



Working together to
ensure the right of girls
with disabilities to live
free from violence



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Background

In 2022, UNICEF, UN Women, WHO, ILO, FAO, UNDP, UNFPA and UNPRPD worked together to develop an inter-agency statement on violence against girls with disabilities, listing the main rights violations they face, along with key advocacy messages targeting States, international organizations, civil society and any other stakeholders, highlighting areas where the implementation of the right of girls with disabilities to be free from violence can be strengthened.

The first part of the statement (paragraphs 1–6) is devoted to the phenomenon of violence against girls with disabilities in general, its widespread character and its forms, and the main risk factors. Identifying these factors is critical in informing recommendations made to States to promote, respect, protect and fulfil the right of girls with disabilities to live free from violence. States must act against the root causes of violence because merely addressing its effects is not enough.

The second part (paragraphs 7–10) contains recommendations for the respect, protection and fulfilment of the right to a life free from violence in all spheres.

The inter-agency statement does not adopt a definition of violence against girls with disabilities, but rather limits itself to highlighting the seriousness of violence against girls with disabilities, its causes, its specific and aggravated forms in relation to other children, its risk factors, and drivers leading to its persistence.

UNICEF, with support from other United Nations organizations, the International Disability Alliance and Inclusion International, ran a validation survey with girls and youth with disabilities,¹ to receive feedback on the subject of the statement and allow them to express their opinions on the situations of violence they face. The results of the survey are included in footnotes in the Annex to this statement.

1 Respondents to the survey comprised 50 girls and youth with disabilities from Argentina, Botswana, Bulgaria, Colombia, the Gambia, Ghana, India, Kenya, Mauritius, Mexico, the Niger, Nigeria, the Philippines, Rwanda, the Sudan, Togo, Uganda, the United Kingdom of Great Britain and Northern Ireland, the United Republic of Tanzania, the United States of America and Zambia. In terms of age groups, 3 respondents were between 14 and 17 years old, 8 between 18 and 22 years old, and 39 between 23 and 30 years old. In terms of disability, 48 self-identified as having a disability, 18 stated they need accommodation measures related to mobility, 7 related to seeing, 7 related to hearing, 11 related to communication, 8 related to cognition, 7 related to self-care, and 7 stated they would need other types of accommodation measures.

Statement

1. We, the signatories to this statement, express our deep concern at the extent, intensity and frequency of violence against girls with disabilities, including gender-based violence, through actions, omissions or threats that are intended or likely to harm or cause suffering to them. Though the collection of empirical evidence and data on the phenomenon is challenging and needs further attention, girls with disabilities can experience not only high rates of gender-based violence but also particular forms of violence based on their age and disability. Such actions have serious and permanent consequences for their lives, integrity, self-esteem, health, well-being, holistic development and the full enjoyment of their rights, and can at times result in death.

2. Girls with disabilities are subject to multiple and intersecting forms of discrimination and violence, which constitute violations of their rights. Discrimination and violence against girls with disabilities are rooted in gender inequalities, adult-centredness, ableism, and other power dynamics and systems that hinder the full enjoyment of their rights, keeping them in a subordinate position in all aspects of life. Discrimination based on gender, age and disability may intersect with other discrimination grounds such as class, race or ethnicity, sexual orientation, gender identity and expression, sex characteristics, refugee or migrant status, indigenous or minority status, health status, and economic and social status, including poverty. These intersections exacerbate the risk and impact of violence and the subsequent needs of girls with disabilities.

3. Violence against girls with disabilities is systemic and structural. It is perpetuated in laws, policies, norms and institutional practices, through which interpersonal violence is reinforced. Violence occurs in both public and private spaces, across sectors, including education, health care, social services, justice and the security sector; and in all settings

and contexts, including the home, residential facilities and institutions, social groups and the community, rural and urban areas, the digital environment; when performing an economic activity, when crossing borders and during migration, in times of peace and in armed conflicts, and in emergency situations such as natural disasters or pandemics. Girls with disabilities experience violence at all ages but may experience violence of specific forms depending on their age, with particular regard to early childhood and adolescence and their specific needs.

4. The intersection of systemic forms of discrimination is likely to result in frequent, aggravated and specific forms of violence against girls with disabilities, such as certain types of neglect or negligent treatment; physical, mental or emotional punishment, injury or abuse; belittling; sexual violence and violation of sexual and reproductive rights; trafficking and economic exploitation such as child labour; harmful practices such as child marriage; or violence and coercive practices under the guise of medical treatment, including forced institutionalization and invasive and irreversible surgical practices performed without their consent. Under particular circumstances, some of these forms of violence may be life-threatening and amount to torture or cruel, inhuman and degrading treatment.

5. Various factors lead to the persistence of violence against girls with disabilities. Entrenched negative stereotypes, myths, social stigma and prejudices based on age, gender and disability (among other factors) affect their power and status in interpersonal relationships, households and communities. Other factors obstruct the full enjoyment of their rights on an equal basis. These include: lack of quality, accessible and inclusive education; lack of vocational training and education, including comprehensive sexuality education and other sexual and reproductive rights education for girls

with disabilities, their parents and caregivers to identify, prevent, avoid and adequately respond to situations of risk or violence; fear of unwanted consequences or reprisals for reporting violence; exclusion from protective peer networks, including age- and gender-appropriate social spaces and activities; deprivation of legal capacity; lack of autonomy and privacy, isolation, exclusion and insufficient participation in decision-making in issues affecting their lives; and low levels of birth registration.

6. Other factors directly relate to non-compliance with state obligations, such as lack of access to essential infrastructure, goods and support services in the community and other entities that support the exercise of equal rights; inadequate support for parents and caregivers in caring for children with disabilities, especially poor households; impunity and invisibility of violence; existence of barriers to accessing justice, both structural (e.g., unavailability of forms in Braille or text-to-speech) and institutional (e.g., complaints not taken seriously because of stigma or negative stereotyping); or lack of data and transparency to enable policy and programmatic frameworks and public oversight.

7. In accordance with the Convention on the Rights of the Child (CRC), the Convention on the Rights of Persons with Disabilities

(CRPD), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), and other treaties, such as the Violence and Harassment Convention (No. 190),² and international instruments,³ including the Sustainable Development Goals (SDGs),⁴ States have the obligation to respect, protect and fulfil the right of girls with disabilities to live free from violence.⁵

8. To guarantee the rights of girls with disabilities to survival and development, to live free from violence and to exercise bodily autonomy, and to ensure a safe, inclusive and supportive environment for them, States must urgently adopt and finance, at all levels of government, comprehensive multisectoral and intersectional strategies that include policies and programmes as well as legislative, judicial, administrative, security, social, health, educational and/or any other appropriate measures. Such strategies, developed with the effective participation of girls with disabilities and their representative organizations, must include:

- Addressing multiple, structural, systemic and intersectional discrimination
- The central role of the family in the provision of care and protection
- Appropriate responses to family violence
- Protection and response mechanisms that are tailored to the needs and experiences of different age groups, such as adolescent girls

2 Among others: ILO Convention no. 138 Minimum Age Convention, ILO Convention no. 182 Worst Forms of Child Labour Convention, ILO Convention no. 189 Domestic Workers Convention.

3 Among others: United Nations Declaration on the Elimination of Violence Against Women (1993); International Conference on Population and Development, *Programme of Action*, Cairo, 5–13 September 1994; Beijing Declaration and Platform for Action (1995).

4 The 2030 Agenda for Sustainable Development and the SDGs are grounded in the Universal Declaration of Human Rights and other international human rights treaties and are informed by the right to development. See A/RES/70/1, para 10. Additionally, SGD targets 4.5, 4.7, 4.a, 5.1, 5.2, 5.3, 8.7, 10.2, 10.3, 16.1 and 16.2 more specifically address different aspects related to the right of girls with disabilities to live free from violence.

5 See, among others: OHCHR, UNFPA, UNICEF, UN Women and WHO, *Preventing Gender-biased Sex Selection, An interagency statement*, 2011; WHO, *Global Plan of Action to Strengthen the Role of the Health System Within a National Multisectoral Response to Address Interpersonal Violence, in Particular Against Women and Girls, and Against Children*; UNFPA, *Young Persons with Disabilities: Global study on ending gender-based violence, and realizing sexual and reproductive health and rights*, 2018; UNFPA, *Women and Young Persons with Disabilities: Guidelines for providing rights-based and gender-responsive services to address gender-based violence and sexual and reproductive health and rights*; UNICEF, *Children with Disabilities*, Factsheet, September 2022; UNICEF, *Violence against Disabled Children, Summary Report*, Thematic Group on Violence against Children with Disabilities, 2005; UNICEF, *The State of the World's Children 2013: Children with disabilities*, 2013; United Nations, *Report of the United Nations Entity for Gender Equality and the Empowerment of Women on the Activities of the United Nations Trust Fund in Support Actions to Eliminate Violence against Women*, note by the Secretary-General (A/HRC/44/3-E/CN.6/2020/8).

- The promotion and creation of interpersonal relationships and safe environments in the community
 - A focus on risk factors
 - The consideration of other situations of possible vulnerability
 - The setting of monitoring mechanisms, especially in residential facilities and institutions
 - Strengthening of legislation and policies
 - The allocation of sufficient resources
 - The collection and analysis of data on violence disaggregated by age, sex and disability
 - Coordination and accountability systems and mechanisms.
- 9.** State action must aim at:
- Preventing discrimination and violence
 - Strengthening protection and bodily autonomy
 - Providing immediate response to violence by adopting measures that ensure the safety of victims and access to appropriate services, including health, safe housing/ shelter and psychosocial services for girls subjected to violence
 - Guaranteeing access to justice, accountability mechanisms, remedies and the effective implementation and enforcement of laws aimed at preventing and eliminating discrimination, exploitation and violence against girls with disabilities.

When violence occurs, States must protect victims, survivors, witnesses of violence and those supporting the survivor, including ensuring confidentiality, while investigating, prosecuting and punishing those responsible; and provide access to recovery, redress and reparations to all victims and survivors. State action should strengthen the capacity of families and caregivers, communities and local institutions to support girls with disabilities throughout the process.

10. While States have the obligation to adopt comprehensive strategies, we all are committed to respecting, protecting and fulfilling the rights of girls with disabilities. Treaty bodies, relevant Special Procedures, the Human Rights Council (especially through Universal Periodic Review [UPR] recommendations), national human rights institutions, United Nations organizations, international and regional organizations, civil society organizations (including organizations of persons with disabilities and women- and girl-led organizations) and the private sector, must join efforts in this task by providing support and monitoring actions for States, including assistance in the establishment of independent and well-functioning national monitoring mechanisms. We, the signatories to this statement, commit to working together to fully ensure the right of girls with disabilities to live free from violence.

1. Every girl with disabilities must be recognized, respected and protected as a unique and valuable human being, with her own personality, interests, rights and specific needs,⁶ including the right to live free from violence. Violence against girls with disabilities includes “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse,”⁷ along with all actions, omissions or threats rooted in gender, disability and/or age discrimination that result in, or are likely to result in, death or physical, sexual or mental harm or suffering to the girl. It also encompasses coercion or arbitrary deprivation of liberty, whether occurring in public or in private.⁸

Though solid evidence is scarce, girls with disabilities are estimated to be at greater risk of violence, injury, abuse, neglect or negligent treatment, maltreatment or exploitation both within and outside the household.⁹ Disproportionately exposed to gender-based violence,¹⁰ they can suffer severe injuries and

prolonged abuse.¹¹ Violence varies considerably depending on the type and degree of disability, and on the existence of additional grounds of discrimination.¹²

Violence can be lethal or non-lethal; it can be the origin or the aggravating factor of an existing disability, and it can trigger subsequent acts of violence with permanent consequences, including family and social rejection.¹³ Whatever its form and intensity, violence can have negative effects on girls with disabilities, their well-being and their holistic development. It constitutes a violation of their rights and best interests,¹⁴ preventing them from participating fully and equally in society.¹⁵

2. According to the Special Rapporteur on the Rights of Persons with Disabilities, “the intersection between young age, disability and gender results in both aggravated forms of discrimination and specific human rights violations.”¹⁶ Discrimination based on gender, age and disability may intersect with other

6 CRC/C/GC/13, para 3 (c).

7 CRC, Article 19.1.

8 CEDAW/C/GC/19; CEDAW/C/GC/35; A/HRC/RES/47/15, Preamble.

9 A/RES 61/106, Preamble, para (q). In the survey with girls and youth with disabilities, 47 respondents said that girls with disabilities are likely to be discriminated against because of their disability, of whom 31 said by their families, 29 by teachers, 28 by friends, 31 by schoolmates, 31 by service providers, and 42 by their community. When asked if girls with disabilities are more at risk of discrimination and violence than other children, 47 responded affirmatively, and only 3 responded negatively. Those who answered affirmatively mentioned the following reasons: their increased vulnerability; lack of mobility; reduced opportunities to communicate; lack of proper justice and accountability systems; weak civil society that does not advocate for the rights of persons with disabilities; lack of or insufficient protection policy; lack of accessibility of physical environments, services, and information and communication; lack of education; intersectionality between disability, gender and age; gender and patriarchal attitudes; myths, misconceptions and cultural beliefs; lack of awareness-raising activities; lack of care services and systems for independent living; and lack of information on disability available to the general public.

10 A/72/133, paras 34 and 35.

11 A/HRC/44/3-E/CN.6/2020/8, para 15.

12 A/72/133, para 35; CRPD/C/GC/3, para 34; CRPD/C/GC/3, para 49. When asked if girls with disabilities are likely to be discriminated against for reasons other than their disability, 42 respondents answered affirmatively, and 5 responded negatively. Of those who responded affirmatively, 36 said they were likely to be discriminated against because of their gender, 25 because of their race/ethnicity, 30 because of their sexual orientation and/or gender identity, 22 based on sex characteristics, 16 based on migration status, 21 based on health, 2 based on none of the above, and 2 preferred not to answer.

13 A/HRC/7/3, para 36.

14 CRC/C/GC/14, para 4.

15 A/HRC/RES/47/15, para 3.

16 A/72/133, para 7.

discrimination on grounds such as class, race or ethnicity, sexual orientation, gender identity and expression, sex characteristics, refugee or migrant status, indigenous or minority status, health status, and economic and social status, including poverty, among others.¹⁷

Along with violence, girls with disabilities also face multiple and intersectional discrimination in the exercise and enjoyment of their rights,¹⁸ and in receiving redress and support. Discrimination and violence hinder the full enjoyment of fundamental rights, including access to inclusive education, health, and sexual and reproductive health;¹⁹ access to justice,²⁰ equality before the law and recognition of legal capacity; autonomy;²¹ full participation in leisure, sports, and public and social life in the community.²²

3. Violence against girls with disabilities is systemic, because it is rooted in various systems of power and discrimination, such as unequal gender relations, adult-centrism and ableism, that shape the sociocultural norms, stereotypes and dynamics of discrimination,²³ keeping girls in a subordinate position.²⁴ Violence is structural in that it is enacted within relevant social structures such as the family, the school or the social security system, and it is institutional in that it is expressed in norms and practices emanating from different institutions, for example, in the

educational, health, legal or judicial spheres.²⁵ This matrix underlines interpersonal violence against girls with disabilities from family members and/or caregivers,²⁶ strangers, classmates or their communities.²⁷

The risk of violence in all spheres increases when gender stereotypes intersect with disability, age and other related discrimination grounds, prejudice and stigma.²⁸ Although girls with disabilities experience violence at all ages, violence may have different causes and consequences depending on age, which results in different needs to be addressed and in specific interventions that are age-sensitive.²⁹

The absence of inclusive education³⁰ maintains and reproduces a discriminatory environment towards girls with disabilities.³¹ They are subjected to invasive and irreversible health treatments and to specific forms of violence.³² They encounter difficulties in receiving protection from the police and in accessing justice, especially when they have been victims of sexual violence and other forms of gender-based violence.³³

Girls with disabilities may also encounter violence and discrimination because they belong or are perceived to belong to certain communities or social groups. They are

17 CEDAW/C/GC/35, para 12.

18 A/HRC/RES/47/15, Preamble and para 5.

19 A/72/133, para 23.

20 A/72/133, para 29.

21 A/C.3/72/Rev.1; A/72/133.

22 A/C.3/72/Rev.1 as orally amended and adopted by the third Committee by unanimous recorded vote on 21 November 2017.

23 A/61/122/Add.1, para 66.

24 CRPD/C/GC/3, para 29.

25 CRC/C/GC/13, para 3(i).

26 CRPD/C/GC/3, paras 35 and 3(h).

27 A/HRC/40/27, para 27.

28 *MiW Gender and disability Report*, June 2018, p. 10; A/HRC/RES/47/15, Preamble.

29 See, for example, UNFPA, *Young Persons with Disabilities: Global study on ending gender-based violence, and realizing sexual and reproductive health and rights*, 2018, pp. 18–19.

30 CRPD/C/EU/CO/1, para 22.

31 CRPD/C/GC/3, para 56; A/72/133, para 26; CRPD/C/GC/4, para 51.

32 A/72/133, para 32.

33 A/72/133, paras 36–37; A/67/227, para 59.

also more exposed to risks in the digital environment.³⁴ Those living in rural areas are more likely to lack adequate services,³⁵ and, in some places, are at greater risk of malnutrition, stigmatization, exploitation and abuse.³⁶ In situations of conflict or natural disasters, they are particularly exposed to violence, including sexual violence,³⁷ and discrimination,³⁸ reducing their chances of survival.³⁹ They are less likely to access recovery and rehabilitation services or justice.⁴⁰ Situations of home confinement caused by health emergencies, such as the COVID-19 pandemic,⁴¹ expose girls with disabilities living in abusive environments to aggravated violence in all its forms.⁴²

4. Girls with disabilities suffer from violence and discrimination that also affect girls without disabilities, children and people with disabilities in general. However, the intersection of systemic forms of discrimination based (at the

very least) on age, gender and disability results in higher rates of violence, aggravated types and specific forms of violence against girls with disabilities. In this regard, the Committee on the Rights of Persons with Disabilities, the Committee on the Elimination of Discrimination against Women, the Committee on the Rights of the Child, the Special Rapporteur on the Rights of Persons with Disabilities, the United Nations Secretary-General, the High Commissioner for Human Rights, the Human Rights Council, the United Nations General Assembly, various United Nations organizations, and different studies and reports have highlighted the special incidence of certain forms of violence against girls with disabilities.⁴³

According to these sources, specific forms of violence against girls with disabilities include certain types of neglect or negligent treatment (e.g., lack of supply or lack of access

34 CRC/C/GC/25, para 92.

35 E/2018/27-E/CN.6/2018/20, para 37.

36 A/74/246, para 57.

37 CEDAW/C/GC/30, para 36.

38 CRPD, *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, 2015, <<https://www.ohchr.org/Documents/HRBodies/CRPD/14thsession/Statement14thSession.doc>>; Human Rights Watch, 'As if We Weren't Human: Discrimination and violence against women with disabilities in northern Uganda', 2010, <https://www.hrw.org/sites/default/files/reports/uganda0810_brochure_low.pdf>.

39 CRPD, *Statement on Disability Inclusion for the World Humanitarian Summit*, adopted during the Committee's 14th session, 2015; CRPD, *Statement: The Situation of Persons with Disabilities affected by Disasters in Peru, Ecuador and Colombia*, adopted during the Committee's 17th session, 2017; CRPD/C/GC/3, para 50; CRPD/C/GC/4, para 14; CRPD/C/GC/6, para 45.

40 CRPD/C/GC/6, para 45; A/HRC/RES/47/15, Preamble.

41 A/HRC/RES/47/15, Preamble. See UN Women, *Women with Disabilities in a Pandemic (COVID-19)*, Country Support Policy Brief 1, 2020; UN Women, *Meeting Basic Needs of Women and Girls with Disabilities during COVID-19*, Country Support Policy Brief 2, 2020.

42 See A/HCR/47/L.18/Rev.1, Preamble and para 9.

43 See, for example, CRPD/C/GC/3; United Nations General Assembly, *Report of the Committee on the Rights of Persons with Disabilities, Thirteenth, Fourteenth, Fifteenth and Sixteenth Sessions, 25 March 2015 to 2 September 2016*, Official Records, Seventy-second Session, Supplement No. 55 (A/72/55), Annex. *Guidelines on the Right to Liberty and Security of Persons with Disabilities*; CEDAW/C/GC/31/CRC/C/GC/18; *LC v. Peru* (CEDAW C/50/D/22/2009); CRC/C/GC/9; CRC/C/GC/13; A/72/133; United Nations Secretary-General, *Situation of Women and Girls with Disabilities and the Status of the Convention on the Rights of Persons with Disabilities and the Optional Protocol Thereto*, United Nations, 2017, A/72/227; A/HRC/20/5; *Report of the United Nations Entity for Gender Equality and the Empowerment of Women on the Activities of the United Nations Trust Fund in Support of Actions to Eliminate Violence against Women*, Note by the Secretary-General (A/HRC/44/3-E/CN.6/2020/8); A/HCR/20/5; Resolution 73/155, *on Rights of the Child*, adopted by the General Assembly on 17 December 2018 [based on the report of the Third Committee (A/73/585)]; UNFPA, *Young Persons with Disabilities: Global study on ending gender-based violence, and realising sexual and reproductive health and rights*, 2018; UNFPA, *Women and Young Persons with Disabilities. Guidelines for providing rights-based and gender-responsive services to address gender-based violence and sexual and reproductive health and rights*, 2018; OHCHR, UNFPA, UNICEF, UN Women and WHO, *Preventing Gender-biased Sex Selection, An Interagency Statement*, 2011; UNICEF, *The State of the World's Children 2013*, 2013; UNICEF, *Children and Young People with Disabilities*, Fact sheet, May 2013; UNICEF, *Violence against Disabled Children*, Summary Report, Thematic Group on Violence against Children with Disabilities, 2005.

to appropriate medication or support devices); physical, mental or emotional punishment, injury or abuse⁴⁴ (e.g., the removal or denial of communication supports or communication assistance); belittling (e.g., the use of expressions that describe them as worthless, such as handicapped, deficient or incapable); sexual violence, reproductive violence, and violation of sexual and reproductive rights (e.g., the deprivation of the right to decide autonomously about their sexual and reproductive health resulting in high rates of forced sterilization among girls with disabilities); trafficking and economic exploitation (e.g., forced begging); harmful practices (e.g., accusations of 'spirit possession'); and violence and coercive practices under the guise of medical treatment (e.g., specific forms of recourse to pharmacological, physical or mechanical restraint).⁴⁵

Under certain circumstances, some of these forms of violence have been qualified by the Committees as torture or cruel, inhuman or degrading treatment.⁴⁶ Under the Convention against Torture, the Convention on the Rights of the Child and the Convention on the Rights

of People with Disabilities, States have the obligation to take all effective measures to prevent girls with disabilities from being subjected to torture or other cruel, inhuman or degrading treatment or punishment, and to promote the physical and psychological recovery and social reintegration of any girl victim of such treatment.

5. Various factors lead to the persistence of violence against girls with disabilities. Some of these are cross-cutting and are unjustifiably used to explain discrimination and violent practices and actions against girls with disabilities,⁴⁷ such as stereotypes, myths, social stigma and prejudices based on the idea of their inferiority. Other factors directly affect the possibility of girls with disabilities fully enjoying their rights on an equal basis with others. This creates the conditions for violence and impunity that further hinder their protection. The statement refers to some of them, such as the lack of comprehensive sexuality education and other sexual and reproductive rights education for girls with disabilities, their parents and caregivers to identify, prevent, avoid and adequately respond to situations of risk or

44 In the survey with girls and youth with disabilities, 42 respondents answered affirmatively to the question as to whether girls with disabilities are likely to experience physical violence because of their disability; 7 answered negatively; and 1 preferred not to answer. Of those who answered affirmatively, 28 stated they are likely to experience physical violence by their families, 14 by their teachers, 20 by their friends, 26 by their schoolmates, 21 by service providers, and 32 by their communities. Most (46) respondents said girls with disabilities are likely to experience psychological violence because of their disability; 3 answered negatively, and 1 preferred not to answer. Of those who answered affirmatively, 31 said they were likely to experience psychological violence from their family, 29 from teachers, 28 from friends, 30 from schoolmates, 27 from service providers, and 38 from the community.

45 In addition to the information found in the sources highlighted in specific footnotes in this paragraph, the following are the forms of violence and discrimination against girls with disabilities mentioned by respondents in the survey: physical, emotional and sexual abuse; rape, including in schools or institutions, particularly against girls with intellectual and psychosocial disabilities; female genital mutilation; sexual and gender-based violence in emergencies; negative attitudes, including from teachers, for example, teachers repeatedly asking girls with disabilities to repeat answers to questions multiple times in front of classmates with shameful attitudes, limiting contact with other students during learning activities; stigmatization and negative stereotyping; neglect; child marriage; exclusion; discrimination; bullying, harassment, verbal aggression and name-calling; making physical contact without consent; and denial of sexual and reproductive health information and services.

46 See: *LC v. Peru* (CEDAW C/50/D/22/2009); A/72/55, Annex: *Guidelines on the Right to Liberty and Security of Persons with Disabilities*, para 12; CRPD/C/GC/3, para 32.

47 CRPD/C/GC/3, paras 17 (e), 36 and 37. See A/72/133, para 22; CRPD/C/GC/3, para 30; CRC/C/BDI/CO/2, paras 33–34. OHCHR, "Wrongful gender stereotyping is a frequent cause of discrimination against women. It is a contributing factor in violations of a vast array of rights such as the right to health, adequate standard of living, education, marriage and family relations, work, freedom of expression, freedom of movement, political participation and representation, effective remedy, and freedom from gender-based violence," <<https://www.ohchr.org/en/issues/women/wrgs/pages/genderstereotypes.aspx>>. According to the Human Rights Council, "girls with disabilities face an increased risk of violence based on stereotypes that dehumanize, infantilize, objectify, exclude or isolate them," A/HRC/RES/47/15, Preamble. See UNICEF, *Violence in Early Childhood. Regional framework for UNICEF in Latin America and the Caribbean*, Panama, 2017, p. 6.

violence; fear of unwanted consequences or reprisals for reporting violence; exclusion from protective peer networks; deprivation of legal capacity; lack of autonomy and privacy, and insufficient participation in decision-making on issues affecting their lives; and low levels of birth registration of girls with disabilities due to a combination of the state registration system's shortcomings and the unwillingness of the family to register them due to stigma or prejudice, which hinders the protection of girls and the allocation of resources to fight violence.

6. A third set of factors directly relates to non-compliance with State obligations, which contributes to the persistence of violence, such as: lack of access to essential infrastructure, goods and support services in the community and beyond; lack of provision of adequate support for parents and caregivers of children with disabilities, especially economically stressed households; impunity and invisibility of violence against girls with disabilities; existence of barriers to accessing justice in these cases, both structural (e.g., unavailability of forms in Braille or text-to-speech) and institutional (e.g., do not take complaints seriously due to stigma or negative stereotyping); lack of data and lack of transparency for public oversight; lack of policies to effectively combat stereotypes and prejudices to put an end to harmful and discriminatory practices.⁴⁸

Even though these three categories of factors are intertwined, distinguishing them is useful for better understanding their role and impact in relation to the persistence of violence.

7. The Convention on the Rights of the Child, the Convention on the Rights of Persons with Disabilities and the Convention on the

Elimination of All Forms of Discrimination against Women establish the obligation of States Parties to adopt appropriate general measures to guarantee the right to a life free of violence.⁴⁹ Along with other treaties, such as the Violence and Harassment Convention, 2019 (No. 190),⁵⁰ and international instruments such as the Sustainable Development Goals, a complex set of international instruments imposes obligations on States to respect, protect and fulfil the right of girls with disabilities to live free from violence. The obligation to respect entails refraining from interfering, hindering, discriminating against or preventing access to rights. The obligation to protect imposes a duty upon States to prevent third parties from interfering with, hindering or obstructing the enjoyment of rights. The obligation to fulfil requires States to take all appropriate measures with a view to achieving full effectiveness, including obligations to promote human rights, to develop conditions and to remove barriers so that rights-holders have equal access to rights.

Finally, States must comply with these obligations taking into account that violence against girls with disabilities is systemic and structural, and is the result of intersecting discrimination. The specific experiences of girls with disabilities with violence and their subsequent needs must be addressed and considered in all policies that may affect them. Whether state action against violence is developed in sectorial policies regarding particular groups, such as children, women and people with disabilities, or developed regarding particular matters or domains, such as health care, education or the judiciary system, the experiences, interests and needs of girls with disabilities must be included.⁵¹

48 CRC, Article 24.3; CRPD, Article 8; CEDAW, Article 5; A/HRC/RES/47/15, para 5.

49 In particular, CRC, Articles 4, 19, 23, 34, 37 and 39; CRPD, Articles 4, 6, 7, 15 and 16; and CEDAW, Articles 2, 3 and 5.

50 In particular, Articles 4, 5, 6, 7, 8 and 9. Other relevant ILO treaties include: ILO Convention no. 138 Minimum Age Convention, ILO Convention no. 182 Worst Forms of Child Labour Convention, ILO Convention no. 189 Domestic Workers Convention.

51 Council of Europe, *Ensuring the Non-Discriminatory Implementation of Measures Against Violence Against Women and Domestic Violence: Article 4, paragraph 3 of the Istanbul Convention*, 2022.

8. Treaty bodies, Special Procedures of the Human Rights Council and various United Nations organizations and bodies have repeatedly recommended that States develop comprehensive and broad strategies, at all levels and over the long term, to respond to violence against girls with disabilities adequately and effectively, to prevent it, eliminate its causes and risk factors, and to combat discrimination in all spheres of society. Comprehensive strategies should be diverse and include action plans and programmes, legal modifications, actions for social change and the eradication of stereotypes and prejudices. Such strategies must aim at eliminating all forms of discrimination against girls with disabilities and must establish or reinforce the prohibition and social and legal reproof of any form of violence against them.⁵²

Comprehensive strategies should be based on or include:⁵³

a. An antidiscrimination approach that acknowledges that girls with disabilities face systemic, structural, multiple and intersecting forms of discrimination. Such an approach must recognize girls with disabilities as rights-holders – not beneficiaries of adult benevolence (child rights-based approach); it must address all forms of gender-based discrimination against girls with disabilities as part of a comprehensive strategy against gender-based violence, by implementing programmes that address the power imbalances faced by girls with disabilities

(gender-responsive approach); and it must remove the barriers that hinder the enjoyment of their rights and ensure that all programmes take into account their disability (disability-inclusive approach).

Anti-violence policies need to address the social, economic, political and cultural structures that perpetuate discriminatory treatment of girls with disabilities, including violence (addressing root causes of discrimination), and are mindful of the interaction of different systems of oppression and inequality, such as gender, age, disability and others that generate specific experiences and forms of violence that deserve to be addressed as such (intersectional approach to violence against girls with disabilities).

- b. The central role of the family in care and protection strategies for girls with disabilities. Because many girls with disabilities experience violence, including sexual abuse, within their families, States must consider intervening in violent family environments. Although the responsibilities, rights and duties of parents as caregivers must be recognized, girls with disabilities should be separated from their parents or caregivers for their best interests when they are subject to abuse, neglect or habitual negligent treatment.⁵⁴ An alternative family environment must be prioritized.
- c. Ensuring age-appropriate protection and response to violence. Because different age groups may experience particular

⁵² UNFPA, *Women and Young Persons with Disabilities. Guidelines for providing rights-based and gender responsive services to address gender-based violence and sexual and reproductive rights*, 2018, pp. 64 and 70.

⁵³ In particular, CRC/C/GC/13 and the report of the independent expert for the United Nations study on violence against children (A/61/299), as well as most of the Concluding Observations to States following the constructive dialogues of the CRC, CRPD and CEDAW Committees. When asked what measures States should take to counter violence against girls with disabilities, respondents to the survey of girls and youth with disabilities highlighted the following: strong reporting and accountability mechanisms for the protection of vulnerable groups; policies on protection from violence against women and girls with disabilities; policies to enhance inclusion regarding disability, gender, race/ethnicity and other factors of discrimination; laws to implement the international legal framework at the national level; strengthening inclusive education systems; training of girls with disabilities on how to access justice and seek remedy; awareness-raising activities for government officials, service providers and teachers; ensure reasonable accommodation; understand the specific root causes of gender-based violence in different communities; end female genital mutilation and involuntary sterilization; establish a hotline with social workers to provide support to victims; and consult with girls with disabilities on how to design evidence-based interventions.

⁵⁴ CRC, Articles 5 and 9.1.

- forms of violence, customized services may be needed to ensure that adolescence and transition to adulthood is taken into consideration in the measures adopted to guarantee a life free from violence.
- d. Fostering the development of healthy personal relationships and safe environments in the community. These are internal and external supports to the personal safety of girls with disabilities that can reduce abuse, neglect and their negative consequences.
 - e. Vigorous and tailored measures to counteract the different risk factors and drivers that lead to the persistence of violence against girls with disabilities.
 - f. Considering the confluence of gender, age and disability with other situations that may increase the exposure of girls with disabilities to violence, such as living in various forms of alternative care; living on the street; being in real or apparent conflict with the law; belonging to ethnic, national or religious minorities within their state; being migrants, refugees or displaced.
 - g. Setting up monitoring mechanisms, especially in residential facilities and institutions.
 - h. Strengthening legislation and policies to ensure that they expressly prohibit all forms of violence against girls with disabilities and provide appropriate and sufficient punishment for perpetrators.
 - i. The allocation of necessary, adequate and sufficient human, financial and technical resources, to the maximum available, to ensure the provision of inclusive services and the guarantee of all rights of girls with disabilities, including through international cooperation if necessary.⁵⁵
 - j. Strengthening or establishing systems to regularly collect, analyse and publish statistical data disaggregated by sex, age, disability and other relevant characteristics on all forms of violence against women and girls, and using these data to conduct gender analysis and inform more effective efforts across all sectors to prevent and respond to violence.⁵⁶
 - k. The creation of an integrated, cohesive, interdisciplinary and coordinated system of legislative, administrative, social and educational measures, in which different state actors and civil society can participate at all levels.⁵⁷
 - l. The active collaboration of States, national and local agencies and organizations, and relevant civil society entities, to develop standards, indicators, tools and systems for monitoring, measurement and evaluation, aimed at meeting their obligations to protect girls with disabilities from violence.⁵⁸
- These strategies must be developed with the full participation of girls with disabilities and their representative organizations.⁵⁹ Because they know best their living conditions and the barriers they encounter, they should be involved in the decision-making processes affecting them, receiving the training and support they need, taking into consideration their age and disability.⁶⁰
- 9.** States have the obligation to act with due diligence to prevent violence and human rights violations, to protect child victims and witnesses of violence, to investigate and to punish those responsible, and to provide redress.⁶¹ To this end, States should adopt legislation that expressly prohibits violence

55 CRC/C/GC/13, paras 73–75.

56 A/HRC/RES/47/15, para 8(j).

57 CRC/C/GC/13, paras 39, 68 and 69.

58 CRC/C/GC/13, para 72.

59 A/RES/72/162, Preamble; A/HRC/RES/47/15, paras 6, 7(e) and (k).

60 A/HRC/43/41, para 71; CRPD/C/GC/7, para 25.

61 CRC/C/GC/13, para 5.

while providing adequate protection for girls with disabilities,⁶² and develop and implement “national criminal justice legislation, policies, procedures and programmes that take into account the specific requirements of girls with disabilities”. States must promote “age- and gender-responsive and disability-inclusive measures in crime prevention and protection policies, including capacity-building for those involved in crime prevention, the justice system and informal restorative justice processes.”⁶³

Prevention measures should take into consideration risk factors and factors that lead to the persistence of violence against girls with disabilities, and develop medium- and long-term strategies to change attitudes, behaviours, prejudices, norms and structures that perpetuate violence against girls with disabilities. State campaigns against gender-based violence and other forms of violence affecting girls with disabilities must include them and be presented in a language that is appropriate for and understandable to them.⁶⁴ Similarly, comprehensive sex and affective education programmes, including sexual and reproductive health rights and those addressing interpersonal relationships in general, should include girls with disabilities, and teach them to distinguish healthy from unhealthy relationships and to identify situations of abuse, mistreatment or violence. These strategies should consider the role of families and communities as well as the role of staff in health-care centres, hospitals, schools, residential institutions, social services and other care services to prevent violence against girls with disabilities, to identify it, and to support girls and their families in the process of reporting and recovery. Likewise, legal

operators, such as lawyers, judges, prosecutors, the police and services for crime victims, should receive training on the different forms of violence that girls with disabilities face, and on the rights to which they are entitled.⁶⁵

The protection of and reparation for girls with disabilities who are victims of violence requires the adoption of measures to immediately guarantee their safety, and the provision of services in accordance with their vital conditions and circumstances. Such services include health services,⁶⁶ justice and policing services and social services.

By ensuring access to justice,⁶⁷ the protection of victims, proper investigation and punishment of perpetrators can be achieved. Access to justice must be ensured on an equal basis with others, by making access to justice gender-, age- and disability-sensitive. Girls with disabilities have the right to initiate formal and informal procedures, including judicial processes, to obtain due redress. States have the obligation to provide the necessary economic and human resources to redress the consequences of violence.⁶⁸ Prosecution and punishment of those responsible for violence against girls with disabilities is necessary not only to prevent impunity,⁶⁹ but also to eradicate violence itself.

10. Articles 4 of the CRC, 2 of the CEDAW and 4 of the CRPD set the obligations for States to respect, protect and fulfil the human rights and fundamental freedoms of girls with disabilities, including the right to live free from violence.

According to SDG 17, for development agendas and strategies to be successfully

62 A/RES/72/162, para 14(a).

63 A/HRC/RES/47/15, para 7(j).

64 See e.g., A/HRC/20/5; CEDAW C/57/D/34/2011 *RPB vs The Philippines*.

65 A/HRC/RES/41/17.

66 A/HRC/RES/47/15, para 8(h).

67 CRPD, Article 13.

68 CRC/GC/2003/5, para 24; CRC/C/GC/16, para 30.

69 A/HRC/RES/47/15, para 8(a).

implemented, inclusive global, regional, national and local partnerships are necessary. Therefore, although States have the obligation to adopt comprehensive strategies, we are all committed to respecting, protecting and fulfilling the rights of girls with disabilities. Treaty bodies, relevant Special Procedures, the Human Rights Council (especially through UPR recommendations), United Nations bodies and entities,⁷⁰ international and regional organizations, courts and tribunals, civil

society organizations (including organizations of persons with disabilities and women- and girl-led organizations) and the private sector must join efforts to jointly place this agenda at the centre of policies and actions. These partnerships, built on the same principles, values and objectives set forth in this statement, allow each actor to contribute with its experience and expertise to the achievement of the full respect of the right of all girls with disabilities to live free from violence.

70 When asked what UNICEF and other United Nations organizations can do to counter violence against girls with disabilities, the following actions were mentioned: raise awareness of the phenomenon, including in collaboration with organizations of persons with disabilities (OPDs); mainstream disability in all humanitarian and development programmes; strengthen accountability mechanisms for countries to ensure compliance with human rights; develop a framework on violence against girls and women with disabilities; conduct training on reporting mechanisms and systems; provide appropriate spaces to seek refuge; mobilize funds to develop programmes on combating violence; enhance the capacity of OPDs to support girls with disabilities; implement programmes for social and behaviour change; monitor the implementation of the CRPD and report every violation thereof; ensure countries report on progress made and initiatives taken to counter violence against girls with disabilities; support girls with disabilities in exercising their right to freedom of expression, empowering them to speak out; support the alignment of national frameworks with the CRPD; identify girls at risk of abuse and liaise with local law enforcement officials, health clinics, child rights non-governmental organizations and service providers for swift referrals; increase funding of programmes on gender-based violence; promote sharing of information, data and evidence on the phenomenon; and educate on violence-free use of social media.

