# **Women's Health Services**

# **Disability and Prevention of Violence Against Women**

# **Needs Analysis Tool**

**Organisational Capacity** 



Published by Women with Disabilities Victoria Level 9/255 Bourke Street, Melbourne, Victoria 3000 ©Women with Disabilities Victoria 2020.

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The Workforce Development Program on Gender and Disability is supported by the Victorian Government.



Women's Health Services Disability and Prevention of Violence Against Women Needs Analysis Tool  $\ensuremath{\mathbb{C}}$  Women with Disabilities Victoria

# Women's Health Services Disability and Prevention of Violence Against Women Needs Analysis Tool

#### Acknowledgements

Women with Disabilities Victoria acknowledges:

- The Victorian Aboriginal people as the First Peoples, Traditional Owners and custodians of the land and water on which we rely.
- The contribution of Women's Health Services and Women with Disabilities staff to the development of this tool.
- The Victorian Government, through the Office of Women, for funding the development of this tool and for its commitment to progress towards violence prevention in Victoria.

#### Introduction

Women with Disabilities Victoria (WDV) is the peak body of women with disabilities in Victoria.

Women with Disabilities Victoria:

- Provides systemic support, advocacy and resources to women with disabilities in leadership roles.
- Works with community services and organisations to ensure they are inclusive of women with disabilities.
- Ensures services for people with disabilities consider a gender perspective that is responsive to women with disabilities.
- Works in partnership with other disability and women's organisations.
- Encourages and undertakes research on issues affecting women with disabilities.
- Provides a voice for women with disabilities to influence government policy and legislation.





### **Our Vision, Mission and Values**

We are an organisation of women with disabilities in Victoria with a diverse and growing membership. Our members have a range of disabilities, backgrounds, lifestyles and ages.

#### **Our Vision**

A world where all women are respected and can fully experience life.

#### **Our Mission**

To advance real social and economic inclusion for women with disabilities in Victoria, we will:

- Be a voice for women with disabilities.
- Create opportunities for women with disabilities to be visible and to be heard in their communities.
- Build partnerships to deliver the best results for women with disabilities.
- Engage the community to challenge attitudes and myths about women with disabilities.

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## Women with Disabilities Victoria's Prevention of Violence Capacity Building Project

#### Context

Women's Health Services (WHS) are required to develop the capacity of local and regional partners (for regional WHS), and relevant state wide and other relevant sector partners (for state wide WHS), to further strengthen their current work in preventing family violence and all forms of violence against women.

The Victorian strategy on violence prevention, 'Free from Violence' (2017) notes that while violence against women and family violence have their origins in gender inequality and discrimination, "inequalities resulting in racism, ageism, ableism and heterosexism can also, on their own or in combination, influence patterns of violence perpetrated in society" (State of Victoria 2017). Women with Disabilities Victoria (WDV) observes that geography can further exacerbate these patterns, due to differential availability of infrastructure and social isolation.

WDV is undertaking a project to increase the capacity of women's health services (WHS) to include the rights, perspectives and participation of women with disabilities in to their current and future prevention of violence against women (PVAW) activities. The project responds to three key issues in relation to PVAW and women with disabilities:

- 1. Intersecting factors of gender and disability inequality are key drivers for women with disabilities who experience violence at a higher rate than women without disabilities.
- 2. Regional primary prevention of violence against women strategies and plans can be strengthened to address both the gender and disability drivers of violence and avoid marginalising women with disabilities.
- 3. Women with disabilities and disability organisations can be engaged in regional primary prevention planning efforts, increasing the effectiveness and reach of strategies.

The project undertakes capacity-building work with identified WHS and their local government partners. WDV in partnership with WHS project participants supports shared learning across the remaining women's health services through communities of practice (CoP) and networks, resources and other activities, including the piloting of tools and resources for subsequent sharing with



Victoria's women's health sector and their local and regional organisational partners.

### **Key Facts About Disability and Gender**

#### Who Are Women with Disabilities?

Nearly one in every five Victorian women has a disability. We are every woman. We are doctors, lawyers, health and community service workers, playwrights and teachers.

We are mothers and carers, actively sexual and celibate, lesbian, bisexual, transgender and heterosexual. We live on farms, in regional communities, in urban high rise and in the suburbs. We follow football and dance, go to TAFE and university. We value public transport and accessible buildings.

We are religious, from many faiths and non-religious, from many perspectives. We are diverse in our ideologies, but passionate about our right to be recognised as ordinary women... with a disability.

#### What Barriers Do We Face?

We encounter discrimination on many levels, each of which restricts our opportunities for equal participation in economic, social, educational and political life.

Some women with disabilities experience multiple layers of discrimination based on their race, age, gender and sexual orientation, as well as their disability. We are often ignored in government legislation, policies and programs and our needs are not adequately recognised within community organisations and services.

We have traditionally been excluded from the mainstream women's social movement, whilst issues of concern to women with disabilities have not been addressed by the broader disability advocacy movement.

On all measures of social and economic participation (housing security, income, employment and education), women with disabilities are disadvantaged compared to women and men without disabilities. We also experience higher levels of disadvantage than men with disabilities when it comes to employment and income levels. As women with disabilities, we lack access to adequate health care and other services for ourselves and our children, particularly when health centres fail to provide a welcoming, inclusive environment with accessible parking, accessible toilets and accessible examination tables. Women with disabilities are targeted by people who use violence, including by intimate partners. We are also less likely to know about or have access to services responding to violence against women.

# Key Facts About Disability and Violence Against Women

- Gender-based and disability-based discrimination doubles the risk of violence for women and girls with disabilities as compared to women without disabilities.
- Women with disabilities experience all types of violence at higher rates, with increased severity and for longer than other women.
- Men who use violence often target women who they see as less powerful, such as women with barriers to communicate to others what has happened to them and those restricted in their physical movement.
- Over one-third of women with disabilities experience some form of intimate partner violence.
- Many women experience social isolation as both a risk factor for, and a consequence of, violence. Some perpetrators use social isolation as a form of controlling behaviour in itself.
- Isolation can be compounded for women living rurally or remotely, women who are culturally isolated and for older women.
- Women with Disabilities Victoria's research and contribution to the recent Royal Commission into Family Violence ensured the voices and experiences of women with disabilities were heard. Women with Disabilities Victoria continues to work with community organisations and all levels of government to ensure the recommendations of the Royal Commission are implemented.



## The Disability and Prevention of Violence Against Women (PVAW) Needs Analysis Tool

The disability and PVAW needs analysis tool presented below is part of a suite of resources produced by Women with Disabilities Victoria to support women's health services to build their capacity to include the rights and perspectives of women with disabilities into PVAW activities. In tandem with accompanying Women's Health Services Disability Audit Tools, it has been designed for use by staff of women's health services (WHS) engaged in the design, implementation and review of activities to prevent violence against women initiated by their organisations or region. It has been piloted by Women's Health East and Women's Health Loddon Mallee through their participation in the Violence Prevention Capacity Building Project in partnership with WDV, for whose assistance WDV is very grateful.

#### **Guiding Principles**

The Women's Health Services Disability and PVAW Capacity Building project is grounded in a gender transformative approach to change gender norms, structures and practices for a more equal society (Our Watch 2015; Keel et al 2016). It takes an intersectional approach to address the drivers of violence against women and the multiple systems and structures of oppression and discrimination which affect women with disabilities by upholding a human rights approach to disability, as required by the Commonwealth Disability Discrimination Act 1992 and the United Nations Convention on the Rights of People with Disabilities 2006.

The Women's Health Services Disability and Prevention of Violence Against Women project frames its activities within essential actions to prevent violence against women, as advocated by Our Watch (2015). In undertaking the disability and PVAW needs analysis below, women's health services can assess and further develop their disability and PVAW related knowledge, partnerships, plans and capacity in ways which will:

- Challenge condoning of violence against women.
- Promote women's independence and decision-making in public life and relationships.
- Foster positive personal identities and challenge gender stereotypes and roles.
- Strengthen positive, equal and respectful relations between and among women and men, girls and boys.

• Promote and normalise gender equality in public and private life (Our Watch 2015).

In 2017, WDV produced the Inclusive Planning Guidelines for Prevention of Violence Against Women. These guidelines specify a series of actions conducive to inclusive PVAW activities and processes by women's health services:

- Develop organisational readiness through planning and development.
- Engage partners to build understandings and capacity.
- Engage the community for change.
- Invest in workforce development.
- Promote leadership and advocacy.
- Undertake research, monitoring and evaluation (Women with Disabilities Victoria 2017).

#### **Needs Analysis Scope**

The needs analysis tool below has been designed to enable reflection on women's health services capacity to develop organisational strategies and partnerships, and mobilise resources to engage in disability inclusive PVAW activities, as well as identifying existing barriers to inclusion and planning for their removal. Alongside the accompanying disability auditing tool, the needs analysis tool below can assist women's health services to research existing inclusion activities and partnerships and guide future planning and evaluation. In undertaking the needs analysis, women's health services can not only increase the inclusivity of their own PVAW activities but also role model inclusion for regional partners with whom they work.

The areas covered within the needs analysis tool align with capabilities from The Victorian Government's Prevention of Family Violence and Violence Against Women Capability Framework (2017) and Women's Health Victoria's Equality and Safety for Women Regional Planning Guidelines (2017). A disability inclusive lens has been added drawn from Women with Disabilities Victoria's aforementioned Inclusive Planning Guide for Violence Prevention Against Women (2017).

The tool has been designed to cover the areas of workforce capacity and disability inclusion in the design, implementation and evaluation of PVAW activities. It presents a series of open ended questions on broad themes of workforce capacity, disability specific knowledge, actions and partnerships.

The tool's open question format allows for multiple forms of utilisation by WHS and other organisations. The analysis can be undertaken as an individual written exercise, or via a workshop format. Questions within the tool can also be used as guides to organisational discussion, planning and evaluation of PVAW disability inclusive practice.

By responding to the open-ended questions within the tool, WHS staff can generate an overview of current expertise and needs within their organisation concerning inclusive PVAW, as well as the disability inclusiveness of regional PVAW planning, implementation and evaluation activities. The tool can be used to produce base-line data highlighting the state of inclusive PVAW, or to monitor and evaluate progress over time.

The needs analysis tool has been produced in both printable pdf and in accessible MS Word format, the latter to enable its completion electronically by all users, thus presenting an example of accessible document creation in conformance with document accessibility standards, as endorsed by the State Government of Victoria for their communications.

### How to Use This Tool

The PVAW and disability needs analysis tool has been designed to be used in the context of women's health services, but can be adapted and used by other organisations engaged in PVAW. It is designed on the principle that women's health services will involve women with disabilities or their representative organisations in the needs analysis, as this will yield the most accurate reflection of the current state of inclusivity in PVAW planning and implementation. Likewise, involvement of organisational leadership will increase the likelihood that concepts of inclusive practice will penetrate the entire organisation.

Responses to questions in this tool will vary according to respondents' position and tenure within the organisation. The engagement of staff and external partners from different organisational levels and involvements is likely to yield the richest analysis.

In preparing to undertake the needs analysis, women's health service staff may find it useful to refer to past and current PVAW project plans and reports, as well as PVAW regional action plans and any organisational documents detailing existing or planned future partnerships or strategies.

#### **Needs Analysis Instructions**

The needs analysis section of this toolkit comprises questions arranged within three self-contained resources: entitled strategy and partnerships, capacity and resourcing. Respondents are invited to consider each question, and complete



the sections asking about the current situation, short- and longer-term plans for improvement, knowledge gaps and additional resources required. For this final section, additional resources can refer to relationships, materials or knowledge.

Respondents are also invited to develop a summary of findings derived from completed sections of the needs analysis tools, and complete the sections asking about the current situation and future planning to enhance disability inclusion.

#### **Data Collection and Presentation**

Users of the needs analysis tools are able to generate their own PVAW inclusion snapshot report and determine and plan to fill gaps in current organisational and regional capacity according to their organisational and regional strategic priorities and resources.



## **Disability and Prevention of Violence Against Women Needs Analysis Tool**

#### **Organisational Capacity**

#### Questions

The questions below relate to the knowledge and resources your organisation possesses to enable PVAW which is inclusive of the rights, needs and perspectives of women with disabilities.

#### A. What is the level of overall knowledge in your service about:

- The prevalence of violence against women with disabilities
- The forms this violence may take
- Its drivers and risk factors when considered with a disability lens
- Essential actions to prevent this violence against women with disabilities?

Example: High level knowledge gained through experience of working with women with disabilities who are survivors of violence

Current Situation:

Short Term Goals:

Long Term Goals:

Knowledge Gaps:

#### B. What knowledge do staff have of the indicators of violence against women with disabilities and how to respond to and refer those who disclose their experience of violence?

Example: High level knowledge gained through access to WDV media and resources

Current Situation:

Short Term Goals:

Long Term Goals:

Knowledge Gaps:

Resource Needs:

# C. How do staff manage risk and prioritise the safety of victims/survivors of violence with a lived experience of disabilities whom they encounter?

Example: Procedures in place to educate and support staff to maintain awareness of indicators of violence, and to respond to the disclosures of women with disabilities by active listening, affirming women's right to safety, offering initial support, accessible external referral and follow up

Current Situation:

Short Term Goals:

Long Term Goals:

Knowledge Gaps:

# D. How has disability and intersectional recognition influenced the design, implementation and monitoring of PVAW initiatives by your organisation?

Example: Implicit reference to women with disabilities in project and evaluation plans

Current Situation:

Short Term Goals:

Long Term Goals:

Knowledge Gaps:

Resource Needs:

# E. How is the recognition of disability demonstrated in the evaluation of prevention of violence initiatives undertaken through your organisation?

Example: Use of specific disability related indicators and evaluation processes that are accessible and inclusive

Current Situation:

Short Term Goals:

Long Term Goals:

Knowledge Gaps:

# F. How has your service been involved in advocacy for policy and practice reforms concerning prevention of violence against women with disabilities?

Example: Submission to the Royal Commission on Violence, Abuse, Neglect and Exploitation of People with a Disability

Current Situation:

Short Term Goals:

Long Term Goals:

Knowledge Gaps:

Resource Needs:

#### G. How does your organisation demonstrate gender equality internally, and how does the organisation respond to and refer staff/volunteers/contractors who disclose experiences of violence?

Example: Policy and procedures re-supporting staff experiencing violence, paid family violence leave and procedures surrounding its use

Current Situation:

Short Term Goals:

Long Term Goals:

Knowledge Gaps:



#### **Summary**

The questions above relate to the knowledge and resources your organisation possesses to enable PVAW which is inclusive of the rights, needs and perspectives of women with disabilities.

#### **Needs Analysis Response Summary**

#### **Future Actions**

#### Recommendations

Short Term:

Medium Term:

Long Term:



#### **Key Learning**

For (name organisation):

For other partner organisations (if relevant):



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