

I. INTRODUCTION

Background

For many years the Syracuse Area Domestic and Sexual Violence Coalition has recognized and sought to improve community response to people with disabilities and d/Deaf people who experience domestic and sexual violence. Agencies, including ARISE, who advocate with, and provide service to, individuals having disabilities recognized an unmet need. They were sure that they were involved with people with disabilities and d/Deaf people who had experienced domestic and sexual violence, but they wanted to be more explicitly helpful. In addition, agencies with long histories of serving people who experience domestic and sexual violence wanted to become more accessible to people with disabilities and Deaf people. The need in our community has always been great, and yet the ability to come together around this issue had been a consistent challenge. The time was right for collaboration.

Many in our community were energized when Vera House and ARISE received a three year grant from the Office on Violence Against Women, Education and Technical Assistance Grants to End Violence Against Women with Disabilities Grant Program. The receipt of these funds enabled Vera House and ARISE to form a collaborative relationship called Project EMERGE. The initial goals of the collaboration were to formalize our relationship through the development of a document that guides our work process- our Collaboration Charter. The team then moved to convene the Accessibility Task Force, a new committee of the Syracuse Area Domestic and Sexual Violence Coalition.

In an effort to move our work forward, the team planned and conducted a comprehensive Needs & Assets Assessment. This is the first step for Project EMERGE in understanding the opportunities and gaps in our community for systematic change. This report has been written to summarize the results of a Needs & Assets Assessment that has been conducted by Project EMERGE during March, April and May 2008. The findings in this report will be utilized as Project EMERGE moves forward with developing a Strategic Plan for our work in the community. That plan will provide the specifics around how we will implement change to improve our community response for women with disabilities and d/Deaf women who have experienced domestic and sexual violence.

Understanding Project EMERGE

Vera House and ARISE have joined the expertise of the personnel at each agency to create Project EMERGE. This partnership is structured around *INTERDEPENDENCE*, rather than our two agencies just 'working together.' Together we are working to create a system of resourcing each other to better deliver services. This collaboration will →

- Seek input from and listen to people with disabilities and Deaf people who are survivors of domestic and sexual violence
- Create, provide, and improve accessibility at our agencies.
- Co-influence each other's policies, procedures, and practices

- Learn from each other how to better assist all people, including people with disabilities and Deaf people who are survivors of domestic and sexual violence.
- Provide training to service providers

It is also important to understand what Project EMERGE is not able to focus on with the current funding from the Office of Violence Against Women. Project EMERGE is prohibited from providing direct service to survivors with disabilities or d/Deaf survivors. The project also can not do specific work within the criminal justice system. These issues may be part of the long range planning of Project EMERGE as we work to create sustainable systems change.

Overview of Needs & Assets Assessment

Project EMERGE conducted a Needs & Assets Assessment, hereafter referred to as NA, which examined the policies and practices in Onondaga County with a focus on our own organizations. Findings from the NA will be utilized to develop a strategic plan for Project EMERGE.

The purpose of the NA was to gather information on Vera House, ARISE, and community agency policies and practices, as well as the experiences of women with disabilities and d/Deaf women who experience domestic and sexual violence.

Global Questions: Our team sought to understand what it is like for service providers to do their job in our community. We were especially interested in how women with disabilities and d/Deaf women who are survivors of domestic and sexual violence experience services from Vera House and ARISE, as well as other local service agencies. Some of the key global questions explored in the NA included:

- What are the gaps or barriers experienced by survivors with disabilities and d/Deaf survivors when they seek and navigate services at Vera House?
- What are the gaps or barriers at ARISE that discourage survivors with disabilities and d/Deaf survivors from being connected to and receiving appropriate domestic violence and sexual assault services?
- Where are the opportunities at Vera House and ARISE to strengthen partnership through collaborative services to better serve to women with disabilities and d/Deaf women who are survivors of domestic and sexual violence?
- What is working well and where are the weaknesses in the current community wide service delivery system in response to women with disabilities and d/Deaf women who are victims/survivors of domestic and/or sexual violence?

II. METHODOLOGY OF THE NEEDS & ASSETS ASSESSMENT

Project EMERGE developed a Needs & Assets Assessment that included participants at all different levels at Vera House, ARISE and in the community of people and agencies serving women with disabilities and d/Deaf women, as well as survivors of domestic and/or sexual violence. The voices of leadership, direct service providers, and consumers all are present in the data that was gathered. The NA listened to the feelings and opinions of all of these players in an effort to ***create a complete picture of services in the community and at ARISE and Vera House.***

The NA included three assessment methods- Interviews, Listening Circles (focus groups), and a web based survey of direct service providers at community based agencies serving women with disabilities, d/Deaf woman, and survivors/victims of domestic and sexual violence. As we anticipated, this Needs & Assets Assessment did not only work to measure the capacity and opportunities in the community for change, but also connected with the community and gave various audiences the opportunity to express their views and participate in our process and mission.

Key Stakeholder Interviews

Key Stakeholder Interviews *provided Project EMERGE with a global, policy perspective on the strengths and weakness in Onondaga County.* The Interviews were conducted with leadership at ARISE, Vera House, and a diverse group of community based agencies who have rich experience in their field and our community. These individuals have a high level of experience at their agencies and insider knowledge of the systems they provide leadership to.

Each interview was structured through five main questions. The questions began by asking about the interviewee's perspective on the strengths and gaps in Onondaga County in addressing the needs of women with disabilities and d/Deaf women who are victims/survivors of domestic and sexual violence. Interviewees were also asked to provide perspective on policy and culture that ARISE and other disability agencies operate under, as well as Vera House and other agencies providing victim/survivor services. The opportunity to offer ideas on specific improvements concluded the interviews.

In total, we conducted 27 Key Stakeholder Interviews. Below is a breakdown of who the interviews were conducted with in comparison to the goal that Project EMERGE set.

Key Stakeholder	Goal	Completed
Leadership at ARISE	8	6
Leadership at Vera House	6	6
Leadership at other agencies in Onondaga County who provide domestic and/or sexual violence services	4	4
Leadership at other agencies in Onondaga County who provide disability and/or d/Deaf services	6	11
TOTAL	24	27

Scheduling and conducting the Key Stakeholder Interviews proved to be quite easy. Connecting with leaders at each agency and in the community also created the opportunity to update leadership on the process that Project EMERGE is utilizing to create change in our community. At ARISE, we were slightly under our goal due to challenges scheduling with some managers, but we feel that we were able to engage a diverse array of leadership at ARISE, thus yielding balanced data.

[Please see Attachment A. Key Stakeholder Interview Questions]

Listening Circles

The Listening Circles were the main source of group research and were structured as organized discussions. The ‘focus group’ format was particularly well-suited to obtaining a variety of perspectives, by encouraging a diverse group of participants (both consumers and direct service providers) to share their attitudes, feelings, beliefs, experiences and perceptions regarding access to and delivery of trauma and disability services at Vera House and ARISE, in a safe and supportive environment. The main purpose of the Listening Circles was to *provide a forum to examine in-depth and detailed views on the intersection of disability and deafness with domestic and sexual violence through the personal experiences of survivors with disabilities and d/Deaf survivors, and focus on how best to build empowerment into the delivery of services.*

Listening Circle	Goal	Completed	Total Number of Participants
Women who identified as survivors of Domestic and Sexual Violence (who may or may not necessarily identify as having a disability and/or being d/Deaf)	2	2	11
Women with Disabilities (who may or may not have disclosed that they are victims or survivors of Domestic and/or Sexual Violence)	2	2	18
d/Deaf women (who may or may not have disclosed that they are victims or survivors of Domestic and/or Sexual Violence)	1	1	5
Direct Service Providers at Vera House, Inc.	1	1	7
Direct Service Providers at ARISE, Inc.	1	1	9
TOTAL			50

The Listening Circles proved to be the richest aspect of our NA. The first Listening Circle that we conducted for women with disabilities included fourteen participants. Survivors and women with disabilities were eager to participate. Recruitment of participants for both the survivor and women with disabilities Listening Circles was not a challenge. The first Listening circle that was held for each focus population was attended in greater numbers than the second circle in each group.

The planning of the Listening Circle for d/Deaf survivors was a learning process for our Project Director and the Project EMERGE team. The planning and recruitment around this Listening

Circle required more careful thought. Both securing a Deaf woman to co-facilitate the group and assembling a team of interpreters proved to be a very time consuming process. After discussion with allies in the Deaf community, our team learned about the true importance of earning trust and patiently interacting with our Deaf partners. The planning and implementation of the Listening Circle with d/Deaf women provided just as many lessons as the data collected at the Circle.

[Please see Attachment D. Listening Circle Questions]

Direct Service Provider Web-based Survey

The survey focused on exploring the strengths and gaps of the service delivery system from the perspective of the direct service provider as well as their experiences with implementing policy at their agencies. We surveyed direct service staff at ARISE and Vera House in order to *examine our current ability serve consumers across disciplines and identify opportunities at Vera House and ARISE to strengthen our partnership.*

Two surveys were utilized; the first explored the opinions of sexual assault and domestic violence service providers and the second targeted disability and d/Deaf service providers. The questions focused on examining areas of improvement and methods to achieve physical and attitudinal accessibility and establish an improved referral and response system. Methods to accomplish community collaboration in regard to the issues of domestic violence and/or sexual abuse towards women with disabilities and d/Deaf women were also explored.

The surveys contained mainly closed ended questions with multiple choice, categorical and Likert scale answers. The surveys also contained open-ended questions, where participants responded in their own words. Both service provider surveys were distributed through the use of a web based system, called SurveyMonkey. Although it was offered through numerous methods, no one requested assistance with the survey or requested a paper version of the survey.

Survey Type	Goal	Total Started Survey	Completed
Service Providers who work with People with Disabilities and d/Deaf People	75	65	44 (67%)
Service Providers who work with Survivors of Domestic and/or Sexual Violence	75	69	36 (52%)
TOTAL	150	134	80

All efforts were made in accordance with our NA plan to encourage service providers to complete the survey. While we are very please with our response rate on the survey, feedback from Vera House and ARISE staff was that survey was long. A vast majority of participants completed the survey in a thorough manner, but some respondents skipped sections or did not complete the open ended questions in the survey. Overall, the survey provided rich information about Vera House and ARISE and the perspectives of their direct service providers.

[Please see Attachment B & C. Service Providers who work with People with Disabilities and d/Deaf People Survey and the Service Providers who work with Survivors of Domestic and/or Sexual Violence Survey]

III. SUMMARY OF FINDINGS FROM THE NEEDS & ASSETS ASSESSMENT

“Abused women with disabilities have a double whammy. I didn’t know whether to deal with my abuse first or my disability. I didn’t know where to turn, and I lost all hope.” - survivor in a Listening Circle

This woman eloquently summarized the experiences of many of her peers. It is a core belief of Project EMERGE that we will only be successful in creating true systems change if we honor the voices and experiences of survivors with disabilities and D/deaf survivors in our community. This Needs & Assets Assessment sought to seek out those often silenced or invisible voices.

Overall, the three methodologies used in our NA proved to be very successful in creating a broad, accurate picture of the perspectives of survivors with disabilities and d/Deaf survivors in Onondaga County. Throughout the process, information was gathered from survivors with disabilities and/or d/Deaf survivors as well as from providers.

Findings are grouped by the major key finding categories of- ***trust, knowledge and practice, outreach to d/Deaf women, merger of strengths, and survivor centered services***. Under each key finding an explanation of variables within that category are explored and supported with examples from the data.

Key Finding #1- TRUST

TRUST

Summary:

Women with disabilities who have experienced domestic and sexual violence do not trust the current service delivery system’s ability to holistically meet their needs. This is particularly true for women with mental health disabilities.

1. Survivors report not being believed when they disclosed experiences of domestic and sexual violence.

Survivors with disabilities and d/Deaf survivors reported that, time after time, ***they were not believed*** by service providers, law enforcement, medical professionals, caregivers, or family members when they disclosed experiences of domestic violence and sexual abuse or assault. Women with disabilities stated that they have not been seen as having the capacity to accurately articulate what their experience has been, or it has been assumed by others that they do not have the capacity to differentiate abuse from non-violent interactions. Women who are survivors of domestic violence, who often also identified as living with disabilities, explained that sometimes, because they rely on their violent partner or caregiver for basic care

and freedom, disclosing the abuse carries extra fears of the loss of freedom. They also shared that if and when they did disclose, they were discredited, often by service providers in the disability or mental health fields.

“People with psychiatric illnesses are often not taken seriously by the court system or society as a whole. They are not believed, which makes accessing services quite complicated. – from Key Stakeholder Interviews

“It is important for people to believe the truth about disabled victims of domestic violence. Police, hospitals, agencies, everybody believes that victims with mental issues are crazy women. No one believes us and we are totally discredited.”- woman with a disability in a Listening Circle

“It helps when service providers talk about their own lives and share their own experiences. It helps sometimes to hear their story.” -survivor in a Listening Circle

2. Women with disabilities report that it has been their experience that Vera House’s shelter has limited physically accessible. This is also true for other shelters in the community, as well as non-disability focused services. Women with disabilities and d/Deaf women also report that Vera House could improve in its ability to provide a wide array of accommodations.

Women with disabilities reported a **lack of physical accessibility** at non-disability focused agencies. Feedback regarding the limited accessibility of shelters at Vera House, and in the community, abounded. Onondaga County is in need of a fully accessible shelter space for women with physical disabilities, including women who use wheelchairs. Staff at every level at Vera House is very aware of the physical limitations of both the shelter and Administrative office. Agency leadership at Vera House expressed explicit commitment to improving the physical accessibility of the buildings and learning about other physical accommodations that can be provided.

“Some agencies are not accessible to people with disabilities. It is very difficult to get into their buildings. Some do not have ramps or elevators. Wider doorways and wider doors to bathrooms are needed.” –women with a disability in a Listening Circle

“Our agency has physical barriers and, sometimes, there is a lack of personnel to address the unique client needs.”- from Key Stakeholder Interviews

There is a commitment at Vera House to working to provide accommodation when a consumer with a visible, physical disability makes a request. However, beyond a liberal self-managed medication policy at shelter, Vera House does not currently have formal policy around direct service staff offering and then providing accommodation to all consumers. Survivors with disabilities and d/Deaf survivors reported that their needs were not always met by Vera House programs. It seems that consumers need direct service providers to **begin the conversation and provide an opportunity for the consumer to voice what is not working** if they are in need of an accommodation.

“It is our informal policy to provide necessary accommodations, when a client asks, but it is not formalized. For example, we will secure interpreters and accept service

animals.” – Vera House direct service provider, from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’

All domestic and sexual violence service providers who responded to the survey reported that they do have the ability to make changes in physical space to meet a clients needs. Almost all reported the ability to be flexible, meet in alternative settings, or provide materials in a different format. However, women with disabilities shared experiences of domestic or sexual violence service providers NOT accommodating their needs. Clearly, there is a disconnect between what service providers state they have the capacity to do and the experiences of survivors with disabilities. – from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’ and women with a disabilities in Listening Circles

3. Survivors with mental health disabilities do not find that services at Vera House, or in the greater community, adequately meets their needs.

There are disparities in the type of care that is available for women with physical and developmental disabilities and women with mental health disabilities. Both survivors and service providers report that **mental health services are not currently able to fully accommodate the needs of women who have also experienced domestic and sexual violence**. Women with mental health disabilities reported that Vera House is challenged in serving their needs, especially in the shelter program. Women who identified as having a mental health disability described frustration with Vera House shelter staff not take the time to carefully explain the confidentiality of the shelter or not offering her the support she felt she needed to be successful in shelter. Women also talked about not being ‘accepted’ into the New Directions: Rape Crisis and Sexual Assault counseling program at Vera House. Service providers at Vera House echoed this concern, acknowledging that they do not feel that they have the skills or staff and time resources to respond to the needs of women in mental health crisis.

These same survivors reported that they only turned to Vera House after many other community mental health agencies had ‘let them down’ and not been able to assist them with trauma centered services that responded to both their mental health needs and their safety and healing from domestic and/or sexual violence. When in crisis, women are not as easily able to access transportation, fill out appropriate paperwork, or regularly make appointments.

“There has been a huge increase of clients coming into shelter with mental health issues. In the past, they have been asked to leave. Now, our main focus is keeping the client safe. We are not therapists at the shelter and are finding it very hard to deal with these issues. I do not feel equipped to deal with this. We need to constantly reinforce our rules with them. Sometimes it works, sometimes it doesn’t. – Vera House service provider in a Listening Circle

“I referred someone to [another] women’s shelter who was identifying psychiatric needs and/ or addiction issues that were beyond the scope of our staff. – Vera House direct service provider, from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’

KEY FINDING #2- KNOWLEDGE & PRACTICE

KNOWLEDGE & PRACTICE

Summary:

A general lack of knowledge around the intersection between disability, d/Deafness, and domestic and sexual violence creates inadequate response for survivors with disabilities and d/Deaf survivors. Both service providers and survivors note that the holistic needs of women with disabilities and d/Deaf women who are survivors of domestic and/or sexual violence are not fully and consistently met at ARISE, Vera House, or elsewhere in Onondaga County due to this lack of a joint skill set at the agency and provider level.

1. Service providers are not knowledgeable about the intersection of disabilities, d/Deafness, and domestic and sexual violence, and this impacts their ability to provide services.

Both survivors with disabilities, d/Deaf survivors and service providers in both fields report that in general, service providers are not knowledgeable about the intersection of disabilities, d/Deafness, and domestic and sexual violence. Women reported that this gap in holistic knowledge impacts the services that they receive and results in providers continually referring them out to other agencies. Women then have to begin the process of building trust with a new provider. Another dynamic that adds to service provider knowledge base in both fields is high direct staff turnover. Women with disabilities and d/Deaf women reported that they often then have to re-educate the new provider on their needs as a survivor or as a person with a disability, as well as begin the process of building trust with a new provider. Leaders at Vera House, ARISE, and other agencies reported that turnover in direct service staff challenges their ability to effectively train around the intersection of these issues.

“I have trouble trusting any new service provider or doctor. Doctors and service providers look at us as different. You have to try a trial and error process and seek second and third opinions.” – women with a disability in a Listening Circle

Less than half of domestic and sexual violence service providers indicated they were “comfortable” or “very comfortable” in working with d/Deaf women- from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’

“I am working with a person who is deaf. She has told me of things that happened to her as a child. She still is having difficulty with this. She is getting help but she is floating from agency to agency. This is due to the fact that she has mental health issues and as she will keep coming back.” – ARISE service provider in a Listening Circle

Service providers from both fields did not request formal, traditional training- 89% of domestic and/or sexual violence service providers and 80% of disability and d/Deafness service providers responded ‘good’ or ‘excellent’ to ‘building relationships and working closely with each other in an effort to learn’ when questioned about their preferred learning method to improve their comfort in working with survivors with disabilities

and/or d/Deaf survivors - from 'Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence' and 'Survey for Service Providers who work with People with Disabilities and d/Deaf People'

"Staff training is the key- not all staff members are able to address these issues with their clients." – ARISE staff member at Listening Circle

2. Direct Service Providers at ARISE are not comfortable or prepared to incorporate domestic and sexual violence into their work.

ARISE direct service providers, some ARISE leadership, and other disability providers in the community reported struggling with being **unclear on the best ways to respond to a disclosure** of abuse, as well as what the woman should know upon entering shelter, or family court, or the emergency room. Service providers and leadership at ARISE acknowledged formal protocols and policies around immediate documentation and investigation when a woman with a disability or who is d/Deaf discloses abuse at ARISE. These protocols are governed by New York State OMRDD (Office of Mental Retardation and Developmental Disability) and OMH (Office of Mental Health) guidelines. This was also true for other disability providers in our community. However, these guidelines are purely for documentation and investigative in nature. Direct service providers reported that they feel **unsure around how to support women they work with around disclosures of domestic and/or sexual violence**. A concern is that if a survivor knows that a disclosure will be 'investigated' and this is not balanced with a culture of warm support, has this led to survivors at ARISE limiting their disclosures? ARISE staff acknowledged that abuse is an important issue for the women they serve, but also shared that they have not required screening for domestic and/or sexual violence or providing coordinated service delivery for consumers.

"I worked with a survivor [with a disability] who was suicidal; I needed someone to team with when she was in crisis. There should be a written procedure. I felt alone during one of these situations and then was criticized by my boss who told me that I did not follow the correct procedure. I did what I believed was right at the time. Everyone needs to be on the same page. We need more guidelines." – ARISE service provider in a Listening Circle

"We need a manual on all areas of services. We need to be able to find it at central locations." – ARISE service provider in a Listening Circle

"If a situation would arise with a consumer, in regards to abuse of any form, we would report it to our direct supervisor and from there a report and investigation would be done." - ARISE service provider from 'Survey for Service Providers who work with People with Disabilities and d/Deaf People'

"I am excited for our agency to be able to collaborate more with the DV [domestic violence] service providers because it really helps to know that there are agencies ready to assist and specially trained in our community with the most difficult situations involving DV. This is not what we do at ARISE and when it comes up they need to be helped out with that before ARISE can help them be independent." –ARISE service provider in a Listening Circle

3. Direct service providers at Vera House and ARISE are eager to learn and expand their ability to provide best practice services to women with disabilities and d/Deaf women who are also survivors of domestic and/or sexual violence.

There was great energy and excitement from direct service providers at Vera House and ARISE around collaborating in serving women with disabilities and d/Deaf women who are survivors of domestic and/or sexual violence. An unanticipated result of the survey and Listening Circles at ARISE and Vera House was that each opportunity to think about these issues seemed to energize staff.

“I have talked victims of domestic and sexual violence who were ashamed and refused to get help. I have wanted us to do something about this for years, we have to, and I’m willing to whatever it takes. And, it’s all because I am a formerly battered wife myself and people didn’t believe me because I am in a chair. People just don’t think or know that we have sexual relationships and so they really don’t know when we are being abused.” – ARISE service provider in a Listening Circle

“Talking about all of this [women with disabilities and D/deaf women who are survivors of domestic and/or sexual violence] has gotten me thinking about how we can do a better job at Vera House. I feel validated- like others find this difficult also, but that together we can have hope to do things better.” – ARISE service provider in a Listening Circle

KEY FINDING #3- RAPPORT WITH LAW ENFORCEMENT

RAPPORT WITH LAW ENFORCEMENT

Summary:

Survivors with disabilities and d/Deaf survivors and their service providers report many experiences of inadequate response from Law Enforcement which has created a legacy of mistrust.

1. Survivors with disabilities and their service providers report many experiences of inadequate response from law enforcement which has created a legacy of mistrust.

Women with disabilities and d/Deaf women shared distrust of Law Enforcement and were not, generally, aware that Vera House could assist them in Advocating with the criminal justice system. Leadership and direct service providers from ARISE and other disability and d/Deaf service agencies also shared discouragement with the criminal justice system, ***in fact it was mentioned in EVERY Key Stakeholder Interview conducted*** with leadership at ARISE and at other disability agencies. They shared that they have had little success effectively challenging the criminal justice system, in comparison to Vera House’s long standing working relationship with the criminal justice system in Syracuse. Law enforcement need to be engaged as part of our community response to women with disabilities and d/Deaf women who are survivors of domestic and/or sexual violence

“First responders in law enforcement need accountability, especially when it comes to people with disabilities. Victims, they are not viewed as credible unless there are obvious signs of abuse (bruising, bleeding). They tend to believe the abuser’s story, not the abused victim’s. It is very hard to find an interpreter in an emergency situation. Sometimes it takes as much as five hours.” – Vera House service provider in a Listening Circle

“I was raped and my mental disability was a real challenge. The police told the hospital staff that I was crazy and not to be believed. So, I wouldn’t tell anyone to talk to the police...” –women with a disability in a Listening Circle

“...Police, paramedics, etc- those who are first responders should be trained by service providers who work with people with disabilities everyday...” – ARISE service provider in a Listening Circle

“I have been a peer advocate for people with disabilities for 16 years and noticed great frustration for Advocates and clients due to police response. People with disabilities have a long legacy of not being respected by the police. We all have stories to tell and it seems like there is a new injustice every time you turn around. So, why would women with disabilities call the police if they were being hurt?” – from Key Stakeholder Interviews

KEY FINDING #4- OUTREACH TO DEAF WOMEN

OUTREACH TO d/DEAF WOMEN

Summary:

The d/Deaf community sees itself as isolated from hearing service providers that serve populations other than the d/Deaf. The long history of struggling to obtain services has led the d/Deaf to experience difficulty trusting or reaching out to unfamiliar service providers.

- 1. d/Deaf women in the community are unaware of the services available when they experience domestic and/or sexual violence.**

Aurora, a local service agency for d/Deaf people, focuses primarily on job skills and education. In the community, there is no specialized agency or program for d/Deaf women to receive help after experiencing domestic and/or sexual violence and the d/Deaf community is unfamiliar with how Vera House can help them.

Throughout the preliminary stages of Project EMERGE, first year of the Accessibility Task Force, and execution of the NA, leaders of the d/Deaf community have become more familiar with the array of services that can meet their needs, especially at Vera House. The process of working together has revealed opportunities for collaboration, getting to know each other, and building trust and understanding.

“In the past, Vera House has not offered much support. Previously, we were skeptical of working together, but through this project, we have learned more and are happy to start working together.” –Deaf woman in a Listening Circle

2. Trust is extremely important to establish with d/Deaf women. As the d/Deaf community is small and most individuals are familiar with each other, there is fear of gossip and loss of confidentiality.

d/Deaf women expressed feeling more comfortable when working with a service provider who is familiar with d/Deafness and/or has worked with another d/Deaf person. d/Deaf women pointed out that it is best when a d/Deaf peer is able to recommend a specific service provider as trusted. Like women with disabilities, d/Deaf women also report disclosures of abuse not being believed by law enforcement or other service providers. This limits reaching out for services, and d/Deaf women in crisis described many experiences of not receiving appropriate response and care from many systems in our community.

“If I experienced a trauma, I would not go to Aurora for services. I would probably look for a co-survivor or for an advocate who could help me.”- Deaf woman in a Listening Circle

“Building trust is a long process. People don’t understand that Deaf people can read facial and body language better than hearing people can. You must be welcoming, responsive and respectful.” – Deaf woman in a Listening Circle

“Police need to be trained to not just believe the hearing person.”- Deaf woman in a Listening Circle

3. d/Deaf women reported numerous issues surrounding working with Interpreters.

General availability of Interpreters in our community is a major challenge reported by d/Deaf women. d/Deaf women shared that there have been times when they were in crisis that Interpreters were not provided at hospitals, community based agencies, court, and in interactions with law enforcement. They highlighted that service providers and systems should offer and advertise that they will provide Interpreters for d/Deaf women. There are also issues surrounding Interpretation for a d/Deaf woman needing shelter. d/Deaf women reported that the need for an Interpreter at shelter is a hindrance to leaving an abusive relationship. Service providers, d/Deaf women, and Vera House leadership all note the need for qualified Interpreters to be available to d/Deaf women in crisis, needing shelter and also all agree that there is a need for strategy development around this issue.

A d/Deaf woman in crisis should have access to an Interpreter, as soon as possible, in order to communicate her needs and experiences. Just as there are always Vera House Advocates on-call to support a hearing woman at local Emergency Departments and Law Enforcement venues, d/Deaf women recommended that Vera House train a team of d/Deaf women to serve as on-call Advocates. This would provide best practice in Interpreting and service delivery for the victim because the d/Deaf Advocate could support the d/Deaf victim **and** serve as a Deaf Interpreter (working in conjunction with the ASL (American Sign Language) Interpreter provided by the hospital). This model could also be utilized to support d/Deaf women who come into shelter at Vera House to reduce her amount of isolation in shelter.

“Vera House should always offer an Interpreter, even if we are with a friend or family member who can sign. We should have access to email and TTY to communicate when there is a crisis. Deaf people prefer to communicate in different ways.” – Deaf woman in a Listening Circle

Less than half of domestic and sexual violence service providers indicated comfort in working with d/Deaf women – from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’

KEY FINDING #5- MERGER OF STRENGTHS

MERGER OF STRENGTHS

Summary:

Vera House, ARISE, and the larger human service community provide a rich array of services to women with disabilities and/or women who are survivors of domestic and/or sexual violence. However, currently these services are delivered in silos.

There is a general lack of support for d/Deaf women in our community. Project EMERGE can engage the d/Deaf community by meeting, sharing strengths and learning from each other.

1. Onondaga County is a service-rich community for women with disabilities and women who are survivors of domestic and sexual violence.

Onondaga County provides a rich **network of services and community resources** to meet the needs of women with disabilities women who are survivors of domestic and sexual violence. Individually, disability services and domestic and sexual violence services are strong and well resourced in the community. Staff members at Vera House and ARISE have a good working relationship and exhibit respect for each other. In Onondaga County, there is a culture of partnership and long history of working across systems to improve service delivery. Human service agencies work well with law enforcement, government officials, and educational intuitions on a regular basis. This is demonstrated through collaborations like the Syracuse Area Domestic and Sexual Violence Coalition, Human Services Leadership Council, the Onondaga Community Sexual Trauma Task Force, and the Child Abuse Response Team.

Among direct service providers and agency leaders, there is general agreement about the needs and assets of our community. – from Vera House & ARISE direct service provider Listening Circles and Key Stakeholder Interviews

2. ARISE and Vera House are both respected agencies within the community at delivering services to their target populations.

During the process of conducting Key Stakeholder Interviews, it was clear that staff members in the various programs at ARISE are all very committed and dedicated to their work. Women who receive services at ARISE also articulated that they were happy with the services that

they were involved with. ARISE provides a variety of programming for a range of disabilities, and is able to accommodate a consumer in crisis on a walk-in basis. The flexibility and commitment to best services for clients makes ARISE a prominent community agency for individuals with disabilities. Leadership at ARISE consistently looks to partner with other agencies to meet the various needs of their consumers.

“People at ARISE are very respectful and courteous. They meet your needs and work with you.” – women with a disability in a Listening Circle

Vera House also provides a 24 hour crisis support line that allows for flexibility and victims or their providers to have a wide range of questions answered when the time is right for them. Vera House is regarded as doing a good job at providing comprehensive services; however, they are not always knowledgeable about the needs of women with disabilities and d/Deaf women. The Syracuse Area Domestic and Sexual Violence Coalition, staffed by Vera House, reaches out to groups to provide education specific to accessibility needs of victims. The Coalition also provides opportunities for networking and conversation among professionals. Staff at ARISE and Enable, two of the largest disability service providers in our community, are generally knowledgeable about the services offered by Vera House.

“Vera House provides comprehensive services to victims and survivors.” – from multiple Key Stakeholder Interviews

3. Service Providers from each field need to improve their ability to cross resource each other.

Women with disabilities who are survivors and their service providers provided a good overall picture of the unmet needs of the community. Across all three methods, the importance of cross training for service providers in both domestic and sexual violence and disability and D/deaf sensitivity and culture stood out as a very important need. Generally, there was an expressed need for the **creation of a culture of understanding about the lives of women with disabilities and D/deaf women who are survivors of domestic and/or sexual violence at Vera House and ARISE**. When women know that their service providers have a baseline of understanding of their abilities and experiences in the world, they are able to feel more comfortable disclosing abuse and requesting accommodation. Training for staff in Vera House’s shelter was consistently stressed as a top priority.

62% of disability and/or d/Deafness service providers would like training on what to do when a victim and perpetrator are both served by a program or agency - from Survey for Service Providers who work with People with Disabilities and d/Deaf People

“We should build stronger connections between the staff at Vera House and ARISE. We should create a position or a role at each agency for a person who can be contacted and consulted in these cases. We could create models for Vera House to connect with other agencies as well, mentoring staff at other agencies in talking with clients about abuse.” – from Key Stakeholder Interviews

The survey for domestic and sexual violence service providers indicated that while 81% of providers knew their client had a disability or was d/Deaf worked with another service provider around those needs, only 42% worked with that provider. – from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’

“I worked with a client who had substance abuse problems and worked closely with her treatment program's case manager. I communicated with the case manager concerns that the client raised about her safety in her living quarters (with client's permission). We were able to work together to help the client attain a greater degree of safety by changes in her environment and shared strategies for her to use if she felt threatened in future. The collaboration created a sort of more public and accountable network to enhance and empower the client toward safety.” - from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’

Over half of domestic and sexual violence service providers were not sure what eight out of nineteen local disability and d/Deaf service agencies do. – from ‘Survey for Service Providers who work with Survivors of Domestic and/or Sexual Violence’

KEY FINDING #6- SURVIVOR CENTERED SERVICES

SURVIVOR CENTERED SERVICES

Summary:

Women with disabilities and d/Deaf women need to be respected and treated as knowledgeable about their situation and needs. Domestic and sexual violence and disability service providers are most empowering to survivors with disabilities and d/Deaf survivors when they utilize language and approach that focuses on the strengths of the individual and allows them to be in charge of their healing and independence.

One of the richest aspects of our Needs & Assets Assessment was the consistent and strong voices of survivors, women with disabilities, and D/deaf women. Woman after woman shared eloquently about the ways providers who assisted them in reconnecting with their own sense of self and abilities to take control of their life.

1. Language should focus on the strengths of survivors with disabilities and d/Deaf women.

The use of language by service providers with women with disabilities and d/Deaf women was an important aspect of empowerment. Women reported feeling empowered when service providers **utilized language that focused on their strengths**, rather than deficiencies or failures. However, not all practitioners have the skills or insight to use this language. Another basic empowerment tool that women spoke about is confidentiality. Women report feeling empowered when they knew and trusted that their confidentiality would be protected.

“[Service providers] need to take each case individually, and not just read my file and think they know about me.” –survivor in a Listening Circle

“I feel everyone in social services is not necessarily equipped to be in the field. Some don’t care. Some are burned-out. They think they are above you and have a bad attitude.” - survivor in a Listening Circle

“I get upset when service providers refer to my experience as a ‘story.’ What happened to me was real, and I don’t like not being believed.” – survivor in Listening Circle for d/Deaf women

2. Women with disabilities and d/Deaf women are most empowered when her service providers work together while allowing her to lead the process

Finally, women reported that when their multiple service providers, often from different systems, were able to connect with each other in an effort to meet her needs, while allowing her to lead the process, she was able to feel the most empowered. Women stressed that they should be at the center of **determining what their needs and services** will be as they seek safety and healing from violence along with developing a support plan around their disability.

“I had to go meet with a counselor at my son’s school because he was acting up and I took my therapist with me. She always tells me how good I am and encourages me. She makes me feel that I can get through this. She keeps me focused on going forward.” - Survivor in a Listening Circle

“My service provider is very helpful and asks me what I need and is everything okay. Some people go by labels. I feel comfortable with my therapist at Vera House. She believes in me.” - survivor in a Listening Circle

“They should provide encouraging words (“it was not your fault”, “you are human”). They need to give us a chance to feel connected and comfortable. Don’t forget where you came from and don’t forget that you are human just like us.” – women with a disability in a Listening Circle

IV. MOVING TO ACTION

In the findings from the Needs & Assets Assessment, common themes highlight the gaps that Project EMERGE will need to develop a strategic plan to respond to came to the forefront. There is also a strong foundation to work from in Onondaga County that creates opportunity for change to respond to these gaps. The chart below organizes the key findings with a ‘call for action’. Project EMERGE is now charges with developing a Strategic Plan to respond this documented need and opportunity. Use column on the right to brainstorm your ideas for change.

GRID FOR STRATEGIC PLANNING, pages 18-21

KEY FINDING	CALL FOR ACTION	STRATEGIC PLAN IDEAS
<p style="text-align: center;"><u>TRUST</u></p> <p>1. Survivors report not being believed when they disclosed experiences of domestic and sexual violence.</p> <p>2. Women with disabilities report that it has been their experience that Vera House’s shelter has limited physically accessible. This is also true for other shelters in the community, as well as non-disability focused services. Women with disabilities and d/Deaf women also report that Vera House could improve in its ability to provide a wide array of accommodations.</p> <p>3. Survivors with mental health disabilities do not find that services at Vera House, or in the greater community, adequately meets their needs.</p>	<p>1a. Women with disabilities and d/Deaf women who are survivors of domestic and/or sexual violence need ALL of their service providers to be comfortable and skilled in hearing and responding to disclosures of domestic and sexual violence.</p> <p>2a. Vera House needs to be the leader in Onondaga County on moving towards providing a more physically accessible shelter.</p> <p>2b. Vera House needs to develop policies around offering and providing accommodations. And, direct service providers need to be skilled in offering a wide array of accommodations that are sensitive to the unique needs of the consumer.</p> <p>3a. Disparities reported by survivors with mental health disabilities need to be addressed through empowering them to participate in building accessible services at Vera House and ARISE. This will set an example in our community for other disability and mental health agencies.</p> <p>3b. Project EMERGE need to engage with partners in the community specializing in mental health services to create more accessibility at Vera House, and develop a community plan of better supporting survivors with mental health disabilities.</p>	

KEY FINDING	CALL FOR ACTION	STRATEGIC PLAN IDEAS
<p><u>KNOWLEDGE & PRACTICE</u></p> <p>1. Service providers are not knowledgeable about the intersection of disabilities, the Deaf experience, and domestic and sexual violence and this impacts their ability to provide services.</p> <p>2. Direct service providers at ARISE are not comfortable or prepared to incorporate domestic and sexual violence into their work.</p> <p>3. Direct service providers at Vera House and ARISE are eager to learn and expand their ability to provide best practice services to women with disabilities and d/Deaf women who are also survivors of domestic and/or sexual violence.</p>	<p>1a. Direct service providers need to be skilled and comfortable in disability and d/Deaf culture as well as the dynamics of domestic and sexual violence.</p> <p>2a. Direct service providers at ARISE need training and on-going support around screening and assessment of domestic and sexual violence.</p> <p>3a. Vera House and ARISE need to offer direct service providers creative and diverse opportunities for ongoing learning and support around the intersection of disabilities and d/Deafness and domestic and sexual violence.</p> <p>3b. Project EMERGE needs to create opportunities for direct service providers and leadership at Vera House and ARISE to connect with each other around best practices in an ongoing way.</p>	
<p><u>RAPPORT WITH LAW ENFORCEMENT</u></p> <p>1. Survivors with disabilities and their service providers report many experiences of inadequate response from law enforcement which has created a legacy of mistrust.</p>	<p>1a. Law enforcement needs to improve their understanding of the intersection of disability, d/Deafness, and domestic and sexual violence.</p> <p>1b. Law enforcement needs to develop standard protocols for responding to domestic and sexual violence experienced by women with disabilities and d/Deaf women.</p>	

KEY FINDING	CALL FOR ACTION	STRATEGIC PLAN IDEAS
<p style="text-align: center;"><u>OUTREACH TO d/DEAF WOMEN</u></p> <p>1. d/Deaf women in the community are unaware of the services available when they experience domestic and/or sexual violence.</p> <p>2. Trust is extremely important to establish with d/Deaf women. As the d/Deaf community is small and most individuals are familiar with each other, there is fear of gossip and loss of confidentiality.</p> <p>3. d/Deaf women reported numerous issues surrounding working with Interpreters.</p>	<p>1a. Project EMERGE needs to partner with leaders in the Deaf community to increase community awareness about domestic and sexual violence and Vera House services.</p> <p>2a. Vera House needs to establish rapport with the d/Deaf community so that d/Deaf women who are victims of domestic and sexual violence are comfortable reaching out for help and recommending services to each other.</p> <p>2b. Project EMERGE and Vera House needs to utilize existing and natural d/Deaf networks to build trust and positive reputation in the d/Deaf community.</p> <p>3a. Project EMERGE needs to work to ensure that Vera House, ARISE, other community based agencies, Emergency Departments, etc all offer an Interpreter when a d/Deaf women presents for services.</p> <p>3b. Vera House needs to train a team of d/Deaf women to serve as on-call Advocates for d/Deaf survivors of domestic and violence.</p>	

KEY FINDING	CALL FOR ACTION	STRATEGIC PLAN IDEAS
<p><u>MERGER OF STRENGTHS</u></p> <p>1. Onondaga County is a service rich community for women with disabilities and women who are survivors of domestic and sexual violence</p> <p>2. ARISE and Vera House are both respected agencies within the community at delivering services to their target populations.</p> <p>3. Service Providers from each field need to cross resource each other.</p>	<p>1a. Project EMERGE needs to utilize this strength to promote systems change in our community response to survivors with disabilities and d/Deaf survivors.</p> <p>2a. The time is right for project EMERGE to build a lasting and strong partnership between Vera House and ARISE.</p> <p>2b. This partnership will then serve as a model for other community agencies.</p> <p>3a. Formalized connections between direct service providers need to be created that will facilitate case consultation, on-going cross training, and relationships between direct service providers.</p>	
<p><u>SURVIVOR CENTERED SERVICES</u></p> <p>1. Language should focus on the strengths of survivors with disabilities and D/deaf women.</p> <p>2. Women with disabilities and d/Deaf women are most empowered when her service providers work together while allowing her to lead the process.</p>	<p>1a. Project EMERGE needs to train and ALL staff at Vera House and ARISE in survivor/person centered service delivery.</p> <p>1a. This language needs to be incorporated into policy and outreach materials at each agency.</p> <p>2a. Formalized connections between direct service providers from both fields need to be created that are focused on empowering survivors with disabilities and D/deaf survivors to determine their own service delivery plan.</p>	

V. CONCLUSION

Project EMERGE needs to capitalize on the strengths that currently exist in the service delivery system, as well as strengths that survivors, people with disabilities and d/Deaf people hold. Individual trust in service providers, as well as trust in agencies and our community's ability to respond to survivors with disabilities and d/Deaf survivors, is built through all service providers working from an empowerment perspective. There are already many strengths at Vera House and ARISE in providing services to women with disabilities and d/Deaf women as well as survivors of domestic and sexual violence. This provides opportunity to collaborate and build a more coordinated set of services to model to the greater human service community in Onondaga County.