

Disability Inclusion: Women

"I think the outside world does not really understand what the real difficulty is for women with a disability. I repeat again and again, for women with disability it is really hard to live, so please include us"¹

Key facts

- Up to 20% of women globally have a disability.²
- Women and girls with a disability face triple discrimination, being female, having a disability and being among the poorest of the poor.³
- A significant majority of girls with a disability in developing countries remain illiterate.⁴
- Women with a disability are 2 to 3 times more likely to be victims of physical and sexual abuse than women without a disability.⁵
- Girls and women frequently act as caregiver when there is a family member with a disability, and can be denied access to education and livelihood opportunities as a result.
- When women with a disability are engaged in paid work, they tend to earn less than women without a disability.

Reasons for disability inclusion of women in development programs

- Women and girls with a disability frequently do not actively participate in gender and development programs leaving their perspective and voice unheard.
- Development practices that intentionally or unintentionally exclude people with a disability, coupled with gender-biased practices, reinforce this invisibility and marginalisation.
- Childhood barriers for girls to education and social inclusion leave women with a disability with few viable and meaningful work choices later in life.
- Poverty, gender-based violence and barriers to reproductive health care affect women with a disability more than those without a disability. This further reinforces the need for women and gender programs to incorporate a disability perspective.

How to include women with a disability in development programs

Currently, very little gender-specific work is inclusive of women with a disability. There is a need for organisations working in the field of women and gender to better understand how disability is experienced. The information in this resource is relevant for both women-specific activities along with gender programs.

The following principles, which adhere to a human-rights approach to disability, are used to demonstrate inclusion of people with a disability in all development programs and sectors.

Awareness of disability and its implications

Participation and active involvement of people with a disability

Comprehensive accessibility through addressing physical, communication, policy and attitudinal barriers

Twin track identifying disability specific actions combined with mainstream approaches

Awareness

- Identify the number of people with a disability within the community. This information can be gathered, for example, through meeting local people with a disability and DPOs, census data, household surveys, Community-Based Rehabilitation (CBR) and disability services and facilities for inclusive education.
- Collect information on types of disabilities and barriers experienced.
- Highlight the contribution and potential of women with a disability.
- Deliver awareness-raising activities on the experiences and capacity of women with a disability.
- Create opportunities for women with a disability to educate their communities about their rights, contribution and participation requirements in order to improve broader community inclusion.
- Use media and promotion campaigns to present information about women with a disability and their capacity to play an active role in programs.
- Work with men and their capacity to promote the rights and inclusion of women with a disability in gender programs.

Participation

- Identify existing barriers in the community for women and girls with a disability and advocate for greater inclusion.

- Involve women and girls with a disability in all program stages to ensure their perspectives are taken into consideration.
- Allocate a budget to cover travel and participation expenses along with attendance time for women with a disability and DPOs to actively be involved in consultations.
- Ensure the needs of women with a disability are specifically noted as they may differ from the needs of those without a disability.
- When working with DPOs, ensure gender specific organisations and women with a disability are represented. (Some DPOs will only have men in leadership positions.)
- Explore opportunities for women with a disability to play an active role in consultation and steering groups.
- Engage women with a disability as staff, team members, consultants and evaluators within programs.

Comprehensive accessibility

Comprehensive accessibility = physical, communication, policy and attitudinal access

- Identify the preferred communication mode for individuals with a disability. Note that not all people who are blind will have been taught Braille, likewise, not all individuals who are Deaf or hard of hearing will have sign language skills.
- Be prepared to source alternative communication options including large print, Braille, pictorial, audio and sign language based on individual requirements. These may be arranged through local partners, inclusive education services, CBR and disability organisations.
- Use accessible venues for consultations and program delivery.
- Ensure communication materials are in accessible formats including large print, Braille, pictorial, audio and plain language.
- Be aware that many girls with a disability are unable to access education and may need information presented in formats compatible with their level of literacy and type of disability.
- Provide accessible transport to women with a disability to ensure access to consultations and programs.
- Be aware of and challenge legal and institutional barriers for women with a disability.

- Use international conventions and local laws to highlight the rights of women with a disability.
- Take into consideration financial barriers faced by women with a disability which may limit their participation in activities.
- Consider women who are caregivers for a family member with a disability as such commitments may impact on their availability to participate in programs.
- Address attitudinal barriers in order to combat negative perceptions of cause of impairment and capacity of women with a disability.

“I can say that most women with disability [here] are embarrassed and feel ashamed to go in public and never join in the social life”.⁶

Twin track

Twin track enables full inclusion through mainstream access working alongside disability specific supports

Mainstream	Disability specific
Hold meetings in accessible venues.	Raise awareness among local community members on strategies to include women and girls with a disability.
Ensure all programs are reflective of the whole community which includes up to 20% of women with a disability.	Identify disability-related barriers as early as possible and advocate for inclusive programs and facilities.
Advocate for laws and policies to call for disability inclusion in all gender and women’s programs.	Be mindful that there is no one-size solution. All disability groups will have unique requirements, and even people with the one disability will manage their impairment differently.
Deliver disability awareness training for program staff and all community members to build a culture of support and inclusion.	Establish a budget line in programs for disability-specific interventions such as adapted sewing machines in a livelihood project or transport arrangements for women’s group meetings.
Use international conventions and treaties in advocacy of the rights of all people including those with a disability.	
Promote successful examples of women with a disability in gender programs.	

Collect data on women with a disability including age and disability type alongside all other baseline data.	Hold specific consultation and monitoring sessions with women with a disability as they may not have the confidence to speak up in a larger group.
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Case Study: Triple jeopardy: gender-based violence, disability, rights violations and access to related services among women in Cambodia

IWDA

Summary of program

This two-year participatory action research investigates experiences of gender-based violence (GBV) among women with a disability in Cambodia, assesses levels of inclusion in related policies and programs, and explores barriers to and facilitators of access to existing programs and supports. The research informs the development and piloting of low-cost training and inclusion tools appropriate to the Cambodian context. Funded by AusAID, the project is a partnership between International Women's Development Agency, Cambodian women's organisation Banteay Srei (BS), the Cambodian Disabled People's Organisation (CDPO), CBM Australia/Nossal Institute for Global Health's Partnership for Disability Inclusive Development, and Monash University.

How disability has been included

Australian disability and gender focused INGOs had long-term partner organisations in Cambodia and collaborated in this research. The involvement of CDPO and BS as research partners ensured that disability and gender were integrated in the research plan and methodology. The Principal Investigator was an academic with global experience and networks regarding GBV including deep experience in developing ethics frameworks and conducting sensitive research in developing contexts. This helped ensure that the specific interests and potential vulnerabilities of women with a disability were translated into the research protocols. This was central to the integrity of the research given the evidence that women with a disability experience multiple disadvantages resulting from the interplay between gender, disability and poverty, and that disability markedly increases GBV risk, and is a potential outcome of violence. The research approach recognized that the interests of women with a disability are not well represented by women's organisations and disabled people's organizations (DPOs); women with a disability are less likely to be leaders or decision-makers of DPOs, impacting on organizational priorities, particular disability related needs aren't always well reflected in the priorities of women's organisations, which often focus on priorities shared by all women. The research approach used a number of strategies to address this. Most fundamentally, women with a disability conducted research. Researchers worked in pairs, to maximize the safety of researchers and increase understanding between the CDPO field researchers (who were women with lived experience of disability) and the Banteay Srei field researchers (women with expertise in GBV) about the overlapping issues of GBV and disability.

Reflection discussion documented insights of field researchers (who had spent over six months conducting the research), about how to improve the situation for women with a disability who experience violence. The involvement of Australian partner organisations with expertise in disability and gender ensured that the research was grounded in a wider policy and research context. Wherever possible opportunities were provided for women with a disability and female carers of girls with a disability to participate as research implementers, tool developers, and training facilitators. Participatory approaches were used for data analysis. Access was a core criteria for determining office location, training and workshop venues.

Lessons learned

Including women's organisations and DPOs as central players helps ensure disability

perspectives and gender is central to planning and implementation. Working from a starting point of inclusion ensures interests of people with a disability and women are considered and heightens sensitivity to issues of marginalisation and disadvantage. Involving a woman with a disability in a professional research role shifts the focus to her capacities. Organisational sensitivity (of CDPO to gender and BS to disability) was enhanced, which will have impacts beyond the research project. Staff not involved in the research have found ways to incorporate issues for women with a disability in their work as a result of increased awareness. Limited evidence about disability in developing contexts means that well-conceived research is likely to attract funding and make a significant contribution.

Checklist for disability inclusion of women in development programs

- Have women with a disability been consulted in the needs analysis?
- Does the project provide an analysis at baseline of their situation, needs and priorities?
- Have you collected baseline data on women with a disability which you can track throughout the project?
- Is there budget allocation to cover participation expenses and attendance time for consultations with women with a disability and DPOs?
- Has budget been dedicated for the inclusion of women with a disability within the project?
- Have program staff received relevant training so as to ensure awareness and a commitment to the rights and capacity of women with a disability?
- Are women with a disability part of the project team or advisory group?
- Are you working in partnership with organisations that represent women with a disability?
- Do women with a disability have the choice/opportunity to be involved as active participants in decision-making processes, including speaking at meetings?
- Are women with a disability able to have equitable access to services?
- Have women with a disability participated in the project processes, including monitoring and evaluation?
- Are women with a disability equally benefiting from the project, and if not, what is being done to address this inequity?
- Are mechanisms in place to record and address barriers to program access for women with a disability?
- Did the program alter power relations or enhance the capacity of women with a disability?⁷
- Do program documents and reports reflect how women with a disability participated in and benefited from the program in their own words?

Useful resources for disability inclusion of women in development programs

Pacific Sisters with Disabilities: At the intersection of discrimination. (2009).

UNDP Pacific Centre, Fiji:

<http://www.undppc.org.fj/resources/article/files/Final%20PSWD%20BOOKLET.pdf>

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http://hesperian.org/wp-content/uploads/pdf/en_wwd_2008/en_WWD_2008_full%20book.pdf

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Albert, B. & Miller, C. (2005). *Mainstreaming Disability in Development: Lessons from Gender Mainstreaming.* Disability KAR – Knowledge and Research, UK:

http://www.dfid.gov.uk/R4D/PDF/Outputs/Disability/RedPov_gender.pdf

Poverty Elimination and the Empowerment of Women. (2000). Department for International Development:

<http://webarchive.nationalarchives.gov.uk/+http://www.dfid.gov.uk/pubs/files/tspgender.pdf>

Lewis, C., Crawford, J. & Sygall, S. (2002). *Loud, Proud and Passionate: Including women with a disability in international development programs.* 2nd edn. Mobility International USA.

Focus on Gender: Gender and Disabilities. (1996). OXFAM United Kingdom and Ireland.

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- ³ United Nations Population Fund. (2005). *Promoting Gender Equality*. Retrieved from <http://www.unfpa.org/gender/>
- ⁴ Inclusion International. (2006). Inclusive Education. Retrieved from http://www.inclusion-international.org/en/ii_priority_areas/ie/index.html
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- ⁶ 'Sieng Sok Chann', End The Cycle (n.d.). *Women, Disability and Poverty: Double the challenges*. Retrieved from <http://endthecycle.org.au>
- ⁷ World Bank. (2007). *Social Analysis and Disability: A Guidance Note*. Retrieved from http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2007/04/13/000090341_20070413095245/Rendered/PDF/393850SocialAnalysis1Disability01PUBLIC1.pdf