



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.

- WELL BEING -

INDEPENDENT LIFE



The concept of independent living originates from the *Independent Living Movement*, which began in Berkeley in 1962 as a response to the medical model of disability that prevailed until the mid-20th century. This movement advocates for the right of disabled people to make their own decisions and participate fully in society. Through *Independent Living Centres* in countries such as the United States, England, and Norway, personal autonomy has been promoted, with spaces managed by and for individuals with disabilities, providing support and resources for a self-determined life.



For women with disabilities (WwD), **independent living** involves overcoming additional barriers imposed by patriarchal structures. In many societies, these women face overprotection, infantilisation, and restrictions on decision-making regarding their own bodies and futures. Research by Bezmez and Porter (2022) has shown how care systems reinforce dependency rather than empowering WwD to take control of their lives.

During the pandemic, according to Sisters of Frida (2021), many experienced a loss of autonomy due to mobility restrictions and reduced access to essential support services.

A critical aspect of independent living is the right to motherhood. Motherhood is central to the identity of many women, yet WwD are often denied this right through forced sterilisation or the assumption that they are unfit to be mothers. Shpigelman and Argi (2024) highlight how the experience of motherhood can become a source of resilience and identity affirmation for these women, despite the challenges imposed by society, such as the access to personal assistance and institutional prejudice, which remain significant barriers.

The exercise of motherhood and sexuality for WwD remains a topic surrounded by stigma and prejudice. They are often perceived as asexual or incapable of Romantic relationships and raising children, which limits their autonomy and emotional well-being. Recent studies indicate that accessible sex education and inclusive gynecological services are essential to ensuring their reproductive rights.

Self-determination in these areas is key to strengthening their identity and autonomy, enabling them to live free from external impositions and arbitrary restrictions.

Independent living is not just about living alone but about having the right support to make decisions about one's body, home, and future. Midttun, Gjermestad, and Lid (2024) emphasise that the transition to independent living requires a combination of support networks, inclusive policies, and cultural shifts to ensure that WwD can fully exercise their rights. It is crucial to continue amplifying their voices and experiences, promoting societies where independence is not a privilege but a guaranteed right.

