



MOTHER MATTERS

The right of women with disabilities to motherhood

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INFORMATIVE PILLS

Informative pills provide brief explanations related to disability studies, accessibility for healthcare professionals, and motherhood for women with disabilities. They are based on a microlearning approach, a learning methodology that divides content into short units focused on a single topic or skill.

- RIGHTS OF PWDS -

Overprotection and the Right to Autonomy

Overprotection is a subtle but pervasive form of discrimination often experienced by people with disabilities, especially women. It stems from well-intentioned but ultimately limiting behaviors that assume individuals with disabilities are fragile, incapable, or in constant need of supervision. In the context of motherhood, this can result in significant violations of rights, autonomy, and self-determination.

Women with disabilities are frequently subjected to paternalistic attitudes from healthcare providers, family members, and social institutions.



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These attitudes may manifest as unsolicited decision-making on their behalf, discouragement from becoming parents, or denial of information and opportunities to explore reproductive options. In some cases, overprotection can escalate to forced sterilization or the removal of children—actions rooted in deeply held societal biases rather than evidence-based concerns.

The right to autonomy is a cornerstone of both the **UN Convention on the Rights of Persons with Disabilities (CRPD)** and ethical healthcare practice. This includes the right to make informed decisions, access reproductive health services, and receive the necessary support to exercise parenting responsibilities. The **presumption of capacity**—the idea that all individuals are capable of making choices unless proven otherwise—is essential in preventing overreach and undue interference.

For professionals, it is vital to recognise that “protecting” someone should never come at the cost of their rights. Overprotection can lead to dependence, loss of confidence, and internalised stigma. Instead, professionals should adopt a **supportive approach**—one that promotes informed decision-making, offers reasonable accommodations, and respects personal choices without judgment.

Empowering women with disabilities in their motherhood journey means building trusting relationships, fostering independence, and creating environments where support enhances autonomy rather than undermines it. Respect, not restriction, must guide professional practice.

