‘Brave New World? – Is the Convention on the Rights of Persons with Disabilities a blueprint for Utopia?’

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Synopsis

Women with disabilities in Australia are over-represented in the most marginalised portion of the population. The twin discriminations of disability and gender, coupled with political, corporate and community neglect over many years have entrenched us amongst the poorest of the poor. A raft of prolonged and pro-active measures is needed to address this polarisation. Systemic advocacy is a primary tool which Women With Disabilities Australia (WWDA) has used to begin the long haul to redress and eradicate these imbalances. National and international funding support has enabled WWDA to conduct several capacity building projects. This paper examines the successes and shortfalls of these activities. It looks at whether the new UN Convention on the Rights of Persons with Disabilities (CRPD) will help or hinder WWDA’s agenda. How can the CRPD be used to drive greater cooperation within the sector and through the sector to the wider populace? Much responsibility now rests with persons with disabilities to ensure that there is integration of input from Disabled People’s Organisations and Disability Service Organisations. Our “Nothing About Us – Without Us” mantra and the CRPD should now be the impetus to justify women with disabilities being enabled to more fully engage in all aspects of society. Utopia may be a pipe dream but glimpses of hope have appeared.

Brave New World?

Before starting, I would like to acknowledge the traditional owners of the land on which we meet today, to salute the wisdom of their ancestors and the role of the current custodians.

‘Brave New World’ is a title that has been mistakenly hijacked to become a hackneyed phrase inferring our being on the verge of utopia. In reality the satirical world Aldous Huxley created tapped into a 1930s paranoia about societal values being sacrificed to mass consumerism, promiscuous sex, and the comatose indifference induced by taking the government issued ‘soma’. I think similar paranoia persists today. He actually meant the opposite, being on the brink of disaster.

Feminism

Today I do want to look at the marginalisation of women with disabilities but in order to assess if the UN Convention on the Rights of Persons with Disabilities (CRPD) will fulfil the hopes we have for it, I would like to begin by doing a quick comparison of the history of the women’s movement and the history of the disability movement. And how can we definitively say when or where either movement began? If we look at the continuum from the appearance of *homo sapiens* from the
primordial slime to the emergence of modern democratic thought, I think it is difficult to pinpoint the birth of either movement.

So, to take an arbitrary starting point with feminism, I go back to the suffragettes’ movement of the late nineteenth and early twentieth centuries. Women came together in the realisation that to change their social and economic situation they needed to have the vote. Similarly people with disabilities in the ‘60s and ‘70s realised that to change their social and economic situation they needed similar solidarity.

It is worth reflecting that the word ‘suffrage’ was used in the American constitution to mean an ‘inalienable’ right to vote. It was then used as a derogatory label for politically active ‘ladies’, and from that adopted by the feminists. It proved to be an apt and symbolic word for the movement – being almost a homophone of ‘suffering’ and neatly containing the word ‘rage’. People with disabilities are perhaps more accustomed to the use of derogatory labels: cripple, cretin, moron, defective and idiot have been coined as medical terms and then used to belittle and dismiss.

In Australia we know that women claim universal suffrage from 1902 – but the starting line is somewhat blurry, and shamefully delayed till the ‘60s for indigenous women. So, what have women achieved in Australian society in the intervening 100-odd years since obtaining the vote.

Here’s a few facts about women in Australia that:

- on average women who work full-time earn 17 per cent less than men¹
- a 25 year old woman starting work today will earn nearly a million dollars ($900,000) less than here male peer over her working life²
- women have drastically lower retirement savings.
- Employment is heavily gender segregated with women working poorly paid jobs in health, education, cleaning, and in textiles, clothing and footwear factories³.
- Women’s labour force participation is 58.8%, 13 percentage points lower than for men, one of the lowest rates in the OECD⁴.
- Only 55.4% of Women are in F/T work, compared to 84% of men
- Those women in P/T work make up three quarters of the P/T workforce;
- Representation on company boards and in top managerial positions has decreased between 2006 and 2008⁵.

¹ Australian Bureau of Statistics, *Average Weekly Earnings Australia November 2008*, Cat. no 6302.0, average weekly ordinary time earnings of full-time employees, seasonally adjusted data.
⁴ Organisation for Economic Co-operation and Development
The Personal Safety Survey of 2005\textsuperscript{6} revealed sobering statistics about the incidence of violence against women\textsuperscript{7}. In 2004 Access Economics\textsuperscript{8} estimated the cost of domestic violence to the Australian economy at around $8 billion dollars per annum. It is significant that neither of these studies looked at the levels of violence against women with disabilities, or against all people with disabilities, so that the violence we experience remains hidden and regarded as inconsequential.

This litany of dismal figures is simply a quantitative reflection of the pervading societal values where women are devalued, objectified and exploited. We need only to look at the world of football or men’s sport, to know how true this is.

For women then, this can hardly be called a century of progress. And remember I have not yet mentioned specific statistics for women with disabilities. Nor will I. You get the picture. Suffice to say that women with disabilities have significantly low outcomes in any parameter that you care to measure.

Women have needed and continue to need some national and international instruments which focus attention on their situation and promote use of positive actions of redress.

What part has human rights played in this? Australia ratified the UN Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) in 1983, and on the 25\textsuperscript{th} anniversary last year ratified its Optional Protocol. In CEDAW the civil rights and legal status of women are addressed in great detail.

Some positive actions were brought about by the Equal Opportunity for Women in the Workplace Act 1999. However the fact that women have gone backwards in many areas of life signals that the main barriers to progress are cultural and attitudinal.

I maintain that employment, employment conditions and employability are by far the most important factors in raising the status of women. And to change these factors we need a number of actions:

i. national leadership

ii. positive discrimination


\textsuperscript{7} Australian Bureau of Statistics 2005 Personal Safety Survey: Summary of Results, Australia 2005 (cat. no. 4906.0)

\textsuperscript{8} 40% of women have experienced at least one incidence of violence since the age of 15

\textsuperscript{8} Access Economic 2004, The Cost of Domestic Violence to the Australian Economy, Partnerships Against Domestic Violence - an Australian Government Initiative
iii. elimination of gender bias in education  
iv. use of CEDAW as an agenda to drive change  
v. a National Plan to reduce Violence  
vi. a National Women’s Health Plan  
vii. a National Women’s employment plan  
viii. a national paid maternity leave plan  
ix. unbiased access to the justice system; and  
x. a liveable government support scheme for women not in the workforce (e.g. single mothers)  

**People with Disabilities**

And what is the equivalent term to Feminism to describe the disability movement? The terms Ableism and Disableism have both been commandeered to describe the discrimination visited upon us from the non-disabled world. So there seems to be no equivalent ‘ISM’ left to use.

Once again, I need to take an arbitrary starting point for the Disability Movement. I have chosen that point in Australian history which saw the return of soldiers from the first world war. These men, and some women, who had acquired their disabilities as a result of the war could not so easily be consigned to the ‘asylums’ which still housed many of those with congenital disabilities. Prior to that, in fact since before biblical times, society’s treatment of people with disabilities had been to ignore, hide and curse us. When visible we were exhibits, freaks, oddities and objects of ridicule. I am using the past tense here somewhat advisedly. In the late 1700s in America, about 80% of the people in ‘poor houses’ and prisons were people with disabilities. Sterilization of people with mental illness, mainly women, was accepted. A societal mentality which feared difference and disability, and condoned eugenics held sway. Once again I use the past tense with irony.

The inadequate state of mental health services in Australia is such that prisons are holding grounds for our mentally ill. The 2001 NSW Inmate Health Survey\(^9\) found that 50% of males and 30% of females needed a mental health referral for major depression during their incarceration. The incidence of psychiatric disorders was more than 3 times that of the general population, and 12% of the prison population has intellectual disabilities compared to 2-3% of the population outside prison.

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In the late 1800s and early 1900s there was a marginal improvement in attitudes to people with disabilities. The ‘asylums’ which housed us and kept us “in cages, in closets, cellars. Stalls, pens! Chained, naked, beaten with rods, and lashed into obedience”\textsuperscript{11} (this is a quote from an American reformer) were rebadged as ‘schools’, ‘hospitals’, and ‘institutions’. Today there are still too many incidents of such mistreatment, although over-medication may have replaced the physical chains.

In fact, the Australian Government has had indirect involvement with disability movement. It could be argued that the introduction of the Invalid Pension in 1908 enabled people with disabilities to contemplate independence and a rightful role in society. However, from 1918 onwards the first government funded rehabilitation programs began because the shame of hiding the returned heroes overcame the shame of disabilities. During the Second World War the number of people with disabilities again increased rapidly, and the Commonwealth Rehabilitation Service (CRS) started. At the same time the number of volunteer organizations running ‘sheltered’ workshops and accommodation services for people with disabilities expanded. Through all of these changes, no matter from what disability model or motivation, the fledgling belief that people with disabilities have a right to lead decent lives strengthened.

In the ‘60s and ‘70s the disability rights movement, spearheaded by people with disabilities ourselves, gained some momentum from the civil rights movement in the United States, our own aboriginal rights movement, and the women’s rights movement. Of pivotal importance was the emergence of people with disabilities with professional qualifications working in the area of rehabilitation. Treatment of people with disabilities began to be wrested from the exclusive domain of the non-disabled.

A watershed year was 1981, the International Year of Disabled Persons. In this year Disabled People’s International held its first World Assembly in Singapore. 13 Australians participated\textsuperscript{12}, setting up the Australian branch of DPI on their return. Emphasis on the rights of people with disabilities was recognised in the Disability Discrimination Act 1992 (DDA), which focuses on identifying discrimination, equality in the law, and acceptance of the rights of people with disabilities to fully participate in society\textsuperscript{13}.

A number here at this conference have been intimately involved in the disability movement and promoting our rights nationally and internationally since before the ‘60s. Thus many factors have


culminated in Australia’s ratification of CRPD last year. We add this convention to the toolbox of instruments which are needed to bring about real changes in our lives.

Similarly, I maintain that employment, employment conditions and employability are by far the most important factors in raising the status of women with disabilities. And to change these factors we need a number of actions:

- xi. national leadership
- xii. positive discrimination
- xiii. elimination of gender & disability bias in education
- xiv. use of CRPD with CEDAW as agendas to drive change
- xv. inclusion in a National Plan to reduce Violence
- xvi. inclusion in a National Women’s Health Plan
- xvii. inclusion in a National Women’s employment plan
- xviii. rights to motherhood and a national paid maternity leave plan
- xix. unbiased access to the justice system; and
- xx. a liveable government support scheme for women with disabilities not in the workforce

Perhaps for both women and people with disabilities, I should have started my pondering in 1948 at the UN with the Universal Declaration of Human Rights, for each movement has been rights based. The parallels between these two struggles fill me with equal measures of optimism and trepidation. It is more than 100 years since women got the vote, and a quarter of a century since ratification of CEDAW. Undeniably many gains for all women have been brought about by both instruments, yet cultural, societal values and negative attitudes have changed little. xxxSimilarly it is cultural, societal values and attitude which are the main barriers to the full participation in society of people with disabilities14.

So do we have reason to be filled with hope that the CRPD will deliver for us? But to be hopeful, I need to turn that question around to ask how will we use CRPD as an instrument by which we will deliver better outcomes for ourselves?

I do not forget the anticipation that was felt by people with disabilities around the world when CRPD was adopted at the UN in 2007; the greater excitement when it came into force, and the elation here when ratified by the Australia Government on 18th July 2008. So I do believe that CRPD has the potential to serve all people with disabilities well. I also acknowledge that since 24th November 2007 there has been a growing list of positive changes for people with disabilities. I

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14 Campbell, J & Oliver, M Disability Politics: Understanding our Past, Changing our Future
applaud Bill Shorten for naming the neglect of the sector and naming the barriers to inclusion, doing both loudly and often, and not only to the converted.

As people with disabilities what do we need to do to drive the implementation of CRPD?

Firstly we need increased numbers of people with disabilities involved. Since 1995 WWDA has conducted several capacity building and leadership projects, through which we markedly increased the number of our constituents with expertise to undertake systemic advocacy, or the confidence to advocate for their individual rights. Significant numbers from all over Australia have been involved. However on a daily basis WWDA still faces a shortage of women who can represent us. Many women with disabilities have stronger affiliations to specific disability organisations, many do not affiliate at all, and some are in the workforce (all power to them) but therefore not available. I would like to suggest a three hats policy for all women with disabilities, especially those at this conference. Certainly be a representative and advocate for a specific disability. That’s hat number One. At the same time be aware of the low status of women with disabilities and advocate for improvement, Hat Number 2, and Hat Number 3 is to know and use the articles of both CRPD and CEDAW to give a human rights basis to all actions.

Secondly, implementation of CRPD demands that we begin to act for the whole of the sector. Fragmentation into specific disability groupings without increased cooperation, and collaboration is detrimental to the sector as a whole. CRPD does not single out any specific disability group, but does single out women (Article 6) children (Article 7) and violence (Article 16). Yes! specific disability groupings still have a role but we now need more cross-disability involvement and awareness.

Thirdly, CRPD demands that we seek better cooperation between Disability Service Organisations (DSOs) and DPOs. We need to reach and engage with all those people who are clients of DSOs and who access the wider community with their support. These organisations are no longer the charitable institutions that we struggled to leave. Many are committed to a rights based approach. But they are an industry in themselves and very different in structure from DPOs. We need to work with DSOs to further change their philosophies and operations so that people with disabilities are empowered to have autonomy in the arrangement of their support needs and to live independently in the community. To do this we will have to work cooperatively with and from within DSOs. Together we will need to work to change government philosophies.

Fourthly, we need to engage with those who define us therapeutically and medically. This too is an industry relying on our disabilities. They too need to widen their viewpoints, to look at rights based
outcomes for what they do, to help them relinquish a little power (or even a lot) and put it back in the hands of their patients.

Fifthly, we need to engage with those who research our physical conditions and those who conduct the burgeoning disability studies courses, to ensure that they are contributing to our capacity building; getting baseline evidence about aspects of our lives; assisting more people with disabilities into employment, and helping to make us more visible in all walks of life.

Lastly, an implementation taskforce is a great initiative, but as individuals we all have responsibility to crusade a little for the cause. The dynamics of power have to change; we can no longer be outsiders. “Nothing about us without us” remains a meaningful and apt mantra.

Finally, I have some questions for AFDO:

1. how do we strengthen DPOs?
2. how do we improve cooperation between DPOs?
3. how do we create points of contact with DSOs?
4. how do we engage the clients of DSOs?
5. how can we change the disability culture\textsuperscript{15} which of the professionals in our lives?
6. how can we use research and education institutes to get the baseline evidence we need to measure what we achieve?

In conclusion, I return to the concept of a “Brave New World”, I know that the CRPD is just a beginning, it is not our ‘soma’ to lull us into a belief that we have reached utopia. I believe that it is the most useful tool for driving change. This conference is part of the pathway of working out ways of cooperating to use CRPD to achieve better life outcomes for all people with disabilities.

Thankyou

\textsuperscript{15} Jaeger, P & Bowman C A (2005) \textit{Understanding Disability, Inclusion, Access, Diversity and Civil Rights}, Greenwood Publishing Group