

# **Women's Health Services**

## **Disability Audit Tool**

**Services and Participation**

**Employment and Leadership – Paid and  
Voluntary**



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# Women's Health Services Disability Audit Tool

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## 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 Women's Health Services Disability Audit Tool

The Women's Health Services Disability Audit 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 in to PVAW initiatives. In tandem with accompanying disability and Prevention of Violence Against Women (PVAW) needs analysis tools, it has been designed for use by staff of women's health services engaged in the design, implementation and review of programs 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, funded by the Victorian Government's Office for Women, 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 audit below, women's health services can shift their communications, processes, operations and physical infrastructure in ways which will:

### **Women's Health Services Disability Audit Tool**

- 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. The auditing toolkit addresses the first guideline, Organisational Readiness through Planning and Development (Women with Disabilities Victoria 2017).

Organisational readiness requires focus and reflection on internal processes, systems, culture and work plans. It involves critical examination of the internal environment and external messaging, as well as recognition of the long-term nature of change to transform social structures, organisational culture and processes and physical infrastructure. Similar to gender equality, disability inclusion within organisations will only be achieved by deliberate actions to implement long-term change. It is suggested that the auditing tools and needs analysis tools inform an ongoing process of disability inclusion, using the following strategies:

- Enlisting the support of senior leaders.
- Researching current inclusion activities, systems and resources.
- Developing a vision of what your inclusive organisation and PVAW activities will look like.
- Accessing resources, information and support.
- Communicating throughout your organisation about disability inclusion.
- Building knowledge of disability, barriers to inclusion and prevention of violence against women with disabilities within your organisation.

- Determining priorities for action and incrementally removing barriers to inclusion.
- Improving policies and procedures to reflect disability inclusion.
- Making small changes which will achieve large impact.
- Maintaining momentum and reinforcing the message.
- Role modelling inclusion.
- Building disability inclusion in to expectations of organisational performance.
- Promoting inclusion through internal events and activities.
- Evaluating progress to guide future action (adapted from VicHealth 2018).

The auditing toolkit has been designed to enable reflection on women's health services capacity to create an environment in which disability inclusive PVAW initiatives can occur, as well as identifying existing barriers to inclusion and planning for their removal. In tandem with the needs analysis tools, the auditing tools can assist women's health services to research existing inclusion activities and systems, guide policy development, future planning and evaluation. In undertaking the audit, women's health services can not only increase the inclusivity of their own organisational practices but also role model inclusion for regional partners with whom they work.

## **Audit Scope**

The auditing tool includes material covering an organisation's interactions with staff, partners and the community through events, communications and its role as employer and agent of change, and on the accessibility of an organisation's physical infrastructure and event spaces. The audit structure reflects a staged approach to the transformation necessary for the creation of truly inclusive cultures, practices and environments, with shifts in organisational operations and communications requiring less financial outlay than changes to physical infrastructure, and thus likely to receive greater organisational support in the short to medium term. Furthermore, the suggestions and resources offered throughout the text invite the examination by women's health services staff of

aspects of inclusion through a gender lens, assisting organisations to determine priorities for change and implement short-term changes while devising strategies for longer-term transformation.

The auditing tools present a series of questions on themes of physical access, events, communications, personnel practices and attitudes towards disability. The responses of users of these tools can be used to assess each women's health services' current disability inclusion capacity, strengths and needs, and guide the design of requests for tailored technical assistance and resource provision from WDV if requested in the future.

Disability inclusion is multi-faceted, covering a wide scope of physical infrastructure, organisational processes, and systems. It is suggested that rather than tackling the audit in its entirety, women's health services review the topics covered in the auditing tool and identify areas which they wish to address as part of a staged process of accessibility review, planning and change. This will ensure manageable and realistic action over time. The tool's checklist format allows for multiple forms of utilisation by WHS and other organisations. The audit can be undertaken as an individual written exercise, or via a workshop format. Questions within the toolkit can also be used as guides to organisational discussion, planning and evaluation of disability inclusion.

By responding to the questions within the toolkit, WHS staff can generate an overview of the current state of inclusiveness of their organisation or events in a range of criteria, including physical access and inclusive attitudes and practices. The tool can be used to produce base-line data and to monitor and plan progress towards inclusivity over time, in recognition of the long term nature of much disability inclusion and PVAW work.

The auditing toolkit has been produced in both printable pdf and in accessible MS Word format, the latter to enable its completion electronically by all users, thus modelling an example of accessible document creation.

## **Data Collection and Presentation**

Users of the auditing tool are able to generate their own snapshot report using the template provided in each section of the toolkit, and determine and plan to fill gaps in current organisational systems, processes and infrastructure according to their organisational and regional strategic priorities and resources.

## **Audit Instructions**

The auditing toolkit comprises a series of self-contained topic areas, in which questions on various aspects of accessibility for people with disabilities are posed, alongside suggestions and resources to improve accessibility in the area under discussion. These topic areas are listed in separate resources for convenience. The resources have been derived from freely available online Australian government and non-government sources, with information from commercial publications only being cited if deemed to contain material applicable to the Women's Health Services context. All links were operable at the time of this toolkit's compilation.

Answers to each question can be entered in to the first column below each question, with N/A entered if the question does not apply to your organisation. If applicable, in the second column, please enter a response indicating a timeframe for the issue's resolution.

The reflective questions in each topic area are designed to encourage thinking about your organisation's current level of accessibility. They do not need to be answered within the tool. Rather, responses to the questions in the checklist will allow an assessment of the organisation's actual accessibility compared to respondents' initial reflections.

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

# Prevention of Violence Against Women Disability Audit

## Services and Participation

This tool covers inclusive engagement, interactions, service delivery and participation of women with disabilities within the context of your organisation. The questions apply to the multiple contexts in which women with disabilities may interact, including accessing events and consultations, as visitors, volunteers and employees.

## Employment and Leadership – Paid and Voluntary

### Questions

The questions below relate to the extent to which your organisation is inclusive of people with disabilities as staff, volunteers and directors. Discrimination in employment is prohibited under Commonwealth legislation, including the Disability Discrimination Act 1992, and the Victorian Equal Opportunity Act 2010 contains some anti-discrimination provisions for volunteers with disabilities. A strong message of inclusion is presented by an organisation whose leadership, staff and volunteers reflect the diversity of the population, including all forms of disability.

#### Reflective question:

**How representative is your organisation's leadership, staff and volunteers of the proportion of the population with disabilities?**

#### **Question 1:**

Number of volunteers/employees/executives identifying as having disabilities?

#### **Response:**

**Timeframe for Resolution:**

**Question 2:**

What positions do they hold?

**Notes:**

Organisations which are disability inclusive recruit, promote and maintain people with a range of disabilities across the spectrum of paid and unpaid positions, including leadership roles. Some women with disabilities may not disclose disability, or experience barriers to acquiring positions of seniority in line with their qualifications due to the impact of discrimination. The creation of safe environments in which women can choose to disclose a disability, and exercise leadership according to their attributes and skills challenges prevailing gender norms and expectations consigning them to low-skilled or supporting paid and unpaid roles.

**Response:**

**Timeframe for Resolution:**



**Question 3:**

In what formats are role descriptions made available?

**Notes:**

It is relatively easy to prepare and promote role descriptions in accessible formats, such as ms word as well as pdf. This immediately increases the accessibility of these documents to a wider pool of candidates with disabilities and indicates that accessibility has been considered and the applications of candidates with disabilities for voluntary and paid roles are expected as part of the candidate pool. It also ensures that women can exercise autonomy in choosing roles in which they are interested. Further ideas for simple solutions to boost recruitment accessibility can be found at

<https://www.jobaccess.gov.au/node/77761>.

**Response:**

**Timeframe for Resolution:**

**Question 4:**

What affirmative action policies exist for women with disabilities in your organisation?

**Notes:**

Affirmative action promotes greater equality of people who face entrenched discrimination or barriers due to gender, disability, race, sexual orientation or other characteristics. Policies promoting affirmative action in your organisation for women with disabilities acknowledge and challenge intersectional discrimination and promote and normalise gender equality. Australian legislation provides for the implementation of measures for affirmative action, with further information available from <https://www.humanrights.gov.au/quick-guide/12099>.

**Response:**

**Timeframe for Resolution:**

**Question 5:**

What methods are used to assess candidate suitability?

**Notes:**

Flexibility in candidate assessment methods are easy to implement, and can offer applicants with diverse disabilities more accessible ways of demonstrating their suitability for voluntary or paid roles. Flexible assessment processes counter the traditional expectation of confidence within a traditional interview environment. Some examples of flexibility might include telephone interviews or practical assessments. Consult <https://www.and.org.au/pages/interviewing-people-with-disability.html> for more information.

**Response:**

**Timeframe for Resolution:**

**Question 6:**

What forms of past experience are assessed?

**Notes:**

Applicants for voluntary, paid or leadership roles may have valuable and transferrable skills acquired from life experience beyond previous paid employment, and more flexible assessment of this experience means that people with disabilities can be equally assessed, despite any gaps in employment history. This potentially opens your organisation to greater diversity in the skills and experience candidates can contribute to your mission and vision. Acknowledging transferrable skills and experience counters traditional gendered views of employment pathways, which do not account for the experiences of all people. More information is available at <https://www.apsc.gov.au/tips-disability-confident-recruitment>

**Response:**

**Timeframe for Resolution:**

**Question 7:**

What alternative work opportunities are offered by the organisation?

**Notes:**

Practices such as job carving and sharing, work experience placements, internships and volunteering can offer people with disabilities alternative means of contributing to your organisation, and increase your organisation's exposure to staff and volunteers with diverse skills and life experience. Organisations offering alternative work options also promote the value of the diverse skills and attributes of staff and challenge traditional expectations of career paths. More guidance can be found at <https://www.jobaccess.gov.au/node/77761>.

**Response:**

**Timeframe for Resolution:**

**Question 8:**

How are staff/volunteers selected for training and promotion?

**Notes:**

Existing volunteers, leaders and employees with disabilities will maintain a high level of engagement with organisations who actively demonstrate their commitment to making training, promotion and other career development available on an equal and transparent basis. Such inclusive practice poses minimal financial outlay and only requires attitudinal shifts and documented commitment to inclusive and transparent decision-making and gender and all forms of equity.

**Response:**

**Timeframe for Resolution:**

**Question 9:**

How is the availability of reasonable/flexible work adjustments promoted?

**Notes:**

It can be useful to state your organisation's commitment to reasonable adjustments for staff, leaders and volunteers with disabilities when roles are advertised and in internal policies. The resources relating to employment at the end of this tool advise that the topic of reasonable adjustments due to disability is best approached directly by supervisors, similar to the approach taken with employees seeking other forms of reasonable adjustment, e.g., flexible hours to accommodate school pick-up. The active promotion of reasonable adjustments creates an organisational environment fostering positive personal identities and affirming the equality of all staff and volunteers.

**Response:**

**Timeframe for Resolution:**

**Question 10:**

How is disability inclusion promoted in policies/procedures?

**Notes:**

The promotion of disability inclusion in policies and procedures can be an effective way to ensure that staff, partners and the community are aware of your organisation's commitments in this area and requires minimal resources to undertake. Your organisation will also demonstrate commitment to equality of all people and the elimination of discriminatory stereotypes and barriers.

**Response:**

**Timeframe for Resolution:**

**Question 11:**

How are these disseminated?

**Notes:**

Disseminating policies and procedures relating to inclusion can occur via your organisation's public media where appropriate, and via the usual channels of internal communication. The penetration of these policy statements and procedures will ensure their use by staff at all levels of the organisation. Appropriate public dissemination of policies and procedures relating to inclusion signals your organisation's stance on the equality of all people.

**Response:**

**Timeframe for Resolution:**

**Question 12:**

How are inherent role requirements determined?

**Notes:**

Position descriptions can be further enhanced if they focus on a role's requirements rather than how requirements are to be met, e.g. using statements such as "ability to undertake work-related travel" rather than "possession of A Victorian driver's licence". Such an approach demonstrates openness to a wide range of methods for undertaking tasks, affording genuine equality of opportunity.

**Response:**

**Timeframe for Resolution:**

**Question 13:**

When is role redesign/flexibility made available?

**Notes:**

Role redesign acknowledges the value of a diverse range of candidates while recognising the barriers posed by traditional expectations of employment hours. Role redesign potentially increases the availability of employment for candidates who are usually excluded by gender, disability and other forms of discrimination, increasing their autonomy, independence and equal participation.



**Response:**

**Timeframe for Resolution:**

**Question 14:**

How are reasonable adjustments/flexibility negotiated?

**Notes:**

Organisations are likely to already negotiate reasonable adjustments or flexibility due to a range of factors, and a shift in attitude and conscious commitment to intersectionality and inclusion are often all that are required for disability related reasonable adjustments to be considered.

**Response:**

**Timeframe for Resolution:**

**Question 15:**

How are staff informed concerning disability inclusion?

**Notes:**

Leaders, staff and volunteers at all levels of an organisation can be made aware of your organisation’s commitment to disability inclusion through internal and external communications but may also value opportunities for professional development and discussion. Organisations such as Women with Disabilities Victoria and other peak disability organisations can offer further assistance in this area, particularly in enhancing knowledge of the intersection of gender and disability.

**Response:**

**Timeframe for Resolution:**

Disability inclusion and the promotion of gender equality in an organisation occurs when processes for recruitment, job modifications, career development, training and promotion are accessible for people with disabilities as employees, volunteers and directors. Many strategies to increase engagement by women with disabilities as leaders, volunteers and employees can be implemented quickly and pose minimal cost, such as the ideas listed at

<https://vpssc.vic.gov.au/html-resources/disability-employment-10-things-employers-can-now/>.

## Summary

The questions above relate to the knowledge and skills of staff in your organisation to create and maintain a disability inclusive environment.

## Audit 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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