DRAFT REPORT

on women with disabilities
(2013/2065(INI))

Committee on Women’s Rights and Gender Equality

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MOTION FOR A EUROPEAN PARLIAMENT RESOLUTION

on women with disabilities

(2013/2065(INI))

The European Parliament,

– having regard to the Universal Declaration of Human Rights, the European Convention on Human Rights, the Charter of Fundamental Rights of the European Union, the Universal Declaration of Human Rights and the European Convention on Human Rights,


– having regard to the Community Charter of the Social Fundamental Rights of Workers2,

– having regard to Articles 10, 19 and 168 of the Treaty on the Functioning of the European Union,


– having regard to the Commission proposal for a Council Directive on implementing the principle of equal treatment between persons irrespective of religion or belief, disability, age or sexual orientation (COM(2008)0426) and Parliament’s position of 2 April 2009 thereon4,


– having regard to the Commission communication of 16 December 2010 entitled ‘The European Platform against Poverty and Social Exclusion: A European framework for social and territorial cohesion’ (COM(2010)0758),


4 OJ C 137 E, 27.5.2010, p. 68.
– having regard to Council Recommendation 98/376/EC of 4 June 1998 on a parking card for people with disabilities¹,

– having regard to the Council Conclusions on ‘Promoting labour market inclusion – Recovering from the crisis and preparing for the post-2010 Lisbon Agenda’ of 30 November 2009,


– having regard to the ruling of the European Court of Justice on case C 13/05, regarding Directive 2000/78/EC – Equal treatment in employment and occupation – Concept of disability²,

– having regard to its resolution of 17 June 1988 on sign languages for deaf people³,

– having regard to its resolution of 26 May 1989 on women and disability⁴,

– having regard to its resolution of 16 September 1992 on the rights of mentally disabled people⁵,

– having regard to its resolution of 14 December 1995 on the human rights of disabled people⁶,

– having regard to its resolution of 9 May 1996 on the rights of people with autism⁷,

– having regard to its resolution of 13 December 1996 on ‘Parking card for disabled people – rights of disabled people’⁸,

– having regard to its resolution of 11 April 1997 on equality of opportunity for people with disabilities⁹,

– having regard to its resolution of 3 September 2003 on the Commission Communication entitled ‘Towards a United Nations legally binding instrument to promote and protect the

⁵ OJ C 284, 2.11.1992, p. 49.
⁷ OJ C 152, 27.5.1996, p. 87.
rights and dignity of persons with disabilities’ (COM(2003)0016),

- having regard to its resolution of 24 April 2009 on the United Nations Convention on the Rights of Persons with Disabilities and the Optional Protocol thereto,

- having regard to its resolution of 25 October 2011 on mobility and inclusion of people with disabilities and the European Disability Strategy 2010-2020,

- having regard to its resolution of 8 March 2011 on reducing health inequalities in the EU,

A. whereas 80 million people with disabilities living in the European Union are in significant need of an accessible and unprejudiced environment;

B. whereas the number of elderly is increasing, which means that the number of people with disabilities will increase accordingly;

C. whereas one of the European Union’s founding principles is the full inclusion of all its citizens, which means that all persons with disabilities, women included, must be given fair and equal possibilities to participate in the social and economic life of the community;

D. whereas discriminations can lead to social isolation and insulation;

E. whereas the basis for any association of democratic states is: to facilitate the participation of all citizens, whether female or male, in the democratic processes (especially elections); to create, where it is lacking, the infrastructure for such participation; and, therefore, to promote the inclusion of women with disabilities;

F. whereas equal access of women with disabilities to quality healthcare services must be ensured, i.a. by improving the vocational training and life-long learning of medical staff with regard to their specific needs;

G. whereas the representation in the public sphere of partnership, sexuality and maternity as experienced by women with disabilities contributes to efforts to combat prejudice and misinformation; whereas such representations can be made in a variety of ways, in particular using artistic and cultural means and the media;

H. whereas women with disabilities are particularly vulnerable to sexual violence; whereas specific measures must be taken to tackle this inexcusable phenomenon;

I. whereas women with disabilities are exposed to gender stereotypes that need to be tackled;

J. whereas it is the responsibility of public authorities to provide women with disabilities with an environment that is adapted in such ways that they can fully assume their rights

\[1\] OJ C 76 E, 25.3.2004, p. 231.
\[2\] Text adopted, P6_TA(2009)0334
\[3\] Text adopted, P7_TA(2011)0453
\[4\] Text adopted, P7_TA(2011)0081.
and responsibilities, and make decisions for themselves, on equal footing with people that do not suffer from any impairment;

K. whereas women with disabilities can only enjoy equal rights if gender justice is realised, and if state administrations are as accessible to women with disabilities as to persons without any impairment;

L. whereas the community of people suffering from one or more impairments is extremely heterogeneous and must be treated accordingly;

M. whereas women with disabilities must be given full access to education and labour markets in order that they may participate actively in the social and economic life of the community in accordance with their aptitudes and talents, which must be encouraged, especially in education and the labour market;

N. whereas women with disabilities were at great risk of poverty already before the crisis, and whereas their inclusion in society, and especially in the labour market, should be given priority among public policies;

1. Calls for targets to be set for the inclusion of all EU citizens, regardless of any physical impairments;

2. Urges those Members States that have not yet ratified the UN Convention on the Rights of People with Disabilities and its Optional Protocol to do so in order that it may be fully implemented;

3. Recalls that the inclusion and participation of women with disabilities can only be achieved if their movement in a society unhindered by barriers is facilitated, and calls for efforts to that end;

4. Insists that inclusion presupposes that stereotypes are countered with positive images and cultural expressions, in particular depictions of disabilities in the public sphere, since it is exactly this area that is trailing behind;

5. Proposes that, in the sphere of housing, architectural and other measures be taken to hasten a positive shift from ‘design for special needs’ to ‘integral and inclusive design for all citizens’;

6. Points out that accessibility to the internet must also be ensured (e.g. readability of all public websites for people with visual impairment), and expresses its concern that the accessibility of citizens to government agencies is not yet fully ensured; welcomes, therefore, the Commission Proposal for a Directive on the accessibility of public sector bodies’ websites;

7. Stresses that democratic participation is part of the fundamental and civil rights of women with disabilities and must be facilitated; calls, therefore, on the Member States and on all relevant public authorities to provide adequately adapted facilities;

8. Considers that women with disabilities have the right to decide, as far as possible, over
their own lives, and highlights the fact that this right should also be promoted in specialised institutions; stresses that personal assistance can be a means of autonomous living and should therefore be encouraged;

9. Notes that there is a need in the medical sector for specific training on the issue of mental illness/disabilities;

10. Notes that the various steps in a woman’s life – pregnancy being one – entail specific challenges which have to be dealt with, and that when women with disabilities do so they should enjoy the same rights and opportunities offered women without disabilities;

11. Underlines that women with disabilities must be allowed to enjoy their sexuality as freely as people without impairments, and considers that women with disabilities must be able to live and fulfil their wish to have children, as women without disabilities do;

12. Considers it vital for women with disabilities to have complete access to medical care that meets their particular needs, including gynaecological consultation, also regarding family planning, and adapted support during pregnancy;

13. Points out the importance of eradicating prejudice and encouraging social acceptance;

14. Highlights the necessity to protect women with disabilities living in care homes and mental hospitals from sexual assault and other forms of physical mistreatment, and points with concern to the lack of data on this alarming phenomenon; asks, therefore, the Member States to investigate how pervasive this problem is, collect the relevant data and take the appropriate measures to tackle it;

15. Proposes, therefore, the introduction of trial procedures specifically tailored to meet the needs of women with disabilities, including the provision of NGO assistance; underscores that no barriers may hinder the access of women with disabilities to legal recourse;

16. Stresses that any sterilisation agreement entered into by a woman with disabilities must be examined by an impartial third party charged with verifying that the decision was reached fairly and, in the absence of severe medical indications, without enforcement;

17. Calls on the Member States to facilitate access to education and the labour market for women with disabilities, and highlights that particular talents, views and experiences can enrich working environments considerably;

18. Notes that mobility within the EU should be open for women with disabilities;

19. Urges the Member States to take adequate measures to prevent women with disabilities from slipping into poverty, and to guarantee that they have access to social and health services;

20. Asks the Commission and the Member States to develop large-scale awareness raising campaigns to make women with disabilities more visible, and highlights the valuable role that mass media and the internet have to play in this regard;

21. Urges the Commission, in conducting the mid-term review of its European Disability
Strategy 2010-2020 and elaborating the List of Actions 2015-2020 relating thereto, to develop a more gender-sensitive approach;

22. Invites the Member States to support voluntary initiatives supporting diversity;

23. Stresses that diversity enriches society;

24. Notes that human dignity is inviolable;

25. Instructs its President to forward this resolution to the Council and the Commission, and to the Council of Europe and the Secretary-General of the United Nations.
EXPLANATORY STATEMENT

Women with disabilities are not only persons who are not capable of doing particular things, but most of all they are women, most of all they are human beings. When talking about them, we have to keep in mind that we are talking about citizens, female citizens, and cannot be defined by their disabilities, in fact, they do not want to. Every day, they face the same challenges and opportunities as other women; they are friends, daughters, mothers, wives and employees. They have various roles to endorse, as every woman does. They are talented in multitudinous ways, skilled and enrich our society, which gains depth in diversity. It is crucial to consider this positive contribution, appreciate and promote it, and ensure that these women’s life plans are equally heard, equally get the chance of accomplishment, just as those of women without disabilities.

Just as their fellow females, women with disabilities should have a guaranteed right to lead a life characterised by personal decisions and ideas. In order to facilitate this, social barriers need to be reduced and a positive awareness of diversity needs to be created. Women with disabilities can participate in social life, on the personal as well as the overall level, with various different (complementary) measures: architectural, content and electronic accessibility, equal access to education and working environment, non-discriminatory handling of female sexuality and maternity.

The changes and challenges of female life stages are of special importance: childhood, adolescence, discovery of their own sexuality, maternity, menopause and older age.

In this context severe attention should be paid to childhood and adolescence of women with disabilities, because in this context it is possible to lay the foundation for a great number of positive developments in adulthood. The establishment of coeducation clearly to endorse and to facilitate, decrease social barriers and increase confidence. It is fundamental to broach the issue of violence and exclusion in language and media in schools to help children and young adults obtain a fair and equality-based language.

It is proven that women with disabilities are at greater risk to experience violence than other women; in patriarchy orientated societies the risk increases explicitly. Violence can manifest itself in various forms: forced sexual acts and rape, forced assignment to care facilities, lock up, intrusions in private spheres, forced sterilisation, forced contraception, forced abortion (to name only a few examples).

In general the involvement of people with disabilities and NGOs in the creation of new norms should become standard procedure, because it is the only way to act ‘with’ people with disabilities and not ‘on’ them. Inclusion means to be able to live freely in a society, to contribute to it; it is imperative to maintain and guarantee minimum standards in the areas of citizens’ rights and human rights. Therefore a clear and non-discriminatory definition of disability is fundamental, the use of the definition of the UN-Convention of disabilities is highly recommended.

It is to be stated, that women with disabilities are defined by multiple factors, disability being only one of them; they have to be treated as equal and fully adequate citizens and persons.
Quite the opposite happens in the areas of culture and media, concerning the fact that women with disabilities are rarely featured and that such featuring would help to break down mental barriers and limits.

Viewing disability as a deficit is not accurate, but leads to an exclusive way of thinking that should be prevented. Diversity is the base of any modern society; it can and should be aspired.

In 2002 38% of the people with a disability (aged 16-34) have earned an income (non-disabled people: 64%), today in 2013 there are still not enough opportunities for women with disabilities to partake in the labour market. It is extremely important to enable every woman with a disability who can work to carry out her plan to gain independence and be able to start her own career.

Due to multiple overlaying discrimination women with disabilities are often in a considerably worse situation than women without disabilities. This kind of unequal treatment has to be banished, especially considering that a combinational discussion of discrimination thematic is essential. A debate on the topic of women with disabilities can and should not be administered without considering gender mainstreaming and gender equality. Concerning this connection the effects of multiple discrimination are decreased and consciousness is raised. In general a special focus should be placed on the elimination of stereotypes and prejudices to understand that the development of a culture of difference and diversity leads to great societal advantages.

Especially in the context of support to developing countries the needs and requirements of people with disabilities have to be taken into account, because often even the respect for basic human rights is lacking. 80 % of people with disabilities are living in developing countries, which show the need for action. Women with disabilities in developing countries are facing unique obstacles which often lead to structural violence.

The problem of structural violence is to be taken in consideration separately and constitutes an area of high influence of the European Union politics: On the European level of standard-setting legal work it is possible to fight structural violence against women with disabilities by using ‘soft instruments’ such as training courses, initiatives to raise consciousness and information campaigns in general to prohibit the expansion of prejudices and to increase the understanding of the personal biographies of women with disabilities.

It is imperative to promptly implement the UN Convention on the rights of persons with disabilities to make the guaranteed rights of people with disabilities reality.

Finally the work of NGOs concerning women with disabilities and their importance for state and civil society is to be emphasised.

We are facing the challenge to actively include women with disabilities in society and enable them to participate on equal terms. 15 % of the European population consists of persons with disabilities; one in four Europeans has a family member with a disability. These figures show the importance of acting up to our own high expectations and create an environment friendly to every citizen in the European Union on equal terms.