‘Losing out on both counts’: Disabled women and domestic violence

Dr. Ravi K. Thiara
Centre for the Study of Safety and Well-being,
University of Warwick

R.K.thiara@warwick.ac.uk
Outline of Session

- How we frame the issue - intersectionality & social model to understand the social dis/location of disabled people/women.

- Prevalence of disability and DVA.

- Bring disabled women’s voices into the room.

- Reflect on what this means for our practice and for strengthening responses.
Intersectionality – not ‘Additive Approach’

Gender
+ 
Race
+ 
Dis/ability
=
Greater oppression
Intersectionality

• How the **intersection** of social categories - race, class, dis/ability - create experiences of oppression for individuals which are complex and contradictory.

• Allows examination of power and marginality, as relational processes, **across** the major social categories & also **within** each one.

• Re/production of power and marginality is complex and contradictory, reflected at the material and discursive levels – policies, procedures, practices.
a physical or mental impairment that has a substantial and long-term adverse effect on a person’s ability to do normal daily activities.

**UN** defines disability as

‘a long-term physical, mental, intellectual or sensory impairment which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others’.
Medical and Social Model

- **Medical Model** – a disability is a condition that impairs an individual from living a normal and full life; a condition that needs an intervention or treatment.

**Social Model** – separates impairment & disability. Impairment is a condition that creates difference in physical or psychological function. Disability is the interaction of the impairment with social & environmental restrictions. So the **way that society is organised, not the impairment itself, excludes disabled people from full participation in society.**
Prevalence - Disability

- 6% of children
- 16% working age adults
- 45% of those over state pension age

<table>
<thead>
<tr>
<th></th>
<th>Disabled women</th>
<th>Non-disabled women</th>
<th>Disabled men</th>
<th>Non-disabled men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experienced any domestic abuse in last year</td>
<td>15.7%</td>
<td>7.1%</td>
<td>8.4%</td>
<td>4%</td>
</tr>
<tr>
<td>Experienced non-sexual partner abuse in last year</td>
<td>11.3%</td>
<td>4.9%</td>
<td>4.5%</td>
<td>2.5%</td>
</tr>
<tr>
<td>Experienced non-sexual family abuse in last year</td>
<td>4.6%</td>
<td>1.7%</td>
<td>4.3%</td>
<td>1.4%</td>
</tr>
<tr>
<td>Experienced sexual assault in last year</td>
<td>2.6%</td>
<td>2.2%</td>
<td>0.9%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Experienced stalking in last year</td>
<td>7.6%</td>
<td>3.8%</td>
<td>5.3%</td>
<td>2.1%</td>
</tr>
</tbody>
</table>
Research Evidence

- Experience more abuse & in additional ways = multiplies vulnerability & isolation.

- German survey - exp psychological, physical & sexual violence 2-3 times more frequently; IPV was experienced 2-5 times more frequently.

- Canada & USA - 40% greater likelihood of DV & at risk for severe violence; 4 times the odds of experiencing sexual assault in past year.
• Limited research on women with learning disabilities – mostly on sexual abuse from variety of perpetrators.

• Handful of small qualitative studies in UK – serious forms of DVA/assaults & use of weapons; high levels of PS abuse & harassment; minimal responses from Police & SSs left women unprotected.

• Greater need for services - less provision = ‘lose out on both counts’
Multiple and complex abuse

As with non-disabled women, disabled women face the issue of naming the violence they experience and getting others to recognise it...Feminist investigations of violence experienced by disabled women within the home would highlight abuse in *Homes* as well as *homes* and by perpetrators who are paid carers as well as those who are family members (Morris, 1996).

- Extreme physical abuse, emotional degradation and humiliation linked to their disability, high levels of sexual violence, isolation, restricted to the house, control and intrusion into every facet of life.
Sexual Violence

- Spoke about this for first time

Yes I was exhausted, absolutely exhausted, shattered. And being deaf is hard work you know… … And he’d be furious and slap me and kick me awake. And he used to say: ‘Don’t you fall asleep on me, I want a wife, a real wife not an old woman’. And you know it was sex all the time…he would shout at me and then hold me down and I hated it, I hated it.

He raped me in front of my daughters…he threatened to cut me with a knife in my private area, he said that in front of my 7 year old

(McCarthy et al., 2015:5).
Abusive partner-carers - care or control?

Impairment-specific abuse, increased power and control:

I had an adapted ‘motability’ car, he would take it and disappear for days on end with it, leaving me stranded in the house, unable to get the shopping. But you don’t say anything as a disabled woman, I felt so ashamed that this was happening, so I didn’t tell anyone.

One time he actually took the battery out of this wheelchair I’m in now….I couldn’t move and if it wasn’t for a mutual friend that came to the house he wouldn’t have plugged it back in. And I don’t know how long I’d have been staying there with a dead battery.
Abusive partner-carers...

He’d insult me with all those names, you ‘spassy’ and so on, who’d want to marry you, just look at you…. Shouting insults, you cripple, all that sort of thing. Once when he was furious he threw me on the floor with my dinner and said that’s where you eat your dinner, that’s where you belong. Of course I couldn’t get up again.

He used to take the piss out of me because of my learning disability. He used to show me up in front of his mates if I couldn’t work something out. He’d say ‘you’re useless, you can’t do nothing’.

He gave me a wire and told me to strangle myself, he wanted me to suicide myself, he wanted me to die.
At night times, he’d be in the living room and I’d be in my bedroom and he’d shut the door on me so I couldn’t call him for anything, so he wouldn’t hear me. And if I wanted to like use the toilet or anything he’d tell me to just piss myself there and then.
Children

• Isolating women from children – preventing contact visits or telephone calls.
• Interpreted as women’s lack of interest by Social Services.

He wouldn’t even let me see my children….once I’d lost my kids [in care], he said ‘get rid of their photos, your kids are not coming back.
‘Caring Heroes’

I didn’t notice it… he loved doing things for me… I’d never been taken care of properly… It was all about caring and it was subtle. It was so subtle I didn’t notice it until it had got to a degree of critical… (Also) I was in the process of getting (daughter) back (from Social Services). I noticed through social services that they left me alone because he was around.

He was killing with kindness. If it wasn’t kindness, he was booting me in the stomach so no one could see the bruises. He learnt that pretty fast.
People pity him because he is taking care of you… people are reluctant to criticise this saint or to think he could be doing these terrible things. And possibly as well… people don’t really ‘see’ a disabled woman as a wife, partner, mother. So I think for some people it’s hard to think well this might be a woman who’s being sexually or physically abused by her partner, is experiencing domestic violence because disabled women don’t have sex, do they?
Financial Abuse & Paid Carers

• Taking control over women’s finances - using it to fund alcohol/drug dependency; denying money for their prescriptions & other essentials.

• Abuse by Paid Carers = widespread but poor professional u/s:

  There’s lack of understanding around privacy and that can be quite abusive when people don’t respect that and they think they should be privy to everything that you do in your life. If you buy something new and they see it in the wardrobe ‘Oh I’ve not seen that before’ … Listening into phone calls and knowing too much about your finances. That abuse of power is a big thing.

There’s a lot of relationships between the agencies and you can be left out in the cold, they talk without you and decide….
Responding to the Abuse

- Limited capacity to get away.
- Women don’t tell – ashamed, self blame.
- Issues for women with ‘no recourse’ and no English.

That is what I remember, you are a useless piece of shit, the verbal abuse. Power of that mustn’t be underestimated. If you’re disabled, it’s such a struggle to maintain a positive body image anyway…probably I thought that was all I was worth physically…
Women’s Help-Seeking

As a disabled woman, there is a reluctance to ask for help…you’re embarrassed and … people are already giving you lots of support, you don’t want to add to it. You don’t want to become a bigger burden.

• Many never sought help – actual and perceived barriers; reluctant to leave adapted housing; no information!
• DV services ‘not for them’.
• Needed a positive sign before disclosure.
Poor Responses to Women

- Who was ‘most unhelpful’ - 80% SSs; 50% police.

- Professionals tended not to ask!

- Few could think of any agencies that were ‘most helpful’ - possibly a DV refuge or disabled people’s organisation.
DV Services

- Services patchy or minimal & lack of resources big issue.
- Attitudes, disability equality awareness often poor among staff, DE training usually poor/ short.

Disability Organisations

- DV not seen as an issue for them to deal with / not their remit.
- Lack of resources.
- Lack of info about DV and training among staff common.
What can we do to strengthen our responses to Disabled women experiencing Domestic Violence?

- Internally
- In our partnerships
Be informed about disabled women’s needs.

Take advice from / consult disabled women.

Provide accessible well-publicised DV services that disabled women know about: tell women about them!

Do not threaten with institutionalisation.

Develop disability equality schemes with input from disabled women. Write us into the strategies.

Take disabled women seriously and do not patronise us.
Strengthening Responses

- Address lack of knowledge & understanding about experiences & needs of DW to better recognise and respond.
- Training across all professionals.
- Improve accessibility – internal scrutiny.
- NICE guidelines – introduce strategy to overcome barriers; better screening by health and social care and referral to specialist support.
- Integrated response across major service providers – increase opportunities for disclosure & support.
- Involvement of and engagement with disabled women.

This might be helpful


- *Don’t Put Up With It!*  
  DVD on domestic violence for women with learning disabilities. Available from Michelle McCarthy, Tizard Centre, University of Kent, Canterbury.
Some Developments

Care Act 2014

• Places adults on statutory footing; places victim at centre; empowerment and participation emphasised.
• Don’t talk about vulnerable adults anymore but recognise that it’s the circumstances that create vulnerability.
• Duty to make enquiries where abuse suspected and places responsibility on Safeguarding Adults.

Serious Crime Act 2015

• Recognises Coercive Control, not just physical violence. Financial abuse a big aspect of CC and abuse.
• Home Office Guidance on Coercive Control, 2015.
2 – 3 actions that I will take away from today....