**Women with Disabilities Victoria**

# **Submission to the Information, Linkages and Capacity building framework**

**Who are we?**

“Women with Disabilities Victoria is testament to the hard work and advocacy of many women over many years. At its heart, is the belief that what women want is equality – to participate in public life, to have fun, to work, to access health services, to be part of the overall community. ”

*Dr Helen Szoke, then Victorian Equal Opportunity & Human Rights Commissioner*

We are an organisation run by women with disabilities for women with disabilities. Our vision is for a world where all women are respected and can fully experience life. Through research, advocacy, and community education, we focus on those areas that have the biggest impact on the lives of women with disabilities in Victoria:

* violence against women with disabilities
* access to inclusive health care for women with disabilities
* the National Disability Insurance Scheme (NDIS)
* access to mainstream services
* leadership opportunities for women with disabilities

Our mission is to lead the way for Victorian women with disabilities and to address the barriers many of us face. We do this through:

* education, training and mentoring
* community education and professional training
* research, policy advice and advocacy
* empowerment of women with disabilities.

All our Board members and the majority of our staff are women with disabilities.

**What issues do women with disabilities face?**

Nearly one in every five Victorian women has a disability. The numbers of women with disabilities are higher in culturally diverse communities, in rural and regional Victoria, and among Indigenous people.

On all measures of social and economic participation, women with disabilities are disadvantaged compared not only to people without disabilities but also to men with disabilities.

We are:

* more likely to be poor and unemployed
* more likely to have primary care responsibilities
* less likely to get a good education and access to vocational training and employment programs
* less likely to receive appropriate health and health promotion services
* more likely to be homeless, live in insecure or unsafe housing, and pay most of our gross income on housing
* more likely to experience physical, psychological and sexual violence, in settings such as custodial, residential and health care
* perceived as more vulnerable and targeted for violence, and less likely to secure protection or to see justice delivered
* exposed to practices which qualify as torture or inhuman or degrading treatment such as interventions to control fertility, forced medication, and chemical restraint.

A key area of our work is to ensure that the NDIS is responsive to women with disabilities and takes a gender sensitive approach. We submit this response to the ILC Framework consultation to highlight some of the approaches that the ILC could take to ensure a gender responsive service model. Time has not permitted a more extensive submission but this provides a snapshot of responses to three of the five streams under the ILC program. We would be happy to further discuss how Women with Disabilities Victoria might contribute to the ILC program in the future.

**Stream 1 Information, Linkages and Referral**

Responding to all aspects of the lives of people with disabilities is essential in the implementation of the ILC: access to sexual and reproductive health advice, information and referral should take into consideration women’s human right to information. Our work with women and with service providers informs us of the need for a strategy, such as peer education to families, particularly parents of young adults with a disability. Such peer education should address the current ‘gatekeeping’ by families and disability service providers who are fearful of giving women information on sexual and reproductive health. The evidence suggests that is the absence of this information that is harmful to women with disabilities exposing them to abuse and preventing them from accessing health promotion information.

 **Violence and abuse education and referral** should also be a vital component of the Information, Linkages and Referral Stream. ***The* *Voices against the Violence******Research Project***[www.wdv.org.au/voicesagainstviolence.html](http://www.wdv.org.au/voicesagainstviolence.html) is the most significant research ever into the family violence experiences of women with disabilities in Victoria. This was conducted over two years by Women with Disabilities Victoria, the Office of the Public Advocate and the Domestic Violence Resource Centre Victoria and it provides the basis for our advocacy on policy and service responses. A key recommendation of the research is that the NDIS is aware of and sensitive to women with disabilities who experience violence. It is essential that as part of stream 1 Information, Linkages and Referral the recommendations of this research are considered and in particular that the family violence and sexual assault sectors are engaged.

Information on how to access these services must be made available to women. Social planners must have the capacity to identify and respond to violence and abuse when a woman presents seeking NDIS services. Women with Disabilities Victoria has worked with the NDIA to provide advice on how the NDIS Risk assessment tool incorporates family violence and sexual assault assessment and response. For further information our position paper on Violence against women can be found at <http://wdv.org.au/documents/WDV%20Violence%20Position%20Paper%20%28web%20version%29.pdf>.

**Parents with a disability** are often neglected as a group by disability service providers. Access to appropriate antenatal and postnatal care and education is often not considered by disability workers who support women with disabilities. Access to parent information and referral to family support services is critical for parents with a disability seeking service from the NDIS. The over representation of parents with a disability in the child protection system reflects the absence of this information and appropriately tailored family support services.

Recent focus groups with women with disabilities indicate that even in the launch sites there is a real lack of awareness by women about how to access the NDIS. Women with Disabilities Victoria is currently developing fact sheets for women with disabilities on the NDIS and is seeking funding to make a DVD on *Your rights as a woman under the NDIS*.

**Stream 2: Individual capacity building**

Our experience informs our work to ensure that women with disabilities have spaces where they can meet together, share experiences and exchange information and support with one another. Below are a number of examples

Our **Enabling Women Program** is a 5 day leadership program to deepen the understanding of issues affecting women with disabilities and empower women to lead and advocate in their own community. Each Enabling Women program is co-facilitated by a Women with Disabilities Victoria staff member and a local women with a disability recruited for the program. The women participating go on to form their own networks and in some regions the Reference Groups supporting the Enabling Women Program have been supported to continue to develop local leadership groups for women in other centres within their region. This provide vital skills development and ongoing employment as group leaders for some women.

**The Brenda Gabe Leadership Award** is another mechanism to empower women with disabilities in building their confidence through recognising their leadership. Nominees of the award are profiled at an annual award event. The feedback from these women has been that this has been a powerful affirmation of their role in their local community which has propelled them in their self-esteem and their leadership efforts.

**Women with Disabilities Victoria Leadership Network.** This leadership network welcomes women who have completed the Enabling Women Program and the Brenda Gabe Leadership Award. As an alumni group it assists women to continue to build their knowledge, confidence and networking abilities.

All of the work of Women with Disabilities Victoria has involved employment of women with disabilities in short term and long term positions (see for example the Gender and Disability Workforce Development program below).

*Critical to women’s capacity building are career development opportunities. It is recommended that the indicators of the ILC program include targets for employing people with disabilities within the Program.*

**Stream 3: Increasing capacity of mainstream services**

Mainstream services remain largely unaware of the particular needs of people with disabilities. There will be a large number of people with disabilities who are not accommodated within the NDIS and regardless mainstream services will continue to be required by people with disabilities. Two examples of our strategies to address service improvement are outlined below. These programs could be adapted to provide capacity building to a broad range of human services.

**The Gender and Disability Workforce Development Program**:

Women with Disabilities Victoria has developed a strategic priority to increase women’s wellbeing and prevent violence against women with disabilities. A key initiative to support this is the *Gender and Disability Workforce Development Program* to increase awareness of how to deliver gender equitable and sensitive service delivery and organisational culture as a strategy for violence prevention and improving women’s well-being and status.

Women with Disabilities Victoria is piloting it’s gender and disability training package titled, “*Human Rights and Quality Services: What does gender have to do with it?*” with two Victorian disability agencies (Yooralla and Gateways Support Services). As frontline service providers, disability workers are in a key position to support women with disabilities to uphold their right to achieve their goals.

Fundamental to this approach is the engagement and training of women with disabilities and professional trainers, from women’s health and from violence prevention and response services, to co-deliver this program to disability services.

The objective of the program is to improve the quality of gender sensitive practice amongst disability workers by improving their knowledge and skills in regard to:

* Concepts of gender, gender equality, gender relations and sex
* The socio-economic disadvantage of women with disabilities and its impact on social inclusion
* Human rights obligations pertaining to gender and disability
* The relationship between marginalisation, disability, gender stereotypes and violence
* Gender sensitive practice in delivering disability services
* Good practice in health promotion and primary prevention of violence against women

The pilot *Gender and Disability Workforce Development P*rogram has comprised:

1. Train the Trainer Program
2. Delivery of training to:
* Disability Support Workers Workshops
* Service Management Leadership Workshop
* Senior Executive Leadership Workshop
1. Peer Education Programs for women with disabilities
2. Follow up Communities of Practice
3. Evaluation of the Pilot Program

This program is a cutting edge violence prevention program that is the first of its kind in the world.

**Healthy Services: Healthy Women**

Another workforce development program titled *Healthy Services Healthy Women* is being developed to be delivered to health practitioners. The aim of this program is to enhance the knowledge, confidence and capacity of health professionals to deliver quality health care to women with disabilities by delivering training to health care professionals which increase their capacity to deliver accessible and respectful services to women with disabilities. Women with disability will co-facilitate training with a health industry trainer. A DVD developed by Women with Disabilities Victoria forms a core of this training.