

**ALTERNATIVE REPORT ON WOMEN AND
CHILDREN WITH DISABILITIES AND THEIR
CAREGIVERS TO THE GOVERNMENT OF GHANA'S
REPORT ON THE IMPLEMENTATION OF THE
UNITED NATIONS CONVENTION ON THE RIGHTS
OF PERSONS WITH DISABILITIES**

July 2024

Submitted by Voices of Women and Children with Disabilities and
Caregivers of Children with Disabilities in Ghana (VOWACGhana)

Table of Contents

LIST OF ABBREVIATIONS	2
ABOUT VOICES OF WOMEN AND CHILDREN WITH DISABILITIES AND CAREGIVERS OF CHILDREN WITH DISABILITIES IN GHANA (VOWACGHANA)....	3
PREAMBLE	4
INTRODUCTION	4
STRUCTURE AND PREPARATION OF THE REPORT	5
KEY CONCERNS ABOUT THE IMPLEMENTATION OF THE CRPD.....	7
ARTICLES 1-4: PURPOSE, DEFINITIONS, GENERAL PRINCIPLES AND GENERAL OBLIGATIONS:	7
ARTICLE 5: EQUALITY AND NON-DISCRIMINATION	9
ARTICLE 6: WOMEN WITH DISABILITIES	10
ARTICLE 7: CHILDREN WITH DISABILITIES:.....	12
ARTICLE 8: AWARENESS RAISING	14
ARTICLE 9: ACCESSIBILITY	16
ARTICLE 10: RIGHT TO LIFE	17
ARTICLE 11: SITUATION OF RISK AND HUMANITARIAN EMERGENCIES	19
ARTICLE 16: FREEDOM FROM EXPLOITATION, VIOLENCE AND ABUSE.....	21
ARTICLE 19: LIVING INDEPENDENTLY IN THE COMMUNITY	23
ARTICLE 21: FREEDOM OF EXPRESSION AND OPINION AND ACCESS TO INFORMATION:	25
ARTICLE 23: RESPECT FOR HOME AND THE FAMILY	26
ARTICLE 24: EDUCATION.....	27
ARTICLE 25: HEALTH CARE	30
ARTICLE 27: WORK AND EMPLOYMENT	32
ARTICLE 28: ADEQUATE STANDARD OF LIVING AND SOCIAL PROTECTION.....	33
ARTICLE 29: POLITICAL PARTICIPATION:	36
CONCLUSION.....	39
REFERENCES:	40

LIST OF ABBREVIATIONS

CHRAJ	Commission for Human Rights and Administrative Justice
CFWP	Child and Family Welfare Policy
DOVVSU	Domestic Violence and Victims Support Unit
GAPA	Ghana Association of Persons with Albinism
GBU	Ghana Blind Union
GFD	Ghana Federation of Disability Organisations
GNAD	Ghana National Association of the Deaf
GSPD	Ghana Society of the Physically Disabled
MEHSOG	Mental Health Society of Ghana
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
VOWACGhana	Voices of Women and Children with Disabilities and Caregivers of Children with Disabilities in Ghana

ABOUT VOICES OF WOMEN AND CHILDREN WITH DISABILITIES AND CAREGIVERS OF CHILDREN WITH DISABILITIES IN GHANA (VOWACGHANA)

VOWACGhana is a non-profit, non-partisan women and children with disability and caregivers of children with disability right, advocacy and service delivery organization which strives on the voices of women and children with disabilities and their caregivers to advocate for their rights, inclusion and participation in all facets of life through empowerment, capacity building, service delivery and mentorship

It was established in the latter part of 2020 to address the unique needs of women and children with disabilities and care givers of children with disabilities who are mostly marginalized and invisible in the disability community and the country at large. The organization is a young but vibrant organization with over 175 branches within the sixteen regions of Ghana with well-structures, leadership and governing systems in place. Composition of the board and management is dominated by women with diverse disabilities constituting 70% and led by women with disability (VOWACGhana) interventions are designed for all categories of women and children with disabilities and their caregivers across the country.

ACKNOWLEDGEMENTS

This report was developed with funding support from the Disability Rights Fund/Disability Rights Advocacy Fund. (DRF/DRAF), Ghanaian Ebenezer Assemblies of God church in Bronx, New York, USA and Sofomaame Doris Bentill Assifuah of Royal Assembly and the entire congregation, Bronx, New York to whom we are much grateful. We are equally grateful to International Disability alliance and DRF/DRAF for their technical support.

CONTACT INFORMATION

P.O. Box AC 37, Accra-Ghana
GPS: GW-0140-7835

Telephone: +233599632136; +233553981341

Email: info@vowacghana.org

www.vowacghana.org

PREAMBLE

Ghana signed on to the UN Convention on the Rights of Persons with Disabilities (UNCRPD) in March 2007 and ratified it in July 2012.

The aim of this report is to critically bring to the fore some of the main challenges women and children with disabilities face in accessing their fundamental rights and freedoms in the country stipulated in the CRPD. The objective of this report is to inform the Committee about the actual barriers that women and children with disabilities encounter in relation to their fundamental human rights and freedoms which the state report did not fully capture.

INTRODUCTION

Women and children with disabilities face multiple forms of discrimination in the society owing to myriads of issues. These have arisen from overall negative cultural, religious, socio-economic, political, among other practices ingrained in the Ghanaian societal fabric. It is mostly owing to socially constructed identities, roles and attributes and its resultant expectations of both women and children with disabilities.

Unfortunately, these forms of discriminations over numerous years have failed to gain the attention of the government of Ghana.

The state report included policy frameworks and legislations and measures the government of Ghana has put in place to address, defend and promote the full and equal enjoyment of all fundamental human right and freedoms by all persons with disabilities including women and children with disabilities.

Based on the ratification of the CRPD and other international treaties, Ghana has implemented a number of policies and legislations such as the (1992 Constitution), the Children's Act (Act 560, 1998) the Labour Act, 2003 (Act 651), the Persons with Disability Act, 2006 (Act 715), the Domestic Violence Act, 2007 (Act 732), the Education Act 2008, (Act 778), the Mental Health act 2012, (Act 846), a Child and Family Welfare Policy 2014, Social Protection Policy, 2014, Inclusive Education Policy, National Disability Policy, Gender Policy and the Marrakesh treaty in 2017. Though all these legislations and policies are being implemented by the Government, yet the unique needs of women and children with disabilities are not adequately addressed. This therefore indicate that there is still more work the Government needs to do by reviewing these policies and legislations and adhere to their implementation in other to ensure the equal enjoyment of rights by all citizens.

STRUCTURE AND PREPARATION OF THE REPORT

In preparing the state report, the views of civil society organizations and organizations for and of persons with disabilities were consulted. However, organizations of women and children with disabilities were exempted, which has necessitated VOWACGhana, a young but vibrant organization of women and children with disabilities and caregivers of children with disabilities to submit an alternative report to the UNCRPD Committee reflecting the true situations of women and children with disabilities and their caregivers in Ghana, after 12 years of signing on to the Convention as a country.

With preparations towards submission of the alternative report, VOWACGhana formed a committee which included representatives from various disability groups

1. Ghana Blind Union (GBU)
2. Ghana National Association of the Deaf (GNAD)
3. Ghana Association of Persons with Albinism (GAPA)
4. Ghana Society of the Physically Disabled (GSPD)
5. Women with intellectual disabilities
6. Women with psychosocial Disabilities
7. Women of short stature
8. Children with disabilities and their caregivers.

As well as experts and other civil society organizations and organizations of and for persons with disabilities. Two (2) technical lead persons comprising a woman and a man with disabilities who have great experience in the preparation of such reports were recruited to lead the committee.

After reviewing the state report and its response to the list of issues, the committee realised that there were more gaps to be addressed with regards to issues pertaining to women and children with disabilities and their caregivers in the country. The team then developed research tools (questionnaire and interview guides) to collect data from women and children with disabilities and their caregivers themselves on the real situations they encounter when trying to enjoy their rights and freedom as citizens of Ghana. The committee conducted four consultation sessions which covered all the sixteen regions in the country with participants and respondents from the various disability organizations which include, GBU, GNAD, GSPD, GAPA, MEHSOG and those with short stature (little people), who are women and children with disabilities and their caregivers. In addition to these organisations, non-organisational members especially those in

the hard-to-reach communities and some special schools were consulted. It is worth sharing that in addition to sign language interpretations, other local language interpreters were used in order to get the views of all persons regardless of once educational status.

The first consultation session was done on the 28 May 2024 with 90 participants who were women with different disabilities, children and caregivers of these children. The second consultation was done online on the first of June 2024 with 55 participants which also included women with disabilities and caregivers of children with disabilities. The third and fourth consultation was an in-person interview where children with disability from the northern and Eastern regions of Ghana were made to answer some questionnaire. In all, the survey involved 185 participants and respondents. After the collection of the data, it was analysed by experts and then used for this report.

Desk reviews of some research articles, reports and policies as well as laws including the 1992 Constitution were reviewed to corroborate some of the claims from the consultations. After the first compilation of the report, a validation section was held with Government institutions, civil society organisations, the media, development partners, women with diverse disabilities and care givers of children with disabilities.

KEY CONCERNS ABOUT THE IMPLEMENTATION OF THE CRPD

ARTICLES 1-4: PURPOSE, DEFINITIONS, GENERAL PRINCIPLES AND GENERAL OBLIGATIONS:

The Act 715 defines a person with Disability as “an individual with a physical, mental or sensory impairment including a visual, hearing or speech functional disability which gives rise to physical, cultural or social barriers that substantially limits one more of the major life activities of that individual. Unfortunately, this definition is not expansive enough as it does not take into cognizance the evolving nature of disability as the sentence introducing the definition states that “A Person with disability “Mean...”, thereby limiting the definition of persons with Disabilities to only the categorisation of impairment listed in the definition. For example, those with intellectual related disabilities are not identified in the definition. Unfortunately, because the opening phrase says, “a person with disability mean”, it does not leave room enough for one to add any other category that is not mentioned.

It also does not recognise for instance attitudinal barrier as a barrier that hinders the participation of persons with disabilities and in the mainstream society in a country like Ghana where persons with disabilities are severely hindered by attitudinal barriers. Additionally, it does not have a distinct definition on what disability is. Unfortunately, this problem still exists in the current Persons with Disability bill, 2024 possibly due to the style of writing of the interpretation section of most Ghanaian laws. Though the 1992 Constitution of the republic of Ghana in article 27 recognize the specific rights of women generally, no mention is made of women with disabilities and caregivers of children with disabilities in spite of the multiple discrimination they face hence have a higher need to be protected by law. In Article 27 (B) for instance where a provision is made for the state to put in place facilities for children below school going age to enable women who are considered as the traditional care givers to realise their full potential, no such provision is made for parents or caregivers of children with disability.

The situation of a woman with a child with multiple disabilities whose child is unable to commence his or her education at an early stage owing to the nature of their impairment, has no legal provisions to support her needs or that of her child. Several mothers of children with disabilities have recounted being denied admissions to both pre-school institutions and basic

schools for their child or children with disabilities on the bases of the child's disability which puts them in a care given position to the detriment of their development or work.

During the consultative session for the development of this report organised by VOWACGhana, A mother of an eight-year-old child with spinal bifida explained that all her effort made to secure admission for her son in both public schools and private school did not work because the school authority rejected her son because of his disability. Another caregiver at the same programme, who had a 13-year-old son with spinal bifida also sheared her experience. According to her [her son was rejected at a school in Apam in the central region on the basis that he cannot eat by himself and cannot bath himself as well as used the toilet without anyone support.

The current Act 715 does not recognise in anyway the specific rights of women and children with disabilities or their care givers, however, the 2024 bill recognise extensively the rights of women and children with disabilities in addition to caregivers. It does not however address the unique barriers which limit them from enjoying these rights.

In view of the state obligation under Article 4.3 to consult with persons with disabilities and their representative organization, not much has been achieved with regards to ensuring the voices of women and children with disabilities at the decision-making table. Legislations and policies such as Ghana's cyber security law, domestic violence art, the gender policy, the views of women and children with disabilities were mostly missing in their drafting and implementation.

RECOMMENDATIONS:

1. In view of the fact that the current draft Persons with disabilities Bill 2023/2024 which is intending to replace the existing Persons with Disability law (Act 715) contains highly relevant provisions that focus on women with disabilities, children with disability and caregivers/Personal assistance in sections 50 and 51 respectively, it is recommended that the government should ensure to have this new law in place by December 2024 under a certificate of urgency.
2. It is also recommended that the definition of Persons with disabilities in the draft Persons with Disabilities bill 2024, be made to reflect the CRPD's definition. The Bill

must also contain a definition on what disability is as contained in paragraph ‘E’ of the preamble of the CRPD.

3. Upon passage of the new bill into law, there is the need for a 5-year implementation plan that would focus on a comprehensive implementation of the aspirations of the new law focusing on the rights of women and children with disabilities
4. In addition to the provisions on women and children with disabilities in the 2024 bill, There should be a clause to address unique barriers which hinders women and children with disabilities from enjoying their rights.

ARTICLE 5: EQUALITY AND NON-DISCRIMINATION

Article 17 of the 1992 Constitution is on “equality and freedom from Discrimination.” Section 32 Clause (2) of this article prohibits discrimination on numerous grounds including gender but does not state explicitly disability as one of the grounds on which a person could not be discriminated upon “A person shall not be discriminated against on grounds of gender, race, colour, ethnic origin, religion, creed or social or economic status”.

Though “disabilities” is mentioned in clause 3 of the Article as a synonym for limitation and restriction, one can reasonably read that clause to implicitly cover all manner of discrimination in its attempt to define discrimination “3 For the purposes of this article, "discriminate" means to give different treatment to different persons attributable only or mainly to their respective descriptions by race, place of origin, political opinions, colour, gender, occupation, religion or creed, whereby persons of one description are subjected to disabilities or restrictions to which persons of another description are not made subject or are granted privileges or advantages which are not granted to persons of another description”.

Though Section 4 of Act 715 generally prohibits discrimination against persons with disabilities, it does not in any way highlight the situation of gender-based discrimination in addition to disability-based discrimination. It does not in any way raise the issue of discrimination by association in spite of the propensity of care givers and especially mothers of children with disabilities to be discriminated against owing to their association with a person with disability.

The Persons with Disabilities bill 2024 in section 32 (2) on Equality and non-discrimination, however, addresses the issue of discrimination by association. The bill however does not recognize denial of reasonable accommodation as disability base discrimination.

RECOMMENDATIONS

1. It is recommended that the Persons with Disabilities bill 2024 clearly recognize the denial of reasonable accommodation as a disability-based discrimination and violation of their right.
2. It is further recommended that section 32 of the draft Persons with disabilities bill 2024 be made to explicitly recognize the prohibition of gender-based discrimination.
3. We also recommend that the passage of the PWDs 2024 is expedited for a full realization of the provisions section 32 of the bill.
4. It is recommended that there should be recognition of multiple and intersectional discrimination in the persons with disabilities Bill,

ARTICLE 6: WOMEN WITH DISABILITIES

Ghana has a National Gender policy which seeks to improve the lives of women in general. This policy also recognizes women with disabilities and makes some deliberate efforts to target them. In chapters 4, 5 and 6 for instance, issues concerning women and girls with disabilities is being recognised as part of human diversity, *economic* empowerment, employment, education, accessible transportation, rehabilitation and vocational training centres are some of the issues that are captured. The challenge however is the absence of budgetary allocation and relevant disbursement of funds for successful implementation of the policy intention. In addition, the policy fails to address barriers which hinder women with disabilities from enjoying their rights for example accessibility, communication, information etc.

Also, Women and girls with disabilities face multiple gender-based violence and discrimination. Sexual violence, indecent assault, neglect and verbal abuse in their families,

communities and the society at large. Unfortunately, the domestic violence Act 732 do not have any provision to addressing this.

There is again Limited access to education and health care services (Inaccessible educational and health facilities, inadequate trained teachers and health workers to attend to women and girls with disabilities, inadequate assistive devices to aid the teaching and learning of women and girls with disabilities, inadequate sign language interpreters in hospitals and health centres to attend to women and girls who are deaf or hard of hearing, inaccessible equipment in hospitals such as delivery beds, the health insurance scheme not covering unique illnesses of women and girls with disabilities that are related to their disability).

Laws and policies protecting women and girls with disabilities are also sometimes not enforced and most of the institutions that deals with women and girls with disabilities are not trained on the needs of the different disability groups. Women and girls with disabilities still encounter persistent stereotypes and social norms.

There are limited funding and support for activities that involve women and girls with disabilities as well as organizations that advocate on their behalf.

Though the 1992 Constitution of the Republic of Ghana in article 27 recognize the specific rights of women generally, no mention is made of women with disabilities though women with disabilities face multiple discrimination and have a higher need to be protected by law.

RECOMMENDATIONS

Involve women and girls with disabilities and their organizations in all programmes and interventions in the country.

1. There should be sensitization programmes at the district, regional and national level targeting the elimination of discrimination and stigma in order to promote the empowerment, development and advancement for women with disabilities in Ghana.
2. There should be a specific target and indicators on women and girls with disabilities at the various decision making processes and levels and the current affirmative action bill before parliament..
3. Specific measures on disaggregated data collection must be put in place to ensure that Ghana always has a disaggregated data on women and girls with disabilities that can better guide the implementation of programmes and policies.

ARTICLE 7: CHILDREN WITH DISABILITIES:

In addition to Ghana's Children's Act (Act 560), from July 2015, the country adopted a Child and Family Welfare Policy (CFWP) to better protect children and the family.

The main objective for developing this policy was to improve the child protection system in Ghana as well as provide protection for children against violence, abuse, neglect and exploitation. The policy takes into consideration the positive traditional values, beliefs and practices as well as chiefs, queen mothers, religious leaders, family heads and institutions that exist to promote and protect the rights of children. Both the Children's Act and the policy defines a child as a person below the age of 18 which is based on Article 28 of the 1992 Constitution of Ghana.

Its major aim is to create a better system for children and families which based on proper community structures that can lead to discussions towards change and improvement in the way children are treated in families, communities and the society at large.

Though the policy focuses on the protection and welfare of all children, there are gaps with regards to children with disabilities.

To begin with, although Ghana has ratified the CRPD, and the African Charter on the rights and Welfare of a Child as well as the enactment of the persons with Disability Act, the policy did not make reference to these laws which seeks to promote and protect children with disabilities in Ghana.

Moreover, considering the high number of children with disabilities according to the Ghana Statistical Service population and housing census Report (2021) which states that approximately 143,000 children (aged 0-17) have disabilities in Ghana. The policy did not have specific provisions or measures to ensure that children with disabilities and caregivers of these children enjoy their rights. The policy only mention disability in the first guiding principle which is non-discrimination and the third objective in the policy.

Furthermore, the policy also emphasizes on the need for children to go to school and take part in decision making processes at all levels. However, it did not consider the different needs of children with disabilities in accessing education in Ghana which include. Accessibility of the built environment, information and resources such as assistive devices, sign language interpreters and professionally trained resource personnel to assist these children.

More to the point, the CFWP main aim is to protect children from all forms of violence, abuse, neglect, and exploitation but no special provisions or measures were spelt out to ensure the enjoyment of their rights. But the fact remains that children with disabilities especially girls suffer multiple violence, abuse, neglect and exploitation at all levels which sometimes lead to complicated health issues.

In addition to what has already been said, the policy did not address stigma, discrimination and marginalization that children with disability and their caregivers face in their families, communities and the society at large which is based on the negative perceptions and mind sets society have towards children and their caregivers.

The CFWP did not include the different disability groups and organizations that work with children with disabilities and their caregivers in their consultation sections hence the policy lacks the expected knowledge concerning children with disabilities in Ghana.

The policy did not make provision for support services for children with disabilities and their caregivers such as rehabilitation centres, physiotherapy and assistive devices.

Again, children with disabilities are not able to express their views or being consulted on matters that affects them. During the consultations for the development of this report, children with disabilities stated that they did not have opportunities to express their opinions in school or at home on matters concerning them including their disabilities. This is because they are perceived by their teachers and caregivers as not being capable of making decisions on their own because of their disabilities. The charity and medical approach to disability is reinforced here. Thus, having a disability is perceived as being sick and considered irrelevant caregivers and teachers think they should be the ones to take decisions for them. Unfortunately, there is no policy or law specifically recognizing the voice of a child with disability to express his or her opinion on matters concerning them including that of their disability.

Although section 16 of Ghana's Persons with Disability Law prohibits any parent from refusing to educate their child with disability, parents of children with disabilities such as cerebral palsy, among others are often unable to educate their children in the formal educational setting owing to the lack of support services in the institutions. Some of the parents are outrightly denied admission for their wards as such educational institutions have no provisions in terms of accessibility, reasonable accommodations, support persons etc. for "such children." This leads to discrimination in accessing education on the bases of disability. Even though Ghana has

inclusive education policy, which is currently undergoing a review, the commitment to its implementation is very minimal.

RECOMMENDATIONS

1. The state should ensure that there is in place a comprehensive support system including rehabilitation services, various forms of therapeutic services for children with disabilities.
2. It is important that the government sets up a funding mechanism that allows especially children with disabilities and their parents/care givers who seek for Assistive devices to easily access such devices easily.
3. The government should have a five-year educational plan for children with developmental and psychosocial disabilities and ensure its implementation.
4. We recommend the review of both the children's Act 560 and the family welfare policy to be amended to protect and recognize the voice of children with disabilities and correct wrong terminologies like the 'disabled child' referred to in the children's Act section 3 and 10.
5. The voices of children with disabilities must be factored into all matters concerning them in all areas of their lives.

ARTICLE 8: AWARENESS RAISING

The situation of women and children with disabilities with regards to awareness raising is worse as discussions pertaining to them in the public and private media is almost negligible.

Next to know, there is limited awareness on the intersectionality of gender and disability and children with disability. This situation is most unfortunate in view of the fact that owing to the patriarchal nature of the Ghanaian society and treating all persons with disabilities in a homogeneous manner, women generally have less voice; with women with disabilities having even lesser voices. This therefore renders the voice of women and children with disabilities very insignificant in a traditional Ghanaian community where there are lots of negative perceptions.

Some of these negative perceptions go as far as allowing the community in which they find themselves to take their lives, undergo forced sterilisation, and endure various forms of abuses without any course of redress.

During the various consultative sessions with women and children with disabilities and caregivers, it came to light that women with disabilities and caregivers of children with disabilities endure these negative perceptions, stigmatisation and general disability related discrimination. For example, women with disabilities who are engaged in petty trading lamented about the refusal of the general public to patronize their goods and services owing to their disability which is perceived as bad luck, and they are unclean. There were also pregnant women with disabilities who recounted their stories of members of their society including public health workers questioning why some people could be wicked enough to put them in such a state. There is again the situations of families of women with disabilities especially in the Northern part of Ghana refusing to recognise and take the bride price of some women with disabilities when men come to ask for their hand in marriage, though the normal customary practice is that when a woman's hand is asked for by any man in marriage, it requires the woman's family to take a bride price from the would-be husband in the form of animals, money, drinks etc. the family of the woman with disability refuses to take the bride price of the woman since they perceive that it will serve as a disincentive for the man who is asking for her hand in marriage.

The above emphasises the high need for awareness raising on disability related matters with special focuses on women and children with disabilities and their care givers. Unfortunately, however very few awareness raising programmes are organised even by Organisations of Persons with Disabilities to target these distinct constituents in Ghana.

RECOMMENDATIONS

1. It is recommended that the government, in consultation with women and children with disabilities and other persons with disabilities as well as their representative organizations co-design and put in place a comprehensive awareness raising programme that addresses the issues on the intersectionality of gender and disability as well as children with disabilities and persons with disabilities in general and their caregivers, these programmes should be rolled out at the district, regional and national levels.

2. The government should institute media programme to raise awareness on disability social inclusion.

ARTICLE 9: ACCESSIBILITY

In addition to Article 9 of the CRPD, Sections 6 & 7 of Ghana's Persons with Disability Act 715 make relevant provisions for ensuring that the built environment, goods and services and all other related matters are made accessible to all persons with disabilities taken into consideration their specific needs. In addition to these, since September 2016, the country has had in place a policy (The National Accessibility guide for the built environment, GS1119) that provides extensive guidance on making the built environment accessible.

During the consultations however, some women with disabilities stated that they could not use places like the public toilets, bore hole, or go to market centres mostly owing to the fact that these places were not made accessible enough to accommodate their needs. A participant recounted that she did not like to use the public toilets since she leaves the place more soiled up than she entered the place owing to the nature of the facility. Another participant indicated that the layout of the market and the arrangement of items were so unstructured in her locality, thereby hindering free movement. As a result, she ends up bumping into people and goods all the time, which then exposes her to verbal abuse.

In addition, a lady said, 'The unavailability of accessible toilet facilities in my community makes it extremely difficult for me to freely ease myself which affects my health. Most of the time, I am left with no option than to resort to the use of plastic bags as a means of defecating'.

Some children also complained about how inaccessible their schools and recreational centres were thereby making mobility and access a major challenge to them. This is in spite of the Government's pledge at the 2018 and 2022 Global Disability Summit to ensure that schools were made accessible to all learners.

RECOMMENDATIONS

1. Ghana must adopt and adhere to a five-year accessibility implementation plan that seeks to ensure that existing and new public facilities including recreational centres, schools, markets, hospitals are made accessible to all persons including women and children with disabilities.
2. It is recommended that the accessibility needs of all persons including women and children with disabilities are factored into the construction of facilities use by the public.
3. As part of demonstrating compliance with the provisions on the accessibility requirements in the building code and the guidelines on the built environment (GS1119), these frameworks must serve as a major criterion for issuing building permit for any construction to which the public has access.
4. It is recommended that the state through the attorney general's department commences a programme to prosecute offending owners of facilities to which the public has access which have not been made accessible for women and children with disabilities and other persons with disabilities.
5. Additionally, all services directed at the public including CHRAJ, DOVVSU, Social welfare department, police should be made accessible to all persons.

ARTICLE 10: RIGHT TO LIFE

Though Article 26 (B) of Ghana's 1992 Constitution prohibits cultural and customary practices that are injurious to the physical and mental wellbeing of a person, till date, there are still cases of children with disabilities being killed after being born. During the consultations, a mother of a child with disability stated that she had been shunned by most of her family members owing to the fact that she had been advised to see off her child with spinal bifida since in their view the child was "a snake" hence his inability to stand up and walk like any other person.

The above case of the care giver emanates from what is known in the Ghanaian cultural and traditional practice as the "Spirit Child" Phenomenon

Being born with a disability in Ghana as a child marks you for death according to one sister Stan Therese Mumuni in the Northern region of Ghana where she houses over one hundred and twenty (120) children with various disabilities. https://www.churchinneed.org/wp-content/uploads/2019/04/header-map-white-background_2-op.

Her narrative corroborates the various stories across the country of children with various forms of disabilities being deliberately killed because they are thought to be evil and not fit to live in the community since they only bring misfortune or calamity or disaster upon their immediate family members or the entire community. Some communities end up drowning them in rivers or streams of water, burying them alive or giving them some concoctions for them to drink and die. <https://www.myjoyonline.com/autistic-2-year-old-boy-buried-alive-by-grandfather-in-central-region/>

<https://www.graphic.com.gh/news/general-news/man-buries-disabled-child-alive-under-direction-of-prophetess.html>

The police in the above cases reference from the media, made some initial arrest of the perpetrators an update on those cases have not been made public. There is also no frantic effort on the part of the state to raise serious awareness on the prohibition of such acts by the laws of Ghana. Very little is being done if any at all, to engage traditional leaders and religious leaders on these matters for appropriate remedies.

RECOMMENDATIONS:

1. It is strongly recommended that the government work together with the various traditional authorities to give full meaning to article 26, clause (B.) of the 1992 Constitution that will ultimately abolish the spirit child phenomenon and effectively investigate and sanction continuing practices by perpetrators.
2. The state must specifically target religious bodies to sensitize them on religious practices that negatively affect the quality of life of women and children with disabilities; and subsequently implement a rigorous programme to punish offending entities.

3. It is recommended that the government of Ghana takes practical steps to eliminate harmful and injurious customary and cultural practices against women and children with disabilities and their caregivers by implementing Article 39, clause 2 of Ghana's 1992 constitution.
4. It is further recommended that in line with paragraph (C.) of Article 272 of the 1992 constitution, the National House of Chiefs is made to come up with an action plan to eliminate traditional practices that are harmful and injurious to women and girls with disabilities.
5. The government must provide proper care and support systems to parents and caregivers of children with disabilities, especially, persons with cerebral palsy and developmental psychosocial disabilities.
6. The government must ensure that counselling services are provided at health centers so that parents who give birth to children with disabilities go through immediate counselling and obtain other support services for the child with disability.

ARTICLE 11: SITUATION OF RISK AND HUMANITARIAN EMERGENCIES

Ghana in February 2023 launched its first ever protocol on managing persons with disabilities during any situation of risk and humanitarian emergencies referred to as the “National Disability Inclusive Disaster Risk Management Guidelines”. However, categories of women and children with disabilities in the country continue to undergo highly deplorable living conditions whenever disasters such as pandemics, flood, fire outbreak, armed conflicts, but to mention a few, occur. During the recent flood disaster in the southern Volta region in 2023, both women and children with disabilities in the affected areas did not receive any relevant interventions that took into full cognizance their disability and its related matters. Data collected on affected persons for instance was not disaggregated to draw out women and children with disabilities in the affected areas. Relief items offered by stakeholders such as the government, NGOs and other international donors did not include basic assistive products required for the women and children with disabilities who had lost these items in the flood. However, during the visit to the place by the GFD, at least 95 children with disabilities and some women who needed assistive devices such as white canes, children's wheelchairs,

callipers were identified. This is often the case whenever there is disaster in one form or another. Therefore, since these people even before the disaster were already living in deplorable situations, they are made extremely worse off when these disasters occur.

RECOMMENDATIONS

1. It is recommended that the government should implement the policy by rolling out a comprehensive nation-wide training, in consultation and cooperation with OPDs, of all risk and humanitarian emergency workers such as those of the national disaster Management Organisation, Fire service, ambulance service, among others to effectively implement the government's new policy on the "National Disability Inclusive Disaster Risk Management Guidelines".
2. It is recommended that the disaster Management body of Ghana (NADMO) ensures to have in stock assistive devices which should be distributed as part of relief items to be given to victims of a disaster.

ARTICLE 13: ACCESS TO JUSTICE

There are several cases of violence, abuse, exploitation, and other forms of violations that women and children with disabilities face according to various research and reports and anecdotal information. Unfortunately, most of these cases are not reported by the victims owing to myriads of issues.

Some of these include: limited knowledge of the victims as to where and who to report such cases to, the highly weak voice of a woman or child with disability, lack of sign language interpreters at the police stations and other institutions where these matters ought to be reported at, limited or no knowledge of law enforcement agencies on how to better handle such victims, inaccessible physical environment, inaccessible judicial services, among several others. The need for women and children with disabilities to receive good empowerment on being able to report cases of abuse and violations on one hand, and on the other, law enforcement agencies and Human Rights institutions such as CHRAJ as well as institutions of adjudicator, among others receiving disability inclusive justice delivery cannot be over emphasized.

The high-cost element coupled with bureaucracies associated with accessing justice deter women and children with disabilities who are economically less endowed. Adding to what has been said the legal aid system set up by the state to aid access to justice is heavily under resourced both with manpower and financial resources.

RECOMMENDATIONS

1. Law enforcement agencies including the police, domestic violence and victims support units and other security services, as well as human right institutions such as CHRAJ must train their officers at all levels on the appropriate ways of communicating and liaising with women and children with disabilities complainants or victims who have experienced any form of abuse. These institutions must also put in place accessible forms of communications including Sign language interpretations services, language translation services, and all other relevant systems that will be required to make the general justice delivery system more accessible.
2. We recommend that the government scraps off some costs associated with accessing justice for women with disabilities e.g. Cost associated with obtaining medical report and judicial charges etc.

ARTICLE 16: FREEDOM FROM EXPLOITATION, VIOLENCE AND ABUSE

Ghana's Domestic Violence Act, Act 732, enacted in 2007, addresses various forms of domestic violence, including physical, sexual, emotional, and economic abuse. While the act aims to protect all individuals from domestic violence, it does not however explicitly mention and address specific barriers affecting women and children with disabilities. The act is too generic and does not put in place measure to address the in intersecting issues pertaining to women and children with disabilities.

Though section 4 (1) of the Persons with Disability Act prohibits any situation of exploitation, violence and abuse against Persons with Disabilities generally. Several women and children with disabilities and their care givers experience various forms of abuse and exploitation in their day to day lives.

During the consultation sessions with some women and children with disabilities in the ten traditional regions of Ghana on this report, some children and women with disabilities recounted some cases of sexual and physical abuse, neglect and abandonment that they had experienced in their families or the community generally. While some reported of being raped by family members and others in their neighbourhood, others were also violated by teachers and classmates, impregnated and abandoned by those who did so. In this consultation, one person narrates how her husband beats her almost every day and uses her physical disability to insult her. Another reported that a man forcefully had sex with her and warned her never to mention his name.

The above cases of sexual abuse are further confirmed by a 2016 research article published by Professor Maxwell Peprah Opoku titled “Sexual violence against women with disabilities in Ghana”. According to the research which was conducted in the Ashante Mampong Municipality, “Several participants mentioned that poverty and lack of support from family members had resulted in their continuing dependence on other people who ended up abusing them sexually. Their inability to work due to disability, coupled with rejection by their families, forced them to seek assistance from other people who eventually exploited them”.

This is further confirmed by the Ghana Statistical Service (GSS) survey in the 2021 population and housing census, that 24.4% of women between 15 - 49 years’ experience intimate partner physical and/or sexual violence at least once in their lifetime.

From the consultations of this report, only one person of the women interviewed reported her case of abuse but was unable to secure a favourable court ruling. Almost all these women who face cases of abuse are unable to report them either because they lack knowledge on where and how to report such cases, reporting centres are not accessible, there are no provisions made for sign language interpretation, the distance involved, derogatory remarks and comments by law enforcement agencies, etc. on the other hand, the officers in charge of these points of complaint simply would ask them to settle the matter at home. For example, when a woman with disability in the Upper East region reported her husband for abusing her regularly, the police is reported to have asked her to settle the matter at home since she might not have anyone else to marry her owing to her disability should the current husband leave her.

RECOMMENDATIONS

1. We recommend that the government reviews the domestic violence Act in addition to formulating other appropriate legislative framework for identification, investigation and prosecution of all forms of violence against women and children with disabilities.
2. The government should establish a comprehensive programmer care targeting women and children with disabilities and care givers of children with disabilities in the various districts for their re-integration in the community after situations of violence and abuse.
3. We recommend that adequate budgetary allocation with corresponding disbursement is made available for the implementation of all programmes, projects and activities seeking to address all matters regarding violence, abuse and exploitation of women with disabilities.
4. The government should empower women and children with disabilities to be able to confidently report all cases of abuse, violence and exploitations that they face or experience.
5. It is important that accessible communication or hotlines be setup with audio, text and visual functionalities as a means through which victims/survivors can report their issues.
6. Age and gender specific appropriate accommodations must be put in place to accommodate the needs of all women and children with disabilities who undergo abuse or violence, or exploitations, including ensuring that there is appropriate budget for accessible shelters and services for victims/survivors to escape violence across the country.

ARTICLE 19: LIVING INDEPENDENTLY IN THE COMMUNITY

Section 3 of Act 715 contains a provision that legitimises the exclusion and institutionalisation of persons with disabilities on the bases of their disabilities or impairments so far as living in the community is concerned. The provision in this section of the law which is similar to the provision in Article 29 clause 4 of Ghana's 1992 Constitution, allows for persons with disabilities to be put in specialised establishments since it seems to hold the view that there will be some bases for legitimately placing a person with disability in a specialised living facility owing to the nature of their disability or needs. This is for instance a major reason for which state continue to keep some persons with psychosocial disability in religious facilities or in psychiatric institutions.

This contravenes article 19 of the CRPD. Owing from the above, women and children with disabilities are still institutionalized and not given the care and support they deserve to live independently. For example, WASH services are not accessible to women with disabilities, and they do not have personal mobility aides, assistive devices, and employment to support their living. This was much emphasized during the consultation sessions for this report. They are limited in choices and autonomy to live independently or because of the over dependence on others.

The current Persons with Disabilities Bill 2024 do not have such provision As section 31 is explicit on living independently in one's community as a person with disability, thereby correcting this anomaly should it be passed into law soonest.

From the consultations on this report, two (2) women with disabilities had this to say. First woman, 'I am a lady with short stature who live in the central region, accessing basic necessities in my community is very difficult for me due to my disability. Because of my impairment I find it difficult to go to the pipe in the community to fetch water since this is far from where I stay and moreover, the height is also a problem for me so I have to pay people every day to fetch water for my daily use' 'I am unable to have access to water which is one of the necessities for human survival on earth. This is because, all the boreholes in my community are inaccessible to me. In view of this, I am left with no choice than to pay for someone to fetch water for me, as a result of this challenge, I am unable to bath twice a day as a lady and this becomes more serious when I am menstruating. This situation also puts a lot of financial constraints on me.

Second lady; 'The unavailability of accessible toilet facilities in my community and my inability to rent a house with toilet facility makes it extremely difficult for me to freely ease myself which affects my health. Most of the time, I am left with no option than to result to the use of plastic bags a means of defecating'.

These and many other challenges affect all aspects of my life which puts a lot of physical, emotional, and psychological stress on me.

RECOMMENDATIONS

1. It is recommended that the government takes steps to promptly enact the Persons with Disabilities Bill 2024 to prevent any possibility of a person with disability being made to live in any specialised institution or facility on the bases of their disability.

2. It is recommended that the government should provide the needed care and support in the form of inclusive services, supports, personal mobility aide, and employment to women with disabilities.

ARTICLE 21: FREEDOM OF EXPRESSION AND OPINION AND ACCESS TO INFORMATION:

During the consultations for the development of this report, children with disabilities stated that they did not have opportunities to express their opinions in school or at home on matters concerning them including their disabilities. This is because they are perceived by their teachers and caregivers as not being capable of making decisions on their own because of their disabilities. The charity and medical approach to disability is reinforced here. Thus, having a disability is perceived as being sick and considered irrelevant. Caregivers and teachers think they should be the ones to take decisions for them.

Women with disabilities also lack access to information especially on SRH services in accessible forms, thereby negatively affecting their health and limiting their choices and access to information.

Ghana's main law on Cyber security does not make any provision for protecting children and women with disabilities who use the internet for their day-to-day activities. Which exposes them to a lot of danger and exploitation. This brings to the fore, the fact that women and children with disabilities are not targeted in anyway during information development and dissemination.

Also, Ghana does not have any policy that compiles web content developers as well as electronic platform developers to make their services accessible to women and children with disabilities and Persons with disabilities in general. They are confronted with accessibility challenges in attempts to access information from websites and other online platforms.

RECOMMENDATIONS

1. We recommend that measures are taking to ensure that all public information and communications should be in accessible formats for the different disability categories and government should consult with OPDs more proactively in taking these measures.

2. The government must ensure that women and children with disabilities are protected from all forms of cyber-abuse. For example, prompts alerts and other information or cautions should be communicated in accessible forms.
3. It is recommended that Ghana ensures the accessibility of all electronic platforms including websites by adapting a policy guideline and legislative framework to inform its implementation.

ARTICLE 23: RESPECT FOR HOME AND THE FAMILY

Women and children with disabilities in Ghana still encounter several challenges in their attempt to enjoy their rights in the home or family.

During the consultations for the development of this report for instance, a woman with disability in the central region gave an account of how her own mother allowed the father of her child to take the baby away from her on the basis that she will not be able to take care of the child owing to her disability which was physical.

A child with disability also recounted how her father abandoned her and the mother upon realising that the child had a disability. According to Madam Hanna Awadzi, the director of the “Special Mothers Project”, several care givers or mothers of children with disabilities often recount similar stories of abandonment by fathers of children with disabilities which brings extreme hardship on both the mother and child.

The sexual and reproductive health needs of especially women and girls with disabilities are unfortunately not catered for adequately within the public health service delivery systems of Ghana.

In a research work conducted by the GFD on access to sexual and reproductive health for persons with disabilities in 2020 of which 60% of the respondents were women with disabilities, several barriers were identified to impede access to sexual and reproductive health services in the community. Some of these included: low confidence and self-esteem on the part of persons with disabilities to access such services, inaccessible physical environment, absence of a relevant guidance manual on assisting persons with disabilities, negative attitude of healthcare workers themselves, and absence of disaggregated data in the health care facilities on those with disabilities patronising their services.

Other barriers the report captured include absence of sign language interpreters in the facilities to facilitate communication for deaf persons, inaccessible Information and educational communication materials, socio-cultural and religious believes all hindered Persons with disability including women with disabilities from being able to access SRH services.

RECOMMENDATIONS

1. It is recommended that There should be accessible and affordable SRH services for women and girls with disabilities.
2. The state should institute media programmes to raise awareness on SRH services and other intersecting issues affecting women and girls with disabilities.
3. The government should institutionalise care and support systems for women and children with disabilities. These persons should be trained to provide support services to those who need them.
4. The government should provide trainings for social workers, child protection officers, health professionals etc. on how to provide support to parents or caregivers of children with disabilities to combat ableist stereotypes about parents with disabilities.
5. The government should provide budgetary allocation to ensure inclusive SRH services for women and children with disabilities.
6. All information, educational and communication materials on sexual and reproductive health related matters must be made accessible to women and girls with disabilities in alternative formats.

ARTICLE 24: EDUCATION

Though Ghana currently has an inclusive education policy backed by Ghana's law on Education (Act 778) which provides the legal bases for having inclusive education in Ghana, access to education especially within the mainstream setting is still challenging due to low political will and commitment. The majority of persons who are blind, persons who are deaf and those with intellectual disabilities and the deaf-blind are compelled to acquire basic and second-cycle education in special schools or integrated institutions across the country. This is confirmed in the Government's medium term development plan, in which they refer to an increase in the number of special schools to forty-one (41) to the detriment of ensuring inclusive schools.

Majority of them are therefore compelled to travel over hundreds of kilometres before accessing education. Though from the medium plan, we see an increment in enrolment in these schools, the absence of data on the number of children with disabilities who are out of school does not allow us to appreciate the increase in enrolment within a relevant context. We are quite sure that an attempt to report on the number of children with disabilities in the various communities will bring to the fore a huge deficit with regards to the number of children with disabilities who are out of school owing to the absence of a school in their vicinity or community which they could easily attend.

During the consultation session organised by VOWACGhana at the Cape Coast School for the Deaf and Blind, teachers complained about the situation of absenteeism on the part of some students owing to the fact that their relatives were unable to support them travel back to the school after vacation. According to these teachers or care takers, some of the students even beg the school to allow them stay on in school during short term vacations since such students are aware that there is a high possibility of, they not returning to school in good time or at all. This is because the students live several kilometres away from the school, for which reason parents or guardians find it financially difficult to provide transportation, personal assistant, and provide three months provisions to support their stay in the boarding schools. Some other parents or guardians simply abandon their wards in these schools during vacation because of their disability.

During a consultation session with thirty (30) children with disabilities in some special schools in the eastern and Upper West regions, some of them did mention how family and community members did discourage their parents and guardians from sending them to school since “it will be waste of resources” since they are “disabled children.”

Others also talked about the fact that their education was delayed as their parents prioritised the education of their other siblings over them. Some of the respondents again indicated that though their parents were not supporting their education, with the help of Non-governmental Organisations (NGOs) and the disability common fund, they are able to go to school. Accessibility is one of the major challenges respondents mentioned.

Children in the respective supposed inclusive schools who participated in the consultation lamented about the absence of accessible teaching and learning materials in their respective schools for them to learn on an equal bases with their counterparts without disabilities, Others

also talked about the inaccessible nature of the built environment and the school settings, there are no ramps or lifts in modern school buildings.

There is again the situation of being limited to non-science and maths subjects for visually impaired students from the senior high school level onwards which then limits their academic and occupational opportunities.

Children with physical disabilities for instance complain about the non-availability of schools with the right accessible infrastructure thereby making their access to education extremely difficult. Some of these children are compelled to crawl over long distances to school since they are unable to afford basic assistive devices such as wheelchairs which are a necessity for them. <https://yen.com.gh/people/228749-14-year-ghanaian-boy-crawls-hands-appeals-wheelchair-netizens-emotional-video/>

Unfortunately, the public schools have no provision for the participation of certain categories of children with disabilities such as Down syndrome, cerebral palsy, among a few others. Parents or guardians of such children mainly have to resort to private educational institutions or home teaching for such children. Students are being refused admissions because the schools do not have the right equipment and infrastructure, care givers or support persons, teaching and learning materials, inclusive pedagogy, inadequate trained resource personnel and teachers on special education and inclusive education policy. Also, some schools reject these children because they are not able to perform some basic tasks like feeding, bathing, toileting etc.

VOWACGhana has made several attempts to enrol children with developmental disabilities in even special schools which have been turned down by school authorities because of the above reasons.

There is a huge budgetary deficit and very limited commitment towards the implementation of the inclusive education policy. we are aware that the government pays for the tuition, boarding and lodging of children with disabilities in special schools however, from our numerous searches, there is no budgetary allocation towards the implementation of the inclusive education policy even though the government committed to increase funding of education of children with disabilities by 1.5% annually at the global disability summit in July 2018.

RECOMMENDATIONS

1. The government must have a more comprehensive implementation plan and adhere to, to facilitate the implementation of the inclusive education policy with commitment of sufficient budgetary allocation for schools to transform their environments and curricula to be more inclusive, including compulsory training of all teachers.
2. The government must raise awareness on the inclusive education policy and ensure that children with down syndrome, cerebral palsy, among others can attend public schools where their reasonable accommodations and accessibility needs are met.
3. Inferring from the medium-term development framework 2022/25 we recommend that government show or clearly state its commitment to the implementation of the inclusive education policy in the framework, so we could assess progress and make adjustment as currently there is no clear plan.
4. Government should provide the needed resources in terms of personnel and infrastructure to accommodate the needs of children with disabilities, especially children with cerebral palsy, autism, speech impairment, spinal bifida and other developmental disabilities.

ARTICLE 25: HEALTH CARE

Generally, women and children with disabilities as well as caregivers still experience challenges in accessing quality healthcare and its complementary services.

During a consultation session for the development of this report with a cross section of women with disabilities drawn from the traditional ten Regions of Ghana, it emerged that some hospitals are not accessible, the negative attitude of workers hindered women with disabilities from using the facilities. One participant in the Upper East Region recounts how she was left unattended to. She was slapped by a professional nurse even in labour at the point of delivering for which reason she had to leave for another hospital immediately before she could give birth safely. Some women with disabilities also complained about inaccessible medical equipment such as mammograms, non-height adjustable labour and other forms of examination beds in the hospitals, lack of sign language interpreters, lack of specific types of assistive devices to aid the rehabilitation of some children, are some of the barriers that are hindering access to quality health care.

There were some participants including children, care givers and women with disabilities who all lamented about the very limited and basic financial support that they were getting through the health insurance scheme offered by the government. According to them, they needed to pay out of pocket to get quality drugs and related services whenever they visit the hospitals.

Women with disabilities have more health care needs because of the intersection of disability and gender. For example, a woman with disability may suffer from breast cancer and will equally require three times weekly physiotherapy services. Cost of physiotherapy and speech therapies are solely absorbed by women with disabilities, caregivers with disabilities and persons with disabilities in general. Equipment for physiotherapy is not found in the districts and hard to reach community hospitals but at the Municipal, Metropolitan and Regional hospitals which makes it very cumbersome and expensive to access these services.

RECOMMENDATIONS

1. The government must put in place, in consultation with OPDs, a comprehensive programme to eliminate the various barriers identified to promote equitable access to healthcare for all.

The government should ensure to provide accessible equipment for example, delivery and examination beds, at health care facilities and train health workers on the usage and target audience.

2. The government must put in place an awareness raising and training programmes to deal with the situation of negative attitude of healthcare workers which is impedes access to healthcare for women and children with disabilities. Following these awareness raising programmes must now be punitive sanctions to deter healthcare workers from putting up such behaviours.
3. With reference to the state response to the list of issues on article 25, we recommend that clear timelines are given to the training of health personnel as this is long overdue and impeding on women and children right to health care.
4. There is over dependence on the re-enactment bill, and we therefore recommend that interim measures should be adapted immediately to promote inclusive, affordable, available and accessible health care for persons with disabilities especially women and children with disabilities and their caregivers.

ARTICLE 27: WORK AND EMPLOYMENT

Women with disabilities face challenges in accessing employment in Ghana owing to their limited educational opportunities, stigmatisation and discrimination among others. Lack of capital, gender stereotype among other challenges, thereby rendering them among the poorest of the poor and unduly exposed to various forms of abuse and hardship, very few employment programmes target them.

Though the current persons with disability bill 2024, have some provisions on incentives and other measures targeting persons with disabilities in general and women with disabilities in particular, these provisions are not adequate for rural women with no formal education, no access to finance and market coupled with limited capacities to set up and manage their own businesses. Criteria for accessing credit or cash grant facilities from entities such as YEA, GEA, NYA and other financial institutions are highly formalised thereby inhibiting or preventing women with disabilities with little or no educational background to access such facilities or opportunities.

Entities such as the Youth Employment Agency (YEA), National Youth Authority (NYA), Ghana Enterprise Agency (GEA), among several others though have targeted Persons with Disabilities in employment programmes, they have not made any effort to intentionally target women with disabilities.

Care givers especially mothers of children with some categories of impairments such as cerebral palsy, down syndrome, or other neurological conditions, have also lamented copiously regarding their inability to remain in gainful employment especially in the formal private and public sectors of employment. There are accounts of other care givers who lamented that their businesses have very little patronage owing to their association with persons with disabilities resulting in stigmatisation. The above ends up rendering such persons poorest or economically distressed.

During the consultation session organised by VOWACGhana in the Central Region for the development of this report, two (2) women with disability and a care giver of a child with disability recounted ever being denied access to credit facilities owing to their disability and the disability of their child respectively, one of them has this to say “I am a salaried worker in the teaching field, when I entered the bank to withdraw my salary, one of the tellers said “Madam! Here is not an eye centre” so go out”. This corroborates the general account that

women with disability on account of their disability and gender are not seen as credit worthy and as a result denied access to credit facilities by some financial institutions.

RECOMMENDATIONS

1. It is highly recommended that the government put in place affirmative measures to specifically target women with Disabilities for purposes of employment and ensure that a disaggregated data exist to that effect.
2. We recommend that government should partner with financial institution to develop tailed banking facilities for women with Disabilities and caregivers of children with Disabilities and enhance their capacity on disability inclusion.
3. We further recommend that access to grants and other benefit facilities by Government and other institutions should not solely focus or based on certificates from Registrar Generals department, sales made, profits and number of staff one employs, but there should be tailored made criteria designed for the types of businesses that are being operated by women with disabilities and caregivers of children with disabilities.
4. GEA, YEA and other institutions responsible for promoting informal employment should make deliberate provisions targeting women and caregivers of children with disabilities in their programmes, projects and address gender and caregiving related barriers which hinders their effective participation.
5. Capacities of women with disabilities should be built in business registrations and issues of bureaucracies should be addressed as well as discounts given in registering their businesses at the Registrar Generals Department and at the districts.

ARTICLE 28: ADEQUATE STANDARD OF LIVING AND SOCIAL PROTECTION

The general standard of living of woman and children with disability in Ghana leaves much to be desired owing to their high levels of vulnerability. There are very limited social protection programmes deliberately targeting women and children with disabilities or persons with disabilities in general Whereas they face disability related extra costs that disproportionately push them into poverty, e.g. costs of assistive devices, costs related to inaccessible housing,

environments and transportation, costs of human support, extra health care costs, loss of household income due to a family member giving up work to provide support and care to a family member with disability, etc.

Though women and children in Ghana are often charged with the duty and responsibility of managing the home, water and hygiene services do not target women and children with disabilities in anyways.

Though women with disabilities are amongst the poorest and most vulnerable population of Ghana, there is no government housing programme targeting them, in a country like Ghana where people are expected to come up with very huge sums of money to pay about twelve (12) to twenty-four (24) months of rent in advance before being able to secure basic accommodation. Unfortunately, these accommodation facilities available to the public do not also make adequate provisions to ensure accessibility and where they do, the cost is overwhelming.

Public places of convenience, market centres and other basic community facilities are not constructed with the needs of women and children with disabilities factored in.

Unfortunately, Ghana has not formalised personal assistance service to assist women and children with disabilities have easy access to various services which are mostly inaccessible.

According to the medium-term development plan, the persons with disabilities share of the district common fund has seen an increase in disbursement over some years now. For instance, the 2020 disbursement saw an increment of about 11% over that of 2019. The district assembly common fund was established in 2005 to provide economic empowerment to business initiatives of persons with disabilities at the various metropolitan, municipal and district assemblies. Unfortunately, this fund is being overburdened with numerous functions such as educational, medical, assistive devices etc.

We appreciate the establishment of the district assembly common fund and the increase in disbursement, together with some other initiatives to promote the businesses of persons with disabilities; however, there is no data available to the public and means of verification of these beneficiaries. There is no specific data on women with disabilities who have benefited from these interventions.

Anecdotal information shows that, criteria for accessing some social protection interventions are very cumbersome and do not take into consideration the peculiar needs of growing business of women with disabilities and their capacities.

Though in 2017 the persons with disability share of the common fund was increased from 2% to 3%, nominally, there was almost no increment. This is as a result of the fact that the initial 2% being given to PWDS culminated from a minimum of 7.5% of government's revenue generated. In 2017 however, the 3% allocation was now drawn out of a total of 5% of government's revenue, thereby leaving persons with disabilities with almost the same amount nominally as in the case of 2%.

RECOMMENDATIONS

1. Affirmative actions must be put in place to ensure an improvement in the standard of living for women and children with disabilities in the community to fulfil the government commitment in establishing a disability right quality index at the 2022 global disability summit.
2. It is recommended that there should be specific social protection programme that target women and children with disabilities and care givers of children with disabilities taking into account the extra costs related to disability and the intersection of gender and disability. The cost of Caregiving and personal assistants of persons with multiple impairments should be included in these government social protection interventions.
3. It is recommended that there should be disaggregated data on all social protection policies and programmes to enable persons with disabilities and their representative organisations assess progress or otherwise of the intervention for better coverage or targeting.
4. Government should deepen Collaboration with disability right organisations especially women and children organisations on all social protection programmes and interventions by involving them in the designing, implementation and monitoring.
5. We recommend that the 3% share of the district assemblies' common fund be increased to 6%

ARTICLE 29: POLITICAL PARTICIPATION:

Ghana unfortunately has not made any deliberate effort to include women with disabilities in decision making in the country.

Though the government has so far since 2013 under two different political administrations, appointed three men with disabilities as sector ministers or regional ministers, no woman with disability has ever been appointed at such high levels of decision making in the country. Though in 2021 the disability movement led by the GFD advocated that a woman with disability be appointed as one of the two deputy ministers of the Ministry of Gender, Children and Social Protection, the government refused to do so.

Women with disabilities who participated in the consultation for the development of this report indicated that they were not invited to participate in any decision making in the community, be it by the traditional leaders or the district assemblies.

Women with disabilities like their male counterparts, are mostly able to vote during national general elections as well as District level elections though there is still room for improvement.

Though government has made some efforts to appoint few persons with disabilities at the districts level, there is no deliberate effort to target women with disabilities at the districts and the country at large.

RECOMMENDATIONS

1. The government should ensure 10% quota representation of women with disabilities at the district, regional and national levels at all decision making in the country
2. There is the need to have some deliberate measures to ensure the participation of women with disability at the decision-making levels. For instance, appointment of a woman with disability as one of the deputy minister at the ministry of gender children and social protection. Additionally, the government should appoint some women with disabilities to serve as chief executive officers of some metropolitan municipal and district assemblies and to also serve on the governing boards of ministries, departments and agencies of states.

ARTICLE 31: STATISTICS AND DATA COLLECTION

Numerous programmes implemented by the government as well as various other stakeholders do not often report on the participation of women and children with disabilities to inform better decision making on their participation.

Even though the Ghana Statistical Service Population and Housing census 2021 gathered some disaggregated data on women and children with disabilities, which established that the entire disability population is 8.5% with women constituting the majority thus 8.8% (1,214,032) as compared to their male counterparts of 6.7% (884,106) Ghana still does not have adequately disaggregated data on women and children with disabilities highlighting the various categories such as little people, persons with albinism among others. This is as a result of the use of the Washington group short set of six (6) questions which focuses on eliciting the limitation in functioning other than one's actual impairment. Article 31 (2) of the CRPD requires the state to disaggregate data to enable us better to access the effective implementation of programmes and other activities for persons with disabilities, majority of programmes and activities does not seem to highlight appropriately disaggregated data for the diverse categories of persons with disabilities on one hand and women and children with disabilities on the other hand. For instance, there is no disaggregated data on children who are beneficiaries of the government's school feeding programme to enable us identify children with disabilities and their possible or potential needs with regards to dietary restrictions. It is also difficult to identify children with physical disability, albinism, and any other category of disability since they are not limited to attending schools in special education educational facilities. The lack of disaggregated data of such students in the mainstream schools' limits or hinder their access to relevant accessibility and reasonable accommodation provisions. Organisations of Persons with Disabilities are significantly limited as a result to adequately assess the impact or effect of such programmes or services on beneficiaries with disabilities.

Furthermore, in spite of the state's obligation in article 31(3) of the CRPD to disseminate all relevant data gathered on the implementation of programmes or activities for persons with disabilities, very little, if any effort is being made by the state in that regard

RECOMMENDATIONS

1. The state should ensure to carry out a disability specific population census once every ten years to allow Ghana capture fully the number of persons with disabilities as well

as their respective categories to inform the implementation of all programmes and activities in the country.

2. All entities responsible for data collection must be sensitized on the effective collection of disability disaggregated data.
3. All institutions in charge of data collection should be sensitized on their obligations to disseminate statistics and ensure their accessibility to persons with disabilities and others.

ARTICLE 33: IMPLEMENTATION AND MONITORING:

Unfortunately, women and children with disabilities have not been consciously targeted to be included in the monitoring of Ghana's implementation of the CRPD in spite of the provision in article 33(3) for civil society organizations and persons with disabilities and their representative organisations to be involved fully in the monitoring process of all programmes and activities.

Furthermore, the absence of a publicly known independent monitoring framework to guide the implementation of the CRPD also hinders any relevant attempt to monitor its implementation.

The need to ensure that women and children with disabilities who are often marginalized on various fronts to be included in the monitoring process of various programmes cannot be over emphasized. Their absence from monitoring teams often amount to the exclusion of their voices and their exclusion from adequate participation. Till date, the Government of Ghana is yet to appoint a specific state institution to be responsible for the implementation and monitoring of the CRPD. The absence of a clear-cut State institutions appointed for the implementation of the CRPD leaves organizations such as those of women and children with disabilities a major challenge with regards to advocating their representation on a specific committee responsible for monitoring the implementation of the CRPD.

RECOMMENDATIONS

1. VOWACGhana is recommending to the government of Ghana as a matter of urgency to appoint an independent institution to be responsible for the implementation of the CRPD.

2. It is further recommended that organisations of women and children with disabilities be engaged in the monitoring and implementation of the CRPD.

CONCLUSION

Though some efforts are being made in to bring to the fore matters concerning persons with disabilities to ensure their participation in the society, these efforts are not taking into consideration the intersectionality of gender and disability as well as other factors of vulnerability. This strongly has the tendency of setting women and children with disabilities as well as care givers of children with disabilities further back in a country like Ghana where men often have a comparative advantage over women and children.

It is therefore highly significant that various efforts to combat discrimination and promote equity and equality takes the issues of intersectionality of gender and disability into full consideration for an overall inclusively developed society.

REFERENCES:

Child and family welfare policy, 2014

Ghana Federation of Disability Organisations (2014): Report on violations on the rights of Women and girls with Disabilities.

Ghana Federation of Disability Organisations (research on stigma related barriers to sexual and reproductive health for Persons with Disabilities, 2019/2020).

Ghana Statistical Service Population and Housing Census 2021.

Ghana's National Gender policy, 2015

Ghana's Persons with Disability Act,

Ghana's response to the list of issue, June 12, 2024

Ghana's Social Protection policy, 2015.

Maxwell Peprah Opoku 2016, Sexual Violence Against Women with Disabilities in Ghana

Medium-Term National Development Policy Framework National Medium-Term Development Policy Framework, 2022-2025

Social protection policy

The 1992 Constitution of the Republic of Ghana.

The Children and Family Welfare policy, 2015.

The Children's Act, (Act 560, 1998).

The Persons with disabilities re-enactment bill 2024

The Persons with Disability Act, (Act 715, 2006).