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IDA

April 8, 2020

8:00 a.m. CST

CSW

Webinar

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>> MODERATOR: Hello, everyone. International Disability Alliance here. We're just waiting for the rest of the panelists to join and we'll have everyone remain on mute and cameras off except for our sign language interpreters. Thank you for your patience and we'll get started in the next 10 minutes approximately. Thank you.

>> LUCY RICHARDSON: Hi, everyone. This is Lucy Richardson from International Disability Alliance. We're just continuing to sort out a few technical issues. Thank you for your patience. We will start soon.

>> LUCY RICHARDSON: Hi, everyone. Thank you for your patience. We're just sorting out a few technical difficulties and we'll start soon. Thank you.

>> LUCY RICHARDSON: Hi, everyone. This is Lucy Richardson from International Disability Alliance. Thank you for your patience as we just sort out a few technical difficulties. If you have anyone ‑‑ if you know anyone who is looking to join but unable to join online, they can also dial in with the phone numbers that are listed in the email that you received when you registered. Thank you for your patience.

>> LUCY RICHARDSON: Hi, everyone. This is Lucy Richardson from International Disability Alliance. Thank you for your patience. We are going to get started in just a couple of minutes. We have International Sign Language interpretation and we have CART captioning. If you look into the Chat Box, you will see the link to the CART captioning. We will paste it again so that you can follow along.

So, thank you everyone for being here this morning, this afternoon, this evening, wherever you are. This has been a very, very popular webinar. We had a lot more RSVPs than we were expecting. I'm sorry, I'm just going to start that again because I need to start the recording.

So, good morning. Good afternoon, good evening, earn. Thank you for joining us for this webinar on promoting the rights of women and girls with disabilities, particularly in the crisis situation of COVID that we are facing right now. This has been a very popular webinar. We've had a lot of people register, and only a certain number of people are able to join online. If you know anyone that is looking to join, there is a phone number that people can dial into. It should have been in the email that you received when you registered. I am also going to paste it into the Chat Box here.

You will also notice that we have posted a link for CART captioning and we have international sign that will appear ‑‑ International Sign Language that will appear in the video on your screen.

We have a number of panelists today and the panelists were women with disabilities from around the world who have been selected to participate in the Commission on the Status of Women this year.

As we know, the CSW was canceled due to the COVID crisis; however, we were able to get most of our delegates to join us for the webinar today to speak about promoting the rights of women and girls with disabilities, not just in the gender equality space, but also in the situation of the COVID crisis that we are facing today.

I would like to say that International Disability Alliance and the European Disability Forum would like to thank the Ministry of Foreign Affairs Finland for their financial support to the Women with Disabilities Flagship under which this webinar is organized.

The panelists that we have today are An Sofie from European Disability Forum. Your moderator myself Lucy Richardson from the International Disability Alliance. Villaney from Pacific Disability Forum. Judith from the African Disability Forum, Pirkko, Yeni Rosa, Pratima from Indigenous Disability Global Network, and Gerel from World Blind Union and Rosario.

We are very happy to welcome all of the panelists today. Unfortunately we do not have Sonia from the World Federation of the Blind due to accessibility issues she's facing during the COVID crisis.

Today, we will be talking about the Movement for Gender Equality but also the specific COVID19 Pandemic situation. The discussions today will be based around two quick key questions. The first one is, what are the main barriers faced by women and girls with disabilities in having their rights recognized and realized. The second question is, what are the most effective strategies to promote recognition and realization of the rights and women and girls with disabilities by the Women's Rights Movement and by the Disability Rights Movement.

We will also have question and discussion time at the end, and we will have questions from the audience that you can put into the Chat Box or into the Question Box that you see in the panel that should be on the right of your screen.

We are also recording this webinar so that we can share it afterwards with people who were not able to join us in person. I'm just going to go through quickly the order of the panelists that we will have speaking today, so we're going to start with An Sofie, who will present the paper that IDA contributed on the Beijing + 25 process, and then we'll go to Villaney who will speak on barriers from a regional perspective from the Pacific. And then to Judith who will speak on barriers a regional perspective from Africa. And then Pratima, speaking to the barriers and experience of indigenous women. Yeni Rosa who will speak on the experience of women with psychosocial disabilities. Then we will have Gerel who will speak on how networks of DPOs can contribute with strategies. Rosario who will speak to strategies and situations of risk and emergency. Pirkko who will speak on strategies with engagement through the UN and Rupsa and Lisa will speak on strategies from the feminist movement. Then we'll move to an interactive discussion at the end.

As I mentioned, we have CART captioning and international sign interpreters. They should be on your screen in the video. Please keep the captioners and interpreters in mind. You may notice us pausing occasionally to make sure that CART and IS interpreters are keeping up.

Thank you. Now, I'm going to pass over to An Sofie to speak about the Beijing + 25 paper. We have been having some technical difficulties so I hope that we can reach her. An Sofie, over to you. Thank you.

Okay. We may have to come back to An Sofie. I'm sorry to promise you that and then not deliver immediately, so welcome back to that, but now we will go to Villaney from Pacific Disability Forum who will speak on barriers giving a regional perspective from the Pacific. Over to you Villaney. Please unmute.

>> VILLANEY REMENGESAU: Thank you, Lucy. Can you all hear me?

>> LUCY RICHARDSON: Yes, we can.

>> VILLANEY REMENGESAU: Okay. This is Villaney Remengesau from the Pacific Disability Forum and Chair of the (?) Committee. We are women and girls with disabilities in the Pacific following. Persons with disabilities and their families who are exposed to the COVID19 and likely women and girls with disabilities face barriers in information due to lack of availability and accessibility of critical information to guide them in taking necessary precautions, identifying where to go to seek help, and where to contact in case of self‑emergency.

The lack of education for women and girls with disabilities further contributes to their vulnerability to the outbreak as lack of understanding of technical and medical terms used in COVID advisories, further contributing to their inability to respond to the offering and take necessary actions.

Most women and girls with disabilities are for and living in overpopulated areas with poor living conditions. These exacerbates their exposure to the outbreak and makes to put in place measures to respond to the outbreak and decrease the risk of their vulnerability.

The ratification of the CRPD in the Pacific region added to the biggest barriers of women and girls with disabilities getting their rights recognized and realized. Women and girls with disabilities face systemic barriers to participation, inclusion, and representation in the Pacific Region as a consequence of discrimination.

This is true for women and girls with disabilities who face multiple and intersectional discrimination, limited availability evidence points to significantly greater inequality experienced by women and girls with disabilities compared to men and boys with disabilities. Cultural and traditional for the Pacific societies and communities are barriers for women and girls with disabilities getting their rights recognized and realized.

Ladies and gentlemen, these are barriers we face as women and girls with disabilities in Pacific. I thank you.

>> LUCY RICHARDSON: Thank you, Villaney for giving us that very valuable perspective on the barriers that women with disabilities are facing in the Pacific.

We're going to move now to Judith who will speak on a regional perspective from Africa. Over to you, Judith.

>> JUDITH EKAETE UMOAH: Thank you so much, Lucy, and good day to everyone. I'm happy to be here for this opportunity for us to get together and to discuss this very important issue.

I'm going to follow up with what was just said, Villaney about the virus. I don't think it's so much of the difference of cultural barriers that we face, but I want to see that the barrier is very complex and in our rights and this barriers that we face actually limits the opportunity for participation, and for women with disabilities, it's coming in two‑fold because speaking of disabilities and all the issues of disabilities.

Generally, women with disabilities face, like was already said as well, systemic and structural barriers. Structural barriers is a result of negative sociocultural barriers which we face and is a result of negative treatment of women and girls with disabilities ‑‑ (Speaking off mic).

Obviously, women and girls with disabilities have to deal with the issues of (?) as well as with the issues of disabilities and the two factors are going to lead to restriction, so that is one of the major barriers that opportunity for the female gender generally, but to strongly reinforce discrimination against women and girls with disabilities, so if you go down to the systemic barriers, from our sectoral places, government, respond to the issues of women and girls with disabilities and they perhaps could be seen in the design and implementation of gender sensitivity prevention and how the issues of disabilities and such could be intervention. The absence of inclusive policies and law that allows women with disabilities to enjoy their fundamental human rights, disability acts as a barrier to women and girls with disabilities on services and product and these policies need to be reflected ‑‑ (Speaking off mic).

Let's go down to the COVID19. Women and girls with disabilities ‑‑ intervention for relief packages for COVID19 response. As it is for now, apart from the sign interpretation we see on the screen, the services has nothing there for women and girls with disabilities. With the treatment, how accessible is ready for women and girls to participate in that way.

To look at this statement about the feminist movement, you see a huge gap thereof women and girls with disabilities are not considered in all of these statements, especially that have to do with gender during this lockdown period.

So I want to get down again to the feminist movement and I think this is lack within the larger movement that does not allow women with disabilities to access their rights and equally as it were.

So now in the COVID19, again, let's go back to ‑‑ (audio breaking up) ‑‑ distribution and packages. A single modality of disabilities, who could barely be able to leave their house within the lockdown, how would she be able to do all the packages already that have been set aside for women and girls with disabilities, so generally, I want to wrap it up here and I will say that the systemic barriers and those structural barriers and even within the movement is still a barrier, and still the existing barriers reinforcing them in responses as it were and responding to these COVID19 as it were. The systemic policies that have been ruled out now and we see huge disability gap, especially when it is women and girls with disabilities. And now I will now allow another colleague to speak as well.

>> LUCY RICHARDSON: Thank you so much, Judith. I'll just give a minute for the captioners and sign language interpreters to catch up.

Thank you. Next, we will have Pratima speaking on the experience of indigenous women with disabilities. Over to you Pratima. Please unmute yourself.

>> PRATIMA GURUNG: Hello. Hello.

>> LUCY RICHARDSON: Hi, go ahead, Pratima. Thank you.

>> PRATIMA GURUNG: Okay. Thank you, Lucy. Thank you for providing me this opportunity, and right now we are experiencing the pandemic and critical situation, and disability has not been on the agenda in the COVID19 situation both at the national and global level.

So, I will begin some of the experiences that we are having at this critical moment, basically, people with disabilities, including women with disabilities, underrepresented groups like deaf, deaf/blind people, intellectual disabilities, psychosocial disabilities, indigenous people with disabilities, including religious and minority groups are facing adverse challenges. The adverse challenges are very much focused with the basic needs, like access to information, and when we say access to information, language as well as mother tongue language and local language where access to people with disabilities is a human right. But that has not been acknowledged, good clean water, medicine, services for basically indigenous and minority groups have not raised to the community level.

So there is lack of adequate informations, awareness on COVID19 situation. There is lack of disability, gender, and culturally sensitive approach. And in this context, today we are discussing about the barriers faced by women with disabilities, so for me, I will be framing my conversation in five major points, age of barrier, representing myself as indigenous women with disabilities. The first barrier I feel that we, women, and women with disabilities, we are heterogeneous group. Respecting the diversity of women, accepting us as a woman, women with disabilities, women with psychosocial disabilities, indigenous and minorities with disabilities. This identity is very crucial for us. We have multiple and intersectional identities that overlap and intensifies and situates us in the lowest level of social hierarchy.

But we have not been able to realize and accept this within us. Our diversities is our strength and not a barrier. This has to be ground for all of us.

The second is about the representation. The representation of women with disabilities in the disability and in the feminist movement are taken as a tokenism only for inclusion. We are not meaningfully participated, included, and our voices are not taken meaningfully.

Today we are as capable as other women and other men with disabilities. We want to lead the disability movement and the feminist movement. As an indigenous woman with disabilities, we want to make decisions on the issues independently that impacts our lives and our communities.

And third, it is time for us to reflect who are excluded in our discussion, in our meetings, who are left behind, not invited.

We haven't been able to do this so far, and when we relayed this agenda to the 2030 Agenda, reaching the furthest behind, looking for a comprehensive strategy that includes impairment and also other marginalized identities.

And the fourth one that I wanted to highlight is about to have all of this evidences, we need reports, research, documents on the issues of women with disabilities, the issue of violence within the private sphere, climate change, economic and employment status, intersectionality that impacts the daily realities of women with disabilities. And we need to frame these realities to do our advocacy and lobby with our government, development partners, lobby for the investment, resources, and research, which is a barrier for women with disabilities.

Finally, we want to bridge the gap. We want to break the silos. We want to dismantle the single linear approach that women with disabilities are facing a major barrier, historical and structural barrier has not been part of the discussion. We have concluding observation and the implementation of the CRPD on the ground at the national level.

So, we have to frame within the disability and the gender movement, so we want to have the policies that address multiple and intersectional discriminations collectively. Coming together from the global that links at the local level, so if we ensure all the five main barriers for women with disabilities from local to the global level, we feel and we accept that we can lead the world and our rights will be recognized and realized both from private and the public sphere.

This is what all women with disabilities, including all underrepresented groups want and want to struggle for it and we want to fight for it and this is a continuing journey. Thank you.

>> LUCY RICHARDSON: Thank you so much, Pratima. It was wonderful to hear your perspective. I'm going to pass over to Yeni Rosa now. Yeni Rosa, over to you.

>> YENI ROSA DAMAYANTI: Hello. Hello, Lucy. Can you hear me?

>> LUCY RICHARDSON: Yes, we can hear you. Go ahead. Thank you.

>> YENI ROSA DAMAYANTI: Okay. Yeah, good evening. It is evening here. I'm glad that we are given the opportunities to participate in this discussion. I'm Yeni Rosa from Asia Pacific regional for people with psychosocial disabilities in Asia. When we talk about the barrier faced by women with psychosocial disabilities, there are two things to come to mind because they're the two biggest problems that we face.

First is the lack of legal capacity and second is inclusion in the sphere. This is quite a perspective of issues that face particularly for women with psychosocial disabilities. Not many other disabilities face this particular problem.

Lack of legal capacity, for example, women with psychosocial disabilities, it's automatically deemed as lacking be ability to make decisions and lacking the capacity, the legal capacity so must be under guardianship. And we're talking here at least for countries in developing countries but Asia, not only legal guardianship by court decision, but often times this is informal guardianship. This informal guardianship doesn't have to go through court. It is without any legal process but perspective for everybody including the government.

And the consequents of the lack of legal capacity we cannot decide for ourselves for everything, the families they cover of our decision and one of the most dire consequences of this lacking of legal capacity is that many women with psychosocial disabilities are put without in the situation. In Asia there are women put under mental institution and depends more than 100,000 women with psychosocial disabilities in situation and that can be there for months, up to years, up to 10 years, up to, you know, for life.

>> LUCY RICHARDSON: Yeni, for a second, I can get you to pause for a minute. It looks like we're having a technical difficulty with the CART and the interpreter.

>> YENI ROSA DAMAYANTI: Okay.

>> LUCY RICHARDSON: Sorry to interrupt you. Just one moment.

>> YENI ROSA DAMAYANTI: No problem.

(CART is back).

Okay. So the CART captioners lost the signal and they're going to reconnect. Thank you, everyone, for your patience. This is definitely one of the problems of trying to do everything online and do everything online, so we're trying to fix the difficulties. Thank you so much for your patience patience.

(CART is back).

>> LUCY RICHARDSON: I'd like to take the opportunity as well to say that if it you haven't seen it yet, the International Disability Alliance website has a dedicated page on the COVID response where they are ‑‑ where we have collected the resources and materials relating to persons with disabilities and the crisis.

It looks like CART is back. Fantastic. Thank you for your patience. Thank you, Yeni Rosa and we'll put you back on. Thank you. Go ahead, Yeni Rosa. Thank you.

>> YENI ROSA DAMAYANTI: Yeah. Like what I said before, two things that are the biggest barrier for us of women with psychosocial, of course, it's legal capacity and second is the mental institution. Like I said, women with disabilities are in mental institution and but the issue of institutionalization on by women with psychosocial disability groups, we would like to please state the issue of institutionalization of women with disabilities. There are thousands, like what I said before, in alone, more than 100,000 women with disabilities psychosocial disabilities are the same in prison‑like mental institution. And the institution, the mental institution, the situation is dire because for example like in Indonesia, it's it's really like on the ground people, it's not liberty and aren't allowed to go out of institution, and there are a lot of sexual abuses and sexual harassment and forced sterilization happening in the institution without anybody saying because there is no no complain. All of them in facilitation for women of sexual violence and not available for women with disabilities who are contained or detained in mental institution. They're merely cut off from the rest of the world, so it is a very important issue. There are thousand, thousand, thousand, hundreds of thousands of women, the psychosocial disabilities in institution and this is a very serious problem.

And in relation to COVID19, this is also one of my biggest concerns. There is the situation of mental institution is including the non‑medical because that's kind of mental institution with the medal in the medical institution and the other is the non‑medical medical institution and in many countries, in developing countries, the institution is the non‑medical or what we call the socio‑‑ institution. The institution, the social care institution is way worse than prison. Way worse. Because like what I said before, there is no laws that regulate things, the care institution. It's really up to the management of the mental institution themselves how to regulate this, and it's relating to COVID19, the situation in mental institution is like, how do you call it? It's like petri dish for coronavirus. Because in many institutions, in one room there are about 20, 30 women in one ward, in one room all together, and the situation is very bad. It is very bad. There is no facility to wash hands and soap. There is no precaution of the staff who are taking care of them not to spread the infection from the outside. And the worst, and even worse because women with psychosocial disabilities the same in the institution are considered not able to think. They're left behind in the information of coronavirus. Almost all of them do not have access to information. There are no phones, no Internet, no media, no television, they're cut off from the rest of the world and they're lacking in the information of COVID19 or coronavirus. Really, very vulnerable. And this is limitation, crowded rooms, no communication, a lot of violence, and if one of them gets infected, then the whole rest can get infected. At the end, mental institutions can be like actually for women with disabilities, and initially it's hard to raise this issue to get, you know, to have intervention. We need to really push this issue about the COVID19 in the relating to persons with disabilities confined in the institutions as a very pressure issues of, a priority that has to be here. So that is my concern on the situation of women with psychosocial disabilities and the barriers and the relation with the COVID19 problem.

Regarding the position of women with disabilities in the women movement, one of the things that comes to mind is that at least this is the situation that I observed in southeast Asia. Women with disabilities group and movement still few from the point of view of women's rights so we're not considered as their equal. They more see us as not as a fellow advocate but more like object that is ‑‑ not as equal and not as fellow advocate.

And regarding the position of women with disabilities and the women with disabilities issue in the disability movement I see that the issue with women with disabilities is rarely faced in the movement of women disability movement. And within the disability movement, I'm not talking only about the women with disability, but within the disability movement, the issue is seldom raised, and there is also another issue seldom raised by the disability movement, which is domestic violence. Domestic violence is one of the most important issues within the women movement, but it's threat is found in ways in the disability movement, and there are many cases in which the perpetrators of the domestic violence are men with disabilities, and like hesitation of the issue with domestic violence with the people with disabilities, so we'll kind of disturb the image of present with disabilities and domestic violence can show that persons with disabilities is not only victims of injustice but can be perpetrators of violence, and this is probably one of the things that makes the issue never really raised within the disability movement.

Another one that I observe is that as women, it's not developed only with women with disabilities. I remember a long time ago, like 20 years ago when women movement from the gender trainings all over the world, like in mega (?), women with disabilities like were left behind and they never invited women with disabilities to join those gender trainings, and those gender trainings is their basic or their way to raise the women issues and becoming like the ‑‑ like a foundation for women groups to really strengthening the women movement, but many women with disabilities never participate in any gender training, so there is a lack of understanding about gender issues, lack of consciousness of women and the rest contained, that makes the women rights issue is not just from women necessarily, so what to do, I think it is very important for us to really start over the gender training for all women with disabilities.

For example, maybe only two or three gender trainings that ever conducted for women with disabilities, and like what I said before, during the times when there are thousands of gender trainings all over the word, we were left behind and we were not invited in those trainings and so we have a lot of things to catch up.

And number one that I also observe, every time we have a conference, a meeting of women with disabilities, we never really invite participation from women organizations or women movements, so that seems like this is two movements that separate and there is no bridge to really unite these two movements, so it would be really nice if we could have an event in which women with disabilities and womens movement in general sit together and discuss issues of women, and that's also, as women with disabilities we need to start the raise the issues, not only disability issues, but women issues in general.

So, yeah, that's all my input in this discussion and conversation. Thank you very much, Lucy.

>> LUCY RICHARDSON: Thank you very much. I will give a minute for the interpreters and CART captioners to catch up and then over to An Sofie of the Beijing + 25 paper. Over to you An Sofie. An Sofie, if you are online? I'm sorry, we've had a lot of technical difficulties here.

So we are all very keen to here from An Sofie about the Beijing + 25 paper, but it seems we cannot hear her. At the end of the webinar, we might have a chance to get her online. So thank you to everyone, our panelists discussing question one about barriers for women with disabilities.

Next, we're going to go on to the question of strategies. We are going to start with Rosario. Over to you Rosario.

>> ROSARIO GALARZA: Thank you. Could you hear me, please? Can you hear me?

>> LUCY RICHARDSON: Yes, we hear you. Go ahead.

>> ROSARIO GALARZA: Okay. Thank you so much, Lucy. Also Go To Webinar so finally I fix it.

So, well, I want to talk about women and girls with disabilities in situations of risk from humanitarian emergencies. Women with disabilities estimate 50% of the population and face multiple forms of discrimination adding to the suffering of violence, abuse, and exploitation.

Most of the girls and women with disabilities in effective population, countries are not heard, also the capacities are not recognized and they have later opportunities to participate in decision‑making processes.

There are, however, some strategies that we need to use in order to promote inclusion of women and girls with disabilities in humanitarian action, and this are strategies that can be used by humanitarian actors and other stakeholders and are included but not limited to advocacy and technical support to organizations of women with disabilities, positioning of women with disabilities in leadership roles in humanitarian organizations in programs and activities, and also these strategies have wide ranging impact on the inclusion across humanitarian response by bringing appropriate expertise demonstrating skills and capacities, raising awareness among humanitarian actors and affected populations.

We need to value this organization of women with disabilities and try to involve them in humanitarian actions, especially in countries that are affected by humanitarian crisis from the onset of an emergency through to the recovery and development because they face different barriers and lack of funding and lack of organizational capacity.

Especially women with disabilities are excluded from disability and from the women's rights movement, and this exclusion further hinders the capacity development and leadership opportunities in the humanitarian sectors.

One strategy could be to promote effective inclusion of women and girls with disabilities in humanitarian action through doing collective actions by states, UN Agencies, humanitarian development, and disability actors. Also, we need to increase the support to organizations of women with disabilities to providing capacity building to use their expertise in humanitarian issues.

Also, we need to advance gender equality and humanitarian of development organizations, but certain targets are monitoring the level of women with disabilities and participating in mitigation and capacity building.

We need also to commit them to monitor the progress of gender equality and also to support implementation of the Sustainable Development Goals and the core commitments from the World Humanitarian Summit.

It's also important to promote the leadership of women and girls with disabilities in humanitarian action, doing partners of organization with women of disabilities to provide capacity building and on the humanitarian system and also recruiting women with disabilities as community volunteers and staff to ensure representative women in the field.

I think also in the situation of COVID19, it is really important to reflect about the strategies because now women with disabilities are being affected by different issues of lack of food, medicine, and that's why it seems to be that it's important for governments to make aware of these important strategies to include them from the beginning and not at the end or not with respect to having this kind of crisis to include them. Thank you so much.

>> LUCY RICHARDSON: Thank you, Rosario. I'm going to pass it over to Pirkko now. Pirkko, over to you.

>> PIRKKO MAHLAMAKI: Thank you. I'm showing the webcam for a moment so you see all the wonderful makeup I put on for your benefit, but seriously, in these times I was asked to discuss about the effort of engagement of CEDAW and particularly my experiences one of the earliest panelists said about bridging the women movement and disability movement and that's exactly what EDF is trying to do together with the European Women Lobby and it's even with my colleagues, Ana, and other colleagues and it's now my honor to be representing disabled women within the European Women Lobby, so we are very, very appreciative involved, and also bringing the disability perspective into the feminist discussions and trying to also enhance further and more effective inclusion of minority women in the work of the mainstream women movement.

But in terms of the CEDAW, I can we are very proud to have visible participation within the committee. We have, after a very successful campaign, we have a colleague, anna, who is now a first woman with disabilities as a member of the CEDAW committee and so we're in the room with the CEDAW Committee reflect it's on issues that affect all women and also women with disabilities.

Also, we are participating in treaty monitoring in that EDF supports our member organizations to send alternative reports and submissions to the CEDAW Committee to ensure that the voices of women and girls with disabilities are fully included in the concluding observations given to states. Okay. I seem to have lost the picture of the interpreter. Am I talking too fast?

Okay. Good. I'll continue. Okay, so the ‑‑ so we're working in this in close cooperation with International Disability Alliance, and as an example, I would note that we have sent a solution on the CEDAW general recommendation on trafficking in the context of global migration where women and girls with disabilities are particularly vulnerable to the risks that their situation entails.

And, also, as all things global, also local and national, we are participating in the implementation at the national level supporting our members in their advocacy and in that, I would like to have a finished example, and from Finland, my of is he, we have been for a long time alerting the CEDAW Committee and other treaty bodies to the situation of lack of shelter places and accessible shelter places, and we have been in a long‑term campaign to have the accessibility of shelters audited properly, and sadly, it's a campaign that's still going on but we will not give up easily.

It's important that the awareness is increasing that women with disabilities are a significant minority and our needs need to be adequately considered and addressed in cooperation with them. And if you allow me a short reminder of the COVID19 situation we're all living under, in my country, we have had a very good cooperation with the national ministries highlighting, for example, the fact that personal assistants are other care workers, support workers for people with disabilities are that they should be included in the lists of critical professions that are allowed to continue to work under the lockdown conditions and also we have been come paining on the issue of PPEs, protective equipment for care workers and assistants, and we have also been very vocal in any discussions that relate to prioritizing and rationing of care and ventilators.

And, although it's a very risky situation and a sad situation that we keep hearing that some of our colleagues, that the disabled people are not tested for COVID, they're not considered a COVID casualty, they're not included in the statistics, and this is something that we also very much are raising our voices to make sure that our said involvement in this catastrophe is also noted, and in particular in terms of the access to care and intensive care, so I'm just thanking everyone in IDA and EDF for their good ‑‑ for their good work and I hope we can ‑‑ we can continue that even in this exceptional circumstances. Thank you.

>> LUCY RICHARDSON: Thank you so much, Pirkko. We're going to pass over to our colleagues Rupsa and Lisa. I think we will have Rupsa speaking. Over to you.

>> RUPSA MALLIK: Thank you, Lucy and good evening and good morning to all the panelists and colleagues that are attending this webinar. First of all, you know, a big thank you for inviting to be part of this amazing conversation.

I'm going to not take too much time but I just wanted to, and whatever I share is things that Lisa and I jointly thought would be important to share with all of you. Unfortunately, I think she's not able to get on. She's able to hear but not speak.

I think first and foremost just listening to all the panelists, one thing that struck me, and I think even what is so stark today in the COVID19 response is sort of this framework of normative framework that really in so many ways guides whether it's a COVID19 response or lack of inclusion of women with disabilities historically or the kinds of eugenic policies that continue to be factors in many countries in the way of sexual and reproductive health and rights is thought about.

And I think, you know, these frameworks, patriarchies have seen these sort of frameworks through much of what we've been able to accomplish as the movement is limited, so I feel that there is a deep need for movements to come together to get into these frameworks and put through something more transformative and really influences radical inclusion and really use strategies of engagement like the colleague from Finland just shared, and mentioned treaty bodies, et cetera, is there a way to challenge the language of what is put out, let's say, to the concluding observations.

The other big piece that stood out for me, and I think that was in the feminist and women's rights movement that we often talk about is multiple and intersecting forms of discrimination, and think even as we've done that, I think our biggest failures has been really not to extend analysis to meaningfully include women and girls with disabilities in particular, directly also within the whole larger community of persons with disabilities, or certainly not homogenous at Pratima highlighted. I think there is a particular gender experience of disabilities and women and girls experience and that's particular in the civilization I think has been both damaging, harmful, and contributed to a range of violations and limited fair access to justice.

And I think just to stretch that a bit further, I think by not being able to include, you know, women and girls with disabilities in this framework of understanding multiple and intersecting forms of discrimination, as a result, resulted in their lack of inclusion in other justice rights‑based movements and that is something, again, I think our colleagues here have highlighted, and I think which has in so many ways has, in fact, limited the gains of these justice movements because I think when there is real and meaningful inclusion, not just women and girls with disabilities gain, but I think all women and girls will gain. So I think that's the other sort of limitation I would consider as what we as women rights movements have been able to accomplish or bring forward meaningfully.

I think the full body of work that has happened on ‑‑ you know, in the early days violence against women and subsequently gender‑based violence, if you just think about the CEDAW, et cetera, again, we've been so limited in the way we've approached, you know, remedies or to violence or access to justice in question because we just left out this large constituency in that thinking and in that approach.

And I think more importantly, I think ‑‑ you know, the fact is that even today, even as we speak the language of inclusion, I think we've not just meaningfully invested in thinking through issues of accessibility and reasonable accommodation, and by that I just don't mean the collective accessibility and reasonable accommodation and limited sense of assistance, but really a more expansive framework to which women and girls with disabilities can, indeed, come into our spaces, come into our movements, conversations, you know, as an equal participant and not just, you know, as a tokenistic form of being included.

I think, you know, just to quickly speak to a couple of strategies, and I want to flag it here. One is, I think we talk a lot about cross‑movement alliance building, but I think, you know, it's not enough to think about cross‑movement alliance building without thinking through how does it engage meaningfully with questions of leadership both across movements and within movements and I think that's a question and strategic question that I think we need to address to really ensure meaningful cross‑movement alliance building, that's only concern. You know, now I feel it's all the terms of engagement have often been set by the other movements and when we've needed something we've come to your movement, and we've come because we needed your involvement, but I think the terms of engagement really need to change radically for it to be a meaningful cross‑movement alliance building.

And I think the other final point I want to make, and I think it's been starkly represented today in the COVID response is really the lines that have existed between our movements on some of the critical issues, and I think particularly here I'm thinking things like forced sterilization, I'm thinking the contentious issue of abortion and prenatal testing and a number of other things, as the issue of legal capacity, and how as a woman's movement, even as we thought about autonomy, you know, choice, we've never really seen the whole problematic and deeply harmful issue of denial of legal capacity to women and girls with disabilities.

So I think, you know, we confront these and create these spaces like this in this COVID lockdown world of webinars where we can find spaces to really share some of these difficult issues and build those alliances through ‑‑ I wouldn't say consensus building, but to be able to feel that there is a space in which we are able to speak openly and really engage critically on some of these issues. I think those could be really important strategies moving forward to really forge a kind of cross‑movement alliances that I have heard a lot of families express the need for. Thank you very much, Lucy, and everyone else.

>> LUCY RICHARDSON: Thank you so much, Rupsa. It's really great to have you join us today for this webinar and give us these very valuable perspectives.

I'm going to hand over in a minute to An Sofie interest European Disability Forum to give an rover view of the paper, and then we will hear from Amanda with Women Enabled International, briefly, on their initiative on the statement on rights at the intersection of gender and disability during COVID. And then we'll have Pirkko lead the answering of some of the questions that have come to us via email and via the question and chat box in the webinar.

So, over to you An Sofie and just being conscious of time, we've got about 15 minutes left so we'll try to hit the time. Thanks, An Sofie.

>> AN SOFIE LEENKNECHT: Thank you so much, Lucy, and thanks everyone for your patience with the technicalities. So I'm very briefly going to go over some of the recommendations that we have prepared in this paper to influence, you know, the global gender equality agenda and more specifically the Beijing + 25 review process. This paper was developed together with the taskforce of disabilities of whom many have spoken this morning and this afternoon.

We had identified five issues that also I've heard many of the panelists already talk about, so the first issue that we had identified that women and girls with disabilities face is this intersectional and multiple forms of discrimination, and the fact that not only discriminate on the basis of disability, but also their gender, race, sexual orientation, age, as many other grounds and the fact that many other women with disabilities are also from excluded groups within society, such as we heard from the indigenous women, from women with psychosocial disabilities, and so the recommendations we have made in this regard is that laws and policies should protect women and girls with disabilities from these forms of discrimination and that their rights should be mainstreamed in gender policies, but that also specific positive action measures should be taken, so we should have this twin‑track approach.

Women and girls with disabilities and their organizations should be fully involved in all policies on gender equality and all other relevant matters, and when designing and implementing these policies, policymakers should reach out to the most excluded groups by ensuring that consultation is in accessible format and that also disability and age‑appropriate assistance is provided. So these are some of the recommendations to the first issue.

Then the second issue we had identified, the second barrier that we had identified is on the strict and repressive control of sexual reproductive rights and health that still too many women with disabilities face, including forced sterilization and abortion. So here again, all laws that violate these rights should be eliminated, and information should be provided to all women and girls with disabilities and professionals in this area should be trained to some of the recommendations that we have identified with regard to this issue.

The third matter which we've heard already, unfortunately, many testimonies this morning was on violence, and the fact that 80% of women with disabilities are victims of violence. In Europe, for example, two to five times more likely to be a victim of sexual violence. So here again also the perspectives of women and girls with disabilities should be included in all policies preventing and combating violence and all complaint and support services for victims of violence should be fully accessible and access to justice should be guaranteed.

On the fourth barrier that we had identified was the denial or the restriction of legal capacity. We've also already heard about it this morning. The fact that women with disabilities are deprived of their legal person and they cannot take any decisions anymore about their own lives without their consent, so of course, our recommendation was for systems of guardianship to be abolished and to be replaced by systems that provide support to women and girls with disabilities to make their own decisions upon their own requests.

The last barrier that we had identified was already also been touched upon many times. The fact that women and girls with disabilities are still invisible in the political area, and here we recommended for policymakers to adopt laws and policies that support and build the capacity of women and girls with disabilities and their organizations so that they can be meaningfully represented, not only at the national but also the international level in their political processes, and for example, during the Beijing + 25 review processes and other important processes and UN initiatives.

So these were some of the barriers we identified, recommendations that we made, and of course, we hope that the Beijing + 25 process and all related gender equality agendas at the international level will include the voice and perspective of women and girls with disabilities, and that IDA through its members also can be fully and meaningfully involved in these. So these were some of the recommendations that we have made and a really short snapshot, Lucy, I give it back to you. Thank you.

>> LUCY RICHARDSON: Thank you so much, An Sofie. It's great to have you mention that paper. We will also have this available, this paper will be available online.

I'm going to hand over quickly to Amanda who is from from Women Enabled who will just introduce their initiative. Over to you, Amanda.

>> AMANDA: Hi, everyone. This is Amanda from Women Enabled International and thank you so much for allowing me to introduce the topic this morning. I wanted to alert you all that Women Enabled in conjunction with a number of organizations around the world, including Disabled Women Africa, women with disabilities Indian network, and among others have developed a statement on the rights at the intersection of gender and disabilities during COVID19.

We have just sent that out this morning via the various list serves and I'm also putting it in the Chat Box where you can read that statement and we hope that many of you will endorse it and be able to use it in advocacy work.

Women Enabled has also sent out a survey asking several questions about how women with disabilities are being affected during this crisis, and how we can work to ensure rights at the intersection of gender and disability during this crisis. I will also put it in the Chat Box and it's availabled on the website which is womenenabled.org. It's wonderful to hear you all speak and hear about all the work that everyone is doing on this topic around the world.

>> LUCY RICHARDSON: Thank you so much, Amanda. It's really great to hear from Women Enabled on this event and hear about these initiatives that are very important at this time.

Now, we don't have long left and we have many really good questions that we have received from participants throughout this event. I want to say that we will be having a dedicated web page for this topic *Women and Girls with Disabilities in the COVID Crisis* and we'll share that link in the Chat Box and also send it out to everyone who registered for this event.

We are also looking at doing a Facebook Live in the future and perhaps looking at some other ways to engage on this very important topic. Now, we will address a few questions now and I will hand over to Pirkko who will introduce some of these questions and have our panelists answer. Thank you, Pirkko.

>> PIRKKO MAHLAMAKI: Thank you, Lucy. The most important, I think at the moment, questions are related to the COVID crisis, particularly questions have been made about the gender‑specific measures adopted by the different governments for women with disabilities. If you have found any good examples of such specific. And also in terms of the data disaggregation based on disability even with WHO, and why is this? Why is it so difficult to have disaggregated data? That might make our global voice and will make our global voice much stronger.

Also, the materials should be more in accessible alternative formats. Even those shared by WHO and UN Agencies, so strategies that you would suggest for those UN organizations, and then questions about ‑‑ a very interesting question. What makes women and girls with disabilities vulnerable to COVID19, and what preventive measures should be taken to protect them?

And then about the special treatment and services they need if they will be having this illness. And then questions about violence, the three types of violence at home and in the community; and also, the risk of disabled women becoming subject to violence during this lockdown.

And are there any statistics on abuse of women and girls with disabilities during isolation, such as this lockdown worldwide? Those were the questions I received.

>> LUCY RICHARDSON: Thank you so much, Pirkko. We do have quite a few panelists who are able to answer, so perhaps I will just, you know, go to our different panelists and see what they have to say. I'll start with you, Judith, go ahead, Judith.

>> JUDITH EKAETE UMOAH: Okay. I just wanted to comment on the last part about vulnerability of women with disabilities, for especially vulnerable women. That is a very good question. Even when the question come up, I was also thinking, I think at this point in time with all the donors and tools around COVID19 and taking different ways for sexual and health issues, and how we would need, for instance, our assistants to change our signage ‑‑ and all of these specific changes I would need to look for for those that are vulnerable. So at this point in time, we concern ourselves not only with the particular system, you know, so it's not just taking questions for ourselves but for tools, and I think that is a important aspect we need to be looking at. I'm just narrowing down to that, but again think about single mothers with a disability who ordinarily without COVID precaution and doing so much things, but now having to be extra, extra careful. Women in the face of poverty, women with disabilities and far more than people with disabilities. And so imagine the lockdown, you can impact as to having ‑‑ those are the few agenda‑specific and disability‑specific during lockdown and I think my colleagues can say as it is this way.

>> LUCY RICHARDSON: Thank you so much, Judith. I'll hand it over to Pratima to hear her thoughts on these questions. Pratima, go ahead.

>> PRATIMA GURUNG: Thank you, Lucy. So I'll just question ‑‑ I'll just answer to the question about what makes vulnerable and are there any kind of strategies. So, in this regard what I want to highlight is we've been discussing a lot about intersectional and multiple identities that we as women with disabilities or we as indigenous women with disabilities have, and due to this multiple identities, we have our different needs and our different support system.

For example, when we look from indigenous women with disabilities, for me the sign language as well as the mother tongue language is equally important. So how do we blend? In some circumstances and in some situations, the issue of individual rights and collective rights comes together, so we have to ‑‑ we have to analyze and we have to articulate and women with disabilities, including indigenous women with disabilities are not in those situations to identity each and every identities, trying to see the differences and also trying to see common places. And due to this situation, most often girls having multiple identities become more vulnerable.

And now the second answer that I wanted to focus on is about when we see our traditional approach, the gender lens approach or the disability lens approach, as I've already discussed earlier, it's always a single linear model and that has not addressed the issue of the groups that have multiple identities, and that is why we see that in our country context at the national level, also, the government and the policies, even at the emergency situation are the same policies which were existed before, so they're looking at a single linear model for looking at the gender lens. So when they look at the gender lens, women with disabilities are being left behind, so when they look at disability framework, again, underrepresented groups like indigenous women with disabilities are left behind, and that is why we are not able to come collectively and bring our strategies so that we could enable them to show our best practices, but that doesn't mean that ‑‑ that doesn't mean that there is not any kind of examples. Some examples at the community level have worked at the grassroot level and this is why people with disabilities still now, we haven't found any data that they are directly impacted by the COVID situation. So this is what I just wanted to highlight. Thank you.

>> LUCY RICHARDSON: Thank you so much, Pratima. Could we hear from Rosario now? If we have you on the phone there, Rosario?

>> ROSARIO GALARZA: Okay, Lucy. Well, I would like to take maybe the question about what the governments are doing now. I think at least in Latin America region, maybe most of the governments are more concerned about how to stop this situation and they are not addressing, especially, needs for women and girls with disabilities.

However, Civil Society organizations are doing a lot of efforts to draft not only statements but also to have online meetings with official representatives from the government, and especially in Peru, for instance, we have like a movement of disability advice comprised by NGOs and also persons with disabilities, and we're having some online meetings with the ministries and in order to make them aware of the need to include persons with disabilities and especially women and girls, and we're also conducting a survey about if women and girls with disabilities are suffering violence, now we're in quarantine period.

These are am so of the efforts, and also maybe the good news is in case of the Peruvian Government, they are working so hard in order to enact like a legislative decree, a regulation about how to protect persons with disabilities in situations of risk and humanitarian emergency, because even though we have national law of disabilities, in this law, it is not considered this issue but now with this legislative decree, we are going to have this kind of regulation to promote the inclusion of persons with disabilities in situations of humanitarian emergencies.

Thinking also about the other question about what makes vulnerable the populations of persons with disabilities and especially women and girls, so the lack of information because most of the information is not accessible, especially for women with sensory disabilities because deaf women, because they don't have sign language interpreters and also for deaf/blind it's very difficult to have access to information if they don't have interpreters.

And now because people are isolated at home, they don't have the opportunities to have interpreters. Also, they don't have the opportunities to have personnel assistant services to buy grocerie,s, to buy medicines, to do really activity, and that's why I mean this also is very important also to mention about the personal support that now people with disabilities need because they're now isolated at home and some don't have Internet connection and don't have communication with families, and we need to provide this kind of emotional support. Thank you.

>> LUCY RICHARDSON: Thank you so much. Now, I'm just very conscious of time here, and I just want to open the floor to our other panelists, Yeni Rosa, Villaney, and Pirkko, if there is anything you want to add before we close.

>> PIRKKO MAHLAMAKI: Lucy, about the issue of increased domestic violence, also that also involves women and girls with disabilities and I think we need to be very strategic in looking forward in how to engage with governments so that they support systems and strategies that are put in place to deal with the consequences and the problems that have raised during this crisis.

We'll also address the specific issues of women with disabilities.

>> YENI ROSA DAMAYANTI: Hello, Lucy. I would like to add or underline the importance to give attention to women with disabilities who are detained in mental institutions.

So prisoners already from policies to release them earlier, but for women with psychosocial disabilities who are detained in institutions, many of them will not have place to go so the policy to release them from the institution is not that easy, so we really need to find a way or how to protect them from this COVID19 pandemic. Thank you.

>> LUCY RICHARDSON: Thank you so much. So, looks like we're running law on time here and it is really great to see how interested people are and how people are recognizing the urgency of the situation and the need to act to ensure the rights of women with disabilities during this crisis time.

Now, this is really just the beginning of this very important situation, not only from outside from IDA and EDF and our panelists, but from the Gender Equality and Disability Rights Movement as a whole, and we would really like to continue this conversation through virtual means, given the situation that we're in, and what we will be doing is sending out a follow‑up email to everyone who registered for this event and giving links to some of the topics that we talked about today. A questionnaire, if there are any questions that you wanted raise that we weren't able to address today, and very importantly, the links to the dedicated web page on this topic and this event.

We would really like to have some more events in the future, such as Facebook Live and other social media events. We would encourage you to follow the International Disability Alliance on social media and to check out our web page with the dedicated resources on COVID.

Finally, I would like to say thank you so much for your patience with our technical difficulties. It's quite difficult sometimes to be online and in touch with everyone when we're all trying, you know, to use the Internet from home and connect remotely, but I really thank everyone for their patience, and I really would like to thank the interpreters and our captioners for their excellent work over this extended timeframe, especially as we're going past time.

I would like to thank, again, the Ministry of Foreign Affairs Finland for share financial support to the women with disabilities flagship initiative under which this webinar is organized.

Finally, thank you so much to all of our panelists and all of our attendees and all of our organizers, everyone who came together to make this virtual event a reality, and we'll be sending the follow‑up so that we can keep the conversation going.

Thank you and good night, good afternoon, and have a good day. Good bye.

(session completed at 9:27 a.m. CST)

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