

# Inquiry into the involuntary or coerced sterilisation of people with disabilities in Australia

Tabled  
29/3

## Key points

1. People living disability have the right to services that support full participation in society with active participation in decisions affecting their lives. People with disability have the right to realise their capacity for physical, social, emotional, sexual and intellectual development.
2. Sterilisation is a medical procedure performed with the intention of permanently removing a person's capacity to reproduce. Sterilisation methods, which include removal of the uterus (hysterectomy), also remove the capacity for menstruation.
3. Rates of sterilisation in the general population in Australia are decreasing, most likely due to increasing access to the highly effective long-acting reversible methods of contraception (LARCs). Some of the LARC methods, notably the hormone-releasing intrauterine system, are also used to reduce menstrual blood loss.
4. Girls and women with disabilities have the same rights as other women to choose their method of contraception and to determine if they wish to menstruate or not. Involuntary or coerced sterilisation, and the provision of other contraceptive methods including those which reduce menstruation, violate the basic human rights of girls and women with disabilities to make choices about their own bodies and reproduction.
5. Many people who have an intellectual disability can make decisions about their reproductive and sexual health. Some people with disabilities need support to make decisions. If, after everything has been done to increase the person's capacity to make a decision, a substitute decision maker is needed, the person with disability should be informed of what is going to happen and show no opposition.

*The following recommendations promote the self-determination of people with disabilities:*

6. Increase the knowledge and skills of medical and health professionals to provide support, information and counselling about reproductive and sexual health issues for people with disability, in order to facilitate, where possible, individual decision-making.
7. Support Family Planning organisations in states and territories to conduct education programs in reproductive and sexual health for general practitioners with a comprehensive review of contraceptive options and a case-study approach to the management of reproductive and sexual health issues for people with disability.
8. Support the development of resources for clinicians and health professionals. Resources should include plain English fact sheets and brochures to assist in communicating effectively with a person with disability.
9. Support the development of an expanded range of resources for people with disability that align with clinician resources.



10. Support the development of parent and carer resources that align with the clinician and plain English resources.
11. Support a cross-government response to provide people with disability with ongoing education about reproductive and sexual health, relationships and sexuality appropriate for the stage of life and experience.
12. Support organisations such as Family Planning state and territory based services in the coordination of parent forums as a positive way to provide accurate information on reproductive and sexual health issues. Parents have a right to the best available information that will enable them to support and uphold the rights of their family member.
13. Ensure the National Disability Scheme (NDIS) allows and supports a person with disability the opportunity to access services around reproductive and sexual health.
14. Support the strengthening of Government policy that guides services to uphold the rights of people with disability to access quality reproductive and sexual health services. This can also be done through staff training on how to respond to reproductive and sexual health issues.

### Witness biographies

**Dr. Deborah Bateson** is the Medical Director of Family Planning NSW and has worked in this area of sexual and reproductive health for over 15 years. She provides clinical leadership across all of our Family Planning NSW clinical services. She is responsible for developing and delivering education and training to a wide variety of health professionals. Deborah is the co-author of the latest Australian clinical practice handbooks on Contraception and Reproductive and Sexual Health, and is actively engaged in research and publishes widely on her area of expertise.

**Lauren Hamilton** is a psychologist who has worked with the Disability and Sexuality Service of Family Planning Victoria (FPV) for four and a half years and has recently completed the final components of the Doctor of Psychology (Health) at Deakin University. In her role at FPV, Lauren works directly with people with disabilities regarding their sexual and reproductive health knowledge; supports clinic staff in working with people with disabilities; and presents on disability and sexuality in a variety of settings including medical and nursing training courses conducted by FPV, workshops conducted by other organizations such as PapScreen Victoria, and at the postgraduate level for University of Melbourne.

**Jane Chivers** is a social worker and educator who has supported people with intellectual disability and their families for over 25 years. She recently co-authored a chapter in an Australian text on providing sexuality education for young people with disability and managed the development of several health education resources. She has also delivered papers at international reproductive and sexual health conferences promoting rights of people with disability to safe positive and healthy relationships.

**Rob Hardy** is a Senior Health Promotion Officer and leads the disability program at Family Planning NSW. He develops resources and delivers training to disability workers and parents and carers on how to uphold the reproductive and sexual rights of people with disability. A qualified occupational therapist, he has 20 years' experience working in the areas of disability and reproductive and sexual health. Rob is a member of the Sexual Health and Family Planning Australia Disability Special Interest Group.