Global Dialogue on Prenatal Testing, Abortion and Disability

Hi everybody, it is a pleasure to be with you remotely and I thank CREA for the opportunity, in particular because for us Brazilians it is really very important to be connected transnationally. In this very somber and difficult moment of Brazilian politics, as depending on the outcome of the forthcoming elections, this may have devastating effects on democracy, human rights broadly speaking, and in particular gender and abortion politics. We will certainly need your attention and solidarity in the near future.

My participation in this video aims at providing a brief introduction to the insights and ideas that will be shared by Deborah Denise and Adriana Diaz next in the video. And I will do so by recalling that in the Brazilian abortion debate, the complexities that lurk at the intersection between the abortion rights camp or conversation and the disability rights conversation have erupted strongly in two occasions. First in the mid-2000s when the proposition for abortion in the case of anencephaly was tabled at the Supreme Court.

And more recently and with more intensity in 2016 when the Zika crisis reunited the abortion rights debate in Brazil. In both occasions, Anice, who was a leading actor in both processes, was in close connection with the disability movement and in particular with women that participate in that movement. But this did not apply to the wider feminist abortion rights movement.

And this caveat has decidedly compromised our ability to articulate the complexity and to be able to respond in a more consistent manner to this complexity and in particular to the accusation of eugenics that aroused quite quickly when the proposition of allowing abortion in the case of Zika and anencephaly was made public. It was very distressing also to hear in both occasions feminist voices, voices also using the eugenic argument as this told us about the lack of proper reflection and information. And most principally our confusion, in my view, has carried borders to the mills of the entire abortion camp.

And I'm bringing these stories because I think they illustrate quite compellingly why a substantive, in-depth conversation between the abortion rights movement and the disability rights movement is so needed, so urgent and so critical at this point in time. Thank you very much. Hi, I'm Deborah Diniz and it's a pleasure to have this moment to talk with you here.

As a Brazilian feminist and a woman with disability, working with disability and feminists is part of my life. I'm going to speak in Portuguese exactly because of that. There are a lot of barriers to women with disability to be in a global place like that.

Brazil was the epicenter of the global Zika epidemic. Zika is a disease that can be transmitted by sexual means or by mosquitoes and that may or may not, in a pregnant woman, lead to malformation in the fetus. When Zika arrived in Brazil, we immediately put ourselves at the center of national debates on health policies, saying that this is not just an epidemic of mosquitoes and diseases.

We have to talk about women and children. Women and their children with disabilities. The strategy at that moment, which we set up and was a possible strategy in Brazilian society,

was an action of the Brazilian Supreme Court, in which it was broad in protection of women's and girls' rights at the reproductive age.

From access to information, the possibility of interruption of gestation if the woman was in mental suffering due to the epidemic, even social rights to be protected if she had a child affected by Zika. At that moment, a very intense discussion was opened in Brazilian society about why not discuss abortion in all situations and why only in Zika. The answer is twofold.

The first is because we had an epidemic situation, and an epidemic situation asks for immediate and quick answers to the picture that was set. And the second is that it was the epidemic situation that allowed us to start the second moment of this story, which is the broad action to decriminalize abortion in Brazil, which is now being discussed in the Brazilian Supreme Court. What this shows us is that the strategies are sensitive to what is possible to do in each moment of history, the forces that we have on our side, and many times they are not, they are simply a reproduction of how we think advocacy or political litigation should be, but it is what is possible to do in each moment of history.

Putting together the movement of deficiency and feminism, especially the issue of abortion, was part of Anis' story in the last 15 years. Since we presented, for the first time, the first action that came to a constitutional court in Latin America and the Caribbean, which was on anencephaly. This was in 2003.

And at that moment, the question that was asked, which was why we would not authorize a woman to interrupt a gestation if the fetus would not survive the birth, the question of deficiency, the question of people living with deficiency, and how the feminist struggle should not send negative messages to people with deficiency, was raised in Brazil. So I would say that in these 15 years, we not only mutually take care of our movements, but we also learn to develop a common language between the two groups. This was so strong that in the recent public hearings held by the Supreme Court in Brazil in August 2018, in the first opening session, in which 15 specialists spoke, we were two women with deficiency, defending the right of women to interrupt gestation, but speaking as women with deficiency, and not about women with deficiency.

We, women with deficiency, also have abortions. We also hope for family planning policies that are adequate to our various bodily realities. In most societies, a discriminatory view is persistent that people with deficiency do not have needs or rights related to the freedom of sexuality.

We are, historically, the population of women sterilized compulsorily. We are the ones who have difficulty adopting, and we are the ones who have the most fragile access to sexual and reproductive health policies. There is no comprehensive sexual education in Brazilian schools.

So imagine how it is for a blind person, or for a deaf person, to find access to any information about sexuality or sexual and reproductive rights. Equally serious is our inability to recognize that women with deficiency are the main victims of sexual violence at home, at school, and on the street. It is unfair to unprotect women with deficiency and their reproductive health, and then to threaten them with jail if they do not want or cannot continue with gestation.

Article 23 of the Convention on People with Deficiency determines that the right of people with deficiency to decide on the number and spacing of children on family planning and on the necessary means to exercise these rights. We need to have the right to abortion as part of deciding on our life projects, on whether we have the means to perform other care relationships, and whether we have the necessary support networks for the maternity project. The right to abortion is a fundamental part of our understanding of women who should not be protected by the State, but should be recognized as integral human beings with the right to a dignified and citizen life.

The only legitimate way to reduce the number of abortions in cases where genetic markers for deficiency are detected is to guarantee the full protection of the rights of people who live with deficiency. Only in this way would it be possible to ensure that pregnant women do not make their decisions based on the effective fear of being abandoned by the State, by the community and by the family, on the solitary care of children with singular needs. When women decide, they take into account the deeply intimate conditions of their subsistence and their families, including the other children who already depend on their care.

There is no individual decision, marked by these questions, without being imputed as a mark of eugenics. Eugenics, Minister, is to deny us equality of conditions and participation in social life, including by means of reproduction. Eugenics, Minister Barroso, is for the State to manage our lives, sterilize us, decide our fertility.

It is not eugenics to guarantee us and guarantee any woman the right to decide for whatever reason. Women with deficiency affirm here and also fight for the decriminalization of abortion in Brazil. Thank you very much.