Having It All: The post feminism myth

By Ruby Grant

NB: This article was first published in Betty Mag, Issue 1, Summer 2012, and is submitted as a contribution to the Senate Inquiry into the involuntary or coerced sterilisation of people with disabilities in Australia.

www.bettymag hobart.com
www.facebook.com/bettymag
If I hear one more person say that ‘feminism is dead’, or the classic, “I’m not a feminist, but…,’ I think I may spontaneously combust. Maybe from a privileged, Western, upper-middleclass, tertiary-educated, urban, decaf-organic-fair-trade-soy-latte-sipping perspective, women are in a comfortable position and the earlier feminist movements have done their job. Western women ‘have it all.’ We have burned our bras, replaced them with firm breast implants that we paid for with our own hard earned money, and been liberated by the invention of the washing machine, the pill, the stiletto heel and the Family Law Act. But to say that women have it all is a gross-generalization that only factors in [the experience of} white, middle-class, able-bodied, educated, heterosexual women.

Rather than fobbing feminism off as a retro ideology, we need to think about how feminism can still benefit twenty-first century women. In order to do so, we must dispel discouraging myths that feminism is a man-hating tirade that encourages women to live in separatist communes in forests and taste their own menstrual blood as an articulation of liberation!

Feminism is inclusive; recognising the rights of women in all facets of life. This includes not just individual women, but their families, lovers, children and friends, regardless of sex, sexuality or gender. Feminism, for me, is as relevant to the men in my life as it is to the women, as I fail to see how anyone who has ever had a close relationship with a woman could not identify with its values and aims.

In rediscovering the importance of feminism in contemporary Australian Society, we must ask who is in most need of advancement and assistance in terms of gender equality? In my research I have found that women with disabilities suffer considerably in a number of ways, due to their biological sex and gender. This can be observed in the topical issue of sterilisation of women with disabilities.

In Australia, women and girls as young as eight can be lawfully surgically ‘de-sexed’ to supposedly improve their quality of life. This takes the form of irreversible hysterectomies performed by doctors once a family law court or guardianship board has approved the procedure as in the young girl’s ‘best interests’.

Reasons given for sterilising these young women include preventing unwanted pregnancy, and eliminating the ‘unnecessary’ pain and ‘extra burden’ of menstruation for them and their carers. It is true that women with disabilities are disproportionately more likely to be victims of sexual violence, assault and rape than any other demographic. However, in a similar vein of victim-blaming as the Slutwalk phenomenon, why should the bodies of women and girls with disabilities be surgically altered to reduce the risk of rape and unwanted pregnancy when our culture should teach the basic social etiquette lesson of ‘don’t rape disabled women and children’?
A menstruating and possibly sexually active young woman with a disability is only a conceptual threat and a burden to a culture that does not invest adequate resources and effort into creating a better understanding of women with disabilities, their bodies, their needs and their desires. The non-government organisation, Women With Disabilities Australia (WWDA) is a locally-based advocacy body working towards the betterment of lives of women with disabilities. Sterilisation is an issue high on the agenda of WWDA as they see it as a direct breach of human reproductive rights, a form of gendered harm and argue that it is a form of torture.

I mention this issue in light of discussion of post-feminism, to illustrate how clearly not all women ‘have it all’. In fact, some have nothing at all. No rights, No ability or means to argue about their lack of rights. No ability to give consent. No bodily integrity. Before we make generalisations about ‘how women have it all’ and how they shouldn’t moan about gender inequality, we must be aware of issues like state sanctioned sterilisation of women with disabilities and the issues underpinning assumptions, stereotypes and discourses that are fundamentally sexist. We must ask what feminism can achieve for women with disabilities and what it is currently doing for them. When you reflect upon this, ask yourself, ‘Do I want to live in a society that de-sexes human beings according to sexist, ablest agendas?”. If the answer is no, then feminism is not dead.

Ruby Grant