

## SECCA – Response to Call for Submissions: New International Disability Equity and Rights Strategy

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Sexuality Education, Counselling, Consultancy Agency (SECCA) is a Perth-based, not-for-profit organisation created with the aim of supporting people with disability to learn about sexuality and sexual health and engage in safe and healthy relationships. With over 30 years of experience in disability advocacy, consultancy, and sexual health education, SECCA wishes to put forward considerations for DFAT’s new International Disability Equity and Rights Strategy in relation to our specialty: sexuality, relationships, and disability. We adhere to the understanding of sexual health laid out by the World Health Organization (WHO) [1], treatment of people with disability as per the United Nations Convention on the Rights of Persons with disability (UNCRPD) [2], and World Association of Sexual Health (WAS) Declaration of Sexual Rights [3], and their Declaration on Sexual Pleasure [4]. SECCA affirms research highlighting the educational benefits of comprehensive sexuality education (CSE) for all people. We see systemic changes in relationships and sexuality education as crucial to fulfilling human rights and reducing the disproportionate violence, abuse, and exploitation experienced by people with disability. These underlying principles inform SECCA’s response to the DFAT’s call for submissions regarding its 2023 International Disability Equity and Rights Strategy.

### International Disability Rights and Equity Strategy Submission

The objective of this submission is to contribute to the development of the DFAT new International Disability Equity and Rights Strategy. This proposal is grounded in the principles of promoting CSE and supporting people with disability in pursuing healthy and enriching relationships. The following proposal outlines a range of considerations and complementary strategies that SECCA recommends to effectively promote equity and rights for people with disability on the global and domestic scale.

#### **Question 1: What should Australia prioritise to advance disability equity and rights internationally?**

Quality of life and optimal well-being are inextricably linked to an individual’s ability to engage in rich social connections, safe and healthy sexual expression, and authentic explorations of personal identity [5] [6] [7]. However, the liberty to take part in these experiences is often limited for people with disability, due to a range of systemically and societally contrived barriers [8]. The ‘double-taboo’ of sexuality and disability creates an environment where critical topics are often overlooked or misrepresented in political discourse, public awareness, and policy development. Widespread misconceptions of disability as a ‘condition’ to be pitied, paired with an aversion to candidly discussing sexuality and sexual expression, reinforce a medical model of disability that upholds ideologies victimising people with disability and positions them as asexual, naive, and incapable of participation in sexual or romantic relationships [9] [10]. Though these claims are fictitious, the continued system of control over sexual and social aspects of the lives of people with disability has tangibly harmful consequences and must be dismantled to advance the equity and rights of people with disability on both the domestic and global scale.

Failure on the part of institutions and governing bodies to adequately recognise and address sexuality, sexual health, and relationship equity as urgent and critical issues directly obstructs the fulfilment of all general principles stated in the UNCRPD [2]. These principles are: (a) Respect for inherent dignity, individual autonomy, including the freedom to make one’s own choices, and independence of persons; (b) Non-discrimination; (c) Full and effective participation and inclusion in society; (d) Respect for difference and acceptance of persons with disability as part of human diversity and humanity; (e) Equality of opportunity; (f) Accessibility; (g) Equality between men and women; (h) Respect for the evolving capacities of children with disability and respect for the right of children with disability to preserve their identities [2].

Australian studies have shown that people with disability are at a higher risk of contracting sexually transmitted infections, with detrimental results for their personal health and well-being, as well as that of their partners [11]. A lack of sufficient education and the persistence of power imbalances, particularly regarding access to financial resources, also constitute a significant barrier for people with disability in interpersonal relationships. Moreover, the sexual health services sector, in Australia and abroad, suffers from a lack of preparedness for meaningful engagements with people with disability. This results in negative outcomes and often stigmatising practices that can further discourage people with disability from seeking out the health care they require. As shown by Pelleboer-Gunnink et al. [12], “mainstream health practitioners [held] stigmatising attitudes towards people with intellectual disability, attitudes which then impacted the delivery of services”. The lack of attention garnered by this crucial aspect of healthcare service delivery further reinforces these persistent problems. For example, the current DFAT Disability Equity and Rights Strategy makes no mention of sexual health service delivery for people with disability, which SECCA considers to be a significant omission.

To advance disability equity and rights internationally, Australia must ensure that its international policies and outreach strategies adequately address this gap. In doing so, participating Australian organisations and agencies must endeavour to collaborate with local bodies to facilitate positive relationships and promote sexual health and safe sexual expression in a way that avoids paternalistic imposition and cultural erasure.

## **Question 2: What are the most effective approaches to progress these priorities?**

Advancing disability equity and rights demands that people with disability have access to quality CSE and are not barred from developing enriching and authentic social relationships. To effectively promote this, governing bodies must take a multifaceted approach, employing strategies informed by interdisciplinary frameworks. Five such strategies are as follows:

1. **Comprehensive and Sex-Positive Education that Promotes Sexual Rights:** DFAT and partner stakeholders should seek to develop and promote comprehensive, sex-positive relationships and sexuality education tailored to the diverse needs of people with disability. For example, tailored responses include considering the differential physical and sensory needs of people with disability. For people with disability, this could include the physical accessibility of health service clinics, but also includes tailoring educational delivery to accommodate a diverse range of intellectual support needs. Incorporating easy-read education resources that convey essential information without being patronising is essential. Resources should also stress sex-positive frameworks that normalise the pursuit of safe and healthy sexual or romantic relationships. Additionally, adequate sex-positive education should ensure the inclusion of need-specific content that addresses the unique challenges faced by people with disability [10]. This also includes the training of support and health professionals to be inclusive in their work with people with disability and cognisant of their sexual rights.
2. **People with Disability-Led, Peer-Based Programs Partnerships:** These should not merely be nominal but must actively involve people with disability in policy and program planning. Sustainable and effective partnerships between education/support services and people with disability must be established, promoting inclusivity and shared decision-making. DFAT should work to implement and promote programs that are led and co-designed by people with disability, ensuring peer-based education and support. Programs should actively involve people with disability in all levels of program development and implementation to ensure the programs resonate with their experiences. Non-people with disability led programs will fail to adequately address the complex and personal needs of participants. Poorly designed programs that do not engage with people with disability at all stages - from design to implementation and outcomes assessment - will run the risk of reinforcing the status quo and further entrench lack of access to meaningful and appropriate sexual health education [13].
3. **Language Considerations:** It is crucial to promote the use of inclusive and respectful language when discussing people with disability in all sectors, including government reports, policies, media, and the disability sector. Often, disability rights, particularly in sexual health conversations, tend to be relegated as a specialised problem that is beyond the

scope of 'mainstream' health service delivery policy. However, SECCA holds, as Family Planning Australia succinctly put it; "Disability is everyone's business" [14]. As such, it should form a key consideration when designing appropriate programs and should be an integrated element of sexual health policymaking and delivery.

4. **Addressing Taboos and Stigmas:** Tackling taboos and stigmas surrounding disability and sexuality is imperative. Awareness campaigns and educational programs should encourage open discussions and challenge societal attitudes perpetuating harmful stereotypes. Acknowledging people with disability's sexual agency, often overlooked in policy and health service delivery, requires a concerted effort to shift perspectives and address unconscious stigmas and biases present in the international health service sector. People with disability have sexual agency, and this is an often under-acknowledged fact in policy and health service delivery. However, it is necessary to work to change the perspectives and, often unconsciously held, stigmas present in the international health service sector.
5. **Promoting Intersectionality:** Effective progress hinges on promoting intersectionality in all initiatives. Recognising the interconnected challenges faced by individuals with disability, Australia should adopt policies and programs considering the interplay of factors like ableism, racism, classism, and sexism. This approach ensures a more nuanced and tailored response to the diverse needs of the disability community.

For tangible progress, SECCA endorses the adoption of the comprehensive framework put forth by Family Planning Australia in their document 'Working Together to Advance Disability and Sexuality Rights and Health in the Pacific Region' [14]. The framework builds off the WHO/UNFPA disability guidelines, identifying key areas such as establishing partnerships, raising awareness, ensuring accessibility, aligning policies, and promoting research.

### **Question 3: How can DFAT support the role of, and partner with, organisations of persons with disability?**

DFAT's role in supporting organisations of people with disability demands a comprehensive approach that goes beyond mere involvement to ensure meaningful participation and sustainable impact. At the core of DFAT's strategy should be an unequivocal commitment to amplifying the voices of people with disability, placing their perspectives and experiences at the forefront of program development and implementation. To operationalise this commitment, DFAT should actively seek out organisations with a proven track record in inclusive collaboration with PWD. DFAT should ensure that funding applications, and the reporting and evaluation of these grants are feasible, practical and not time-consuming so that valuable time is spent doing the work needed rather than reporting on it. These organisations should not only possess expertise in facilitating people with disability involvement but also exemplify a commitment to co-creation, ensuring that initiatives are not just designed for people with disability but developed in direct partnership with them.

However, meaningful engagement goes beyond consultation. DFAT should allocate substantial funding and resources to empower these organisations to provide not only immediate but also sustained, collaborative, and diverse support to partner communities. This long-term approach is crucial, particularly for Australian-based organisations working abroad, as it addresses the issue of sustainability. Short-term aid programs, while providing immediate relief, often lack the infrastructure for sustained support. DFAT's commitment to long-term collaboration ensures that improvements are enduring, fostering a sense of stability within recipient communities, and mitigating the risk of communities feeling abandoned or disposable once initial aid phases conclude [15] [16].

The focus of DFAT's engagement should extend to building the local capacity of organisations, equipping them with the skills and resources necessary to independently address the nuanced needs of people with disability. This entails investing in training programs, skill development initiatives, and organisational strengthening efforts, fostering a self-sustaining ecosystem that outlasts specific aid interventions. Moreover, DFAT should actively promote initiatives that address systemic challenges faced by people with disability internationally. By leveraging its diplomatic influence, DFAT can support

peak bodies in partner countries to advocate for policy changes and legislative reforms that promote inclusivity, safeguard the rights of people with disability, and create environments conducive to accessibility and equal opportunity.

In essence, DFAT's support for organisations of persons with disability should transcend traditional aid paradigms. It should embody a holistic strategy marked by inclusivity, sustained collaboration, and capacity building. By centring the voices and needs of people with disability, investing in long-term partnerships, and advocating for systemic change, DFAT can contribute to transformative, lasting improvements in the lives of individuals with disability globally.

#### **Question 4: What are the biggest challenges to and opportunities for advancing disability equity and rights?**

Advancing disability equity and rights is a multifaceted endeavour that confronts various challenges rooted in negative societal attitudes and norms surrounding disability. However, within these challenges, there are also numerous opportunities for positive change and progress.

One of the pervasive challenges stems from negative societal attitudes and norms, perpetuating a cycle of disenfranchisement for people with disability. Disability is often sidelined or perceived as a niche problem rather than an integral aspect of human diversity. This oversight hampers the prioritisation of inclusive policies and initiatives needed to create an equitable society and allows many people without disability to abstain from critical interrogation of their own ableist beliefs and behaviours.

Systemic exclusion represents another significant challenge. Navigating complex and often exclusive systems, securing support for disclosure, and engaging with legal structures remain formidable obstacles. SECCA, in its advocacy, underscores the urgent need to address systemic exclusion and champion the rights of individuals with disability within justice and health systems. The complexity of these challenges necessitates comprehensive and sustained efforts to dismantle barriers to inclusivity. SECCA also notes the complexity that arises from applying for and measuring the output on grants where research data may not exist due to the intricate intersectionality and thus may be dismissed by government bodies despite the value to the people with disability if the grant funding were to be secured.

Amidst these challenges though, there are notable opportunities for advancing disability equity and rights. One such opportunity arises from global commitments, particularly the United Nations Sustainable Development Goals. By prioritising disability inclusion in international aid programs, Australia can contribute substantially to global efforts aimed at leaving no one behind. This commitment not only reflects a moral imperative but also positions Australia as a leader in shaping a more equitable world. This aligns with the broader narrative of inclusivity and underscores the interconnectedness of sustainable development.

Advocacy and awareness initiatives represent another avenue for positive change. Challenging stereotypes and promoting awareness about the diverse experiences of individuals with disability can contribute to reshaping societal attitudes. Comprehensive sexuality education and training programs are particularly crucial in this regard, fostering a more inclusive understanding of sexuality and relationships.

Embracing an intersectional approach recognises the interconnected challenges posed by factors such as ableism, racism, and sexism. This approach allows for a more nuanced and tailored response to the diverse needs of the disability community, acknowledging that individuals may face overlapping forms of discrimination. Inclusive partnerships with organisations representing diverse disability groups offer a critical opportunity for more effective and holistic initiatives. DFAT can play a crucial role in supporting and collaborating with these organisations. By doing so, international programs can be designed and implemented to address the unique needs and challenges faced by individuals with disability.

While advancing disability equity and rights is undoubtedly confronted by challenges, the identified opportunities underscore the potential for positive transformation. The recognition of these opportunities is pivotal for shaping policies

and initiatives that genuinely prioritise the rights and well-being of the disability community. Through a combination of global commitments, advocacy efforts, intersectional approaches, and inclusive partnerships, Australia can contribute significantly to the advancement of disability equity and rights on the international stage.

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