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“Women 2000: gender equality, development and peace for
the twenty-first century”**

Statement submitted by Comité Español de Representantes de Personas con Discapacidad, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* The present statement is issued without formal editing.



Statement

Women and children with disabilities in Spain

Comité Español de Representantes de Personas con Discapacidad (CERMI) is the mechanism for meetings and political action for persons with disabilities in Spain.

Of the four million persons with disabilities LIVING in Spain, 60 per cent are women.

That female population is a heterogeneous group with a high intersectional discrimination indicator. Women with disabilities are characterized by higher illiteracy, a lower educational level, less employment, smaller-responsibility and lower-remuneration jobs, greater social isolation, greater economic dependence, higher probability of exposure to violence, ignorance of and myths on sexuality, limitations on their right to the maternity, extensive lack of social and health protection and little access to justice.

In connection with the critical areas of concern identified in the Peking Platform for Action, the main issues for disabled girls and women in Spain are the following:

A. Women and poverty

Women with disabilities in Spain are particularly affected by extreme poverty, at a rate triple that of the rest of the population and 40 per cent higher than in the case of disabled men. In the over-60 group of disabled persons, the extreme poverty rate for women is practically double that for men. According to a survey on poverty and social exclusion of women in Spain (CERMI, 2013), women with mental disabilities are the group most affected by lack of income, employment opportunities and access to benefits.

According to the same survey, the place of residence is also a factor. The poverty indicator for women is higher in rural areas. In fact, the bigger the community in which women live, the lower the poverty risk they face (60 per cent in rural areas compared to 46 per cent in province capitals and cities with more than 100,000 inhabitants).

For many persons with disabilities, the creation of the System for Autonomy and Care for Dependence (Sistema para la Autonomía y Atención a la Dependencia, SAAD) represented an opportunity of access to support resources crucial for personal autonomy. Yet the System has an impact on fewer than 16 per cent of the women concerned. The latest CERMI reports on Human Rights and Disability in Spain (2010 - 2013) reveal an alarming situation that spending-cut policies, in the relevant law and in general, are creating in the disability support sector, which is on the brink of collapse.

B. Education and training

The illiteracy rate in the 25-44 age bracket is 8.6 per cent among persons with disabilities and up to 1 per cent among the rest of the group (AGE, 2008). Although no significant differences are observed in early ages, disabled women are dogged in this sector by inequalities that lead to less access to secondary, higher and ongoing adult education, higher incidence of school failure, higher illiteracy rates and, therefore, less access to the labour market.

C. Women and health

One of the main manifestations of discrimination is infringement of the right to sexuality, reproductive health and maternity. That translates into, inter alia, systematic deprivation of sexual and reproductive health care through lack of access to information, facilities (examination tables and other equipment), insufficient gynaecological controls, limited choice of contraceptives, poor menstrual cycle control, inadequate pregnancy follow-up and negation of the right to maternity.

It is necessary to include the disability perspective in sexual and reproductive health policies and programmes; train health professionals in the specific needs arising from disability; provide access to information and services related to sexual and reproductive health; and adapt the relevant information and communication to the appropriate level of knowledge, sociocultural and ethnic background and such forms of expression as sign languages or alternative or facilitatory communication systems.

Early detection of violence against disabled women must be promoted through the establishment of health-care protocols. Training health personnel in dealing with disability is crucial to avoiding that relevant practices are applied to disabled girls and women without their informed consent or, under the pretext of their well-being, without listening to them.

D. Violence against women

According to data provided by the Government Department on Gender Violence in 2012, of the 52 persons dead as a result of violence, 7 (13.46 per cent) were disabled. According the latest survey entitled Macroencuesta de Violencia de Género, 2011, women with disabilities are victims of violence much more frequently than other women.

The Department's data include no information on disabled women victims of physical or psychological abuse, although their number is estimated to be considerable. Of the disabled women living in institutions, 68 per cent are exposed to violence from persons in their environment, including health workers, service personnel or carers. No study has correlated disability with gender-based violence in the public sector.

The definition of violence in Organization Act No. 1/2004 of 28 December 2004 on Comprehensive Protection Measures against Gender Violence is limited, failing to include many of the elements contained in the definition provided by the Human Rights Council. Violence against women with disabilities is not only

inflicted within the couple or by the spouse, but also perpetrated within the family and the institutional environment, from which such victims are unable to escape for lack of appropriate inclusive procedures.

Legislation is discriminatory insofar as it does not recognize the legal capacity of persons with disabilities. The law authorizes guardianship or institutionalization, compounding the vulnerability of the said persons with violence and impunity in such settings. The law is part of systematic violence inflicted on disabled girls and women, particularly women with psychosocial or mental disabilities and older women.

Sterilization and abortion are still imposed on disabled women and girls, especially persons with a mental or psychosocial disability, under the pretext of their well-being, without obtaining their consent or explaining to them the purpose of the operation. According to Judicial Council data (2010-2013), the number of court decisions authorizing the sterilization of disabled persons declared legally incompetent is 96 on the average.

F. Women and the economy

Although employment is the main safeguard against poverty, two thirds of working-age women with disabilities are inactive, namely do not participate in the labour market. Thus, 47 per cent of women with disabilities who do not work lack income for services. The household is an area of discrimination against women, since it is mainly they who provide support and take care of any disabled persons. Disabled girls and women are oriented towards performing household tasks, and act as carers instead of being encouraged to get an education to ensure their personal independence. Women with disabilities and women caring for disabled persons have reduced access to financial benefits, and any benefits to which they have access are non-contributory and do not cover their well-being as they grow older.

G. The girl child

According to the latest (2014) UNICEF report on children in Spain, the country has a high rate of child poverty (27.5 per cent). Inequity is growing fast and boys and girls with disabilities suffer especially from lack of resources and development opportunities. It is crucial to compile statistics for the formulation and implementation of policies ensuring the current and future well-being of disabled boys and girls in Spain.
