Joint Statement

Women and girls with disabilities and older women in relation to the COVID-19 pandemic

28 April 2020

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) recognizes that women and girls with disabilities are subject to multiple forms of discrimination. COVID-19 highlights the disproportionate negative impact that affects women and girls with disabilities during the pandemic.

Article 11 of the CRPD establishes that the States Parties shall adopt, in accordance with their responsibilities under international law, and specifically international humanitarian law and international human rights law, all necessary measures to guarantee the safety and protection of persons with disabilities in situations of risk and humanitarian emergencies.

The 2030 Sustainable Development Agenda sets the goal of achieving gender equality and empowering all women and girls, which undoubtedly involves women and girls with disabilities. In the context of the pandemic, it is important to link the aforementioned objective with the goals that emphasize the response to possible epidemics, especially by achieving universal access to

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health and universal health coverage that ensures access to goods, services, facilities, medicines and vaccines always respecting their legal capacity to make their own decisions with the necessary support when requested by the person.\textsuperscript{2} At the same time, promoting well-being and mental health, reinforcing in all countries the reduction and prevention of health-related risks.

A special call is made to the States to ensure:

1.- The inherent right to life of all human beings and to adopt all necessary measures to guarantee the effective enjoyment of this right by women and girls with disabilities on an equal basis with other persons.\textsuperscript{3}

2.- The access of women and girls with disabilities to health goods, services and facilities of the same variety, quality and level of medical care provided to others, including mental health care.

3.- The supply of water and food for women and girls with disabilities, on equal terms with others.

4.- Personal assistance, home care and rehabilitation services, when necessary, which must be continuous to guarantee the exercise of the rights of women and girls with disabilities, considering the importance of community support.

5.- That the strategies on violence against women and girls be fully accessible to women and girls with disabilities, including the reporting, assistance and recovery mechanisms. For this, police personnel and the administration of justice will be trained to adequately care for women and girls with disabilities who are threatened or who are victims of violence, abuse or mistreatment. It is relevant to protect women and girls with disabilities from all forms of violence, abuse or

\textsuperscript{2}The right to the highest attainable standard of health. General Comment No. 14 of the UN Committee on Economic, Social and Cultural Rights (2000). Link: http://docstore.ohchr.org/Docs/Services/FilesHandler.ashx?enc=4siQ6QSmI8EDzفزEoxwCuW1AVC1NkPsgUedPIF1vPMMJ2c7ey6PAz2qaoITDjmc0Ty%2b9m%2bsAt6DNzdEqA6SuP2r0w%2f6sVBTpvtSCbiOr4XVFQhQY6SauTFSbQRWPNDxl

\textsuperscript{3}Ibid, article 10.
mistreatment, using judicial precautionary measures to remove the aggressor from the domicile or residence in which they are located. When this is not possible, women and girls with disabilities should be transferred to safe and free places that protect their personal well-being, which must be fully accessible. The personnel who work at the protection services to prevent exploitation, violence and abuse must be trained to care for women and girls with disabilities.

6. The right to quality inclusive education, especially for girls and adolescents with disabilities, during quarantine, through distance education and television educational services, which must be accessible.

7. Economic income for women with disabilities, including "... employment protection measures, such as unemployment benefits and basic emergency income ..."⁴, also considering labor flexibility and teleworking, when appropriate.

8. Access for women and girls with disabilities to social protection programs and poverty reduction strategies, especially on the occasion of the pandemic, in order to protect their needs, taking into account the perspective of childhood, adolescence and aging.

9. The supervision of all the services related to the crisis of COVID-19, including information on essential supplies and services, which must be accessible to all persons. This includes face-to-face, telephone or virtual medical advice, mental health care, and accessible quarantine facilities.

10. That all strategies in support of women and girls during the pandemic, be fully applied and accessible to women and girls with disabilities, on equal terms

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with the others, considering the situation of poverty in which they may find themselves.

11.- That after quarantine, women and girls with disabilities have all the means and facilities to resume their daily lives, including education and work, as appropriate.

12.- That the mental health of women and girls with disabilities who are in institutions (psychiatric hospitals) be protected, for which it will be necessary to implement all kinds of sanitary and preventive measures relating to COVID-19, prohibit the use of isolation, restrictions, non-consensual medication or other treatments that inflict suffering and / or that compromise the person's immune system, prevent any restriction on the use of toilets, provide timely access to accessible information about COVID-19, facilitate telephone or virtual contact with family and friends and carry out regular supervision of these venues to comply with the aforementioned measures and to avoid all kinds of neglect, abuse or neglect. The review of involuntary hospitalizations will be appropriate to facilitate the discharge and release, and apply the recommended “physical distance”\(^5\) during the pandemic. Persons who are in these institutions should have access to the COVID-19 tests and the subsequent treatment if they are infected, on equal terms with others and without any type of discrimination, always respecting their dignity, autonomy, preferences and privacy of their personal data. The same should be done in the case of women with disabilities in prisons.

13.- That the recommendations indicated above be made applicable to older women, taking into account the Inter-American Convention on the Human Rights of Older Persons, the only binding international human rights instrument on the matter, which constitutes a normative standard that protects the right to life and dignity in old age, autonomy, health, protection in situations of humanitarian

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emergencies, security, home care services, a life without any type of violence, to receive dignified treatment and to live in a healthy environment and have basic services.

14.- That women and girls with disabilities, through their representative organizations, be consulted and continuously and actively involved in the planning, implementation and monitoring of prevention and containment measures of COVID-19, providing a participatory and inclusive response to the pandemic. The same must be applied for the participation and inclusion of older women through their representative organizations. The experience of women and girls with disabilities, as well as older women, in the face of the COVID-19 pandemic, make it essential and urgent that the Beijing + 25 activities projected for the year 2021 and the campaign of the Generation Equality Forum, give priority to the effective participation of women and girls with disabilities and older women in its various phases and activities.

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