# Learning Network

Mobilizing knowledge to end gender-based violence

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# Addressing Sexual Violence and Promoting the Sexual Rights of Women Labelled with Intellectual Disabilities

Women labelled with intellectual disabilities face high rates of sexual violence. The 2014 Canadian General Social Survey on Victimization found that:

Women labelled with cognitive disabilities were estimated to be:



more likely to have been sexually assaulted than women without disabilities



more likely than men without a disability to have been sexually assaulted<sup>1</sup>

Women labelled with intellectual disabilities also experience structural violence, meaning that they experience multiple dimensions of exclusion, inequity, and discrimination due to <u>ableist</u> assumptions that prevent them from exercising their human rights. They face barriers in making decisions about their lives and participating in all spheres of life, such as in their community, education, employment, politics, sexuality, and leisure. Structural violence makes it more difficult for women labelled with intellectual disabilities to meet their needs, find accessible supports, and seek justice.<sup>2</sup>

This Issue explores sexual violence faced by women labelled with intellectual disabilities through an intersectional, strengths-based approach. It centers the importance of removing structural barriers to supports, justice, and sexual freedom.

This Issue contributes to the ongoing work to uphold and affirm the rights of women labelled with intellectual disabilities by:

- Focusing on the whole person and their intersectional identities and needs.
- Identifying barriers and assumptions that hinder supportseeking and justice.
- Sharing what change could look like at all levels of society.

This Issue was produced in partnership with the DisAbled Women's Network of Canada (DAWN).





This Issue was inspired by ongoing, rich, and vibrant disability activism.

We are in solidarity with those who continuously share their strengths, resiliency, and action for a better future.

#### The Label: Intellectual Disabilities

The label of intellectual disability is sometimes used interchangeably with developmental disability or cognitive disability – these latter labels usually refer to a broader range of disabilities including intellectual disabilities.

Here we use the term individuals *labelled* with intellectual disabilities following self-advocates who have asserted that the label of intellectual disability is reductionist since it limits people's identity to only an IQ number.<sup>3</sup> Intellectual disabilities are often defined as a significant impairment of cognitive and adaptive functioning that occurs before age 18. It is frequently determined through an assessment of intellectual functioning (usually an IQ test) and an examination of adaptive functioning (i.e., how well a person handles common demands in life and how independent they are compared to others of a similar age and background).<sup>4</sup> However, processes of assessment have limitations and often use an ableist lens.<sup>5</sup>

Disability activists advocate for understanding disability through the social model of disability and not the medical model of disability. A medical model of disability focuses on the individual's disability as a problem or deficit which must be fixed or cured. In comparison, social models of disability recognize that disabilities are created from an inaccessible society. An inaccessible society is one where individuals labelled with intellectual disabilities have barriers to their inclusion.

By identifying the label of intellectual disability as exactly what it is, a label often imposed by others onto an individual, it is possible to capture how those labelled are subject to structural violence and further, that they may not identify with the imposed label.

The label of intellectual disability has also been used in discriminatory ways against oppressed groups to exclude them from society, reflecting colonial, racist, xenophobic, and classist assumptions.<sup>6</sup>

Disability scholar Dr. Sami Schalk shares how the label of intellectual disabilities was used to justify enslavement of Black people. <sup>7</sup> She argues that analyses of disability must consider the relationship between racism and ableism, which means that Black and racialized people labelled with intellectual disabilities experience specific barriers to accessing disability supports.

Likewise, Indigenous Peoples explain that notions of disability are rooted in Western colonial understandings, and are contradictory to Indigenous values and practices.<sup>8</sup> Find out more in this webinar on <u>Developmental Disabilities with an Indigenous Lens</u> by the Chiefs of Ontario.

# Learn more from this video: <u>Death by Numbers</u>

This short film was created by the <u>Self-Advocacy Federation</u>, an Alberta-based organization comprised of people with disabilities and their allies. It captures how individuals labelled with intellectual disabilities navigate confusing and alienating systems that deny their individuality.

In the video, Marjorie attempts to receive help from a worker when she is inappropriately and inaccurately told: "It says here that you have an IQ of 71. That's 1 point off our cut-off. The score says you can do it on your own." In response, Marjorie shares that: "Some things I can do on my own, but I need help with other areas."

Marjorie identifies that people have different needs that will not be captured by a number: "I am a person with feelings. I have needs. I have dreams. I have a story. I can be afforded the same rights as everyone else."

# **Focusing on the Whole Person**

Avoid labels and reductionistic understandings of individuals. People labelled with intellectual disabilities, like individuals who experience sexual violence, are a diverse group who have differing stories, needs, and strengths. In addition, individuals labelled with intellectual disabilities may experience intersecting oppressions (e.g., racism, classism, colonialism) that must be acknowledged.

Consider Cleo who identifies as:



Recognizing the multiple aspects of a person's identity along with their strengths and interests helps to avoid reductionist thinking that views women labelled with intellectual disabilities through only their disability. It also illustrates the need for intersectional supports.

# Intersecting Violence Against Women Labelled with Intellectual Disabilities

#### **NORMALIZATION**

Violence is normalized when it comes to be expected and thus accepted in society. As a result of normalization, violence is justified and sustained. For women with disabilities, violence is often dismissed simply because we, the victims, live with disabilities and our inherent dignity is discounted."9

The normalization of violence often leans to the invisibility of violence: because it is often taken for granted that some groups of people experience violence, it stops being shocking or grabbing people's attention.

#### STRUCTURAL VIOLENCE

Structural violence produces barriers to care and employment for women labelled with intellectual disabilities. As such, when seeking support for sexual violence they may have limited services available. For instance, medical professionals may suggest harmful responses like institutionalization and medical assistance in dying to their disclosure of trauma and its impacts on them.

#### CHILDHOOD SEXUAL VIOLENCE

Girls with cognitive disabilities face disproportionate rates of sexual abuse.

Statistics Canada estimates that 24% of women labelled with cognitive disabilities report being sexually abused before the age of 15 compared to 12% of men labelled with cognitive disabilities and 9% of women without disabilities.<sup>10</sup>

#### **SEXUAL VIOLENCE**

Sexual violence against women labelled with intellectual disabilities is frequent and repeated involving multiple perpetrators, typically who are in a position of trust. Experiences of childhood sexual violence are correlated with increased likelihood of sexual violence later in life and other forms of violence.

# Recognizing Context: Differences in Where and How Sexual Violence Occurs for Women Labelled with Intellectual Disabilities

Women labelled with intellectual disabilities may face sexual violence in a variety of settings including a family home, foster home, group home, long-term care home, hospital, or homelessness shelter. These environments are often highly controlled and surveilled because their autonomy and decision-making power are limited or completely taken away. For instance, there may be a lack of respect and privacy from caregivers including during tasks like dressing, toileting, and bathing.

Denial of meaningful decision-making can result in individuals believing that the consent of women labelled with intellectual disabilities—sexual or otherwise—does not matter or that they cannot provide consent. Such experiences can be amplified by isolation and restricted social opportunities imposed by caregivers or guardians, in addition to limited financial resources to access adequate and safe care, support, and housing.



#### **Violence in Institutions**

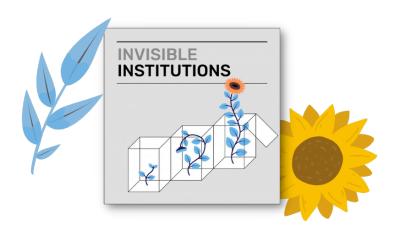
<u>People First of Canada</u> defines an institution as "any place in which people who have been labelled as having an intellectual disability are isolated, segregated and/or congregated." Institutionalization denies the right to live in community.

In 2016 it was found that more than 2,918 individuals labelled with developmental disabilities in Ontario lived in long-term care facilities with more than half under 65 years old.<sup>13</sup>

Research suggests that there are high levels of sexual violence in institutions.<sup>14</sup> One aspect of sexual violence prevalent in institutions is sexual exploitation with demands for sex in return for care or goods.

### **Consider Aadila's experience**

Aadila lives with her family and has care workers who come to assist her and her family. Aadila is raped by one of these workers, Justin. When Aadila confronts Justin and tells him it was not okay, Justin says it was a normal 'treatment' that she needed. Aadila tells her family that she no longer wants Justin in the house but her family shares how difficult it was to find a care worker and how they need Justin to enable Aadila to live at home. Justin tells the family that Aadila is being 'difficult' and that they should take away her phone as punishment.



<u>Invisible Institutions</u> is a documentary podcast exploring the past and present of institutions for people labelled with intellectual and developmental disabilities in Canada. It exposes the exploitation and abuse in institutions and centers the resistance and survival of people with disabilities.

# **Identifying Signs of Sexual Violence**

Some women labelled with intellectual disabilities may disclose an experience of sexual violence verbally by identifying how another individual touched them or caused them pain. Disclosures of sexual violence could occur with or be made to family, friends, and care workers. In comparison, some signs of sexual violence may take the form of behavioural changes or physical symptoms including:

- Difficulty sleeping and nightmares
- Lack of interest in activities or programs they previously enjoyed
- Increased focus on sexual discussions and behaviour
- Social withdrawal
- Self-harm (e.g., hairpulling, head banging)

- Resisting physical contact
- Decreased energy levels
- Genital or anal pain, irritation, and/or bleeding
- Torn, stained, or bloody clothing
- New fear of specific places or people

While the above may be signs of sexual violence, these behavioural changes and physical symptoms may be linked to other stressors or concerns too such as bullying, depression, or anxiety.

Pay attention to verbal and non-verbal information shared by women labelled with intellectual disabilities about their experiences.



## Nadia's experience

Nadia used to enjoy attending her day program but starting to say she "didn't feel like going." After her family questioned why, Nadia tells them that a staff member there touched her in a way that felt bad. Her family brings Nadia to a sexual assault centre for support. Nadia goes to a waiting area that is bright and busy which she finds overwhelming. Her Mom suggests that Nadia focus on some pamphlets to distract herself, but she says they are confusing. When a counsellor comes to speak with Nadia, she focuses on her phone instead.

# A trauma- and violence-informed response to Nadia's experience could include:

- Share materials in diverse formats (e.g., plain language, audio, video, comics).
- Offer spaces that reduce sensory input (e.g., quiet, dim, calming colours, scent-safe).
- Invite Nadia to share what feels like a safe space to talk including when and who is present.
- Communicate in a way that feels comfortable to Nadia including drawing or poetry.
- Follow up according to protocols and inform Nadia what to expect.
- Present options and ask Nadia what she would like to happen next when possible.
- Find out what Nadia enjoyed at the day program and how she can continue those activities.
- Connect with organizations to receive additional information and supports (e.g., disability rights organizations, peer support groups).
- Recognize Nadia's experience within a system of structural ableist violence that must be challenged.

# These Are the Facts: Countering Myths about Women Labelled with Intellectual Disabilities

Myths about women labelled with intellectual disabilities contribute to difficulties in securing supports and justice. Challenging these myths with the facts is essential to upholding the rights of women labelled with intellectual disabilities.



# Fact: Women labelled with intellectual disabilities have the same romantic desires as non-disabled people.

Myths surrounding women labelled with intellectual disabilities can hypersexualize and desexualize them. These contradictory myths make them more vulnerable to experience sexual violence, undermining justice and support-seeking of survivors.

Hypersexualization is seen in rape myths commonly applied to women. Such myths focus on what women are wearing or their sexual history. Rather than exploring if consent was denied or granted in a specific encounter, a stereotype is applied that the women 'wanted it.' For women labelled with intellectual disabilities, myths of hypersexualization have been used to undermine justice as law enforcement officials consider them as either always consenting due to their 'animal instinct' or not able to control their strong sexual impulses.<sup>15</sup> Further, women labelled with intellectual disabilities who are Black, racialized, or Indigenous may face additional myths of hypersexualization due to assumptions and stereotypes about their race and culture.<sup>16</sup> Myths of hypersexualization are present in court cases like R. v. Harper where the survivor labelled with an intellectual disability being "too friendly towards males" became a focus.<sup>17</sup>

Desexualization is a contradictory myth that is also sometimes used against women labelled with intellectual disabilities to view them as asexual and infantilized 'eternal children.' The mistaken and harmful belief is that women labelled with intellectual disabilities are either too naïve to desire sexual expression or are not seen as desirable to sexual partners. Consequently, the sexual rights and needs of women labelled with intellectual disabilities are often disregarded resulting in for instance, a lack of sexual education and a lack of acknowledgement of sexual violence.

Recognize that women labelled with intellectual disabilities have diverse sexual orientations and needs.



Asexuality is a valid sexual orientation that some women labelled with intellectual disabilities identify with. What is essential is to not assume that an individual is asexual, thus desexualizing them.

# Fact: Women labelled with intellectual disabilities have the right to share their experiences of violence.

Society holds discriminatory assumptions that "complainants in sexual assault trials are inherently more untrustworthy than witnesses in any other trial where credibility is an issue.<sup>18</sup> Due to sexist beliefs, women especially have been seen to be less credible than men.

Women labelled with intellectual disabilities further face harmful and inaccurate assumptions that due to their disability label, they cannot be believed.



An example is <u>R. v. D.A.I.</u> where a woman labelled with an intellectual disability reported that her stepfather sexually touched her. At the trial, the survivor's competence was challenged as it was alleged that she did not understand the oath to tell the truth and subsequently, her evidence was denied. At issue was the expectation that people labelled with intellectual disabilities must explain the abstract meaning of the truth – an expectation only made of people labelled with intellectual disabilities, not all witnesses. In a Supreme Court appeal, DAWN and the Women's Legal Education and Action Fund (LEAF) intervened against this discriminatory expectation. As a result, the majority of the Supreme Court held that people labelled with intellectual disabilities only needed to promise to tell the truth (as opposed to explain it) and ordered a new trial.

Still, there remains discriminatory beliefs about the credibility of women labelled with intellectual disabilities. Part of the issue is a lack of understanding about intellectual disabilities from interviewers (e.g., police, lawyers) and a lack of accommodations. Women labelled with intellectual disabilities have shared that open-ended questions tend to work better for them (e.g., "Tell me what happened on...") compared to closed-ended questions. <sup>19</sup> In addition, the presence of a support person or trained intermediary that the women labelled with intellectual disabilities selects can support their understanding and comfort.

Legal responses and survivor supports must consider the diverse communication styles and needs of individuals. There is a further need to challenge the multiple, compounding barriers faced by survivors sharing their experiences of sexual violence. For instance, Black women labelled with intellectual disabilities can be subject to racist beliefs that they are being aggressive or disrespectful.<sup>20</sup>

Work with women labelled with intellectual disabilities to promote and support self-advocacy.

Legal Advocacy to End Discrimination

Against Women with Disabilities

This Webinar brought together representatives from DAWN Canada, ARCH Disability Law Centre, and LEAF to discuss their ongoing legal advocacy regarding gender-based violence against women with disabilities. After accessing the Webinar and completing a quiz, you can gain a Certificate of Completion.

## **Barriers to Addressing Sexual Violence**

All survivors of sexual violence face barriers to reporting the violence that they experience including common rape myths and discriminatory views. For women labelled with intellectual disabilities, their position as an *intentionally marginalized group* produces specific and heightened barriers. Dr. Roberta Timothy defines intentionally marginalized communities as those groups of people with daily experiences of harm living under the power and control of state-sanctioned violence. Learn more about intentional marginalization and violence in Canada from this Webinar.

## **Barriers include:**



#### **Further harm:**

All people reporting sexual violence may experience further harm from not being believed to reliving their trauma. Intentionally marginalized people may also experience compounded harms like police brutality, deportation, and child apprehension.

Women labelled with intellectual disabilities may experience all these harms in addition to fears around institutionalization, losing their caregiver, retaliation from a service provider, loss of financial or social support, and facing stigma from reporting to those who do not understand intellectual disabilities.

# Lack of understanding about intellectual disabilities:

When attempting to share their experiences of sexual violence, women labelled with intellectual disabilities may interact with many services that are not familiar with intellectual disabilities including those in the justice, education, health, and gender-based violence sectors. As such, they may face discrimination by those who lack the knowledge, confidence, and necessary.

## Pity:

Pity is often applied to those who are considered weak or inferior. Disability scholar Dr. Michael Gill shares how: "There is a difference between expressing pity that a person with an intellectual disability was sexually abused and demanding justice through an expression of anger." Rather than pity, women labelled with intellectual disabilities have a right to respect and equality. resources to work with them and meet their individual needs.

#### Isolation:

Isolation can result in making women labelled with intellectual disabilities more reliant on those in their lives like caregivers or support workers, and thus make it more difficult for individuals to report or leave violent situations involving those individuals. Further, isolation can result in increased risk of sexual exploitation as those isolated may have a need for connection and resources that is being denied.

#### **Denial of sexual expression:**

Sexual violence is prominent in places where shame, secrecy, and guilt about sex are prevalent. People labelled with intellectual disabilities are often forced into environments where their sexuality is denied. That includes sanctioned living spaces that prohibit sexual expression including restrictions of overnight guests, denial of privacy, or punishment for sharing sexual experiences. These sanctions may be done with the mistaken belief that this is protecting the person. However, because of others denying their sexual rights, people labelled with intellectual disabilities may have sexual contact in less safe spaces like outside or another individual's home. It may also lead to secrecy about experiences of sexual violence and a failure to recognize signs of sexual abuse.<sup>22</sup>

**Learn more:** This webinar with Dr. Alan Martino draws on his work in Ontario with 46 adults labelled with intellectual disabilities discussing how they are kept out of sexual spaces.

# Lack of sexual health and healthy relationship education:

Many women labelled with intellectual disabilities are denied access to accessible and inclusive education on sexuality. If sexual education is offered, the focus is often on danger and prohibition.<sup>23</sup> A lack of adequate sexual health education has been linked to increased chances of sexual assault and decreased ability to recognize sexual violence.<sup>24</sup>

Find out more in this report on Sexual Health and Sexual Education for Women with Disabilities: Challenges & Opportunities for the Disability Justice Network of Ontario.



## **Paternalism Versus Autonomy**

Paternalism occurs when an individual interferes with the decision-making capacity of another person and claims they are doing so to benefit or protect the person. For women with disabilities, paternalism is deficit-focused as it views them as unable to make their own decisions to wrongfully justify taking away their decision-making power.

In the context of women labelled with intellectual disabilities, paternalism is hyper-present and manifests in various ways including:<sup>25</sup>

- Guardianship and substitute decision-making power
- Segregation (e.g., through "special classes")
- Institutionalization
- Discriminatory judgements about the ability to consent or not consent
- Questioning their competence
- Denying wants and needs (e.g., privacy, social connection, sexual intimacy, financial resources)

When women labelled with intellectual disabilities resist paternalism and assert their rights, they may face severe consequences, including criminalization.<sup>26</sup>

### Learn more: <u>House of Horrors</u> by the Self Advocacy Federation

This film shows paternalism as it is present in the lives of women labelled with intellectual disabilities who live in a group home including their lack of control over medication, outings, finances, and bathroom access.

In comparison to paternalism, autonomy promotes the choice of women labelled with intellectual disabilities to control of their own lives. Research finds that decision-making over one's life is important for quality of life.<sup>27</sup>

Autonomy does not mean that people can do whatever they want, whenever they want – that is unrealistic for the vast majority of people. Rather, autonomy requires that people are not unduly and unfairly controlled by others.

Neither does autonomy mean that people can or should do everything on their own. All people seek the advice and consultation of others in making decisions (e.g., friends, parents, accountants). Supporting the decision-making of women labelled with intellectual disabilities can involve:

- Offering opportunities to make choices and express preferences.
- Building decision-making skills (for instance, gathering information, identifying values, and making timelines).
- Exploring options and potential consequences with the person.
- Providing time to consider options.
- Creating spaces to supportively discuss and assess past, present, and future decisions without judgement.
- Challenging societal barriers that restrict the decision-making of women labelled with intellectual disabilities.





## **Spotlight: Sexual and Reproductive Rights**

Eugenics is a pseudoscience and movement that falsely promotes the improvement of the human race based on the exclusion (through reproductive control, sterilization, and institutionalisation) of people who were deemed undesirable or unfit.

Eugenic practices have occurred historically in Canada and continue today resulting in the denial of sexual and reproductive rights for oppressed groups including women labelled with intellectual disabilities, Indigenous women, Black and racialized women. Eugenic practices have included the forced sterilization of people with disabilities due to ableist beliefs that people with disabilities are not genetically 'desirable.' Women with disabilities as well face sexist expectations that women should be the only ones to take birth control measures.

Self-advocates have drawn attention to the violence committed against women labelled with intellectual disabilities. Leilani Muir successfully filed a lawsuit for the forced sterilization she experienced at the Michener Centre in Red Deer, Alberta in accordance with the Sexual Sterilization Act of Alberta allowing sterilization of those labelled with intellectual disabilities. She was sterilized at age 14 without being told and later found out when she left the institution and attempted to start a family. Leilani's experience is one example of a broader system of reproductive coercion.



Click here for a video of Leilani Muir sharing her story.

<u>Reproductive coercion</u> can be committed by intimate partners, family, caregivers, and systems that coerce women labelled with intellectual disabilities to undergo unwanted reproductive measures. It contributes to the denial of sexual rights and autonomy for women labelled with intellectual disabilities. People labelled with intellectual disabilities face the greatest barriers to sexual and reproductive health and are more likely to experience reproductive coercion.

Globally, women and girls with disabilities remain one of the groups least likely to have access to sexual and reproductive rights. Barriers include limited contraception options, inaccessible equipment/facilities, and a lack of knowledge about disability from health care providers.<sup>29</sup> As a result of these barriers, women with disabilities are more prone to coercion, abortion, and loss of custody.<sup>30</sup>



Further barriers for girls and women with intellectual disabilities include: a lack of training and expertise among healthcare professionals, hesitancy among service providers to address sexual health, a lack of knowledge rooted in limited opportunities for sexual education, disability related barriers, a high occurrence of sexual assault, a lack of awareness and dialogue around human rights and sexual expression, undertreatment where menstrual disorders are concerned, and continued systemic barriers.<sup>31</sup>

Increase access and equity for women and girls labelled with intellectual disabilities by supporting self-advocacy so persons with disabilities become partners in their care. Also, teach healthcare providers about disability to avoid ignorance and surprise that persons with disabilities are sexually active.<sup>32</sup>

# Prevention At All Levels: A Socio-Ecological Approach to Addressing Sexual Violence

Preventing sexual violence against women labelled with intellectual disabilities requires overlapping action at multiple levels:

#### Individual

- Create opportunities for ongoing sexual health and healthy relationships training throughout the life course.
- Build self-advocacy skills.
- Enable greater control and decisionmaking including selecting personal support workers.
- Promote access to diverse sexual spaces.

## Relationship

- Enhance capacity of families, friends, and caregivers on sexual health and sexual expression.
- Create peer support groups that are reflective of diverse identities.
- Ensure there are opportunities for healthy and safe sexual expression (e.g., overnight guests).

## Community

- Promote inclusion of people labelled with intellectual disabilities at community events and activities.
- Involve multiple organizations (e.g., violence, health, justice) and communities (e.g., faith, cultural) in training led by disability organizations and selfadvocates.
- Enhance multisector responses and collaboration.

## Society

- Invest in survivor-centered and intersectional supports.
- Challenge ableist social attitudes through awareness campaigns.
- Address underlying factors contributing to violence including barriers to housing, employment, and financial resources.
- Conceptualize alternative approaches to justice that are transformative and restorative to meet the needs of survivors.

# "Nothing About Us, Without Us": Empowering and Centering Women Labelled with Intellectual Disabilities in Ending Sexual Violence

Women labelled with intellectual disabilities must be centered in work addressing violence against them, and they must be included in all decisions in that work. Meaningfully engage with the voices, lived experience, needs, and strengths of diverse women labelled with intellectual disabilities, including those who are Indigenous, Black, and racialized, part of the 2SLGBTQIA+ community, and those living in poverty.

### Below we offer some considerations for getting started:

## Promote Ongoing, Accessible, and Sex-Positive Sexual Education

Education opportunities on sexual health should be comprehensive, accessible, and affirming and include information about gender and sexual identity, sexual and reproductive rights, personal boundaries, consent, and healthy relationships. Research has found that effective tools in trainings with people labelled with intellectual disabilities includes social and safety skills, role-playing, and story telling.<sup>33</sup>

In recognition of different learning styles and needs, sexual education should be offered in a variety of plain language formats including in-person training, written resources, podcasts, videos, plays, and games. One promising practice is the potential of peer education and support. Peer education designed and delivered by people labelled with intellectual disabilities has been explored in Australia with the <u>Sexual Lives & Respectful Relationships program</u>.

#### **Create Diverse Physical and Virtual Sexual Spaces**

Sexual spaces that allow for love, intimacy, and pleasure can support the sexual expression and equal rights of women labelled with intellectual disabilities. These spaces must be "physically, financially and culturally accessible to foster environments in which disabled sexualities are celebrated."<sup>34</sup> Such spaces are especially necessary given the isolation and control experienced by many women labelled with intellectual disabilities. Efforts have already been made to create these spaces including:

- <u>SexAbility:</u> A sexual health program for people labelled with developmental disabilities consisting of weekly workshops on masturbation, consent, and healthy relationships.
- <u>Compass</u>: A social group for gender-diverse youth labelled with intellectual disabilities to explore their sexual identities and come together as chosen family.
- Rainbow's Pride in Scarborough: A grassroots community collective serving youth with disabilities who are LGBTQ+ from diverse communities (e.g., newcomer, immigrant, refugee, racialized) led by Rainbow Hunt, a Trans woman labelled with an intellectual disability.



### **Engage in Person-Centred Approaches to Support and Justice**

Person-centred approaches focus on individuals' specific needs and strengths. For example:

- Build and promote self-advocacy. An example is the <u>Safety Includes Me</u> train-the-trainer course made with women labelled with intellectual disabilities who have experienced violence. It supports self-advocates' sharing information around healthy relationships.
- Allow time for relationship building with sessions spread over multiple times where people can ask additional questions and have support available.<sup>35</sup>
- Create plain language resources that help folks understand complex processes, especially as they relate to justice.<sup>36</sup>
- Use communication styles the person prefers including artwork, dance, acting, and music.<sup>37</sup>
- Avoid labels and stigmatizing language.
- Engage in self-accountability.



#### **Offer Peer Support Programs**

Due to societal discrimination, peers may be the only people women with disabilities trust. <sup>38</sup> Peer support is thus critical. Through peer support, the emphasis is on community and lived experience as opposed to traditional medical models of support that tend to be isolated, individualized, and ran by non-community members.

Benefits of peer support include empowerment, reduced social isolation, increased sense of acceptance, reduced feelings of stigma, and hope. Peer support can also create opportunities to develop leadership among women and girls with disabilities and to create systemic change.



#### Learn more:

Rooting Resilience: A Needs Assessment
about Women with Disabilities, Gender-Based
Violence, and the Potential of Peer Support
Services by DAWN Canada

This needs assessment uses research, grey literature, and existing programs and practices to examine the potential of peer support for women and girls with disabilities experiencing and/or at risk of gender-based violence.

gbvlearningnetwork.ca

#### **Collaborate to Envision Accessible Futures for All**

As opposed to operating in silos, there is a need to work collectively and utilize shared expertise. Collaboration must include women labelled with intellectual disabilities along with the multiple services accessed in their intersectional lives including the sectors of gender-based violence, health, and disability along with cultural, faith, and identity groups. For instance:

- Self-advocates can further build the capacity of the gender-based violence sector to support survivors labelled with intellectual disabilities through ongoing staff training. Learn more about making anti-violence services accessible in this podcast series with selfadvocates labelled with an intellectual disability.
- Develop and implement accessible services and programs. Relevant to accessible shelters, find inspiration in this Issue on <u>Women with Disabilities</u>
  - and D/deaf Women, Housing, and Violence created by the Learning Network and DAWN Canada.
- Support disability justice efforts led by people with disabilities that recognizes the importance of interdependence, care, and mutual aid. Learn more about disability justice in <a href="this presentation">this presentation</a> by Leah Piepzna-Samarasinha.



#### **Build Legal Accountability through Community Expertise**

Women and girls labelled with intellectual disabilities continue to face barriers at every stage of the criminal justice process, where survivors are often not believed and dismissed by law enforcement officials, including police officers, attorneys and judges, because of negative stereotypes associated with their disabilities.<sup>39</sup> Significantly, women and girls labelled with intellectual disabilities also experience more fear of reprisals if they disclose and have reported higher rates of re-traumatization through the criminal justice process.<sup>40</sup>

Community agencies can reduce barriers and support the knowledge of law enforcement officials by intervening in legal proceedings. For instance, since 1995, DAWN Canada has served, either independently or in coalition, as a frequent and respected intervenor in various legal proceedings, including at the Supreme Court of Canada (SCC), especially in lending their equity-related insights and expertise with respect to sexual violence against women and girls with disabilities. For example, DAWN Canada participated as intervenors in <u>R. v. DAI</u> and <u>R. v. Slatter</u>. In these cases, the SCC acknowledged the alarming fact that women and girls with intellectual disabilities are subject to disproportionately higher rates of sexual assault.

In 2022, DAWN Canada also submitted a Community Victim Impact Statement (CVIS) in relation to a case where a girl labelled with intellectual disabilities and her sibling were sexually assaulted and exploited repeatedly by their father. This CVIS aimed to amplify the lived experiences of women and girls labelled with intellectual disabilities regarding the cumulative gravity of harms that come from sexual violence against women labelled with intellectual disabilities and to spotlight the urgent need to recognize and end entrenched patterns of sexual violence against this community. The judge on this case explicitly mentioned the CVIS during the sentencing of the person who caused harm, who will spend 25 years behind bars.

#### **Continue Your Education With These Resources:**

- More Than a Footnote: A Research Report on Women and Girls with Disabilities in Canada by DAWN Canada
- The Equal Right to Decide: Tools for Community Change by the Institute for Research and Development on Inclusion and Society (IRIS)
- My Home My Community Initiative by Inclusion Canada and People First of Canada
- How to Hear Me: A Resource Kit for Counsellors and Other Professionals Working with People with Intellectual Disabilities by WWILD Sexual Violence Prevention Association Inc.



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