

# Violence and Accessibility

Increasing Safety for  
Women with Disabilities  
On Campus



# Acknowledgements

This project could not have been completed without the sister participants who took the time to share their stories and had the courage to venture into vulnerable spaces. I am grateful to the women for sharing their humour, their candor, and their ability to see things as they are in college and university settings. The participants also brought with them their ability to imagine how things could be different for postsecondary students with disAbilities. It is my hope that this document reflects the voices of the women participants and that it also provides tools that will help students, activists, Accessibility Office staff members, university and college administrators' effect positive changes.

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Terri-Lynn Langdon, Author  
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# Introduction

In order to give some context to the reader about the issues raised in this resource, it was important to the author to share her perspective. I am a woman with multiple disAbilities. Having completed a Bachelor's degree in sociology and political science, a Master's degree in Social Work and a background in Critical DisAbility Studies. Over the course of my years in university as a student I too experienced violence on campus, and so did many of my peers. I also experienced violence in other areas of my life. As a woman with disAbilities who belongs to several activist communities, I conceived of this project as a way to bring the obvious problems of on-campus violence against women with disAbilities to the forefront. I believe that by discussing and acknowledging this serious issue, we can begin to work on solutions that will reduce the incidences of violence on campus.

Research has shown that younger women (aged 16 to 29) are at a higher risk than older women for experiencing sexual assault, stalking, and intimate partner violence (Fisher, Sloan, and Cullen, 1995; Nova Scotia Advisory Council on the Status of Women, 2009; Statistics Canada, 2006); research has shown that people with disAbilities are also a high-risk group for sexual assault and abuse (Kaufman, Silverberg, and Odette 2003: 227); and research has shown that the incidence of sexual assault on post-secondary campuses is high (Metropolitan Action Committee on Violence Against Women and Children, 2010).

We can assume that people who find themselves at the intersection of these three risk groups—young women with disAbilities on university and college campuses—must live with a very high risk of sexual assault and violence. Anecdotal evidence supports this assumption; however, this subject has been largely overlooked by researchers and policy-makers.

This report, *Women with DisAbilities Discuss Ways to Prevent Violence on University and College Campuses*, highlights the experiences and insights of 17 young women who are either currently attending a post secondary institution or have done so in the last 5 years. It is designed to be a conversation-starter for university and college administrators, faculty, and other staff; staff in on-campus accessibility offices, health clinics, and counselling offices; organizations and activists addressing disAbility issues; researchers; and post-secondary students of all genders and abilities. These conversations are particularly important as institutions work to implement the requirements of the *Accessibility for Ontarians with Disabilities Act (2005)*. In preparing this report, it is my hope that it is most useful to Women with DisAbilities currently attending postsecondary education institutions so that they know that they are not alone in their struggles in obtaining a postsecondary education.

# Methodology

In conducting this research, four focus groups with women with disAbilities were organized at an accessible location in an urban centre. This project was short-term in duration. Therefore, efforts were concentrated on methods that would ensure more immediate avenues to promote the project and reach participants. Recruitment occurred in the following ways: distribution of flyers at various events held in Toronto during Summer of 2011; promotional information was posted through online disability-specific newsletters, and list-serves, including online newsletters related to violence against women and student resource websites. The posters distributed for this research explicitly encouraged wide circulation. As such, some professors and young women participants offered to post the flyer in Teaching Assistant offices as well as Faculty Department offices. The flyer was also sent to list-serve sources suggested by author contacts. Finally, some participants were recruited through personal contacts including the authors' own contacts.

Interpreters trained in ASL (American Sign Language) were present at each focus group to facilitate communication with participants who were deaf or hard of hearing. Additionally, some participants were interviewed over the phone and other participants provided written responses.

The focus groups took place between July 25 and Sept. 8<sup>th</sup>, 2011. Each focus group was two hours in length with 2-5 participants in each focus group. At the start of the interview or focus group, participants were asked to identify the schools they attended simply for the purposes of giving some context for the report. Often participants requested that the name of the post secondary institution not be associated directly with their response or ideally if at all. The same questions were used for: focus groups, phone interviews or when participants requested to respond by email. The research questions were as follows:

- 1) Have you experienced violence or tried to prevent violence on university and college campuses? Please share only what you feel comfortable sharing.
- 2) When you have experienced violence what has been the University or College's response (if there was a disclosure)?
- 3) What recommendations/ suggestions do you have for Colleges and Universities related to preventing violence against women with DisAbilities in the University and College environment?
- 4) What can Springtide Resources do to support violence prevention in university and college settings?



In writing this report, the author also drew on the available literature regarding DisAbilities and violence (see Appendix A: References) to help provide a broader context for participant feedback.

## ***Participants***

Seventeen (17) women with disAbilities participated in this project. The women were between the ages of 18 and 30 and were either currently attending university or college or had attended university or college within the last 5 years. Some of the women had attended more than one postsecondary school. In total, 6 colleges, and 11 universities, and several satellite university campuses were represented in the discussions. Post secondary programs were located predominantly in the following areas: South Central Ontario, South Western Ontario, Eastern Ontario and North Eastern Ontario. One participant attended a post secondary program located in New Brunswick.

The women came from a variety of backgrounds and self-identified as persons with sensory disAbilities, physical disAbilities, learning disAbilities, intellectual disAbilities, medical disAbilities, and mental health issues. Many of the participants had multiple disAbilities. Some of the women had life-long disAbilities and others had acquired disAbilities.

Some of the women spoke different languages; some identified as being from racialized communities, particularly in relation to their work related to activism in ethno-specific communities. Other participants were queer-identified women; and many were activists contributing to their communities in a variety of ways. Many of the participants were living with lower incomes. In order to address access to the focus group, transportation costs were covered by the project including bus tokens and cab fare when needed. The focus groups were conducted in English. Participants were informed that language translation would be provided if requested. Consent forms were provided and read aloud prior to starting the focus group. Group guidelines were discussed, and participants were reminded that participation was voluntary. As well, women could answer those questions they felt comfortable responding to.

## ***Limitations***

This is a very small-scale project and more research with a broader and more diverse sample is needed. The *Women with DisAbilities Discuss Ways to Prevent Violence on University and College Campuses* Report is not a scientific study. Rather, the information collected was qualitative; allowing themes to be identified with the intention of starting conversations among people poised to effect positive change and reduce the risk of violence among women with disAbilities attending post-secondary institutions.

No first-year students participated in this project. This project attracted mostly social science students with very few exceptions. Further, research in this area should include



students from all other fields of study including science, math, fine arts, trades, as well as others.

The overrepresentation of social science students in this project is likely due to two factors:

1. Violence and its prevention are often discussed in social science articles and classes.
2. The background of this author includes a strong network of students who are involved in the social sciences.

The deaf and hard of hearing community is not well represented in this project. American Sign Language (ASL) services were provided to any participant requiring them. However, the author does not belong to the deaf community and did not sign. This may have presented a real barrier for the deaf and hard of hearing community in terms of participating in this project.

Additionally, the deaf community is a linguistic minority and a thriving culture that does not always identify with disAbility culture/disAbility communities. The choice of how to identify is a personal one—and any choice is valuable. As well, the focus groups were not offered in languages other than English so this may have also been a barrier for women whose first language was not English. Finally, the project was limited due to time restrictions as this was only a summer project with an end date of September 2011.

Future work on this topic should ensure the participation of a larger sample of students. The need for further research in this area cannot be stressed enough.

## A Note about Language Use

The author wishes to clarify, that in this paper the gendered terms "woman", "she," and "her," refer to "anyone who identifies as a woman". Additionally, the term "disAbleD" is used throughout this document to refer broadly to anyone with any type of physical disAbility, sensory disAbility, intellectual disAbility, learning disAbility, or mental health issue. The women who participated in the focus groups and interviews used various terms to describe themselves. Many people with disAbilities do not think of or refer to themselves as "disAbleD" nor do they use the medical terms that are commonly used to describe their way of being in the world. The term disAbilities is used to highlight the ways in which society "disables" the disability community. The "A" is capitalized as a symbol of how disAbleD persons resist ableism when and where it happens. As such, many of the project participants used terms like "differently abled," "physically disAbleD," "a person with a medical diagnosis," "mad," "psychiatric survivor," and so on. The quotes used in this document reflect this diversity. It is important that people who experience disAbilities have the opportunity to label themselves. The term "sister participants" is used to highlight the author's solidarity with the women who contributed to this project.





# Direct Violence and the Chilly Climate

## Defining Violence

This project avoided narrow definitions of “disAbility” and “violence” in an effort to make discussions inclusive and open. The women who participated in this project began by sharing stories of being sexually harassed, being stalked, being bullied, experiencing domestic violence, stealing of assistive devices and having their property damaged. It is also significant that women did not need to have experiences of violence on campus as criteria to participate in this project. Most people would recognize these experiences as forms of direct violence. Initially, some participants were reluctant to share their experiences of violence on campus because they were concerned that these experiences were “not serious enough.” As the discussions progressed, participants were able to talk about violence in broader terms:

***“I think [violence] tends to be defined as a physical act, but it can be anything that makes somebody feel uncomfortable, or an experience that makes you feel violated even if it’s not physical. I could never figure out before—why do people treat me a certain way sometimes?”***

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As Rachel Osborne (1995) states, “Women learning in patriarchal institutions encounter hostility, discrimination, and violence in various forms and degrees. This environment has been described as a ‘chilly climate’ (cf. Hall and Sandler, 1982). Jeff Hearn and Wendy Parkin (2001) amplify the concept of the continuum of violence, noting that an “overly behavioral focus [on violence] may neglect the experiences of violation and may play down both more structural relations of oppression and mundane experiences of violations in organizations that usually would not be labeled harassment, bullying or even sometimes physical violence” (qtd. in Tracey, 2008).

The “chilly climate” is compounded by the less noticeable presence on campus of people with disAbilities. However, this may be changing. While postsecondary enrollment of students with disAbilities is still lower than the student population of people without disAbilities, it is increasing (HRSDC, 2010).

This section shares the stories of women with disAbilities who have experienced the pain, silencing, and exclusion of both direct violence and the “chilly climate.” For some of the participants, their experience of the ‘chilly climate’ may be viewed as parallel to the dynamics associated with intimate partner abuse. For example, some spoke of feeling ‘stuck’ where



there have been instances of violence on campus. For example, having to stay in the same classes as an ableist teacher in order to finish the course or having to remain on the same campus of another student who stalked them or was violent. Campus environments can be small and intimate therefore enhancing a women's experience of feeling unsafe when violence has occurred. As well, campus environments are linked to educational and career dreams and goals therefore, when a student feels that leaving is the only option to feel safe after violence has occurred she has lost more than her sense of safety.

## Participants' Stories

### *Direct Violence and Harassment*

*"Someone completely smashed my computer [in my room], so that made me think about what they might do to me."*

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*Participant who is blind: "Some guys decided to smash my window. [University] staff didn't understand my fear that the guy might recognize my voice or my face."*

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*A student who identifies as having a mental health history: "I can be assertive... and this gets back to me as, 'Why is this crazy woman mad at me?' I was being sexually harassed by the owner, the manager [of the campus pub]. I just wanted some record so you can point and say, 'See, it's not the first time this guy has done it!' And two days later they [the pub] threatened to fire me. When women are assertive it shocks people; [when it's] women with a disAbility, it extra-shocks people."*

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*[While In Residence] "Some guy saw scars on my arms and grabbed my arm/ me in the hallway. He wanted to know why I had scars".*

### *Fear of Direct Violence and Harassment*

*"Recently, a friend of mine was [on campus] and because the campus had to lock up and it was at night, Wheel-Trans wouldn't pick her up even though they had dropped her off there. She asked*



*campus security for help to walk to a different intersection, but security said no, so she was terrified.”*

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*“In the experience of insecurity, space is restricted. You’re not going to take any classes that start at 7:00p.m. If you are going to take late-night classes you pair up with a friend....I think mentally there is an impact based on the way you are restricted. It impacts your well-being. I try not to take late night classes. If I do I’m with a friend.”*

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## ***Ableism and Intolerance***

*Participant who uses a wheel chair: “I was looking to do a student placement for my [college] program. The placement advertisement said that it was looking for people with diverse backgrounds, including students with disAbilities. I was asked to leave that placement after a week because they said my needs were ‘too high.’ I was crushed. After that, I learned that just because something is said on paper, this does not always reflect the reality of what people are willing to do. I had to find another placement.”*

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*“[University is] not really a space where all of us feel comfortable, because there’s a hierarchy in terms of being seen the same as other students. Since there is a DisAbility Office, we get lumped into talking to them instead of talking to somebody who is more ‘I see you as a person,[not] as a disAbility,’ rather than, ‘You have a disAbility, so this is how I see you.’ People who work with people with disAbilities [often act] the second way, but in fact [they should do] the opposite. I struggle with this because these are the people I am supposed to go to for assistance.”*

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*“Maybe it’s just me, but I have never felt safe enough to live on my campus. I don’t know why—what if something happens? I would not feel 100% comfortable living there, like I couldn’t trust people enough to say if I need help, like if I fell, or during a fire drill.”*

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## ***Exclusion and Silencing***

***“If a women with a disAbility was abused and she experienced violence she might not feel comfortable speaking up, because she had other things to think about. It’s very common on our campus to say, “It’s your responsibility; you can do whatever and that’s it.”***

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***“I feel if you are a woman with [a] disAbility in university you are already wanting to prove that you are quote-unquote ‘capable,’ so the system is disciplining you to only ask for what you quote-unquote ‘need.’”***

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***“On the International Day of Persons with Disabilities, our school had a sign that said ‘Celebrate Ability.’ [The poster was] doing this weird thing, saying people with disAbilities are the same as everyone—this takes the lens off of disability and we can’t talk about it.... Why can’t disAbilities themselves be a thing to celebrate?”***

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***“The only time we talked about disAbility [in a four-year degree program] was one class on social inequality and one class on adapted sports for those with disAbilities.”***

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## ***Homophobia and Racism***

Five (5) racialized women participated in this project and one woman responded to this author well after the completion of the project stating that race had impacted her experiences of violence. Participants proudly talked about their histories with anti-racist activism and cultural groups on campus. However, discussions of violence directly linked to racism were limited and this likely reflects the social location of the author as being a woman of white privilege. One woman discussed her experiences of racial slurs on campus and several participants shared that posters related to diversity were often vandalized. When addressing issues of violence on campus, it is important to recognize the impact that multiple systems of oppression may have on experiences of violence. Douglas Victor Janoff (2005) asserts, “queer youth... may be afraid of double disclosure—not only of the attack but also of their own sexual orientation” (p. 67). There is ample literature about homophobia and racism in society. These oppressions also

impact high school, college, and university environments; more work needs to be done on the experiences of queer and racialized people with disAbilities. We need to keep in mind that women with disAbilities may experience or fear violence for a variety of reasons—some reasons may be related to their disAbilities, while others may be related to their connections with multiple systems of oppression.

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***“University policy has to protect people that have a reason to be afraid on campus. At my previous university there were a lot of attacks and vandalism on the diversity centres on campus, including the Gender Issues Centre and the Aboriginal Issues Centre.... There were students with disAbilities who would use these centres to share resources and form alliances.”<sup>1</sup>***

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***“[At my campus LGBTQ club], I have had to explain the term ‘ableism,’ as it had never been heard of, even in a space that identifies itself as anti-oppression. People were saying things like ‘But the professionals are “experts” [in disAbility/autism spectrum], and they know best.”***

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***“I identify as a lesbian. At [my educational institution] I saw a poster that there was a group starting for LGBTQ students. When I got to the space I found out it was a joke. A person wanted to find out who the LGBTQ people were at [the school] and get them in one room.”***

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***“There are issues of homophobia on campus. [This] came to a head less than two years ago when someone removed the glass case over the LGBTQ board and lit it on fire. [This was] less than two months after I had started admitting to myself that I might not be straight.”***

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## ***Feelings of Safety***

Women with disAbilities are at a high risk for violence. Some focus group participants shared experiences of violence that did not occur on university or college campuses or while they were students. These examples included experiences of childhood abuse, dating violence, financial

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<sup>1</sup> This student also shared that students with disAbilities often used these centres and spaces because there were no peer-specific spaces for students with disAbilities to hang out.

abuse, and attendant care abuse. Some of these participants noted feeling safe at school. This was a relief to hear. When the reasons for feeling safe were discussed, some very interesting stories emerged:

***“For me definitely, university, college, was the safest place I have ever been to, up to that point [in my life]. So having come from violence in a home environment, it is like, for me I feel like I had some skills to deal with violence and I guess [some] resiliency.”***

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***“It seems like there is more risk when you’re on a campus out of the city. I’ve only been on downtown [campuses]. I always feel safe because I’m on major streets with people [and] cars, even late at night. I would have felt very different if I was walking home at night at [a campus away from downtown].”***

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## **Advocacy**

Women’s experiences with disAbility are not always–already experiences of vulnerability. The disability community have never been passive. Members of the disability community often voice their concerns about violence, poverty, access to services and rights-based recognition in all areas of society. We are a marginalized group oftentimes because our point of view is not considered rather than because people with disAbilities are inactive citizens. Students with disAbilities are a group of individuals who know what is best for them and can organize and advocate effectively for social justice and for violence-free spaces.

Participants in this project shared stories not only about vulnerability, but also about power and activism. All participants had a strong commitment to working towards social justice in their communities. Their activism took many forms, including: anti-poverty initiatives; disAbility awareness talks; anti-oppressive papers related to disAbility; AODA committees; white ribbon campaigns and other efforts to raise awareness about violence against women; advocacy groups to raise awareness about violence against live-in caregivers; LGBTQ clubs; anthropology clubs; immigration rights and status activism; cultural and international clubs; mental health activism/mad activism; and anti-violence workshops for people with intellectual disAbilities.

***“One thing I did after [the experience of] stalking was take a self-defense course. I invited the person to come to [my college] to teach women with disAbilities and my friends to kickass....[Taking the class] gave me a sense of power. In that class you have to learn how to scream!”***

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***“I do presentations to university faculty and staff about how to make teaching accessible for people on the autism spectrum.”***

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***“A lot of feminist activism happened in the school paper. There were also many students who participated in Take Back the Night.”***

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# Violence and Access to Resources

## Defining Accessibility

Equitable access to services means that services are accessible and culturally appropriate and can be used by everyone (HRSDC, 2006). It is important to understand “accessibility” on more than one level; physical accommodations such as Braille signage and automatic door-openers are only one aspect of accessibility. The “chilly climate” (defined and discussed in the last section) on campus can also prevent people from connecting with the services and supports they need. As one focus group participant phrased it:

*“Just because there’s a ramp and I can get into a building doesn’t mean that my experience is positive, because I do feel a sense [from disAbility Office counselors] of, ‘Here’s a person who’s going to tell me about my needs.’ I think I know what I need. I need a person who is going to listen to me and not [think that] because they have a degree in something [they] know what it means to have a disAbility.”*

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Sister participants repeatedly spoke of their communications with university or college staff and other disAbility service providers as difficult and draining. The women interviewed for this research were extremely busy and reported that they did not always have the energy to engage in these efforts. The need to “pick and choose battles” was a recurring theme. There was a collective awareness among participants that although students with disAbilities have the right to an accessible education, this is often not the case. Many participants shared that they had left educational institutions or taken substantial leaves of absence due to a lack of accommodation and/or their experiences of violence on campus.

As previously mentioned, all of the participants were highly involved in their campus communities as well as in the larger community. However, they faced extensive barriers when attempting to become involved—from having to disclose disAbility and/or diagnosis, to physical barriers, to transportation barriers, to communication barriers (e.g. event flyers not in an accessible format). The young women also faced attitudinal barriers to participation—they felt that they had to overcome other people’s perceptions that they would not be able to do a placement or to be successful at school with the lived-experience of disAbility.

This section shares the stories of women with disAbilities who have not been able to receive the supports they needed in dealing with direct violence or the effects of the “chilly climate.” At times, they were not able to access certain services or facilities because of physical



barriers; at other times, they were not able to access these supports because of distress or a mental health history or systemic barriers.

## Participants' Stories

### ***Pressure to Self-Identify and Consequences of Disclosure***

In order to receive services and support, a person with a disAbility must seek out those resources and, in some cases, must make a choice to disclose their disAbility. Many participants talked about the tension between a desire to access services or peer support groups and a fear of rejection, insensitivity, or lack of confidentiality:

***Former student: "I wanted to join [a Students with disAbilities group on campus], but you had to self-identify and I just wanted to be involved and advocate but not to identify. [The disAbility and medical diagnosis was new]; I wasn't ready to [tell people]. But also how to tell people, I didn't know how to do that, so I felt that was a barrier."***

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***"I went to a class and [the teacher] called me out. He said, 'You're the only one that doesn't get it. 'During the break for the class he cornered me and asked, "Do you have a learning disAbility? I thought, 'Crap, I have to play the crazy card!' I told him, 'No, I have schizoaffective disorder.'"***

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***"I have to choose my battles with the administration and faculty in terms of explaining and sharing my (hidden) disAbility. I have disclosed and received negative and hurtful feedback both in academic and field placement. I don't feel safe disclosing for fear of rejection or negative comments."***

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***Participant who had not experienced much violence: "I guess that shows how lucky I've been. My disAbility, well, I don't think of it as a disAbility, but my identification as a mad person is not visible, right? I feel that someone with a more visible disAbility or a physical disAbility would experience violence more often. I'm not saying that people with invisible disAbilities don't experience***

*violence, but I wanted to recognize my privilege in some ways to people whose differences might be more visible. If [violence] were to happen to me, it would be inadvertent as opposed to targeted unless I chose to make [my disAbility] visible.”*

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*“There was a student in my res who went into repeated suicidal crisis. The [residence staff] was standing in an open hallway talking on the phone about the woman in crisis. He was ranting about how annoyed he was dealing with her.”*

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### ***Institutional Compliance***

Many students feel the pressure of “institutional compliance.” According to Kaufman, Silverberg, and Odette (2003), institutional compliance occurs when people learn that they can only get their emotional and physical needs fulfilled by complying with the requests of institutions. Some focus group participants chose to leave school rather than comply with particular requests. In some cases, these institutional requests occurred in the context of violence that the women had experienced:

*Participant who is deaf: “A male in one of my classes stalked me on campus. [When the police showed up] they told me I couldn’t have interacted with him, because I said that I was responding to his voice. So the police assumed that I was hearing voices. The police formed me and brought me to a psychiatric facility. Campus staff stated that they wouldn’t offer me accommodations unless I provided a full psychiatric assessment. I left that school.”*

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Participants also shared stories of communications with university and college staff that ultimately led to improved service:

*“A lack of support for people with mental health and autism spectrum needs caused me to have a meltdown a few months ago.... When the counselors found out what was going on, they did step up [to provide additional support]. It was it was one specific counselor who stepped up as well as my worker through AccessAbility Services.”*

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## ***Barriers to Crisis Services***

***“[While I was at university], I experienced violence in my relationship and I didn’t know where to turn. I knew that shelters [in the area] were not accessible.... [There was nothing] that really spoke to how do I protect myself as a woman and where do I go...and it made it harder for me to get out of that situation because I didn’t have resources. It took me a lot longer.”***

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## ***Barriers to Physical and Mental Health Services***

Women who experience violence and victimization use health care services more (Whittaker Leidig, 1992) and women with disAbilities in particular use health care services more than their non-disAbled peers (Lush and Odette, 2005). Therefore, it is essential that women with disAbilities feel comfortable accessing health and counselling services on campus. When women with disAbilities do not feel comfortable accessing these services for common occurrences such as seeking help for a cold or asking for birth control, they will be much less likely to report experiences of violence. Participants shared particular concerns about access to sexual health information:

***“[The University is] not open to giving people sexual health resources if you’re disAbleD and it’s hard. This is problematic if you want to practice safer sex.”***

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***“[The lack of access to sexual health services] applies to mad students too, because when I went in [to Health Services] I was unable to get any information.”***

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Many students also reported long wait times for counselling services on campus. Participants who attended school outside of the Greater Toronto Area noted a lack of peer-support programs and longer-term counselling services. Plans to improve services should include careful consideration of geographical disparities and inequities.

## ***Barriers to Participation in Campus Life***

The women who participated in this project made it clear that students with disAbilities often have trouble participating in campus life; these barriers need to be removed because isolation can precipitate violence:

**Participant who uses a wheelchair: “Before I did my undergrad, I went to a different school and I had a bad experience there. I lasted a month. One [reason] was a mental health issue that got exacerbated with the situation. The university itself is very isolated; transit was very poor and what we would call Wheel-Trans [in Toronto] was very bad....But also generally, I could only get into basically my hallway which made it hard to interact with other students... and that [led to] isolation. Everyone left on the weekends and I couldn't, that sort of thing.”**

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**“There is a lack of understanding that maybe my friend that uses a wheelchair is depressed because she can't leave her room [on campus] because snow isn't cleared during the winter.”**

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# Recommendations for Preventing Violence on Campus

*“One of the ways to end violence everywhere is to get more people to realize when they are making assumptions: Think about it—is it accurate—why am I making this [assumption about disAbility]?”*

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Young female students are often given advice for staying safe that includes suggestions such as walking with friends on campus and carrying a cell phone. While these ideas are excellent precautions for preventing direct violence, they can contribute to the “chilly climate” on campus. Living with fear restricts choices; for example, several participants said that they will not take courses offered in evening time slots. Additionally, keeping the focus on these types of precautions can play into the idea that it is the victim who is to blame if she did not do everything possible to avoid danger.

It is also essential to note that many of these types of precautions may not be as accessible to women with disAbilities. For example, many women with physical disAbilities have limited access to accessible routes and/or transportation if they need to leave a violent situation. They may also be quite limited in who they can ask for help and may not trust that the individual is a “safe person.” Further, the deaf and hard of hearing community and women with augmentative communication disAbilities may have difficulty communicating with others during a crisis. It is also important to mention that, some human rights offices and other campus facilities are not accessible.

For these reasons, this section focuses on long-term structural and systemic solutions to creating a safer campus for women with disAbilities. However, the appendixes share some practical suggestions that individuals can put into practice immediately. Appendix B provides students and staff with ways to recognize when someone has experienced a traumatic event; Appendix C provides students and staff with ways to support someone experiencing intimate partner abuse; and Appendix D summarizes the suggestions that participants in this project made in regards to ways that students with disAbilities can protect themselves.

The first set of recommendations below is directed to universities and colleges; the second set is directed to organizations working on issues related to disAbility and violence. Many of these recommendations suggest actions that are required to meet the new customer service standards set out in the 2005 *Accessibility for Ontarians with Disabilities Act (AODA)*.

# Recommendations to Universities and Colleges

## **Recommendation 1: Implement Broad-based Diversity Training**

Universities and colleges should include issues related to disAbility and interlocking identities into diversity training around violence against women on campus. Violence can happen anywhere on campus, but it happens more often at night or early morning in secluded campus areas. For this recommendation to be realized a university/college-wide response is needed. Campus emergency response teams, health services, and security services should be provided with both general and disAbility-specific anti-violence education. It is recommended that this training also be offered to janitorial staff, administrative staff, and professors and teaching assistants who provide evening courses. There should also be more campus-wide awareness on how to report violence when it happens in the context of a university or college environment; this includes issues of harassment and discrimination. The underlying message of the training should emphasize the woman's right to choose when, how and if they want to report the violence.

## **Recommendation 2: Challenge Systems of Oppression**

Schools need to continuously challenge systems of oppression. Universities and colleges often work in silos, and this can create a lot of barriers for students with disAbilities. Systems of oppression often intersect and schools must recognize that these issues require a collective response if they are to be addressed. It is recommended that university departments and student organizations work more closely together on issues of racism, homophobia, ableism, sexism, etc.

## **Recommendation 3: Focus on Peer Support**

There needs to be a focus on peer support. All universities and colleges should have a peer sexual assault support line. There should be support programs for and by students with disAbilities and mental health issues, and there should be spaces that celebrate disAbility where students can meet up. These peer support programs and spaces should be well advertised on campus.

## **Recommendation 4: Reduce Counselling Wait Times**

Wait times for counselling services on campus should be decreased. More counselors should be hired to meet the need for these services. Implementing this recommendation would help schools meet the AODA's recently implemented Customer Service Standards.

### **Recommendation 5: Start an Awareness Campaign That Includes Male Students and Gender Non-Conforming Students**

Universities and colleges should establish anti-violence campaigns. If an anti-violence campaign is already in effect, administrators should ensure that it includes the concerns of people with disAbilities and that the materials are disseminated in a variety of accessible ways. For example, the campaign should have an online presence so that people who use screen-readers can access the information. There should be anti-violence posters in men's washrooms, women's washrooms, and gender-neutral washrooms. Washroom campaigns are an effective way of communicating with students; everyone uses the washroom and washroom campaigns are remembered. If the school does not have a gender-neutral washroom, it should put the policies and resources needed in place to realize that goal.

Male students must be included in initiatives to end violence against women on campus. Schools should offer support to male students and ensure that advertising includes messages directed to men.<sup>2</sup> Gender-non-conforming students must also be included in discussions about violence and gendered violence on campus. This student group experiences disproportionate levels of violence in college and university settings (Page, 2010).

### **Recommendation 6: Improve Access to Health Services and Other Supports**

Universities and colleges should make sure that all students with disAbilities have equitable access to health services and sexual health services on campus. Health services staff should have access to training that increases awareness regarding barrier removal such as policies and practices which perpetuate the ways that disAbled students are treated differently; for example, by not providing sexual health information.

Maintaining confidentiality should be emphasized. Fostering positive relationships between medical professionals and disAbled people around basic health needs is an essential part of addressing on-campus violence; without these relationships, it is harder for people with disAbilities to access support or disclose experiences of violence.

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<sup>2</sup> Two examples of good campaigns that include men in anti-violence education are the I Know Someone Campaign developed by the University of Western Ontario ([www.iknowsosomeoneuwo.ca](http://www.iknowsosomeoneuwo.ca)) and the Men of Strength Campaign developed by the California Department of Health Services and the California Coalition Against Sexual Assault ([www.mystrength.org](http://www.mystrength.org)).

### **Recommendation 7: Publicize Assaults**

Known occurrences of violence on or around campus must be published for the *entire* university community; this includes e-mail blasts that are accessible to people who use screen-readers. This recommendation would be in keeping with the AODA Information and Communication Standards starting January 1, 2012.

### **Recommendation 8: Promote and Diversify WalkSafe Programs**

WalkSafe programs need to be more heavily promoted and advertised on campus. Students with disAbilities need to have opportunities to volunteer with WalkSafe programs and give their input into them.

### **Recommendation 9: Amend Anti-Violence Policies to Include DisAbled Students and Gender Non-Conforming Students**

Policies need to be created with the experiences of students with disAbilities in mind. New policies should be developed that specifically address disAbility and violence on campus, or existing policies on discrimination, harassment, and violence should be updated to include this issue.

### **Recommendation 10: Improve Safety Infrastructure**

Attention needs to be paid to improving the accessibility of escape routes on campus; these considerations should include adequate lighting, signage, and snow removal. University and college maps should provide information in alternate formats about accessible routes, areas with good lighting, and the locations of emergency phones/buttons. Adequate and timely snow removal, perhaps mandated by a university/college-wide accessibility policy, is imperative. Universities and colleges should also ensure that all buildings have back-up elevators or alternate accessible routes.

### **Recommendation 11: Revise the Curriculum**

School curricula need to include more discussions of disAbility, mental health and politicized identities, interlocking identities, and violence.

### **Recommendation 12: Include DisAbility Resources in Syllabi**

Program syllabus should provide information about disAbility services and accommodation services. Syllabi should also be published online for easier access for those who do not read print. Course syllabi need to also include access to ASL for deaf and hard of hearing students.



### **Recommendation 13: Hire More Female Security Officers**

Universities and colleges should hire more women as part of their campus security teams and investigative bodies. Hiring policies should support and facilitate this change.

### **Recommendation 14: Open Discussions about DisAbility and Violence**

Safe spaces should be provided for students to deliver disAbility and violence awareness presentations to classrooms. Non-medical presentations of disability and or difference need to be considered and valued by all members of the university and college community, including students, faculty, administrators, and support staff.

## **Recommendations for Organizations Working on DisAbility and Anti-Violence Issues**

- Develop a greater presence on campuses; come to university fairs and frosh week events and distribute informative flyers.
- Do violence against women presentations specifically about disAbilities on university and college campuses. Collaborate with campus clubs to organize these events. All university students need education on this issue; however, there should also be programs that target first-year students in particular.
- Hold a conference on violence against women on university and college campuses.
- Create an online resource that addresses these issues; for example, a Facebook group or Facebook page where students can rate their universities or colleges according to how accessible their campuses are, what kinds of anti-violence resources and services are available, and what their experiences have been around issues of violence, disAbility, gender, sexuality, race, and other interlocking systems of oppression.
- Conduct (and disseminate) more research on women with disAbilities experiencing violence on university and college campuses.

## **Recommendations for Students**

- Join on-campus clubs and campaigns working on issues related to disAbility and/or violence. Build relationships with other campus clubs and work closely together on issues of racism, homophobia, ableism, sexism, etc.
- Distribute informative flyers during frosh week.



- Volunteer with WalkSafe programs, crisis lines, and other peer support programs, and provide input into the ways they are organized and operated.
- Conduct research and write papers on women with disAbilities experiencing violence on university and college campuses. Advocate for the inclusion of these topics in coursework and class discussions.
- Follow up on the recommendations listed above for universities and colleges—continue to raise these issues with administrators to see whether or not they are making changes to improve on-campus safety and prevent violence against women with disAbilities.
- Develop a student volunteer program with the goal of reducing the physical and psychological isolation of people with disAbilities. The student volunteers could be available to provide support to students with disAbilities to help them overcome some of the barriers to participating in campus life. This suggestion is relevant for students with both visible and invisible disAbilities.
- Students can support disability and mental health peer group events—come, listen and learn!

# Appendixes



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## Appendix B: Recognizing Signs of Trauma

It is essential that all students and university/college staff (including faculty, administrators, Accessibility Services staff, janitorial staff, and health services staff) be familiar with the signs that a person may exhibit after a traumatic event. If you have experienced a traumatic event, these feelings may be overwhelming. It is important that you seek whatever support may be helpful to you.

The signs and symptoms below are not an exhaustive list. Each person's response to the distressing and unacceptable actions of the abuser(s) is unique. These signs of victimization require care and compassion, but they should not be pathologized:

- Experiences of leaving one's body (known as dissociation)
- Re-experiencing trauma
- Avoidance of people, places, things etc. that remind the person of traumatic events
- Difficulty expressing and experiencing emotions
- Depression
- Severe phobias, especially to reminders of a previous experience of violence
- Panic attacks
- Sleeping too much or too little; nightmares
- Feelings of guilt
- Self-defeating behavior
- Headaches
- Backaches
- Gastrointestinal disorders
- Substance abuse
- Self-harm
- Intense feelings of distrust/fear
- Difficulty eating

# Appendix C: How to Support a Woman Who Is Experiencing Abuse

We know that abused women still rely mostly on friends, neighbours, and family for support. You may also suspect or know that someone close to you is being abused. The lists below were prepared by Springtide Resources. They provide suggestions for ways you can help someone who is being abused (if you feel comfortable).

## *What Can I Do to Help?*

- Be supportive.
- Listen to the person being abused; believe him, her, hir<sup>3</sup>. Judgments are not helpful. Let the person know that they are not alone.
- Give her time to make her own decisions. Don't tell her what to do. Don't rescue her by trying to find quick solutions.
- Let her talk about the caring parts of the relationship. Don't put her down for staying with her partner.
- Help her focus on the good things about herself and her children if she is a parent. But don't tell her she should stay for the sake of the children.
- Respect her confidentiality.
- Help her find services. Find out about services she can use and tell her about them. Depending on her needs, make sure these services:
  - offer language or cultural interpretation.
  - are accessible to people with disAbilities.
  - can care for her children if she needs it.
  - are queer-positive, if that's important to her, hir
- Never recommend joint family or couples counselling if there is emotional or physical or other forms of abuse. It is dangerous for a woman. If they want counselling, separate counselling can be helpful.
- Help her plan for an emergency.
- Safety is the first priority. If you believe she is in danger, tell her. Help her plan an emergency exit.
- Don't put yourself in danger by confronting the abuser.
- Encourage her to get ready to leave home in a hurry. Help her get together items she needs, such as:

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<sup>3</sup> The use of "hir" is used to reflect the fluidity of gender and moves beyond gender binaries. Violence can happen for anyone regardless of gender identity.

- credit cards
- cash
- bank books
- passport
- birth certificates
- citizenship papers
- house keys
- medications
- her children's favourite toys
- clothing

### ***What Can I Say to Her?***

Give clear messages, including:

- Violence is never okay. There is never a good reason for it.
- Her safety and her children's safety are always most important.
- She does not cause the abuse. Her partner is responsible for the abuse.
- She cannot change her partner's behavior.
- Apologies and promises will not end the violence.
- She is not alone.
- Abuse is not loss of control. Abuse is something people use to control others.
- The violence affects the children.
- It is a crime to assault a partner.
- She may be too fearful or confused to take any step right away. Be encouraged that she is reaching out for help. Every time she does this, she is gaining the strength she will need when she is ready to make decisions.
- Finally, it is essential when supporting anyone who is experiencing violence that you also take care of yourself. Offering support to someone who is experiencing violence and abuse can be emotionally challenging. Do not hesitate to seek support if you need it. It is okay to ask for help.

### ***The Top Rated Statements That Women Say It Helped to Hear***

- I am afraid for your safety.
- I am afraid for the safety of your children.
- It will only get worse.
- I am here for you.
- You deserve better than this.



## Appendix D: What Students with DisAbilities Shared About What They Do to Stay Safer

Participants in this project discussed what they did to feel safer, given the prevalence of violence on campuses towards students with disAbilities. It is essential to note that a woman or a group of women can do everything possible to stay safe and violence can still occur. Here is what women said they did to stay safer on campus:

- Tell people when you are going out and when you will be back.
- Familiarize yourself with the accessible routes on campus.
- Avoid late night classes (if you can).
- Carry a cell phone.
- Walk with friends.
- Build a support network that includes support from other students with disAbilities.
- If you are part of a campus club or network, work *collaboratively* with other campus clubs and networks on social justice issues.
- Know your rights and find support that is DisAbility-specific.
- Learn about equity and human rights offices and complaints processes on campuses.
- Be selective about who you ask for help, especially with physical needs. If the person you tell does not believe you (when you disclose violence) or if you are finding it difficult to communicate with that person, tell someone else.