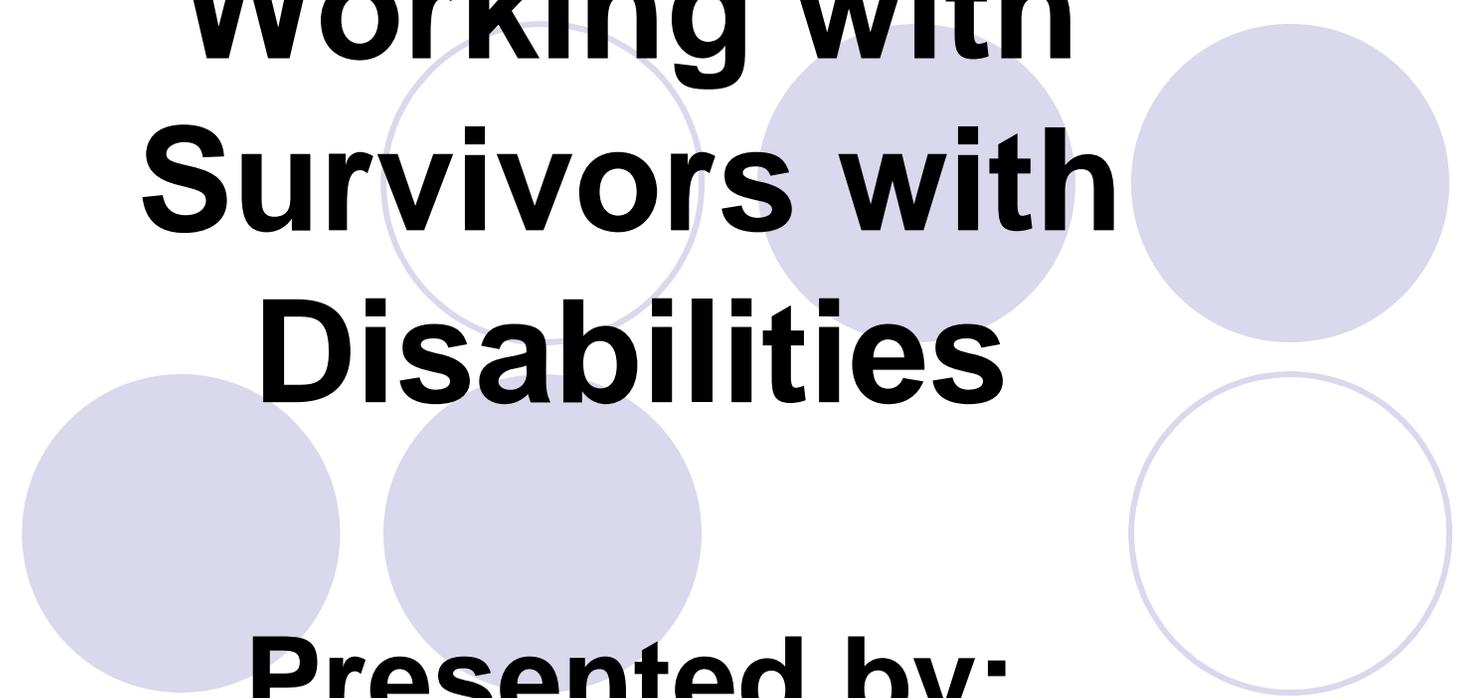


# **Working with Survivors with Disabilities**



**Presented by:**

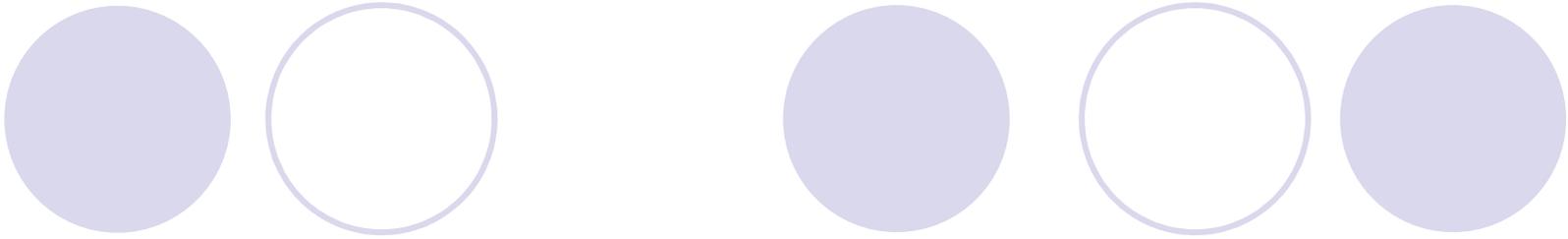
**IMPACT:Ability**



Working with Ability

# ● Triangle

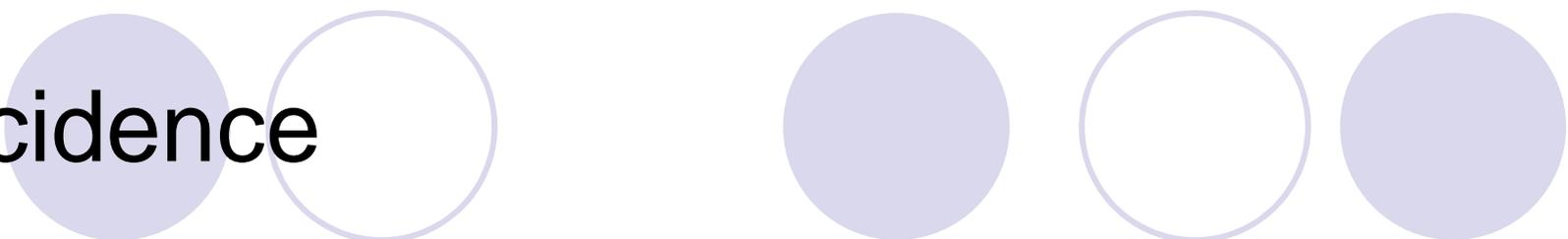
- An organization that provides youth and adults with innovative career, leadership, and safety skills needed to live more independent, dignified lives.
- Career Services secured or advanced 200 careers in the previous year.
- School-to-Career and Empowering People for Inclusive Communities (EPIC) initiatives equip high school students with disabilities and recent graduates with the tools to start careers and serve and lead in their local communities.



# ● IMPACT:ability

**An evidence-based initiative that equips people and organizations through...**

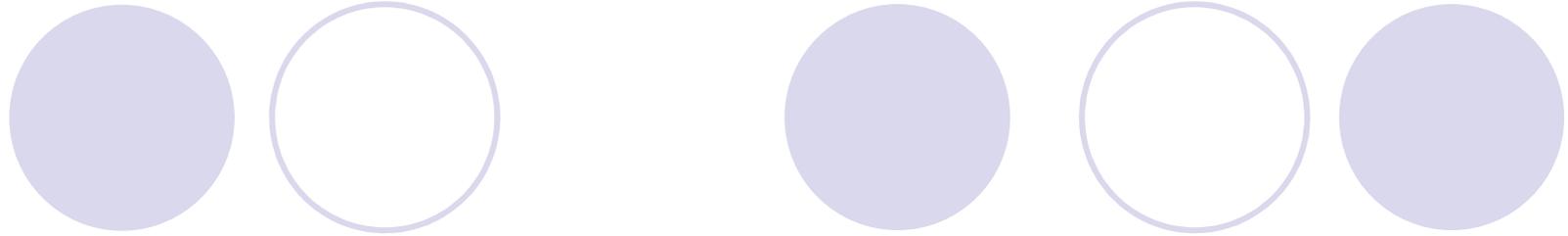
- **Safety and Self-Advocacy Classes:** young and adults with disabilities work with our highly trained coaches to learn how to use their voice and bodies to establish safe boundaries, discourage potential threats, defend themselves in a moment of danger and report unsafe interactions to at least two trustworthy people. IMPACT:Ability also partners with EPIC to provide self-advocacy training that empowers people to find their voice and learn to lead independent lives.
- **Abuse Reporting and Response Classes:** our inclusive training team equips teachers, nonprofit staff, and state employees to identify potential abuse, effectively report suspected abuse to proper authorities, and provide caring support and referrals for abuse survivors.
- **Providing Private Lessons, Consent Training, and Organizational Consulting:** we're proud to partner with self-advocates, families and organizations to prevent abuse and foster safe communities.



# Incidence

- More than ninety percent (90%) of people (both male and female) with developmental disabilities will experience sexual abuse at some point in their lives. Forty-nine percent (49%) will experience ten or more abuse incidents.

(Valenti-Hein, D. & Schwartz, L. (1995). *The Sexual Abuse Interview for Those with Developmental Disabilities*. James Stanfield Company. Santa Barbara: California)



- ***Approximately 21% of the Massachusetts population lives with a disability.***

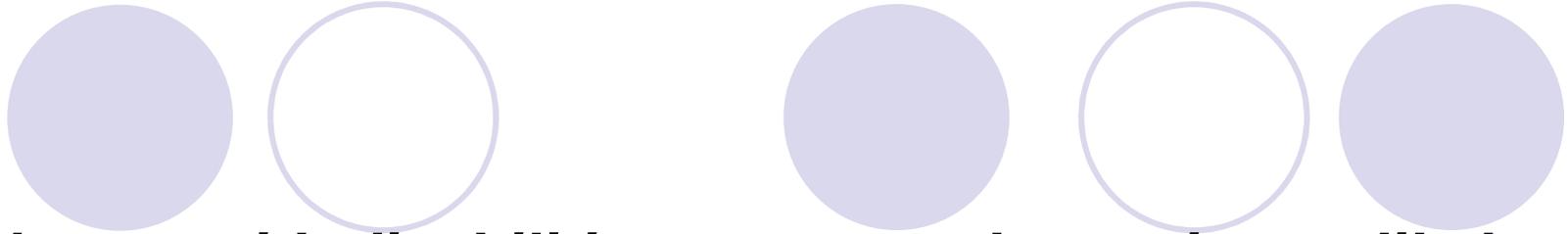
*Source: Massachusetts Dept of Public Health Behavioral Risk Factor Surveillance System as quoted in American Journal of Preventive Medicine*

- ***Adults with developmental disabilities are at risk of being physically or sexually assaulted at rates four to ten times greater than other adults***

*Source: Massachusetts State Prevention Team EMPOWER Report*

- ***In Massachusetts, men with disabilities are more likely to experience sexual assault than women without disabilities. Women with disabilities experience even greater rates of sexual violence.***

*Source: American Journal of Preventive Medicine*



- ***Women with disabilities are more than twice as likely as women without disabilities to experience unwanted sex with an intimate partner (20% compared with 8%)***

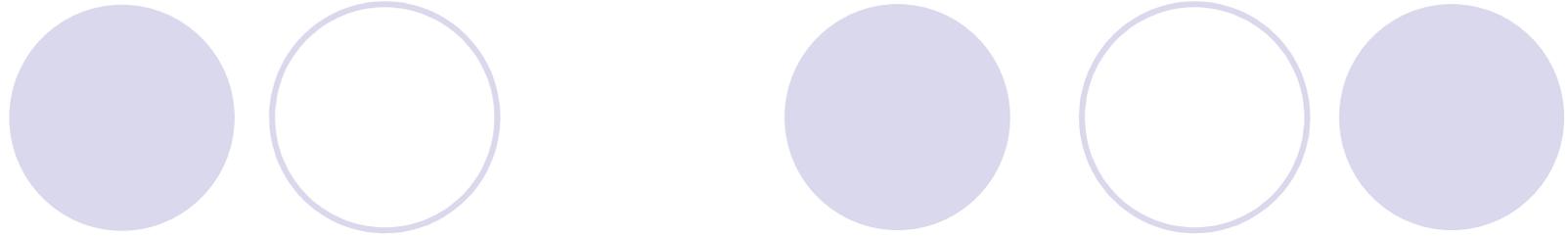
Source: U.S. Centers for Disease Control

- ***Deaf females have twice the risk of childhood sexual abuse compared to hearing female children, and deaf males have five times the risk as male hearing children.***

Source: Massachusetts State Prevention Team EMPOWER Report

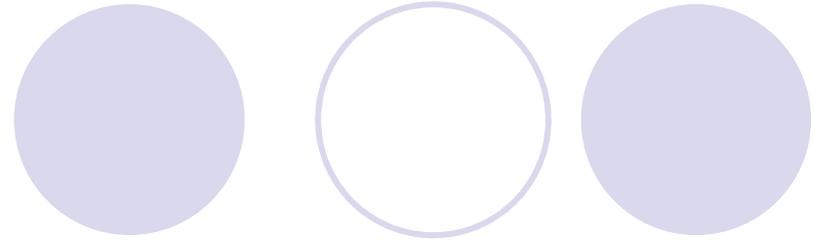
- ***In Massachusetts, 30% of women with disabilities experience domestic violence in their lifetimes as compared to 15% of women without disabilities***

Source: Massachusetts Department of Public Health



- ***The Massachusetts Disabled Persons Protection Commission received over 10,412 reports of abuse or neglect during Fiscal Year 2015 (up 10% from 2014) in addition to over 6000 informational calls. There were 913 death reports. They have 32 staff to respond to these reports.***

# Bob and Rachel



- Two scenarios show that individuals have different experiences, and these experiences influence responses to abuse.
- These scenarios show extremes, but pay attention to specific dynamics within each individuals' experience, and we will discuss these differences.
- Write down one thing you notice about each Bob's and Rachel's experiences.

**B**ob lives in a residence where all meals are planned by staff & he doesn't get any say in what he eats; Bob gets in trouble if he doesn't eat his meal.

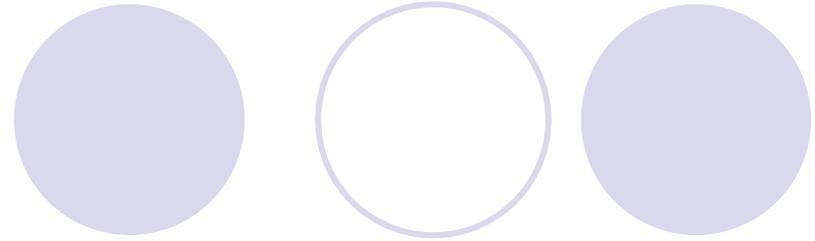
Bob attends a day program where all activities are chosen for him. Any time he asks to do a different activity, staff refuse or ignore him.

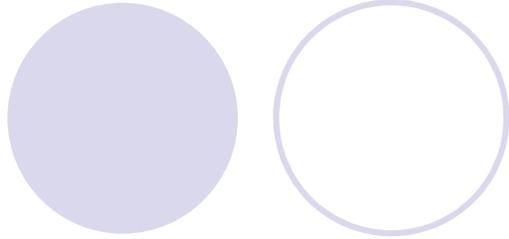
Bob asked case manager to move into their employment support program; case manager laughed: "There's no way you would ever make it to a job on time."

Bob met another participant whom he really liked and the other participant liked him, too. Staff didn't allow them to sit next to each other and made fun of them for having a crush on each other. Case manager told them it was not appropriate to visit each other on weekends.

A new neighbor moved in across the street from Bob. Bob's neighbor invited him over to watch sports, and when Bob would visit, Bob got to choose what they ate and what sports they watched, and Bob's neighbor gave Bob a lot of attention.

After a few weeks, neighbor started touching Bob on his shoulders and slapping Bob's back, and this made Bob feel uncomfortable, but Bob didn't say anything because he was afraid to lose this friendship. Neighbor began to sexually abuse Bob, but Bob didn't tell anyone because he didn't want anyone to think he was stupid.





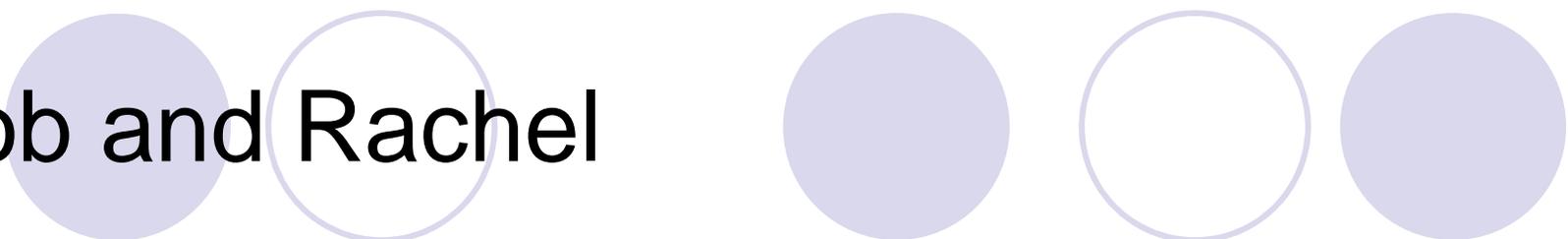
**R**achel's residential program has residents working with staff weekly to plan meals and snacks. Residents get to choose whether they participate in outings and activities, and when possible, alternative choices are available.

Rachel attends a supported employment program. She got to choose her training program; she finds it challenging and she enjoys it. When she makes mistakes, her case manager and supervisor support her and help her learn from what doesn't go well. When she cut her finger at her restaurant job, she was worried that she would be asked to leave, but instead they worked with her to help her improve her knife skills.

Rachel was offered classes on healthy relationships and sexuality, and learned skills to protect herself in case of potential violence or abuse. She learned to identify safe people to talk to in case that happened.

Rachel's transportation driver told her she looked pretty. Rachel said thank you for the compliment, but said that she wasn't comfortable with them saying that. Then the driver touched Rachel's breast when assisting with her seatbelt. When she got to work, Rachel told her case manager what happened, and the case manager listened, responded, and reported the incident appropriately.

# Bob and Rachel

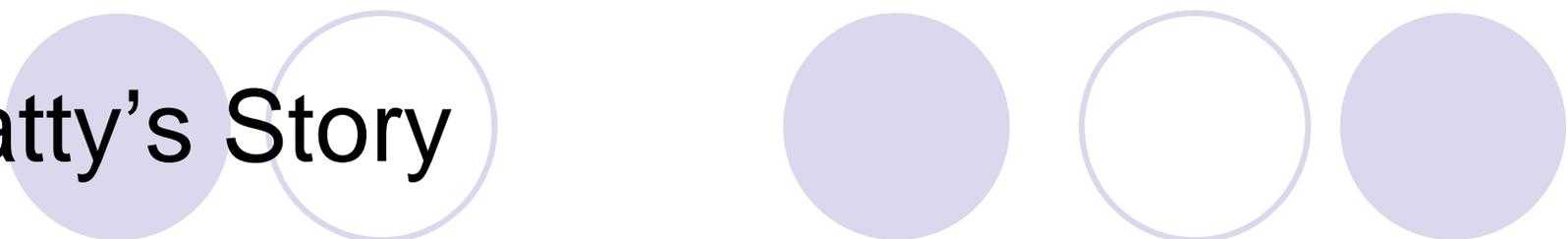


Discussion: list positive and negative interactions with Bob and Rachel from caregivers that influenced their experience of and response to abuse.

Remember: everyone's experience of abuse/trauma is different, and responses to abuse/trauma are as unique as each individual.

That said, there are some common themes we can see for people with disabilities, especially I/DD, when they experience abuse.

# Patty's Story

A decorative graphic at the top of the slide consists of two rows of circles. The top row has three circles: a solid light purple circle on the left, a white circle with a light purple outline in the middle, and a solid light purple circle on the right. The bottom row has three solid light purple circles.

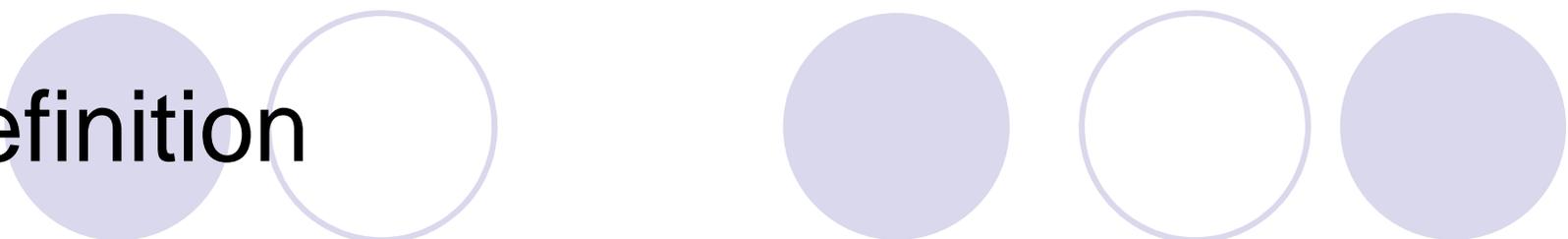
- Patty Quatieiri shares her personal story of abuse and how the system around her reacted.
- How is Patty's story different than those you have heard from people without disabilities? How is it similar?



# Patty's Story: video

[https://www.youtube.com/watch?v=NZvXNTARu8I&feature=em-share\\_video\\_user](https://www.youtube.com/watch?v=NZvXNTARu8I&feature=em-share_video_user)

*Pay attention to what aspects of Patty's experience is similar or different to experiences of individuals without disabilities.*

A decorative graphic consisting of six circles arranged in two rows. The top row has two circles: a solid light purple one on the left and an outlined light purple one on the right. The bottom row has three circles: a solid light purple one on the left, an outlined light purple one in the middle, and a solid light purple one on the right.

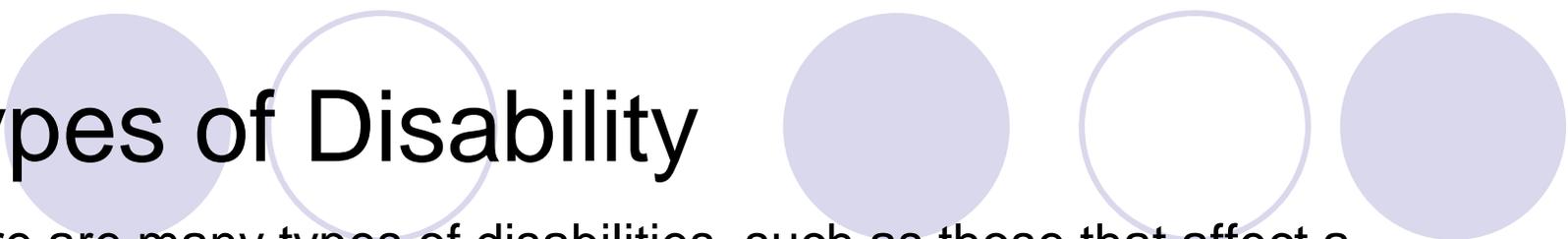
# Definition

## *What is disability?*

A disability is any condition of the body or mind (impairment) that makes it more difficult for the person with the condition to do certain activities (activity limitation) and interact with the world around them (participation restrictions).

- <https://www.cdc.gov/ncbddd/disabilityandhealth/disability.html>

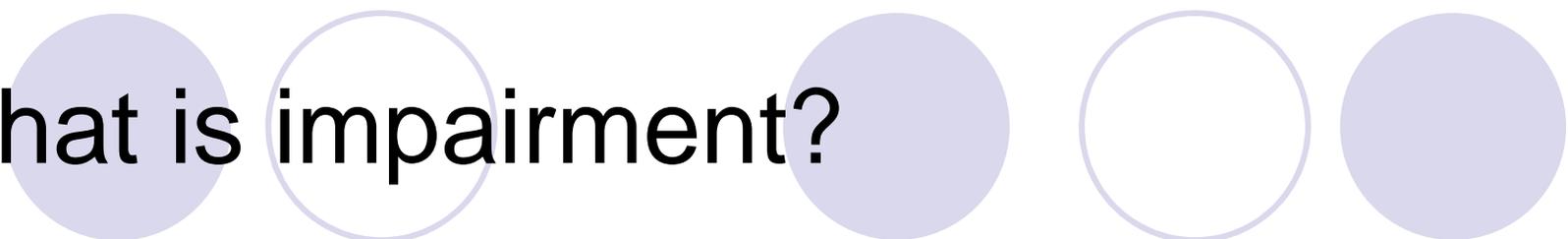
# Types of Disability



There are many types of disabilities, such as those that affect a person's:

- Vision
- Movement
- Thinking
- Remembering
- Learning
- Communicating
- Hearing
- Mental health
- Social relationships

Although “people with disabilities” sometimes refers to a single population, this is actually a diverse group of people with a wide range of needs. Two people with the same type of disability can be affected in very different ways. Some disabilities may be hidden or not easy to see.



# What is impairment?

- Impairment is an absence of or significant difference in a person's body structure or function or mental functioning. For example, problems in the structure of the brain can result in difficulty with mental functions, or problems with the structure of the eyes or ears can result in difficulty with the functions of vision or hearing.
- Structural impairments are significant problems with an internal or external component of the body. Examples of these include a type of nerve damage that can result in multiple sclerosis, or a complete loss of a body component, as when a limb has been amputated.
- Functional impairments include the complete or partial loss of function of a body part. Examples of these include pain that doesn't go away or joints that no longer move easily.

# What is the difference between activity limitation and participation restriction?

*According to the World Health Organization:*

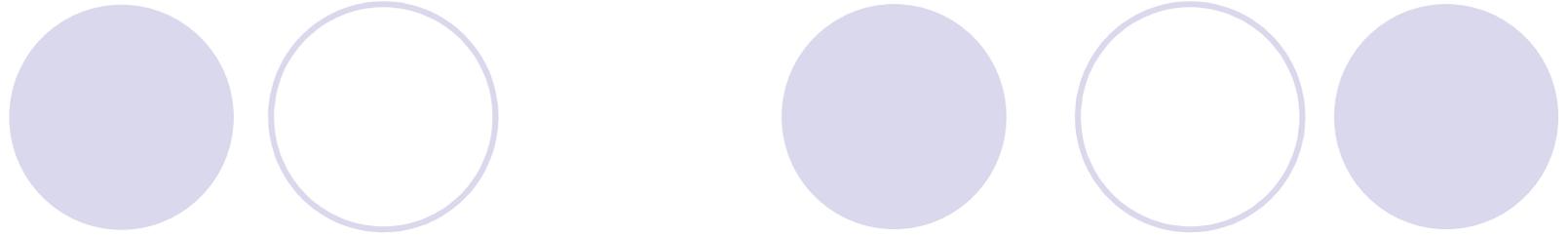
- **Activity** is the execution of a task or action by an individual
- **Participation** is a person's involvement in a life situation

<https://www.cdc.gov/ncbddd/disabilityandhealth/disability.html>

World Health Organization, International Classification of Functioning, Disability and Health (ICF). Geneva: 2001, WHO.

# Timeline of Legal/Historical Benchmarks in the US: a history of limited autonomy

- **1907** - Eugenic Sterilization Law expands. Indiana is the first state to enact a eugenic sterilization law—for “confirmed idiots, imbeciles and rapists”—in state institutions. The law extends to and is enacted in 24 other states.
- <http://ahrp.org/1944-1956-radioactive-nutrition-experiments-conducted-by-harvard-and-mit-on-disabled-children/>
- **1963** – U.S. President John F. Kennedy called for a reduction of individuals confined to residential institutions
- **1999** - U.S. Supreme Court rules that unnecessary institutionalization of people with disabilities constitutes discrimination and violates the ADA, right to receive benefits in the “most integrated setting appropriate to their needs”
- **2004** - First Disability Pride Parade in Chicago, designed to “change the way people think about and define disability, to break down and end the internalized shame among people with disabilities, and to promote the belief in society that disability is a natural and beautiful part of life.” Almost 2,000 attend.



**In what ways is  
your organization  
accessible?**



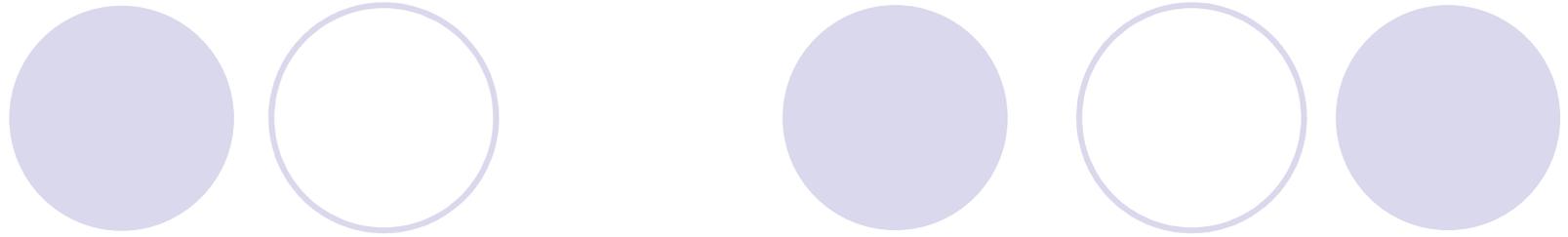
# Is your organization accessible?

- Is your staff trained to work with people with disabilities?
- Are you doing outreach to disability service agencies?
- Is your agency physically accessible?
- Is your agency easily reached by public transportation?
- Are your brochures simple and easy to understand? Are they in large font and Braille?



# Is your organization accessible?

- Are your grounding techniques accessible?
- Do your agency have access to TTY systems and interpreter services?
- Do you have pictures of people with disabilities on your promotional materials?
- Do you have people with disabilities on your staff?
- Does your agency have a non-discrimination clause when hiring?

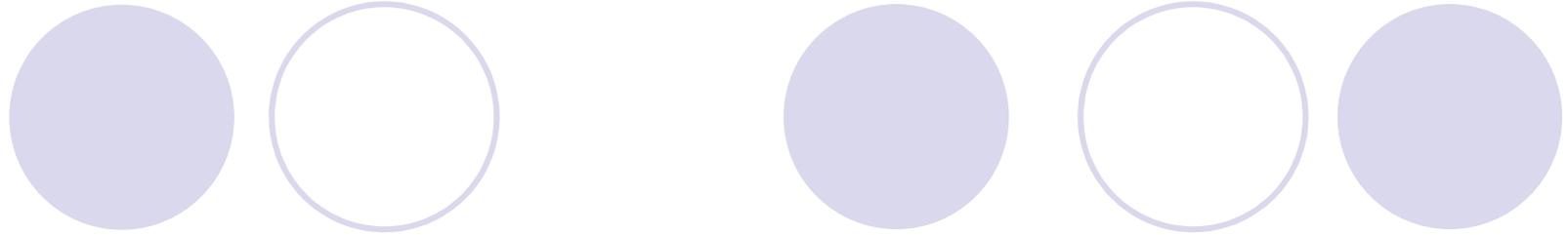


People won't access your services if they don't know they exist, can't get there, or they don't think it's for them.

**In addition to lack of accessibility, some of the major reasons people with disabilities don't report abuse are:**

- ***Fear that the abuser will retaliate against them***
- ***Fear of losing a caregiver***
- ***Fear of losing choice about their living circumstances***
- ***Fear that they won't be believed.***

Source: "Reporting Abuse: A Study of the Perception of People with Disabilities (PWD) Regarding Abuse Directed at PWD," Bernadette West, Ph.D. *Disabilities Studies Quarterly* Winter 2006, Volume 26, No. 1.



- With all these barriers...
  - **If someone with a disability reaches out to your agency to report abuse you are doing something right!**

# Stereotypes about disability as a whole

1. People with disabilities are different from fully human people; they are partial or limited people, in an "other" and lesser category.
2. The successful "handicapped" person is superhuman, triumphing over adversity in a way which serves as an example to others.

*I've lost count of the number of times that I've been approached by strangers wanting to tell me that they think I'm brave or inspirational, and this was long before my work had any kind of public profile. –Stella Young, Comedian and Disability Activist*

TED Talk by Stella:

[https://www.ted.com/talks/stella\\_young\\_i\\_m\\_not\\_your\\_inspiration\\_thank\\_you\\_very\\_much](https://www.ted.com/talks/stella_young_i_m_not_your_inspiration_thank_you_very_much)

3. The burden of disability is unending; life with a disabled person is a life of constant sorrow, and the able-bodied stand under a continual obligation to help them.



4. A disability is a sickness, something to be fixed, an abnormality to be corrected or cured.
5. People with disabilities are a menace to others, to themselves, to society.
6. People with disabilities, especially cognitive impairments, are holy innocents endowed with special grace, with the function of inspiring others to value life.

Source: Laurie Block, "Stereotypes about People with Disabilities," Disability History Museum, <http://www.disabilitymuseum.org/dhm/edu/essay.html?id=24> (10/6/13).



# Stereotypes, myths, and generalizations

- People with developmental disabilities are like “eternal” children
- People with autism are all “savants” in one area
- All people with autism hate to be touched
- People with Down Syndrome are all innocent and child-like
- People who are blind cannot see anything
- People who use wheelchairs have cognitive disabilities
- People with disabilities are either asexual or hypersexual
- All people with cognitive disabilities cannot consent to sexual acts
- People in wheelchairs cannot have sex

# Sex, Sexuality, and Socialization

- Many people with disabilities, particularly older adults, have never had sex education. Youth with disabilities may be receiving sex education, but it is often inadequate.
- Due to this lack of education, people with disabilities may not know the proper terms for their body parts or what their purpose is.
- People with disabilities are often taught that they should not be sexual.
- People with cognitive disabilities are often socialized to do as they are told or they will get in trouble.

# Interacting with people with disabilities

- ***Person First Language***

- It's important to put the person first – not define them by their disability or speak as though their disability is their most important characteristic.

## **Say**

Person with a disability

She has autism

He has a cognitive disability

People without disabilities

He has Down Syndrome

She uses a wheelchair

## **Instead of**

Disabled person

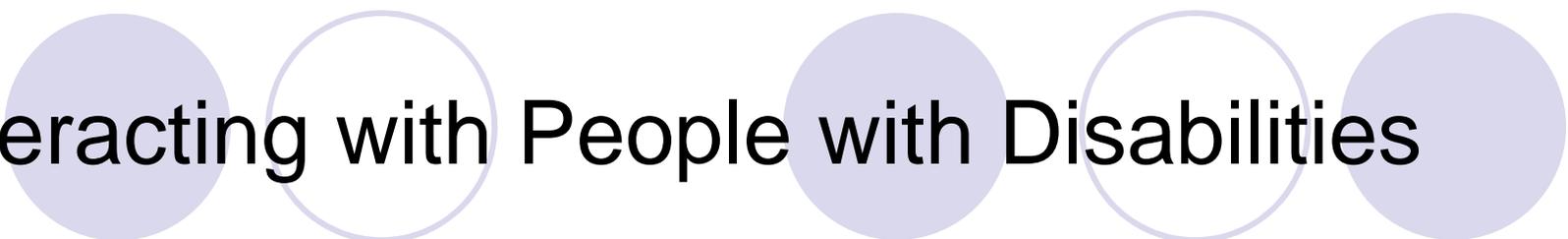
She's autistic

He's retarded

“Normal” people

He's Downs

She's wheelchair bound



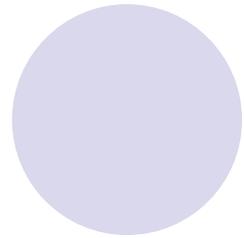
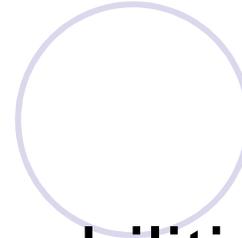
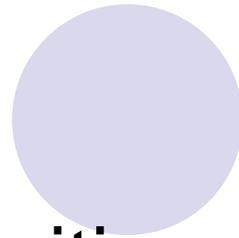
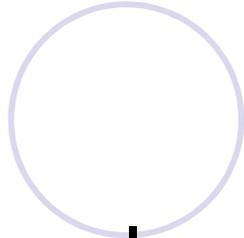
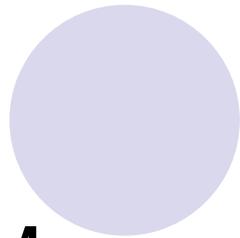
# Interacting with People with Disabilities

- Be aware of your own prejudice.
- Don't help without asking.
- Be prepared to access multiple learning styles.
- Consider a person's wheelchair or assistive device as part of their personal space.
- When speaking with a person in a wheelchair for more than a few minutes sit down to be at eye level.

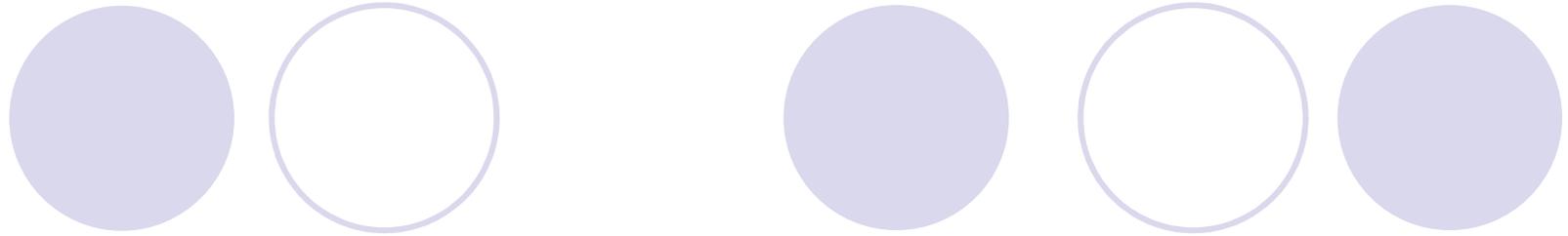
- 
- Presume Competence! Be aware of your tone.
  - When speaking with a person with a hearing impairment, do not yell.
  - Do not pet or distract a guide dog when it's working.
  - When speaking with someone who has difficulty speaking be sure not to rush them or try to finish their sentences for them. Be patient and don't pretend to understand.

The text is centered and surrounded by six light purple circles. Two circles are positioned above the text, and four are positioned below it. The circles are arranged in a staggered pattern, with two in the top row and four in the bottom row. The text is in a bold, black, sans-serif font.

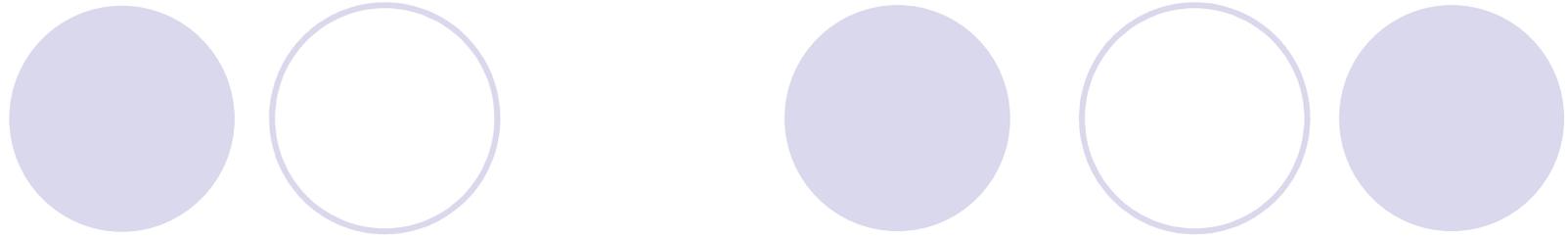
**What to be aware of...**



- Many people with cognitive disabilities have difficulty keeping track of timing and frequency of events, exacerbated by the fact that such a high number are trauma survivors.
  - Even though you need details to make a DPPC report don't continue to push them if they are unclear on when the abuse happened and for how long. **YOU CAN STILL MAKE A REPORT EVEN IF YOU ARE CONFUSED ABOUT THE DETAILS.**

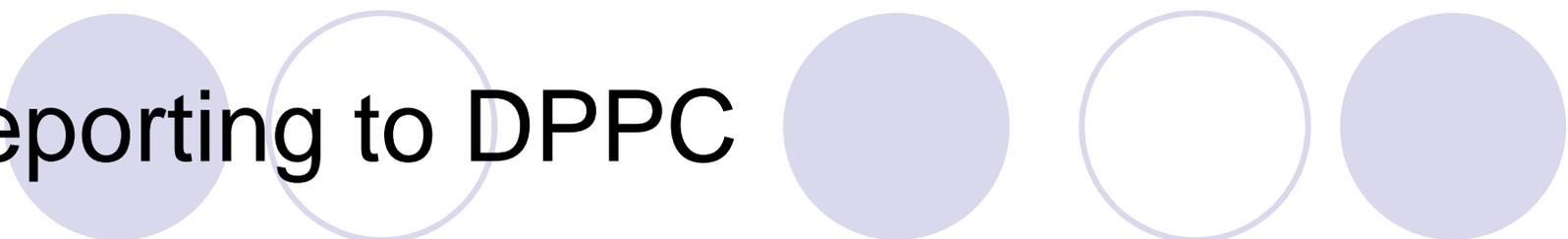


- Because of a lack of sex education and sheltered services, survivors with disabilities may not understand that what happened to them was “sexual”.
  - Be aware of your language: model and repeat the language the person uses.



- Survivors with cognitive disabilities may not recognize what has happened to them as abuse. Someone may have told them to call you or they may only think part of what happened to them was abusive.
  - If they are unclear about what part of their experience was abusive help clarify for them. Make sure to continue to stress that it is not their fault and they are not in trouble.

# Reporting to DPPC



- Abuse is reportable to DPPC if the person with a disability that reports is between the ages of 18 and 59 and the alleged perpetrator is a:
  - Guardian or other caregiver
  - Household member
  - Agency staff person
  - Transportation provider
  - Teacher or school staff person
  - Any other person who is in a care-giving role.
- ***When in doubt, report.***
- *Role play*

**REPORT SUSPECTED ABUSE  
OF PERSONS WITH DISABILITIES**



**24 hours - 7 days a week, including holidays**



*The Commonwealth of Massachusetts*  
**Disabled Persons Protection Commission**  
**(DPPC)**

**300 Granite Street, Suite 404, Braintree, MA 02184**

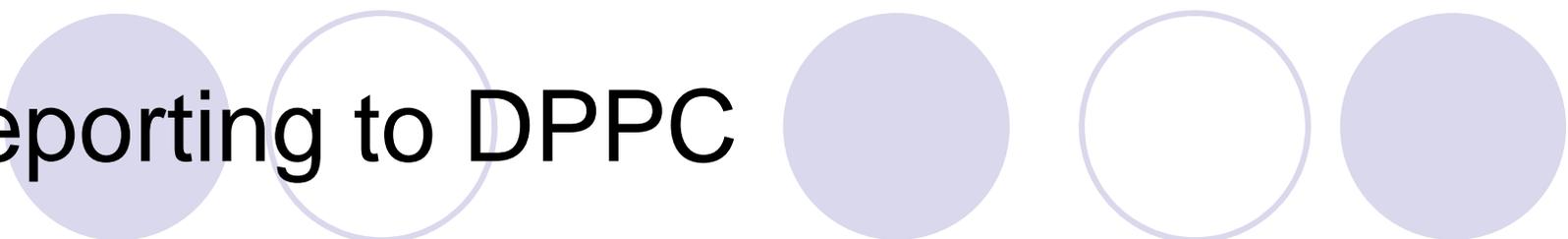
**Office Hours: 9:00 AM - 5:00 PM Monday - Friday**

**Phone: (617) 727-6465, (888) 822-0350 TTY FAX: (617) 727-6469**

**HOTLINE: (800) 426-9009 ■ (888) 822-0350 TTY**

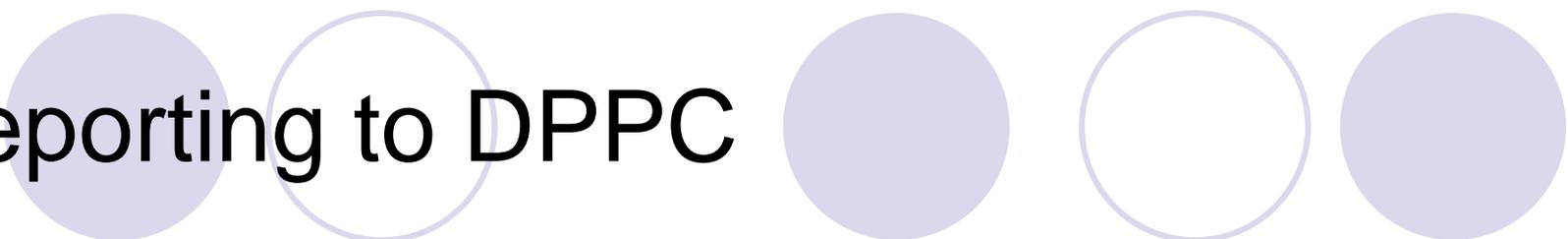
**WEBSITE: <http://www.mass.gov/dppc/>**

# Reporting to DPPC



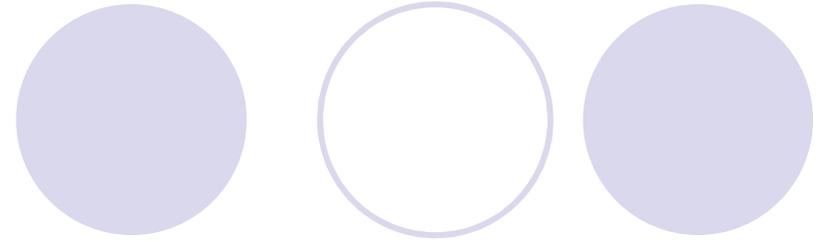
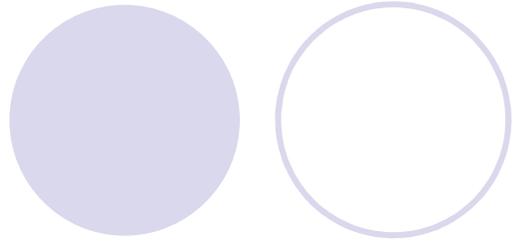
- Offer choices – People with disabilities are often expected to do what they are told without choice.
- Let them know:
  - You can call DPPC for them
  - They can call DPPC themselves
  - You can call DPPC together

# Reporting to DPPC



- Make sure to be clear that DPPC has a police investigation unit that may talk to them and their family and/or staff -  
**BUT THEY ARE NOT IN TROUBLE.**
- Ask the person if they have a *legal* guardian – If the guardian is not the alleged perpetrator you must\* inform them of the report.

*\*You must legally inform the guardian as a mandated reporter; individuals outside of this role can make anonymous reports*



● Questions?