# The impact of COVID-19 on women and girls with disabilities, and on women caring for persons with disabilities (extract of EDF Human Rights Report on COVID-19)

Girls and women with disabilities

There are over 60 million women and girls with disabilities living in the European Union (60% of the population of persons with disabilities).

Before the pandemic, women and girls with disabilities were already at higher risk of facing discrimination, abuse, and violence, compared to men with disabilities or women without disabilities. For instance, women with disabilities are two to five times more likely to be victims of violence than other women, and on average 34% of women with disabilities have experienced physical or sexual violence by a partner in their lifetime.[[1]](#footnote-1) Women and girls with intellectual disabilities are particularly exposed to violence, including specific types of violence in residential institutions.[[2]](#footnote-2) Women with disabilities also face higher rates of unemployment, with only 20.7% being in full time employment (compared to 28.6% of men with disabilities, and 48% of women without disabilities),[[3]](#footnote-3) and a higher poverty rate.

Domestic and sexual violence

Data shows that since the start of the COVID-19 pandemic, and especially during lockdown measures, violence against women and domestic violence has intensified. For example, in France, reports of domestic violence have increased by 32% during the lockdown[[4]](#footnote-4) and in Cyprus, helplines have received an increase in calls of 30%.[[5]](#footnote-5) In France, the helpline specific for women with disabilitiescreated and managed by the organisation of women with disabilities Femmes pour le Dire, Femmes pour Agir, received less calls during the first lockdown (maybe due to the presence indoors of the aggressor), but an increase in calls after the lockdown and a strong increase in quantity and strength of violence during the second lockdown and after.[[6]](#footnote-6)

Although we do not know the proportion of women and girls with disabilities who were victims of violence during the pandemic, the UN Office of the High Commissioner for Human Rights (OHCHR) has reported that, globally, women with disabilities, although likely facing higher numbers of domestic violence, are reporting less. This lower reporting can be due to a variety of challenges that pre-existed COVID-19, such as a lack of awareness but also inaccessible helplines, reporting mechanisms, and overall support services for victims, including shelters. While the European Institute of Gender Equality (EIGE) reported that all main helplines remained open during the lockdown, it did not state if they were accessible and inclusive for victims with disabilities. For instance, some helplines may not be accessible to Deaf, Deaf-blind and hard of hearing women. Furthermore, the list of helplines published on the EIGE’s website[[7]](#footnote-7) is not accessible to women using a screen-reader.

Violence and abuse in institutions

During the lockdown, many women and girls with disabilities living in institutions were trapped inside, without the possibility to leave or see their families. In some cases, they were not even able to communicate with their family or people close to them. A report published by Inclusion Europe in 2019, illustrates the multiple forms of violence faced by women and girls in institutions, from verbal violence and harassment, to beating and rape.[[8]](#footnote-8)

**Testimony: Magdalena Kocejko, Feminist with disabilities from Poland (**[**Article 6 Collectif**](https://www.facebook.com/artykul6/)**)**

“There is no data or any other research about the situation of women with disability in care homes during pandemic, but the overall reality has been dramatic. According to Polish Disability Forum the risk of death from COVID-19 is several dozen times higher than outside institutions. In many care homes people have been staying locked up since March without any possibility to go outside or meet their family. There has not been any policy solution to address the problems of human rights violations, isolation and increasing risk of psychological, sexual and physical abuse. It is safe to assume, that women with disabilities have been particularly disadvantaged. These institutions have remained closed to the public so there is no way to get help in case of abuse or psychological crisis.”

Violence taking place in institutions and other closed settings has been very hard to monitor since the beginning of the pandemic. Some national human rights institutions have conducted monitoring visits, but they were limited due to lack of personal protective equipment.

**Italy “Stuck in institution, raped by her carer”[[9]](#footnote-9) by Luisa Bosisio Fazzi, EDF Women’s Committee**

In Mach 2020, the [military was deployed to “protect” persons living in Troina Oasis](https://palermo.repubblica.it/cronaca/2020/04/18/news/coronavirus_i_militari_che_hanno_salvato_l_oasi_di_troina_torneremo_a_casa_arrichiti_nell_animo_-254368960/), an institution for persons with intellectual disabilities in Italy, during the COVID-19 lockdown. Their presence did not prevent or detect the [abuse and rape faced by a woman with disabilities](https://www.lasicilia.it/news/cronaca/365594/troina-la-violenza-shock-su-una-disabile-scoperta-perche-la-ragazza-e-rimasta-incinta.html?refresh_ce). While they managed the COVID-19 outbreak that led to 160 infections in the institution, nothing prevented the rape of one (or more) of their residents. The rape in question was discovered by the family of the victim, once the institution was re-opened for visits. She was pregnant. The staff of the institution seemingly did not know.  
  
Only after reporting it to the management did they investigate and, with confirmation of the pregnancy, made a report to the judiciary. The police then acted quickly and identified in a few days the rapist. He was arrested after confessing to the rape.

Limited support for victims and barriers in access to justice

Legal services and support for victims were already limited for women with disabilities, with helplines and information not always accessible to women with disabilities. This has become worse during COVID-19. The UN Office for Human Rights reported that alongside other risk factors, it is likely that many women with disabilities are unable to report or call helplines, as many are not equipped with interpretation services for Deaf and Deafblind persons.[[10]](#footnote-10) For example, in the United Kingdom, Deaf women reported having difficulties communicating since all communication is now occurring via phones.[[11]](#footnote-11) Regarding shelters, even when shelters were open, women with disabilities were unable to access them because the emergency shelters cannot accommodate them due to inaccessibility.[[12]](#footnote-12)

**Testimony: Magdalena Kocejko, Feminist with disabilities from Poland (**[**Article 6 Collectif**](https://www.facebook.com/artykul6/)**)**

“The COVID-19 response in my country was disability and gender insensitive. Women with disabilities stayed invisible and their situation was unrecognised.

Lockdown has increased the level of domestic violence, but on the governmental side there was no attempt to address this problem at any level. Insufficient finances, staff shortages and lack of recognition of special needs and accessibility has prevented women with disabilities from getting necessary support when needed. There has been no helpline for Deaf women available nor access to information in easy-to-read format. As a result, it has been problematic for many women with disabilities to even have access to information about their rights and get the support they needed. Women with disabilities have been left alone without any support.”

In addition, access to justice has slowed down since the beginning of the pandemic. With restriction measures in place, on-going proceedings may have been paused, and new complaints were processed slowly. Sisters of Frida, a collective of women with disabilities in the United Kingdom, reported that due to the quarantine orders, women with disabilities have had less access to their one-on-one advocates.[[13]](#footnote-13)

Limited access to sexual and reproductive health and rights

Pre-crisis, women and girls with disabilities already had more difficulties in exercising their sexual and reproductive health rights. Because of myths, stereotypes, and lack of knowledge of disability, they face discriminatory treatment and abuse (including forced sterilisation, contraception, and abortion), with important and sometimes irreparable consequences on their lives.[[14]](#footnote-14)

During the pandemic, some States have attempted to limit access to some sexual and reproductive health services, particularly abortion, by classifying them as non-essential services or attempting to adopt laws that further restrict access to them. This was, for instance, the case in Poland. The Constitutional Tribunal in Poland has ruled that the law permitting abortion on grounds of “a severe and irreversible foetal defect or incurable illness that threatens the foetus’s life” was unconstitutional. It has triggered mass protests across Poland and many women with disabilities decided to join the protests.[[15]](#footnote-15) In Italy, some hospitals stopped providing abortion services and sent women needing sexual and reproductive healthcare to other hospitals, making obtaining an abortion much more complicated.[[16]](#footnote-16)

Women caring for persons with disabilities

Women caring for one or several persons with disabilities were particularly affected by the COVID-19 crisis.

Because of the disruption of schools, day care, and social services during and after the lockdown, women had to take on additional care responsibilities, often without specific support from the government. While men also had to step in, data shows that caring responsibilities more often fall on women,[[17]](#footnote-17) who are also more likely to be the sole carer of one or several children with disabilities.[[18]](#footnote-18)

Before COVID-19, already almost half of single mothers were at risk of poverty or social exclusion.[[19]](#footnote-19) This is even higher for women caring for children or other relatives with disabilities, who, when formal long-term care services are not available, must withdraw from the labour market to become full-time carers.[[20]](#footnote-20)

In most European countries, schools and social services closed during the lockdown. They were not considered as essential services, and women caring for a person with disabilities often had to become full-time carers. Women whose children were in institutions had to make the hard choice between leaving them there, or becoming a full-time carer, once again with no support. While several countries put special leaves for parents in place, and even if they were extended to carers of persons with disabilities, many carers were on the edge of burnouts.[[21]](#footnote-21)

**Testimony: Foteini Zafeiropoulou, mother of an adult with high support needs from Greece – member of EDF Women’s Committee**

“Regarding my experience, as a mother of an adult with high support needs during the period of the first lockdown in spring, the most challenging thing was the change in his/our routine. As every other family with a member with autism and intellectual disability, we had our daily routine. Activities in a specialised community-based center, training and entertainment activities with peers, until early afternoon, shopping afterwards, often to the movies (my son loves movies), sometimes swimming or other sports activities, etc. Everything was dramatically different during that period, because everything was closed. We had to create a new routine, including interesting things, attractive activities that could take place in an apartment and the company of mom and dad exclusively. This is exactly what we did. A little bit of exercise watching videos of indoors work out, moving all furniture in order to have more space to exercise, movies at home with popcorn and soda to look like cinema, a few hours at the balcony, planting and watering flowers or having some tea, pretending that we were at a cafe, playing video games and surfing in the internet looking for funny videos on YouTube, do some cooking together and so on. All these were put in a timetable to help him predict how his day was going to be. At least we managed to keep him calm enough. Of course I was exhausted but compared with what other families experienced (ie self- injuries, tantrums, aggressiveness), my case, to be occupied 24/7 giving my son the full attention he claimed or demanded, was a good one!

Fortunately, during the present [second] lockdown, because of the intervention of the [National Confederation of Disabled People](https://www.esamea.gr/) at least community- based training centers, day care centers, as well as special schools remain open.

At this point I would like to add the testimony of a single mother, who had to leave her teenage son in an institution, because she was a victim of domestic violence and institution seemed to be the only solution at that time for her child. She calls me almost every day crying because she is not allowed to visit for nine months, and she has not seen her son since March. We have also received a few emails in my organisation concerning this issue. Many family members that cannot visit their relatives in residential homes or institutions.”

1. European Parliament resolution of 29 November 2018 on the situation of women with disabilities ([2018/2685(RSP)](https://oeil.secure.europarl.europa.eu/oeil/popups/ficheprocedure.do?lang=en&reference=2018/2685(RSP))). [↑](#footnote-ref-1)
2. Inclusion Europe, [Violence against women with intellectual disabilities](https://www.inclusion-europe.eu/violence-against-women-with-intellectual-disabilities/) [↑](#footnote-ref-2)
3. European Institute on Gender Equality, [Gender Equality Index 2019](https://eige.europa.eu/gender-equality-index/2019/domain/work/disability). [↑](#footnote-ref-3)
4. Euractiv, [Domestic violence increases in France during COVID-19 lockdown](https://www.euractiv.com/section/politics/news/domestic-violence-increases-in-france-during-covid-19-lockdown/) (31 March 2020) [↑](#footnote-ref-4)
5. The Guardian, [Lockdowns around the world bring rise in domestic violence](https://www.theguardian.com/society/2020/mar/28/lockdowns-world-rise-domestic-violence) (28 March 2020) [↑](#footnote-ref-5)
6. FDFA, [Ecoute Violence Femmes Handicapées](https://fdfa.fr/ecoute-violences-femmes-handicapees/) [↑](#footnote-ref-6)
7. EIGE, [Helplines for victims of violence](https://eige.europa.eu/sites/default/files/helplines_web_final_updated_14_05_20.png) [↑](#footnote-ref-7)
8. Inclusion Europe, [Life after violence report: Violence against women with intellectual disabilities in institutions](https://www.inclusion-europe.eu/life-after-violence/#Outcomes), (2019) [↑](#footnote-ref-8)
9. EDF Women’s Voice Newsletter, [Issue 19](https://us9.campaign-archive.com/?u=865a5bbea1086c57a41cc876d&id=3f3ede0686) (November 2020); and on [EDF Disability Realities Blog](https://www.edf-feph.org/blog/stuck-in-institution-raped-by-her-carer/). [↑](#footnote-ref-9)
10. COVID-19 and the Rights of Persons with Disabilities Guidance, page 7. [↑](#footnote-ref-10)
11. Sisters of Frida, [The Impact of COVID 19 on Disabled Women From Sisters of Frida](http://www.sisofrida.org/wp-content/uploads/2020/05/The-impact-of-COVID-19-on-Disabled-women-from-Sisters-of-Frida.pdf) (May 2020), page 26. [↑](#footnote-ref-11)
12. UN Office of the High Commissioner for Human Rights, [COVID-19 and the Rights of Persons with Disabilities Guidance](https://www.ohchr.org/Documents/Issues/Disability/COVID-19_and_The_Rights_of_Persons_with_Disabilities.pdf), page 7. [↑](#footnote-ref-12)
13. Sisters of Frida, [The Impact of COVID 19 on Disabled Women From Sisters of Frida](http://www.sisofrida.org/wp-content/uploads/2020/05/The-impact-of-COVID-19-on-Disabled-women-from-Sisters-of-Frida.pdf), (May 2020), page 26. [↑](#footnote-ref-13)
14. EDF, [Position paper on sexual and reproductive health and rights of women and girls with disabilities](http://www.edf-feph.org/sites/default/files/edf_position_paper_on_srhr_english_0.pdf), (March 2019).   [↑](#footnote-ref-14)
15. MS Magazine “[In the Battle Over Abortion, Polish Feminists with Disabilities Are Claiming Their Rights](https://msmagazine.com/2020/12/15/abortion-poland-polish-feminists-women-with-disabilities-fetal-defect/)”, (15 December 2020). [↑](#footnote-ref-15)
16. Women Enabled International, [Submission to the Special Rapporteur on Violence against Women: Violence at the Intersection of Gender and Disability during COVID-19](https://womenenabled.org/pdfs/WEI%20SRVAW%20Submission%20DV%20COVID%20FINAL%20June%2030%2C%202020.pdf), (30 June 2020). [↑](#footnote-ref-16)
17. According to data from the European Institute on Gender Equality, in the European Union women spent on average 13 hours more than men every week on unpaid care and housework. EIGE, [Unpaid care and housework](https://eige.europa.eu/covid-19-and-gender-equality/unpaid-care-and-housework). [↑](#footnote-ref-17)
18. EIGE, [Gender equality and long-term care at home](https://eige.europa.eu/publications/gender-equality-and-long-term-care-home), (2020): On average children with disabilities are more likely to live in a single-parent household, and women make up almost 85% of all single parents in the EU. [↑](#footnote-ref-18)
19. EIGE, [Poverty, gender and lone parents in the EU](https://eige.europa.eu/publications/poverty-gender-and-lone-parents-eu), (2016): Almost half (48%) of single mothers are at risk of poverty or social exclusion, compared to a third (32%) of single fathers. [↑](#footnote-ref-19)
20. EIGE, [Gender equality and long-term care at home](https://eige.europa.eu/publications/gender-equality-and-long-term-care-home), (2020). [↑](#footnote-ref-20)
21. Inclusion Europe, [Neglect and discrimination. Multiplied. How Covid-19 affected the rights of people with intellectual disabilities and their families](http://www.inclusion-europe.eu/wp-content/uploads/2020/11/COVID-report-Final.pdf) (November 2020) [↑](#footnote-ref-21)