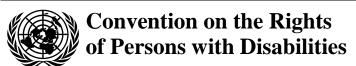
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#### **Committee on the Rights of Persons with Disabilities**

## General comment No. 3 (2016)

## **Article 6: Women and girls with disabilities**

- 1. The present draft was prepared by the Committee on the Rights of Persons with Disabilities in accordance with rule 47 of its rules of procedure, which states that the Committee may prepare general comments based on the various articles and provisions of the Convention with a view to assisting States parties in fulfilling their reporting obligations, as well as paragraphs 54–57 of its working methods.
- 2. There is strong evidence to show that women and girls with disabilities face barriers in most areas of life. These barriers create situations of multiple and intersecting forms of discrimination against women and girls with disabilities, particularly, with regard to equal access to education, access to economic opportunities, access to social interaction, access to justice and equal recognition before the law<sup>1</sup>, the ability to participate politically, and the ability to exercise control over their own lives across a range of contexts, for example: with regard to healthcare, including sexual and reproductive health; and where and with whom they wish to live.

#### I. Introduction

3. International and national laws and policies on disability have historically neglected aspects related to women and girls with disabilities. In turn, laws and policies addressing women have traditionally ignored disability. This invisibility has perpetuated the situation of multiple and intersecting forms of discrimination against women and girls with disabilities<sup>2</sup>. Women with disabilities are discriminated against on the grounds of gender and/or disability, or other possible grounds.

<sup>&</sup>lt;sup>1</sup> WHO and World Bank (2011). World Report on Disability, WHO Press, Geneva, p: 60;

<sup>&</sup>lt;sup>2</sup> See http://www.un.org/womenwatch/enable/

- 4. Terminology used in this general comment includes:
- a. 'Women with disabilities' refers to all adult women, girls and adolescents.
- b. Sex and gender: Where sex refers to biological differences and gender refers to the characteristics that a society or culture delineates as masculine or feminine.
- c. Multiple discrimination is a situation where a person can experience discrimination on two or several grounds, in the sense that discrimination is compounded or aggravated<sup>3</sup>. Intersectional discrimination refers to a situation where several grounds operate and interact with each other at the same time in such a way that they are inseparable<sup>4</sup>. Grounds for discrimination include, but are not limited to: age, disability, ethnic, indigenous, national or social origin, gender identity, political or other opinion, race, refugee, migrant or asylum status, religion, sex, or sexual orientation.
- 5. Women with disabilities are not a homogenous group. They include: indigenous women; refugee, migrant, asylum seeker and internally displaced women; women in detention (hospitals, residential institutions, juvenile or correctional facilities and prisons); women living in poverty; women from different ethnic, religious and racial backgrounds; women with multiple disabilities and high levels of support; women with albinism; and lesbian, bi-sexual, transgender women, and intersex persons. The diversity of women with disabilities also includes all types of impairments which is understood as physical, psychosocial, intellectual or sensory conditions which may or may not come with functional limitations. Disability is understood as the social effect of the interaction between individual impairment and the social and material environment, as described in article 1.
- 6. Gradual changes in law and policy have occurred since the 1980s and the recognition of women with disabilities has increased. Jurisprudence developed under the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) have highlighted concerns that need to be addressed regarding women and girls with disabilities and recommendations to be implemented. At a policy level, various United Nations bodies have started addressing issues facing women with disabilities and a number of regional strategies addressing disability inclusive development include them.
- 7. Article 6 of the Convention is a response to the lack of recognition of the rights of women and girls with disabilities, who worked hard for its inclusion in the treaty text. It reinforces the non-discriminatory approach of the Convention in its particular application to women and girls and requires that States parties go beyond refraining from discriminatory actions, to adopting measures aiming at the development, advancement and empowerment of women and girls with disabilities and promotes measures to empower them, by recognizing these constituencies as distinct right holders, providing channels for voice and agency, raising their self-confidence and increasing their power and authority to take decisions in all areas

<sup>&</sup>lt;sup>3</sup> CEDAW General recommendation No. 25, on article 4, paragraph 1, of the Convention on the Elimination of All Forms of Discrimination against Women, on temporary special measures para 12.

<sup>&</sup>lt;sup>4</sup> CEDAW/C/2010/47/GC.2, para. 18.

affecting their lives. Article 6 serves as an interpretation tool to approach the responsibilities of States parties across the Convention, to promote, protect and fulfill the human rights of women and girls with disabilities, from a human rights-based approach and a development perspective.

- 8. Gender equality is central to human rights. Equality is a fundamental human rights principle that is inherently relative and context specific. Ensuring the human rights of women requires, firstly, a comprehensive understanding of the social structures and power relations that frame laws and policies as well as the economy, social dynamics, family and community life, and cultural beliefs. Gender stereotypes can also limit women's capacity to develop their personal abilities, pursue their professional careers and make choices about their lives and life plans. Both hostile/negative or seemingly benign stereotypes can be harmful. There is a recognized need to address harmful gender stereotypes in order to promote gender equality<sup>5</sup>. The Convention equally enshrines an obligation to combat stereotypes, prejudices and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life<sup>6</sup>.
- Article 6 is a binding non-discrimination and equality provision that unequivocally outlaws discrimination against women with disabilities and promotes equality of opportunity and equality of outcomes. Women and girls with disabilities are more likely to be discriminated against than men and boys with disabilities and the larger population of women and girls.
- The Committee notes that contributions from its half day of general discussion on 10. women and girls with disabilities which took place during its 9th session in April 2013, highlighted a range of topics and identified three main subjects of concern with respect to the protection of their human rights: (1) violence, (2) sexual and reproductive health and rights and (3) discrimination. Furthermore, concluding observations issued by this Committee to date on women with disabilities express concern about: the prevalence of multiple discrimination and intersectional discrimination against women with disabilities<sup>7</sup>, on account of their gender, disability and other factors<sup>8</sup> which are not sufficiently addressed in legislation and policies<sup>9</sup>; the right to life<sup>10</sup>, equal recognition before the law<sup>11</sup>, the persistence of violence against women and girls with disabilities<sup>12</sup>, including sexual violence<sup>13</sup> and abuse<sup>14</sup>, forced sterilization <sup>15</sup>, female genital mutilation <sup>16</sup>, sexual and economic exploitation <sup>17</sup>;

<sup>6</sup> CRPD art. 8

<sup>&</sup>lt;sup>5</sup> CEDAW art. 5

<sup>&</sup>lt;sup>7</sup> See, for example, CRPD/C/SLV/CO/1, para.17; CRPD/C/UKR/CO/1, para. 9.

<sup>&</sup>lt;sup>8</sup> See, for example, CRPD/C/AUT/CO/1, para. 17, CRPD/C/ECU/CO/1, para.16.
<sup>9</sup> See, for example, CRPD/C/BRA/CO/1, para.16; CRPD/C/EU/CO/1, para. 20

<sup>&</sup>lt;sup>10</sup> See, for example, CRPD/C/MEX/CO/1, para. 34, CRPD/C/AZE/CO/1, para. 18.

<sup>&</sup>lt;sup>11</sup> See, for example, CRPD/C/ARG/CO/1, para. 31.

<sup>&</sup>lt;sup>12</sup> See, for example, CRPD/C/BEL/CO/1, para. 30.

<sup>&</sup>lt;sup>13</sup> See, for example, CRPD/C/AUS/CO/1, para.16, CRPD/C/CHN/CO/1, paras. 57, 65 and 90.

<sup>&</sup>lt;sup>14</sup> See, for example, CRPD/C/SLV/CO/1, para.37; CRPD/C/CZE/CO/1, para. 34

<sup>&</sup>lt;sup>15</sup> See, for example, CRPD/C/MUS/CO/1, para. 29; CRPD/C/NZL/1, para. 37.

<sup>16</sup> See, for example, CRPD/C/GAB/CO/1, para. 40; CRPD/C/KEN/CO/1, para. 33.

<sup>&</sup>lt;sup>17</sup> See, for example, CRPD/C/DOM/CO/1, para. 33.CRPD/C/PRY/CO/1, para.16.

institutionalization<sup>18</sup>, the lack of or insufficient participation of women with disabilities in decision-making processes<sup>19</sup> in public and political life<sup>20</sup>; the lack of inclusion of a gender perspective in disability policies 21, the lack of a disability rights perspective in gender policies<sup>22</sup>; and the lack of or insufficient specific measures to promote the education and employment of women with disabilities<sup>23</sup>.

#### **Section II: Normative content**

- This general comment reflects an interpretation of article 6 which is premised on the general principles of the Convention, as outlined in article 3, namely, respect for inherent dignity, individual autonomy — including the freedom to make one's own choices —, and independence of persons; non-discrimination; full and effective participation and inclusion in society; respect for difference and acceptance of persons with disabilities as part of human diversity and humanity; equality of opportunity; accessibility; equality between men and women; and respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.
- 12. Article 6 is a cross-cutting article related to all articles of the Convention to remind States parties to include the rights of women and girls with disabilities in all actions aimed at implementing the Convention. In particular, positive action measures need to be taken in order to ensure that women with disabilities are protected against multiple discrimination and can enjoy human rights and fundamental freedoms on an equal basis with others.

#### Article 6, paragraph 1

- 13. Article 6 paragraph 1 recognizes that women with disabilities are subject to multiple discrimination and requires that States parties take measures to ensure the full and equal enjoyment by women with disabilities of all human rights and fundamental freedoms. The Convention references multiple discrimination in article 5 paragraph 2 which not only requires States parties to prohibit any kind of discrimination based on disability, but also to protect against discrimination on other grounds<sup>24</sup>. Jurisprudence by the CRPD Committee has included measures to address multiple and intersectional discrimination<sup>25</sup>.
- 14. Discrimination on the basis of disability is defined by the Convention as "any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social,

 $<sup>^{18}</sup>$  See, for example, CRPD/C/HRV/CO/1, para. 23; CRPD/C/SLO/CO/1, para. 55.  $^{19}$  See, for example, CRPD/C/QAT/CO/1, para. 13, CRPD/C/ECU/CO/1, paras. 12 and 16.

<sup>&</sup>lt;sup>20</sup> See, for example, CRPD/C/CRI/CO/1, para.13, CRPD/C/ECU/CO/1, para.16.

<sup>&</sup>lt;sup>21</sup> See, for example, CRPD/C/SWE/CO/1, para.13, CRPD/C/KOR/CO/1, para.13. <sup>22</sup> See, for example, CRPD/C/AZE/CO/1, para.16, CRPD/C/ESP/CO/1, para,21.

<sup>&</sup>lt;sup>23</sup> See, for example, CRPD/C/DNK/CO/1, para. 18, CRPD/C/NZL/CO/1, para. 16.

<sup>&</sup>lt;sup>24</sup> CEDAW General Recommendation No. 25, on article 4, paragraph 1, of the Convention on the Elimination of All Forms of Discrimination against Women, on temporary special measures para 12.

<sup>&</sup>lt;sup>5</sup> See CRPD/C/MUS/CO/1, CRPD/C/BRA/CO/1, CRPD/C/CZE/CO/1, CRPD/C/DNK/CO/1, CRPD/C/AUS/CO/1, CRPD/C/SWE/CO/1, CRPD/C/DEU/CO/1, among others.

cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation"<sup>26</sup>. Discrimination against women is defined by CEDAW as "any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, or enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field"<sup>27</sup>.

- 15. The Convention defines "reasonable accommodation" as 'necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms' requiring that State parties guarantee to persons with disabilities equal and effective legal protection against discrimination on all grounds<sup>28</sup>. Recent jurisprudence from the CEDAW Committee has referenced reasonable accommodation with respect to women with disabilities' access to employment<sup>29</sup>. The duty to provide reasonable accommodation is an *ex nunc* duty, meaning it is enforceable from the moment a person requests it in a given situation in order to enjoy their rights on an equal basis in a particular context. Failure to provide reasonable accommodation for women with disabilities may amount to discrimination under articles 5 and 6<sup>30</sup>. An example of reasonable accommodation could be a woman with a disability in the workplace requiring an accessible place to breast feed.
- 16. Intersectional discrimination recognizes that individuals do not experience discrimination as members of a homogenous group but rather, as individuals with multidimensional layers of identities, statuses and life circumstances. It means acknowledging the lived realities and experiences of heightened disadvantage of individuals caused by multiple and intersecting forms of discrimination, which requires targeted measures with respect to disaggregated data collection, consultation, policymaking, enforceability of non-discrimination and provision of effective remedies.
- 17. Discrimination against women and girls with disabilities can take many forms of discrimination: direct or indirect discrimination, discrimination by association, denial of reasonable accommodation, structural and systemic discrimination. Irrespective of the form it takes, the impact of discrimination violates the rights of women with disabilities.
  - a) **Direct discrimination** occurs when women with disabilities are treated less favourably than another person in a similar situation for a reason related to a prohibited ground. It also includes detrimental acts or omissions on the basis of

<sup>27</sup> See Art. 1 CEDAW

<sup>&</sup>lt;sup>26</sup> See Art. 2 CRPD

<sup>&</sup>lt;sup>28</sup> See Art. 5 (2) CRPD.

<sup>&</sup>lt;sup>29</sup> See, for example, CEDAW/C/HUN/CO/7-8, para. 45.

<sup>&</sup>lt;sup>30</sup> CRPD General Comment No. 2 (CRPD/C/GC/2).

- prohibited grounds where there is no comparable similar situation<sup>31</sup>. For example, direct discrimination occurs when the testimonies of women with intellectual or psychosocial disabilities are dismissed from court proceedings because of legal capacity, thus denying them justice and effective remedies as victims of violence.
- **b) Indirect discrimination** means that law, policies or practices appear neutral at face value, but have a disproportionate negative impact<sup>32</sup> on women with disabilities. For example, healthcare facilities may appear neutral, but do not include accessible examination beds for gynaecological screening.
- c) Discrimination by association applies where discrimination can occur based on association with a person with a disability. For example often the association is made for women in a caregiver role. For example, a mother of a child with a disability may be discriminated against by a potential employer due to the fear of the employer that she will be a less engaged/available worker because of her child.
- **d) Denial of reasonable accommodation** is discrimination if necessary and appropriate modification and adjustments (that do not impose a disproportionate or undue burden) are denied and are needed to ensure women with disabilities enjoy equal exercise of a human right or fundamental freedom<sup>33</sup>. For example, a woman with a disability may be denied reasonable accommodation if she cannot undergo a mammogram at a health centre due to the physical inaccessibility of the built environment.
- e) Structural or systemic discrimination are hidden or overt patterns of discriminatory institutional behaviour, discriminatory cultural traditions, social norms and/or rules. Harmful gender and disability stereotyping can lead to such discrimination, inextricably linked to a lack of policies, regulation and service provision specifically for women with disabilities. For example, due to stereotyping based on the intersection of gender and disability, women with disabilities may face barriers when reporting violence, such as disbelief and dismissal by police, prosecutors and courts. Likewise, harmful practices are strongly connected to and reinforce socially constructed gender roles and power relations that can reflect negative perceptions of, or discriminatory beliefs regarding women with disabilities, such as the belief that men with HIV/AIDS can be cured by engaging in sexual intercourse with women with disabilities<sup>34</sup>. The lack of awareness training and policies to prevent harmful stereotyping of women with disabilities by public officials, be it teachers, health service providers, police officers, prosecutors, judges, and the public at large can often lead to individual instances of violations of rights.
- 18. Women with disabilities are subject to multiple discrimination not only in the public, but also in the private sphere, for example, within family relations or by private social service providers. International human rights law has long acknowledged State party responsibility for discrimination perpetrated by private, non-state actors<sup>35</sup>. States parties must adopt legal provisions and procedures which explicitly recognise multiple discrimination to ensure

<sup>34</sup> A/HRC/20/5, para. 24

<sup>&</sup>lt;sup>31</sup> See CESCR General Comment 20 para 10.

<sup>32</sup> See CESCR GC 20 para. 10.

<sup>33</sup> See Art. 2 CRPD.

<sup>35</sup> See CCPR, GC 18 para. 9, CCPR 28 para. 31, CESCR GC 20 para. 11, CEDAW GR 28 para. 9, CERD GR 25 para 1, 2.

complaints made on the basis of more than one ground of discrimination are considered in the context of the determination of both liability and remedies.

## Article 6 paragraph 2

- 19. Article 6 paragraph 2 addresses the development, advancement and empowerment of women. It assumes that women can be ensured the rights designated in the Convention if States parties strive to achieve and promote these goals with appropriate means, and in all of the fields addressed by the Convention.
- 20. The Convention sets out that States parties must take "all appropriate measures" to ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities. These measures are legislative, educational, administrative, cultural, political, linguistic, and others. Measures are appropriate if they respect the principles of the Convention, including achieving the goal of guaranteeing women with disabilities the exercise and enjoyment of the human rights and fundamental freedoms set out in the Convention. Measures may be temporary or long term and should overcome *de jure* and *de facto* inequality. While special temporary measures such as quotas, might be necessary to overcome structural and systemic multiple discrimination, long term measures such as reforming laws and policies to ensure the equal participation of women with disabilities in all areas of life are essential prerequisites for achieving substantive equality for women with disabilities.
- 21. All measures must ensure the full development, advancement and empowerment of women with disabilities. Although development relates to economic growth and eradication of poverty, it is not limited to these fields. While gender and disability-sensitive development in the field of, among others, education, employment, income generation, and relating to combating violence may be appropriate measures to ensure the full economic empowerment of women with disabilities, additional measures are necessary with regard to health, political and cultural and sports participation.
- 22. Advancement and empowerment of women with disabilities goes beyond the goal of development in so far as measures must also target the improvement of the situation of women with disabilities throughout their lifespan. It is not enough to recognize women with disabilities in development measures rather, they must also be able to participate in and contribute to society.
- 23. In line with a human rights-based approach, ensuring the empowerment of women with disabilities means promoting their participation in public decision-making. Women and girls with disabilities have historically encountered many barriers to participation in public decision-making. Due to power imbalances and multiple forms of discrimination, they have had fewer opportunities to establish or join organizations that can represent their needs as

women and persons with disabilities. States parties should reach out directly to women and girls with disabilities andestablish adequate measures to guarantee that the perspectives of women and girls with disabilities are fully taken into account and that they will not be subjected to any reprisals for expressing their viewpoints and concerns, especially in relation to sexual and reproductive health and rights, gender-based violence including sexual violence. Finally, States parties must promote the participation of representative organizations of women with disabilities beyond disability-specific consultative bodies and mechanisms<sup>36</sup>.

#### Section III: States parties' obligations

- 24. State parties to the Convention have an obligation to respect, to protect and to fulfil the rights of women with disabilities under article 6 and all other substantive provisions in order to guarantee them the enjoyment and exercise of all human rights and fundamental freedoms. These duties imply the undertaking of legal, political, administrative, educational and other measures.
- 25. The obligation to respect requires States parties to refrain from interfering with the enjoyment of the rights of women with disabilities. As such, existing laws, regulations, customs and practices that constitute discrimination against women with disabilities must be abolished.<sup>37</sup> Laws that do not allow women with disabilities to marry or choose the number and spacing of their children on an equal basis with others are frequent examples of such discrimination. Further, the duty to respect implies refraining from engaging in any act or practice that is inconsistent with article 6 and other substantive provisions, to ensure that public authorities and institutions act in conformity with it<sup>38</sup>.
- 26. The obligation to protect means that States parties have to ensure that the rights of women with disabilities are not infringed upon by third parties. Thus, States parties must take all appropriate measures to eliminate discrimination on the basis of sex and/or impairment by any person, organization or private enterprise. It also includes the duty to exercise due diligence through preventing violence or violations of human rights, protecting victims and witnesses from violations, investigating, prosecuting and punishing those responsible, including private actors, and providing access to redress and reparations where human rights violations occur<sup>39</sup>. For example, promoting the training of professionals in the justice sector to ensure there are effective remedies for women with disabilities who have been subjected to violence.
- 27. The obligation to fulfil imposes an ongoing and dynamic duty to adopt and apply the measures needed to secure the development, advancement and empowerment of women with

<sup>38</sup> See Art. 4 (1) (d) CRPD.

<sup>&</sup>lt;sup>36</sup> Report of the Special Rapporteur on the rights of persons with disabilities on the right to participate in decision-making A/HRC/31/62.

<sup>&</sup>lt;sup>37</sup> See Art. 4 (1) (b) CRPD.

<sup>&</sup>lt;sup>39</sup> See Joint general recommendation No.31 of CEDAW/ general comment No. 18 CRC on harmful practices, CEDAW/C/GC/31-CRC/C/GC/18 p.4.

disabilities. States parties must adopt a twin track approach through: a) systematically mainstreaming the interests and rights of women and girls with disabilities across all national action plans, strategies<sup>40</sup> and policies concerning women, chilhood and disability as well as in sectoral plans concerning, for example: gender equality, health, violence, education, political participation, employment, access to justice and social protection; and b) targeted and monitored action aimed specifically at women with disabilities. A twin track approach is an essential pre-cursor to reducing inequality with regard to participation and enjoyment of rights.

# Section IV: The interrelationship of article 6 with other articles of the Convention Perspectives of women with disabilities in CRPD provisions

- 28. The cross-cutting nature of article 6 inextricably links it to all other substantive provisions of the Convention. In addition to the articles that have an explicit reference to sex and/or gender<sup>41</sup>, the rights of women with disabilities under article 6 are particularly interrelated with the following provisions:
  - a) Violence against women with disabilities (art. 16);
  - b) Sexual and reproductive health and rights, including respect for home and the family (art. 25 and 23);
  - c) Spheres of discrimination against women with disabilities in other relevant articles.

## A: Freedom from exploitation, violence and abuse (art. 16)

- 29. Women with disabilities are at heightened risk of violence, exploitation and abuse compared to the broader population of women. <sup>42</sup> Violence may be interpersonal, institutional and/or structural in nature. Institutional and/or structural violence is any form of structural inequality or institutional discrimination that maintains a woman in a subordinate position, whether physical or ideological, with regard to other people within her family<sup>43</sup>, household or community.
- 30. The right to freedom from exploitation, violence and abuse for women with disabilities can be impacted negatively by harmful stereotypes that heighten their risk of experiencing violence. Harmful stereotypes that infantilize women with disabilities, call into question their ability to make judgements, and perceptions of women with disabilities as being asexual, or hypersexual; and erroneous beliefs and myths, heavily influenced by superstition, which increase the risk of sexual violence against women with albinism<sup>44</sup>, all contribute to women with disabilities not exercising their rights as set out in article 16.
- 31. Acts of violence, exploitation and/or abuse against women with disabilities that violate article 16 includes, but is not limited to: women who aquire a disability as a consequence of violence, physical force; economic coercion; trafficking, deception;

<sup>41</sup>Mentioned supra para ##

<sup>&</sup>lt;sup>40</sup> See Art. 4 (1) (c) CRPD.

<sup>&</sup>lt;sup>42</sup> See Report of the Special Rapporteur on violence against women, its causes and its consequences 2012, para 13 (A/67/227).

<sup>&</sup>lt;sup>43</sup> CRPD/C/HRV/CO/1, para. 11

<sup>&</sup>lt;sup>44</sup> Report of the Office of the High Commissioner on Human Rights, A/HRC/24/57.

misinformation; abandonment; the absence of free and informed consent and legal compulsion; neglect, including the withholding or denying access to medication; removing or controlling communication aids or refusal of assistance to communicate; denying personal mobility and accessibility such as removing or destroying accessibility features such as ramps, or assistive devices such as a white cane or mobility devices such as a wheelchair, refusal of caregivers to assist with daily living such as bathing, menstrual and/or sanitation management, dressing and eating, thus denying the right to live independently and freedom from degrading treatment; denial of food or water, or threat of any of these acts; bullying, verbal abuse and ridicule on the grounds of disability causing fear by intimidation; harming or threatening to harm, removing or killing pets or assistance dogs, or destroying objects; psychological manipulation; and controlling behaviours involving restricting face-to-face or virtual access to family, friends or others.

- 32. Certain forms of violence, exploitation or abuse may be considered as cruel, inhuman, degrading treatment or punishment and breaches a number of international human rights treaties. Among these are forced, coerced and otherwise involuntary pregnancy or sterilisation<sup>45</sup>; as well as any other medical procedure or intervention performed without free and informed consent, including those related to contraception and abortion; the invasive and irreversible surgical practises including psychosurgery, female genital mutilation or surgery or treatment performed on intersex children without their informed consent; the administration of electroshocks, chemical, physical or mechanical restraints; isolation or seclusion.
- 33. Sexual violence against women with disabilities includes rape<sup>46</sup>. Sexual abuse occurs in all scenarios within both state and non-state institutions, within the family or the community<sup>47</sup>. Some women with disabilities, in particular, deaf and deafblind women<sup>48</sup>, and women with intellectual disabilities, may be further at risk of violence and abuse because of their isolation, dependency or oppression.
- 34. Women with disabilities may be targeted for economic exploitation because of their impairment, which can in turn expose them to further violence. For example, women with physical or visible impairments can be trafficked into forced begging because it is believed they may have a stronger impact on public sympathy<sup>49</sup>.
- 35. The often preferential care and treatment of boys means that violence against girls with disabilities is more prevalent when compared to boys with disabilities or the broader population of girls. Violence against girls with disabilities includes gender-specific neglect, humiliation, concealment, abandonment, abuse, including sexual abuse and sexual exploitation, which increases during puberty. Children with disabilities are also disproportionately likely to experience non-registration at birth<sup>50</sup>, which exposes them to

<sup>&</sup>lt;sup>45</sup> CRPD/C/MEX/CO/1, para.37.

<sup>&</sup>lt;sup>46</sup> A/67/227, para. 35.

From 221, parts 55.

47 See for example http://www.coe.int/t/e/social\_cohesion/soc-sp/Abuse%20\_E%20in%20color.pdf

<sup>&</sup>lt;sup>48</sup> CRPD/C/BRA/CO/1, para. 14.

<sup>49</sup> http://www2.ohchr.org/english/issues/women/docs/A.HRC.20.5.pdf, para. 25

<sup>&</sup>lt;sup>50</sup> See for example, CRC/C/TGO/CO/3-4, para. 8.

exploitation and violence. Girls with disabilities are particularly at risk of violence from family members and caregivers<sup>51</sup>.

- 36. Girls with disabilities are particularly at risk of harmful practices, which are justified by invoking sociocultural and religious customs and values. For example, girls with disabilities are more likely to die through "mercy killings" than boys with disabilities because their families are unwilling or lack the support to raise a girl with an impairment<sup>52</sup>. Other examples of harmful practices include: infanticide<sup>53</sup>, accusations of "spirit possession" and restrictions in feeding and nutrition. In addition, the marriage of girls with disabilities, especially girls with intellectual disabilities, is justified under the pretext of providing future security, care and finance for her. In turn, child marriage contributes to higher rates of school drop-out as well as early and frequent childbirth. The social isolation, segregation and exploitation of girls with disabilities inside the family, includes: exclusion from family activities, prevention from leaving home, forced unpaid housework and being forbidden from attending school.
- 37. Women with disabilities are subjected to the same harmful practices committed against women without disabilities such as forced marriage, female genital mutilation, crimes committed in the name of so called honour, dowry related violence, widowhood practices and accusations of witchcraft<sup>54</sup>. The consequences of harmful practices goes far beyond social exclusion. It reinforces harmful gender stereotypes, perpetuates inequalities and contributes to discrimination against women and girls. They can result in physical, and psychological violence and economic exploitation. Harmful practice based on patriarchal interpretations of culture cannot be evoked to justify violence against women and girls with disabilities. In addition, women and girls with disabilities are particularly at risk of 'virgin testing'<sup>55</sup> and, regarding HIV/AIDS misbeliefs, "virgin rapes"<sup>56</sup>.

# B: Sexual and reproductive health and rights, including respect for the home and the family (art. 25 and 23)

38. Wrongful stereotyping related to disability and gender are a form of discrimination, which particularly impacts the enjoyment of sexual and reproductive health and rights, and the right to a found a family. Harmful stereotypes of women with disabilities include but are not limited to beliefs that they are: asexual, incapable, irrational, lacking control and/or hypersexual. Like all women, women with disabilities have the right to choose the number and spacing of their children, as well as the right to have control over and decide freely and

<sup>&</sup>lt;sup>51</sup> The State Of The World's Children 2013, UNICEF

<sup>52</sup> http://www2.ohchr.org/english/issues/women/docs/A.HRC.20.5.pdf, para. 24

<sup>53</sup> Ibid

<sup>&</sup>lt;sup>54</sup> CEDAW/C/GC/31-CRC/C/GC/18, para. 7

<sup>&</sup>lt;sup>55</sup> CEDAW/C/GC/31-CRC/C/GC/18, para. 9

<sup>&</sup>lt;sup>56</sup> http://www2.ohchr.org/english/issues/women/docs/A.HRC.20.5.pdf, para. 24.

responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence<sup>57</sup>.

- 39. Women with disabilities face multiple barriers to the enjoyment of sexual and reproductive health and rights, equal recognition before the law and access to justice, which are addressed below. In addition to barriers resulting from multiple discrimination on the grounds of gender and disability, some women with disabilities, such as refugees, migrants and asylum seekers, face additional barriers because they are denied access to healthcare. Likewise, women with disabilities may face harmful eugenic stereotypes when it is assumed that women with disabilities give birth to children with disabilities and are thus discouraged or prevented from realizing their right to motherhood <sup>58</sup>.
- 40. Women with disabilities may also be denied access to information and communication, including comprehensive sexuality education, based on harmful stereotypes which assume they are asexual and thus that they do not require such information. Information may also not be available in accessible formats. Sexual and reproductive health information includes, but is not limited to information, on the basis of equality with others, about "all aspects of sexual and reproductive health, including maternal health, contraceptives, family planning, sexually transmitted infections and HIV prevention, safe abortion and post abortion care, infertility and fertility options, and reproductive cancers" 59.
- 41. A lack of access to sexuality information for women with disabilities, especially women with intellectual disabilities, deaf and deafblind women, can increase their risk of sexual violence<sup>60</sup>.
- 42. Healthcare facilities and equipment, including mammogram machines and gynaecological examination beds, are often physically inaccessible for women with disabilities<sup>61</sup>. Safe transport for women with disabilities to attend healthcare facilities or screening programmes may be unavailable, unaffordable or inaccessible.
- 43. Attitudinal barriers by health care staff and related personnel may result in refusal of access of women with disabilities to healthcare practitioners and/or services, especially women with psychosocial or intellectual impairments, deaf and deafblind women, and women that are still institutionalized<sup>62</sup>.

<sup>59</sup> E/C.12/GC/22, para. 18.

<sup>&</sup>lt;sup>57</sup> Programme of action on the International Conference on Population and Development Programme of Action and the Beijing Platform for Action and the outcome documents of their review conferences.

<sup>&</sup>lt;sup>58</sup> A/67/227, para. 36.

<sup>&</sup>lt;sup>60</sup> See, for example, CRPD/C/MEX/CO/1, para. 50 b

<sup>&</sup>lt;sup>61</sup> CRPD/C/GC/2, para. 40. Also see, for example, CRPD/C/DOM/CO/1, para. 46.

<sup>&</sup>lt;sup>62</sup> A/HRC/20/5, para. 37.

- 44. In practice, the choices of women with disabilities, especially women with psychosocial or intellectual disabilities are often ignored, their decisions are often substituted by third parties, including legal representatives, service providers, guardians and family members, thus violating their rights under article 12<sup>63</sup>. All women with disabilities must be able to exercise their legal capacity by taking their own decisions, with support when desired with regard to medical and/or therapeutic treatment, including decisions on: retaining their fertility, reproductive autonomy, their right to choose the number and spacing of children, to consent and accept a statement of fatherhood, and the right to establish relationships. Restricting or removing legal capacity can facilitate forced interventions, such as: sterilisation, abortion, contraception, female genital mutilation, or surgery, or treatment performed on intersex children without their informed consent and forced detention in institutions<sup>64</sup>.
- 45. Forced contraception and sterilization can also result in sexual violence without the consequence of pregnancy, especially for women with psychosocial or intellectual disabilities and those in psychiatric or other institutions or custody. Therefore, it is particularly important to reaffirm that the legal capacity of women with disabilities should be recognised on an equal basis with others, that women with disabilities have the right to found a family and be provided with appropriate assistance to raise their children.
- 46. Harmful gender and/or disability stereotypes such as incapacity and inability, can lead to mothers with disabilities facing legal discrimination. As such, they are significantly overrepresented in child protection proceedings and disproportionately lose contact and custody of their children who are subject to adoption proceedings and/or can be placed in institutions. In addition, husbands can be granted separation and/or divorce on the basis of his wife's psychosocial disability.

## C: Spheres of discrimination against women with disabilities in other relevant articles

#### Awareness-raising (art. 8)

47. Women with disabilities are exposed to compounded stereotypes that can be particularly harmful. Disability and gender stereotypes applying to women with disabilities include, but are not limited to: being burdensome to others (that they must be cared for, are a cause of hardship, an affliction, a responsibility, require protection), vulnerable (defenceless, unsafe, dependent, reliant, unsafe) and/or victims (suffering, passive, helpless), inferior (inability, inadequacy, weak, worthless); have a sexual abnormality (for example, women with disabilities are stereotyped as asexual, inactive, overactive, incapable, sexually perverse), being mystical or sinister (stereotyped as cursed, possessed by spirits, practitioners of witchcraft, as being good or bad luck, harmful). Gender and/or disability stereotyping is the practice of ascribing to a specific individual a stereotypical belief, and it is wrongful when

<sup>65</sup>See Art. 12 CRPD and CRPD General Comment No 1, paragraph 31; Art. 15 CEDAW.

<sup>&</sup>lt;sup>63</sup>See World Health Organization: Eliminating forced, coercive and otherwise involuntary sterilization. An interagency statement OHCHR, UN Women, UNAIDS, UNDP, UNFPA, UNICEF and WHO (2014).

<sup>&</sup>lt;sup>64</sup> CRPD/C/GC/1, para. 35

it results in a violation or violations of human rights and fundamental freedoms. An example of this is the failure of the justice system to hold the perpetrator of sexual violence against a woman with disability accountable based on stereotypical views about her sexuality or on her credibility as a witness.

#### Accessibility (art. 9)

48. The lack of consideration of gender and/or disability aspects in policies relating to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas, prevents women with disabilities from living independently and participating fully in all areas of life on an equal basis with others. This is specially relevant in their access to safe houses, support services and procedures in order to provide effective and meaningful protection from violence, abuse and exploitation or when providing health care, particularly reproductive health care.<sup>66</sup>

#### Situations of risk and humanitarian emergencies (art. 11)

- 49. In situations of armed conflict, occupation of territories, natural disasters and humanitarian emergencies women with disabilities are at increased risk of sexual violence and are less likely to be able to have access to recovery and rehabilitation services or access to justice<sup>67</sup>. Women refugees, migrants and asylum seekers with disabilities may also face an increased risk of violence because they are denied the right to access health and justice systems because of their citizenship status.
- 50. Women with disabilities in situations of risk and humanitarian emergencies are at an increased risk of sexual violence as outlined in the previous section. In addition, the lack of sanitation facilities increases discrimination against women with disabilities. They face a number of barriers to accessing humanitarian aid. Although women and children are prioritised in the distribution of humanitarian relief, women with disabilities cannot always obtain information on relief projects as this is often not available in accessible formats. If women with disabilities do receive information, they may not be able to physically access distribution points, and if they do get access, women with disabilities many not be able to communicate with staff. Likewise, if women with disabilities are subjected to violence, exploitation or abuse, information and communication helplines and hotlines may not be accessible. Refugee camps often lack child protection mechanisms for children with disabilities. In addition, accessible sanitation facilities to ensure hygienic menstrual management are often unavailable which can in turn increase their risk of violence. Single women with disabilities face barriers to accessible evacuation as a result of an emergency or disaster situation, particularly if they are accompanied by their children at the time of

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<sup>66</sup> See GC No 2 (2014) Accessibility

<sup>&</sup>lt;sup>67</sup> Committee on the Rights of Persons with Disabilities, Statement of the Committee on the Rights of Persons with Disabilities on disability inclusion for the World Humanitarian Summit adopted during the Committee's 14th session, held, from 17 August to 4 September 2015 in Geneva.

evacuation. This disproportionately affects internally displaced women with disabilities who are without an adult family member, friends or caregivers. There are additional barriers faced by displaced girls with disabilities, to access formal and non-formal education, especially in crisis settings.

## Equal recognition before the law (art. 12)

51. Women with disabilities, more often than men with disabilities and than the broader population of women, are denied their right to legal capacity. Their rights to maintain control over their reproductive health, including on the basis of free and informed consent<sup>68</sup>, the right to found a family, the right to choose where and with whom to live, the right to physical and mental integrity, the right to own and inherit properties, to control their own financial affairs and to have equal access to bank loans, mortgages and other forms of financial credit <sup>69</sup> are often violated through patriarchal systems of substituted decision-making.

## Access to justice (art. 13)

52. Women with disabilities face barriers to accessing justice including with regard to exploitation, violence and abuse, due to harmful stereotypes, discrimination and lack of procedural and reasonable accommodations, which can lead to their credibility being doubted and their accusations being dismissed<sup>70</sup>. Procedures or enforcement attitudes may intimidate victims or discourage them from pursuing justice. These can include: complicated or degrading reporting procedures; referral of victims to social services rather than legal remedies; dismissive attitudes by police or other enforcement agencies. This can lead to impunity and invisibility of the issue, resulting in violence lasting for extended periods of time<sup>71</sup>. Women with disabilities may also fear reporting violence, exploitation or abuse because they are concerned they may lose their support requirements from caregivers<sup>72</sup>.

## Liberty and security of the person and freedom from torture or cruel, inhuman or degrading treatment or punishment (art.14 and 15)

53. Violations relating to deprivation of liberty disproportionately affect women with intellectual or psychosocial disabilities and those in institutional settings. Those deprived of their liberty in places such as psychiatric institutions, on the basis of actual or perceived impairment, are subject to higher levels of violence as well as cruel, inhuman, degrading treatment or punishment<sup>73</sup>, are segregated and exposed to the risk of sexual violence and trafficking within care and special education institutions<sup>74</sup>. Violence against women with disabilities in institutions includes: involuntary undressing by male staff against the will of

<sup>&</sup>lt;sup>68</sup> See CRPD general comment No.1 (art. 12)

<sup>&</sup>lt;sup>69</sup> ST/ESA/326, p.52 UN 2009 World Survey on the Role of Women in Development

<sup>&</sup>lt;sup>70</sup> A/HRC/20/5, para. 41, A/67/227, para. 42.

<sup>&</sup>lt;sup>71</sup> A/HRC/20/5, para.19.

<sup>&</sup>lt;sup>72</sup> Ibid, para. 16.

<sup>&</sup>lt;sup>73</sup> A/HRC/20/5, para. 39

<sup>74</sup> CRPD/C/UKR/CO/1, para. 11

the woman concerned; forced psychiatric medication; and overmedication which can reduce the ability to describe and/or remember sexual violence. Perpetrators may act with impunity because they perceive little risk of discovery or punishment as access to judicial remedies is severely restricted, and women with disabilities subjected to such violence are unlikely to be able to access helplines or other forms of support to report such violations.

## Freedom from torture or cruel, inhuman or degrading treatment or punishment and protecting the integrity of the person (Art. 15 and art. 17)

54. Women with disabilities are more likely to be subjected to forced interventions than other women in general and men with disabilities, and are 'wrongfully justified by theories of incapacity and therapeutic necessity (and) are legitimized under national laws, and may enjoy wide public support as being in the alleged "best interest" of the person concerned '75. Forced interventions violate a number of articles of the Convention, namely: the right to equal recognition before the law; freedom from exploitation, violence and abuse; the right to found a family; protecting the integrity of the person; sexual and reproductive health and rights; and freedom from torture or cruel, inhuman or degrading treatment or punishment '76.

#### Living independently and being included in the community (Art. 19)

55. The right of women with disabilities to choose their place of residence may be adversely affected by cultural norms and patriarchal family values that limit autonomy and oblige them to live in a particular living arrangement. Thus, multiple discrimination can prevent the full and equal enjoyment of the right to live independently in the community. In the case of older persons with disabilities, age and impairment, separately or jointly, can increase their risk of institutionalization<sup>77</sup>. In addition, it has been widely documented that institutionalization may expose persons with disabilities to violence and abuse, with women with disabilities particularly exposed<sup>78</sup>.

#### Education (art. 24)

56. Harmful gender and disability stereotypes combine to fuel discriminatory attitudes, policies and practices, such as: the higher valuing of education of boys over girls, educational material perpetuating wrongful gender and disability stereotypes, child marriage of girls with disabilities, gender-based family activities, female caregiver roles, lack of accessible sanitation facilities at schools to ensure hygienic menstrual management. In turn this results in high rates of illiteracy, school failure, uneven daily attendance rates, absenteeism and dropping out of school entirely.

<sup>&</sup>lt;sup>75</sup> The UN Special Rapporteur on Torture A/HRC/22/53, para. 64.

<sup>&</sup>lt;sup>76</sup> CRPD/C/SWE/CO/1, para. 37

<sup>&</sup>lt;sup>77</sup> See the report of the United Nations High Commissioner for Human Rights on the human rights situation of older persons (E/2012/51) submitted to the Economic and Social Council.

<sup>78</sup> Thematic study on the right of persons with disabilities to live independently and be included in the community Report of the Office of the United Nations High Commissioner for Human Rights, para 24

#### Health and Rehabilitation (arts. 25 & 26)

57. Women with disabilities face barriers to accessing health and rehabilitation services; these include but are not limited to: lack of education and information on sexual and reproductive health and rights; physical barriers to gynaecological, obstetric and oncology services; and attitudinal barriers to fertility and hormone treatments. In addition, physical and psychological rehabilitation service provision, including counselling for acts of gender-based violence, may not be accessible, inclusive, age or gender sensitive.

#### **Employment (art. 27)**

58. Besides the general barriers which persons with disabilities face when trying to exercise their right to work, women with disabilities also face unique barriers to their equal participation in the workplace, including sexual harrassment and unequal pay and the lack of access to seek redress because of discriminatory attitudes dismissing their claims, as well as physical, information and communication barriers<sup>79</sup>.

#### Social Protection (art. 28)

59. Women represent a disproportionate percentage of the world's poor as a consequence of discrimination, leading to a lack of choice and opportunities, especially formal employment income. Poverty is both a compounding factor and the result of multiple discrimination. Older women with disabilities, especially, face many difficulties in accessing adequate housing, they-are more likely to be institutionalized- and do not have equal access to social protection and poverty reduction programs<sup>80</sup>.

## Participation in political and public life (art.29)

60. The voices of women and girls with disabilities have historically been silenced and thus women and girls with disabilities are disproportionately underrepresented in public decision-making. Due to power imbalances and multiple forms of discrimination, they have had fewer opportunities to establish or join organizations that can represent their needs as women, children and persons with disabilities.

#### **Section V: National Implementation**

- 61. In its examination of States parties' reports, the Committee has identified that States parties face a number of consistent challenges to guarantee to women with disabilities the full enjoyment of all their rights without discrimination and on an equal basis with others, in compliance with article 6 and other related articles of the Convention.
- 62. In the light of the normative content and obligations outlined above, State parties should take the following steps to ensure the full implementation of article 6 of the

<sup>&</sup>lt;sup>79</sup> A/HRC/20/5, para. 40 and A/67/227, para. 67.

<sup>&</sup>lt;sup>80</sup> **Report of the Special Rapporteur** on the rights of persons with disabilities A/70/297,

Convention on the Rights of Persons with Disabilities, providing adequate resources in this regard:

- a) Combat multiple discrimination through inter alia:
- i. Repealing discriminatory laws, policies and practices that prevent women with disabilities from enjoying all the rights of the Convention; outlawing gender and disability-based discrimination and its intersectional forms; criminalizing sexual violence against girls and women with disabilities; prohibiting all forms of forced sterilization, forced abortion and non-consensual birth control; prohibiting all forms of forced gender and/or disability related medical treatment and taking all appropriate legislative steps to protect women with disabilities against discrimination.
- ii. Adopting appropriate laws, policies and actions to ensure the rights of women with disabilities are included in all policies, especially in policies related to women in general, as well as in policies on disability.
- iii. Addressing all barriers that prevent or restrict the participation of women with disabilities and ensuring that women with disabilities as well as the views and opinions of girls with disabilities, through their representative organizations, are included in the design, implementation and monitoring of all programmes which have an impact on their lives; including women with disabilities in all branches and bodies of the national monitoring system.
- iv. Collecting and analysing data on the situation of women with disabilities in all areas relevant to them in consultation with organizations of women with disabilities with a view to guiding policy planning for the implementation of article 6, and eliminating all forms of discrimination, especially multiple and intersectional discrimination and improving data collection systems for adequate monitoring and evaluation.
- v. Ensuring that all international cooperation is disability and gender sensitive and inclusive, and including data and statistics on women with disabilities in the implementation of Agenda 2030 and the Sustainable Development Goals, targets and indicators, as well as other international frameworks.
  - b) Take all appropriate measures to ensure the development, advancement and empowerment of women with disabilities through, inter alia:
- i. Repealing any law or policy that restricts women with disabilities from their effective and full participation in political and public life on an equal basis with others, including the right to form and join organizations and networks of women in general, and of women with disabilities.

ii. The adoption of affirmative action measures for development, advancement and empowerment of women with disabilities, in consultation with organizations of women with disabilities, aiming to immediately address inequalities and to ensure that women with disabilities have equality of opportunity with others. Such measures should be adopted particularly regarding access to justice, the elimination of violence, respect for home and the family, sexual health and reproductive rights, health, education, employment, and social protection. States parties should ensure that public and private services and facilities used by women with disabilities are fully accessible in compliance with article 9 and in line with General comment on article 9, and that public and private service providers are trained and educated to provide appropriate attention, support and assistance to women with disabilities, on applicable human rights standards, and on identifying and combating discriminatory norms and values; the adoption of effective measures to provide women with disabilities access to the support they may require to exercise their legal capacity, in line with General comment on article 12, to give their free and informed consent and to take decisions about their own lives.

iii. Support and promotion of the creation of organizations and networks of women with disabilities and the promotion and support for women with disabilities to take leadership roles in public decision-making bodies at all levels.

iv. The promotion of specific research on the situation of women with disabilities, in particular research on the impediments to the development, advancement and empowerment of women with disabilities, in all areas related to them; the consideration of women with disabilities in data collection relating to persons with disabilities as well as to the broader population of women; and appropriately targeting policies for the development, advancement and empowerment of women with disabilities, involving women with disabilities and their representative organisations in the design, implementation, monitoring and evaluation of, and training for, data collection and the establishment of consultation mechanisms to better inform the creation of systems for the effective identification and capturing of the diverse lived experiences of women with disabilities for improved public policies and practices.

v. Support and promotion of international cooperation and assistance in a manner consistent with all national efforts to eliminate the legal, procedural, practical or social barriers to the full development, advancement and empowerment of women with disabilities in their communities as well as at the national, regional and global levels and the inclusion of women with disabilities in the design, implementation and monitoring of international cooperation projects and programmes that affect their lives.

63. The recommendations of the relevant United Nations bodies dealing with gender equality shall be taken into account by all States parties and applied to women and girls with disabilities.<sup>81</sup>

81 Commission on the Status of Women (2016) Women's empowerment and the links to sustainable development E/CN.6/2016/3; Handbook on costing gender equality - Available at http://www.unwomen.org/en/digital-library/publications/2015/7/handbook-on-costinggender-equality; Guidebook on CEDAW general recommendation no. 30 and the UN Security Council resolutions on women, peace and security - Available at: http://www.unwomen.org/en/digital-library/publications/2015/8/guidebook-cedawgeneralrecommendation30womenpeacesecurity; Guidance Note on Gender mainstreaming In development programming - Available at http://www.unwomen.org/en/digital-library/publications/2015/02/gender-mainstreaming-issues; Guide for the Evaluation of Programmes and Projects with a Gender, Human Rights and Interculturality Perspective - Available at: http://www.unwomen.org/en/digitallibrary/publications/2014/7/guide-for-the-evaluation-of-programmes-and-projects-with-a-gender-perspective; Monitoring Gender Equality and the Empowerment of Women and Girls in the 2030 Agenda for Sustainable Development: Opportunities and Challenges - Available at: http://www.unwomen.org/en/digital-library/publications/2015/9/indicators-position-paper; Guidebook on CEDAW general recommendation no. 30 and the UN Security Council resolutions on women, peace and security - Available at: http://www.unwomen.org/en/digitallibrary/publications/2015/8/guidebook-cedawgeneralrecommendation30-womenpeacesecurity; Guidance Note on Gender mainstreaming In development programming - Available at http://www.unwomen.org/en/digital-library/publications/2015/02/gender-mainstreaming-issues; Guide for the Evaluation of Programmes and Projects with a Gender, Human Rights and Interculturality Perspective - Available at: http://www.unwomen.org/en/digital-library/publications/2014/7/guide-for-the-evaluation-of-programmes-and-projects-with-a-genderperspective; Monitoring Gender Equality and the Empowerment of Women and Girls in the 2030 Agenda for Sustainable Development: Opportunities and Challenges - Available at: http://www.unwomen.org/en/digital-library/publications/2015/9/indicators-position-paper