

Nellies Position Paper on Accessibility: Women with Disabilities and Deaf Women

Principles

"Ableism" can be defined as a set of beliefs and practices that values able bodied persons over those with disabilities. Non-normative bodied people are viewed as unproductive, unworthy, and are excluded through individual, systemic and structural barriers. Ableism assumes that people with disabilities want to be 'cured' of their disability or that the lives of people with disabilities are horrific and undesirable.ⁱ Similarly, audism can be defined as the devaluation of people who are Deaf, deafened or hard of hearing. An example of this would be assuming that sign language is an inferior language and/or the cultural ways of Deaf people are somehow inferior.

Nellie's operates from an integrated Anti-Racism/Anti-Oppression Framework, which includes operating from an anti-ableist and anti-audist perspective. Nellie's recognizes that the positioning of particular bodies and ways of functioning as the norm is discriminatory to women with disabilities and Deaf women. This discrimination is a form of systemic violence.

"Disabilities" include visible and invisible disabilities such as, but not limited to, the following:

- Deaf, deafened or hard of hearing
- Mobility disability, chronic pain and/or illness
- Visual disability or blindness
- Conditions such as Epilepsy, HIV/AIDS, Hepatitis
- Mental Health disabilities
- Environmental, Cognitive and/or Developmental disabilities

Therefore, Nellie's views "Accessibility" as a range of strategies aimed at reducing the barriers faced by these marginalized communities.

Nellie's believes that all women should be viewed holistically through an intersectional feminist frameworkⁱⁱ. Nellie's believes that women with disabilities and/or Deaf women should not be classified solely on the basis of their disability or their lack of hearing. Nellie's is committed to an anti-oppressive approach that addresses social inequalities that women may face based on multiple social identities. Nellie's recognizes that each woman should command the autonomy to self-identify while existing in the continuous struggle against power and privilege. Identity is comprised of multiple and complex layers of social classifications in cultural, racial, and historical contexts. For example, a Queer, First Nations woman who is deaf, will experience historical and ongoing racism, heterosexism and homophobia, as well as sexism. Additionally, she will face audism based on the assumption that she should adapt to the hearing world, and it is likely that her deaf culture will often be denied in favour of a disability framework.

As part of this ongoing oppression, we recognize that women with disabilities experience a multitude of barriers when attempting to access services and shelter. In the case of a transgendered woman with mobility issues who requires emergency shelter, it is likely that she will face ongoing discrimination based on her gender identity. Furthermore, the shelter may be only partially accessible (e.g. the woman can access the shelter because there is a ramp and an automatic door but cannot access the laundry or washroom) and/or the organization may be unable or unwilling to provide adequate attendant care.

Ableism exists in overt and covert forms and is deeply embedded institutionally and structurally throughout society. Examples of ableism include but are not limited to:

- claiming that a space is physically accessible while in reality the bathrooms are located on another floor with no elevator or attendant,
- providing brochures and information that is only available in small print and not in any other form such as audio (i.e. MP3), visual or Braille
- installing safety mechanisms such as fire alarms without visual or non-audio cues

In general, many organizations view accommodation as a burden or concession as opposed to a “natural” consideration or standard.ⁱⁱⁱ Organizations may either lack TTY (teletypewriter used for typing telephone conversations), or adequate training for frontline staff. Provision of ASL and other interpreters is often overlooked in terms of budget. The attitude towards attendant care and/or service animals is often one of exceptions rather than an established set of policies and procedures. For these reasons, individuals are often segregated in order to address the issue of accommodation. For example, individuals are placed in special needs classrooms rather than being incorporated into traditional ones, or they might be placed in specific wings or wards within institutions such as prisons or mental health facilities.

Additionally, women and transwomen experience gendered violence at high rates regardless of class, age, racial or cultural identity, sexual orientation, religious or political affiliation. We know that women with disabilities experience violence at a higher rate than their non-disabled counterparts.^{iv} Violence in a context of disability is complex and multi-layered. It can be broadly defined as any behaviour or pattern of behaviour that is used to coerce, dominate or isolate an individual and deprives them of their liberty, whether it is public or private.

It has been reported that more than half of all women with a disability and Deaf women have experienced abuse or violence at the hands of caregivers, and that they endure abuse at the hands of family members or intimate partners for longer periods of time than women and children without disabilities^v. Stigma and discrimination— being the more evident forms of violence— underpin and compound all other forms of violence faced by women who experience disability. We recognize that increased levels of violence can also be attributed to the significant lack and availability of accessible services for women and children with disabilities fleeing and surviving violence.

Sexual violence perpetrated against women with disabilities can be understood as part of a larger system of subjugation and domination.^{vi} The way in which society sexualizes or denies the sexual identity of women with disabilities renders escape from sexual violence more challenging. Nellie’s recognizes and celebrates the sexual diversity of women with disabilities and Deaf women as being as complex and unique as that of the non-disabled community and may include queer orientations, poly-sexuality as well as asexuality.

We recognize the systemic violence inflicted upon women with disabilities and Deaf women through state policies of institutionalization, forced sterilization, denial of services, refusal to support a woman’s choice of caregiver through funding private care, the punitive and restrictive characteristics of social assistance programmes and the immigration system, and the lack of accommodation and legislation requiring accommodation in the workplace as well as educational institutions. Nellie’s recognizes that violence is consistently perpetuated through inadequate

training of city and private employees; through the denial of access to services, employment and resources; and through decreased funding for women's programming.

Women with disabilities and Deaf women are also discriminated against in the workforce. They may be denied employment due to the stigma associated with disability as well as organizations' and industries' failure to provide accessible workplaces.^{vii} Women with disabilities and Deaf women are excluded from participating in the economy but at the same time condemned for their lack of contribution. This kind of contradiction characterizes much of the belief system surrounding women with disabilities and Deaf women in the workplace.

Another example of this contradiction is the notion that people with disabilities should be autonomous to avoid burdening society, yet women are forced to rely on familial caregivers, social assistance and publically funded care due to inadequate funding, programs and other systemic barriers.

We acknowledge that women with disabilities and Deaf women have been historically oppressed by and excluded through many forms of violence and oppression such as anti-semitism, racism, slavery, colonization, misogyny, classism and psychiatrization. In addition to this, movements that seek to confront these forms of oppression such as the mainstream feminist movement and the civil rights movement have also excluded and been oppressive toward women with disabilities and Deaf women.

Women with disabilities and Deaf women are typically seen as helpless, childlike, dependent, needy, victimized, and passive, therefore reinforcing traditional misogynistic stereotypes of women. Nellie's recognizes this viewpoint exists and will ally with women with disabilities and Deaf women to enact strategies for change.

Position

Nellie's analysis and framework is shaped by a feminist, anti-racist, anti-oppression framework. Such an approach addresses ableism and audism (among other forms of oppression), and operating from this framework means that Nellie's is committed to addressing inequalities that exist within society. Ableism is the discrimination of a person based on that person's inability to function in a way that has been labelled as "normal". Ableism operates by devaluing a person based on their disability. Audism is discrimination based on a person's lack of hearing. Audism devalues forms of behaviour and communication that are seen as different from those who hear. For example, a person who is deaf but learns to lip read may be seen as more competent than someone whose first language is American Sign Language (ASL). We recognise ableism and audism as significant forms of oppression. Systemic discrimination and oppression based on race, class, sexual orientation, gender identification, age and ability must be addressed as part of an integrated approach to addressing the issues of women with disabilities and Deaf women when accessing supports and services. Our analysis also highlights the complexity of dominant power relations, including the ways these multiple forms of oppression work together to create differential impacts and diverse needs and issues for different groups of women.

Nellie's recognizes that ableism, audism and other forms of oppression are the result of deeply held beliefs and can be seen clearly through the two predominant historical and present day

models by which disability and deafness are most often viewed. These are the medical model and the charity model.^{viii} The medical model defines women with disabilities and Deaf women as being sick, diseased and in need of rehabilitation. When women are viewed this way, the focus is on their disability. They are perceived as passive recipients whose care is placed in the hands of the health care providers. For example, a woman fleeing violence may wish to receive services within her own community but is instead forced to seek assistance through another agency that may be either less convenient or less suited to her specific needs solely because it is wheelchair accessible. For Deaf women, the medical or pathological model surmises their experience as a disability or deficit. Many deaf people however, do not identify their experience as being a disability and consider their experience as being more of a cultural difference than a 'defect' or disability. How a deaf person perceives their experience is often directly connected to their skills in ASL and personal history within the community.

Using the charity model, women with disabilities and Deaf women are either deemed worthy or unworthy recipients of charity. The determination of "worthiness" depends on the nature of the disability, as well as the woman's social location. For example, a white middle class woman who acquires a disability through an accident will be seen as more worthy of service and support than a woman in the sex trade who is living with chronic illness such as HIV or Hepatitis C. Also implicit in the charity model is the expectation that charity will be received with gratitude.

Each model is oppressive in that it situates the cause of the oppression on the individual and does not look at the broader systemic issues. Additionally, each model promotes the idea that women with disabilities are to be pitied rather than valued. We reject this ideology. We believe that women with disabilities and Deaf women are valuable and diverse and must be engaged as active participants in all levels whether it be personal, public or political. Nellie's seeks to position itself as an ally to women with disabilities and Deaf women, and to create systemic change which acknowledges women's multiple identities and supports and values their diverse contributions to society.

Nellie's believes that ensuring programs and services are accessible to everyone is critical to addressing the barriers faced by women with disabilities and Deaf women. In addressing violence against women, it is critical that all women with disabilities and Deaf women have access to programs and services that respect their dignity and independence. Furthermore, it is imperative that women with disabilities and Deaf women have equitable access to programs and services. Therefore, it is necessary for individuals and organizations to proactively address barriers to accessibility, whether they are physical, structural or attitudinal.

Nellie's anti-ableist framework requires an understanding that accessibility is fluid and that it is not merely enough to develop policies and programs around the needs of women with disabilities and Deaf women without committing to revisiting those needs and making changes as needed. For example, upon intake a woman with a visual impairment will be asked about her accommodation needs and a support plan will be created with her leading the process. Later, it may be necessary to revisit the support plan based on changes in environment and her experience of accessing service.

Nellie's believes that alleviating the oppression of women with disabilities and Deaf women means dismantling barriers in all aspects of life including, but not limited to, health, education, housing, employment and the criminal justice system. In addition, it entails providing access to

equitable resources and supports that allow women with disabilities and Deaf women to advocate on their own behalf.

Nellie's believes that accessibility is about ensuring programs and services are equitable, based on the principles outlined in the Accessibility for Ontarians with Disabilities Act, 2005. These principles are: dignity, respect, equal access and independence. We believe that women with disabilities and Deaf women must be included in all decision making in order to ensure that the programs and services they receive are relevant to their situations.

Nellie's believes that accessibility holds many forms and is different for each woman. Accessibility is a continual process of reassessing the space and services to ensure they meet the needs of each individual woman. Accessibility is not a generic concept as it carries a unique experience and meaning for every person. Accessibility must be fluid to be considered fully inclusive. For example, a woman who uses a wheelchair for mobility would be able to navigate physical space differently than another woman who has similar physical mobility. A woman with a visual impairment may request reading materials in larger font, and another woman who has a visual impairment may request material in Braille.

Women must be seen as equal partners in creating a more accessible and inclusive environment that is disability and deaf positive.

Strategies for Change:

Board, staff and clients in service will be active in strategies for change. The work will be based on the organization's mission and informed by the work we do with women and children in our programs and services.

We will work with other women's group in coalition and partnership at the Municipal, Provincial and Federal level to address the issues of accessibility for women with disabilities and Deaf women.

We will maintain membership in women's organizations and other organizations that address accessibility for women with disabilities and Deaf women.

We will maintain membership in children's justice organizations that support equity and have an anti-oppression, anti-ableism approach working with women with disabilities and Deaf women.

We will participate in Social Justice actions that identify the need for women specific supports for women with disabilities and Deaf women from a diverse and individualized approach.

We will recognize and explore the unique cultural and linguistic experiences of the deaf community. Accessing services and information in an environment dominated by hearing professionals can be a challenge for deaf individuals. We will continue to provide an accessible environment for deaf individuals, explore community resources, discuss communication options, and learn about deaf culture and how to combat multiple overlapping forms of oppression.

We will actively seek to involve women with disabilities and Deaf women in the planning and implementation of programs and services with the intent to ensure accessible spaces and

programs for women participating in our programs and services.

We will involve women with disabilities and Deaf women in evaluations of all programs and services on an ongoing basis.

We will partner with community agencies serving women with disabilities and Deaf women.

We will respect the voices and experiences of women as experts and will initiate training for staff, volunteers, and board members that reflect this.

We will actively educate women using our programs and services, as well as community members about accessibility using an anti-oppression and anti-racist approach.

We will work across sectors and areas of community education and advocacy to change the social and economic conditions that perpetuate ableist ideologies.

We will ensure that we bring a feminist, anti-oppression framework for action to all discussions on 'accessibility and work' that we are involved in. In addition, we will remain actively involved in anti-oppression work.

We will actively lobby the Municipal, Provincial and Federal governments to provide adequate funding for specific services for women with disabilities and Deaf women and services that are women focused and diverse in terms of approach.

The methods we will use to effect social change may include participation in coalitions, public education and media campaigns. This will also involve direct political action such as participation in protests and rallies, deputations, complaints, and refusal to participate in oppressive government programs.

We will respond with implementing and enhancing current programs and services to meet the needs of the diversity of women and children who have experienced poverty, violence and oppression. Programs and services will address the current needs of women, while supporting them in strengthening their economic, social and health positions further enabling them to protect themselves and support their children.

Process of Development:

Through an analysis of current issues and trends the Social Justice Committee decided that the focus of the position paper for 2011-2012 would be on Women and Accessibility. The Social Justice Committee decided to organize a subcommittee to develop this position. During an initial meeting, there was discussion on the process which would be taken to develop the position paper. Lists of key stakeholders were identified as possible contacts to consult throughout the development of the position paper. Initial consultation was completed and the majority of stakeholders felt the best process would be for Nellie's to draft the position and then organize a focus group to give feedback on the position paper. A draft of the position was written and in June 2011, a focus group was organized to obtain feedback on the position. Approximately 20 women attended the focus group. The feedback was then used to revise the position and a new

draft was sent out to all key stakeholders internally and externally to obtain any final feedback. Additionally, an audio file was created and sent out. All the feedback was incorporated into the position, and it was sent to the board in February 2012. At this time the committee decided that it would be essential that the Women and Accessibility Committee remain as a permanent committee of Nellie's. In consultation with the Executive Director, this was agreed upon.

Glossary of Terms:

ASL: American Sign Language.

Audism: A form of discrimination based on a person's ability to hear or behave in the manner of one who hears, including the beliefs that a hearing person or a deaf person who behaves similar to a hearing person in appearance, communication and language use, and/or function, is more intelligent, qualified, well-developed, and successful than another individual who may be more culturally deaf and/or prefer to use sign language or another way of speaking that is not similar to that used by hearing people.

Anti- Semitism: Someone who discriminates against or who is hostile toward or prejudiced against Jewish people.

ARAO: Anti-Racism/Anti- Oppression

Discrimination: Unequal treatment of people based on their membership in a group. Discrimination is a behavior. To discriminate is to treat a person, not on the basis of their individual qualities, but on the basis of a bias about a group.

Dominant Culture: The beliefs, values and judgments of groups with social power. The dominant culture is created and maintained by people who belong to the dominant social group. People who do not belong to the dominant group often believe that these values, beliefs and judgments are true, instead of seeing how they reflect the interests of people in power.

Equality: Treating people the same based on the belief that everyone is the same and has the same needs.

Equity/Equitable: Treating people differently based on their different needs in order to make sure they are able to receive equal access to services and supports.

Feminism: Feminism is a social movement whose goal has been, and continues to be, women's social, legal, political, economic and cultural equality.

Institution: Government, media, religion, law and education are examples social institutions. Institutions are large and hold a lot of power in our lives. Institutions can help to educate and raise awareness of different issues but can also be used to keep people down.

Anti-racism: The process of working towards understanding racism and how it creates power and privilege for some and actively working for social change.

Systemic Discrimination: Policies, rules and practices that leave certain people out and promotes others. This form of unfair treatment usually happens over and over again and in time can seem like just a normal way of doing things. Even when people begin to describe it as discrimination it may continue to be practiced. An example is forced retirement of people over the age of 60.

Reference Material Used in the Development of this Position

<http://www.signmedia.com/info/adc.htm>

http://www.cad.ca/deaf_culture_vs_medicalization.php

Goodkind, J.R., Sullivan, C.M. & Bybee, D. (2004). A contextual analysis of battered women's safety planning. *Violence against Women*, 10 (5), 514-533.

Hill-Collins, P. (2000). *Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment*. New York; London: Routledge.

Hyland, T. (2001). *A Critical Analysis of The Ontario Disability Support Program Act and Social Citizenship Rights In Ontario*, Institute of Political Economy, Carleton University, Retrieved June 10, 2004 from: <http://dawn.thot.net/odsp2.html>

Kaufman, M., Silverberg, C. & Odette, F. (2003) *The Ultimate Guide to Sex and Disability: For All of Us Who Live with Disabilities, Chronic Pain and Illness*. San Francisco: Cleis Press.

ⁱFor additional discussions on how systems of ableism function, see, Rosemarie Garland- Thomson (2002) Integrating Disability, Transforming Feminist Theory. *NSWA Journal* 14(3), 1-32.

ⁱⁱ Although we often imagine different forms of oppression as separate operations of power, an intersectional analysis challenges us to understand how they work together and through each other in integrated ways. As

Patricia Hill-Collins (2000) notes, intersectionality “remind[s] us that oppression cannot be reduced to one fundamental type, and that oppressions work together in producing injustice” (p.18). This approach cautions against privileging one form of oppression and requires that we examine how these forms of oppression are related to one another, reinforcing and reproducing each other through their articulation.

For more discussions on intersectional approaches see: Canadian Institute for the Advancement of Women (2006) Intersectional Feminist Frameworks: An Emerging Vision. Retrieved from http://www.oaith.ca/assets/files/Publications/Intersectional%20Feminist%20Frameworks_CRIAW_e.pdf ; Kimberle Crenshaw (1994). Mapping the margins. In Martha Fineman, and Roxanne Mykitiuk (Eds.), *The*

Public Nature of Private Violence (pp. 93–118). New York: Routledge; Dan Goodley (2011). *Disability Studies: An Interdisciplinary Introduction*. London: Sage Publications. Patricia Hill-Collins (2000). *Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment*. New York; London: Routledge.

ⁱⁱⁱ For further information visit <http://www.mcass.gov.on.ca/en/mcass/programs/accessibility/index.aspx> and/or DisAbled Women’s Network Ontario (1992), *We Are Those Women*, Training Manual.

^{iv} For further information about incidences/ prevalence of violence against Deaf women and women with disabilities, please see, Michael R. Rand and Erika Harrell (2009). *Crime Against People with Disabilities*, 2007. Retrieved from <http://bjs.ojp.usdoj.gov/content/pub/pdf/capd07.pdf> ; Doris Rajan (2004). *Violence Against Women with Disabilities*. National Clearinghouse on Family Violence, Public Health Agency of Canada. Retrieved from: http://epe.lac-bac.gc.ca/100/200/301/phac-aspc/violence_against_women-e/H72-22-9-2004E.pdf

^v See Dena Hassouneh-Phillips (2005), *Understanding abuse of women with physical disabilities: An overview of the abuse pathways*. *Advances in Nursing Science*, 28, 70-80; Doris Rajan (2004). *Violence Against Women with Disabilities*. National Clearinghouse on Family Violence, Public Health Agency of Canada. Retrieved from: http://epe.lac-bac.gc.ca/100/200/301/phac-aspc/violence_against_women-e/H72-22-9-2004E.pdf

^{vi} See Linda Carmen Copel (2006), ‘Partner abuse in physically disabled women: a proposed model for understanding intimate partner violence’, *Perspectives in Psychiatric Care*, 42(2) 114–29.

^{vii} For more information on the economic, social and political exclusion of women with disabilities see Parin Dossa (2005). *Racialized bodies, disabling worlds*. *Social Science & Medicine*, 60(11), 2527-2536; Lisa Schur (2004). *Is There Still a “Double Handicap”? Economic, Social and Political Disparities Experienced by Women with Disabilities*,” in Bonnie G. Smith and Beth Hutchinson (Eds.), *Gendering Disability* (pp. 253-271). New Brunswick: Rutgers University Press.

^{viii} For a further discussion of these and other models for understanding disability see: Eli Clare (2001) *Stolen Bodies: Disability and Queerness*. *Public Culture*, 13(3), 359-365; John S. Clogston (1994), “Disability Coverage in American Newspapers.” In Jack A. Nelson, (Ed.) *The Disabled, The Media, and The Information Age* (pp. 45–57). Westport, CT: Greenwood Press; Julie Maudlin (2007). *Life goes on: Disability, curriculum, and popular culture*, Stephanie Springgay and Debra Freedman, (Eds.), *Curriculum and the cultural body* (pp.113- 130). New York: Peter Lang.