.edf-feph.org/newsroom/news/5-reasons-why-eu-should-ratify-istanbul-convention>

<sup>52</sup> World Health Organisation, *WHO Global Disability Action Plan 2014-2021. Better health for all people with disability*, 2015.

<sup>53</sup> Idem

<sup>54</sup> Idem

<sup>55</sup> Official Journal of the European Union, Charter of Fundamental Rights of the European Union, (2012/C 326/02)

<sup>56</sup> World Health Organisation, *WHO Global Disability Action Plan 2014-2021. Better health for all people with disability*, 2015.

<sup>57</sup> World Health Organisation & World Bank, *World Report on Disability*, Malta, 2011. Online source: [https://www.who.int/disabilities/world\\_report/2011/report.pdf](https://www.who.int/disabilities/world_report/2011/report.pdf)

<sup>58</sup> Idem

<sup>59</sup> Idem

<sup>60</sup> Greenwood, N. and Wilkinson, J, Sexual and Reproductive Health Care for Women with Intellectual Disabilities: A Primary Care Perspective, *International Journal of Family Medicine*, 2013. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3876698/>



Equality Index 2017<sup>61</sup> shows that on average 13 per cent of women with disabilities experience unmet medical needs and 12 per cent unmet dental needs, while in the case of women without disabilities 5 per cent experience unmet medical needs.

## 04.

### 4. Services for women with disabilities

EPR members strive to provide high quality services addressed to people with disabilities. To inform this paper, EPR gathered a number of practices from its membership on services they provide or projects they are implementing concerning women (and girls were relevant) with a disability.

Although the majority of services are provided equally to women and men, individual projects and services are developed on issues specifically faced by women and girls with a disability. As such, violence against women with a disability stands out as a key issue that service providers can help to address as can be seen by the practices and projects gathered and shared in the Annexes of this paper.

To address these issues, projects shared by EPR members focus on empowering women with a disability and also those women with a disability that have been exposed to violence through helping them to access employment, supporting them through workshops on emotional intelligence, providing them with advice and guidance in job searching and preparatory interviews and follow up, teaching them and helping them to learn about sexual education, how to take care or grow their self-esteem and which are their rights and work with them to co-design of their services/co-production.

As Fundación ONCE<sup>62</sup> confirms ‘disability and gender violence must be taken into account as a binomial with a higher risk of exclusion when accessing the labour market, which implies adapting our services to the specific needs of those women.’ In their programs and projects, Fundación ONCE works to promote the employment of people with disabilities for them to achieve to be fully included in our society. They work directly with people with disabilities and provides them with upskilling trainings and, also, by creating and providing them with employment opportunities, they work in access to employment of people with disabilities. Fundación ONCE does so with INSERTA, their program to access employment, and ILUNION, their group of social enterprises, with a fully inclusive approach where the majority of the employees have a disability. Key to the success of this project was to create an ecosystem, generating synergies and collaborations with all the relevant agents.

Fundación ONCE has led workshops focused on improving women with disabilities skills to apply for jobs, with tailored made advice and guidance on the process and learning activities to know how to be prepared for a job interview.

At the project *More than able*, aimed at helping women with disabilities to prevent and identify gender violence, Fundación ONCE used a set of 11 video-tutorials and a 20-minute documentary conducted by the social educator worked with women with disabilities to prevent gender violence and to identify all those risk situations women face.

Fundación INTRAS projects<sup>63</sup>, workshops and activities in rural and local areas aim at improving the independence of women with a disability, including specific projects to address the challenges faced by women with a disability who have experienced violence. These practices promote dialogue between women in welcoming atmospheres, help women in rural areas overcoming the specific challenges they face and making the public administration aware directly from their voice, including them by helping these women to co-design and co-produce the services that are addressed to themselves and

<sup>61</sup> See <https://eige.europa.eu/publications/gender-equality-index-2017-measuring-gender-equality-european-union-2005-2015-report>, European Institute for Gender Equality (EIGE).

<sup>62</sup> See Annex I, II, III.

<sup>63</sup> See Annex IV, V, VI.



identifying their needs. As such, these projects promote a new way of working with public administrations at local level and aim at improving the life of these women through a person-centred approach where they are the protagonists and agent of change. Positively, the outcome of this projects consist in empowering these women and supporting the public administration towards achieving active inclusion in their regions.

In some countries, service providers encounter challenges derived from the families of the service users. Theotokos Foundation<sup>64</sup> brings to light how families can oppose sexual education and other intimate issues to be brought to the attention of girls or women with disabilities in Greece. In some particular cases, families need to be supported not to fear the inclusion of their family members in the community. A balance is needed between protecting them and giving them as much independence as possible to make choices by themselves. Theotokos Foundation work towards equality and empowering women and girls with a disability through dedicated group workshops and learning activities on sexual education, on getting to know their rights or focusing on taking care of themselves.

## 05.

## 5. Conclusions

Although, as the United Nations affirms, many countries still address gender and disability issues separately without focusing on the intersection between the two, there are increasingly positive initiatives.<sup>65</sup>

Women and girls keep being discriminated against for a number of reasons based on their gender in the EU and worldwide. People with disabilities still are not equal to others nor enjoy the same rights and active inclusion in society. Women and girls with a disability experience a double discrimination based on gender and on their disability that makes it twice as hard to be equal to others and hinder their access to education, their employability and their access to healthcare. Moreover, women and girls with a disability are at higher risk of experiencing violence.

EU policies addressed at combating and eradicating this discrimination prove to be at present insufficient since this discrimination remains at EU level. More efforts should be put in place to have specific policies addressed at women and girls with a disability to ensure their equal participation and active inclusion, backed up by sufficient funding and monitoring mechanisms. Sharing good practices can help guide Member States on this task.

There is still a long way to go till achieving equality. But upcoming opportunities such as the new European Disability Strategy, the Action Plan of the European Pillar of Social Rights and the Sustainable Development Goals and continuous implementation of the UN CRPD are not to be missed.

<sup>64</sup> See Annex VII

<sup>65</sup> United Nations Department of Economic and Social Affairs, *Realisation of the Sustainable Development Goals By, For and With Persons with Disability. UN Flagship Report on Disability and Development*, 2018.



## 6. Recommendations

- The **Sustainable Development Goals (SDGs)** 2030 call for an inclusion of gender mainstreaming in all policies and to pay attention to the empowerment of persons with disabilities. As such, the EU should ensure the mainstreaming of all SDGs in their policy making including gender mainstreaming and empowerment of people with disabilities, for example, by promoting co-production approaches in services addressed to them.
- The **European Disability Strategy** 2010-2020 included within its eight areas of action participation and equality. However, recent evaluations of the Strategy showed little progress had been achieved on these areas. Data collation, targets and proper use of funding programs to back up policy initiatives aimed at improving the inclusion and hence equal opportunities of women with disabilities should be put in place. This should be backed up by a monitoring mechanism reporting to the implementation of the UN CRPD by the EU, integrated in the European Pillar of Social Rights and European Semester. The future European Disability Strategy must clearly have indicators on gender, gather and collect data disaggregated by gender, age and types of disability.
- The next **European Disability Strategy** should push towards meeting the UN CRPD.
- EPR supports the **EESC recommendation on the use of funding instruments** for this matter. Structural Funds and the European Social Fund should be used as key tools to support EU Member States in promoting accessibility and non-discrimination regarding women and girls with disabilities.
- As drawn from the practices of our members and the monitored research, **measures to tackle violence against women with disabilities are urgent**. This violence is often neglected and invisible to society.
- By sharing these practices, we would like to both highlight the work delivered by our members at national level that can be extrapolated to other EU regions and bring to light the dimensions of this problematic. **We also call for concrete measures, funding and monitoring mechanisms included under the ESF+ funding programs, the European Pillar of Social Rights and the European Gender Equality Strategy 2020-2024 of the European Commission to tackle and eradicate violence against women and to support national, regional and local administrations in delivering services to help empower women with disabilities in situation of vulnerability and violence.**
- The EU should gather efforts to sign **the Council of Europe's Convention** on the prevention and combating of violence against women and domestic violence.
- Fundación ONCE's guide on **mainstreaming gender and disability in European Social Fund Programmes**<sup>66</sup> delivers practical recommendations on how to mainstream the gender perspective in initiatives to promote employment within the European Union, and to offer practitioners in all EU countries a helpful tool to include the gender approach in practise in their working methods and in the actions they carry out to foster inclusion in the labour market of persons with disabilities.

<sup>66</sup> Fundación ONCE, Guide on mainstreaming gender and disability in European Social Fund Programmes, 2019. Online source: [https://www.cermi.es/sites/default/files/docs/colecciones/%20n%C2%BA11%20\\_0.pdf](https://www.cermi.es/sites/default/files/docs/colecciones/%20n%C2%BA11%20_0.pdf)



- The EU should ensure women and girls with a disability have **equal access to mainstreamed services**.
- All **women and girls with disabilities must be supported to take their own decisions** specially in what regards any medical treatment and be respected in the reproductive autonomy.





## 7. Annexes

### 7.1 Annex I

**EPR Member: FUNDACIÓN ONCE**

**Country:** SPAIN

**Title of the practice:** Women in ON Mode

<b>Description of the project/programme</b>	
<b>Introduction</b>	<p>Women with disabilities are more likely to suffer from gender violence, 4 times more than average women, according to statistics. They may have less capacity to defend themselves, to express themselves, less credibility (especially those with mental health problems), less autonomous access to information and counselling, a higher dependency on third parties, less access to paid jobs or education, less self-esteem, fear of losing the carer they are dependent on, or less financial independence. All the aforementioned circumstances make them especially vulnerable.</p> <p>Aware of the meaning getting a job has for those women – regaining control of their lives –Inserta has been supporting women with disabilities victims of gender violence since 2017 through its employment services.</p> <p>The knowledge acquired by Inserta staff in their one-on-one interviews with jobseekers, reinforced with the collaboration with the ILUNION Social Group, not only in providing employment, but also in the piloting and testing of methodologies and protocols for the incorporation and welcome of women with disabilities victims of gender violence in the workplace, resulted in a quite consolidated project.</p> <p>All this knowledge was gathered in Inserta’s Internal Protocol of Attention. In addition, based on this experience, ILUNION published a “Guide on Attention to Female Employees Victims of Gender Violence”.</p> <p>Disability and gender violence must be taken into account as a binomial with a higher risk of exclusion when accessing the labour market, which implies adapting our services to the specific needs of those women.</p> <p>In addition, it is important to create an ecosystem, generating synergies and collaborations with all the relevant agents.</p> <p>In order to improve the services provided to women with disabilities victims of gender violence and help to fight against this social scourge, in 2019 Inserta took a step forward and submitted a specific project to the last call of the ESF Operational Programme for Social Inclusion and Social Economy, which was approved for the period 2019-2023.</p>
<b>Objectives</b>	<p>Women in ON Mode aims at fighting against gender violence, through testimonies and stories of the participants – women with disabilities victims of gender violence in Inserta’s database –, and promote their social inclusion at all levels using employment as a lever.</p>



	<p>The specific objectives are to:</p> <ul style="list-style-type: none"> <li>- Give visibility to women with disabilities victims of gender violence, through collaboration with public institutions and using technology as a channel for impact, talent management and knowledge transfer.</li> <li>- Raise awareness of social agents, inviting them to participate in projects aiming at empowering participants, so that they can become ambassadors of their group and an instrument for prevention, impact, and awareness-raising about the effects of violence.</li> <li>- Increase knowledge on the variable of gender violence among women with disabilities, through the development of new statistical sources allowing an analysis of the situation of this group.</li> <li>- Identify the specific needs of women with disabilities victims of gender violence to achieve inclusion in – or return to – the labour market through the evaluation and design of a Personal Training Plan.</li> <li>- Work on participants’ auto-determination and empowerment in their personal recovery process towards stability and control, both key to confront their lives.</li> <li>- Get them into the labour market, through the search and prospection of offers and sectors fostering and allowing work-life balance, job maintenance and professional development of women with disabilities victims of gender violence, raising awareness in the labour market about the need for a CSR commitment towards this group.</li> </ul>
<b>Time frame</b>	2019-2023
<b>Location</b>	Spain
<b>Actions and Activities</b>	<p>Initial assessment, case development and intervention, and final evaluation.</p> <ul style="list-style-type: none"> <li>- Initial Assessment: Interview to assess personal situation, social and demographic circumstances, emotional state, health, etc.). The surrounding systems (support system, health, institutional, etc.) are also assessed.</li> <li>- Case development and intervention (Recovery Cycle). The methodology includes the figure of the <i>Compasses</i>, referent professionals, trained in gender violence, who will accompany and attend the participants throughout the whole process, in an individualized way, managing and monitoring their itinerary. 26 professionals are assigned to this project all over the country.</li> </ul> <p>-</p> <p>The Recovery Cycle includes three action lines:</p> <ul style="list-style-type: none"> <li>o <u>Personal development</u>: Emotional and psychological recovery to overcome the violence cycle, taking into account several elements: psychosocial factors, emotional control, personal competences, etc. In order to promote their empowerment, they work on their personal competences (self-confidence, relations, aspirations...), as well as on their emotional intelligence so that they can take the control over their lives back. The methodology includes workshops, work in groups, etc.</li> <li>o <u>Professional development</u>: Assessment of the professional profile through interviews, adjusting expectations to the situation of the labour market. This phase is developed through workshops on digital skills, employment skills (flexibility, team work, etc.), communication, active search for</li> </ul>



	<p>employment, technical competences... Employment will be encouraged through ad hoc itineraries, based on the experience of the Inserta Training Catalogue and official professional certifications. Trainings can be either in-person, online or blended. <i>Compasses</i> have a Map of Training Resources adapted to their regional scenario, which let them derive participants, if needed, to specialized qualified care. Participants receive financial support during the training activities they participate in, in order to cover transportation, higher support needs or to facilitate family balance when having children under 6 years-old or dependent parents.</p> <ul style="list-style-type: none"> <li>○ <u>Labour mediation</u>: Identification of job offers and matching of the women with disabilities victims of gender violence according to their professional profile. The participant is guided and supported throughout the job search and the preparation for recruiting interviews, with the final goal to get a job in the open labour market or to become self-employed. Their competencies are reinforced throughout the whole process with different workshops on the key elements: active job search, job interviews, CV elaboration, digital tools for job search, etc.</li> </ul> <p>It also includes support to companies during the welcome process, through welcome guides, seminars, etc. as well as monitoring and support to participants during the incorporation to the company.</p> <p>Final Assessment: Analysis of the level of empowerment achieved.</p>
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**Results and reflections**

<p><b>Outcomes and achievements</b></p>	<p>Social Impact, Awareness Raising and Empowerment:</p> <p>Apart from the direct intervention with the participants, the project includes some awareness raising activities about gender violence and the special vulnerability of women with disabilities, as well as some activities and events aiming at empowering those women who participate in the program.</p> <p>Awareness raising and generation of new resources on gender violence:</p> <ul style="list-style-type: none"> <li>- Organization of micro-events (workshops, seminars, etc.) with relevant women who can be prescribers of our activity (teachers, local authority agents, neighbourhood associations, etc.), as well as orientation staff and other relevant professionals.</li> <li>- Launch of a blog with useful resources addressing this type of situations – owned either by the ONCE Foundation or other organizations (CERMI, FAD, etc.) –, with materials and testimonies that can help victims to overcome obstacles.</li> <li>- Creation of the “Women Council for a New Life” as a means for dissemination and awareness raising.             <ul style="list-style-type: none"> <li>- Identification of participants who will act as ambassadors for the project among those who have already completed the Recovery Cycle.</li> <li>- Development of their communication and pedagogic skills so that they can reach other women with disabilities victims of gender violence and the society with their testimonies.</li> <li>- Promoting prevention, especially among the youth.</li> </ul> </li> </ul>
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	- Encouraging reporting of violence.
<b>Results</b>	From 2017, Inserta has identified over 1800 victims of gender violence, of which more than 1300 have been oriented and/or trained and almost 350 have got a job.

## 7.2 Annex II

**FUNDACION Name of the organisation: FUNDACIÓN ONCE**

**Country:** SPAIN

**Title of the practice:** More than Able

<b>Description of the project/programme</b>	
<b>Goals</b>	Project and campaign by the aiming at helping women with disabilities to prevent and identify gender violence
<b>Location</b>	In person meeting Spain
<b>Women - activities</b>	11 video-tutorials and a 20-minute documentary, conducted by the social educator and monologist Marina Marroquí. The videos include 4 women with disabilities victims of gender violence, as well as the singer Rafael Sánchez, son of a victim of male violence.
<b>Outcomes achievements and</b>	The materials aim to prevent gender violence and to identify all those risk situations women face.

## 7.3 Annex III

**EPR Member: FUNDACIÓN ONCE**

**Country:** SPAIN

**Title of the practice:** Workshop Personal Image addressed to women with disabilities in vulnerable situation.

<b>Description of the project/programme</b>	
<b>Introduction</b>	The workshop was aimed at women with a disability with difficulties to access the labour market due to their environment, their social and familiar situation. Some of the women that enrolled in the workshop had been exposed to violence.
<b>Time frame</b>	31 hours workshop / January 22 <sup>nd</sup> and February 22 <sup>nd</sup> 2019
<b>Location</b>	Madrid, Spain
<b>Actions and Activities</b>	<ul style="list-style-type: none"> <li>• Emotional Intelligence: Self-esteem, attitude towards change and how to manage change itself. Emotional self-management.</li> <li>• Support to prepare a job interview: documentation needed, being on time, what attitude to have, verbal and nonverbal communication and personal image.</li> <li>• Looking for a job: Initial evaluation, looking for a job 2.0 and the society of information, CV 2.0, searching tools to look for a job, social media and professionals, looking for a job from your mobile phone and analysing job offers.</li> <li>• Personalised follow up to prepare a CV.</li> <li>• Individual advice to prepare job interviews.</li> </ul>



<b>Results and reflections</b>	
<b>Outcomes and achievements</b>	<p>The workshop provided the participants with advice, techniques and tools needed to feel comfortable in employment selection processes and during job interviews making a point on the importance of self-care.</p> <p>The methodology of the workshop, delivered in person in a small group and focusing on practical issues complemented by a follow up and individual advice allowed the participants to strengthen their skills for future job interviews improving their confidence to face them.</p>
<b>Results</b>	<p>The workshop was attended by 15 women with a disability with particular difficulties to Access the labour market due to their social, familiar situation being some of them victims of gender violence.</p>

## 7.4 Annex IV

**EPR Member: FUNDACIÓN INTRAS**

**Country:** SPAIN

**Title of the practice:** Study about Rural Women with disability in Castilla y Leon

<b>Description of the project/programme</b>	
<b>Goals</b>	<ol style="list-style-type: none"> <li>1.- Make a diagnosis of the current and problematic situation of women with disabilities in rural areas, mostly in populations of less than 20,000 inhabitants of the province of Valladolid.</li> <li>2.- Use the quantitative methodology - through data analysis and previous studies - and qualitative methodology - through semi-structured interviews, focus groups, narrative investigations and case studies - to analyze the triple discrimination of project participants by being a woman, have a disability and live in rural areas.</li> <li>3.- To develop a new way of working in which the public administrations, listen directly to the voice of the citizens for the decision making and the planning of social policies.</li> <li>4.- Design proposals to improve the quality of life of these women from the Administrations and entities of the third sector.</li> </ol>
<b>Time period</b>	11 months: from November 1st, 2018 to September 30th, 2019.
<b>Location</b>	<p>The geographical scope is the rural area, populations of less than 20,000 inhabitants of the province of Valladolid.</p> <p>The direct participants in the project, came from 27 municipalities.</p>
<b>Women - activities</b>	<p>Fundación INTRAS used, throughout the investigation, the participatory methodology as the focus of the study, with women being the protagonists of the work. The tools used were:</p> <ul style="list-style-type: none"> <li>• semi-structured interviews,</li> <li>• focus groups,</li> <li>• narrative investigations and</li> <li>• case studies.</li> </ul> <p>With the application of these tools, three variables have been analyzed and described: gender, disability and rural areas in matters such as training, employment, situations of discrimination, stereotypes, gender violence, leisure and free time, transport, accessibility, new technologies, existing conciliation measures, services, benefits and resources used.</p>



<p><b>Co-production empowerment</b> and</p>	<p>From a participatory approach, women with disabilities in the rural area of Valladolid become an agent of change and manage to be an active subject in the society of which they are a part.</p> <p>The tools used are developed from anonymity so that women participants can freely inform, take into account, transmit and indicate all those they consider significant.</p>
<p><b>Results and reflections</b></p>	
<p><b>Outcomes achievements</b> and</p>	<ol style="list-style-type: none"> <li>1. 51 women between 29 and 92 years old with physical, intellectual and mental illness disabilities participated in the research work.</li> <li>2. 25 semi-structured interviews were conducted.</li> <li>3. 7 focus groups were carried out, one of these was developed with professionals from the Public Administration and professionals from social entities that work in rural areas.</li> <li>4. In the Prize of Stories “Words of Women. First Prize of biographical stories of rural women with disabilities living in villages of Valladolid ”10 women participated. These 10 stories were analyzed through the narrative research methodology.</li> <li>5. Three case studies were conducted.</li> <li>6. In this research work participated 11 Social Action Centers (CEAS) of the province of Valladolid, the Personal Autonomy Promotion Team (EPAP) of Valladolid, and the following 10 entities implemented in the territory: ASPAYM Castilla y León , Youth Council of Castilla y León, Faculty of Education and Social Work (FEyTS - UVa), SER Chain, El Sombrerero, La Boa and Elephant Association, FECLEM, El Puente Mental Health Association, Federation of Deaf People of Castilla y León (FAPSCL), People and People Voice Media Foundation.</li> </ol>
<p><b>Challenges</b></p>	<p>The most relevant challenges we have faced are:</p> <ol style="list-style-type: none"> <li>1. The difficulty in creating self-help and mutual support groups, with the ultimate goal of building self-directed actions and exchange spaces.</li> <li>2. How to enhance the participation of women with disabilities in the rural context for decision-making in their own localities.</li> <li>3. Sensitised of the population, the entrepreneurs and the public administrations on the need to develop supports in the labor scope and in the transport, in addition to creating inclusive leisure for the women.</li> </ol>
<p><b>Lessons learned</b></p>	<p>The need to establish synergies and collaborations with the Social Services of the province of Valladolid, such as the Social Action Centers (CEAS) of the province or the Personal Autonomy Promotion Teams (EPAP); To be able to develop studies like this in coordination with the professionals of the Province of Valladolid and different social entities implanted in the territory is essential.</p>
<p><b>Future development</b></p>	<p>Concerning the methodology developed in the study, it is intended:</p>





	<p>1.- Extend the geographical approach to the entire region of Castilla y León.</p> <p>2.- Develop exhaustive research on specific aspects such as family reconciliation, gender violence and the role of the family in women with disabilities in rural areas.</p>
<b>Information about the context</b>	
<b>Legislation and policy/Recommendations</b>	<p>This Good Practice is carried out thanks to a grant from the Province of Valladolid, under the framework of the V Provincial Plan for Equal Opportunities and Against Gender Violence in the province of Valladolid.</p> <ul style="list-style-type: none"> <li>- Define concrete actions to bring the political decisions and management of public affairs to the citizens.</li> <li>- Implement specific committees, formed by administration, social entities, companies and citizens, that work in a network and in a coordinated way.</li> <li>- Develop rural areas by increasing services, resources, benefits, benefits and employment options for the population.</li> </ul>

## 7.5 Annex V

**Name of the organisation:** FUNDACIÓN INTRAS

**Country:** SPAIN

**Title of the practice:** Improvement Circle in Castilla y Leon

<b>Description of the project/programme</b>	
<b>Goals</b>	<p>Main objectives of the program:</p> <ul style="list-style-type: none"> <li>- Promote the empowerment of women with disabilities in decision-making in their daily lives.</li> <li>- Make visible the role of these women in society and the fight for gender equality.</li> <li>- Encourage participation in feminist activities organized from other women's organizations and associations.</li> <li>- Provide participants with a historical perspective on the role of women in Western society and its evolution over the History.</li> <li>- Provide women with the necessary tools to express their wishes and needs freely and independently.</li> </ul>
<b>Time period</b>	The "Women's Circle" began in 2017 and continues today. Weekly sessions of one and a half hours are held.
<b>Location</b>	The program was developed at the Day Center of Toro (Zamora). The people to whom our program is directed have certain characteristics: Women with an associated vulnerability (physical or mental disability) who reside in the town of Toro and around or are beneficiaries of the resources themselves.
<b>Women - activities</b>	<p>The Women's Circle consists of holding weekly meetings developed in a pleasant, intimate and welcoming environment that facilitates dialogue and build trust.</p> <p>The first sessions were dedicated to the creation of an optimal environment through group presentation dynamics and group</p>



	<p>awareness creation. Participation rules were established from within the Women's Circle itself, as well as the rules of access of new participants. It is the group that fixes these issues and accepts or not the incorporation of new members.</p> <p>The group has evolved from an initial presentation to a climate of trust among the participants, since they deal with intimate issues that may have emotional content. For this it is necessary that the members are comfortable and breathe an atmosphere of tolerance and respect for individual opinions.</p> <p>The general content scheme is closed in groups and evolves with flexibility throughout the activity, with special attention to the daily gender issues (news, legislative advances, opinion currents ...).</p> <p>The topics that are mainly addressed are the following:</p> <ul style="list-style-type: none"> <li>• Gender equality: gender roles and stereotypes.</li> <li>• Role of women throughout history: invisibilization of traditional gender and universal suffrage.</li> <li>• Role of women in today's society. Parity, visibility and real equality.</li> <li>• Equality in the world of culture and science: great creators' invisible by history.</li> <li>• Motherhood: a personal and free choice right.</li> <li>• Equality in the domestic sphere: equal distribution of domestic tasks.</li> <li>• Equality in education: university in women.</li> <li>• Equality in the workplace: gender pay gap and glass roof.</li> <li>• Equality as a right in the recovery of people with disabilities.</li> </ul>
<p><b>Results and reflections</b></p>	
<p><b>Outcomes and achievements</b></p>	<p>Over the two years of activity 20 women began their participation and there are currently 12 women who regularly attend the sessions.</p> <p>There are improvements in the following aspects:</p> <ul style="list-style-type: none"> <li>- Social skills</li> <li>- Leadership</li> <li>- Problem resolution</li> <li>- Improvement in decision making</li> <li>- Job search techniques</li> </ul> <p>About this last one, we can highlight as achievement the labor insertion of several women who at the beginning of the program had not found a job and of those who despite the difficulties they managed to maintain it.</p>
<p><b>Challenges</b></p>	<p>The program has been very well accepted from the beginning by all participants. Initially, the communication skills between them were not so good, due to new faces, a new format and in many cases, traumatic personal situations of each. They are women belonging to rural and urban areas, but with a common denominator: they had rarely felt heard and in some cases had silently suffered an exclusion because they were women in various areas of life, work, partner ...</p> <p>As the program progressed the relationship between them improved, which facilitated communication and expression of thoughts and emotions. There were really emotional moments in which the feeling of group identity that had been achieved over the days had its main role and it was the links created between them that led to help and support in the most complicated moments.</p>
<p><b>Lessons learned</b></p>	<p>It is interesting to give continuity to this action by implementing it in other similar devices by expanding the participation group, (women who have or not disabilities, women victims of gender violence)</p>



	In the future, a “self-managed” organization system can be incorporated, giving the Circle participants greater autonomy.
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## 7.6 Annex VI

**Name of the organisation:** FUNDACIÓN INTRAS

**Country:** SPAIN

**Title of the practice:** Carehomes for Women suffering Gender Violence in CyL

<b>Description of the project/programme</b>	
<b>Goals</b>	<p>The main objectives of the program are:</p> <ul style="list-style-type: none"> <li>• Offer comprehensive care: physical, psychological, social, training and employment; as well as attention to their children</li> <li>• Provide a residential resource that has the necessary security and in which it receives training and support of those necessary skills to maintain optimal levels of autonomy and independence, which allow it to create a good life project.</li> <li>• Connect women with the necessary resources for each case: health services and the public network of Mental Health, Social Services and community resources, legal resources, employment or training.</li> <li>• Residential plans, welfare, social, training and employment alternatives that allow women to access standardized resources.</li> </ul>
<b>Time period</b>	<p>Since 2013, this model of care homes supported 13 women. During 2013 and 2014 Fundación INTRAS carried out a pilot experience together with the Regional Ministry of Family and Equal Opportunities in the intervention with 5 cases of women with mental illness victims of gender violence. The program is currently ongoing.</p>
<b>Location</b>	<p>It has been raised, initially, for the provinces of Zamora and Valladolid (in Castilla y León), and it has been developed in Zamora and Toro (Zamora) at the moment. Attention is given to referrals from all provinces of Castilla and León.</p>
<b>Women - activities</b>	<p>It is a housing and care program aimed to women with disabilities due to mental illness and victims of gender violence and their children. It has a maximum duration of 6 revisable months, and extendable up to a maximum of 18 months. To Access, it is necessary to have a diagnosis of mental illness and / or disability certificate for mental illness and be a victim of gender violence.</p> <p>The action is moving towards recovery in all those aspects in which violence has had an impact, the creation of a life project as well as addressing the risk situation.</p> <p>The main activities of the program are.</p> <ol style="list-style-type: none"> <li>1. Access. Some cases are sent by the Women's Sections of the Regional Ministry of Social Services, collecting information about women in order to analyze the suitability and convenience of participation in the program. Thanks to a face-to-face interview with her, the professional can provide information and find the best resource.</li> <li>2. Once the woman joins the program, an Individualized Care Program is carried with her based on their own needs and the evaluation in all areas of the person (psychological, physical, social, legal, educational, occupational and labor) to</li> </ol>



	<p>carry out a comprehensive and immediate approach with the support of different professionals.</p> <p>3. The activities are separated in the following areas of intervention:</p> <ul style="list-style-type: none"> <li>• Security plan: to guarantee their safety and the safety of their children, if any. So that they can identify risk situations or emergency, and know how to act in this case. A mobile phone is provided with which they can locate professionals in this case. Action guidelines are also provided in case of emergency (contact neighbors and / or relatives, call 112 ...)</li> <li>• Accommodation, meals and together lives</li> <li>• The incorporation is carried out in a supervised flat, attended by a multidisciplinary team that offers diverse support according to the situation of each woman:             <ul style="list-style-type: none"> <li>• Support in carrying out daily activities and life habits</li> <li>• Support for the correct organization of housing as well as intervention guidelines for adequate coexistence and problem solving</li> <li>• Support for social inclusion and independent living.</li> <li>• Monitoring the economic self-management in those cases that you need</li> <li>• Support in the follow-up of medical consultations with both your primary physician, and in regard to specialized consultations, as well as monitoring of medical treatments</li> </ul> </li> <li>• Psychological intervention: individual and group, providing personalized emotional support, information and advice, for the understanding of the current situation, as well as for adaptation to therapeutic housing and conflict management. Personal recovery is promoted by working the responsibility of each person in their own personal recovery process.</li> <li>• Women's Circle: Participation in this activity provided by the Day Center.</li> <li>• Social assistance: Individual support in carrying out bureaucratic procedures. Support for the use of daily environmental resources and creation of contact network. All this support is provided to maintain communication with the family and also for the search of residential alternatives when the person decides to finish the program.</li> <li>• Legal and legal attention</li> <li>• Work and training support</li> </ul>
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<p><b>Results and reflections</b></p>	
<p><b>Outcomes and achievements</b></p>	<p>From 2013 to 2019, 13 women victims of gender violence who had a diagnosis of mental illness participated in the programme (10 of them were Spanish and 3 out of Spain). 10 of these women had recognized a degree of disability, and another of the participants has obtained recognition during their participation in it.</p> <p>The average time of permanence is 9 months and a half, although there is significant variation between the various cases.</p> <p>At the time of incorporation into the housing resource, women were inactive or unemployed. Participation in the program has allowed women to obtain different types of training and access to the labor market; 6 of them have obtained employment during their participation in the program, of which 2 have maintained it more than a year after their exit from the program.</p> <p>Attention has been given to women derived from different provinces of Castile and León, most of them from rural areas.</p>



<b>Challenges</b>	<p>The main challenges of this program focus on the double vulnerability of women with disabilities due to mental illness and victims of gender violence. This vulnerability is accentuated by discrimination in access to media, since, in the mental health resources there are no specific professionals available for intervention with victims of violence, and in the specific resources of gender violence do not allow access to women with a diagnosis of serious mental illness.</p> <p>Another of the big challenges is the difficulty of providing support to women once they end their participation in the program if they do not have a disability certification.</p> <p>On the other hand, the problem of women who, due to a situation of lived violence, has serious difficulties to create a satisfactory life project, since they are far from their social and family environment.</p>
<b>Lessons learned</b>	<p>One of the success factors of the program is the specificity of care for women with disabilities due to mental illness and victims of gender violence. Although this type of violence shows a higher prevalence in women with disabilities due to mental illness than in the general population, there is a lack of programs that intervene in these situations in a particular way.</p> <p>The program specifically addresses this double vulnerability in order to provide the necessary support to women. Having a resource with safe accommodation and concrete support that addresses violence and disability is also essential for women to initiate a recovery of aspects of their lives in which violence has reached.</p> <p>Also, access to training and employment is, together with accommodation, another fundamental part of creating a successful life project.</p> <p>In order to increase the success of the program, it would be necessary to have the support of the administrations to be able to give continuity in the supports, once the stay in the accommodation program ends, and, for as long as the person needs to achieve greater autonomy and independence.</p>

## 7.7 Annex VII

**EPR Member: Theotokos Foundation**

**Country:** GREECE

**Title of the practice:** Promoting equality in services through concrete interventions

<b>Description of the project/programme</b>	
<b>Introduction</b>	Concrete interventions addressed to women and girls with a disability within the services provided by Theotokos Foundation
<b>Objectives</b>	Promoting equality
<b>Location</b>	Theotokos, Athens, Greece
<b>Actions and Activities</b>	<ul style="list-style-type: none"> <li>• Consultation for teenage girls and young women with disabilities on issues of interest such us: how to take care of themselves, take care of menstruation, of their hair, dress according to their age and according to the situation, make-up tips.</li> <li>• Sex education groups. Our experts consult our young girls and women on issues relating with sexuality including emotional relations and responsibilities.</li> </ul>



	<ul style="list-style-type: none"> <li>• Such services are difficult for the parents of the service users to deal with because they are considered taboo.</li> <li>• Self-advocacy groups where they learn to stand up for their rights.</li> <li>• Group or individual discussions on rights and equality.</li> <li>• Consultation for families when it comes to our attention discrimination issues.</li> <li>• Information and consultation to employers, so that they hire women as well as men.</li> </ul>
<b>Results and reflections</b>	
<b>Outcomes and achievements</b>	Better informed women and girl with a disability about their rights, about how to take good care of themselves, about sexual education. Working to obtain family support.
<b>Challenges</b>	Some issues addressed within this practice are still considered taboo i.e. Groups on sexual education. On these regards, it is challenging to have the support of the families of the users.
<b>Results</b>	The practice can contribute to break these taboos mentioned and help women and girls with a disability to be informed and more empowered in their environment.





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