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# Transcript: Podcast Series on Disability Inclusive Development: Episode 4, “They think women and girls with disabilities aren’t sexual” with Gertrude Fefoame

This podcast season has been developed by CBM Switzerland in collaboration with Medicus Mundi Switzerland. This transcript is provided by CBM Switzerland.

**Introductory soundbite:** Girls and women with disabilities have the same concerns and needs as everyone else. We have dreams and ambitions and want to learn, grow and lead meaningful lives. However, every day we are denied the right to make our own choices when it comes to sexuality and having children, decisions about our own bodies and destinies. Dangerous stereotypes and misconceptions about what we can and cannot do continue to exist across societies.

**Carine:** Hi this is Carine Weiss and welcome to the Medicus Mundi Switzerland Health for All podcast. And today we talk with Gertrude Oforiwa Fefoame from Ghana who experienced by the age of 10, problems with her sight. Today she has three children, is gender and disability rights advocate, Sightsavers’ advocacy adviser for social inclusion, and has been elected to the United Nations Committee that monitors the Convention on the Rights of Persons with Disabilities. She's the first person with a disability to have received the Excellence Grand Medal award in 2007 from the President and just recently she was awarded with the first ever women's empowerment award at the World Blindness Summit 2021. In this episode we will be talking about sexual and reproductive health and rights of women and girls with disabilities. Getty, thank you for being my guest at the Medicus Mundi Switzerland Health for All podcast today. Welcome to this episode.

**Getty:** Thank you Carine. I’m privileged, honored to be here with you today.

## **Carine: Let’s dig right into the topic of gender. Why do we need to emphasize that you are a woman fighting for the rights of persons with disability?**

**Getty:** Generally, and particularly in my community, women and girls are in quote ‘second class citizens’. And again, persons with disabilities are also considered to be second class citizens. So just imagine if you are a woman or a girl, you have a disability, then what class will that be, probably 4th class citizen. So the multi-faceted discrimination and stigma that women and girls with disabilities face, and how it intersects with other forms of our lives, that pushes us behind. It takes away our voice, take away our dignity, take away our education, take away our power. This is what has to stop. And that is why for my life I dedicate and fight for the rights of all women and girls with disabilities, so that we would have equal opportunities and learn on equal terms and equal basis as other women and girls.

## **Carine: Today we talk about women and girls with disabilities and their access to sexual and reproductive health care. Why is accessing health care for this group of persons particularly difficult?**

**Getty:** It is difficult because of the barriers that women and girls face in the access and the barriers come through many diverse areas. It brings up the issue of access to information, communication. There is the issue of accessibility to the services, such as you might find high beds at the hospital. So for instance you are going to do a test on mammography and the bed is so high that a person with a physical disability might not reach it to use. And so we are denied and our voices and our issues are not attended to. There is also stigma and negative attitudes by health professionals, most of whom have not been trained. So it gives us a challenge. For instance deaf women find it difficult to access sexual health because the communication barrier is not sorted.

## **Carine: What makes healthcare staff feel uncomfortable when receiving for example a female patient with a disability?**

**Getty:** Because they have not been well trained and their social and cultural expectations unfortunately sometimes come to bare. They don't appreciate that women and girls with disabilities have sexual and reproductive health conditions and needs. They think women and girls with disabilities aren’t sexual, so we don’t have needs. They also don't have the skills to work with us and also are sometime afraid because they think some girls and women with disabilities are carrying bad omens, witchcraft. So there is both the professional issue and the social cultural that brings that barrier. And the fact that communication, information and accessibility are critical.

## **Carine: There's also the problem of multiple and intersecting forms of discrimination. What does that mean, especially for women and girls with disabilities?**

**Getty:** So just imagine a woman with a disability who is a migrant and therefore the necessary information that he has to have around the opportunities are not available. The person is denied their access to health facilities because here they have that status. Just imagine a person who requires much support. And so the person is not having the assistance which is required. And persons with intellectual disabilities for instance are abused in the process because they don't listen to them well. They think they cannot think for themselves and take decisions for themselves and it affects rural women as well. Being a woman with a disability is an issue but being a woman with a disability who requires much support or being a woman with a disability who is a migrant, a refugee, or in asylum, or rural or poor, means that you are facing several conditions which are interplaying at the same time. And that is the challenge.

## **Carine: How do these multiple forms of discrimination affect access to health care of women and girls?**

**Getty:** It affects because the women and girls themselves do not get empowered to speak out and to reach out and go for their need, because of the stigma and discrimination. So it puts fear, it shuts their voices out. They don't talk, they don't say it, they don't demand for it, and that is one side. But even when they demand, then the other side is also not ready. You can ask for, you are asking for too much. Or you know they are not ready because they don't know what your issues are or they don't want to listen to you because you should not have any issues. So this is where the situation needs to be addressed for both sides because then the denial is too much.

## **Carine: Sexual and reproductive health and rights are still a hot topic which are not realized for everyone. There’s also a lot of resistance to accept that we are all sexual beings. If we add the issue of disability, I can imagine that it's even harder to fight for SRHR. What is your experience?**

**Getty:** Growing up as a girl with vision loss meant that I did not have access to all the reading materials that would expose me to sexual and reproductive health situations. And I even remember in school my tutor, my science tutor, teaching reproductive health topic, doing a diagram that I could not see because I couldn't read from the board. So just imagine me in school with this experience, the barrier that I was facing. And then just bring back to where the person is not in school at all because he has not been allowed to be educated, he has been pushed behind because boys’ issues are more important and therefore there are many girls with disabilities who have not gotten the information that they need… information about their own sexuality, information about their own reproductive health, information about contraceptives, information about womanhood, information about menstrual hygiene. And because they are not given the voice that is necessary, they are sometimes not able to reach out to others.

## **Carine: What needs to change?**

Getty: A lot needs to change, from policy to practice, to change of attitudes. There is a need for us to ensure that the right policies are in place to remove the discrimination right from the home, thought to the community, through to school, through to the professionals who are trained without inclusion of disability. That needs to change. There's also the need to change the practice of negative attitudes and stereotypes, that thinks that women and girls with disabilities don't have the need, we are not sexual, we don't have a choice, we cannot manage a home, we cannot be parents. It needs to change.

## **Carine: During the COVID-19 pandemic there was a sharp rise of domestic and gender-based violence. What was the situation like for women and girls with disabilities?**

**Getty:** Carine, you wouldn't want to know, but you have asked. Heightened violence, particularly sexual violence and harassment. Rape was on the increase. It was on the increase because people were stressed. It was on the increase because women and girls disabilities were locked down, we were in confused state with little information reaching us at the right time. And the help and the networks that were surrounding, had all fallen apart. So we had heightened abuse. So the issue of the COVID was really a concern. People could not access their health needs. Some people on medication such as people with psychosocial disabilities and women couldn't go to the hospitals and access the care. Those who were pregnant had challenges because they couldn't get to the medical center appropriately. So adding several barriers to the already existing barriers was the situation.

## **Carine: What needs to happen so that the cycle of violence can be stopped or prevented?**

**Getty:** Women and girls with disabilities need to continue to be encouraged to bring the issues on board. Their voices need to be heard. Many years our voices are not heard, we are not allowed to speak. They think we can't say the right thing. I mean Carine, just imagine, a lady who has been abused sexually would say, be told by a policeman, who wants you and would want to have sex with you. And this is not an imaginary statement I'm making. It's a real experience. The perpetrators need to be brought to book. They have to go through the processes when they are reported, and they have to get through the judicial systems for whatever punishment that are available. Also the counseling sessions for all women and girls need to be made inclusive and made accessible to women and girls with disabilities, so that they could also access the hotlines for reporting violence, have to be accessible irrespective of the category of disability you are and your age. We need to be having the access so we can report, be listened to. Also awareness raising needs to be intensified so that the wrong and stereotype impression will be stopped. And also be told that whoever violates will be sent to court.

## **Carine: Getty, what do you wish for, for the future?**

**Getty:** I can't wait for a future where every woman and girl with a disability enjoys the same opportunity, respect, to fulfill their rights like any other girl and woman. The time where we can have adequate access and participate equally, take decisions by ourselves and take our lives into our hands. The time when we can decide when to marry so we are not forced to marry, and whom to marry, and how many children we would want to have. The time that we are not forced to take medication when we don't want, or we are not sterilized without our consent. The time that we can have our children and take care of them and not be considered as being not capable of taking care of our children and not being said we are witchcraft, but we are allowed to have education, hold positions, hold and lead our homes, work and contribute to communities and humanity just like any other person.

## **Carine: Thank you so much for being such an inspiring guest at the Medicus Mundi Switzerland Health for All podcast today. I wish you a lot of success with your future endeavors.**

**Getty:** Thank you Carine. I'm honored and we will continue working on the rights of girls and women with disabilities, not relenting in our efforts. And we know, together with you, we shall achieve. Thank you, thank you again.

**Carine:** This was the Medicus Mundi Switzerland Health for All Podcast with Carine Weiss. You can listen to it on Apple Podcast, Spotify, and on our website. To spread the message, please leave a comment on our website, share or like it.

This was the fourth episode of the new season on disability inclusion and human rights. Stay tuned and watch out for the next episode where we will be talking about disability inclusion and health in humanitarian emergencies.