Violence against women with a disability

part 2

Persephone npo

In cooperation with Caroline Tack

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Table of contents

Introduction

You are now reading or listening to our third book. We published the first one ‘Blij dat ik leef!’ (Happy to be alive) in 2005 on the day we were celebrating our 10th anniversary. It contains life stories and poems of *happy* women with disabilities. We do not avoid negative feelings, but the balance spontaneously changes towards the positive side. In our second book, ‘Violence against women with a disability’, we emphasise the need for scientific research, accessible refuge centres and more tailor-made self-defence courses. Because for us, women with a disability or a chronically debilitating disease, domestic violence is also a real problem.

We owe this third book mainly to Caroline Tack, who had the courage to start large-scale scientific research, specifically on women with a disability or a chronically debilitating disease. She wrote us an e-mail in 2012:

> *‘I am studying Pedagogical Sciences at the University of Ghent; my main subject is orthopedagogy. In 2 years I will have my diploma. This school year, I have to choose the subject for my master's thesis. I would like to do something that could help a non-profit organisation like yours, so that people benefit from it. I discovered the following website www.wetenschapswinkel.be and found an interesting subject: "Map out violence against women with disabilities". This message is already a few years old. This is the reason why I put my question: Would it be possible to collaborate with you for my master's thesis? I know that, during this school year, I cannot yet undertake many actions, but it would be a great pleasure to work with you. I already have some experience with people with disabilities, which even stimulates me more.’*

For the sake of clarity: When we write ‘disability’, we mean ‘disability or chronically debilitating disease’. Think about it every time you read or hear the word ‘disability’. We do not use the word ‘limitation’ because it seems too vague to us. After all, poverty is also a limitation. Being pregnant also. ‘Disability’ does not sound awkward to us. We know indeed that *thanks* to our disability we have got a lot to offer: perseverance, creativity, humour, etc. As a matter of fact, the term ‘handicap’ comes from equestrianism. The best horses are handicapped, i.e. they have to carry an extra load so that weaker horses get the chance to win. We are happy with our strength! Do we consider ourselves as superwomen? Far from it. Like many others, we have been looking for the transition from the ‘path of anger’ to the ‘path of joy’. This is illustrated in our first book.

The acquaintance with Caroline was extremely nice, even though she replaces ‘handicap’ by ‘limitation’. Our opinions differ on this point, but that does not prevent us from writing a book together. After a few weeks, she gave us already additional reasons to publish this book. After having read our previous book, she was able to motivate some of her fellow students to focus on the subject of inaccessibility of refuge centres. The fellow students' work has also been included in this book. A third reason is the United Nations Convention on the Rights of Persons with Disabilities. For women with disabilities the importance of this convention should not be underestimated. For the first time, social inequality is being recognised at this level and addressed throughout the text. This is why we are examining the extent to which our governments are (or should be) involved in bringing our legislation into line with this convention. We even have a fourth reason. Over the years, we have discovered various methods to deal with aggression. They are of interest to all of us, with or without disabilities. This is why we have included them in the appendix.

Is it useful to read or listen to our previous book first before continuing this book? Yes, of course. Because in our new book we frequently refer to it. Because *'Taking a matter to court: possibilities and difficulties'* is still relevant. Because our own research on the inaccessibility of refuge centres is still revealing. Because part III of this book still shows what we, as women with disabilities, can do ourselves. Because '*Violence in health institutions*' still describes how we can avoid a lot of suffering through networks. Because our demand for scientific research, particularly on violence against women with disabilities, persists. Caroline made the first step in this issue; we look forward to the next steps.

Women with disabilities who are victims of violence still very often smash into a wall of disbelief when they try to reveal their story. There is only one way to drastically reduce this wall: to break the silence massively. A lot of courage is necessary to do so, we are aware of that. To facilitate this process, we have compiled the existing possibilities in a useful appendix. It can be found at a glance: right at the end of this book.

Above all, our non-profit organisation Persephone is a women's association. Our objective is limited, but geographically and philosophically speaking, we work on a large scale. We exclusively focus on all that has to do with the particular situation of women with disabilities. We welcome women with any disability, regardless of age or origin. People who do not belong to our target group can also become members. They are our sympathisers. Our members come from all over Flanders. We organise chat afternoons and workshops in all Flemish provinces. We are in contact with sister groups in other countries. We respect all philosophical visions. Our association is pluralistic and politically neutral. This means that we can rap on the knuckles of any minister and that we collaborate with many associations. Over the years, we have developed close links with three non-profit organisations: KVG, VFG and GRIP. They highly appreciate our know-how. KVG stands for Katholieke Vereniging Gehandicapten (Catholic Association for the Disabled) The "Vlaamse Federatie Gehandicapten" (Flemish Federation for the Disabled) is the socialist counterpart of KVG. The civil rights movement GRIP wants people with disabilities to get a grip on their own lives. GRIP is also the abbreviation of "Gelijke Rechten voor Iedere Persoon met een handicap" (equal rights for each person with a disability).

We choose a short-term planning. This allows us to work in a demand-driven way and to smoothly respond to topical matters. For 20 years, this has been the key to success. We find our wisdom in the daily lives of our women. Where do they find their strength? What hinders them to make their dream come true? What do they want to see as changes in our society? And how? We make sure that everyone knows each other and what we do. Whenever someone cannot come to our meetings, the person sends us an e-mail or calls. This system creates a group of close female friends. We quickly understand each other, because we all live with a disability. This is our strength, for 20 years now. Even if we work around (prevention of) violence.

Antwerp, June 2015

Our books ‘Blij dat ik leef!’ (Happy to be alive) and ‘Geweld tegen vrouwen met een handicap’ (Violence against women with a disability) are sold out in the bookshops. Nonetheless, the books are still available through our organisation. Each time we have reproduced the audiobook from a mother CD. More information in the appendix.

Foreword

This book is about violence against women with disabilities. At a time when worldwide violations of the physical and psychological integrity of women are being highlighted (see among others the DSK trial in France and the reactions to the rape of women in India) and at a time when the International Centre for Reproductive Health is advocating for reference centres concerned with sexual violence, the publication of this book comes just in time.

In the United Nations Convention on the Rights of Persons with Disabilities, ratified by Belgium in 2009, women are explicitly mentioned as a group to which particular attention should be paid when it comes to human rights.

Already in 1991, Hanna and Rogovsky in the USA drew attention to the fact that women with disabilities seemed to be engaging in fewer social relationships, that they were less represented in education and that also the labour market could not provide flourishing employment figures. Taking these findings into account, women seemed to be at great risk of ending up in a position of isolation. This position has direct consequences on the self-image and the roles that women can assume. Already in 1991, the relationship between the social system, self-image and participation was clear[1].

In 2001, Nosek and her colleagues explicitly requested that extra attention be paid to the abuse of women with disabilities. A large-scale research involving 504 women revealed a number of additional points of focus concerning abuse and violence against women with disabilities. For example, depending on assistance seemed to bring a lot of women regularly in difficult/dangerous situations. Thus Nosek asks that particular attention be paid to interventions that should help women with disabilities to identify abuse and to escape potentially dangerous situations and relationships in time[2].

In 2006, Brownridge conducted research in Canada. He concluded that women with disabilities were not only much likely to run a higher risk of violence, but that, in addition, many of them were involved in problematic situations with their partners. Thus, violence can be located not only in an external structure (outdoor), but sometimes also at home (indoor).[3]

This book is based on the tradition of the research mentioned above. In close and excellent collaboration with vzw/npo Persephone, Caroline Tack was able to map out the situation in Flanders. This non-profit organisation has a particular position in Flanders: it is an organisation OF women with disabilities. Furthermore, the organisation has a tradition of

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[1] Hanna, W.J. and Rogovsky, B. (1991) 'Women with disabilities: two handicaps plus', Disability, Handicap and Society, Vol.6 (1) pp.49-63.

[2] Nosek, M. A., Hughes, R. B., Taylor, H. B., & Taylor, P. (2006). Disability, psychosocial, and demographic characteristics of abused women with physical disabilities. Violence Against Women, 12 (9), 838-850.

[3] Brownridge, D. A. (2006). Partner violence against women with disabilities. Violence Against Women, 12 (9), 805-822

monitoring and reviewing the situation of women with disabilities in detail (see, for example, the report already produced in 2002 with particular attention to the accessibility of refuge centres for women being victims of violence).

Each year, about 100 to 150 students graduate in this field and, as a lecturer, you won't forget approximately 5 students for one reason or another. Caroline is one of these extraordinary students: on the one hand, she focused on the situation of women with a limitation (a little stubborn, as people from Ghent can be) and, on the other hand, very sensitive (like no other she keeps the finger on the pulse when collaborating). She is also very much convinced of the need to address women themselves as 'hands-on' experts (the expression: ‘nothing about us without us’ is not uncommon to her). Thus, a very fascinating woman in cooperation with a very fascinating association.

Geert Van Hove, Prof. Dr. (University of Ghent and Free University of Amsterdam)

Part I The specific situation of women with a handicap

Reality, policy and Persephone

There exist a lot of stereotypes about men and women with disabilities. Anyone who thinks stereotypically is often not aware of it. However, these concepts oppress people. We mention the most common ones below:

Employment:
- A woman with a disability is often told, ‘Working? I'd forget it if I were you. Continue to do your household and you will already be snowed under’.
- A man with a disability is addressed: ‘Working? Yes, try and go for it! You cannot stay at home all day long, can't you.’

Partnership:
- A woman with a disability is often told: ‘Get that idea out of your mind. What man is interested in a disabled woman these days!’.
- About a man with a disability it is said: ‘He will probably find a lovely woman who wants to take care of him…’

Children:
- A woman with a disability is often told: ‘Get this idea out of your mind. You can't even care for yourself!’. In case she has children and asks for help during a more difficult period, she sometimes receives the following answer: ‘*It's you who* wanted children, you should manage it on your own then!’. Or the cleaning lady interferes in the children's education. Why?
- About a man with a disability it is said: ‘His wife will take care of the children’.

Domestic violence:

> A woman with a disability is often told: ‘You, a victim of violence? A man, who sacrifices his life to live with a disabled woman, is as good as gold anyhow! You are aware of it, aren't you?’.

Stereotypes are not only present in our society, but often also in our heads. A lot of women with disabilities also say: ‘I'll stay at home, I surely won't find a job.’. Or: ‘I will give up my dream of having a partner and my own family, so it can't turn out to be a failure.’. Or: ‘They won't believe I am a victim of violence. After all, I will remain silent.’. Or: ‘Because of my disability, I can't defend myself. I'll surrender.’. And also the following: ‘Why should I dress nicely? I am and remain the handicapped.’, is a key concern.

Besides the stereotypes, the man/woman difference also appears from poverty rates. The report ‘Handicap, inkomen en toegang tot de gezondheidszorg’ (handicap, income and access to health care, a joint research project of the associations KVG (Catholic Association for the Disabled) and VFG (Flemish Federation of the Disabled) in 2010, shows that 30,3% of the female respondents live below the poverty line. Only 20,3% of the male respondents! It has not yet been scientifically investigated where the difference comes from.

We immediately point out here that there is a direct link between poverty and violence. Poverty not only increases the risk of ending up in a violent relationship, but also reduces the possibility to escape from it. Financial and aid dependency are precisely the same.

Violence is therefore present in everyday life. We discussed this in detail in part III of our previous book.

We wrote about policy on page 27:

> *'When we examine the Equal Opportunity policies, we must conclude that there is practically no attention given to women with a disability. In government policies that aim the disabled, women are again completely invisible. From the huge amount of political programs which were set up one might conclude that disabled women simply do not exist!'*

Thanks to the feminist theologian Anneleen Decoene, we have discovered that this kind of blindness is not new[4]. In 1982, a collection on the history of Black American feminists was published. It was entitled with the highly significant phrase:
'All the Women Are White, All the Blacks Are Men, But Some of Us Are Brave.'
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Some of us are brave. This certainly also applies to us. We are breaking new ground. Indeed, Persephone is the first and still the only association for and by women with disabilities in Belgium. Since its foundation in 1995, our non-profit organisation is entirely operating thanks to voluntary experts. On the one hand, it is our mission to eliminate stereotypes and, on the other hand, to thoroughly shake-up the politicians. If we don't do it, no one else will!

We proclaim aloud and clear: 'We can look for help ourselves and realise amazingly much: work, start a family, physical self-defence, … Everything is *well and truly* possible.' Our mission is as follows: 'We stimulate and inspire each other. Furthermore, we defend interests and raise awareness.' Or, in other words: 'We stimulate and inspire each other, but also other people.' Concerning those others, politicians and academics assume a special role.

The way how we concretise everything is described theme by theme in the following. You will thus get a more complete overview of what we do. It also allows us to fit in Caroline's work with all our activities.

We stimulate and inspire each other

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[4] lecture 'Uitsluiting doorbreken' (breaking exclusion) on March 23rd 2015 in Antwerp

We work in small groups in different regions. ‘Small groups’ means a minimum of 6 and a maximum of 12 participants. Our members suggest the topics, but non-members are also welcome. We often talk about the stereotypes mentioned above. Women who have already fought this battle, can then give the others tip-offs. We do not only organise chat afternoons, but also workshops around topics such as colour and style advice, self-defence, regaining your strength, etc. You find the complete list in the appendix.

These meetings are exclusively accessible to women with disabilities. Thus we can share experiences with like-minded women and introduce ideas ourselves. The closed character also guarantees a certain security, especially when working on violence against women. We understand each other quickly, because we all live with important disabilities. We can support each other because our disabilities are divers. By working in small groups, everybody can "have the floor", even women who have difficulties expressing themselves.

Because we know that many women with disabilities have a low income, we keep the prices of paid activities very low. In addition, our members receive a 50% discount and half of their travel expenses are reimbursed.

In each Flemish province, we have at least one person who is responsible per region. The person who lives far away from our regional 'managers' can still request an activity. This implies, however, that at least 6 persons must be found and also a room which is accessible by wheelchair. We then check whether it is financially feasible for us.

Employment

Having a job is not only good for the person's self-esteem. It also reduces financial dependence. Furthermore, society learns that women with disabilities can do much more than just ‘doing the housekeeping’.

The man/woman difference

We started with the ‘employment’ topic in 2007. The theme of the Women's Day on November 11th 2007 was ‘Women and work’. At the request of the VOK (Vrouwen Overleg Komitee/women's consultative committee), we investigated the situation of women with disabilities. We listened to our members and immersed ourselves in the Flemish government's 2005 figures. We concluded that it is not easy to find a job if you are limited in your abilities, even if you have a higher education or university degree. Not easy, but surely feasible. Slow and steady wins the race. Most of our members who are able to work, can testify that. Keeping a job is much more difficult. Almost all older women (40+) were dismissed, as their employers preferred to pay a severance payment rather than find solutions for additional disabilities to come. The experience of one of our members is also revealing. After back surgery, she ended up in a wheelchair and was put into early retirement with the argument: ‘We do not want to help you, as a woman, to find a new job. Just go on doing your housekeeping.’ The classical distribution of roles is still key.

The research of 2005 strikingly illustrates this. Let us look at people with higher education. If they are between 20 and 49 years old, and do not have disabilities, then 90.6% of men and 81.5% of women work. If they are disabled, then 75.8% of men and only 60.2% of women work. If they are between 50 and 64 years old, and do not have disabilities, then 71.1% of men and 45.1% of women work. If they are disabled, then 44.1% of men and only 26.6% of women work. The economic crisis that has existed since 2008 undoubtedly enhanced the differences between men and women.

We have our seat in the "Adviesraad voor Personen met een handicap" (Advisory Body for Persons with disabilities) of the City of Antwerp. In 2013, we requested and received gender-specific employment figures for people with disabilities. Bearing the stereotypes in our mind, we expected that fewer women had jobs compared to men. And our assumption seemed to be correct. The difference was even enormous! Judge yourself: In October 6,829 people worked (in full-time equivalents) for the City of Antwerp, of whom 113 with a work-limiting disability. Among those 113 persons, there were only 19 women. We do not have figures from other Flemish cities or municipalities, but we herewith invite them to count how many women with disabilities are being employed there.

Influencing policy

These results require advocacy for women with disabilities. This implies a long process. Politicians are indeed not waiting for our proposals. We cannot do everything at the same time. This is why nothing has been done with our study for several years. In 2012 it suddenly changed. In springtime, Jos Wouters, a staff member of "Gebruikersoverleg Handicap, Chronische Ziekte en Arbeid" (user consultation about disabilities, chronic illness and work), sent us a mail:

> *'At present, we are working on an advice concerning the existing gender gap in professional careers commissioned by the "SERV (Sociaal-Economische Raad Vlaanderen)" (Social and Economic Council of Flanders). I have found your text of 2007 which can be a good start for completing this advice. Would you like to share your experiences on this topic with?'.*

It is obvious that we could not resist that proposal! We were able to provide Jos a lot of examples of how employment can turn out (badly). In the final advice of the SERV, just a small part of our contributions remained. However, women with a work-limiting disability are explicitly mentioned in the advice. And this is already a success. This allows us to be constantly involved in the process.

Initially, two round tables were planned, which had to convert the advice about the gender gap in professional careers into a concrete action plan. For Pascal Smet, the former Flemish minister for Equal Opportunities, this plan was intended to serve as a guideline for taking measures. In order to prepare these round tables, we received a questionnaire via Jos from the "Steunpunt Werk & Sociale Economie" of the K.U. Leuven (Catholic University of Leuven). We twice met a specific group of people to answer these questions, in Bruges and in Antwerp. From these two meetings Jos deduced the policy recommendations. You find them on our website. The round tables that were to take place in spring 2013, were postponed and finally disappeared from the ministerial planning. The good news was that at the beginning of 2015, the Economic and Social Council of Flanders (SERV) had planned a meeting with Philippe Muyters, the new Flemish minister for Employment and Innovation. Our policy recommendations were put on this agenda. The bad news is that there remains a deafening silence on that subject.

Academics were not waiting for our proposals either, but here too, Lady Luck helped us a little bit. In autumn 2013, we received an invitation from the University of Hasselt for a study afternoon entitled ‘Werken met een handicap: uitdagingen voor organisaties in de 21ste eeuw’ (working with disabilities: challenges for organisations in the 21st century). We pointed out to the educated ladies and gentlemen that women with disabilities are still too often ‘invited’ to do the housekeeping. Afterwards we have sent the figures we had at our disposal to Stefan Hardonck from the University of Hasselt, as well as the text we had prepared together with Jos. Stefan's answer:

> *‘Thank you very much for sending this extremely interesting information. Indeed, attention should be paid to the gender dimension (male-female) in relation to disabilities. We examine how we can do this in the near future.’*

Unfortunately time is a relative concept. Now, almost two years later, this attention is still far off.

It is not part of our nature to give up. We continue to knock on doors, both at SERV and at the University of Hasselt. Slow and steady wins the race, we know that from experience.

Partnership

What man would be interested in a disabled woman these days? ‘Disability’ is surely not mentioned on his bucket list. Disability is not only a burden, but also an added value. We pointed that already out in the introduction:

> *‘Disability’ does not sound awkward to us. We know indeed that thanks to our disability we have got a lot to offer: perseverance, creativity, humour ….*

This is why disability provides depth to a relationship.

On June 8th 2006, an article was published in the weekly magazine Libelle entitled: ‘Leven met een handicap, maar niet beperkt in de liefde’ (‘Living with a handicap, but not restricted in love’). In this article women with disabilities – and their partners – precisely testify about that depth. We contributed to this article.

In 2013, we organised a chat afternoon on the couple's relationship in Sijsele Damme (West-Flanders). That gave rise to the request for a chat afternoon on sexuality. As soon as we find the right person to lead this afternoon, we will plan it.

Sometimes people ask if we are a dating agency. No, we aren't. We are not supporters of a dating agency. We refer individuals who are interested in that kind of thing to the vzw ’t Klikt or to the social network website www.dottie.be. We bring homosexuals, lesbians or bisexuals with a mental disability in contact with organisations such as "de Roze Joker" or "de Roze Ballon".

The relationship with a partner can sometimes go wrong. We come back to that subject in this part and also in part III.

Motherhood

Being the first and still the only association for disabled women in Belgium, we firmly defend the right to motherhood. We are not only thinking about biological motherhood. Those who have to abandon the dream of having their own children can choose adoption or become a foster mother.

The subject of one of our first chat afternoons in 1995 was: ‘How to make good arrangements with my (domestic) help?’. We then figured out, among other things, how you best react on the fact that your cleaning lady is interfering in the children's education.

In 1999, we organised a series of chat afternoons on and with disabled mothers. Women who had a family told us how they had managed to eliminate doubts in their surroundings or how they had solved practical problems. The monthly magazines "Opzij" and "Handiscoop" devoted an article to this topic.

During those chat afternoons, we gathered so much valuable information that in 2000 we decided to organise together with the KVG (Catholic Association for the Disabled) two study days for women with disabilities wishing to have children. By raising with this theme, we as an association, gave an important message to our society that strives for perfection: even though we, as women with disabilities, are not perfect, we still find life so precious that we want to pass it on. We made the headlines! You can find the subjects we placed on our program at that time on our website.

In 2011, we received an e-mail from a journalism student. At the request of the weekly magazine Flair, she was looking for single mothers with disabilities under the age of 40. They are rare, but with our help, she found one. She even found a second one. The article was published in issue 2-1639 dated January 10th 2012. Flair has grouped both interviews under the heading ‘inspiration’. We were allowed to put them on our website.

In 2012, students designed the educational workshop for us called ‘Bruggen bouwen’ (‘Building bridges’). Our aim is to make people without disabilities reflect on the obstacles and prejudices we encounter in daily life. The workshop itself consists of three parts: a statement game, an assignment game on a goose board and a conversation with an expert. The statement and assignment game were set up around the themes ‘family’ and ‘(prevention of) violence’. Since 2014, this workshop also exists for newcomers starting to learn Dutch. For this group of people, we have adapted assignments. The workshop is designed for associations or classes. The current assignments are suitable for young adults (16+) and adults. We are looking for students who can develop assignments for young people and children (10+).

Now and then, women with disabilities who want to start a family, ask us if we can provide them some practical advice. Over the years, a network of mothers with disabilities was created around us. Thus, we dispose of that network. It is also worthwhile to look at our northern neighbours: www.opvoedenmeteenhandicap.nl was made by and for parents with disabilities. Let us just add one hint: it is good to break gender roles, both for women **and** men. Daddies cannot breast-feed, but they can indeed take care of the children and pamper them. This can be found in each one of us.

Unfortunately, we have to conclude that the government often supports mothers with disabilities in an insufficient way. That's really advocacy! When it comes to this theme, it also implies a long process. But it should work one day, thanks to the United Nations Convention on the Rights of Persons with Disabilities. We come back to this subject in part III.

Violence

Our pioneering work

The Big Bang

In 1996, we received a telephone call from the social welfare service of the province of Antwerp. For one of her clients, a social assistant was looking for an accessible refuge centre. In the whole City of Antwerp and in the province there was no way to find one. If we could do anything for her? We could not perform miracles, but we started a letter writing action. We sent a letter to all shelters and refuge centres in Flanders asking the question whether they could accommodate female wheelchair users while making some simple suggestions so that they could improve the accessibility of their homes. Their answers were alarming: throughout Flanders, there seemed to be only one single shelter where wheelchair users were welcome. Domestic violence against women with disabilities did not officially exist! Not only assistance centres were not ready for that, even no statistics existed on the subject, there were no resilience training sessions either, there was nothing! If we wanted to change that, it would have taken us many years of work. So, we just got our teeth into that subject. It is clear that if we don't do it, no one else will!

Our tailor-made training sessions

We started with the resilience training sessions. When there is aggression against people with disabilities, the disability itself is just one single factor. Gender is an important additional risk factor for women, and, in general, women are attacked in a different way compared to men. Sexual violence by acquaintances and partners occurs rather frequently. This is why we organised in 1997 (right in the middle of the post-Dutroux period), the first self-defence and resilience workshop for women with disabilities, together with Refleks and KVG. This workshop took place in Wilrijk. The interest was so overwhelming that we had to refuse a lot of people. One year later, we repeated this initiative in Herentals. The Dutroux case was no longer relevant. Did the openness on domestic violence fade away once more? At that time, we gathered just enough participants. In 2002, the organisation Refleks stopped its activity due to a lack of subsidies. We had to find another organisation that could provide self-defence training to women with disabilities. In 2006, we started our cooperation with Garance. We successively organised a workshop in Leuven in 2006, in Kessel-Lo in 2008, in Hoboken in 2011, in Nieuwpoort in 2012 and in Antwerp in 2014.

The pattern of such a workshop is always the same: you first learn to recognise dangerous situations in time. Thus you can stop violence even before it has really started. This is called prevention. Afterwards you learn to throw your body language into the fray and to defend yourself verbally. Finally, you learn concrete defence techniques. Our teacher was trained in the Netherlands to teach women with disabilities self-defence techniques. Starting from what you are *really* capable of, she looks for you for the most appropriate techniques. You will discover that you can use your wheelchair, crutch, white cane or whatever to defend yourself. To end the day, she asks: ‘Have you ever been going through something? How did you react then? Does anyone know how to do it better now?’. When we get the evaluation forms back, we observe that the participants go home with a much more self-confidence.

Need for statistics

Women also tell us spontaneously what they have been going through, sometimes as soon as they know we are working around violence, sometimes only after years. Thus we know a lot of victims' stories. How often does violence against women with disabilities occur in reality? Sometimes this question is addressed to us. Official statistics do not exist, but if we estimate the situation instinctively, the result is 1 out of 3. Is this realistic? Probably yes. Statistics on domestic violence do exist in general: in 1 out of 5 families violence occurs. Women with disabilities are more vulnerable and are surrounded by more potential perpetrators: besides family members, people from the large health care sector can abuse the situation. We hereby invite academics to produce statistics, specifically on violence against women with disabilities.

The wall of disbelief

We already pointed this out in the introduction and when talking about stereotypes: women with disabilities who are victims of violence, smash into a wall of disbelief when they try to reveal their story.

That wall is built on two false assumptions that are regrettably widespread among the layers of the population. ‘A person who cares for somebody else for a long time, must be a good person. This person does not abuse the situation.’, and ‘The disabled person who says she is a victim of violence, probably does not realise what is happening.’ It's a pity for those who like to believe in fairy tales, but there are people everywhere who want to take their frustrations out on an easy victim. The second assumption results from ignorance. Anyone who is not familiar with disabilities, easily assumes that such a person does not really know quite well what is going on, especially if that person speaks a little strange or behaves in a strange way. Of course, this turns out well for the perpetrator! That is why we urgently call on people who are working (or going to work) in victim support to inform themselves thoroughly about the capacities of people with disabilities.

We urge victims again to come out with their story. Few testimonies of victims mean too little data to carry out scientific research, to establish statistics and to change mentality. It is extremely difficult to break the silence, but it is liberating. Many among us experienced it themselves. As you know, you will find inspiration on this topic in the last appendix. We come back to this subject in part III.

Is it easier to break down the wall of disbelief if there is a separate contact point for women with disabilities? There is no consensus about this. During her investigation, Caroline met women who were arguing for such a contact point. We fear that (potential) perpetrators may find inspiration in such a contact point. We assume that existing contact points must be open to women with disabilities. This means that women can have the data about their disabilities registered there. We also come back to that subject in part III.

Our quinquennial research

Every five years, we study if refuge centres and shelters are wheelchair-accessible and encourage these institutions to take the necessary steps in the right direction. In our survey, five yes-/no-answers are sufficient:

- We have already had to refuse (female/male) wheelchair users because our house was not adapted for wheelchairs: ……
- (Female/male) wheelchair users have access to our house and can go
    - inside: …….
    - to the toilet: …….
    - in the shower: ……
- A room is available for a person in a wheelchair: ……
    - on the ground floor: ……
    - upstairs: ……..
- By means of simple alterations we could welcome (female/male) wheelchair users: ……
- We need subsidies for these alterations: ……

In addition, there is some space for potential remarks or suggestions.

The first series of letters was sent in 2001.

European conferences

We have indeed contact with our European sister associations. In 2001, 2005 and 2007 we participated in Italy in a European conference on violence against women with disabilities. In our previous book, we paid a lot of attention to that matter.

Influencing policy

In 2002, we published a brochure that was translated into English and French at the request of the European umbrella organisation. In this brochure, we have launched for the first time a call for global scientific research specifically dedicated to women with disabilities. A call Caroline answered... in 2012. With our brochure, we targeted, among others, Mieke Vogels, the former Flemish minister of welfare and equal opportunities. We drew her attention to the inaccessibility of refuge centres and shelters and pointed out the lack of figures.

In 2003, we invited ourselves to the working group called ‘Over grenzen’ (across borders) which elaborated a protocol on the prevention of inappropriate behaviour in institutions. In 2006, this working group completed its activities and the Vlaams Agentschap voor Personen met een Handicap (VAPH) (Flemish Agency for People with a Disability) published a CD-ROM providing practical methods for youth services, both in terms of prevention and reaction.

With the results of our own 2006 survey on refuge centres, the UN Convention on the Rights of Persons with Disabilities adopted on December 13th 2006 in New York, the European conference which took place in 2007 and some precious initiatives in Flanders, we had enough information to update our brochure. This is how, in 2008, our previous book saw the light of day. We had it immediately translated into French, English and German, so that ,in 2009, we were able to distribute it throughout Belgium and within European human rights bodies. In Belgium, we sent it, with an accompanying letter, to the Prime Ministers, the Deputy Prime Ministers, the ministers or secretaries of State of equal opportunities, social affairs, education, justice and employment. Their reactions were disappointing: 75% showed no interest at all. No one is a prophet in his own country... Fortunately, the international response was completely different. From various organisations we received congratulations on our pioneering work. The French magazine ‘Faire Face’ devoted an article to it. The English translation even went worldwide. Our Australian sister association WWDA (Women With Disabilities Australia) had found it on the WAVE website (Women Against Violence Europe) and sent us a mail with their newsletter ‘WWDA News’ in March. Our book review was key in that newsletter! In addition, we received an invitation in 2011 from the Centre on Disability Studies at the University of Hawaii. Each year they organise a two-days international conference on disabilities and diversity. Their 2012 program included violence for the first time. Given our years of experience on that subject, they offered us to take the floor. Unfortunately, travelling to Hawaii was not feasible for any one of our association. It would have been a real pleasure meeting them! Since then, we have received the announcement of their conference every year, with their website www.pacrim.hawaii.edu at the bottom of the page for further information. Too bad Hawaii is so far away...

Let's get back to our own country. On November 25th 2012, the International Day Against Violence Against Women, the competent persons of the Di Rupo government received our previous book. On February 6th 2013 we received a response from Joëlle Milquet, Deputy Prime Minister and minister of Equal Opportunities. The one and only answer! This is why we sent her a letter of thanks and a reminder to the others. With results. Finally, we received in total a positive reaction from 57% of the people.

On November 25th 2014 we organised in collaboration with the University of Ghent a study afternoon entitled ‘Vrouwen met een beperking en geweld: eindelijk schot in de zaak!’ (‘Women with disabilities and violence: things are finally moving!’). Caroline presented her research there. Afterwards, she had a phone conversation with Veerle Beel, a journalist for the daily newspaper De Standaard. On November 27th 2014, she published an article on this subject in the column called ‘Hart voor Handicap’ (‘A Heart for the Disabled’). This article caught the attention of Sabine de Bethune, the CD&V politician who mainly works on women's rights, employment and family, and the North-South-relations. She immediately formulated a parliamentary question for Liesbeth Homans, Flemish minister of among others Equal opportunities and poverty reduction, and Jo Vandeurzen, Flemish minister of welfare, public health and family. You find this article, the question and the answer on the next pages.

At the beginning of 2015, our self-defence teacher set up the "Feministisch Platform Tegen Geweld Tegen Vrouwen" (feminist platform against violence against women), because recently we have been living in an economic crisis. On the one hand, this crisis reinforces violence and, on the other hand, it reduces funding for associations that are fighting violence. This is why a strong platform is necessary at national level where Flemish- and French-speaking feminists can exchange experiences together with their organisations. In order to give the platform a real chance of autonomy, only feminist organisations were invited, not institutes or political parties. As first and still the only association for and by women with disabilities in Belgium, it was a pleasure to Persephone to accept this invitation. The platform is based on the Istanbul Convention, a Council of Europe treaty that entered into force on Augustus 1st 2014. The treaty aims to prevent and combat violence against women and domestic violence. By accepting that violence against women is a manifestation of the historically grown, unequal power relations between men and women, which have led to domination over and discrimination of women by men and have undermined the full development of women, the legal status of women has significantly improved within Europe. You will find the full text of the treaty on: www.coe.int/t/dghl/standardsetting/convention-violence/convention/Convention%20210%20Dutch.pdf.

Our mission is to clearly claim our place at events of women's umbrella organisations, both on a national and international level. Since 1999, we have been participating in Women's Day in Belgium on November 11th. Annually, we are involved in actions for International Women's Day on March 8th. Obviously, we raise our voice during the International day against violence against women. If we personally do not organise anything that day, we join one of the provincial events. We participate in the World March of Women against violence and poverty. In 2000, it took place for the first time between March 8th and November 25th. All over the world, women were on the streets demonstrating against violence and poverty. We also participated. Here in Flanders, at the European final march in Brussels and even in the world final march in New York. Since 2005 and every five years, the national committees of the World March of Women organise an event. In Belgium, we have always participated – and we will certainly do so in the future.

Our future

What more will the future bring?

The VFG, Flemish Federation for the Disabled, is thinking about a project on violence. They discovered that the Koning Boudewijnstichting (King Baudouin Foundation) provides subsidies for such projects. In this matter, they like to work with us. According to them, our experience throughout the years is a good start. We obviously share this view. We have to decide on the way in which this collaboration will be implemented and the duration of the project. The first brainstorming session has already taken place. The result was a list of ideas:

- Resilience and self-defence workshops for women with mental disabilities.

- An action for people with non-congenital brain damage. Such a lesion almost totally changes people and can also change the character of a person to such an extent that the person becomes aggressive.

- An action on poverty and violence.

We will also have this book translated and send it with an accompanying letter to the competent ministers and secretaries of state, to the academics we know and to our European contacts. So that everybody even gets a better insight into the specific situation of women with disabilities... and hopefully concrete steps will emerge.

We will also distribute this book locally, as far as it is financially feasible. First of all, we think about the local police and the mayors.

We will also organise other resilience and self-defence workshops, insist on the accessibility of victim support, on the intensification of scientific research, etc.

Veerle Beel's article

Women with disabilities mainly victims of psychological violence

Women with disabilities are more vulnerable to violence, explains Caroline Tack, who graduated at the UGent (University of Ghent) as remedial educationalist with a master's thesis on the same subject.

In Flanders, significant research on that subject has not yet been done. But a recent European study including 42,000 women from 28 EU countries has already pointed to the stumbling block: women with disabilities are much more vulnerable, they become more easily victims of violence – all kinds of violence. And often, this is still a taboo.

Caroline Tack herself decided to figure out what the situation here in Belgium looks like. Through various online channels she launched a survey and, for her master's thesis, she also conducted prospective interviews with women who reported that they had already experienced violence.

Why are women with disabilities so vulnerable? ‘First of all, because they are more often in a position of dependence. They are in contact with so many social workers: assistants, teachers, nurses, drivers, carers, counsellors. As a result, they are more often in a weaker position’, says Tack. She also conducted this research at the request of Persephone vzw/npo, an association of and for women with disabilities, which celebrates its 20th anniversary next year.

Being ignored

‘It is also, but not at first sight, about sexual abuse’, says Tack. ‘The most frequent form of violence appearing in this group is psychological violence: women are being told that they are useless, that they are only invited to do the housekeeping, or that someone deprives them of their medication or their aids.’

Being ignored is a second form of violence. ‘One that hurts badly’, says Tack.

‘Often the victims are not believed. For example, when violence between partners occurs: they are told that a man who ‘sacrifices’ himself to live with such a woman, must really be a good guy. And because they know that they will not be believed, they do not easily file a complaint.’

Keep smiling

Women with autism (…) told the researcher that they often do not know quite well how to react when someone bothers them. ‘They reported that they kept on smiling, even if they did not like the advances. Only a few hours later they realise how they could have reacted in a better way. At that moment itself, they do not always realise that men want more from them. This is why things start to go wrong.’

A woman told her that she had become disabled – a hemiplegia – because her father punched her and that afterwards she had been locked up for months in a cellar to avoid questions from the neighbours.

The parliamentary question

written question n° 234
by **SABINE DE BETHUNE**

date: December 5th 2014

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addressed to **LIESBETH HOMANS**

Deputy prime minister of the Flemish government, Flemish minister of the Interior, integration, housing, equal opportunities and poverty reduction

Women with disabilities - Victims of violence

Women with disabilities are more vulnerable to violence. This is revealed by Caroline Tack's master's thesis, a graduate at the UGent (University of Ghent) as remedial educationalist (De Standaard November 27th 2014).

In Flanders, significant research on that subject has not yet been done, but recent European research among 42,000 women from 28 EU countries has already pointed to the stumbling block: women with disabilities are much more vulnerable, they become more easily victims of violence – all kinds of violence. And often, this is still a taboo.

At the request of PERSEPHONE, an association of and for women with disabilities, which celebrates its 20th anniversary next year, the researcher investigated this issue in Flanders. She examined why women with disabilities are so vulnerable, which kind of violence occurs and how they cope with it, how they perceive it. It seemed that psychological violence is the most common form of violence with which women are confronted.

1. Did the Flemish government initiate the examination of this issue or was it tasked by them?

2. Does the minister have any idea of the prevalence of violence among women with disabilities?

3. Does the minister implement specific policies related to violence against women with disabilities and, if so, which ones?

4. Will the minister ensure that the next interfederal National Action Plan on violence against women also focuses on this specific target group?

5. Does the Minister somehow grant support or recognition to associations or interest groups of these persons and does the minister involve them in the policies?

These questions were addressed to the ministers Liesbeth Homans (234) and Jo Vandeurzen (173).

LIESBETH HOMANS

DEPUTY PRIME MINISTER OF THE FLEMISH GOVERNMENT, FLEMISH MINISTER OF THE INTERIOR, INTEGRATION, HOUSING, EQUAL OPPORTUNITIES AND POVERTY REDUCTION

COORDINATED ANSWER

to question n°. 234 DATED December 5th 2014

by **SABINE DE BETHUNE**

1. Did the Flemish government initiate the examination of this issue or was it tasked by them?

   For both my services and those of Minister Vandeurzen, little research has been done until today on violence against women with disabilities. Nor has there been any research on this point by the Flemish Government.

2. Does the minister have a view on the prevalence of violence among women with disabilities?

Given the limited research material, the vision on the prevalence of violence against women with disabilities us limited.

3. Does the minister implement specific policies related to violence against women with disabilities and, if so, which ones?

Within the Vlaams Agentschap voor Personen met een Handicap (VAPH = Flemish Agency for People with a Disability) approved facilities and services are obliged to notify the VAPH if they are confronted in their activities with inappropriate behaviour towards persons with disabilities. This includes indeed violence against women with a disability.

Furthermore, facilities are obliged to dispose of a reference framework for inappropriate behaviour. They must follow a procedure for prevention and detection and react in an appropriate way.

Since March 2013 and on the initiative of Minister Vandeurzen, an integral helpline (1712) has been installed against abuse, violence and child abuse. Since 2015, the gender of victims has systematically been registered in the declaration forms.

4. Will the minister ensure that the next interfederal National Action Plan on violence against women also focuses on this specific target group?

We pay the necessary attention to this target group in the interfederal action plan. In the initial approach of the new Nationaal Actieplan Partnergeweld (NAP = National Action plan against violence between Partners), the following actions have already been adopted, which are relevant to the problem raised:

- conduct an in-depth research on the scope of violence against women and girls with a disability, on a national level and in collaboration with the associations of people with a disability and the university sector (current status concerning the accessibility of shelters, information and communication technology, assistance services, etc.);
- conduct specific awareness-raising campaigns with particular attention to vulnerable groups (migrant women, people with disabilities, LGBT people, elderly);
- awareness-raising actions concerning violence between partners focusing on women and girls with disabilities to provide them the means they need to solve situations in which conflicts can arise and can then lead to violence.

The current version of the NAP (= National Action plan against violence between Partners) is not yet final. Minister Vandeurzen and I urge that the above-mentioned actions be maintained.

5. Does the Minister somehow grant support or recognition to associations or interest groups of these persons and does the minister involve them in the policies?

From the Welfare, Public Health and Family services, no allowances are assigned to associations and interest groups which specifically focus on violence against women with disabilities.

However, an agreement between the VAPH and the Vertrouwenscentrum Kindermishandeling Vlaams-Brabant (trust centre for abused children in Flemish-Brabant) does exist. This is where facilities and users can get help for undesirable and excessive behaviour. Persons with disabilities who are assisted or accommodated by facilities for persons with disabilities, can also get help here.

From the equal opportunities policy, there is currently no support from organisations that are specifically concerned with violence against women with disabilities. There is support from civil society organisations which are working on gender equality and disabilities.

As stated in the government agreement and the policy on Equal Opportunities, I have the ambition to continue to shape the concept of the participation of the group of people with disabilities in policy making in Flanders. In the long run, this also provides the possibility to address , from a political point of view, the concerns and experiences of this group with regard to the specifically mentioned subject. This is also a good complement to the measures already taken to combat violence, to receive and care for victims and to raise awareness.

A poem

Some victims manage to add poetic brilliance to their story. Our member, named K., plunged into her poems and selected ‘Geest’ (soul) for this book.

Soul

By rotating around an axis, in a state of advanced decomposition,
your soul disperses the myth of
faith, hope and love,
while causing confusion through pain.
Destruction affects me too,
because, for a long time, I'm not the wooden bird anymore in which you crudely peck,
which afterwards goes along with it very quickly,
because I had chosen for a long life
and now, my love fades away

February 1st 1988

We dedicate this poem to all victims of our target group.

Part II The scientific research of Caroline Tack

The question

Violence against women with disabilities is still a taboo. A lot of people assume that 'having a limitation (disability)' is a protective factor against various forms of violence. In order to break this taboo, I launched this research with the non-profit organisation Persephone. Since there are still few studies on violence against women with disabilities in Flanders, the study will rather be of an exploratory nature. We have mainly examined the impact and type of violence against women with a disability.

Persephone vzw/npo has already collected several testimonies, but official figures are not known in Flanders. This is the reason why, years ago, Persephone vzw/npo has already asked students from various universities to launch a large-scale study concerning violence against women with disabilities.

Large-scale means:

- All types of disabilities must be part of the study population: mental, physical, psychological, auditory, visual, …
- All types of housing must be part of the study population: institution, family, autonomy, small-scale community, ...

To obtain a correct view, the following should be registered:

- What type of violence it is
- Where violence took place
- What the relationship is with the perpetrator: assistant for daily-life activities, therapist, co-resident, teacher, parent, partner, ...
- In case the victim has not filed a complaint, the reason why
- In case the victim has filed a complaint, what has happened with the complaint

Perhaps the study should be carried out in various phases, since it covers both a legal and relational aspect.

Until now, little investigation has been conducted on the frequency and perception of violence among women with disabilities in Flanders. This also became clear when I was looking for various scientific and other articles.

Since 2007, facilities and organisations, approved by the Flemish Agency for People with a Disability, have been obliged to pursue a policy of prevention against inappropriate behaviour, including (sexual) abuse and violence[5]. Despite this guideline, violence within these facilities and organisations may still occur. In addition, persons who do not make an appeal to such organisations, remain on the side-lines with respect to this instruction.

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[5] Opdebeeck, S., Sykora, H., & Vermeire, L. VAPH (2008). Study with regard to prevalence, incidence, report and registration of inappropriate behaviour with respect to disabled persons. Consulted on April 16th 2013 via http://www.vaph.be/vlafo/view/nl/2894083-Grensoverschrijdend+gedrag.html

The investigation

Starting point

Violence is characterised by various definitions and levels. In this study, women with a disability were the experts in determining the definition of violence: "Violence is what women with disabilities experience themselves as violence".

This research is of an exploratory nature, which often brings about more new questions than before the study. This research measured the impact and the type of violence on women with a disability. The goal of our study is not to generalise the results, which provides us an opportunity for further studies to be carried out afterwards.

First step

The study was conducted via an online survey to investigate the violence that people with disabilities can endure. With Persephone vzw/npo I looked for women's organisations, organisations against violence, organisations of people with disabilities, of women with disabilities, who were willing to place my survey online. When I created the online enquiry, I inserted pictograms to make the layout more attractive and inviting. People who have difficulties in reading thus could fill in the survey. The survey was also accessible to persons with a visual impairment.

The online survey was filled in by 106 persons, including 17 men and 89 women. 73 of these people have a limitation, including 12 men and 61 women. This group of 61 women was a heterogeneous group, which has the advantage that the researcher can focus on exploring to a maximum various insights and perspectives.

The following tables provide an overview of the demographic characteristics of these 61 women:

a. Age

There is a response from various age categories, but the dispersion is not equal. Respondents also include people falling under the status of extended minority.

Age	*Number*
18-19	1
20-29	8
30-39	8
40-49	15
50-59	21
60-69	7
70-79	1

b. Residence

Women with disabilities live in various locations and with different partners. That table shows that especially people coming from facilities and hospitals fall by the wayside in this study. A majority of the respondents live alone, followed by those with a partner and children. A large part also lives elsewhere than stipulated, i.e. with friends, as a single parent, with brothers or sisters, in a foster family, etc.

Residence	*Number*
Alone	17
With a partner	9
With a partner and children	11
With the parents	9
Sheltered accommodation	5
Facility	1
Hospital	0
Others	9

c. Disability

Despite my opinion – in this study – not to think in terms of disability, I mention the various limitations that appear in the study to increase the transparency of the data. People with physical limitations form the largest group, followed by people with chronic diseases. Then there are people with mental, visual and auditory limitations, as well as people with autism. ‘Other limitations’ include communication disorders, disabilities due to brain haemorrhages and alike.

Disability	*Number*
Mental disability	8
Physical disability	37
Auditory disability	4
Visual disability	6
Autism	5
Chronic diseases	16
Others	6

Second step

I interviewed the women with disabilities who, at the end of the online survey, indicated that they were willing to help me with the follow-up of my research project. From this group, I only selected women who have been confronted with violence. Eight women participated in the interview. It were eight unique stories, where various forms of violence occurred. Besides, I also interviewed three women by phone, among whom one with a professional who represented a woman with a disability (due to communication problems). The respondents decided themselves where these interviews took place, so that the conversation about this ‘sensitive’ issue could be held in a more comfortable way.

Interviews with the respondents: Demographic characteristics

Respondent	*Age*	*Province (county)*	*Kind of housing*	*Kind of contact*
Respondent 1	52	Antwerp	Partner + children	At the respondent's place
Respondent 2	30	Limburg	Alone	At the respondent's place

Respondent 3	52	Flemish Brabant	Single parent	At the respondent's place
Respondent 4	41	East-Flanders	Alone + parents	At the respondent's place
Respondent 5	54	Antwerp	Other	At the respondent's place
Respondent 6	59	West-Flanders	With a partner	At the respondent's place
Respondent 7	29	East-Flanders	With the parents	Public place
Respondent 8	63	East-Flanders	Alone	Public place
Respondent 9	51	Antwerp	Alone	By phone
Respondent 10	26	Flemish Brabant	With the parents	By phone
Respondent 11	52	Limburg	Other	By phone

The results

Results of the enquiry

Forms of violence

The survey reveals that women with disabilities are confronted with different forms of violence. Psychological violence is the most common form of violence, followed by negation, i.e. rejection and sexual violence.

Form of violence	*Number*
Psychological	36
Physical	14
Sexual	20
Financial	13
Neglect	31
No violence	14
Others	2

Nevertheless, violence linked to limitation, also occurs in this group of women: they are confronted with the refusal to use aids and the refusal to help with personal needs, such as going to the toilet, taking a bath, getting dressed, eating and drinking.

Violence linked to limitation	*Number*
Refusal to use aids	11
Refusal to help with personal needs	13

Relationship with the perpetrators of violence

The results show that in most cases the perpetrators of violence are unknown persons. The second-largest group are the partners of these women with a limitation. On the same level, there is the category 'other persons', such as a volunteer, a host family, a daughter or son, elderly people, salesmen, the bank, a male nurse, an ex-husband and classmates. The next group of perpetrators of violence consists of friends, with parents on the same level, followed by brothers or sisters. Finally, people from the women's wider social network follow: co-residents, colleagues, therapists, employers and teachers.

Relationship with the perpetrators of violence	*Number*
Partner	11
Friend	10
Co-resident	6
Employer	3
Colleague	6
Parent	10
Brother/sister	7
Therapist	4
Teacher	1
Unknown	14
Others	11

Location where violence takes place

In most cases, violence takes place in the home environment. On the same level, there are also other places: in the car, on the train, via e-mail, at another person's home, in the street, in a shop, on public transport, on public roads, in the train station and in the surrounding neighbourhood. Other places where violence occurs: at the office, at school, in the facility and in the hospital.

Location where violence takes place	*Number*
Home	27
Work	7
Facility	5
Hospital	2
School	7
Others	23

Complaints

The online questionnaire investigated whether women had lodged a complaint. More than half of them had not filed a complaint. Reasons for their behaviour are among others: not having sufficient evidence, consequences for (family) relationships, unwillingness to think about it, threats from the perpetrator of violence, power position of the perpetrator of violence, fear that violence increases, dependence on others, minimising the facts oneself, ... In addition, especially fear and shame are mentioned as a motive for not filing a complaint. This is followed by disbelief, isolation by the perpetrator of violence and finally not knowing how to lodge a complaint.

Reasons why respondents do not file a complaint	*Number*
Shame	11

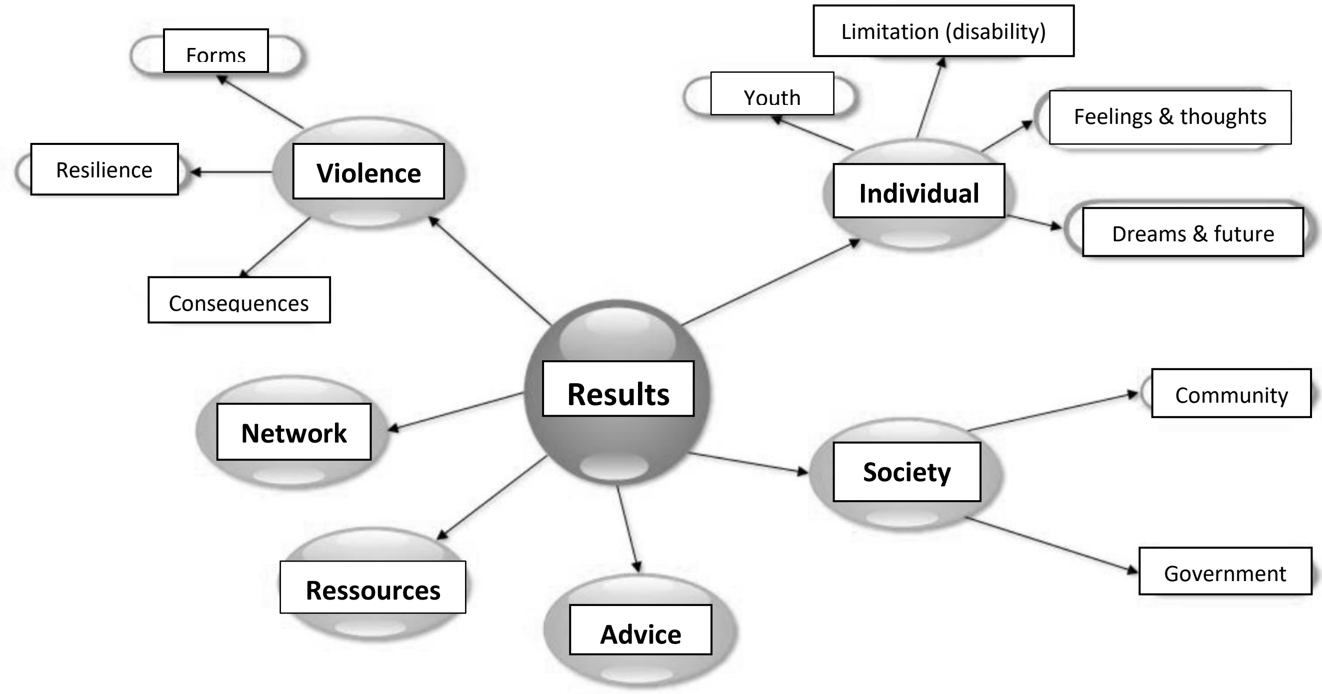
Isolation	3
Disbelief	5
Fear	11
I don't know how	2
Others	13

I asked women who had filed a complaint what happened with that complaint. Nothing was done with most of the complaints. Besides, as many cases were dismissed as there were persons prosecuted for such facts. A number of persons do not know what happened after having submitted a complaint. There were also complaints which were only followed up a little bit or where the person in question was referred to a contact point.

Consequence of the complaint	*Number*
Dismissed	4
Perpetrator prosecuted	4
I don't know	4
Never heard anything about it	5
Others	2

Results of the interview

The interviews reveal various topics and subtopics. The major topics are violence, the individual, the network, resources, advice and society.



Violence

Within the issue of violence, there are three subtopics, i.e. the forms of violence, the resilience against violence and the consequences of violence.

a. Forms of violence

Psychological violence seems to be quite a common problem:

> *"I especially experienced mental violence. Putting things in the middle of the table. Then I was obliged to say, for example: "can you pass me the milk, please?" and my mother then said: "I just sat down". If the milk is consistently put in the middle of the table, this won't solve anything."*

Furthermore, the interviewed women mentioned negation, i.e. rejection several times: not saying good morning; occupying the parking spaces for people with disabilities; during conversations, talk above the head of women, so not consulting her.

> *"Oh, there was for example a third person accompanying me to the lawyer and then they talk about me among each other while I am sitting there with them, and at the same time ignoring me. Or when asking for assistance at the National Health Service, the conversation took place with a social assistant of the National Health Service, afterwards with a care provider, they were also talking about me while I'm sitting next to them."*

> *"For example, thinking that I'm drunk while I had fallen and therefore not wanting to help."*

Sexual violence is also quite common. It is striking in the interviews that the taboo in this form of violence is even greater and that people rather prefer not to talk about that subject:

> *"And when I stopped the engine while we were in a parking lot in front of his parents' house, he did kiss me. But then he started opening my blouse. I was thinking: oh, he has other intentions. So I say nicely, but quite clearly: B, stop it. He just ignores it. So, I repeat once again: B, stop, with a lot more emphasis. But no, he is still ignoring what I'm saying."*

> *"And then, the person in front of me began to talk to me. I can't quite remember what he said to me, but it was fairly sexual and I thought: yeah, yeah, it's OK, come on, just ignore him. And then he also started to touch me on my legs."*

Furthermore, other kinds of violence were mentioned, such as physical violence, financial violence, stalking and so on.

> *"I have been pushed under water up to 4 times, also several times in the bathtub."*

> *"They have, euh, talked me into loans. Since I'm can't think and communicate fast enough, they have reached their goal. This is why I have such huge debts which I can't ignore any longer."*

b. Resilience against violence

There are various ways to fight against violence, for example file a complaint, use violence yourself (self-defence), escape from the situation, gather evidence and threaten.

> *"I had written some notes in my agenda for example, very clearly with his name, so that, whenever something would happen to me, I had the proof. It goes without saying that I was extremely terrified. I had evidence that he had done something to me."*
>
> *"Suddenly, he got worked up and grabbed me by the throat through the open window. And I thought by myself: oh, I knew, I had followed some courses of self-defence one day ... And one of those things I've learned there, was not to panic in emergency, but to react. I also knew that, when someone tries to strangle you, you almost have 8 seconds before losing consciousness. So, I thought to myself, 'I won't give way, I won't bow to violence... And with my right hand I started knocking very strongly on his shoulder, in fact on all parts I could reach."*

Some women indicate that they could not or did not dare to counter violence. They did not have the opportunity to use self-defence techniques to react against violence.

> *"I didn't, because I didn't dare, I was afraid that if I said something, it would even become worse."*

Sometimes women themselves come up with the necessary resilience to fight against violence:

> *"I think that it is above all the resilience of these women that should be strengthened. The self-image of these women must emerge from the woman herself."*

c. Consequences of violence

We can distinguish between positive and negative consequences.

Positive consequences include, among others, new commitments, interests, personal development, more openness and self-learning effects. Many women repeat this last point which includes, among others, being more vigilant, following one's gut feeling, ...

> *"And my social feeling towards others, my empathy has actually grown too in the sense that I don't want to do to another person what has been done to me."*
>
> *"Since then, if I have bad feelings, I actually try to get rid of it right away. Yes, you know, without trying to judge immediately, of course."*
>
> *"Euh, in the sense that it probably makes me more vigilant to similar situations."*

The negative consequences of violence can consist of the disability itself, pain, a sense of responsibility, being targeted, extra control over others and fear.

> *"The fact that I have more difficulties to walk on the street at night, but sometimes I have to do it in order to get home from the train station."*
>
> *Yes, this pain, when I think about it, comes back very rapidly. It is not as if it was totally wiped out."*

The individual

Within the theme of the individual, there are four sub-themes, namely youth, limitation, feelings and thoughts, and, dreams and future.

a. Youth

Our youth and our upbringing play an important role in the way we live our life. According to some women, a bad childhood is not always a forerunner of a difficult adulthood.

> *"Yes, your youth is something that permeates all your life, that's a fact. I did not have an easy childhood, not in my puberty.... I would rather say that I'd experienced such terrible things in the past and that I'd had a hard time then and actually got over it after a couple of years. Maybe I was already a bit stronger, I think. Stronger and at the same time also weaker in the sense that, yes, I had already experienced so much."*

Not everyone agrees with this. Some women experience a bad youth as the basis of what they are going through now.

> *"If I had had a different upbringing, I would have been a little firmer in life, I would already have found ways to stop it in a decent way."*

The years of youth can help to ensure that people carry certain values and norms with them and stick to them.

> *"I come from a family of 5 girls, neither the school nor the youth movement were mixed ..... And I actually grew up in a world where it was normal for women to have their say. So, euh, probably yes, if I had grown up in a world where it was normal for women not to anything to say, I might have reacted differently. Maybe I would have conceded then."*
>
> *"From the interaction with your direct environment, you get to hear as a child: "What will you be able to do? Poor little thing." Then you really become a poor little thing."*

b. Limitation (disability)

'Violence against women' and 'violence against women with disabilities' cover a different meaning because of the limitation. According to the respondents, limitation does play a role in certain situations of violence.

> *"Acts of violence always occur and everywhere, with or without limitations, between stronger and weaker people. The big difference between people with*

> *disabilities and without limitations is that violence is more often committed within the family."*
>
> *"Violence also happens against other women. What you have to consider are people with a limitation. That also happens with men. I am against pigeonholing. In this case, it is still necessary. This cannot be taken out of the context."*
>
> *"But I think it's very important, because at first I also thought: everyone has surely already experienced something like that, but when I told girlfriends about it, they said: 'M., somebody else does not experience such a thing so easily.' "*

For one of the respondents, the limitation was the result of a brutal blow from her father. In that case, the limitation is inextricably linked to the violence experienced.

Violence, however, occurs more easily because of the present limitation: considering sexual intercourse as a favour, giving negative remarks about the disability, being able to react less quickly .....

> *"Finally, it came down to this: no, I don't want anyone with a handicap. And from then on, I also had the feeling that he had something against my disability."*
>
> *"I have autism and so I think in a different and slower way. Once other people understand it, those things can thus happen and my reactions always come too late. So afterwards I know how I should have reacted, what I should have done, what I should have said. But then it's too late, you know."*

However, in certain cases, the limitation can be considered as an advantage, such as having strong arms because of the limitation, owning crutches or having a dog as a defence.

Women with disabilities also experience violence when they feel that the disability has no influence.

> *"I do suffer from my handicap, but thanks to my disability I have never been hurt, offended or anything else."*
>
> *"But that was not really related to my disability. So for me it comes from something else. So that's how she also did it to X. To a lesser extent, but it is more related to her own problems after all."*

c. Feelings and thoughts

Many of the women interviewed have to deal with a feeling of guilt. Some women feel responsible for the violence they suffer. The victims of violence are not to be blamed and yet they feel guilty. This is often linked to the attitude of the perpetrator and the environment of the woman in question:

> *"During all these years, I got also convinced that it was my fault. So when my husband said: 'I am nervous through your fault.' It was precisely as if it was my fault, while I couldn't think of anything."*

Other women feel guilty because they think they could have done more to prevent violence. They think that they should not have been so kind or indulgent towards the perpetrator of violence, that they should not have been there at that time and other similar examples.

> *"And I turn pale at the thought how guilty you can indeed feel, while you know rationally, euh, I thought: people who have been assaulted or so, they really know that it is not their fault, but this is not really being assaulted, but still, I really felt very guilty, thinking that maybe I had a responsibility to allow this for so long and keep talking to him and so on."*

For others, the diagnosis of limitation implies that feelings of guilt are no longer highlighted:

> *"Before, of course, but since I was diagnosed with autism, no longer. Now I know that I can't help it and that I shouldn't feel guilty."*

A number of women indicate that they were ashamed of their situation of violence, because the image others have of them does not reflect reality.

> *" For a long time, I couldn't say anything about it. Out of shame for my parents. You're ashamed of what they do to me."*

> *"Yes, I can decide for myself that it's okay, I can't do anything about it. It's because of my way of thinking. But the outside world doesn't see it that way. I think many people consider it being my fault or that I simply let it happen or... And then, I sometimes feel ashamed about it, yes.*

> *"Euhm, yes, it's a shared feeling. For one part, yes, and for another part, I am proud that I have defended myself successfully. But you know, I also feel shame because I started a relationship, where I could have known in advance that problems would arise."*

Fear is highlighted when coming into contact with various forms of violence.

> *"That's why I was terribly scared when he told me: 'I'll hurt you if you hurt me'."*

The women also talked about the feeling of helplessness towards the perpetrator of violence. These women are also powerless with regard to the violence itself. Violence is happening and there is nothing they can do about it.

> *"When you're in your bed and you can't get out and you just have to endure and wait until someone comes to help you, then you are really very helpless, eh."*

d. Dreams and future

Despite the confrontation with violence, all respondents of the qualitative interview indicate that they still have dreams for the future or that most of their dreams have already been realised.

> *"Oh yeah, many, many, many dreams. Like anybody else, I suppose? In fact yes, common things like: going to live alone, working, having a good job. My big dream is to participate one day in development aid. This is not that easy with my disability, but I haven't yet put that idea out of my head. I see all this in a positive light, you know. And in fact I have the same dreams compared to others. I really like to constantly learn and meet new people."*

For some, the idea of violence still quietly creeps into their dreams about the future.

> *"Yes, euh, actually I haven't started a relationship for years. In my opinion, it always goes wrong. If I stick to simple friendship relations, I have much less trouble with it. And to be honest, it's still like that. I just deleted that from my wish list and I got used to having just friends. I think that if I fall again in love with someone, euh, that I still wouldn't let myself be tempted. And I think having a few good friends is worth a lot more than a real love affair".*

The network

In the discussion of the social network, parents are mentioned in this research, but are not always qualified as a support.
On the one hand, parents can be equated with the perpetrators of violence in this study.

> *"What bothers psychologically, once again, is that I couldn't tell this at home. Because you are afraid of reprisals. On the one hand, you don't want to disappoint your parents and, on the other hand, if you don't go to school, things might get worse."*

> *"During that period of depression, euh, my parents were also upset and sometimes they hit me because they didn't know what to do with me."*

On the other hand, respondents chose not to tell the truth to their parents to protect them and for fear of unexpected reactions.

> *"To be honest, my family doesn't really know about that man. Because I think it would really hurt them a lot. It's not really out of shame, you know, but because I think my father, that he, that it would be very embarrassing to know that people do something like that.*
> *That's what I really believe. So that's not really shame then, I think so. It is rather, how to say, a way to protect other people. As a consequence, you say it less, you know. So, euh, yes. I don't think he really wants to know it. Probably yes, but I don't know... And in fact he won't be happy knowing it, eh."*

> *"Yes, euh, I didn't want my parents to know that. And to prevent that from ending up with my parents anyway, via, via, via, I thought: I won't tell anyone."*

In addition, the contact with friends or girlfriends seems to play a supporting role in managing the violence they have experienced.

> *"I think she realised that there was something going on. Certainly something I couldn't do about, something I stood outside. In fact, she never really..., no. Nor ever made allusions to it, either. For which I am still grateful to her.*
>
> *"I do think that it was very beneficial to talk to my friends."*

One interviewee also indicated that the school would have been a place to organise help or support, but that at that time, it turned out to be insufficient.

> *"At school they must have known about it. Because in the gym class, the female gym teacher said: 'Come on, P, normally you are always reacting so quickly'. She walked into the locker room and I was still changing clothes. Oh, what is that? And I say: 'I fell.'*
> *The marks were visible on my back, you know. Then they didn't do anything either.*

In addition, their own children can play a supportive role in the period when violence occurs.

> *"But the children had also told me: 'If you take him back, we will never talk to you again.' I thought: Oh, my God! (laughs), it's going to be difficult then. Actually, this was an indication from them that they were fed up."*

The interviews also revealed that the wider social network or the wider environment of the woman often did not know anything about it.

> *"The acquaintances didn't know anything. If I said something, it would become worse. One day, the doctor had said something about it to my mother, while I hadn't told the doctor. I was then threatened by my mother."*
>
> *"Yes, people around me felt that I was struggling, but they didn't notice anything about the violence.*
> *Actually, the only person who knew about it afterwards, was our son. Perhaps in a lesser extent, for the rest, I haven't told anyone."*

Resources

The fact that they can still recount their experience with violence is a sign that they have been through this period alone or with help. During the interviews, I asked them to mention what had helped them through this period.

The formal professional network provided many of these women both appropriate support and assistance.

> *"And also the moral consultant, for example, I think that this possibility should be much better known by the general public. Because I think that's a much smaller step than going to a psychologist, eh. But they are often psychologists or educators or so. But it's completely free. And they really don't say what you want to hear, but they work things out with you. It really helped me."*

> *"So that, euh, my psychiatrist understood that I couldn't stand it anymore. So he said: now that's enough, I don't want you go there again. And he also defended me against my parents and said: This can really be a burden."*

> *"The other therapist said indeed: if you want we can go there together and I will explain everything. I got some support and that was very important to me. I couldn't really say it, she knew very well how I felt. Let me explain, I was furious with him and then I left in my wheelchair. Only then she explained everything. She gave me space to express in a non-verbal way how angry I was. Afterwards she also explained it with words."*

Providing space to talk about their experiences is a recurring opportunity (resources) for these women.

> *"Especially being able to share one's experience with other people. Finding support from people who have come across similar things.... So women with limitations who share with each other, eh, or women in general, without limitations, who share with each other what they are experiencing and how they deal with it.*
> *I think that this has been very supportive in many aspects, you know. Not only in this aspect."*

The personality - including one's own self-image and character - is also an important resource to withstand this situation or to get out of it.

> *"I think it's nice to really know: M, you're not worth less, it's really not done that somebody thinks it's a favour what they do to you. So, you have to be able to say in a very rational way."*

> *"There is always this hope that one day it will stop. If only I behave well, then everything goes well, they won't hit me anymore or do anything else."*

> *"At that very moment, I always feel like: I won't bow to violence. And that's apparently something that is firmly rooted. And it's the only thing I can think of at that moment. And yes, the paradox is that you have to use violence yourself to stop violence. Anyway, for me it was the only possible way at that very moment."*

Advice

The respondents also have different types of advice for women (with a limitation) who are confronted with violence.

React to counter violence:

> *"Yes, you should react very quickly. You shouldn't accept to be mistreated, in fact, to be abused. Even if they say it's your fault, it's not a reason to hit. It's no reason to humiliate anyone, because you don't feel well or because you have ideas about one thing or another. In fact, if you are confronted with this, that you speak up for yourself.*
> *And, if necessary, also for others."*

> *"So, indeed you have to react against this fact. But that's not obvious, nor is it the case for everyone, you know."*
>
> *"Not being scared, euh, to file a complaint as soon as possible. Before it occurs more and more or that it becomes permanent."*

Being able to remain financially independent, not depending on the perpetrator of violence, means that you can start again from scratch after the period(s) of violence:

> *"Each time I fought my way out of the situation by reacting myself and getting the divorce. Being able to keep your job is essential, even if you're shaking on your legs because of pain and fatigue. You must be able to remain financially independent so that you pull yourself through."*

Finding a balance between excusing people and seeing only the bad in people:

> *"But don't fool yourself that it's okay that you have a disability and that other people can simply ask that (= questions about sex) without any reason. Or in any other way, you know. Do not continue to excuse people. And really believe that someone can simply love you, I think. That there is something in between, between both extremes: the absence of sexuality and sexual obsession."*
>
> *"Think twice before you start a relationship. Don't think: 'Finally there is someone in love with me now, I'll just choose this person. Don't think either, when you start a relationship with someone who easily gets irritated: 'I'll surely dominate him', then just don't start that relationship. The same is true for a drunkard. Don't think: I'll save him. People only change if they are themselves willing to do so. And not, when you want it."*

Moreover, many of those women feel that communication is essential in dealing with the situation of violence. This can be applied to both the professional and social networks.

> *"Communication is very important and if it no longer works in the relationship, try to communicate with someone else in order to get an overview for yourself. Because if you behave in a more and more brooding way and let it overwhelm you, you'll be completely blocked in the long run."*
>
> *"Above all, you must describe the thing as quickly as possible to those around you, to your girlfriends, where you feel the most secure. Contact associations or groups that can provide you support and work on your problem."*

Finally, it is also recommended that women learn to defend themselves in violent situations:

> *"Learn to defend yourself. Learn to identify dangerous situations in time. The sooner you can make them stop, the easier it will be. And if the time comes for you to defend yourself physically, then you'll have to make sure you really know how to do it."*

Society

Interviewees also expressed their opinions about society and government.

a. Community

Promoting an inclusive community would be a major step forward in human relations and would, as a consequence, reduce violence against the limitation itself.

> *"Yes, of course, if it's general culture that everyone's okay, this won't happen anymore, eh. Our ideal image is not yet like that... I sincerely believe in that if we promote inclusion and work with everyone... Moreover, everyone is worth being appreciated. And no one has the right to see him or herself as a favour, really no one. It doesn't matter if you have a body that works well or not."*
>
> *"They should learn to see us as equivalent people. And stop meddling in our business. I see this as a way of exercising power."*

According to women with a limitation, it is not acceptable for both the perpetrators of violence and those around them to tend to minimise or mitigate the facts. For those around you, this can be seen as a way to comfort yourself that nothing serious is going on.

> *"But I think it would be better to change men above all. However, there are men who do not harm women, but who still protect these other men or who say that it is not that serious. There are even women who say: you have to accept it because he is your leader. Something must absolutely be done about this mentality."*

According to others, change in the community also begins with women with a limitation themselves: they have to claim themselves their own place in the community.

> *"So, should society change? If it changes, that would be great. But we, people with disabilities, people with chronic diseases, must first change our self-image. And then change will come. When I go out to eat somewhere and I think: 'It must be extremely annoying for people when I arrive in my wheelchair.' Then you are already making a mess, you know. But if you go inside or if you have booked a table and say: 'Look, I'm coming in a wheelchair, can I (easily) access your business?' So you already give yourself a place: so, for me, that's where the big change is. Believe in yourself, regain confidence, you have the right to have your own place. And it will also change the others."*

In addition, these women are confronted with that disbelief, both in their immediate environment and in organisations and the police.

> *"Yes, well, you would say that we should talk about this subject, make it less taboo. But you can start saying all you want and you won't be accused, but it's different when the time comes. For me it would just have been different, I think, if I hadn't had the impression that they wouldn't believe me."*

> *"It is difficult to go to the police. They close the file if you can't prove it, you know."*

b. Government

Some argue that society must be equipped with a contact point for women with disabilities.

> *"A special contact point must be created for women with disabilities who are confronted with violence."*
>
> *"Women with a limitation who could mention a conflict situation via computer and show evidence of violence, even if this is not always possible as knives are not always directly used."*

A similar advice would be the integration of a confidential advisor in an organisation or non-profit organisation, in order to report violence anonymously.

> *"Or that you have a confidential advisor or someone similar. That this person would be integrated, but that he/she would never be necessary. But, if need be, it would really help."*

According to the interviewees, more attention should be paid to the self-image (and self-esteem), and the own resilience during the training.

> *"Instead of always staying in an environment in which you were nurtured and in which you received signals that you were only able to do less than others, and that you do it differently because your body doesn't work perfectly, well, it wasn't really applicable to me anymore. In short, all this has made me more solid. … Because it is mainly thanks to this training I have followed that I can look at things differently. Then I think: if you didn't have such training, how did you consider yourself then?"*
>
> *"I think that the period of adolescence, especially for women, and the period of puberty for women with disabilities should be much more investigated in training, at school and in the curriculum. Also for the other girls. To convert the values of the latter in a fundamental way. And also during gym classes, self-defence sports should be introduced."*

In the training of police officers or assistance providers, attention should also be paid to the capacities and limitations of persons with a handicap.

> *"I believe that such services, i.e. the police or assistance in general, should receive much more training on the problems of a number of limitations, such as autism, but also other disabilities. They don't know all that and it also creates conflicts."*

In addition, we need to work on the accessibility of society, both in the field of assistance and other services. We speak here of making things affordable: financial affordability, physical accessibility and so on.

> *"In particular by making assistance, how can I put it... more accessible by reimbursing more forms of therapy. So, make things more affordable from a financial point of view. So I think that the government should mainly allocate funds to this subject, but also propose other possibilities and group alternative therapies in its offer, given that some women with a limitation do not know how to express themselves well. An interview with a psychologist is therefore not the right way. Drawing, sculpting, letting them do what they are really capable of would rather be a creative way to freely express their emotions, to evacuate their trauma."*

In addition, the government must focus on forms of external control:

> *"I think we need more control in the field of institutions in general."*

Moreover, most of the interviewees opt for an awareness-raising campaign (also) in favour of persons with disabilities.

> *"There should be more campaigns. It is also important to keep an eye on diversity in the campaigns. For example, include people of all backgrounds and also LGBT people. A wide range of people and also people with disabilities."*
>
> *"Do more publicity to highlight this violence. Both on TV and in booklets inserted in magazines. For people with a limitation."*
>
> *"Euh, yes, I think an awareness-raising campaign is not simply a luxury. Awareness-raising campaigns do exist, but it's still about domestic violence in general. And many women with disabilities - we are aware of that - still have the following opinion: 'Yes, they won't believe me anyway if I told them what happened to me.' Or they are indeed dependent on the guilty party. In my opinion, a targeted awareness-raising campaign would still be necessary and useful."*

Moreover, female social assistants indicate that there are gaps in the legislation on violence against persons under a prolonged minority status:

> *"The central element of my message is that for persons under a prolonged minority status, who have - in addition - physical limitations, there are few or no possibilities of protection if the legal representative (parent) does not provide adequate care. Especially in situations of acute insecurity, there is a legal gap with regard to the competent person (no one seems to be aware and judges pass the buck) and the status of the 'prolonged minority' is then more restrictive than helpful."*

Implications for practice

Implications for practice emerged from the opinions of the respondents of this study. These opinions can therefore be interpreted as a message from various women with disabilities, who received a vote through this research.

A first request is not to treat these women with disabilities with mistrust, since they themselves develop fear when they are confronted with this disbelief.

In addition, concretely alternatives and appropriate forms of support for these women must be investigated. They made a number of proposals themselves, such as a contact point, a confidential advisor, accessible assistance and services (both physical and mental). There is little action to move forward on issues that would have an impact, such as a lack of support for decent income or limited access to affordable housing. If gender and limitation are not part of the analysis and action, then women with disabilities run an increased risk that their needs will not be adequately met[6].

Education and training are, moreover, important for people with disabilities, especially with regard to self-image. This training can also be integrated into the training of care and service providers so that they can also manage the capacities and limitations of people with disabilities. According to Thiara et al. (2011)[7] there is a lack of resources and training, both in services for people with disabilities and in services against violence, which continue to work largely on an individual basis, when responding to women with disabilities who face violence. Both the care takers and the respondents in this study endorse it.

Finally, the government should work towards the implementation of additional external controls and an awareness-raising campaign against violence with a focus on people with disabilities.

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[6] Mays, J. M. (2006). Feminist disability theory: domestic violence against women with a disability. Disability & Society, 21(2), 147–158. doi:10.1080/09687590500498077

[7] Thiara, R. K., Hague, G., & Mullender, A. (2011). Losing out on both counts: disabled women and domestic violence. Disability & Society, 26(6), 757–771. doi:10.1080/09687599.2011.602867

Part III The United Nations Convention on the Rights of Persons with Disabilities.

What is this all about?

The United Nations has drawn up many conventions. The Convention on the Rights of Persons with Disabilities, simply CRPD, belongs to a whole family of conventions such as the Convention on the Rights of the Child, the International Covenant on Civil and Political Rights, etc. The convention does not give access to new rights, but brings together rights from other conventions. It emphasises that all human rights apply in full to persons with disabilities and that guarantees are needed for those people concerning the implementation. The Convention also clearly sets out what needs to be done to ensure that people with disabilities are placed on an equal footing with other people, including equitable accommodation and support.

It is important to know that the convention is accompanied by a protocol. Thanks to this protocol, there is an individual right of petition to the UN Committee on the Rights of Persons with Disabilities, in the event that legal remedies at national level are exhausted. In 2009, Belgium - i.e. the federal state and the federated entities - ratified both the Convention and the protocol. Since then, the UNCRPD has been applied in the Belgian legal system. This means that the content must be converted into laws and decrees.

The UN Committee is monitoring this work so that it is not postponed indefinitely. Every four years, the committee wants to receive country-specific reports, and the first time, two years after ratification. As expected, Belgium introduced the first report mid-2011 on the implementation of the UNCRPD. This is a state report. The person who has to write a report himself most often mentions all the positive points. In order to receive a realistic picture of the progress, the UN Committee has designated organisations of persons with disabilities who can/must also provide a report to Belgium. Their report is called 'shadow report'. The Belgian organisations are 'Grip' and the 'Belgian Disability Forum'. They have submitted their report at the end of 2011. As an independent mechanism responsible for monitoring the Convention, the Interfederal Centre for Equal Opportunities also gave a report to Belgium in 2014. This report is called a 'parallel report'. In the same year, the UN Committee discussed these reports, first with the three organisations mentioned above, and then with the Belgian representatives. Afterwards, the Committee prepared a document with concerns and recommendations. In 2019, Belgium will have to submit a new report and the cycle will start again. The person who is more interested in this subject can find the reports and the comments of the UN Committee on www.gripvzw.be/vn-verdrag.html, www.bdf.belgium.be/resource/static/files/pdf_uncrpd/2014-02-20---alternatief-verslag---belgian-disability-forum.pdf en www.diversiteit.be/vn-verdrag-inzake-de-rechten-van-personen-met-een-handicap-parallel-rapport.

In the introduction of this book, we have already mentioned that the importance of this UN Convention has a significant influence on women with disabilities, as social inequality is recognised and addressed for the first time at this political level. In our previous book, we discussed this point in detail. Now, we are limiting ourselves to employment, motherhood and violence.

Employment

In article 27 of the Convention on Work and Employment, the specific situation of women with disabilities is not mentioned. Strange for a convention that recognises and addresses social inequality since the employment rate of men with disabilities is, in fact, much higher. This phenomenon is clearly highlighted in part I of this book. Our disappointment on this point gave way to hope when we learned that the UN Committee on the Rights of Persons with Disabilities was working on a general recommendation on article 6, in particular on *women* with disabilities. We received the draft document in early June 2015. The recommendation will be inserted in a final text at the fourteenth meeting of the United Nations Committee, which takes place from August 17th to September 4th 2015. Anyone can and has the right to make additions by the beginning of July. The version of May 22nd 2015[8] already looks very good. Interesting points have been added to article 27:

> *States Parties to the Convention should encourage women with disabilities to seek employment opportunities which enjoy decent salaries and working conditions. They should be given effective support to find, obtain, maintain or return to employment.*
>
> *At the same time, it is necessary to promote awareness-raising campaigns in order to overcome negative attitudes among employers towards women with disabilities.*
>
> *Furthermore, States Parties must boost measures to promote entrepreneurship among women with disabilities (...) to start their own business.*
>
> *There is a need to carry out research on women with disabilities, their social and employment status, labour market developments, to identify new sources of employment for them in emerging and competitive sectors.*
>
> *Women with disabilities and mothers of boys and girls with disabilities should have priority in childcare facilities.*

Here are our additions on that subject:

> Awareness-raising campaigns should also address the negative attitude of the *people around* women with disabilities.
>
> For people with progressive disabilities, a smooth transition between periods of professional activity and inactivity must be ensured. This must help to remain professionally active for longer.

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[8] See CRPD/C/14/R.1

Motherhood

Article 23 of the convention on respect for family life states:

> *States Parties shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that:*
>
> > *The right of all persons with disabilities who are of marriageable age to marry and to found a family on the basis of free and full consent of the intending spouses is recognized;*
> >
> > *The rights of persons with disabilities to decide freely and responsibly on the number (...) of their children (...) are recognized, and the means necessary to enable them to exercise these rights are provided;*
>
> *States Parties shall render appropriate assistance to persons with disabilities in the performance of their child-rearing responsibilities.*

On this context, the UN Committee has given our country also recommendation 35:

> *The Committee also recommends that the State Party take appropriate measures to ensure that service providers respect and protect the right to private and family life of persons with disabilities.*

The right to parenthood is obviously linked to the right to assistance. Article 19 on the right to assistance when living independently and being included in the community, states:

> *States Parties to the present Convention recognize the equal right of all persons with disabilities to live in the community, with choices equal to others, and shall take effective and appropriate measures to facilitate full enjoyment by persons with disabilities of this right and their full inclusion and participation in the community, including by ensuring that:*
>
> > *Persons with disabilities have the opportunity to choose their place of residence and where and with whom they live on an equal basis with others and are not obliged to live in a particular living arrangement;*
> >
> > *Persons with disabilities have access to a range of (...) and other community support services, including personal assistance (...);*
> >
> > *Community services and facilities for the general population are available on an equal basis to persons with disabilities and are responsive to their needs.*

In other words: waiting lists or the fact that people cannot rely on assistance when they need it, preclude the exercise of fundamental rights. Beautifully said, but this does not yet make waiting lists disappear. But there is still hope. The UN Committee is not soft on these waiting lists. In recommendation 33, the Committee mentions the following:

> *The Committee urges the State party to implement a disability action plan at all levels of the State to guarantee access to services and an independent life for persons with disabilities so that they are able to live in the community. The action plan must eliminate current waiting lists and ensure that persons with disabilities have access to sufficient financial resources and that communities are accessible for persons with disabilities.*

You can also take action yourself. You, a friend or family member can post your testimony on www.gelijkerechten.be. You can forward us your questions or wishes, then we can confront the ministers concerned with the matter, in consultation with Grip and/or the Interfederal Centre for Equal Opportunities. Or you can contact the Interfederal Centre for Equal Opportunities yourself via 0800 12 800 or epost@cntr.be. The centre also processes individual notifications.

In the general recommendation for article 6, nothing is mentioned on article 23. We would like to add the following:

> It is also necessary to develop awareness-raising campaigns to overcome negative attitudes towards mothers with disabilities or women with disabilities who want to start a family.
>
> It is good to get out of traditional roles. Men can also stay at home for the children.

Violence

The wall of disbelief

Women with disabilities who are victims of violence face a wall of disbelief. In part I, we were already drawing attention to the fact that this wall was built on false assumptions that, regrettably, are credited to large segments of the population. Now we are looking thoroughly at this point. Even police officers rely on these false assumptions. This is what emerges from a testimony we received from J., a woman with autism who tried to file a complaint for stalking:

> *Many times I have been to the police, but they don't believe me. Sometimes they don't even want to take down the deposition, they say I do all this myself. I can't have a proper dialogue with the police, they humiliate me: for example, do you sometimes have rape fantasies? You need to have your head examined, etc. Sometimes they start laughing when I say something, sometimes they tell me to clear off in a condescending tone, I can't open the door at the police station.*

Fortunately, the UN Convention forces Member States to work towards this much-needed change of mentality. Article 8 about awareness-raising states the following:

> *States Parties undertake to adopt immediate, effective and appropriate measures:*
>
>> *(...) To combat stereotypes, prejudices and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life;*
>>
>> *To promote awareness of the capabilities and contributions of persons with disabilities.*

The UN Committee is concerned because these measures are still far too little elaborated in our country. Belgium has therefore received a very clear recommendation on that article that has to be taken seriously:

> *The Committee recommends that the State party introduce a national strategy to raise awareness of the content of the Convention. The Committee recommends that the State party carry out accessible information and awareness-raising campaigns on the rights of persons with disabilities and foster among the general public a positive image of persons with disabilities and their contributions to society, through close consultation with, and the active involvement of, representative organisations of persons with disabilities in the design, implementation, monitoring and evaluation of those information and awareness-raising campaigns.*

The Interfederal Centre for Equal Opportunities organises awareness-raising campaigns with other government actors, such as the coordination mechanism, and also works on the development of training for police services. It is clear that this is really necessary.

Measures for the prevention of violence and victim support

Identifying dangerous situations in time and being sufficiently able to defend oneself, works in a preventive way. It's crystal clear. Our workshops on resilience and self-defence developed for women with disabilities are an excellent contribution to this. But we are the only association to organise them. It goes without saying that the situation must change. In addition, it is more difficult for us to reach the environment of women with disabilities. Family and friends must also be able to identify dangerous situations in time and be sufficiently able to defend themselves, especially when talking about women with mental disabilities. Elaborate preventive and adequate measures can only be done if everyone has a correct picture of the problem. In other words: academics and politicians must have sufficient data at their disposal.

What are our governments already doing about it? In part I, we already mentioned the CD-ROM that the VAPH 'Vlaams Agentschap voor Personen met een Handicap' (Flemish Agency for People with a Disability) released in 2006. In her answer to Parliamentary Question 234, Liesbeth Homans refers to the National Action Plan on Violence against Women and the agreement between the VAPH and the Vertrouwenscentrum Kindermishandeling Vlaams-Brabant (Trust Centre for Abused Children in Flemish Brabant). In addition, we would like to add that, on December 15th 2000, the Flemish Government adopted a decree on quality control in facilities, with special measures to prevent abuse and violence. Apart from that, it is also an aggravating circumstance if the victim of a criminal offence has a disability. What is new since 2015 is that the gender of victims is systematically recorded in the declaration form. Thus the Flemish Government responds to the first sentence of recommendation 14 on women with disabilities:

> *The Committee recommends that the State party ensure the integration of gender and disability perspectives in its legislation and policies, surveys, plans, evaluation and monitoring activities and services.*

In part I, we have already pointed out the direct link between poverty and violence. Poverty does not only increase the risk of ending up in a violent relationship, but it also reduces the possibility to escape from it. Given the fact that poverty blatantly affects more women than men with disabilities, we would like to add the following to the general recommendation for article 6:

> The man-woman distinction in poverty rates of persons with disabilities must be scientifically studied so that States Parties can elaborate appropriate measures.

We also want to use the UN Convention in our fight to make victim support accessible. However, the articles of the Convention remain rather general. Even in article 9 on accessibility and article 16 on the 'freedom from exploitation, violence and abuse', nothing is mentioned about the need for accessible victim support. For both articles, the UN Committee makes recommendations to our country, but here again, this issue is missing. Fortunately, the general recommendation for article 6 fills this gap. Point 39 on this subject adds to article 9:

> *All care services for women (especially those related to health, motherhood, violence against women and childcare) must be fully accessible to women and girls with disabilities.*

This concludes the discussion on whether or not to create a separate contact point for women with disabilities. The creation of a contact point is not in line with the spirit of point 39; to state that existing contact points should be open to women with disabilities, certainly underlines that.

We also add the following points:

> It is also necessary to develop awareness-raising campaigns to overcome disbelief towards women with disabilities who are victims of violence.

Anti-discrimination legislation also helps us through the concept of reasonable modifications. Failure to provide for them is a form of discrimination. Reasonable modifications are individual measures that aim to remove barriers, so that you, as a person with a disability, can participate in social life on an equal basis with others. The person with a disability must indicate himself/herself that he/she wants this modification. If the modification is reasonable (and also proportional), an organisation or company cannot refuse it. It is a measure that must be taken in consultation with the person concerned. If we apply this to refuge centres, then, for example, a woman in a wheelchair could request that a movable inclined plane be installed. Or a woman educationally subnormal might ask for more structure. These are reasonable questions that the refuge centre cannot refuse. This way of working is obviously not ideal. Negotiating certainly takes time and, in crisis situations, everything must be done very quickly. A structural solution is preferable, but as long as it does not exist, reasonable modifications could be a solution.

Part IV Accessibility of refuge centres for women with disabilities

Within the framework of the discipline Disability Studies, students in pedagogical sciences (graduating option: orthopedagogy) conducted research in 2012 on the accessibility of refuge centres for women with disabilities who came into contact with some form of violence. They were looking for social barriers. Nevertheless, they also took into account that barriers may exist from the person herself, preventing her from seeking help.

Refuge centres are accessible to women between the age of 18 and 65, who are abused or threatened by their partners. These women cannot directly knock on the refuge centres' doors. They must pass through a CAW (Centrum Algemeen Welzijnswerk), a General Social Assistance Centre. With the woman in question, they try to find the assistance that suits her best. This can be a refuge centre. It is an anonymous residence that provides rest, safety and support. However, the accommodation costs must be covered by yourself, whereas the OCMW (Public Centre for Social Welfare) can provide financial assistance. A refuge centre is a temporary alternative to the family situation. In addition to emotional support and training to foster independence and resilience, the refuge centre provides information and administrative support and maintains contact with other front-line services, police and lawyers[9].

The students did a literature search on this topic and observed that there were no studies on this subject because there is little data available.

The students found additional information at the non-profit organisation Persephone, about the accessibility of refuge centres in Flanders and, in particular, for people with disabilities. This organisation has already initiated written actions on several occasions with regard to refuge centres and shelters in Flanders. From these actions, it turned out that apparently only a few refuge centres and shelters are fully accessible. Others are only partially accessible. This means that there is a bedroom on the ground floor, but the bathroom is for example located on the first floor. Many letters sent by Persephone have remained unanswered.

The next step was to conduct interviews with various people involved. They discussed with the female team leader of the refuge centre in Ghent. They also contacted the women's shelter in the Dendermonde region and they had a meeting with the coordinator of outpatient care and men's and women's shelter. This was the ideal opportunity to check whether the situation in the shelters differs from that of the refuge centres in terms of accessibility, although they only focus on the refuge centres in this research.
They also contacted many people by e-mail, phone, etc. to gather more information on this issue and ask them for their opinion on that subject. They also contacted facilities that had previously faced internal violence, but preferred not to be involved in this research.

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[9] RoSa. (2003). Vluchthuizen, vroeger en nu. Consulted on October 20th, 2012, http://www.rosadoc.be/pdf/factsheets/nr24.pdf

On November 11th 2012, on the National Women's Day, Persephone was also present at the Kursaal in Ostend. Through Persephone - organisation they consider as co-researchers and supporters - the students had the opportunity to meet K., a woman with a disability who is/was facing violence. She was willing to talk to them about her experience. It was a very moving experience that left everyone speechless. She gave them insight into the vicious circle in which women, victims of violence, are often involved.

Today, refuge centres offer anonymous residential care to women who cannot or do not want to stay any longer at home because of threats, feelings of insecurity or fear through, for example, domestic violence. Different barriers often block access to such assistance.

In recent years, the path to full participation for everyone has evolved positively. However, vulnerable groups in our society, such as people with disabilities, are still too often prevented from participating. It is essential to take into account the means that are necessary to provide everyone the opportunity to participate[10]. Applied to their research on the (in)accessibility of refuge centres for women with disabilities, it can be said that this attention is only present at certain times (for example when this topic appears in the media). There are also, both from the person herself and the facilities, many barriers that hinder the way to adequate assistance.

By the barriers set up by the person herself, the students express above all, that it is not obvious for the person with a disability to identify (and acknowledge) a situation of abuse and to consider it as a problematic situation[11]. Many personal factors play a role in accepting that there is indeed violence between partners. Thus, besides a family member, the perpetrator is often also an accompanying person or personal assistant, on whom the person with a limitation depends. Several studies have shown that women with disabilities have a poorer self-image than women without disabilities[12]. Therefore it is hard for them to escape from their situation since they still need care[13].

They are also worried about losing their house, as it is often adapted to their needs. They develop a fear of 'landing' in an unfamiliar environment, such as a refuge centre that is not sufficiently adapted[14].

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[10] GRIP vzw/npo. (2009). Niets over ons, zonder ons! Hoe participatie 'waar'maken: een verslag van de werkgroepen. Consulted on November 10th, 2012, Gelijke rechten voor iedere persoon met een handicap: https://www.gripvzw.be/gelijkekansenbeleid/inclusie-effecten/130-nieuwsbrief/199-nietsover-ons-zonder-ons-hoe-participatie-waarmaken-een-verslag-van-de-werkgroepen.html

[11] Curry, M., Renker, P., Robinson-Whelen, S., Hughes, R., Swank, P., Oschwald, M., et al. (2011). Facilitators and Barriers to Disclosing Abuse Among Women with Disabilities. Violence and victims, 6 (4).

[12] Hassouneh-Philips, D., & McNeff, E. (2005). 'I thought I was less worthy': low sexual and body esteem and increased vulnerability to intimate partner abuse in women with physical disabilities. Sexuality and Disability, 23 (4).

[13] Levy, E. (n.d.). The challenge for disabled victims of domestic violence. Consulted on November 10th, 2012, http://www.disaboom.com/disability-rights-and-advocacy-general/the-challenge-for-disabled-victims-ofdomestic-violence

[14] Levy, E. (n.d.). The challenge for disabled victims of domestic violence. Consulted on November 10th, 2012, http://www.disaboom.com/disability-rights-and-advocacy-general/the-challenge-for-disabled-victims-ofdomestic-violence

In addition, women with disabilities may have fewer opportunities to create a large social network, which can lead to isolation. And to vulnerability. Furthermore, it is possible that the perpetrator may have influence on the social network of the woman with a limitation. For example, when the woman is in a wheelchair and depends on the offender for transport or assistance. Sometimes victims also experience great disbelief, both from the police and care providers and from members of their own families.

From an infrastructural the point of view, many refuge centres in Flanders are inaccessible to women with disabilities. Most of the time, women in wheelchairs are immediately excluded. As a result, there is often no inclined plane or stair lift, no accessible shower or no room on the ground floor, and so on. Specialised equipment for other limitations, such as pictograms, weekly schedules, etc., are often missing as well.

Moreover, the staff are often not trained to deal with women with disabilities. In current practice, refuge centres try to seek external help, but they believe it would be better to train their own staff members as soon as they are hired.

Similarly, it is not always easy to live together in one single group in a refuge centre. In a refuge centre there are often different target groups who are somehow forced to live together in a group and this is how subgroups are formed quite quickly in the large group.

Furthermore, the students believe that it is very difficult for victims, who are already staying in a residential facility, to be moved to a refuge centre. The victims cannot leave the facility without reason and the facility sometimes prefers to solve the problem internally. The facility itself is also a great barrier for victims to receive more specialised assistance. There are even refuge centres and shelters which, until now, have never come into contact with women of a facility.

The students can therefore conclude that women with disabilities still face many barriers before they can get adequate help. For them, it is a long way to go and good support is truly important.

Conclusion

Both the stories which Persephone vzw/npo recorded and Caroline's research show that violence is a real problem. A disability is not a protective factor, victims' stories are no fantasy, everywhere there are people who work their frustrations off on an easy victim.

It is essential that women with disabilities who are victims of violence break their silence. By doing so, they do not only help themselves personally, but also provide strength to others so that the latter can reveal their stories.

The study conducted by Caroline is not intended to generalise the results; however, the combination with the operational experience of Persephone vzw/npo allows us to draw some conclusions from her research:

> The fact that women with disabilities are mainly victims of psychological violence, is in line with the expectations. More specifically: various quotes from the interviews reflect signs of psychological violence, *linked to the disability*. The put-down remarks mentioned at the beginning of part I also fall under this category.
>
> That violence occurs mainly at home is also in line with the expectations. This is why we talk about ‘domestic violence’.
>
> With regard to domestic violence, the perpetrators are often well-known people. It is quite surprising that in Caroline's research unknown offenders form the largest group. This could be linked to the fact that she also counts ‘taking reserved parking space (for the disabled)’. Another explanation could be the over-representation of women with a physical disability in the study population and the under-representation of people placed in facilities or hospitals. An additional explanation could simply be the way of counting. If we use the term ‘domestic violence’ in a slightly broader sense and we count the partner, parent, sibling together, then these people are by far the largest group, although ‘son/daughter’ is found under the heading ‘others’.

If gender and limitation are not part of the analysis and action, then women with disabilities are more likely to be inadequately addressed in their needs. This is why it is necessary to carry out scientific research, training, awareness-raising campaigns and supporting measures. To be more specific:

> Scientific research on disability and income must provide a precise answer as to why many more women with disabilities live below the poverty threshold than men with disabilities. In addition, the causes of the low employment rate of women with disabilities must be found out. A third scientific research must establish statistics on violence against women with disabilities, so that we know whether our intuitive criterion of 1 out of 3 is correct.

Care and service providers must receive training in order to be able to manage the capacities and limitations of people with disabilities. Education and training are also important for women with disabilities, especially concerning their self-image:

- they must realise that with the right support, they are able to achieve amazingly much - and that *thanks* to their disability, they have a lot to offer.
- the offer of empowerment and assertiveness training, adapted to the disability and living conditions of the participants, must be considerably extended so that they can identify (and recognise) a situation of abuse and react appropriately.

There is a great need for awareness-raising campaigns. Our country must organise information and awareness-raising campaigns on the rights of people with disabilities. Towards the general public, Belgium must convey a positive image of people with disabilities and the added value they bring to society. This includes among others:

- create a positive attitude towards the employment of women with disabilities, both in their immediate surroundings and with employers
- create a positive attitude around the motherhood of disabled women
- develop a campaign to overcome disbelief in women with disabilities who are victims of violence
- motivate women with disabilities, who are victims of violence, to break the silence.

Adequate support measures must prevent violence and poverty as much as possible, promote employment and make victim support fully accessible. Until victim support is not fully accessible, reasonable modifications can offer a way out.
Concrete proposals of our experts are listed here:

- ensure a smooth transition between periods of professional activity and inactivity for people who are working and who have a progressive disability
- ensure that violence contact points can register the data of the disabled person
- intensify external control in institutions and ensure that sufficient confidential advisors are available
- close the gaps in the legislation on violence against people under a prolonged minority status

The awareness-raising campaigns and training of the Interfederal Centre for Equal Opportunities are steps in the right direction. The next interfederal National Action Plan on violence against women also includes many good ideas. We will also ensure that these plans are effectively implemented.

Acknowledgments

This book contains a wide range of expertise:

- the pre-professional expertise of
  - Caroline and her fellow students

- the professional expertise of
  - Geert Van Hove
  - the persons who gave their advice on part III and/or appendix E

- the expertise of
  - the persons who collaborated on Caroline's master's thesis
  - our members
  - the countless women with disabilities who have crossed our path over the past 20 years
- the linguistic expertise of
  - the female authors and reviewers.

We would like to warmly thank all these people. Without them, this book would not be what it is now.

Appendix A Persephone vzw/npo at a glance

Profile

Our target group
Women with disabilities or a chronically debilitating disease
(for practical reasons, mostly defined as ‘women with disabilities’).

Our mission
We stimulate and inspire each other. In addition, we defend interests and raise awareness.

Our goal
From stereotypes to full citizenship.

Our motto
We are able to achieve amazingly much!

Our driving force
Since its foundation in 1995 our non-profit organisation is entirely operating thanks to voluntary experts.

Our philosophy
We respect any philosophical vision and guarantee everyone's privacy.
Our association is pluralistic and politically neutral.

Our way of working
Organise small group meetings in various regions.
Set our seal on policy, including among others the accessibility to refuge centres, employment.
Organise activities for a wide audience.
Provide information, among others through our books.

What we offer to our target group

Chat afternoons about:

- privacy and assistance
- assertiveness and resourcefulness
- motherhood
- sexuality
- domestic violence
- partnership
- relationship with my disability
- living with chronic pain
- women with disabilities in other cultures
- women with disabilities and poverty

Day workshops (can be split into half days)

- resilience
- self-defence for women with sensory disabilities
- self-defence for women with physical disabilities
- self-defence for women with mental disabilities
- relaxation

deal with loss or the art of regaining strength
look: who am I and how do I present myself
being more myself with my disability
colour and style advice

What we offer to others

conversation about the specific situation of women with disabilities
educative workshop ‘Bruggen bouwen’ (‘Building bridges’) (can also be used to learn Dutch)

What we offer to everybody

an occasional visit to a museum that is in line with our topics

10 reasons to become a member (there are much more!)

1. You don't want to sit around doing nothing, life is worth living, even with a disability
2. You want to share your experiences with women of the same mind and introduce your own ideas
3. You want to think along with others and participate during our workshops
4. As we are many, we are a force!
5. We understand each other quickly, because we all live with great disabilities
6. We can support each other because our disabilities are different
7. Paying attention to the specific situation of women with disabilities
8. We raise awareness among society and defend your interests
9. We are in contact with our sister organisations in other countries
10. We are pioneers and still the only association for women with disabilities in Belgium. If we don't do it, no one else will!

Becoming a member

Full member (only women from our target group)
- You give 20 euros, if so desired, divided into 4 x 5 €
- You obtain the right of participation and
  - receive the report of the monthly meetings
  - 50% discount on paid activities
  - 50% of your travel expenses are reimbursed

Sympathiser
- You give 20 euros
- You receive the annual report

Supporting member
- You give 30 euros
- Twice a year you receive the newsletter

Finances

Our non-profit organisation approves the principle of transparency according to Donorinfo, the first organisation in
Belgium that publishes objective information on the activities and financial resources of charities that help people in distress. On their website, you will also find a lot of information about us and

our projects.

Our origin

As it is often the case, chance has played an important role. DPI (Disabled Peoples' International – a worldwide umbrella organisation of associations supported by people with disabilities) wanted to set up a women's committee in Europe and planned a constitutive meeting in Germany in 1994. A member of our association participated on behalf of the KVG (Katholieke Vereniging Gehandicapten/Catholic Association for the Disabled). This newly created European Committee of Women decided to set up such a committee for women with disabilities in countries where it did not yet exist. It turned out - and you won't believe it - that she was the only Belgian present at this constitutive meeting. Back in Belgium, she was therefore looking for a movement for women with disabilities. It turned out that such a movement did not yet exist, so she looked for a partner to found this movement. Promise is debt. First choice: do we remain attached to the Christian pillar or do we create a pluralistic association? First mission: to find out why women with disabilities need their own organisation.

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Our bank account number: BE10 0013 5130 7404

Appendix B Our name

Persephone, the daughter of Demeter and Zeus, is one of the three vulnerable Greek goddesses. She is open to change, takes into account the subconscious, gives space to others and last but not least, she offers the most growth potential.

We found these characteristics so precious that we chose Persephone as our patroness. Later on we discovered that the mythology around Persephone suited us perfectly.

Hades kidnapped Persephone. He succeeded in his plan because he knew she loved white tulips. So he planted white tulips in his garden and when she came to gather them, he ran away with her. Zeus was furious with Hades and punished him by degrading him to the position of king of the underworld. Obviously, Demeter wanted to save her daughter and complained to Zeus. They came to a compromise: Persephone will be able to live with her family six months a year. During the other months, she will have to stay with her husband. During the months Persephone lives in the underworld it is autumn and winter. While during the other months, it is spring and summer.

The white tulip represents Persephone's innocence, but also the strength, hope and love she feels and which she continues to believe in. The tulip also embodies femininity, hope and strength that Persephone draws from spring because, at that moment, she can return to her family. Hades uses the white tulip as bait. In this case, the tulip represents power, darkness, bait, etc.

These two opposite poles determine Persephone's life: she spends six months of her life in darkness and six months in light.

Being women with disabilities, we recognise ourselves in this legend. Like Persephone, we do not remain in the dark periods of our life. We are constantly pursuing the light at the end of the tunnel.

The symbolism of the white tulip is close to the topics we are working on:

- chat afternoons about relationships, sexuality, motherhood and colour and style workshops: a woman to her finger tips, rooted in strength, hope and love;
- chat afternoons about assertiveness and resourcefulness, privacy and assistance: we reinforce each other's strength to stop unwanted ‘assistance’;
- in resilience and self-defence workshops, we learn to use our body language as an asset and to defend ourselves verbally and physically: vigorously stop the abuse of power!
- From our experiential expertise, we formulate policy proposals on employment, accessibility to victim support,...
- through workshops for associations and schools, we improve the perception: being women with disabilities, we are able to achieve amazingly much!

The duality of life is also reflected in our books entitled ‘Blij dat ik leef!’ and ‘Geweld tegen vrouwen met een handicap’.

Appendix C Our other books

Blij dat ik leef! (114 pages)

It contains a selection of stories and poems of happy women with disabilities. Negative feelings are not avoided, but the balance spontaneously changes towards the positive side. To read by yourself or to give as a present.

People are often blinded by the limitations that a disability can cause. Being women with disabilities or a chronically debilitating disease, we believe it is high time to fight this black vision. We know that life with a disability is very informative. In this book, we present reality to you on a tray: sometimes it is indeed black, but more often, reality is very colourful or black, beautifully woven with silver and gold threads. We write from our own experience. You will find the life stories in part 1. In part 2, we give the floor to people who live and experience a disability each day: parents or foster parents, a brother or a sister, a partner. In part 3, we collected the newspaper articles that prompted us to write.
Colours are only visible if we can accept reality. If you still need inspiration on this subject, please refer to part 4.

Sincere testimonies of happy women with disabilities. About life and how it presents itself. To be considered.

On our website, you can see the cover and, as a preview, read some poems. Click on www.persephonevzw.org/dossiers/blijleven/blij_boek.htm

Violence against women with a disability (64 pages.)

Violence against women is still a current problem and rightly receives adequate media attention. Yet it seems that violence against women with disabilities is still a taboo. People like to think that this is not happening. People are in particular utterly silent about sexual abuse. Women with disabilities are after all considered as asexual beings.

This realistic and clear study, written by experts in the field, aims to break the taboo of domestic violence against women with disabilities. It also provides an overview of what has already been realised in terms of research, prevention and specific assistance - and indicates the range of gaps.

This book is an update and extension of the brochure on this subject, published by Persephone vzw/npo in 2002.

A must for those who systematically want to try to solve the problem. Very useful for women with disabilities who want to protect themselves (preventively). Highly recommended both for people who are or will be active in the field of victim support and for people who (will) work in the health sector. Resilience and self-defence trainers benefit greatly from this study.

The ostrich policy only benefits the guilty.

The book was published in Dutch by Garant. You can obtain the French, English and German translation from us in electronic or printed form.

On www.persephonevzw.org/dossiers/geweld/Images/geweld_tegen_vrouwen_voorkaft.jpg you can see the cover.

On November 25th 2008, the *International Day for the Elimination of Violence against Women*, we presented our book to the press and we also immediately demonstrated that women with disabilities do indeed know how to defend themselves. The Flemish television channels ‘Eén’ and ‘ATV’ have each made a beautiful broadcast that you can watch on www.persephonevzw.org

Ordering

Both books are out of stock in bookstores, but you can still order them from us. ‘Blij dat ik leef!’ costs 10 €; ‘Geweld tegen vrouwen met een handicap’ costs 8 €. If you buy both books, you only pay 15 €. Possible shipping costs are added to the price. The shipping costs in Belgium are 2 € for 1 book and 4 € for both. Unfortunately, shipping costs for the Netherlands are much higher: 7 € for 1 book and 11,50 € for both. If you want an invoice, you will pay an additional €1 for administrative costs. Pay the amount by transfer to our bank account number BE10 0013 5130 7404 mentioning the title(s). The BIC code of our account is GEBABEBB. Your order will be sent to you directly after receipt of payment. You can also pick up your order after having fixed an appointment.
Both books are also available on a DAISY-CD under the same conditions.

Appendix D Dealing with aggression in another way

Over the years we have discovered different methods to deal with aggression. They are of interest for all of us, with or without disability. This is the reason why we give you a summary of the various points.

Starting point

We have learned to always keep five ideas in mind, namely:

> Aggression is petrified fear. The perpetrator is therefore someone who needs help.
>
> Every crisis is a moment of growth, if you want to learn from it.
>
> Others cannot be changed, but fortunately you can work on yourself. This is how the relationship with others automatically changes.
>
> If you feel like a fully-fledged person, you shouldn't act so tough. You can then simply be yourself. Simply *be*, without a competitive spirit.
>
> With affection we change human beings' ideas and not with anger.

Protect against aggression, evacuate, adapt

All you need for that is a little imagination. Imagine that there is a system of pipes inside and outside your body. Two of these pipes pass through your feet and into the ground. Another pipe comes out at the top of your head and extends into the cosmos. Through these pipes, you can store and eliminate energy. Every time you breathe, you store energy. Every time you exhale, you eliminate energy. As you breathe, you ask the earth and the cosmos for positive energy (for example, tranquillity, confidence, clarity, relaxation, insight,...). As you exhale, you eliminate all the negative energy (e. g. fear, helplessness, pain, anger, also everything you no longer need...). If you know in advance when the perpetrator will be in front of you, make sure your pipes are filled with positive energy just before he arrives. Immediately evacuate his annoying remarks through your feet, into the ground. Ask the earth to transform them directly into something positive. It's much better than swallowing and not saying anything. You will see that you will be in a position of strength... and others will notice it too. From this strength, you can adapt your ideas to something good.

Changing someone else won't work. To be consciously aware of what exists, to honour it and give it space, indeed. This is not the same as searching for a meaning, following an idea or an emotion. By giving space to what exists, you give it the ‘chance’ to change.

Source: Timotheus-Intuïtie vzw, eerste jaar intuïtieve ontwikkeling (first year of intuitive development)
Contact: www.timotheus.org

Non-violent resistance within families

The destructive behaviour of young people is a huge challenge for parents and educators. Haim Omer, professor of psychology at Tel Aviv University, looked for a way to mobilise positive forces in human relations. He found inspiration in the non-violent methods Mahatma Gandhi and Martin Luther King used in the socio-political arena. Instead of trying to directly change their child's destructive behaviour, he teaches parents to resist in a decisive, respectful and non-violent way. The first step is to get them to recognise the escalation of their behaviour and to stop it. In addition to self-control, active resistance techniques also come into play: refusing orders, writing a letter with the new conventions, remaining clearly present in silence, reconciling without admitting, organising a telephone chain if the young person does not return or going to the places where he could be and question his friends. To feel stronger, parents learn to build a support network: family, neighbours, friends, acquaintances, teachers, ...

This form of non-violent resistance is mainly used to give parents more self-esteem. It is not intended to create changes in the child's behaviour.

Source: presentation ‘Oudermishandeling’ (abuse of parents) on November 25th 2013 in Herentals by Jan Hoet, psychologist and lecturer at Leren Over Leven, Leerschool voor Contextuele Hulpverlening
Contact: www.lerenoverleven.org

Conferences called ‘Eigen Kracht-conferenties’ (own strengths conferences)

Eigen Kracht-conferenties ® is a decision-making model that aims to guarantee an important civil right: the right to conceive a plan for dealing with difficulties, first on your own, together with family and friends. An independent coordinator helps the family to prepare the conference. The plan states which own strengths the family wants to deploy, and which professional help they may want to call upon. This method allows people to retain maximum control over their own lives. The conference will take place in five phases:

a. Preparation:

When you are facing problems for a long time, you are often tired, exhausted and often feel isolated. Organising a large meeting is perhaps the last thing you are thinking about. Is anyone going to come at least? Won't there be a quarrel?
A conference "Eigen Kracht-conferentie" requires good preparation, where an independent coordinator helps the family during all steps. The coordinator himself is not a care provider, but a volunteer who has followed a three-day training course and who, in addition, receives the necessary supervision from the npo 'Eigen Kracht-conferenties vzw' during each step. Preparation includes an activation period of 6 to 8 weeks. During this period, we first investigate on what people want to reflect and make a plan. Then we figure out who can be present, what is needed to come together, when the conference can take place and what information from professionals is possibly needed to come up with a good plan. If mandatory assistance is involved, it will also be checked whether the plan should comply with essential criteria. When violence is handled, it is necessary that both the perpetrator and the victim are present and, above all, feel safe.

b. The day of the conference: information session

Those present at the conference receive, in understandable language, all the information they need and that is necessary to establish a good plan. At that time, the assistants concerned may, if desired, explain their vision of the situation. Organisations and support services may also submit their proposals. All participants also have the opportunity to ask questions.

c. The day of the conference: behind closed doors

The coordinator and any assistants present leave the room. Then, the participants who are part of the social network consult each other, often for several hours, until there is a consensus on a concrete plan.

d. Day of the conference: presentation and acceptance of the plan

The plan is presented to the coordinator, who reviews with the family whether the plan is concrete enough and whether all the practical details have been noted. Any plan that is safe and legal is unconditionally accepted.

e. After the conference

The independent coordinator types out the plan and provides it to all persons concerned. This is the end of the coordinator's task.
The family and assistants can then start with the execution of the plan.
The plan also indicates when the family will meet for an evaluation and who will take the initiative to meet again, if it appears that the plan needs adjustment.

Source: Eigen Kracht-conferenties, burgers aan zet (book published by Garant)
Contact: www.eigen-kracht.be

Appendix E Help to break the silence

‘A person who cares for somebody else for a long time, must be a good person. This person won't take advantage of the situation.’, and ‘The disabled person who says she is a victim of violence, does certainly not realize what is happening.’ False assumptions, which regrettably live in broad layers of the population. There is only one single way to drastically reduce these assumptions: to break the silence massively. It is extremely difficult, but it is so liberating. Many of us have experienced it themselves. Besides, you don't just help yourself. If you also agree to register information about your disability, your story can be used in specific scientific research and statistics.

You can reveal your story in stages, and you can skip some of them:

- You send us your story by mail or e-mail; as you know, we are volunteer experts in the field. If you wish to speak with someone, we will refer you to professionals in the field of victim assistance. We keep your story. We contact you when we write an article for a magazine, when we organise a workshop on resilience and self-defence or when scientific research starts. It is only then that you decide if you want to participate. Contact: Persephone vzw/npo, Solvynsstraat 30, 2018 Antwerp or info@persephonevzw.org.

- You choose professional victim support from the CAW (centrum algemeen welzijnswerk), the General Social Assistance Centre. The CAW provides free assistance to victims of abuse, violence, ill-/wrong treatment, criminal acts and road accidents. They listen to you and inform you about additional assistance if necessary. They also explain the legal actions you can take. On www.caw.be you find a CAW in your neighbourhood. On the website, you can also send your story by e-mail or chat, or call the following number 078 150 300.

- You go to the police or you ask the police to come to your house. Either you make a statement or you file a complaint. In the first case, the police record your story without contacting the perpetrator. In the second case, the police question the offender. If you have evidence or witnesses, you are in a strong position. On www.politie.be you will find the nearest police station. The police of the city of Antwerp have their own victim assistance service.

  If you have difficulty in being in contact with the police, then you can raise this fact in writing with the Chief of the Police Corps, the Standing police monitoring Committee (Comité P), the General Inspectorate of the Federal Police and the Local Police, or with the reception of another police zone. In the city of Antwerp, you can also contact the department called Customer management of the mayor.
    - Contact Standing police monitoring Committee (Comité P): Wetstraat 52, 1040 Brussels or info@comitep.be
    - Contact General Inspectorate of the Federal Police and the Local Police: Triomflaan 174, 1160 Brussels or info@aigpol.be
    - Contact City of Antwerp: burgemeester@stad.antwerpen.be

- If you are a victim of discrimination, you can go to the Interfederal Centre for Equal Opportunities. You can contact the Centre via the Discrimination Contact Points in

Flemish city centres by phone or via the website. If you report an act of discrimination, the Centre will first try to find a solution by engaging in a negotiation process. If this does not achieve the desired result, the Centre may possibly support you in legal proceedings. Contact: phone number +32/(0)800 12 800 or www.diversiteit.be. On www.diversiteit.be/links#meldpunten you quickly find a Discrimination Contact Point.

- You want to tell your story *anonymously*. This is possible via:
    - the phone number 106 or www.tele-onthaal.be if you are only looking for a listening ear (staffed round the clock)
    - phone number 1712 or www.1712.be if you have experienced any form of violence (staffed every working day, during office hours)
    - phone number 078 150 300 or www.caw.be if you wish professional assistance (staffed now and then)
    - phone number 0800 12 800, www.diversiteit.be or www.gelijkerechten.be if you have been a victim of discrimination (staffed on some days, during office hours)
    - www.ikzwijgnietmeer.be if you have been a victim of rape
    - www.wijoverdrijvenniet.org if someone has harassed you on the street

- You will find information about
    - violence between partners on www.partnergeweld.be
    - violence in general on the phone number 02 233 42 91 or www.igvm.be

WARNING!
In a life-threatening situation: call the police on 101.
For emergency medical service: call the emergency number 112.

VIOLENCE CAN STOP