



Missing voices: The inclusion of women with disabilities within gender programming and women's movements

Author note

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Front cover: Suprihatin leads a self-help group for people with psychosocial disabilities in Yogyakarta, Indonesia. © CBM Australia 2023.

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Methodology

This snapshot assessment of current practice is based on research including a desk review of key literature, review of publicly available gender program documents including designs and evaluations, and targeted interviews with OPDs, practitioners and feminist leaders from the Indo-Pacific region. It identifies trends based on available evidence; but given the size and complexity of Australian ODA development investments as well as the lack of existing literature, does not provide a comprehensive review. It identifies the need for further in-depth research to inform this area.

References to gender

This paper recognises that gender is not a binary, that people of diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC) experience disadvantage and discrimination, and that for people with disabilities who have diverse SOGIESC this marginalisation is compounded and intersecting.¹ While we have largely referred to ‘women and girls with disabilities’ in this paper, this term explicitly includes those with diverse SOGIESC.

Key findings

- There is **limited existing analysis** into the extent to which DFAT-funded mainstream gender programs seek to include women with disabilities and their representative organisations, and how such programs address issues of disability equity and rights as these interact with gender.
- A review of available program reports and evaluations suggests that while practice is improving and performance is varied, there are multiple examples of recent DFAT-funded mainstream gender programs which show **limited consideration of the rights or priorities of women with disabilities and inadequate engagement with women with disabilities**.
- Some **evaluations of mainstream gender programs** fail to consider performance on disability inclusion, disaggregate by disability, or assess outcomes for women with disabilities.
- Organisations of Persons with Disabilities (OPDs) report that mainstream women's movements and organisations in the Indo-Pacific region often do not **adequately represent the interests or human rights of diverse women with disabilities**; yet OPDs and women with disabilities **do not always feel welcome in women's rights spaces** when they seek to represent themselves.
- OPDs representing women are **often not adequately funded or supported** to engage with mainstream gender programs, or to build their own capacity and leadership. They can be overlooked by potential partners and be ineligible for women's rights funding.

Tools and approaches used for gender analysis often do not identify or meet the needs and priorities of women with disabilities and need to be adapted.

Image: Lusiana (right) from Suva, Fiji, and some local women sew a traditional Fijian skirt. © CBM Australia



Introduction

It is widely recognised that women and girls with disabilities are often amongst the most marginalised people in any community. They face **human rights abuses including violence, institutionalisation and discrimination** at higher rates than women without disabilities or men with disabilities, are less likely to be employed, and are often excluded from leadership roles.

Given this exclusion, development programs focused on gender empowerment need to **explicitly address the needs and rights of women and girls with disabilities, ensure their voices are included, and address the underlying social norms that entrench their marginalisation**. Yet evidence, including examples drawn from Organisations of Persons with Disabilities (OPDs), practitioners, and program designs and evaluations, suggests that mainstream gender programs often still exclude women and girls with disabilities, and may also fail to assess the impacts of programs for them.

Women with disabilities often feel **excluded from mainstream feminist movements and women's rights movements**, although such movements typically seek to represent the interests of all women. OPD leaders reported that some mainstream gender-focused organisations and movements still **do not adequately understand or represent** the needs of women with disabilities.

Involving women with disabilities in gender programs is vital for several reasons: to ensure a strong focus on their rights and priorities, **with leadership by women with disabilities themselves; to address underlying power imbalances and social stigma**; and to achieve program outcomes and reach global targets including the Sustainable Development Goals (SDGs). Obligations to address disability equity and rights and promote empowerment for women with disabilities are also **driven by key conventions** including the Convention on the Rights of Persons with Disabilities (CRPD) and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), both of which have been ratified by Australia.

This paper provides a snapshot of current practice in DFAT-funded gender programming, and in women's rights movements across the Indo-Pacific region. It highlights that within both gender programs and women's movements, there are shifts towards **greater understanding of disability and improved efforts to represent women with disabilities** over the past five to ten years. Yet significant gaps remain – which means programs and movements overlook the needs and rights of women with disabilities, particularly the most marginalised women, including those with intellectual and psychosocial disabilities.

To promote and drive progress in this area, this paper identifies **good practice** in the involvement of women with disabilities in mainstream gender programming, as well as women's movements, within the Indo-Pacific region. It identifies **recommendations and next steps** for the Australian development sector, including donors and implementing organisations, and for women's rights movements.

Context for women with disabilities

There is significant evidence that **women and girls with disabilities experience disadvantage**, including in the Indo-Pacific region.² People with disabilities are already amongst the poorest and most disadvantaged people in any community, due to factors including lack of access to education, employment and health care, and discriminatory attitudes. Meanwhile, poverty also increases the risk of disability. Disability can also lead to higher costs for individuals and families, including for transport and assistive devices.

Women and girls with disabilities face additional disadvantages, marginalisation and discrimination, above those faced by both men and boys with disabilities, and women and girls without disabilities. This includes within the key sectors often targeted by gender programming:

- **Gender-based violence:** women with disabilities are more likely to suffer sexual violence compared to women without disabilities, as well as compared to men both with and without disabilities.³
- **Women's economic empowerment (WEE) and livelihoods:** women with disabilities face challenges in the job market and are up to five times less likely to be employed than either men with disabilities, or people without disabilities.⁴
- **Leadership and decision-making:** women with disabilities are less likely to be in management roles, and have extremely low representation in political leadership roles, including within gender equality-focused roles.⁵

National policies and programs may fail to address the needs of women and girls with disabilities, or may consider gender and disability separately without considering how these intersect.⁶

Recognising that women and girls with disabilities are subject to multiple forms of discrimination, the CRPD requires that States Parties act to ensure 'full development, advancement and empowerment of women'.⁷ The complexities of the discrimination faced by women with disabilities mean that it cannot be addressed through only a gender or disability lens. An intersectional approach, recognising the impact of gender and disability as well as diversities including age, ethnicity, religion, those with diverse SOGIESC, and the impacts of different disabilities, is required.⁸

Image: Kurniati, a polio survivor, is an advocate for the rights of women with disabilities in Indonesia.
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How many people with disabilities are there worldwide?

- Worldwide, 16 per cent of people have a disability.⁹
- Women are more likely to have a disability: 19 per cent, compared to 12 per cent of men.¹⁰



Gender in the Australian development program

There is longstanding commitment to promoting gender equality and women's empowerment within the Australian development sector, as well as within global development approaches and the sector more broadly. It is increasingly recognised that gender programs need to address power structures that perpetuate inequality for all women, and to **explicitly seek to engage with and address the needs of those at greatest disadvantage, including women with disabilities** as well as those facing other sources of disadvantage. DFAT's *Gender equality and women's empowerment strategy* highlights that 'work on gender equality ... aims to **address unequal gender norms** that constrain women and men' and requires explicit efforts to empower women. It commits to 'paying particular attention to girls, those with disabilities, indigenous women and disadvantaged women'.¹¹ In the second half of 2023, DFAT is developing a new International Gender Equality Strategy to further guide Australia's approach to gender within development programming.

Gender is a key priority for both DFAT and NGO programming. Many Australian development NGOs implement mainstream gender programs across the Indo-Pacific and beyond. Some agencies have an explicit focus on gender empowerment, including strengthening women's rights movements and promoting systemic change, across all their programming.

In 2021–22, \$1.5 billion in Australian Official Development Assistance (ODA) went towards gender equality measures.¹² In 2022 the Australian government reintroduced a previous target of **80 per cent of all development investments addressing gender equality effectively**, as well as a requirement for **new investments with a value of over \$3 million to include gender equality objectives**.¹³ Key DFAT investments focused on gender include Pacific Women Lead; Women Peace & Security; Investing in Women; and the Gender Equality Fund.¹⁴

DFAT priorities for gender empowerment as set out within its strategy include:

- Enhancing women's voices in decision-making, leadership and peacebuilding
- Promoting women's economic empowerment
- Ending violence against women and girls.¹⁵



Image: Trimah and her family from Yogyakarta, Indonesia.
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How do mainstream gender programs engage with women with disabilities?

International evidence

There is evidence that globally, mainstream gender programs as well as policies and frameworks often **fail to engage sufficiently with women and girls with disabilities**, or to adequately focus on or progress their rights. UN Women highlights that the needs of women and girls with disabilities are '**being overlooked during the development and implementation of policies, programmes and intergovernmental processes,**' and that '**laws and policies** addressing gender equality have traditionally ignored the[ir] rights'.¹⁶ Two key reasons for these gaps are identified.

- Firstly, lack of **access to resources and capacity for women with disabilities and their representative organisations**. OPDs representing women and girls can find it difficult to access funding due to inflexibility in both gender and disability rights funding mechanisms. Intentional investment in OPD capacity, including by donors and development partners, is needed to support full participation and leadership.
- Secondly, there are **gaps in alliances between women's rights organisations (WROs), OPDs and OPDs representing women and girls**, meaning that the rights of women and girls with disabilities are overlooked as programs and policies are developed and implemented, even where WROs and mainstream OPDs are consulted on these.¹⁷

Evidence on DFAT-funded mainstream gender programming

There is **limited research or analysis** available that assesses the extent and ways in which DFAT-funded mainstream gender programs engage with women with disabilities, or which identifies gaps and approaches to address this. This highlights a **lack of data or sufficient focus** on the intersection between gender and disability within gender programs, and on how the rights of women with disabilities are progressed. **Addressing this gap should be prioritised in research and evaluations.**

To gather evidence, this paper has **examined a range of publicly available reviews and evaluations** and related documents for DFAT-funded mainstream gender program over the past eight years. This analysis identified **mixed outcomes as to the extent that programs include women with disabilities and address their rights.**

Most – though not all – gender programs examined demonstrated understanding of the additional disadvantage that women with disabilities face. But while some programs showed strong engagement in including women with disabilities, several others, including large flagship programs, showed **limited engagement on disability equity and rights or partnerships with women with disabilities.**

There is evidence of practice strengthening over time, particularly in the Pacific; however, examples of poor practice included **current programs** and activities implemented within the past three years. Issues included:

- Failure to **specifically target women with disabilities** and engage with their representative organisations, including as partners
- Lack of **data disaggregation by disability**, or poor use of data that has been gathered
- Failure to **consider or analyse whether program impacts differed for women with disabilities** in reports and evaluations
- Lack of clear **disability strategies**

- Failure to **engage with women with disabilities** in leadership and gender transformation programs
- GBV programs not fully integrating approaches to **target women with disabilities**, despite them being at much higher risk of violence
- **Use of tools developed for gender analysis** that do not sufficiently identify issues facing women with disabilities, and require adaptation
- Economic or livelihood programs not **recognising or addressing barriers to employment** for women with disabilities.

It was rare to find programs that did not engage on disability in some way. However, a common issue was that many programs did not have an **embedded understanding of disability equity and rights as central to their programs**, rather than a separate concern or add-on. A quote from the Indonesian MAMPU gender equality program's mapping of its engagement with women with disabilities illustrates this:

MAMPU was not designed to purposively target people with disabilities and does not have a documented strategy to tackle these issues. Women with disabilities and their families represent a distinct group with distinct needs, which may not align with the current capacity and focus of the majority of partners.¹⁸

Examples of the gaps within recent gender programs include:

- A 2021 review of the UN Women–DFAT Strategic Partnership Framework, to which Australian development assistance contributed AUD7.79 million per year during 2016–2021, gave a rating of **'progress less than expected'** on the disability inclusive development objective, and recommended the partnership 'continue to improve integration of disability into programming, advocacy, policy and data'. The review also noted, however, that DFAT support had strengthened **UN Women's work on disability**, with improved initiatives including a **funding window** to address violence against women and girls with disabilities.¹⁹
- A 2022 meta-evaluation of five gender programs addressing violence in Timor-Leste and the Pacific found that inclusion of people with disabilities **'seems limited to the level of awareness around people with disability** and efforts to include them in training', rather than actively addressing higher rates of violence for women and girls with disabilities.²⁰ The **methodology** the programs used for gender analysis also did not explicitly discuss disability.
- A 2017 evaluation of a DFAT-funded GBV program in Pakistan found that while the program was working to mainstream disability inclusion, 'the Program should **ensure disability considerations are integrated throughout the Program, and not just as an add-on**', and highlighted a need for OPD partnerships.²¹
- A 2021 review of gender transformative approaches in PNG under Pacific Women identified the need for intersectional approaches.²² However of a dozen or more gender programs profiled, **only two mentioned activities targeting women with disabilities**.
- A 2017 review of the **Pacific Women Fiji Country program** found a **lack of data on reach to OPDs and women with disabilities**, and gaps in including their voices in disaster risk reduction (DRR) and market governance structures.²³
- The six-year evaluation of the **Pacific Women Program** found that **practice on disability inclusion was improving**, with partners increasingly adopting inclusive practices, and evidence of engagement with OPDs. This suggests that **progress is occurring in the Pacific**.
- Progress was also indicated by the strengthened approach in Pacific Women's successor, Pacific Women Lead (PWL). The PWL MEL Framework has a specific focus on **strengthening disaggregation of data by disability**, and provides detailed

guidance. The outcome area of promoting women's leadership within Pacific feminist civil society includes an indicator for number of Pacific OPDs actively engaged in the project.²⁴

- A 2023 evaluation of an NGO-implemented women's leadership program in Indonesia found the program had contributed to access and services for women with disabilities, engaged with OPDs, collected disaggregated data and analysed access to livelihoods for people with disabilities. Despite these achievements, the evaluation noted that '**disability inclusion remains as a gap to be improved**', identified issues of stigma and lack of understanding amongst village government, and recommended development of a disability inclusion strategy.²⁵ This illustrates the complexity of incorporating disability equity and rights in mainstream gender programs: programs may be strong in some areas but face challenges in others.

Although there is progress over time, **lack of focus on disability inclusion remains an issue, including in prominent DFAT-funded investments**. In October 2023 the DFAT-funded Investing in Women program in Southeast Asia released a call for proposals for approaches to targeting 'gender norms that act as barriers to women's economic participation'. Although Investing in Women focuses on 'inclusive sustainable economic recovery', the call had only one brief reference to disability. Its selection criteria for partners referenced intersectionality but did not **include any assessment of partner capacity on disability equity and rights**.

Similarly, Investing in Women's 2018 three-country Social Norms, Attitudes and Practices Survey to inform efforts to address barriers to address WEE, does not **disaggregate by disability**, nor does it appear to **measure any attitudes relating to women with disabilities in the workforce** or the impact of factors such as accessibility or employer attitudes on job choice.²⁶ It is concerning that a flagship DFAT investment on women's economic empowerment is failing to consider disability, despite women with disabilities facing much lower rates of employment than those without disabilities.

Gaps in evaluations

Most of the gender programs discussed above did have consideration of disability within their reviews or evaluations, indicating that agencies and evaluators had an understanding of the need for gender programs to target women and girls with disabilities, even where this was not fully achieved. However, examples were identified of **reviews and evaluations that failed to adequately consider disability equity and rights**. This included both evaluations of DFAT-funded programs, and NGO program evaluations.

- An extensive 2019 review of a DFAT-funded women-focused humanitarian program across multiple countries mentioned the need to reach marginalised women but did not appear to specifically mention or discuss disability at all.²⁷
- A review of a gender-based violence program in 2015, which targeted entertainment workers in Cambodia, gathered extensive demographic information on focus group participants but did not identify those with disability, nor make any other mention of disability.²⁸
- A large multi-country program delivered by an NGO across the Indo-Pacific region in 2016-20, aimed to support WROs in transformative change towards gender equality. While this program emphasised engaging with a diversity of women, it engaged with 18 WROs, **only one of which explicitly represented women with disabilities**. The end-of-project report made only two brief mentions of disability, and had no discussion of impact disaggregated by disability, nor mention of any explicit activities that addressed marginalisation due to disability.²⁹ Similarly, **the evaluation discussed marginalised groups but did not explicitly consider outcomes for women with disabilities**.

Even where **disaggregated data is gathered, evaluations can sometimes fail to consider this**. If there is not a lens that considers disability within evaluations of gender programs, there may be little or no information gleaned as to impacts on women with disabilities.

- The mid-term review and 2020 end-of-project evaluation of a WEE program in Vietnam, funded by DFAT and implemented by a consortium of NGOs, had only **very limited analysis of impacts on women with disabilities or ways to address this**, even though data was disaggregated for households with disability and showed that net income was much lower for those households.³⁰

These examples highlight the need to **explicitly ensure evaluations of gender programs disaggregate by disability**, analyse this data, identify engagement with OPDs and women with disabilities, and consider whether there are different impacts for women with disabilities.

Engagement with OPDs by mainstream gender programs

Evidence from OPDs in the Indo-Pacific region suggests that **the extent to which mainstream gender programs seek to involve OPDs varies significantly**. There are some areas of good practice, however gaps include:

- **Lack of sufficient engagement with OPDs** representing women, including women with a variety of disabilities
- Conversely, **reliance on a small number of OPDs to provide disability expertise**, rather than resourcing and developing proficiency in-house within programs
- **Limited capacity-building and core support** for OPDs, with funding centred around activities
- Lack of commitment to **nurturing and supporting emerging organisations** representing women with disabilities, including smaller OPDs
- **Inaccessible activities or processes**, and a lack of understanding or funding of the accessibility needs and costs of inclusion for women with disabilities.

While many gender programs have partnerships with WROs, some do not engage strongly with women's OPDs as either implementing partners or technical experts on disability. A leader from an Indonesian OPD representing women with psychosocial disabilities gave the example of a major DFAT-funded gender program in that country, which she reported only reached out to their OPD towards the end of implementation with a one-off request for training. She felt that the **relationship between the OPD and mainstream gender programs was limited**, including in comparison to disability programs and stakeholders.³¹

Conversely, there are examples of **effective engagement with OPDs**. A Timorese OPD representative reported that some mainstream gender programs have cooperated over time with local OPDs, seeking support on disability inclusion. This has often been to reach women with disabilities in rural areas, where engagement can be particularly challenging, suggesting these programs **understand the need for specific targeting of women with disabilities as a marginalised group**.³²

The level of OPD engagement was more positive in this example, however led to other challenges. The bulk of engagement requests came to the largest Timorese OPD. This brought funding and opportunities but also **stretched their staff and funds**, including where donor budgets did not fully cover costs such as transport in rural areas. However **smaller or newer OPDs received less offers to partner**, which in turn meant less access to funding and fewer opportunities to build their own capacity to engage in development processes. A new Timorese OPD representing women has recently been

formed, however so far has **not had strong sources of funding or capacity-building support** which could help it to engage with gender programs.³³

This highlights the issue of gender programs **requesting ad hoc OPD input, without providing ongoing funding**. Several OPDs from across the region reported that funding from donors typically covered only **activity costs for specific programs, rather than core costs**. This made it difficult to fund daily expenses and to conduct organisational strengthening.³⁴ Approaches to funding can also fail to recognise the **true costs of participation for women with disabilities**, and often do not fund transport or assistive devices that can be vital for accessibility and mobility. One example was of a program in Bangladesh inviting OPD representatives to a rural area, without providing adequate per diem payments or covering costs beyond public transport which was inaccessible to many. This breached the policies of the OPD towards their staff and meant the organisation needed to cover the shortfall itself. The OPD staff member felt that programs did not give OPDs the same 'respect and funding' as they did other partners yet expected similar outcomes.³⁵

OPDs also noted that when they do connect, there is a tendency for gender programs to rely on OPD inputs as their **primary source of expertise on disability**. While OPD engagement is vital, it's also important for programs to also ensure **sufficient internal expertise** on disability equity and rights. This should include employment of staff with disabilities: a Bangladeshi OPD member observed that this rarely occurred but was vital if gender programs were to demonstrate a commitment to empowering people with disabilities.³⁶ It is also important to fund dedicated disability roles rather than a combined GEDSI position which can risk diluting the specific measures needed to promote disability inclusion.

There is evidence that **strong partnerships with OPDs** can improve reach for women with disabilities, including those who are hard to reach such as rural women or those with particular disabilities. Case Study 1 provides an example of an NGO **building in OPD involvement from the design phase** and adapting this role over the life of a program to respond to learning and changing circumstances.

Image: Jacinta Tamele, her husband Tomás with their family, from Oenunu, Oecusse. © Oxfam in Timor-Leste.



Case Study 1: HAKBIIT Program promotes Inclusive Women's Economic Empowerment in rural Timor-Leste³⁷

Oxfam's HAKBIIT gender program works with women in rural areas in Timor-Leste, to **promote women's livelihoods, increased voice in public space and increased control over their own lives**. 'Hakbiit' means 'empower' in Tetun. Phase 1 is being implemented from 2020–2025 in four rural locations, implementing through five local partners.

Economic empowerment is supported through establishment of **savings groups**. HAKBIIT uses the Gender Action Learning System (GALS) methodology to support women to **identify and address gender inequalities at a household level**. The program also conducts analysis and advocacy on **unpaid care issues**, using the Oxfam-developed Care Policy Scorecard tool to assess progress.

From design stage onwards, HAKBIIT has focused **equity and rights for women with disabilities** within all activities. The program design recognises that 'women with disabilities ... face additional barriers based on their gender and disability. [They] are more dependent on family support for income-generating activities ... and are more economically vulnerable than men [with disabilities]'

HAKBIIT engaged Oxfam's long-term partner, the national Timorese OPD **Ra'és Hadomi Timor Oan (RHTO)**, as an additional technical partner to support disability inclusion. RHTO's role has included **supporting local partners** in identifying and engaging with women with disabilities to join savings groups; training partner staff on disability rights; providing **referrals** to support such as physiotherapy, and advising on office accessibility. Data is **disaggregated by disability**, with partners trained to use the Washington Group Short Set of questions to identify community members with disabilities.

Successes so far have included **involvement of women with disabilities in savings groups**, including as group leaders, **building local partner capacity** on disability, and **strengthening relationships** between RHTO and other local organisations.

The program has also identified and tackled challenges during implementation, including by seeking technical advice and support from CBM Global's Inclusion Advisory Group.

- The GALS methodology supports women to identify inequities at a household level and discuss these with their partners or families. However, household power dynamics can make it **difficult or unsafe for women with disabilities to have such conversations**. The program is working to strengthen the methodology to ensure it addresses the needs and rights of women with disabilities.
- It was recognised that the Care Policy Scorecard tool needed strengthening to **capture info on disability**, including for those giving and receiving unpaid care due to disability.
- The original design planned for RHTO to operate savings groups for women with disabilities, however, it was realised that **further training and guidance would be needed** to expand RHTO's work into this new technical area, and this input was postponed. More generally, RHTO has many demands on its time due to NGO requests for input, and **ongoing support for OPD capacity** has proved important. CBM also recommended Oxfam appoint a focal point on disability and increase peer-to-peer learning on disability in cash savings groups.
- Although the original design budgeted for disability equity and rights, **budget remains a challenge** as program learnings indicate the need for further inclusion measures.

How do mainstream gender and women's rights movements engage with women with disabilities?

There are strong gender and women's rights movements throughout the Indo-Pacific, operating at local, national and regional levels. These typically seek to **represent women in all their diversity**,³⁸ often explicitly including women with disabilities. However, a common message from OPDs representing women, including organisations from Timor-Leste, Bangladesh and Indonesia, was that they **did not believe mainstream gender-focused organisations and movements adequately understood or represented the needs and rights of women with disabilities**. Key issues included:

- Lack of understanding by WROs of the **expertise of OPDs**, and the rights and abilities of women with disabilities to represent their own interests.
- Women's OPDs **not being invited to or feeling welcome in women's rights spaces**.
- Lack of understanding of the ways that legislation and policies may **differently impact women with disabilities**, or of the complexity and depth of discrimination faced by women with disabilities.
- Human rights issues that particularly impact women with disabilities **not being seen as women's rights issues**, but rather disability issues, and a lack of understanding of the social norms and barriers that oppress women with disabilities.
- **Funding opportunities** focused on building women's leadership that are not open to OPDs.
- **Lack of resourcing of gender-focused OPDs**, including those representing women from diverse disabilities groups and women with additional sources of marginalisation.

A leader of an Indonesian organisation representing women with psychosocial disabilities considered that 'they [WROs] don't see us as their fellow activists, but as vulnerable people needing help'. But women with disabilities are both capable and eager to represent themselves: 'We don't want to be seen as lesser, or as needing pity.'³⁹ She highlighted very serious human rights violations faced by women and girls with psychosocial disabilities, including institutionalisation, forced sterilisation and sexual violence. Her perception was that these issues were **not recognised as women's rights issues by the women's movement in her country**, but rather seen as issues for the disability movement to progress.

The Bangladeshi OPD representative recounted that when she first attended a meeting as part of CEDAW processes, **mainstream gender organisations questioned why she was there** and suggested the OPD send a letter instead. While this has now shifted and their presence is accepted, the interviewee believed that even now, if women with disabilities were not present at such meetings, their interests were not remembered or represented.⁴⁰

As illustrated in Case Study 2, mainstream gender legislation and policies can have specific impacts on the rights of women with disabilities, and WROs may fail to recognise or address these issues. It is vital to ensure the **voices of women with disabilities are included in these spaces**, including those with varying disabilities and from further marginalised groups such as those with diverse SOGIESC. Funders need to ensure that **OPDs representing diverse groups of women are supported**, including through dedicated funding as well as ensuring they are eligible for mainstream gender funding mechanisms.

Case Study 2: Indonesian law reform on gender-based violence⁴¹

Engagement between women's rights organisations and OPDs to protect the rights of women with disabilities

In Indonesia, 10 years of concerted advocacy by women's rights activists culminated in the passing of a landmark gender-based violence bill. The involvement of organisations representing women with disabilities was crucial to ensuring the law gave equal protection to their rights.

Among other elements, the proposed bill criminalised forced sterilisation and contraception. But women's rights activists, focused on the perceived needs of the families of girls with disabilities, inserted an article that legalised forced contraception and sterilisation of women and girls with psychosocial or intellectual disabilities. Himpunan Wanita Disabilitas Indonesia (HWDI), the national umbrella organisation of women with disabilities, strongly opposed this article because it violated the bodily autonomy of girls and women with disabilities. Forced sterilisation is prohibited under the CRPD and is a form of violence against women with disabilities, yet is still widespread globally.⁴²

With support enabled by funding from the Australian government through the Disability Rights Advocacy Fund (DRAF), HWDI was supported to facilitate dialogue and build agreement between women with disabilities and other women's rights activists, including a convening of women with disabilities together with other women's rights activists in October 2018.

Dialogue continued through the pandemic, covering issues including the human rights of women with disabilities, sexual and health rights and gender-based violence affecting women with disabilities. This culminated in HWDI and the Indonesian Mental Health Association (IMHA), along with 24 OPDs and civil society groups, submitting a list of issues on the bill as representatives of the disability community in early 2021.

The bill was passed into law in May 2022. As a result of these efforts, the new legislation includes:

- An article that states that the testimony of witnesses and victims who are persons with disabilities has the same value as those of non-disabled victims.
- An additional chapter in the bill for accessibility and reasonable accommodations for people with disabilities who are survivors of sexual abuse and harassment during the reporting, judicial and recovery phases.
- Additional protection for women with disabilities who are victims of sexual violence.
- Outlawing forced sterilisations for all.

The success in ensuring meaningful participation by women with disabilities has enabled the coalition to broaden its efforts, advocating to prevent gender-based violence, and for inclusive sexual rights and health rights in Indonesia beyond the COVID-19 context.

This view is echoed in the Women with Disabilities Statement for the Oceanic Pacific Region prepared for the Women Deliver Conference in 2023, which noted that 'women and non-binary people with disability **continue to be an afterthought in spaces that discuss and attempt to progress women's rights**. The lack of women with disability and leadership representation in our region is stark, particularly for those who are First Nations women, women of colour and/or LGBTIQ+'. Similarly, a 2021 review of eight organisations from across the globe working to promote the rights of women with disabilities, found that 'both feminist and disability rights movements often **fail to recognise the particular**

oppression and discrimination experienced by disabled women, girls, trans people and intersex people'.⁴³

The leader of a feminist organisation in Fiji acknowledged that in the recent past institutions within the women's movement had been 'structured and elitist', often excluding women with disabilities as well as other marginalised groups. She considered that this has since **shifted towards a more diverse approach but recognised that ongoing work is needed** to ensure this is not simply tokenism.

In contrast to the experience of some OPDs, this feminist leader considered that 'the **feminist movement are trend-setters, boundary-setters** [for inclusion]'. While noting that women's movement are not at full inclusion, she considered that WROs have the capacity to be leaders in this space. Shifts have been seen within activities such as the Pacific Feminist Forum, which in 2023 included OPDs within its organising committee.⁴⁴

These contrasting views may be evidence of a **disconnect between mainstream WROs and OPDs representing women with disabilities**, in terms of the progress on inclusion. Or it may illustrate the **diversity of experience within the Indo-Pacific region** – potentially some countries and sub-regions have seen progress, while in others the mainstream gender movement still does not engage strongly enough on the rights of women with disabilities. It also likely results from the **varying experiences of those with different disabilities**, with those with psychosocial disabilities particularly marginalised from mainstream gender organisations. More research is needed to understand this further.

Recommendations and next steps

Mainstream gender programs and movements need to address gaps in current practice if diverse women with disabilities are to be meaningfully included. Based on the findings of this report, the following recommendations have been identified for development actors involved in all stages of gender programming, and women's rights movements.

Engagement with Organisations of Persons with Disabilities (OPDs)

1. **Engage directly with women-focused OPDs** and other organisations representing diverse women with disabilities in all aspects of gender programming, including planning and implementation, as well as within development of policies and legislation.
2. Recognise the limitations of often small and overstretched gender- and women-focused OPDs, and ensure they are **properly funded, supported and resourced** to provide advice and support to gender programming, including via core funding and through fostering leadership.
3. Foster the **formation and growth** of OPDs specifically representing women with disabilities, including those with varied disabilities and those from particularly marginalised groups, including women with psychosocial and intellectual disabilities.
4. Recognise the role of women-focused OPDs in progressing and advocating for the rights of women with disabilities, and ensure they are eligible for and considered for **gender funding streams**.
5. Ensure that consultations, meetings and other events and activities are **fully accessible** to people with disabilities and OPD representatives. This includes allocating specific budget to **cover additional costs borne by people with disabilities**, including for transport and support persons.

Program design, implementation, monitoring and evaluation

6. Seek to **build and embed expertise on disability equity and rights within gender programming**, including employment of staff with disabilities and roles focused on disability equity and rights.

7. Incorporate specific **activities and measures to identify and address the rights and priorities of diverse women with disabilities**, and ensure program indicators measure these.
8. Ensure **sufficient funding for accessibility and inclusion measures**, including budget for ongoing and adaptation of practice as programs are implemented.
9. Analyse and adapt **existing mainstream tools used for gender analysis** to ensure they adequately identify and address the needs and rights of women with disabilities.
10. Ensure **reviews and evaluations** specifically consider the involvement of women with disabilities and OPDs in programs, use disaggregated data, and assess program impacts for diverse women with disabilities.
11. Support **research and analysis** on the inclusion of women with disabilities within mainstream gender programming, to promote learning and drive improved practice.

Women's Rights Organisations

12. Build understanding that **equity for and rights of women with disabilities** are vital elements of gender justice, that women with disabilities are often at greater risk of abuse of their rights, and that the interests of women and girls with disabilities may differ from mainstream groups.
13. Build understanding of **social norms and barriers that oppress women with disabilities**, including those women with additional sources of marginalisation, and address these within advocacy and campaign activities.
14. Identify ways to **partner with and support OPDs representing diverse women with disabilities**, to promote their leadership and involvement in mainstream women's rights activities; and acknowledge the expertise and ability of women with disabilities to represent their own interests.
15. Recognise that **some groups of women with disabilities may be particularly marginalised**, including women with psychosocial disabilities, women with intellectual disabilities, and those with diverse SOGIESC; and identify ways to support and promote their voices.

Image: A group of women from Laliguras self-help group in Nepal. © CBM Australia 2023.



Notes

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