

Issues facing women with disabilities

“ I want everyone to remember people with disabilities are people of worth. We have a right to be treated with respect. We have a right to safety.” Jane, WDV member

This factsheet focuses on the additional barriers faced by women with disabilities.

Who are women with disabilities?

Nearly one in every five Victorian women has a disability.¹ We are everywoman. We are doctors, lawyers, health and community service workers, playwrights and teachers.

We are mothers and carers, actively sexual and celibate, lesbian, bisexual, transgender and heterosexual.

We live on farms, in regional communities, in urban high rise and in the suburbs. We follow football and dance, go to TAFE and university. We value public transport and accessible buildings.

We are religious, from many faiths and non-religious, from many perspectives. We are diverse in our ideologies, but passionate about our right to be recognised as ordinary women... with a disability.

What barriers do we face?

We encounter discrimination on many levels, each of which restricts our opportunities for equal participation in economic, social, educational and political life.

Some women with disabilities experience multiple layers of discrimination based on their race, age, gender and sexual orientation, as well as their disability.

We are often ignored in government legislation, policies and programs and our needs are not adequately recognised within community organisations and services.

We have traditionally been excluded from the mainstream women's social movement, whilst issues of concern to women with disabilities have not been addressed by the broader disability advocacy movement.

On all measures of social and economic participation (housing security, income, employment and education), women with disabilities are disadvantaged compared to women and men without disabilities. We also experience higher levels of disadvantage than men with disabilities when it comes to employment and income levels.²

As women with disabilities, we lack access to adequate health care and other services for ourselves and our children, particularly when health centres fail to provide a welcoming, inclusive environment with accessible parking, accessible toilets and accessible examination tables.

Women with disabilities are targeted by people who use violence, including by intimate partners. We are also less likely to know about or have access to services responding to violence against women.³



What women with disabilities say about barriers to social inclusion

“ I feel like many spaces are dominated by men. Either they take up all the air space and don't let women have a say, or they try and hit on you which makes me uncomfortable...”

“ My social life used to be visiting friends and family. Now (with a disability) I'm isolated and alone. Homes aren't universally designed. If I want to see people they have to come to me. Public buildings are a bit more accessible. But homes are where a lot of socialising happens.”

“ I experience social inclusion through being employed, enjoying relationships with family and friends, utilising public transport, access to health services, freedom of movement through the built environment, access to electronic information, access to education.”⁴

What will help?

- Challenge the gender stereotypes: few women fit the image of beauty that women are expected to meet.
- Challenge stereotypes about disability: women with disabilities are diverse. The stereotype suggests we are passive, dependent on others and in need of protection.

- Listen to women with disabilities about what we want and what will best meet our needs. We are the experts and understand what works best for us.
- Apply a gender and disability lens to policy, program development and investment and ensure that data on disability and gender is collected.
- Provide information in accessible formats so that everyone can access your information.
- Involve women with disabilities at every level of your service or program – from planning to delivery and as a part of your governance structure.

What should the future look like for women with disabilities?

Our hope for the future is that needs and aspirations of women and girls with disabilities are taken seriously. Here are some examples of how realising this vision will look.

- A 15 year-old girl with cerebral palsy will be encouraged to study at university.
- A woman with an intellectual disability who reports rape will be taken seriously by the police and the justice system.
- A mother with multiple sclerosis will get personal care that assists her to bathe and dress her child.
- Specialist schools and disability services will provide education on and promote healthy relationships and sexual health.
- Women with disabilities will be able to access paid work and lead the lifestyle of their choice.

About Women with Disabilities Victoria

Women with Disabilities Victoria is an organisation run by women with disabilities, for women with disabilities. We aim to advance real social and economic inclusion for women with disabilities in Victoria.

For more information, see our [About Women with Disabilities Victoria Factsheet](#), or look at our website: www.wdv.org.au/

Membership is open to both individuals and to organisations who share our aims, and is free for women with disabilities.

<https://www.wdv.org.au/get-involved/membership/>



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- 1 Australian Bureau of Statistics, 'Persons aged 15–64, living in households, disability status by sex and labour force status 2009', table 12, Disability, ageing and carers, Australia: state tables for Victoria, catalogue number 4330.0, ABS, Canberra, (2011).
 - 2 Kavanagh, A.M, Krnjacki, L., Beer, A., LaMontagne, A.D., Bentley, R., 'Time trends in socio-economic inequalities for women and men with disabilities in Australia: evidence of persisting inequalities. International Journal of Health Equity, (2013), Vol. 12(1); Kavanagh, A.M., Aitken, Z., Baker, E., LaMontagne, A.D., Milner, A., Bentley, R., 'Housing tenure and affordability and mental health following disability acquisition in adulthood', Social Science and Medicine, (2016), Vol 151, pp. 225–232; Mithen, J., Aitken, Z., Ziersch, A., Kavanagh, A. M., 'Inequalities in social capital and health between people with and without disabilities', Social Science and Medicine, (2015), Vol. 126, pp. 26–35.
 - 3 Woodlock D., Healey, L., Howe, K., McGuire M., Geddes, V., and Granek, S., Voices Against Violence Paper One: Summary Report and Recommendations, Women with Disabilities Victoria, Office of the Public Advocate and Domestic Violence Resource Centre Victoria, (2014).
 - 4 Survey responses from Victorian women with disabilities, used to inform Women with Disabilities Victoria's submission to the Victorian Parliament's Family and Community Development Committee Inquiry into Social Inclusion and Victorians with a Disability (February 2014).