

"Just a fact of life"
being a woman in Northern Ireland

Violence Against Disabled Women and Girls in Northern Ireland:

NI Women's Policy Group
Research Findings

Key Briefing

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Women's
Policy Group NI

Violence Against Disabled Women and Girls in Northern Ireland

WPG Primary Research Findings - Key Briefing

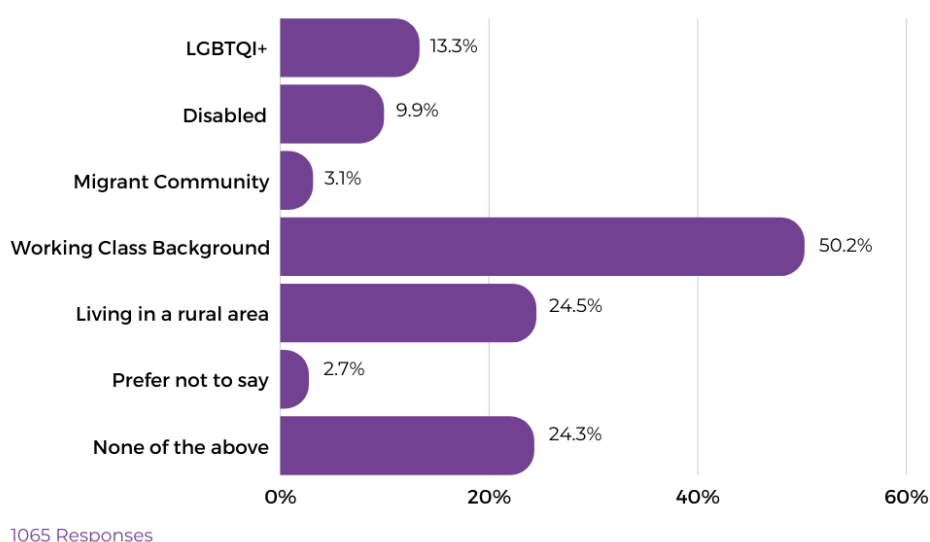
Introduction

In spring 2022, The Northern Ireland Women's Policy Group conducted primary research into the scope, scale and prevalence of men's violence against women and girls. This research included conducting an interview and launching an anonymous online survey which received **1065 responses**. Of these 1065 responses, 105 were from disabled women. This briefing summarises our research findings that relate specifically to men's violence against disabled women. The full research report can be read [here](#).

Key Findings

- **9.9%** of respondents were disabled women (**105 women**)
- **91%** of disabled women said they had experienced or been impacted by men's violence.
- **99%** of disabled women think that Northern Ireland should have a Strategy to tackle men's violence against women and girls
- **94%** of disabled women believe that Northern Ireland has a problem with victim-blaming
- **93%** of disabled women think there are barriers to reporting men's violence against women and girls
- **92%** of disabled women think there needs to be a review of how the justice system treats victims and survivors of men's violence against women and girls

Q.1. Do you identify as any of the below groups (you can pick more than one if necessary)?



In Focus: Disabled Women Research Findings

Quantitative Data

This section will provide a breakdown of quantitative survey data that compares the responses of disabled women with the average response. It is notable that, for the vast majority of questions, the rate of 'Yes' responses for disabled women was **higher than the overall rate** of 'Yes' responses. This suggests that disabled women were, on average, **more likely to agree** with statements relating to the issue of men's violence and **more likely to have experienced** this violence.

	Question (quantitative Qs)	Overall response	Disabled women response
1.	<i>Do you think that Northern Ireland has a problem with men's violence against women and girls?</i>	91.2% Yes 7.4% Unsure 1.4% No	93% Yes 5% Unsure 2% No
2.	<i>Do you think that Northern Ireland should have a strategy to tackle men's violence against women and girls?</i>	97% Yes 1% Unsure 2% No	99% Yes 1% Unsure 0% No
6.	<i>Have you ever experienced/been impacted by men's violence against women and girls?</i>	83% Yes 15% Unsure 2% No	91% Yes 1% Unsure 8% No
8.	<i>If you have experienced or been impacted by men's violence against women and girls, did you report this to the police?</i>	21% Yes 79% No	36% Yes 64% No
9.	<i>If you did report to the police, did you find this useful?</i>	23% Yes 77% No	13% Yes 87% No
12.	<i>Do you believe Northern Ireland has a problem with attitudes of sexism and misogyny?</i>	89.7% Yes 9.5% Unsure 0.8% No	89.5% Yes 10.5% Unsure 0% No
13.	<i>Do you believe Northern Ireland has a problem with rape myths and rape culture?</i>	81% Yes 17% Unsure 2% No	89% Yes 11% Unsure 0% No
14.	<i>Do you believe Northern Ireland has a problem with victim-blaming?</i>	87% Yes 11% Unsure 2% No	94% Yes 6% Unsure 0% No

16.	<i>Do you believe there is stigma surrounding issues of violence against women and girls?</i>	81% Yes 16% Unsure 3% No	86% Yes 11% Unsure 3% No
18.	<i>Do you believe there are barriers to people reporting men's violence against women and girls?</i>	92% Yes 7% Unsure 1% No	93% Yes 6% Unsure 1% No
22.	<i>Different groups of marginalised women can face additional types of abuse (e.g. disabled women, black or minority ethnic women, migrant women, LGBTQ+ women, traveller women, rural women etc.). Do you think additional action needs to be taken in this strategy to address men's violence against these groups of women?</i>	79% Yes 17% Unsure 4% No	86% Yes 12% Unsure 2% No
24.	<i>Do you think there needs to be a review of how the justice system treats victims and survivors of men's violence against women and girls?</i>	87% Yes 12% Unsure 1% No	92% Yes 7% Unsure 1% No

Quantitative Data Insights

- Disabled women are more likely than non-disabled women to **experience men's violence**
- Disabled women are **more likely to report** men's violence to the police but are also more likely to find reporting to the police **not useful**
- Disabled women were **more likely to agree** with the following statements:
 - Northern Ireland has a problem with men's violence against women and girls
 - Northern Ireland should have a strategy to tackle men's violence against women and girls
 - Northern Ireland has a problem with attitudes of sexism and misogyny
 - Northern Ireland has a problem with rape myths and rape culture
 - Northern Ireland has a problem with victim-blaming
 - There is stigma surrounding issues of violence against women and girls
 - There are barriers to reporting men's violence against women and girls

- Additional action needs to be taken in the violence against women and girls Strategy to address men's violence against marginalised groups of women
- There needs to be a review of how the justice system treats victims and survivors of men's violence against women and girls

Qualitative Data

We received a vast amount of qualitative responses from disabled women relating to their experiences of men's violence. These have been included under relevant questions from the online survey.

Q5. Do you think there are any **forms of violence against women and girls** that we have not mentioned that should be included in the strategy?

"Restricting healthcare ie. smear age, tube tying, abortion access."

"Disability abuse."

"Abuse by carers, and also **medical abuse.**"

"Access to **abortion healthcare.**"

"**Forced isolation by the state** failing to provide day centre, respite care for disabled and / or older women."

"Disability can be used by abusive people to humiliate disabled partners and as a **form of control.**"

Q7. Would you like to share any details about **how you've been impacted by violence against women and girls** and what age you were when this first happened?

"Both physical and mental emotional control, sexual control, court control over 10yrs in court meaning **I could not afford to support my children and pay court Bill**, so I went into education prolonged stress levels I had a massive stroke which has left me with both **physical and cognitive disabilities**"

"Emotional abuse since childhood and with intimate partners late teens & mid-thirties. Several instances of minor physical assault. **Mental health issues since I can remember** and suspected CPTSD."

"When I was 29 a neighbour physically assaulted my partner in front of me, and **threatened to burn my wheelchair and burn our house down.** He continued to be an intimidating presence in our street despite his conviction for the above (he broke his parole

conditions, so then the parole service stopped monitoring him, which seems like the opposite of how they should handle it, until his family moved..."

Q11. Do you think there are any **spaces that we have not mentioned** that should be included in this strategy to address men's violence against women and girls?

"Hospitals, residential **care settings**, prison."

"Healthcare settings."

"Medical treatment and access to **sexual health care** and abortion."

"Nursing and **care homes** and institutions."

"**Medical facilities?** Any place being used as a service user."

"Medical settings. People always assume you're safe in a hospital or care home, but disabled people can tell you this is not always true, and **sometimes the people you're not safe from are staff** in those settings."

"Medical profession."

"Care homes, nursing homes, **public transport**"

Q23. Could you please expand on what **additional factors** need to be considered or what **additional action** needs to be taken to support these women?

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569 Responses

“Disabled women face **additional coercive control dangers**, autistic women need autism trained (or autistic) councillors, so use workers desperately need to be trained to overcome their own unconscious biases and to **learn to spot an abuser** (they are often taken in by charming emotionally manipulative abusers).”

“Marginalised women need to be included in any discussion/debate about policies as **only they know what it is like** to experience men's violence from their cultural/social perspective.”

“Disabled women are put in vulnerable positions due to **stereotype and prejudice** attitudes of social worker who talk about moral duties”

“... Disabled and neurodivergent people need specially trained keyworkers to help us deal with all the different dimensions of what it means to report abuse and to try to leave an abuse situation. We simply don't have the level of freedom and autonomy that even a non-disabled abuse victim has. Leaving an abuser can take us out of the catchment areas of services or supportive people we depend on... for us, **reporting is more dangerous than for other victims** and we cannot report unless we know that we have a genuine safety net waiting in terms of real practical tailored help to leave. Communication differences of neurodivergent people need to be part of the training of all agencies involved, also. And in general, **services need to be codesigned and coproduced** with disabled and neurodivergent people in order for meaningful improvements to happen.”

“Exposing that there are **male predators who deliberately target disabled women**. Educating the public about psychopaths. Punishing the perpetrators. Educating the public that anyone can become disabled today. There is no us and them.”

Q27. Is there anything else that you would like to share that you think the WPG should be calling for within the Violence Against Women and Girls Strategy?

“That disabled people's access to the information is considered and that may require additional time, understanding and resources to **ensure that all women and girls can benefit** from the outcome.”

“It's particularly important that the Executive **consults with Disabled People's Organisations** (i.e. orgs run by and for disabled people, not just ones run by able-bodied people) and Autistic

People's Organisations, as well as other disability and autism groups, in **ensuring that our needs are taken into account** when legislation and services are being designed and reformed.”

“... I suffered endometriosis from age 16 and every doctor at every appointment minimised my pain, ignored me, **told me I wouldn't be treated unless I was planning pregnancy**, told me to get pregnant to remove symptoms, told me essentially my early death is not as important as the potential for my womb to reproduce. I was repeatedly given birth control that I told them made me suicidal to tackle my pain when it didn't work. I was refused the Surgery to identify and treat the endo because I wasn't actively trying for a baby. My school reported my agonising symptoms of vomiting, passing out from pain etc to my parents as 'Drug abuse'. My doctor at age 16 made inappropriate and creepy comments about my body when I went for an implant birth control (which was supposed to help the pain but made everything worse, 16 year old girls shouldn't be given such a high dose of hormones especially when PCOS and ENDO affect the hormonal system). **My mental health problems were ignored then misdiagnosed for a decade** until I took out a loan to get a private assessment and was able to access support for ADHD and Autism and correctly identify depression, anxiety and PTSD and prescribe effective medication. I had waited on NHS waiting list for 1 year prior to this to access mental health support and after one year waiting and one 20 minute phone call were I had to recall a huge amount of trauma, **I was told no support available...** and was left on my own... again. And of course the fact women in NI STILL CANNOT ACCESS FREE SAFE ABORTION CARE.”

Conclusion

Men's violence against women and girls is an intersectional issue with intersectional impacts. These impacts on women and girls can vary in their nature and severity, depending on a range of identity factors, including race, religion, gender identity, disability status and more.

Disabled women face additional and sometimes compounding barriers to equally participating in society, including additional threats from men's violence. **The voices of disabled women and girls must be central** to the development of any measures aimed at tackling this violence, in order to accurately understand their unique experiences and ensure that these measures are effective.

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