



Intersectoral Workshop

on

***Violence Against Women with Disabilities
and Deaf Women
and Access to the Justice System***

Participant's Manual

Prepared by

The Roeher Institute and Education Wife Assault

September, 1998

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Part I. About this Manual

This manual is designed for those participating in the Intersectoral workshops (in Toronto, London, Ottawa, Brampton, Durham and North Bay in the fall of 1998) on access to the justice by women with disabilities and Deaf women who experience abuse. The manual will be used in conjunction with documents in the Tool Kit for participants.

Part II: Overview of the Agenda

Intersectoral Workshop on Violence Against Women with Disabilities and Deaf Women And Access to the Justice System

The Roeher Institute/Education Wife Assault

1. Welcome and Introductions (9:00 - 9:30)
2. Defining Disability and Defining Access (9:30 - 9:40)
3. Domestic Violence Courts-Background & Local Reality (9:40 - 10:00)
4. Domestic Violence and Women with Disabilities
and Deaf Women (10:00 - 10:30)
- Refreshment Break (10:30 - 10:45)
5. Barriers to Justice for Women with Disabilities and
Deaf women who Experience Domestic Violence (10:45 - 11:30)
6. Impact of Domestic Violence Courts on Access to
Justice by Women with Disabilities and Deaf women (11:30 - 12:15)
- Lunch** (12:15 - 1:15)
7. Personal Inventory (1:15 - 1:30)
8. Identifying Best Practices and Barriers in Organizations
and in the Community - Panel Discussion (1:30 - 2:30)
9. Identifying Priorities and Developing an Action Plan (2:30 - 4:00)
10. Wrap-up - and Next Steps (4:00 - 4:10)
11. Closing (4:10 - 4:20)
12. Evaluation (4:20 - 4:30)

Part III: Workshop :Sections 1-10

1. Introductions and Overview

Objectives:

- To find out who is in the room.
- To find out what people are hoping/expecting for the day.
- To explore people's attitudes/experiences of disability.

Activities:

- Welcome and introductions
- Overview of day
- Exercise
- Small Group Warm-up

Resources:

- Handout 1a -Overview of Project
- Overhead 1a - Objectives of the Day
- Overhead 1b - Agenda
- Overhead 1c - Questions for warm-up exercises

Handout 1a: Overview of Inter-sectoral Workshop Initiative on Violence Against Women with Disabilities and Deaf Women

The Roeher Institute and Education Wife Assault, are organizing a number of events in Ontario over the next year designed to enhance access to services and to the justice system by women with disabilities and Deaf women who experience domestic abuse.

- X the events coincide with the establishment of pilot Domestic Violence Courts (DVCs) in seven communities across Ontario (London, Hamilton, Brampton, Durham, Ottawa, North Bay, Toronto).
- X the establishment of DVCs stems from a recognition of the extent and seriousness of domestic abuse, the complexity of the inter-personal dynamics in domestic violence, and the need for innovative approaches on the part of the judicial system.
- X the establishment of the DVCs also provides a unique opportunity to bring into relief the particular nature and impacts of violence against women with disabilities and Deaf women, who, for a variety of reasons are more vulnerable to various forms of abuse - including domestic and care-giver violence.
- X The Roeher Institute and Education Wife Assault, with funding from the Ministry of Citizenship, Culture and Recreation, are holding two series of events (one in early fall of 1998, a second early in 1999) in each of the communities in which the Domestic Violence Courts have been established.
- X We will be addressing the issue of access to justice for women with disabilities and Deaf women who experience abuse.
- X The first day-long event in each city will bring together people from a variety of sectors to highlight the barriers to access to the justice system by women with disabilities and Deaf women who experience abuse and to share information about best practices and community resources. Strategies and action plans will be developed to address the barriers over the short and long-term in each community.
- X The second event will be a follow-up half day session to see what steps have been taken in the intervening months, to develop mechanisms to sustain the initiatives over the long term, and to develop ongoing strategies to increase access by women with disabilities and Deaf women to services and to the justice system. As part of this initiative, other educational sessions are also planned for Crown Attorneys and for Judges in 1998/1999.
- X

Overhead 1a- Objectives of Day

- X Today people from a variety of sectors meet to :
 - highlight the barriers to access to the justice system by women with disabilities and Deaf women who experience abuse
 - share information about best practices and community resources
 - develop strategies and action plans to address the barriers over the short and long-term in each community

- X Follow-up half day session in 4-6 months to:
 - see what has happened in the past few months (successes/challenges)
 - develop ways to sustain positive changes over the long term
 - to develop ongoing strategies to increase access by women with disabilities and Deaf women to services and to the justice system.



Overhead 1b - Agenda

Agenda

Intersectoral Workshop on Violence Against Women with Disabilities and Deaf Women and Access to the Justice System

Toronto
September 17/98
Metro Hall

The Roeher Institute/Education Wife Assault

1. Introductions and Overview (9:00 - 9:30)
2. Defining Disability & Defining Access (9:30 - 9:40)
3. Domestic Violence Courts-Background & Local Reality (9:40 - 10:00)
4. Domestic Violence and Women with Disabilities and Deaf Women (10:00 - 10:30)
- Refreshment Break (10:30 - 10:45)
5. Barriers to Justice for Women with Disabilities and Deaf Women who Experience Domestic Violence (10:45 - 11:30)
6. Impact of Domestic Violence Courts on Access to Justice by Women with Disabilities & Deaf Women (11:30 - 12:15)
- Lunch** (12:15 - 1:15)
7. Personal Inventory (1:15 - 1:30)
8. Identifying Best Practices and Barriers in Organizations and in the Community - Panel Discussion (1:30 - 2:30)
9. Identifying Priorities and Developing an Action Plan (2:30 - 4:15)
11. Wrap-up - and Next Steps (4:15 - 4:30)

Overhead 1c - Questions for warm-up exercise

- X Who do you know who has a disability?
- X Who do you know who has a disability?

- X What kind of disability do they have?

- X Can you think of any experiences you have had that challenged your beliefs about what it means to have a disability? (Myths/stereotypes)

- X Can you think of any barriers to participation that you (or someone you know) has experienced as a result of having a disability?



2. Defining Disability and Defining Access

Objective:

To establish a shared understanding of the definition of "disability" and of the idea of "access by people with disabilities" among participants

Activities:

1) Presentation: Kinds of Disabilities and Defining Access

Resources:

Overhead 2a: Kinds of disabilities

Handout 2a: Kinds of disabilities (descriptions)

Overhead 2b: Defining Access

Handout 2b: Defining Access

Overhead 2a - Kinds of disabilities

- X Mobility and Agility Impairments
- X Vision Impairments
- X Hearing Impairments
- X Learning Disabilities and Attention Deficit Disorder
- X Intellectual Disabilities
- X Mental Health (or Psychiatric) Disabilities
- X Speech Impairments or Limited Verbal Communication
- X Hidden Disabilities
- X Multiple Disabilities

Handout 2a - Descriptions of Kinds of Disabilities

X **Mobility and Agility Impairments**

Mobility/agility impairments are conditions which limit a person's movement. They can be the result of neurological conditions (such as Cerebral Palsy, Spina Bifida, Multiple Sclerosis), orthopaedic conditions (associated with polio, arthritis, Muscular Dystrophy), or spinal cord injuries. Women with mobility impairments sometimes use wheelchairs, braces, walkers, or crutches.

X **Vision Impairments**

A vision impairment can range in intensity from low vision to blindness. Only a small percentage of all blind women (about 1%) read Braille; individuals who lose their sight later in life do not often learn to read Braille and may rely primarily on large print materials, taped reading materials, or require readers.

X **Hearing Impairments**

Hearing impairments can range from partial hearing loss (hard of hearing) to deafness. Not all Hard of Hearing (HOH) or deaf people use American Sign Language (ASL). Some read lips and speak, especially those who can distinguish sound, or who have lost their hearing later in life. A TTY /Teletypewriter allows women with hearing impairments to communicate with others using the telephone. Certified court interpreters may be needed for women who are hard of hearing or deaf. Many deaf people (although not all) identify with the Deaf Community and with Deaf Culture.

X **Learning Disabilities and Attention Deficit Disorder**

A learning disability is defined as a neurological dysfunction which interferes with the brain's capacity to process information in a conventional manner. There are many different types of learning disabilities, coming in several combinations and ranging from the very mild to the very severe. For example, Dyslexia is a common term for some learning disabilities involving problems reading. It is important to remember that having a learning disability does not affect a person's overall intelligence. Some people with learning disabilities may also have attention deficit disorders or

hyperactivity. They may become easily distracted, disorganized, impulsive, and have a low tolerance for stress.

X Intellectual Disabilities

Intellectual disability has gradually replaced the term “mental retardation”, as a term that is less negative and stigmatizing. A woman with an intellectual disability may have delayed or limited development in learning that can affect her ability to comprehend, remember or discern. While there is a considerable range of cognitive skills within the population of women who are considered intellectually disabled, often their capacities are underestimated. Because they may have lived in institutions or in highly protective situations with their families, women with an intellectual disability may be shy or easily intimidated. Denied suitable educational opportunities and a chance to learn about their rights, women with an intellectual disability may fail to perceive the denial of many amenities as a violation of their legal rights.

X Mental Health (or Psychiatric) Disabilities

There is a range of conditions and diagnoses that fall under this heading. These include Major Depressive Disorder, Schizophrenia, and Bipolar Disorder. These conditions are often treated with medications and/or with therapy. Individuals may experience side effects from medication which inhibit clear thinking, interfere with short and/or long-term memory and make it difficult to follow a fast-paced, information-packed conversation.

X Speech Impairments or Limited Verbal Communication

Speech or communication disorders generally relate to disturbances in articulation, voice production, rhythm (stuttering), neurology (e.g. cerebral palsy, hearing impairments, intellectual disability and associated conditions) or organic causes (such as cleft palate). It may be important to ascertain the cause of the person’s speaking impairment, as they may require a particular accommodation to be understood.

X Hidden Disabilities

There are a number of other disabilities that may not be readily apparent. These are known as hidden or invisible disabilities, and include for example, people who are HIV positive or have AIDS, people with head injuries, epilepsy, diabetes, respiratory diseases/asthma, Multiple Sclerosis, or environmental illness. It may be important to become aware of hidden disabilities, to determine what accommodations, if any, are needed to ensure the full participation of the

individual.

X **Multiple Disabilities**

It is entirely possible for someone to have more than one of any of the disabilities mentioned above. In accommodating women with disabilities and Deaf women, it is important therefore to understand what particular accommodations requirements make sense for each individual. It is important to be aware that having more than one disability can increase one's vulnerability to risk.

People with disabilities constitute a significant minority of Canada's population. According to the Statistics Canada's **Health and Limitation Survey** (1995), over 15% of the population has a disability that is expected to last six months or longer.

It is estimated that 60% of us will be disabled at some point in our lives.

Overhead 2b: Defining Access

X **Physical**

(for example, ramps, accessible washrooms, wide doorways, accessible transportation, etc.)

X **Procedural**

(for example, taking extra time to communicate with someone with an intellectual disability, arranging interviews at times when an individual may be less affected by medications, etc.)

X **Communication**

(for example, access to American Sign Language interpreters, material in alternate formats such as large print, audiotape, computer disk; communication aids like word boards, etc.)

X **Attitudinal**

(Awareness of and sensitivity to the experiences and needs of women with disabilities and Deaf women)

X **Financial**

(Availability of services at no cost or low fees - most women with disabilities and Deaf women have low incomes)

(Adapted from **We are Those Women!**, DAWN Ontario)

3. Domestic Violence Courts: Background and Local Reality

Objectives:

To understand the history of the Specialized Domestic Violence Courts

To understand how the local Domestic Violence Court functions

Activities:

- 1) Overview of Domestic Violence Courts in Ontario (presentation)
- 2) Overview on how the local Domestic Violence Court operates (presentation)

Resources:

“Specialized Domestic Violence Courts Pilot Overview” and “Women with Disabilities and Deaf Women and the Domestic Violence Courts” available in the “Participants Tool Kit”

Overhead 3A - DVC Background

Overhead 3B - “The Plea Court Model”

Overhead 3C - The Process

Overhead 3D - General Domestic Violence Cases

Overhead 3E - The Process

Overhead 3F - Conclusion

Overhead 3A - Background

DVC Background:

Problems in the old system included the inability of the criminal justice system to:

- X consistently demonstrate its commitment to prosecuting offenders who have abused their partners;
- X protect the safety of women as opposed to re-victimizing women who have been abused by their partners;
- X provide a coordinated response wherein all players within the criminal justice response work together to provide a consistent message that women's safety is the priority, and that abuse of women and children will not be tolerated.

In response to these problems several Crown Attorneys initiated two pilot Domestic Violence Courts in partnership with police, community agencies and survivors in Toronto.

Overhead 3B - Pilot A

Pilot A: "The Plea Court Model"

Goal:

To hear cases where :

- X the offender has been charged with partner abuse for the first time; and
- X the person who has been abused has no significant/visible injury; and
- X no weapons were used; and
- X where the couple thinks they still want to remain together; and
- X the abused person agrees to the process after it has been explained.

Intent:

- X Encourage offenders to take responsibility for their abusive behaviour
- X Provide programs for offenders directly related to woman abuse and a means of providing them with re-education and a consequence of their behaviour
- X Ensure basic support and referral to women victims **at the outset** as they enter the criminal justice process

Overhead 3C - The Process

- X Cases are screened by the Crown Attorneys, who identify those eligible for the Plea Court
- X Victim/Witness Assistance Program staff are available to help support victim/witnesses through the court process (for example, by arranging to accommodate a person's disability; arranging for cultural and language interpreters; taking victim/witnesses on a tour of the court explaining where people sit and what they do; providing emotional support; keeping victim/witnesses informed about what is happening during court proceedings; referring to community agencies; etc.)
- X At the court, a group of both men and their partners are introduced to the project
- X Women then go to a separate room to meet with a Crown Attorney and discuss what they each want out of the court process
- X If the individual before the court agrees to plead guilty, and if his partner is agreeable, the court accepts the guilty plea
- X His plea is entered and the judge issues a series of court orders which serve as Bail Conditions. These conditions include mandated attendance at an intervention program for batterers and whether or not he can live with his partner
- X The offender is assigned to an agency with an approved 16 week program for male batterers. During this time, the partner is contacted at least four times by the community agency to monitor her safety and to offer her support services
- X While the offender is on extended bail and mandated into the intervention program, any threats to the partner's safety, and/or breaches of the bail conditions, are reported by intervention program staff and handled by local police
- X At the conclusion of the intervention program, assuming there has been no risk or threat to the woman, the offender reappears before the court and receives a sentence
- X If the reports from the batterers program, and the abused partner are favourable the final disposition is usually a conditional discharge with one year probation.

Overhead 3D - Pilot B

Pilot B: Specialized Domestic Violence Courts

Goal:

To hear all domestic violence cases where:

- X this may or may not be the first time the accused has been charged; or
- X there are significant or visible injuries to the abused partner; or
- X weapons were used; or
- X the abused partner still feels threatened and in danger
- X

Intent:

- X To increase the number of successful prosecutions in domestic violence cases by:
 - using a dedicated team of Crown Attorneys who prosecute all domestic violence cases
 - using a specialized police reporting form developed for domestic violence cases which provides more detail than ordinary police occurrence forms
 - directing police to provide 911-call tapes whenever possible, and video tape or audiotape interviews with the victim soon after the incident to provide a statement to the court.
- X To ensure basic support and referral to women victims at the outset as they enter the criminal justice process
- X To be part of a coordinated and integrated community response to woman abuse that increases the safety of women and children

Overhead 3E - The Process

The Process:

- X Once a charge is laid by the police, police use a special domestic violence reporting form to record all details of the investigation. This form attempts to guide the officer through the collection of all available evidence and promotes a full and thorough investigation
- X The victim is asked to come to the police station, where, with her consent, her interview is video taped by the police
- X The Crown Attorneys routinely ask for all available pieces of evidence: 911 call tapes, medical records, photographs of the injuries, any witness statements, etc.
- X The investigation of the case includes close cooperation between the Crown Attorneys and the police to attempt to gather and introduce as much evidence as possible. In cities where the mandate of the Sexual Assault Care Centres has been expanded to include domestic violence, the forensic nurses are also an important part of this process
- X The woman victim is contacted by the Victim Witness Assistance Program and encouraged to come in for an interview, and be oriented to the court process
- X Referrals to community agencies and services are provided to the victim
- X The trial takes place
- X If the man is convicted he may be given a jail term
- X If the judge mandates the offender into an intervention program he will be referred by his probation officer to an approved batterer's program that has agreed to follow safety/accountability standards and guidelines.

Overhead 3F - Conclusion

Conclusion

What Have We Learned From the Toronto Pilot Courts:

- X The “Plea Court” provides an effective and accountable way to deal with a large group of charges: first-time offenders where there has been no significant injury. It provides early intervention and a fast response to a large group of charges that otherwise are impossible to successfully deal with because there is no evidence above and beyond the word of the victim. The “Plea Court” has demonstrated a very successful way to respond to cases that were routinely thrown out of court if and when the victim recanted.
- X The “General Domestic Violence Court” has provided for successful prosecutions in cases where there is evidence to be utilized even when the victim has recanted or has refused to testify.
- X The two approaches should be integrated so that we have a system that provides a timely, cost effective response within the context of vigorous prosecution and a firm commitment to holding abusers accountable for their behaviour. Cases that go to full trial would be prosecuted fully because time would be freed up from the “low risk” cases where the offender is willing to take responsibility for his behaviour and plead guilty.

4. Domestic Violence and Women with Disabilities and Deaf Women

Objectives:

To identify the particular ways in which women with disabilities and Deaf women experience violence;

To define violence against women with disabilities and Deaf women;

To understand the extent of violence against women with disabilities and Deaf women.

Activities:

1) Video presentation : **Charting New Waters**
(Alicia's and Leslie's stories)

Review of forms, definitions and extent of abuse against women with disabilities and Deaf women

Resources:

Overhead 4a - Forms of Abuse

Overhead 4b - Definition of Abuse

Overhead 4c - Extent of Abuse

Handout 4a - Extent of Abuse

Overhead 4a - Forms of Abuse

Forms of Abuse

- § **Physical and sexual abuse**
- § **Emotional abuse**
- § **Neglect**
- § **Financial abuse**

Forms of abuse to which women with disabilities and Deaf women may be particularly vulnerable:

X physical force or neglect within the context of care-giving:

For example, a care-giver forcing a woman to eat at a pace exceeding her ability and comfort; leaving her in soiled or wet clothes or bed sheets; leaving her on the toilet or in the bath for an extended period of time; pinching, slapping or pulling her hair while dressing or undressing her.

X unwanted acts of a sexual nature by a care-giver

For example, a care-giver engaging in sexual touching during bathing and toileting routines; leaving the bathroom door open or coming in while a woman is dressing, bathing or toileting; using explicit sexual language or making sexual jokes.

X denial of rights, necessities, privileges or opportunities by persons in a position to promote or safeguard the well-being of the person affected

For example, a partner having absolute control over family finances; petty theft by acquaintances or care-givers (a visually impaired or blind person being short-changed); the denial of food and fluids by care-givers; denial of a woman with a mobility impairment of assistance to get out of bed, wash or dress.

X **acts by which social interaction and inclusion are denied, including the obstruction of communication and denial of participation in normal social activities**

For example, a paid care-giver or family member refusing to help a woman leave her home for social activities; taking away a piece of technology required for communication or social interaction; not allowing a woman with limited verbal skills to express herself; speaking to a woman with an intellectual disability in an intentionally complex or confusing way.

X **threats, insults, harassment by partners, caregivers**

For example, demanding money for services not rendered; threatening to leave without feeding or toileting her; threatening to leave and take the children; threatening to stop caring for her, leaving her vulnerable to being institutionalized.

Overhead 4b - Definitions of Abuse

Definitions of Abuse:

Violence Against People with Disabilities:

Conscious or deliberate acts that cause or threaten to cause harm. They are public or private acts that seriously violate the principle that persons with disabilities, like all other persons, are to be equally valued and protected as human beings. They are acts that ignore or hold in contempt the voice of the affected person and that exploit a power imbalance, or that on other grounds, are contrary to the free and informed consent of the affected person.

From The Roeher Institute, **Harm's Way: The Many Faces of Violence and Abuse Against Persons with Disabilities**

Violence Against Women:

Any act of verbal or physical force, coercion, or life-threatening deprivation, directed at an individual woman or girl, that causes physical or psychological harm, humiliation or arbitrary deprivation of liberty and that perpetuates female subordination.

From **Violence Against Women: The Hidden Health Burden**, Lori Heise

Violence Against Women with Disabilities and Deaf Women:

"Violence against women or "woman abuse" usually refers to the threat or use of physical force on a woman's person or property by an intimate partner. In cases of women with disabilities and Deaf women however, abuse may be perpetrated not by just an intimate partner or spouse but by one or both parents, grown children, or caregiver(s) [..] doctors, nurses, institutional and residential school staff [...]."

From **We are Those Women**, DAWN Ontario

Overhead 4c - Extent of Abuse

Extent of Abuse

- X difficult to estimate the extent of the problem of violence against women with disabilities and Deaf women because:
 - \$ Acts that women with disabilities and Deaf women experience as violent have not received much attention in past research.
 - \$ Most instances of abuse and violence are unreported.

- X national crime statistics provided by police reports to Statistics Canada concerning complaints, arrests and convictions have not been classified according to whether the survivor/victim has a disability.

- X the 1994 Statistics Canada survey on assault and sexual assault against women indicated that adult women with a disability or disabling health problem are considerably more likely than other women without such limitations to be physically or sexually assaulted by their partners over the course of their married lives (39 as compared with 29 percent).

- X offenders include: a woman's mother or father; care-givers who may threaten to stop providing services as a way to force women to comply with abuse; health care service providers; husbands, boyfriends, ex-boyfriends, partners or ex-partners in same-sex relationships; other family relatives; others who may seek employment where they will have opportunities to assault women with disabilities and Deaf women (for example transit drivers, attendant care workers, interpreters, etc.)

- X there are number of small independent studies suggesting that women with disabilities and Deaf women are at least one and a half to two times more likely than non-disabled women to experience abuse (see Handout 4a for more information)

Handout 4a - Extent of Violence

Extent of Violence Against Women with Disabilities and Deaf Women

It is difficult to estimate the extent of the problem since acts that women with disabilities and Deaf women experience as violent have not received much attention in past research and most instances of abuse and violence are unreported.

National crime statistics provided by police reports to Statistics Canada concerning complaints, arrests and convictions have not been classified according to whether the survivor/victim has a disability.

However, the 1994 Statistics Canada survey on assault and sexual assault against women indicated that adult women with a disability or disabling health problem are considerably more likely than other women without such limitations to be physically or sexually assaulted by their partners over the course of their married lives (39 as compared with 29 percent).

Offenders include: a woman's mother or father; care-givers who may threaten to stop providing services as a way to force women to comply with abuse; health care service providers; husbands, boyfriends, ex-boyfriends, partners or ex-partners in same-sex relationships; other family relatives; others who may seek employment where they will have opportunities to assault women with disabilities and Deaf women (for example transit drivers, attendant care workers, interpreters, etc.)

There are number of small independent studies suggesting that women with disabilities and Deaf women are at least one and a half to two times more likely than non-disabled women to experience abuse. A sampling of the findings of these studies are provided on the next page.

Table 1. Violence and abuse against women with disabilities

Have been assaulted, sexually assaulted or abused	Will be sexually assaulted in their lifetime
40%	83%
Source: Stimpson and Best, 1991	

Table 2. Sexual abuse of Children

Girls		Boys	
Hearing 25%	Deaf 50%	Hearing 10%	Deaf 54%
Source: Sullivan, Vemon and Scanlan, 1987			

Table 3. Psychiatric patients victimized by major physical or sexual assault

Psychiatric outpatients	Psychiatric inpatients
68%	81%
Source: Jacobson, 1989	Source: Jacobson and Richardson, 1987

Table 4. Violence and abuse against children with multiple disabilities admitted to a psychiatric hospital

All sampled:	Sub-sample of children who had been sexually abused:
39% suffered maltreatment (mainly physical abuse)	40% abused by more than one perpetrator
Source: Ammerman, Lubetsky et. Al., 1988	

Table 5. Violence and abuse against residents of a psychiatric institution

Threatened with violence within the institution	Assaulted		Sexually assaulted	
	By staff	By other residents	By staff	By other residents
71%	39%	53%	27%	55%
Source: Nibert et al., 1989				

Table 6. Physical or sexual assault of ever-married females by their partners

Females without disabilities	Females with disabilities
29% have been physical or sexually by assaulted by their partners	39% have been physically or sexually assaulted by their partners
	74% have experienced physical violence
	38% have experienced sexual violence
Source: Statistics Canada, Centre for Justice Statistics, 1994c	

Table 7. Other Physical abuses

Nurses and aides in nursing and intermediate care facilities who were interviewed	Consumers of attendant care services
10% admitted to physically abusing clients	10% have been physically abused by attendant care providers
Source: Pillemar and Moore, 1990	Source: Ulicny et al., 1990

5. Barriers to Justice for Women with Disabilities and Deaf Women Who Experience Domestic Violence

Objectives:

To identify specific barriers to justice faced by women with disabilities and Deaf women

To distinguish between systemic barriers, barriers within and between organizations, and individual barriers.

Activities:

1) Small group discussion, report back to large group, wrap -up by facilitator

Resources:

Facilitator's Notes - Section 5

Overhead 5a - Questions for Discussion

Overhead 5b - Graph for charting barriers

Overhead 5c - Factors contributing to abuse

Overhead 5a - Questions for Discussion

- X What were the specific factors hindering Alicia and Leslie from seeking or obtaining effective intervention?

- X What are some of the barriers to services/supports/justice faced by women with disabilities and Deaf women?

- X Are the barriers at the systemic level, inter/intra organizational level or individual level?

Overhead 5b - Graph for Charting Barriers to Justice

Systemic Barriers

Inter/Intra
Organizational
Barriers

Individual Barriers

Overhead 5c - Factors

Factors Contributing to the Abuse of Women with Disabilities and Deaf women

The factors that contribute to the abuse of women with disability - largely related to the conditions in which they find themselves as a consequence of being disabled - include:

X negative public attitudes and fear about disability

- X social isolation of people with disabilities and their families
- X reliance of people with disabilities on others for care
- X lack of support for care-givers
- X gender - particularly with reference to sexual abuse and domestic violence (where women face very high risks of victimization)
- X poverty and other economic factors affecting people with disabilities
- X lack of control or choice of people with disabilities over their personal affairs
- X lack of availability of safe, alternative settings (lack of accessible shelters, lack of accessible social housing), or services (for example, a woman who is being abused by her attendant may have no alternative service provider)
- X perceived lack of credibility of women with disabilities and Deaf women when they report or disclose abuse
- X socialization of women with disabilities and Deaf women to be compliant
- X alcohol and drug abuse by perpetrators
- X ineffective safeguards (lack of protocols and procedures to respond to abuse, to screen potential offenders, etc.)
- X lack of access to legal services/advocates for victims with disabilities
- X compounding effect, depending, for example, on the nature of a woman's disability her socioeconomic status, race, linguistic/cultural background, geographic location, sexual orientation, and age.

Handout 5a- Abused Immigrant and Refugee Women

Issues that Abused Immigrant, Refugee, Newcomer, and Women of Colour Deal With:

- X fear of jeopardizing Canadian immigration status, due to the sponsoring relationship with their husband
- X lack of accessible information about Canadian laws and human rights (especially

- immigration, family, and criminal law) for both men and women
- X fear of not being capable of providing for and losing their children for good
 - X fear of being ostracized from their community and family, and causing the family shame
 - X distrust of and lack of confidence in police
 - X increased dependency on their male partner because of isolation or lack of familiarity with Canadian society
 - X lack of accessible and widely available information about social service agencies, programs, and legal aid clinics specifically developed to address woman abuse (for example, information available through multi-lingual hotlines and through ethno-specific organizations in the community)
 - X experiences of prejudice, discrimination, and/or racism or homophobia when interacting with various institutions
 - X lack of English language skills
 - X problems with transportation and commuting; lack of access to fare money and fear of using public transit; lack of knowledge about the city's geography.
 - X difficulties living within a shelter environment (e.g. differences in food, cultural differences amongst other residents, shelter rules not culturally inclusive, culturally differences in parenting approaches, cultural differences in socially accepted behaviour, feels like another refugee camp)
 - X lack of appropriate training for health and social service providers in the area of woman abuse and the experience of immigrant women (Need for training of women from specific ethnic communities to work in this area and for training of interpreters on issues of woman abuse)

Handout 5b- Issues that Lesbians/Bisexual Women with Disabilities and Deaf Women Deal With

Abuse in relationships is any behaviour or pattern of behaviour used to coerce, dominate or isolate the other partner. It is the use of any form of power that is imposed by one partner over the other, to maintain control within the relationship.

Some of the fears and issues that women face are:

- X fear that no one will believe her because of myths in the lesbian and gay communities and mainstream communities that “women are not violent” or that same-sex abuse doesn’t happen or is not as serious
- X fear that her partner's violence won't be seen as a criminal act, but rather, as “fighting”, especially if she fought back in self-defense (fear of counter charges)
- X fear that if her abusive partner also has a disability that she won't be believed
- X denial of the sexual desires and needs women with disabilities and Deaf women (resulting in increased “invisibility” of women who are lesbians)
- X fear that by reporting she will be subjected to homophobia within the criminal justice system. For example, that her abusive partner will meet with harsher treatment by the courts and in the prison system than a man would.
- X fear of having children taken away/losing custody due to lesbianism being discovered as a result of a court case
- X threats to reveal sexual orientation to family, friends, caregivers, neighbours/community and/ or employers. This may be more of an issue for lesbians who are members of small or isolated communities such as rural women, new immigrant or refugee women.
- X lesbians and bisexual women with disabilities and Deaf women may fear homophobic responses in the disability community (lack of support, ostracization) and women’s services
- X fear of being “outed” to friends and family-particularly for women who are dependent on them for personal care or financial support
- X lack of services specifically for abusive lesbians (for example, no Female Batterers Program) or support for lesbians who are victims of violence (for example, shelters or support groups/programs.)

Resources:

Toronto

The David Kelley Lesbian and Gay Community Counselling Program - Family Service
Association of Metropolitan Toronto
355 Church Street, Toronto M5B 1Z8
(416) 595-9618

Victim Assistance Program
519 Church Street Community Centre
(416)392-6877

Two Spirited People of the First Nations
Partner Abuse Program. By Appointment
(416)944-9300

Handout 5c -Barriers to Communicating

Barriers to Communicating with Women with Disabilities and Deaf Women:

- X Showing embarrassment, pity, or uncertainty about how to offer assistance
- X Assuming some form of intellectual disability because the person is non-verbal
- X Having difficulty making eye contact, having difficulty adjusting to a person who is unable to make eye contact, or speaking more loudly or more slowly to a person who is deaf
- X Speaking to a personal aide, family member, or other person accompanying the women instead of speaking directly to the woman
- X Using complex words, speaking fast, or combining too many concepts when interviewing a woman with an intellectual disability
- X Showing irritation, frustration, or anger when the woman being interviewed does not understand or will not answer the questions being put to her
- X Not knowing that you can ask a woman directly about the best method of communicating with her
- X Assuming that woman is withholding information or refusing to cooperate when she does not provide specific information requested of her

(Adapted from **Charting New Waters - Responding to Violence Against Women with Disabilities and Deaf Women**)

Handout 5d - Barriers Identified by Women with Disabilities

Some of the Barriers to Justice System as Identified by Women with Disabilities

Barriers to calling the police:

- X for some women, particularly those labelled intellectually disabled, it may be difficult to name or recognize what they are experiencing as abuse
- X the offender may place the phone up high, so it is physically impossible to reach; there may be no TTY and Bell Relay may take too long to process in a crisis situation
- X a woman labelled with a psychiatric disability may hesitate to call the police if she had a previous negative experience or may fear that if she calls the police, she will be sent to a hospital or institution where she may be drugged and confined

Other barriers:

- X Deaf women may fear isolation from their community if the abuser is also from their culture (similar to many close ethnic communities)
- X women with a communications difficulty may not be viewed as credible and therefore not taken seriously
- X there is a lack of accessible and appropriately promoted information on services for assaulted women
- X physically and attitudinally inaccessible shelters, sexual assault centres, legal clinics, courts (jury box, witness stand), Crown Attorney's offices; lack of TTY's in these facilities
- X lack of accessible 24-hour emergency services, such as; accessible transportation, ASL interpretation, multi-lingual Advisor network, multi-lingual Attendant care services, Deaf/Blind Intervenor services
- X fear of losing service providers
- X sense of obligation to the care giver/abuser
- X lack of accessible education materials related to the courts, police and legal clinics available in alternative formats
- X

6. Impact of Domestic Violence Courts on Access to Justice by Women with Disabilities and Deaf Women

Objectives:

To identify how the Domestic Violence Courts can be a catalyst for more effective responses to violence against women with disabilities and Deaf women

Activities:

Small group discussion and report back to large group

Resources:

Overhead 6a - Questions

Overhead 6a - Questions

- X Thinking back to the Video, what are some the ways in which the DVC's could make a difference for women with disabilities and Deaf women who experience domestic abuse?

- X What needs to be in place in this community for this to happen?

LUNCH



7. Personal Inventory (15 minutes)

Objectives:

To identify personal knowledge, awareness(feelings), and skills that will increase our ability to effectively respond to women with disabilities and Deaf women who have been abused.

Activities:

What I Have Learned

“The Effective Performer”: A conversation, in pairs.

Resources:

Overhead 7A & Task Sheet 7A : What I Have Learned

Overhead 7B - The Effective Performer

**Overhead 7A
Task Sheet 7A**

WHAT HAVE I LEARNED?

Knowledge: new ideas, information, concepts, facts, etc.

Awareness/sensitivity: changed feelings, attitudes, discoveries about self, etc.

Actions/new skills: things I will do differently

Overhead 7B - The Effective Performer



In pairs discuss:

Given what was learned this morning and what we already knew from our experience, what knowledge, awareness, and skills do you feel are necessary to be an effective supporter or advocate of women with disabilities and Deaf women who have been abused and need/want to access the criminal justice system?

Recording one idea per sticky, write down as many as you can in the time allotted.

When you are finished take a minute to place your stickies on the appropriate flipchart.

8. Identifying Best Practices and Barriers in Organizations and in the Community

Objectives:

To identify best practices within and between community organizations result in effective responses to women with disabilities and Deaf women.

To identify key barriers in the community to responding effectively to women with disabilities and Deaf women who have been abused.

Activities:

1) Panel Discussion

Resources:

Overhead 8a - Best Practices in Services and in the Justice System
Handout 8a - Examples of Practices

Overhead 8a - Best Practices in Services and the Justice System

Services:

- X Provision of capital funding to renovate buildings
- X Integrating issues pertaining to the accommodation of women with various disabilities in strategic planning for agencies/organizations
- X Facilitation of exchanges between services and cultural groups
- X Training initiatives
- X Inter-agency partnerships
- X Community education/outreach
- X Abuse protocols

Courts:

- X Creativity/flexibility in obtaining testimony
- X Crown preparedness
- X Creativity/flexibility in terms of making court rooms accessible

Handout 8a - Examples of Best Practices

There have been a number of innovative practices that point the way to ensure that the judicial process is available and accessible to women with disabilities and Deaf women. The following are some examples of “best practices” in services and in the justice system that increase access by women with disabilities and Deaf women¹.

Service examples:

- X *Provision of capital funding* to enable a number of shelters to become physically more accessible has made several shelters accessible to women mobility impairments.
- X *Accommodation of women with various disabilities as part of strategic planning:* A shelter in London, Ont. developed a 5 year strategic plan to improve access for women with disabilities and Deaf women. The numbers of women with disabilities and Deaf women using their services has increased significantly.
- X *Facilitation of exchanges between services and ethno-specific groups* (i.e. immigrants, refugees, newcomers): There is an innovative example of services dealing with women with intellectual disabilities who have experienced abuse, collaborating with the Sri Lankan community in Toronto. Also, there have been collaborative efforts between the Belleville sexual assault centre and the Deaf community.
- X *Training initiatives:* a disability organization in Hamilton - with a community-based steering committee - has sought funding for a project to provide information and workshops to shelters and front line emergency services and non-profit agencies that work with women with disabilities and Deaf women; a resource centre for the public library and a manual.
- X The Metro Woman Abuse Council's training event on Domestic Violence in January, 1998, in collaboration with the Metro Toronto Police. This represents a possible model/opportunity for inter-sectoral training.
- X Several years ago, a number of training initiatives were mounted in shelters and sexual assault centres involving DAWN Ontario and/or using resource material developed by DAWN.
- X *Inter-agency partnerships:* Working relationships have developed between, for example, Women's College Hospital & Surrey Place Centre, a number of local

¹These examples were identified in research conducted by The Roeher Institute for the Ministry of Citizenship, Culture and Recreation (1997).

Associations for Community Living and sexual assault centres.

- X Headwaters Health Care Centre in Orangeville has a community advisory committee that meets regularly and includes representatives from the police force, counselling agencies, the Dufferin Association for Community Living, a lawyer, a consumer.
- X *Community education/outreach:* As a result of community outreach, the Barrie Sexual Assault Centre has a significant clientele of women with an intellectual disability.
- X *Abuse protocols:* There are several examples of protocols around abuse, such as protocols developed by Associations for Community Living; the a protocol developed by the Belleville Rape Crisis Centre for deaf women who are brought into hospital after having been sexually assaulted.

Examples in the Justice System:

- X *Creativity/flexibility in obtaining testimony:*

Allowing a sexual assault victim with a disability testify via closed circuit tv outside the courtroom

The use of Bliss boards in the courtroom.

Limiting testifying to a period of time (for example, 2 hours) to accommodate a particular disability that causes fatigue.

Using deaf interpreters to interpret for deaf individuals whose first language is not ASL or English. (The deaf interpreter would be fluent enough in sign that she/he would be able to understand the different signs used by the deaf individual . The deaf interpreter in turn, interprets to the hearing interpreter in ASL, who interprets for the Crown Attorney or Victim Witness Assistance Coordinator)

Giving permission to a hard of hearing individual who is unable to lip read fluently to have a person sit beside her in the witness box in order to provide real time captioning of the trial proceedings (using a lap-top computer).

Modification of the times of the court hearings, for an individual who, due to medications, is unable to testify in the mornings.

Allowing a support person to be nearby a person with a disability, if that person's

presence is going to be reassuring to the individual.

In determining whether a person with an intellectual disability is capable of swearing an oath or can promise to tell the truth, being flexible in terms of establishing a person's ability to tell the difference between lying and telling the truth.

Crown preparedness:

In a cases involving a women with a multiple personality disorder, having the Victim Witness Assistance Coordinator make the Crown attorney aware of the different personalities- and how they might express themselves during the testimony.

Having appropriate medical support available on site in case the need arose for a woman with a seizure disorder.

A Crown attorney, with knowledge some sign language, who is able to determine that a deaf victim is fearful of the court interpreter because he is an acquaintance of her abuser.

Having specialized teams of Crowns/Police who have an awareness of disability issues and who can be brought in or consulted with on particular cases.

X *Creativity/flexibility in terms of making court rooms accessible:*

Crown attorneys taking more time, speaking more slowly and providing victim/witnesses with the extra time they may require to express themselves.

Using a smaller and less intimidating court with a microphone for court proceedings involving a woman with a disability.

Having court proceedings moved to an accessible location outside the courthouse. There are instances in which court proceedings have been moved to a hospital or institution in which the victim/witness is being treated or where she is living.²

² Moving the court proceedings to an accessible location should, however, be seen an alternative of last resort. Court rooms and the buildings in which they are housed should be accessible to people with disabilities.

9. Identifying Priorities And Developing an Action Plan

Objectives:

To prioritize identified barriers blocking access to the courts- and accessible supports and services in this community;

To develop an appropriate and realistic action plan in response to the barriers in the community that prevent women with disabilities and Deaf women from accessing the criminal justice system.

Activities:

- 1) "DOTMOCRACY" Prioritizing barriers
- 2) "What Will I Do?" An action plan for six months
- 3) Commitment to action

Resources:

Overhead 9A - Directions for Workstations

Overhead 9A - Directions for Work Stations

Each participant will visit all five work stations. Spend no more than six minutes at each station. In your small group discuss possible ways to respond to the barrier listed on each work sheet. Identify what needs to be done, short and long term, and what first steps need to be taken. Name the community partners that would need to be involved. Write all of your ideas on the sheet with magic markers. Be visionary, but also, realistic. If it is an action that you want to be involved in or anticipate that your agency will commit to, put your name under “committee members”

When you have completed the sheet, move on to the next station and repeat the process. This time read what the previous group wrote and add to it. Continue to visit each station until the facilitator calls time.

1. **Wrap-up and Next Steps**

Objectives:

To give participants an opportunity to meet with those they will be working with, based on the 5 action plans

To have groups designate an individual (volunteer) to coordinate next steps.

To review action plans with larger group.

Activities:

A short (5-7 minute) meeting in the action plan groups.

Return to larger group to review next steps in each group, and to wrap-up day.

iv. Tips for Facilitators



To FACILITATE an action or process means to "make it easier for it to be done or to happen".

General points to remember in facilitating groups:

- ! Have participants introduce themselves to each other in first discussion group
- ! Be clear about rules - punctuality, importance of group process, smoking, schedule.
- ! Follow guide for the discussion groups and make sure to produce requested outputs. Keep the discussion on track for that particular session. Facilitator needs to be strict but not authoritarian.
- ! Keeping to a schedule is a critical part of the job. One suggestion: post agenda and include times.
- ! Be sure everyone in the group is encouraged to give their views. Encourage participation of all participants. For those who are not speaking, ask for their ideas on the question being discussed.
- ! Encourage "brainstorming" - get as many ideas from participants as possible; build on each other's ideas; do not judge each other's ideas.
- ! Make sure to identify when there is consensus in the group, and where there are important differences of opinion
- ! Facilitator needs to ask group if what is written on flip chart accurately reflects what the group meant. Remind them if they see something on flip chart with which they don't agree to speak out.
- ! Save all flip chart paper and give to coordinating team after sessions.
- ! Make sure to select a person to present a summary of the discussion back to the plenary.



- ! Respect what each person says even if some disagree.
- ! Let people finish but not monopolize the time.
- ! It is OK to say to participants they have to respect different views and to respect others by not monopolizing the time.
- ! Summarize from time to time what has been said and redirect back to what need to be achieved in session.
- ! Do not interject your own views - you have the special job of facilitator.
- ! Ask for specific comments from persons whose experience will be helpful to discussion.
- ! Let the group decide how it want to move to organize what has been said.
 - » summarize a few ideas so they get the idea
 - » if someone proposes a method of grouping, proceed that way
 - » do not interrupt discussion to find method of grouping - instead use what comes up
- ! Be clear about instruction but flexible in how people address it because people think about issues in different ways.

The Roeher Institute and Education Wife Assault

Inter-sectoral Training

Evaluation Form

1. To what extent did the discussion and activities meet the objectives for the workshop?

< Did it raise awareness about barriers to access to services and the courts by women with disabilities and Deaf women who experience abuse?

Yes G

No G

Somewhat G

< Did it identify best practices in accessing services and the courts for women with disabilities and Deaf women who experience abuse?

Yes G

No G

Somewhat G

< Did it identify community resources that could enhance access by women with disabilities and Deaf women who experience abuse?

Yes G

No G

Somewhat G

< Did a strategy begin to develop for addressing barriers to services and the justice system over the long-term in your community?

Yes G

No G

Somewhat G

2. Was the structure of the seminar effective in generating discussion and developing strategies for action?

Comments and other ideas:

3. Do you feel that the appropriate people were in attendance at the workshop? If not, who else do you think should have been there? Do you have any suggestions about who should be invited to the follow-up session?

4. What additional information would you like to see covered in the follow-up workshop?

Comments:

5. Any other comments and suggestions?

Thank You!



