

Positive developments in service responses to women with disabilities experiencing violence

This section looks at services and initiatives that are addressing the challenge of developing family violence service responses that are inclusive of the experience of women with disabilities in Victoria and beyond, including overseas. Whilst each of them are indicative of either organisational or regional attempts to establish cross-sector partnerships between the family violence and disability sectors, a systemic, whole-of-government commitment to cross-sector collaboration between these two sectors is yet to emerge. To that extent, it cannot be said that Victoria is matching in practice what it promotes as 'inclusive practice' in the Victorian Charter. There is a great deal of relationship, capacity and systems building to be further developed in order for the policy of inclusive practice to be realised – and sustained – in practice.

8.1 Positive developments in Victoria

The representatives of the four case examples were uncomfortable with describing the progress they have made in relation to violence against women with disabilities as 'best practice'. Although positive progress had been made, those involved were able to identify many ways in which they could further improve their practice/service. It was thought that a more accurate description of their practice was that is was moving in a 'positive direction' and that the initiatives were 'engaging with the challenge'.

The cases demonstrate – in different ways – recognition of the needs of women with disabilities experiencing family violence, a consideration of the barriers experienced by these women, and an understanding of the issues of equitable access. Two examples are drawn from developments in crisis refuges; one concerning the establishment of a dedicated disability unit and the other illustrating cross-sector collaboration between local mental health and domestic violence services. The third illustrates the development of accessible communication and information for women with disabilities (and those who support them) via a website. The fourth is concerned with regional planning and policy development regarding women with disabilities who are experiencing family violence through the work of an integrated family violence coordinator.

Positive developments in service delivery: Molly's House

Molly's House, located in the Western Metropolitan Region of Victoria, provides crisis accommodation and support for women and children of all abilities escaping family violence. Molly's House established an accessible unit in the early 2000s and began receiving direct referrals from regional disability agencies following its promotion.

Molly's' disability unit is a large, autonomous unit that provides independent (that is, not communal) living for a woman with a disability and her children. Molly's House only provides a 9 to 5 service but has an emergency after hours paging service. Molly's House can also accommodate some women with disabilities in its communal refuge if that is the most appropriate option for them.

Features of positive developments at Molly's House

There are a number of elements that have contributed to the disability unit becoming such a positive initiative.

Affirmative access policies

Molly's House has always been proactive in responding to the needs of marginalised women who are experiencing family violence. This has included women with disabilities as well as women from non-English backgrounds, women with mental health issues, and women with drug and alcohol issues, particularly methadone dependent women. As such, affirmative access policies are in place in relation to prioritising these women for its crisis accommodation.

Diverse staff expertise

Molly's House's manager has consistently looked for a diversity of skills within workers when employing staff. House policy ensures there are two designated staff positions within the service for women from non-English speaking backgrounds. In addition, there is currently expertise in the area of disability and mental health. Thus, the groups of women Molly's House prioritises for service are supported by appropriately skilled staff. This greatly strengthens Molly's House's model of service provision for women with disabilities from diverse cultural backgrounds.

Staff expertise in disability

Having expertise in disability within the staff team ensures on-site assistance with navigating how to access support services on behalf of women with disabilities. It has also ensured that the 'right' questions are being asked at the point of referral so that the service can prepare how best to support women and children with disabilities. These additional questions are now being formalised as part of the accreditation process.

Disability data collection

Molly's House has improved its data on women with disabilities whose referrals the service is not able to accept. It is important to be clear about what the issues are and why the service has not been able to a provide refuge/crisis accommodation. Molly's also tries to provide clear feedback to the referring agency about why it is that a woman is not suitable for the disability unit.

Supporting older women with disabilities

Molly's House has developed the capacity and expertise to support two distinct groups of older women with disabilities: firstly, older women with disabilities experiencing violence from their adult children, often sons; secondly, older women with adult sons with disabilities (with both equally in need of refuge). Both of these groups of women find it hard to seek assistance for the violence, although for different reasons. The first find it difficult to speak up about sons as perpetrators; the second may not seek assistance to escape the violence if it means being separated from sons. Most refuges and respite services do not accept adult sons, so Molly's House provides a significant service for women in this situation.

Gendered approach to supporting women with disabilities

It is new territory for most of the women who use the disability unit to be involved with a service that has a gendered focus, a service that supports women to think about their rights as women. Women with disabilities and women who have children with disabilities who are experiencing family violence need to have their experience validated in the context of how family violence impacts on the lives of other women. The role of the family violence worker is to assist these women to place their experience within a context and the shared experience of other women – to say 'you are not the only one that this is happening to; family violence is a phenomenon and happens to many women'.

Consumer participation group

In 2007 Molly's House set up a consumer participation group comprised of women with disabilities who have used the service in the past. Feedback from the group is valuable for staff to reflect on current practice, particularly as it comes from women when they are more settled (that is, not in crisis), with time to reflect on their own personal outcomes, and are less likely to feel they owe the service something.

Challenges in sustaining and improving the disability unit

There are a number of challenges to consider in relation to the future sustainability of the disability unit and in realising a number of improvements to it.

Resources

- Need for money for the building itself, plus equipment, especially regarding access and equipment relating to supporting women with vision, hearing and mobility impairments.
- Tension on resource allocation between the crisis services that Molly's House is funded to deliver and the community development activities that could enhance service outcomes. For example, Molly's House has had to work hard to resist the pressure it receives at times to accept a generalist referral for the disability unit. At times there is a tension for Molly's between ensuring the unit's availability and having the numbers to meet service targets under its DHS obligations.

Systems

- Difficult to maintain the regional network of services and partnerships developed since the funded period ended. There is no capacity within Molly's House's ongoing budget to designated resources for the purpose of maintaining regional networks.
- Tension between disability support role and family violence support role and the intensive nature of the work involved, particularly when linking women into services or when negotiating the transfer of services between regions.

Attitudes and cultural change

Molly's House would like to feed its learnings into the DV Vic practice forums/network to contribute to the exploration of how a cross sector response to women with disabilities is developed and make it a significant part of a whole of sector integrated family violence response.

Beyond the scope of Molly's House

- Molly's House has identified the need for an increased capacity to engage in complex case management. Women with disabilities often present with high support needs in relation to counselling, re-establishing networks and community, ensuring that services are in place on the ground when a woman moves into a new area.
- Molly's House faces difficulties in arranging the longer term housing needs of a woman with a disability given the crisis in housing options where there is insufficient supply of disability-accessible, transitional or alternative housing options. This raises the question of how to get disability agencies to prioritise the needs of these women who have to move from region to region chasing safe housing. Further, Molly's House is not in a position to provide a service to women with very high attendant carer support needs as it does not have access to the resources to 'buy in' the necessary supports. This means that there is no specialist family violence crisis accommodation service accessible for these women with disabilities. This is of grave concern.

Positive developments in cross sector collaboration: Woorarra Women's Refuge

Woorarra Women's Refuge is located in Melbourne's Eastern Metropolitan Region. From 1997, a collaborative partnership evolved between Chandler House Community Mental Health Clinic and Woorarra Domestic Violence Service Inc. (which runs the refuge) with a view to improving outcomes for women with mental health issues who are experiencing family violence.

Positive features of the cross sectoral collaboration

The partnership was shaped by a number of developments that evolved over the years. As it will become clear, these developments were the result of short-term, project-based funding initiatives.

Disability audit and development of Disability Action Plan

In 1997, Women With Disabilities Australia (WWDA) investigated the barriers that women with disabilities experience when trying to access women's refuges. As part of this project, Woorarra was chosen to be audited against accessibility guidelines and to develop a disability action plan. The outcome of this was the *More Than Just a Ramp* report (see WWDA 2007d), which provides an information guide that is transferable not only to other refuges but other services.

Development of protocols between domestic violence and mental health services

In the process of undertaking the disability audit and developing the disability action plan, Woorarra became involved in a second region-wide project to develop protocols between domestic violence and mental health services called *Tailoring Services to meet the Needs of Women*. This led to the Woorarra and Chandler House partnership. Where staff at Woorarra had difficulty accessing mental health services for refuge residents, Chandler House (the nearest Community Mental Health Clinic) was becoming increasingly aware that family violence was an issue for many of its clients. The protocols developed by the Woorarra and Chandler House partnership focused on consultation and strategies to assist women to access the relevant services they required from both Woorarra and Chandler House.

Local cross-sector staff development

A program of cross-sector staff development initiatives was implemented to establish a common language and understanding about a range of issues, including security and safety, terminology, diagnosis, medication and its effects, and the impact of family violence on women with mental health issues. The program was delivered at a local level by local services and provided a basis for further protocols and referral guidelines to be developed, involving agreement around primary and secondary consultation and a process for debriefing. As a result of this, a mental health worker joined Woorarra's Committee of Management.

Domestic violence outreach work for women with mental health issues

By 2001, case managers at Chandler House reported an increase in the number of mental health clients who identified domestic violence as a major contributor to their emotional trauma. A working party at Chandler House sought to establish a domestic violence outreach service but was hampered by resource restraints. Meanwhile, Woorarra Inc. had established a community outreach service for the Yarra Ranges Shire (a mixed rural, suburban and `interface' shire) and made this accessible to clients of the mental health service.

Review process and further staff development

Throughout 2003/2004, the Eastern Metropolitan Region's mental health and family violence services once again re-committed to their collaborative work with a review of existing protocols between the Eastern Region Mental Health Services and Linkages (the regional domestic violence network).

Titled the *Building Partnerships* project, a number of further initiatives were developed, including: a workshop for mental health clinicians about 'working with women who have been abused'; dissemination of brochures, posters and pamphlets in the Eastern Mental Health Adult and Child and Adolescent Mental Health Programs about family violence and where to get help; information on the training offered by Eastern Family Violence Network distributed throughout all mental health programs; collection of data between services, recording contacts, referrals and outcomes, initiated; and regular meetings between Woorarra's manager and Chandler House's Eastern Health Women's Mental Health Consultant initiated to monitor the progress of the project.

As a result of these meetings, a small SAAP Promoting Excellence grant was secured with the purpose of undertaking a six-month project, *Crossing the Chasm*. This established a process for pre and post evaluations of clinicians' knowledge and skills in relation to family violence; supported the ongoing collection of data, and released a family violence worker from Woorarra for a half a day per week to work with the mental health services to improve service based responses to family violence. The goal of the project was to develop a working model of collaboration between mental health and family violence services at a local level that was transferable. This project won an industry service partnership award in 2004.

Future challenges

There are several factors exerting considerable pressure on the capacity of Woorarra and Chandler House to sustain the level of cross-sector collaboration that they reached by the mid-2000s. As previously observed, the developments described here have been the product of short-term, project-based initiatives. They have drawn heavily on the existing resources of the participating mental health and family violence services (with the exception of the 2004 SAAP small grant) thereby placing strain on participating organisations to sustain the

momentum. In addition, the original staff of Woorarra and Chandler House who drove the partnerships have moved on. Woorarra's management is committed to using the current process of accreditation to review how its existing resources can be creatively used to provide a service that is responsive to the needs of women and children with disabilities. However, its primary obligation is to fulfil its DHS service agreement obligations, which means that without ongoing additional resources, its capacity to sustain community development projects aimed at increasing collaboration remains in doubt.

Positive developments in information provision: Domestic Violence Resource Centre Victoria

The Domestic Violence Resource Centre Victoria (DVRCV) is a Victorian statewide service based in Melbourne. It aims to reduce and prevent family violence by providing education to improve service and policy responses, and by assisting people who have experienced abuse. It provides information to specialist support services in Victoria and Australia, professional training courses (including in disability and family violence), a library, an extensive publications list (including a quarterly newsletter, discussion papers, books and other publications), and commentary on policy initiatives and law reform. DVRCV's extensive website provides much of this information on-line.

Positive developments relating to DVRCV's website

In 2005, DVRCV committed to redeveloping their domain website to improve accessibility for people with disabilities. This benefited through – and was made possible by – the following developments:

Involvement in WWDA's 'More than Just a Ramp' project

A working party was formed in Victoria called Violence Against Women with Disabilities Action (VAWDA) to drive the component of the federally funded WWDA project that looked at a Victorian refuge (Woorarra) to audit for disability access. DVRCV had a representative on the working group who requested that DVRCV be named in the funding submission as the auspice body for the implementation of the project. Application to DHS for funding was successful and the Violence Against Women with Disabilities project began in 2002. A number of initiatives within DVRCV have evolved as a result, including the redevelopment of the website, the rewriting of pamphlets to make them more accessible to women with diverse disabilities, an audit of all training programs with respect to disability issues, and the publication of a discussion paper on violence-induced disability (see DVRCV 2006).

DVRCV's Strategic Plan

As part of DVRCV's organisational strategic plan, it committed to increasing the accessibility of its publications, including its website, to people with disabilities, as a priority. The DVRCV publications coordinator, who was also the web manager, completed a training course on accessible communication run by Vision Australia with a view to undertaking the redevelopment of the website in-house. The web manager also consulted with Accessible Information Solutions, a consultancy service provided by the Vision Australia National Information Library Service.

Understanding of human rights and legislative issues concerning access

To improve the accessibility of the DVRCV website, the organisation needed to understand its obligations to people with disabilities. This required an understanding of the Disability Discrimination Act (Commonwealth) and following the advice of the Human Rights and Equal Opportunity Commission's Web Content Accessibility Guidelines, which have been issued to help services ensure their websites are accessible (including details on the design and style elements).

Understanding of accessibility issues for people with diverse disabilities In order to increase the readership of DVRCV's website material, the organisation learnt what some of the accessibility issues with websites are. Many people are unable to see, hear, move or process some types of information on websites. For example, some cannot use a mouse to click links on a webpage and instead use the keyboard or another device to select links. Some people use screen readers with speech or Braille outputs to read the text on the website. Some people need to be able to increase or decrease the font size or change the colours on a webpage to enable them to read it.

Stories from women with disabilities who have experienced violence

A popular section of the DVRCV website is the 'stories' section where people can read stories from survivors of violence and their advice for others. When DVRCV re-launched its site, it had two stories of women with disabilities. An application for funding enabled DVRCV to undertake the collection of more stories from women with disabilities who had experienced family violence in 2007. In 2008, these interviews were drawn on to produce a web-guide for women with disabilities experiencing family violence (*Getting Free From Abuse: A Guide for Women with Disabilities*). The guide has been designed so that it is an integral page in the overall website with careful attention to the graphic design to ensure accessibility. The main text of the web-page is also available in Arabic and Vietnamese and has been designed to be interactive with a number of links to other pages on the DVRCV site and women's stories.

Future challenges

The re-development of DVRCV's website has depended on project-based funding and on ensuring that the Publication Coordinator/Web Manager's work plan delegates regular tasks to other team members. As with all core activities of a community organisation, long-term sustainability can only be assured if there is an ongoing source of funding.

Considering the potential for this web-page on disability and family violence to be such a useful resource for both women with disabilities who have experienced violence and services seeking information and further understanding about disability and family violence, this funding issue is of great concern.

Positive Developments in Regional Planning and Policy Development: Barwon South West Integrated Family Violence Sub-regional committees

The focus of this case example is the organisational and structural processes that were put in place in developing an integrated family violence service response in this large region.

As part of the leadership and governance structures established to steer the Victorian Government's reform of family violence responses, Integrated Family Violence Committees have been formed at regional level with links to the Regional Indigenous Family Violence Action Groups. They are potentially important key agents for change within each region providing leadership in service integration and planning. The Barwon South West Regional Integrated Family Violence Co-ordinator position is auspiced by Community Connections

(Vic) Ltd. The Coordinator's role is to encourage a commitment from relevant local agencies and community representatives to participate in the region's committees and to progress the family violence reform agenda.

Formation of two sub-regional committees

The 'Barwon South West' region is a large geographical region reaching south and west from Geelong to the South Australian border and including the southern Grampians area. Historically, this region has operated as two distinct sub-regions with one referred to as Barwon and the other as the South West. The creation of two sub-regional committees was therefore an acknowledgement of this historical and geographical division and ensures the development of integrated family violence response systems are grounded in local (or rather, sub-regional) knowledge and practice.

The Family Violence Partnership Management Group

In place of a sole regional executive or chair, Barwon South West has a small steering group called the Family Violence Partnership Management Group. The steering group includes representation from different parts of the community and agencies whose members might occupy regional or sub-regional roles. The Steering group guides the work of the Family Violence Coordinator and thus the structural processes to support work plans.

DHS guidelines for Integrated Family Violence

DHS guidelines for Integrated Family Violence Coordination initiated the inclusion of diverse groups, including developing strong links with and representation of people with disabilities. This has provided leadership and encouragement for the Coordinator to seek the views of women with disabilities in the work of the regional sub-committees.

Representing the views of women with disabilities experiencing violence

Central to raising awareness about the issues facing women with disabilities experiencing violence has been the need to encourage the participation of disability networks in the family violence reform agenda. Given the lack of networking between the disability and family violence sectors, the Coordinator sought VWDN's Executive Officer's assistance in identifying disability networks and establishing a joint meeting involving two of the region's women's networks for women with disabilities, VWDN and the Barwon South West Coordinator. As a result of this networking and being able to draw on the expertise of VWDN, women with disabilities are now represented on both sub-regional committees.

Open forum on family violence

Twice a year, the Barwon South West Integrated Family Violence Coordinator organises an open forum which all services in the region are encouraged to attend. In February 2008, the forum focussed on the Partnerships for Family Violence Risk Assessment and Management. This provided an opportunity for key family violence services to present information on what they provide and how best to refer to their services. Workers from disability agencies expressed interest in the forum, although work loads prohibited attendance for some. The significance of the forum's focus on family violence risk assessment was in the opportunity to raise awareness amongst disability workers about the increased vulnerabilities of women with disabilities to family violence.

Encouragement of learning and training programs with a Disability Family Violence Learning Program

One of the strengths of the integrated coordination process is that it provides the opportunity for services and individual representatives of services to think about

partnerships and to exchange expertise across sectors. Two learning and training programs exemplify the potential for the work of integrated coordination:

- The two sub-regional committees will be participating in the Disability Services Division's new learning program for workers in the disability service and family violence sectors (called Women with a Disability Family Violence Learning Program; see previous section on training) in July 2008.
- DVRCV is about to deliver a 'train the trainer' course to twelve or more local workers who will be able to deliver a one day basic training on family violence. The region will potentially have trainers from different sectors involved in responding to family violence, including disability workers.

Meeting venues with disability access

An important step toward practically – and symbolically – ensuring accessibility for people with disabilities has been the commitment to holding all meetings in venues with disability access.

Future challenges

A key challenge is for the auspice agency to be able to continue to support the Barwon South West Integrated Family Violence Coordination role within its budget.

8.2 Positive developments in other countries

In this section, we provide a brief snapshot of positive developments in jurisdictions beyond Victoria: three from the UK; two each from Canada, the US and NSW; and one from Queensland. In the projects concerned with service delivery issues, there is particular emphasis on developing cross-sector and cross-agency links; with those involved in research, there is particular emphasis on assessing access issues in relation to supporting women with disabilities.

Leeds Inter-Agency Project, UK

Established in 1990, the Leeds Inter-Agency Project (LIAP) is recognised as a leader in working to improve the safety of women and children experiencing family violence through multi-agency collaboration. In recent years, LIAP has worked with women with disabilities, aiming to improve the capacity of services to respond to women with disabilities experiencing family violence. LIAP is involved in delivering education programs to women with disabilities; providing one-to-one support work to women with disabilities experiencing violence; producing and disseminating accessible information (such as the *Disabled women and Domestic Violence: Help is Available* pamphlet); organising talks and networking events for women with disabilities, and has produced a video (called *Disbelief*) and training pack for services. The pamphlet provides access information about each of the agencies and hostels listed in it. **Website:** www.liap.org.uk

Disabled Women and Domestic Violence: Making the Links Project, Women's Aid Federation, UK

This is a national project developed by Women's Aid (a national domestic violence charity which coordinates and supports a network of local domestic violence projects throughout England), working with a research team from the University of Bristol (the Violence Against Women Research Group) and the University of Warwick (the Centre for the Study of Safety and Well-being). It aims to build knowledge about the experience of women with disabilities living with violence and what services they need; identify the gaps in current disability and domestic violence service responses; identify and examine examples of best practice and policy, and make recommendations for policy and service development to meet the identified needs. The research involves conducting a national survey of domestic violence services (and provisions for responding to women with disabilities), a national survey of organisations for people with disabilities (to explore the level of awareness about abuse issues and existing provisions for those who have been abused), and conduct interviews. An interim report was released in October 2007.

Website: www.bristol.ac.uk/sps/downloads....

Greater London Domestic Violence Mental Health Project, UK

The Greater London Domestic Violence Project began working on mental health in 2003 after identifying the link between women's experiences of domestic violence and mental distress, and gaps in services for these women. The project explored service access issues regarding women experiencing domestic violence and mental distress, identified good practice in service provision for women, supported networking and information sharing across the two sectors of mental health and domestic violence, and developed an action plan to address existing gaps in service provision including a set of minimum standards for inclusive service provision, the 'toolkit', and delivered training to workers in the domestic violence and mental health sectors. The toolkit, titled, Sane Responses: Good practice quidelines for domestic violence and mental health services, was published in 2008. It aims to promote understanding and good practice of frontline workers dealing with the two issues of domestic violence and mental health by providing easily-accessible information, guidelines for good practice, and details of existing services across London. As a source of reference, it is intended for workers in the mental health or domestic violence sectors and their supervisors or managers but is also suitable for others working with women experiencing domestic violence or mental distress, or with perpetrators. Website: www.gldvp.org.uk

Disability Access Project, Woman Abuse Council of Toronto,

Canada

The Woman Abuse Council of Toronto (WACT) was launched in 1991. It is a policy development and planning body, made up of member organisations that coordinate the provision of cross-sectoral services, including police, victim services, counselling, health services, justice and the 'violence against women' sector, to women and their families who have experienced violence. The Disability Access Project is a recent joint initiative between WACT and the Access and Education Program of Springtide Resources (one of the Council's member organisations). It aims to bridge the gap in meeting the needs of women with disabilities who are victims of abuse by putting issues of service access on the Council agenda with a view to encouraging member organisations to consider how they might provide inclusive services to women with disabilities. Springtide Resources has also produced a manual for the 'violence against women' sector to be inclusive of women with developmental disabilities.

Website: <u>www.womanabuse.ca</u>

Canadian audit of shelters, DAWN-RAFH Canada

DAWN Canada (DisAbled Women's Network Canada) is a national feminist organisation controlled by and comprised of women who self-identify as women with disabilities. It was established in 1985. Last year, it developed a National Accessibility and Accommodation Survey tool in order to audit the accessibility of women's shelters across Canada. DAWN's goal for women's shelters is for them to become more accessible, if not 100% accessible, to women with disabilities. The survey will be available to Women With Disabilities Australia and available through DAWN-RAFH Canada's website soon. It will look at all aspects of accessibility, including environmental sensitivity, attendant care, mental health, and help for mothers with disabilities to access shelters. In September 2008, DAWN-RAFH Canada will present some of the findings at the first World Conference of Women's Shelters in a co-presentation with WWDA on a panel on best practices.

Website: <u>www.dawncanada.net/ENG/</u> and <u>www.wwda.org.au</u>

Disability Services ASAP (A Safety Awareness Program): Austin, Texas

This is a program of SafePlace: Domestic Violence and Sexual Assault Survival Centre, Austin, Texas and was established in 1995. Disability Services ASAP provides education to people with disabilities in order to increase awareness about sexual assault, domestic violence and abuse by personal care providers, personal safety planning, healthy relationships and sexuality. Training is also available to professionals (including disability service providers, family violence workers and criminal justice personnel) and family members. Counselling services are also available to people with disabilities. The program was established in 1995.

Website: <u>www.safeplace.org</u>

Accessing Safety Initiative, USA

This is a partnership between the Vera Institute of Justice and the US Department of Justice, Office on Violence Against Women. The program provides prevention and intervention services to children, youth and adults with any disabilities; family members of people with disabilities; and professionals in the disability, family violence, sexual assault and other crisis fields. It is particularly aimed at reaching women with disabilities in order to prevent sexual, physical, emotional and other types of interpersonal violence. Collaboration across sectors is a key element of the program. An advisory council comprised of people with disabilities and professionals guides the activities, program and future directions. **Website:** www.accessingsafety.org

8.3 Positive Developments in other Australian states

Towards Better Practice Project, NSW

This is an Australian Research Council project to explore how collaboration between the domestic violence and mental health sectors can be achieved. The University of Sydney is undertaking the work in partnership with Joan Harrison Support Services for Women, Liverpool-Fairfield Mental Health Services, The Education Centre Against Violence and the Transcultural Mental Health Centre. The project began in 2006 and is anticipated to be completed by the end of 2008. It includes a practitioner survey, interviews with women who have experience of mental health and domestic violence services, focus groups with practitioners and an action evaluation component.

Contacts: Lesley Laing, Jude Irwin, Lindsay Napier and Cherie Toivenen, University of Sydney

Website:

http://www-faculty.edfac.usyd.edu.au/projects/towards_better_practice

Sexual Assault in Disability and Aged Care Action Strategy, NSW

The Sexual Assault in Disability and Aged Care Action Strategy (SADA) was initiated in 2005 and aims to identify best practice in preventing and responding to sexual assault in disability and aged care residences. It was developed by the Northern Sydney Sexual Assault Service in response to the experiences of people with disabilities and older people who had sought assistance in dealing with sexual assault. It received initial funding from the Office of Women and is under the auspice of People with Disability Australia Incorporated. The strategy involves consultation in the disability, aged care, police and sexual assault sectors with a view to improving the capacity of services to respond to people experiencing sexual assault whilst living in disability and aged care residences. Whilst the strategy focuses specifically on sexual assault, there is an important link with experiences of family violence in residential settings. A website is under development, which will provide resources to disability and aged care services. A training package for disability and aged care staff regarding the identification of and response to sexual assault for disability and aged care staff is also planned. Website: www.sadaproject.org.au

Women with Intellectual and Learning Disabilities, Queensland

Women with Intellectual and Learning Disabilities (WWILD) Sexual Violence Prevention Service aims to uphold the rights of women with intellectual and learning disabilities to live free from sexual violence. WWILD is funded by Queensland Health and the Department of Communities. WWILD provides a range of services including: therapeutic and education groups (on a range of topics such as sexuality, protective behaviours, sexual violence, and self esteem); individual support and counselling; referral to the criminal justice system; advocacy; opportunities for women to participate in service development; training in sexual violence prevention; support of victims of sexual violence and organisational responses; community education; resource and policy development. The disability training program – Victims of Crime – is a statewide support, referral and information service for people with intellectual, learning and cognitive disabilities who are victims or witnesses of crime. It also provides statewide training for organisations and is involved in community education.

Website: <u>www.wwild.org</u>

8.4 Conclusion and recommendations

Positive developments discussed in this section occurred as a result of a number of factors:

- the involvement of women with disabilities in policy development, service planning and service delivery;
- the commitment of family violence services to supporting women with disabilities as clients;
- inter-sector collaboration between disability and family violence services; and
- the quarantining of specific resources to support innovation in service development and collaboration.

Some real gains have been made in terms of broadening the support for women with disabilities experiencing violence. However, a multi-level approach, involving intra-government collaboration with cross-agency partnerships is still to be realised.

Successful outcomes for women with disabilities experiencing violence requires that the service response focuses on the issue of violence and women's and children's safety. However, the family violence sector must be linked to expertise in the disability sector, in order to ensure a woman's right to all of the support services available, to afford her maximum independence.

Recommendations:

- 1. That leadership at statewide, regional and local levels encourages the building of relationships, capacity and exchange of respective expertise between disability, family violence and the broader community sectors. This might, for example, include linking together Rural and Metro Access workers, the integrated family violence networks, and the Local Area Service Networks.
- 2. That the government allocates specific resources for the development of cross-sector relationships and pathfinder projects between the family violence and disability sectors.
- 3. That the government supports, and disseminates information about, good practice developments in the area of disability and family violence that emerge in response to local circumstances.
- 4. That ongoing support (and funding) is provided for good practice, 'beacon' developments, which provide the platform for leadership and positive developments across the sector.
- 5. That local services take responsibility for developing interagency collaboration at a local level between the disability and family violence sectors.

6. That services take advantage of the Victorian Government's initiative (through DPCD's Office for Disability) to resource health and community agencies to develop disability action plans, and that the Office for Disability and Family Violence Unit within DPCD monitor these developments.