

Disability Lens on the First Action Plan 2023–2027

A joint Australian, state and territory government initiative
under the National Plan to End Violence against Women and
Children 2022–2032



A joint Australian, state and territory government initiative



Australian Government
Department of Social Services

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How to navigate this document

Chapter	What is it about?	Who is it for?
About the Disability Lens	The scope and intent of the Disability Lens on the First Action Plan 2023–2027 (Disability Lens) and how it has been developed in consultation with the community.	Women and children with disability, policy makers (e.g. all governments), sector leaders, service providers who want to understand how the Disability Lens was developed and how it can be used.
Case for change	The extent of violence against women and children with disability and the compounding drivers of violence, including ableism.	Policy makers and sector leaders who want to understand why ending violence against women and children with disability is an urgent priority.
Policy context	The roles of all levels of government in applying the Disability Lens and reforming systems, and how the National Plan to End Violence against Women and Children 2022–2032 (National Plan) and Australia’s Disability Strategy 2021–2031 (the Strategy) work together.	Women and children with disability, policy makers and sector leaders who want to understand the broader policy context around the Disability Lens.
Summary of Disability Lens	A table summary of the Actions in practice for women and children with disability.	Women and children with disability, policy makers and sector leaders who would like a summary of the Actions.
Actions 1–10	For each Action, a summary of disability perspectives and how the Action can be put in practice for women and children with disability. Examples in practice are included.	Policy makers, sector leaders and service providers to inform system improvements, new policy, and service delivery.
Monitoring and reporting	How the Disability Lens will be reported on under the First Action Plan to End Violence Against Women and Children 2023–2027 (First Action Plan), Australia’s Disability Strategy, Disability Royal Commission, and other public reporting.	Women and children with disability, policy makers and sector leaders who would like to understand how progress against the Disability Lens will be monitored and reported on.

Acknowledgments

We acknowledge and pay respects to all First Nations peoples across Australia, who are the Traditional Owners and Custodians of the lands, waters, and the oldest continuous living cultures on Earth. We recognise the strength, resilience, and wisdom of Elders past and present, and honour the contributions of First Nations communities in preserving culture, lore, and Country.

We acknowledge that First Nations women, children, and gender-diverse people have disproportionately experienced violence and injustice. We recognise the deep trauma, grief, and pain experienced by survivors, families, and communities and pay tribute to those who have spoken out, advocated, and worked tirelessly to drive change.

We commit to ongoing partnership with First Nations peoples to ensure their perspectives and leadership guide the design and delivery of services and policies that affect them. We recognise that structural and intersectional barriers must be addressed through systemic transformation, including ensuring cultural safety and responsiveness across all sectors.



Dedication

This Disability Lens is dedicated to all women and children with disability who have experienced gender-based violence. We honour your strength, courage, and resilience in the face of systemic barriers and discrimination.

We mourn those whose lives have been lost. We recognise the deep and lasting impacts of violence on survivors, their families, and communities. We acknowledge the many who continue to seek justice, healing, and safety in a world that too often overlooks their experiences.

We extend our deepest gratitude to those who have shared their stories, knowledge, and advocacy to inform this work. Your perspectives are invaluable in shaping a future where all women and children with disability can live free from violence, with dignity, safety, and respect.

We acknowledge and thank all the people and organisations who work tirelessly every day to prevent and respond to gender-based violence and to advocate for people with disability. Your advice and advocacy have informed the Disability Lens.



Language used in this document

In the Disability Lens we use terms that may hold different meanings to different people.

How people describe their experiences intersects with other facets of their life including First Nations identity, regional and remote community experiences, migrant or culturally and linguistically diverse backgrounds, LGBTQIASB+ identities, and different age groups, including children and young people.

In the Disability Lens, references to women include all women, including cis and trans women. We also recognise that non-binary, gender diverse, and feminine-identifying people experience many of the same issues and barriers as women.

Refer to the Glossary for definitions of key terms used throughout this document.

Person-first and identity-first language

We have chosen to use person-first language in the Disability Lens. Person-first language places the person before their disability – for example, ‘person with disability’. We have adopted this approach to affirm a person’s identity beyond their disability and to challenge ableism.

We also acknowledge that many people prefer identity-first language, such as ‘disabled person’. Identity-first language can be used to show disability pride, a connection to the disability community, and to emphasise that it is society that is disabling.

We know that some First Nations communities do not use or identify with the term ‘disability’ at all, instead framing experiences through a cultural lens that values inclusion and collective wellbeing. We also know that many people in the Deaf community identify as a distinct cultural and linguistic group rather than as part of the disability community.

All ways of identifying are valid, and people should be supported to use the language that best reflects their identity.

Seeking support

Violence against women and children can be hard to discuss and reading this document may cause distress.

[Help is available.](#)

If you or someone close to you is in distress or immediate danger, please call 000.

For information, support and counselling, you can contact:

Family, domestic and sexual violence (FDSV) support

Support	Description	Contact details
1800RESPECT	National domestic, family and sexual violence counselling, information and support service. It's free and confidential. Available 24 hours a day, 7 days a week (24/7).	Call: 1800 737 732 Text: 0458 737 732 Online chat and video call: www.1800respect.org.au
13YARN	National crisis support line for mob who are feeling overwhelmed or having difficulty coping. We offer a confidential one-on-one yarnning opportunity with a Lifeline-trained Aboriginal and Torres Strait Islander Crisis Supporter who can provide crisis support 24/7.	Call: 13 9276 www.13yarn.org.au
1800RESPECT Sunny app for people with disability	Sunny is 1800RESPECT's app supporting people with disability to recognise violence and abuse, understand their rights and take action to protect their safety. Sunny has been co-designed with Women with Disabilities Australia to help other people with disability who have experienced violence and abuse.	www.1800respect.org.au/sunny Free app available for download on the App Store or Google Play Store
Full Stop Australia	National trauma counselling and recovery service for people of all ages and genders experiencing sexual, domestic and family violence. This service is free and confidential. Available 24/7.	Call: 1800 385 578 www.fullstop.org.au

Support	Description	Contact details
Lifeline	Lifeline is a suicide prevention service that provides people experiencing a personal crisis with access to 24-hour crisis support. Call, text and online chat services available 24/7.	Call: 13 11 14 Text: 0477 13 11 14 www.LifeLine.org.au
National Suicide Callback Services	Suicide Call Back Service offers free professional 24/7 telephone counselling support to people at risk of suicide, concerned about someone at risk, bereaved by suicide and people experiencing emotional or mental health issues.	Call: 1300 659 467 www.suicidecallbackservice.org.au
Beyond Blue	Beyond Blue provides support programs to address issues related to depression, suicide, anxiety disorders and other related mental health issues. Phone counselling, online peer support forums and mental health coaching available.	Call: 1300 224 636 www.BeyondBlue.org.au
Kids HelplineHelpline	Kids Helpline is a free, confidential 24/7 online and phone counselling service for young people aged 5 to 25, that is available for any reason. Qualified counsellors can assist via WebChat, telephone or email.	Call: 1800 551 800 Email: counsellor@kidshelpline.com.au www.kidshelpline.com.au
1800ELDERHelp	ElderHELP is a free call phone number that automatically redirects callers seeking information and advice on elder abuse to the phone service in their state or territory.	Call: 1800 353 374
Rainbow Sexual, Domestic and Family Violence Helpline	For anyone from the LGBTIQ+ community whose life has been impacted by sexual domestic and/or family violence. This service is free and confidential. Available 24/7.	Call: 1800 497 212 www.fullstop.org.au
WellMob	Social, emotional and cultural wellbeing online resources for Aboriginal and Torres Strait Islander peoples.	www.wellmob.org.au

Support	Description	Contact details
Men's Referral Service	For anyone in Australia whose life has been impacted by men's use of violence or abusive behaviours. Available for men who have or are still behaving abusively. Available 24/7. Live online counsellor chat services available.	Call: 1300 766 491 www.ntv.org.au
MensLine Australia	MensLine Australia is a free telephone and online counselling service offering support for Australian men anywhere, anytime. Telephone counselling support is free and 24/7 for men with concerns about mental health, anger management, family violence (using and experiencing), addiction, relationship, stress and wellbeing.	Call: 1300 78 99 78 www.MensLine.org.au
Open Arms – Veterans & Families Counselling	Veterans & Families Counselling – Open Arms provides free and confidential counselling to anyone who has served at least one day in the Australian Defence Force (ADF), their partners and families. Counselling can be face-to-face, by telephone or online. 24/7 free and confidential phone support.	Call: 1800 011 046 www.openarms.gov.au
ReachOut	ReachOut is 100% online, anonymous and confidential, and lets young people connect on their terms, from one-to-one peer support and moderated online communities, to tips, stories and resources.	www.au.reachout.com
Centre for Women's Economic Safety	Resources and information for women experiencing financial abuse and threats to their economic security and wellbeing.	www.financialsafety.org.au
My Blue Sky	Provides free legal and migration support to people experiencing forced marriage and other forms of modern slavery in Australia. Telephone open Monday – Friday, 9 am – 5 pm (Eastern Standard Time)	Call: 02 9514 8115 Text: 0481 070 844 Email: help@mybluesky.org.au www.mybluesky.org.au

Support	Description	Contact details
Say It Out Loud	A national resource for LGBTQ+ communities and service professionals working with people who have experienced sexual, domestic and family violence.	www.sayitoutloud.org.au
Services Australia	Can help with family and domestic violence concerns, access payments and connect to other support services.	www.servicesaustralia.gov.au
National Disability Abuse and Neglect Hotline	A free, independent and confidential service for reporting abuse and neglect of people with disability. Anyone can contact the Hotline, including family members, friends, service providers or a person with disability.	Call: 1800 880 052 NRS: Dial 1800 555 677 then ask for 1800 880 052 Email: hotline@workfocus.com
Centre for Women's Economic Safety	Resources and information for women experiencing financial abuse and threats to their economic security and wellbeing.	www.financialsafety.org.au

Translation and Interpreting services

Support	Description	Contact details
Translating and Interpreting Service (TIS National)	Provides access to telephone and on-site interpreting services in over 150 languages. Immediate telephone interpreting 24/7.	Call: 131 450 (within Australia) Call: +613 9268 8332 (outside Australia) www.tisnational.gov.au
Aboriginal Interpreter Service (AIS)	Helps to address language barriers faced by Indigenous people in the Northern Territory. Standard business hours are 8 am to 4:21 pm, Monday to Friday. After hours interpreting services are for urgent matters only.	Call: (08) 8999 8353 Fax: (08) 8923 7621 Email: ais@nt.gov.au Call: 1800 334 944 (general enquiries and interpreter bookings for all regions)
National Relay Service (NRS)	Telephone relay service allowing people who cannot hear or do not use their voice to communicate with a hearing person over the phone. Available 24 hours a day from anywhere in Australia.	Voice relay number: 1300 555 727 TTY number: 133 677 Text relay number: 0423 677 767 www.accesshub.gov.au/about-the-nrs
eSafety Commissioner	A complaints-based reporting scheme for cyberbullying of children, serious adult cyber abuse, image-based abuse and illegal and restricted content.	www.esafety.gov.au/report



Introduction

Together, we are broadening our commitment to supporting women and children with disability impacted by gender-based violence. Our work is guided by the belief that ending violence against women and children with disability is not only possible – it is our collective responsibility.

The [National Plan to End Violence against Women and Children 2022–2032](#) (National Plan) is a commitment by all Australian governments to eliminate gender-based violence within one generation. The National Plan recognises that women and children have the right to live free from fear and violence, and to feel safe in their homes, workplaces, schools, communities and online environments. [The First Action Plan to End Violence Against Women and Children 2023–2027](#) (First Action Plan) provides a roadmap for the first 5-year effort towards achieving the vision of the National Plan. It details specific Commonwealth, state and territory government actions and investment to implement the objectives across four domains: prevention, early intervention, response, and recovery and healing.

Women and children with disability experience higher rates and specific forms of family, domestic and sexual violence (FDSV) compared to the general population. This is caused by systemic barriers and specific forms of violence, abuse, neglect and exploitation – issues that were highlighted in the [findings of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability \(Disability Royal Commission\)](#).

All governments agreed that the findings of the Disability Royal Commission would guide future work to end violence against women and children with disability. The Disability Lens on the First Action Plan 2023–2027 (Disability Lens) responds to Recommendation 8.23 of the Disability Royal Commission, one of 222 recommendations aimed at ending the abuse, neglect and exploitation of people with disability.

All governments are committed to applying a disability lens to the implementation of the National Plan, starting with the First Action Plan. This means that future policy, program and service reform to end gender-based violence will respond to the needs of women and children with disability. We will include existing disability-specific actions that are in the National Plan reporting frameworks and continue to apply this lens when developing future plans and accountability measures.

Ending gender-based violence is a collective responsibility of governments, industry, communities and individuals. We aim towards a safer, more equitable future, where every woman and child can thrive free from violence. We will do this by uniting our efforts and embedding disability-inclusive and accountability measures into every layer of policy and practice. Together we have a responsibility and an opportunity to act decisively and deliver lasting change.

About the Disability Lens

What the Disability Lens aims to do

In September 2023, the Disability Royal Commission handed down its Final Report, which made 222 recommendations on how to improve laws, policies, structures and practices to ensure a more just society that supports the independence of people with disability and their rights to live free from violence, abuse, neglect and exploitation.

Recommendation 8.23 of the Disability Royal Commission's Final Report recommended that: 'The Australian Government and state and territory governments should develop a five-year Action Plan for Women and Children with Disability to accompany the National Plan'. Australian, state and territory governments agreed in principle to recommendation 8.23, committing to applying a disability lens to implementation of the 10 actions within the existing First Action Plan.

The Disability Lens describes the specific forms and higher rates of gender-based violence faced by women and children with disability, and the steps that we need to take to drive change. It is unapologetically a rights-based, intersectional, and trauma-informed document.

The Disability Lens broadens the implementation of the First Action Plan under the National Plan. It applies to all 10 actions of the First Action Plan, recognising that implementation is already underway across governments. The Disability Lens highlights where progress is being made and draws on examples of current practice to demonstrate what effective responses look like. These examples provide a foundation to build on in future activities and plans. They also help to ensure that work already happening across national, state and territory initiatives is aligned and strengthened.

Progress on the Disability Lens will be monitored and reported through the National Plan's governance system. For more information, refer to the Monitoring and Reporting section at page 62.

Our shared responsibility – role of governments, industry and community in applying the Disability Lens

Disability inclusion cannot be an afterthought. It must be embedded from the outset in every decision and initiative. Every stakeholder – whether in government, industry, or the community – shares the responsibility of ensuring that policies and practices are designed with disability at the forefront.

Australian, state and territory governments, disability representative organisations and the non-government sector are working together towards the shared goal of ending all forms of violence and abuse towards women and children with disability. The success of the Disability Lens and the First Action Plan relies on this robust cooperation.

Australian, state, and territory governments play a pivotal role in policy formation, funding allocation, and oversight. This is reinforced by the National Plan's reporting and accountability frameworks, as well as the strategic direction provided by [Australia's Disability Strategy 2021–2031](#) and [Australia's obligations under the United Nations Convention on the Rights of Persons with Disabilities](#) (UN CRPD). These interlocking mechanisms ensure that the needs of women and children with disability are met with timely and effective responses while promoting inclusive practices across all sectors.

How the Disability Lens was developed

Delivering outcomes against the National Plan

The Disability Lens builds on the National Plan and First Action Plan to ensure that policies and actions recognise and respond to the experiences of women and children with disability.

- A [Theory of Change for the National Plan](#) explains how and why we expect change to occur as we work towards the vision of ending gender-based violence in one generation.
- The [Outcomes Framework](#) builds on the Theory of Change by providing a focus for continuous improvement through 6 long-term (10+ years) outcomes for systems, services, community values, accountability for people who use violence, and safety and respect for women and children.

The Disability Lens is underpinned by the Theory of Change and Outcomes Framework to ensure the actions and activities will result in measurable change and set the foundation for meeting our vision of ending gender-based violence in one generation.



The Disability Lens applies this through a disability-inclusive perspective, ensuring that responses address systemic ableism, accessibility barriers and the specific ways people with disability experience violence.

Drawing on diverse expertise

All governments were guided by targeted consultations to inform development of the Disability Lens. This included:

- Women with Disabilities Australia
- National Plan Advisory Group (NPAG)
- State and territories' key stakeholders from Disability and FDSV areas
- Domestic, Family and Sexual Violence (DFS) Commission
- Victim-survivor groups
- Disability Representative Organisations (DROs).

Development of the Disability Lens included specific consultation with victim-survivors beyond the inclusion of victim-survivor expertise on the NPAG and Advisory Council. This aligns with the National Plan's cross-cutting principle to centre victim-survivors. We sincerely thank them for their participation and invaluable contribution in this process.

Development of the Disability Lens also drew on the extensive consultation undertaken with diverse stakeholder groups, service providers and advocates. These consultations listened to the diverse lived experiences of people from regional, rural and remote areas, First Nations communities, culturally diverse, refugee and migrant communities, LGBTIQ+ communities, including Brotherboys and Sistergirls, young people and older people.

Quotes included throughout this document are drawn from consultations with stakeholders and people with disability.

Case for change

Over 5.5 million people in Australia identify as people with disability, 51% are women and girls.¹ Disability is a complex, dynamic, multidimensional and evolving concept, shaped by a range of intersecting factors, including individual and social values, contexts, cultures, policy responses and histories. Understanding disability requires acknowledging not only these complexities but also the specific barriers faced by women and girls within this context.

Australian society continues to grapple with pervasive gender inequalities. This is particularly evident in the experiences of women and girls with disability who face compounded discrimination due to both gender and disability, which perpetuates inequalities and limits the effectiveness of policies intended to support them. The [UN CRPD](#), alongside the [Convention on the Elimination of All Forms of Discrimination Against Women](#) and the [Convention on the Rights of the Child](#), underscores the necessity of addressing the specific rights of women and girls, including the right to live free from violence, the right to health and education, and the right to participate fully in society. Despite these international frameworks, women and children with disability face:

- higher rates and specific forms of gender-based violence²
- more significant barriers to healthcare³
- lower income levels⁴
- disproportionate responsibilities for paid and unpaid care work⁵
- higher rates of technology-facilitated abuse⁶
- significant barriers in accessing adequate housing and services⁷
- under-representation in leadership and decision-making roles⁸

Women and children with disability often experience discrimination and exclusions from an early age, which can limit their access to education, health and future opportunities. These inequities drive systemic barriers and often intersect with other forms of disadvantage.

In Australia, the Disability Royal Commission found that women and children with disability experience violence at significantly higher rates, for longer durations, and from a wider range of people compared to those without disability.⁹ The Disability Royal Commission highlighted that gender-based violence against people with disability is often overlooked, normalised, or dismissed, particularly in institutional settings where restrictive practices and control over decision-making are common.

Women with disability face higher rates of family and sexual violence, removal of decision-making rights and autonomy, reproductive coercion and financial abuse. Children with disability are more likely to experience neglect, sexual abuse and violence in care settings, schools and out-of-home care. They face structural disadvantage, discrimination and gaps in safeguarding.

First Nations women and children with disability, and those from culturally diverse backgrounds and LGBTQIA+ communities – including Brotherboys and Sistergirls – experience intersecting forms of discrimination and structural inequality. This can create significant barriers to accessing safety, support and justice. First Nations women and children also experience underdiagnosis and misdiagnosis of disability due to racial profiling and a lack of access to culturally aware and responsive services.

The Disability Royal Commission found that support systems often fail to provide safe, accessible and inclusive pathways for women and children with disability to escape violence, with mainstream FDSV services frequently lacking the training or resources to respond effectively or provide accessible support. It called for urgent reforms to ensure disability-inclusive policies, person-centred support and coordinated systems that address the intersecting impacts of ableism and gender-based violence.



Policy context

Reducing the disproportionate rates and specific forms of violence against women and children with disability is an urgent and nationally recognised priority that all governments have committed to address. The Disability Lens describes the specific forms and higher risk of gender-based violence faced by women and children with disability, and the steps that we need to take to drive change. It is unapologetically a rights-based, intersectional, and trauma-informed document.

All levels of government are committed to upholding and protecting the rights of women and children with disability to be safe and free from all forms of violence including gender-based violence, racial violence and institutional violence, wherever they live. Different levels of government have different policy 'levers' available. It is therefore essential that governments work together and across the system to address these issues.

Role of the Australian Government

The Australian Government works in partnership with state and territory governments to lead national efforts to end family, domestic and sexual violence and advance gender equality. Together, governments set policy directions across key areas, including disability, and fund national support systems such as the National Disability Insurance Scheme (NDIS). Governments jointly fund and co-design the NDIS and its rules, ensuring they reflect shared priorities and responsibilities. This includes national rules and funding for disability housing. It also works to improve justice system responses for victim-survivors and coordinates cross-government initiatives like [Working for Women: A Strategy for Gender Equality](#) which sets the overarching framework for gender equality across government.

The Australian Government works to ensure compliance with disability discrimination laws, including the Disability Discrimination Act 1992, and is a signatory to the UN CRPD. The NDIS Quality and Safeguards Commission provides independent oversight to improve service quality and safety of NDIS services for participants.

The Australian Government is also working to improve the coordination, integration and delivery of early childhood policies, programs and

services across Government through the [Early Years Strategy 2024–2034](#). The Early Years Strategy provides a shared vision and overarching framework to deliver better outcomes for young children aged 0 to -5 years and their families, including children with disability and development delay.

The Australian Government Department of Health, Disability and Ageing (DHDA) is responsible for the Information, Linkages and Capacity building (ILC) program, working with the National Disability Insurance Agency (NDIA) to support alignment with NDIA's Local Area Coordinators. This work aims to ensure appropriate referrals to information and support services in the community are being made.

DSS, DHDA and the NDIA also work closely together to support First Nations people with disability, in line with shared responsibilities for the [cross-cutting disability outcome](#) under the National Agreement on Closing the Gap and the [Aboriginal and Torres Strait Islander Action Plan 2023–2025](#).

Role of state and territory governments

State and territory governments have primary responsibility for funding and delivering services to respond to FDSV, including justice, policing, housing, health and mental health services, and child protection. Mainstream services, those services that are not specialist FDSV services, also provide entry pathways to more direct specialist services for people experiencing violence.

State and territory governments have ongoing shared responsibilities in relation to the NDIS, including worker screening arrangements and authorisation of restrictive practices. State and territory governments may also regulate, fund or deliver disability supports outside of the NDIS. Some local councils also provide a range of disability services in their region.

Role of all governments

Together, all governments coordinate to deliver policy, funding and implementation for national strategies. This includes working together to support and deliver the work of key national organisations, including [Our Watch](#) and [Australia's National Research Organisation for Women's Safety](#) (ANROWS), and supporting behaviour change campaigns and addressing the specific interventions required for women and children with disability, which will continue to be a shared responsibility.

The Disability Lens exists within a broader ecosystem of disability and FDSV plans, strategies, and frameworks developed by state, territory, and Australian governments. Rather than duplicating existing efforts, the Disability Lens is designed to build on, complement and integrate these established documents, ensuring that disability-inclusive strategies are embedded in across all levels of policy and practice.

Australia wide

FDSV

- [National Plan to End Gender-Based Violence](#)
- [First Action Plan 2023–2027](#)
- [Aboriginal and Torres Strait Islander Action Plan 2023–2025](#)

Disability

- [Australia's Disability Strategy 2021–2031](#)
- [Inclusive Homes and Communities Targeted Action Plan 2025–2027](#)
- [Safety, Rights, and Justice Targeted Action Plan 2025–2027](#)
- [Community Attitudes Targeted Action Plan 2025–2027](#)

Western Australia

FDSV

- [Strengthening Responses to Family and Domestic Violence: System Reform Plan 2024–2029](#)
- [Aboriginal Family Safety Strategy 2022–2032](#)
- [Path to Safety: Western Australia's Strategy to Reduce Family and Domestic Violence 2020–2030](#)
- [Sexual Violence Prevention and Response Strategy 2025–2035](#)

Disability

- [Third Action Plan – A Western Australia for Everyone: State Disability Strategy 2020–2030](#)
- [WA State Disability Strategy 2020–2030](#)

Northern Territory

FDSV

- [NT Domestic, family and sexual violence reduction framework 2018–2028](#)
- [Domestic, family and sexual violence reduction framework 2018–2028 action plan 1](#)
- [Domestic, family and sexual violence reduction framework 2018–2028 action plan 2](#)
- [Monitoring, evaluation and accountability plan](#)
- [NT Gender Equality Action Plan 2022–2025](#)

Disability

- [NT Disability Strategy 2022–2032](#)
- [NT Disability Strategy Action Plan 2025–2029](#)

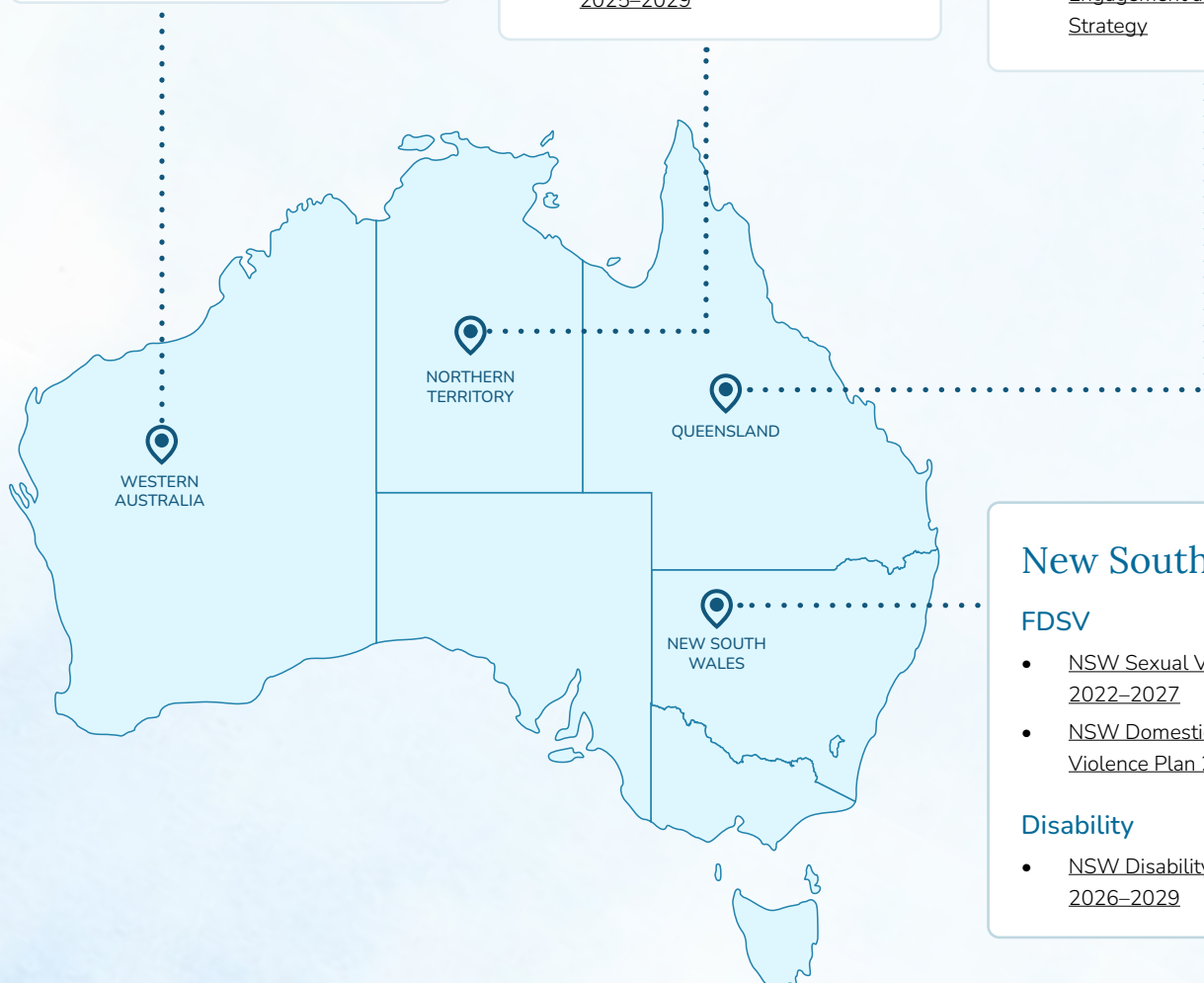
Queensland

FDSV

- [Safer Families, Safer Communities—A domestic and family violence reform strategy for Queensland](#)
- [Domestic and Family Violence Common Risk and Safety Framework](#)
- [Domestic and Family Violence Training and Change Management Framework](#)
- [QPS Sexual Violence Response Strategy 2025–2029](#)

Disability

- [Queensland's Disability Plan 2022–27](#)
- [Queensland Disability Stakeholder Engagement and Co-Design Strategy](#)



New South Wales

FDSV

- [NSW Sexual Violence Plan 2022–2027](#)
- [NSW Domestic and Family Violence Plan 2022–2027](#)

Disability

- [NSW Disability Inclusion Plan 2026–2029](#)



South Australia

FDSV

- [South Australia's Women's Equality Blueprint 2023–2026](#)

Disability

- [South Australian Disability Inclusion Plan 2025–2029](#)
- [South Australian Disability Access and Inclusion Plans](#)
- [SA Autism Strategy 2024–2029](#)
- [SA Autism Strategy Action Plan](#)

Australian Capital Territory

FDSV

- [ACT Domestic, Family and Sexual Violence Strategy](#)

Disability

- [ACT Disability Strategy and First Action Plan](#)
- [ACT Disability Justice Strategy](#)

Victoria

FDSV

- [Free from violence: Victoria's strategy to prevent family violence](#)
- [Free from Violence – Second Action Plan 2022–2025](#)
- [Ending family violence - Victoria's 10-year plan for change](#)
- [Everybody Matters: Inclusion and Equity Statement](#)
- [Family Violence Multi-Agency Risk Assessment and Management Framework](#)
- [Family Violence Information Sharing Scheme](#)
- [Child Information Sharing Scheme](#)
- [Our equal state: Victoria's gender equality strategy and action plan 2023–27](#)

Disability

- [Victorian Autism Plan](#)
- [Inclusive Victoria: state disability plan \(2022–2026\)](#)
- [Department of Justice and Community Safety Victoria Accessibility in Action: Disability Action Plan 2022–2026](#)
- [Victoria Families Fairness and Housing | Disability action plan 2026–2029](#)

Tasmania

FDSV

- [Tasmania's Third Family and Sexual Violence Action Plan 2022–2027: Survivors at the Centre](#)

Disability

- [TAS Disability Health Strategy](#)
- [TAS Disability Action Plan](#)

Australia's Disability Strategy and the National Plan

The National Plan and associated documents, including the Disability Lens, are intrinsically linked to Australia's Disability Strategy 2021–2031 (the Strategy).

The Strategy is Australia's national disability policy framework agreed to by all levels of government. Using a social model of disability, it enables people with disability to fulfil their potential as equal members of their communities.

The Strategy includes 7 Outcome Areas, each with supporting Policy Priorities. All Outcome Areas are relevant to preventing and responding to violence, but the strongest alignment with the Disability Lens is in the areas of safety, rights and justice, and inclusive homes and communities, which are both currently supported by Targeted Action Plans (TAPs) committing governments to specific actions over the period 2025–2027. Both the Strategy and the Disability Lens are informed by findings from the Disability Royal Commission and share a commitment to ending violence against people with disability.

All levels of government have committed to the Strategy. In addition, state and territory governments have separate but interconnected plans to address the needs of their communities, while aligning with national frameworks like the Strategy and the National Plan. These plans respond to regional service landscapes, population demographics and specific Policy Priorities, ensuring that support systems are locally relevant and accessible.



Systems reform – addressing structural barriers to achieving change

Violence against women and children with disability is a complex and systemic issue. Many of the drivers of violence against women and children with disability are deeply interconnected, and focusing on one aspect without considering the broader system can have unintended consequences. For example, when a woman with disability leaves an unsafe situation without access to appropriate and accessible supports, she may face increased risks – including harm, homelessness and institutionalisation. Safety planning should centre her needs, choices and the availability of sustainable, inclusive options.

A systems reform approach recognises that all aspects of society – housing, healthcare, education, policing, legal systems, social services and disability support – play a role in either perpetuating or preventing violence. The Disability Royal Commission highlighted that many forms of violence experienced by people with disability are enabled by systemic ableism, including segregation,¹⁰ limitations on decision-making¹¹ and normalisation of restrictive practices in institutional settings.¹² All systems have a part to play in preventing the misuse of services, and the Australian Government is currently undertaking an [audit of how government systems](#) may be weaponised to perpetrate violence, including through disability supports.

Governments have committed to strengthening the safety and wellbeing of people with disability through policy reforms that address these systemic drivers. The Disability Lens will ensure the safety and wellbeing of women and children with disability is addressed by the National Plan and drives coordinated, cross-sectoral action.

The table below presents a summary of how existing actions under the First Action Plan may be interpreted and strengthened through a disability lens. It does not introduce new actions or obligations. Instead, it offers suggested best practice approaches that reflect inclusive, trauma-informed, and rights-based principles already embedded in national frameworks. The language used is intentionally strengths-based and non-prescriptive, recognising the diversity of jurisdictions, service contexts, and lived experiences. This framing supports flexible implementation while encouraging consistent, equitable outcomes for women and girls with disability.

Summary of Disability Lens on the First Action Plan

Action	Summary from First Action Plan 2023–2027	Disability lens in practice
1	Advance gender equality and address the drivers of all forms of gender-based violence, including through initiatives aimed to improve community attitudes and norms toward family, domestic and sexual violence.	1.1 Integrate disability at the foundation. 1.2 Recognise and respond to the drivers and forms of violence experienced by women and children with disability. 1.3 Listen to and amplify the perspectives of women and children with disability.
2	Improve the national evidence base by working towards consistent terminology and monitoring and evaluation frameworks, and by strengthening collection and sharing of data and evidence.	2.1 Improve data representation of people with a disability. 2.2 Strengthen our understanding of disability and FDSV through data integration. 2.3 Disaggregate data to promote intersectional understanding. 2.4 Make data collection more inclusive.
3	Increase and strengthen the capability of mainstream and specialist workforces to deliver quality services, activities and programs across the domains, including those that are tailored to respond to the unique experiences of all victim-survivors.	3.1 Improve service accessibility of FDSV services. 3.2 Strengthen workforce capability and training. 3.3 Share knowledge across sectors.

Action	Summary from First Action Plan 2023–2027	Disability lens in practice
4	Build the capacity of services and systems that support victim-survivors to provide trauma-informed, connected and coordinated responses that support long-term recovery, health and wellbeing.	4.1 Promote system-wide integration and referrals. 4.2 Address workforce capability across FDSV and disability sectors. 4.3 Provide specialised support for women and children with disability experiencing FDSV.
5	Strengthen systems and services to better hold people who choose to use violence to account and provide opportunities to support people who have used violence, or are at risk of using violence, to change their behaviours, with the aim of protecting the safety and wellbeing of current and potential victim-survivors.	5.1 Strengthen the accessibility of reporting pathways. 5.2 Drive early intervention initiatives with a disability-informed approach.
6	Improve action to prevent and address sexual violence and harassment in all settings, across the 4 domains of the National Plan.	6.1 Provide accessible and inclusive resources on legal rights, sexual consent and respectful relationships. 6.2 Advance inclusive practice to uphold the sexual consent and rights of women and young people with disability.
7	Work in formal partnership with Aboriginal and Torres Strait Islander peoples to ensure policies and services are culturally competent, strengths-based and trauma informed, and meet the needs of Aboriginal and Torres Strait Islander peoples and communities, aligning with the goals of the Aboriginal and Torres Strait Islander Action Plan.	7.1 Our work is informed by the priority reforms of the National Agreement on Closing the Gap. 7.2 Work in genuine partnership with First Nations communities. 7.3 Build capability in cultural competency and disability inclusion. 7.4 Promote community-driven, strengths-based, localised approaches to preventing violence.

Action	Summary from First Action Plan 2023–2027	Disability lens in practice
8	Develop and implement age appropriate, culturally safe programs across all 4 domains, informed by children and young people, that support recovery and healing from trauma, and intervene early to address violence supportive behaviours.	8.1 Provide inclusive education on relationships and consent. 8.2 Improve capacity of organisations and professionals to identify and respond to violence. 8.3 Holistic support for children and young people experiencing FDSV. 8.4 Address harmful behaviours with compassion and understanding.
9	Improve police responses and the justice system to better support victim-survivors through the provision of trauma-informed, culturally safe supports that promote safety and wellbeing, and hold people who choose to use violence to account.	9.1 Improve disability competency in the police and justice systems. 9.2 Expand access by funding advocacy and supported decision making in the legal and justice systems.
10	Improve access to short-, medium- and long-term housing for women and children experiencing violence, including those living in institutional settings, and support women to stay in their own homes when they choose to do so.	10.1 Enhance safety and accessibility of housing options. 10.2 Improve conditions in group housing with a focus on individual needs.

ACTION 1

Drivers of violence

Action 1 in the First Action Plan 2023–2027

Advance gender equality and address the drivers of all forms of gender-based violence, including through initiatives aimed to improve community attitudes and norms toward family, domestic and sexual violence.

A disability lens on Action 1

Advance gender equality and address the drivers of all forms of gender-based violence by recognising and removing barriers faced by people with disability, including systematic and individual prejudice and discrimination (ableism). Promote initiatives that improve community attitudes and norms toward disability and family, domestic and sexual violence.



Disability perspectives on Action 1

Disability is a part of life and the experience of being human. Developed by people with disability, the social model of disability¹³ shifts the focus away from a person's impairments and instead highlights the barriers built into society. Governments and organisations are adopting the social model of disability because it underpins a human rights-based approach.¹⁴ By recognising that disability is caused by exclusionary practices and a lack of accessibility, we can create policies and laws aimed at removing these obstacles.

A key driver of violence against women and children with disability is discrimination and prejudice of people with disability,¹⁵ often called ableism. Ableism is pervasive, subtle and deeply entrenched in attitudes, systems and policies. It leads to practices that limit the independence, decision-making, dignity and safety of people with disability. [Our Watch and Women with Disabilities Victoria's Changing the Landscape: A national resource to prevent violence against women and girls with disabilities](#) provides a comprehensive, evidence-based framework for policymakers to understand and respond to intersecting drivers of violence.

Women and children with disability face specific types of gender-based violence.¹⁶ This includes abuse in care settings and relationships, restrictive practices, reproductive coercion, and financial abuse and exploitation. Sometimes, this violence happens under the cover of 'care', which makes it harder to recognise. It is important to include these cases when defining violence.

Cultural views on disability vary. In many First Nations communities, disability is seen in a cultural context that values inclusion and community over a medical approach.¹⁷ People in these communities often do not use the term 'disability' because they see differences as a natural part of being human.

Action 1 in practice for women and children with disability

1.1 Integrate disability at the foundation.

We proactively incorporate a social and human rights model of disability into every policy, plan and action. We do this to remove systemic barriers which increase violence against women and children with disability – including ableism, segregation and discrimination.



Example in practice

[National Autism Strategy First Action Plan](#), Australian Government

In January 2025, the Australian Government released the National Autism Strategy and the First Action Plan. The National Autism Strategy is the first of its kind for Australia and sets out a long-term vision to improve the life outcomes of all Autistic people. It details 22 high-level commitments to drive inclusion, better supports and greater representation of Autistic people in Australia across the outcomes of: social and economic inclusion; diagnosis, services and supports; governance; research; and evidence and evaluation.

Example in practice

[Guide to Applying Australia's Disability Strategy 2021–2031](#), Australian Government

Australia's Disability Strategy outlines a national vision for an inclusive society where people with disability can participate as equal members of the community. The Guide to Applying Australia's Disability Strategy supports this by providing practical guidance to government, businesses and community organisations on embedding inclusion in policies, services, systems and workplaces. Centred on the Strategy's Guiding Principles, the Guide prompts reflection and action to remove barriers and improve outcomes for people with disability.

Example in practice

[Good Practice Guidelines for Engaging with People with Disability](#), Australian Government

The Good Practice Guidelines for Engaging with People with Disability were developed under the Strategy to support inclusive engagement across government, business and community sectors. Co-designed with people with disability, the guidelines provide practical advice for designing, planning and delivering accessible consultations and decision-making processes. They emphasise respect, shared responsibility, flexibility, safety and follow-up, aiming to remove participation barriers and improve outcomes for people with disability.

1.2 Recognise and respond to the drivers and forms of violence experienced by women and children with disability.

We recognise the specific forms of violence experienced by women and children with disability. We create resources for government, workforces and the broader community to recognise these types of violence and provide pathways for accountability.

Example in practice

[Changing the landscape: A national resource to prevent violence against women and girls with disabilities](#), Our Watch in partnership with Women with Disabilities Victoria

Changing the landscape: A national resource to prevent violence against women and girls with disabilities is a national, evidence-based resource to guide the prevention of violence against women and girls with disability. Complementing the Our Watch resource *Change the story*, this resource offers guidance to support evidence-informed, intersectional and respectful approaches to policy and practice that aim to prevent violence against women and girls with disability, across jurisdictions and sectors. Included within are a suite of accessible video, audio and static practitioner resources to support those working across settings, as well as in the general community to be more gender and disability inclusive and prevent violence. These co-designed resources show diverse approaches to prevention across settings while centring lived experience and challenging stigma.

To create real impact, people with lived experience must be involved in the design process. “Nothing about us without us” isn’t just a saying, it’s the foundation for meaningful, inclusive solution.

- Government official

1.3 Listen to and amplify the perspectives of women and children with disability.

We listen to First Nations communities to centre the perspectives of First Nations people with disability. We recognise that understandings of disability are shaped by culture, Country and community, and that these vary across Australia. We are guided by the voices of First Nations people to ensure our work reflects their strengths, priorities and ways of knowing.

We also listen to culturally diverse communities to centre the perspectives of people with disability from migrant, refugee and multicultural backgrounds. We engage in ways that are culturally appropriate, inclusive and accessible for everyone, including people with intellectual disability, undiagnosed disability, and people with acquired brain injury.

Through public campaigns, we amplify the perspectives of people with disability and work to dismantle harmful and limiting community attitudes about disability.

Example in practice

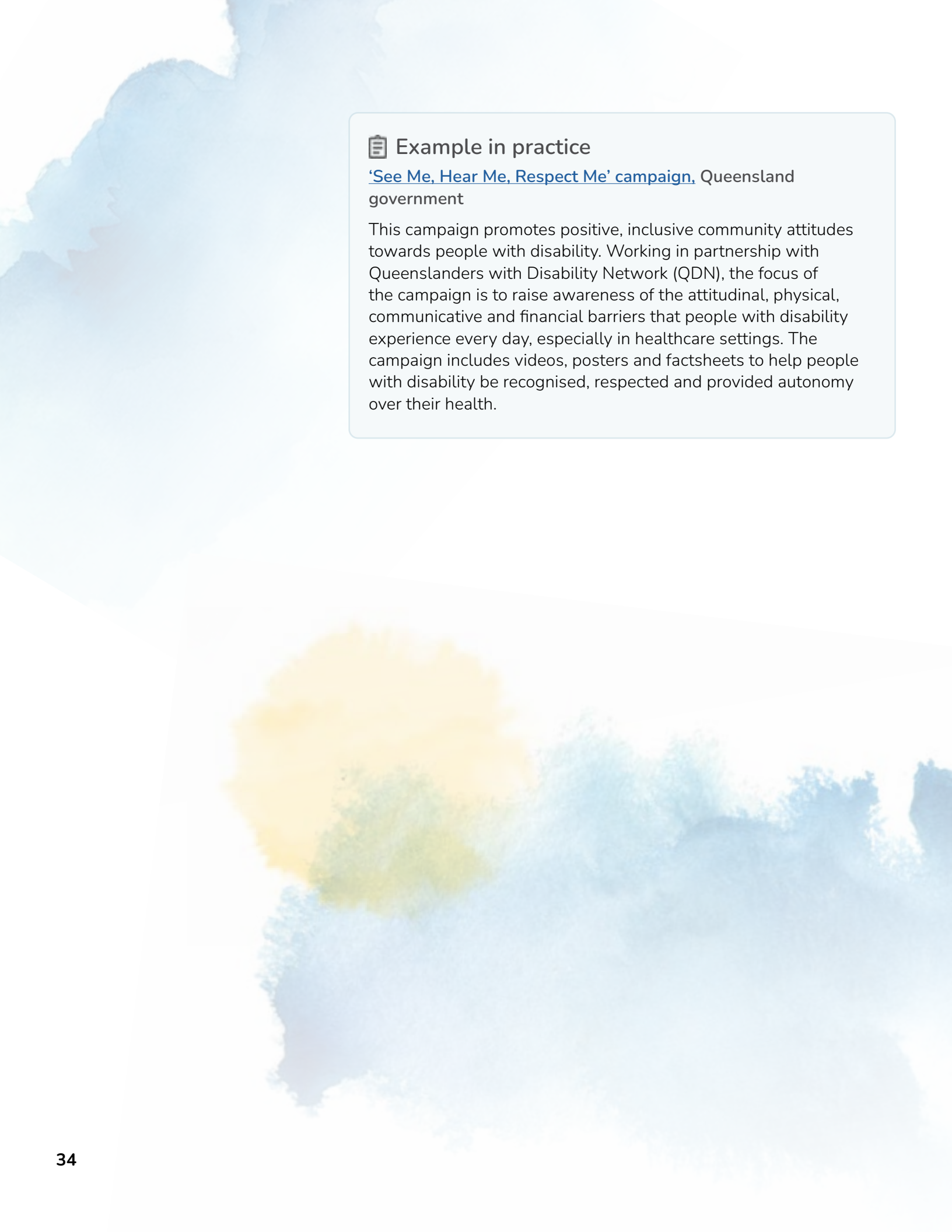
[Wangkiny Yirra 'Speaking Up' Project](#), Disability Royal Commission

The Wangkiny Yirra 'Speaking Up' Project, led by First Nations researchers and commissioned by the Disability Royal Commission, explored the experiences of family and domestic violence among First Nations women and children with disability. The project identified systemic barriers, including fear of child removal, lack of culturally safe supports, and under recognition of disability. It made 39 recommendations for reform across child protection, disability, justice and service systems. The findings offer valuable insights that can support the development of culturally secure responses, including future proposals for a First Nations Disability Forum and culturally appropriate disability standards in the FDSV sector.

Example in practice

[NEVE](#), Women with Disabilities Australia

NEVE is a National Education Toolkit for Women and Girls with Disability. NEVE is a safe, accessible online space, created by and for women, girls, feminine identifying and non-binary people with disability. NEVE helps women and girls explore their experiences of safety, wellbeing, bodies, relationships and justice. All content exists in both Easy Read and Plain English.



Example in practice

[‘See Me, Hear Me, Respect Me’ campaign](#), Queensland government

This campaign promotes positive, inclusive community attitudes towards people with disability. Working in partnership with Queenslanders with Disability Network (QDN), the focus of the campaign is to raise awareness of the attitudinal, physical, communicative and financial barriers that people with disability experience every day, especially in healthcare settings. The campaign includes videos, posters and factsheets to help people with disability be recognised, respected and provided autonomy over their health.

ACTION 2

National evidence base

Action 2 in the First Action Plan 2023–2027

Improve the national evidence base by working towards consistent terminology and monitoring and evaluation frameworks, and by strengthening collection and sharing of data and evidence.

A disability lens on Action 2

Improve the national evidence base by working towards consistent inclusive terminology monitoring and evaluation frameworks, and by strengthening accessible and inclusive collection and sharing of data and evidence and disaggregated data across sectors to inform targeted policies, resource allocation, and service responses.



Disability perspectives on Action 2

As the community's notion of disability has moved away from a medical model to the social and human rights models, the definitions and terminology used to describe disability need to evolve.^{18 19}

The Disability Royal Commission documented the ongoing issues of inconsistent definitions and fragmented and dispersed data that is not collated or integrated across settings and life area domains.²⁰

This results in an incomplete picture of disability across Australia, including the experience of gender-based violence by women and children with disability. It is difficult to make evaluations on the effectiveness of new strategies and programs to end violence, and to allocate funding to where it is needed.

Collecting data on violence and disability can be triggering.²¹ It is important that data be gathered in ways that prioritise the safety and wellbeing of people with disability, which means that the questions, tone, setting and delivery are important considerations. Data collection methods should be inclusive, enabling women and children with intellectual disability, as well as those in segregated settings, to represent themselves where possible.²² Approaches must incorporate culturally responsive and linguistically appropriate techniques to accurately identify and categorise the experiences of Culturally and Linguistically Diverse (CALD) and Culturally and Racially Marginalised (CARM) women and children.

The right to privacy and choice must be central to all methods of data collection and sharing. Many women choose not to disclose their disability for fear that this information might be weaponised – for example, in child removal cases.²³ How data is used, shared and stored must be communicated clearly and accessibly.

If we're not being counted in ways that reflect our reality, then the data is just another way of silencing us.

- First Nations woman with lived experience

Action 2 in practice for women and children with disability

2.1 Improve data representation of people with a disability.

We examine definitions of disability used in surveys and collections so that all women and children with disability are accurately represented. We use a social and human rights model of disability when describing and capturing data on disability. This includes improving data and evidence on practices that disproportionately affect women and children with disability, such as restrictive practices, child removal and substitute decision-making arrangements

“ We’re lumped together as ‘CALD’, but our experiences are completely different. If you don’t ask the right questions, you won’t get the right answers.

- Woman with lived experience who identifies as from a culturally and racially marginalised background

Example in practice

Expanding the NCAS to include disability, ANROWS

In 2021, the National Community Attitudes towards Violence against Women Survey (NCAS) was revised and expanded to include new disaggregated items including questions on disability. These changes brought the measurement of disability in the NCAS in line with the Australian Bureau of Statistics’ (ABS) Personal Safety Survey; the ABS’s Disability, Ageing and Carers Survey; and the Census. NCAS collects data from over 19,000 Australians and occurs every 4 years and is the world’s longest-running population-level survey of community attitudes towards violence against women.

2.2 Strengthen our understanding of disability and FDSV through data integration.

Where possible, we link datasets across multiple collection methods to build a holistic picture of disability and family and domestic violence. This requires careful coordination across governments to align data standards and ensure consistent, ethical use of information. This approach will provide a more accurate understanding of need without requiring major changes to frontline reporting.

“States and territories want to learn from each other and build on existing work, rather than starting from scratch. We have a vision to work together to build a national knowledge base and connected data.”

- Government official

Example in practice

[NSW Justice Test Case of the National Disability Data Asset \(NDDA\) pilot](#), NSW Bureau of Crime Statistics and Research (BOCSAR)

Recognising that there is an overrepresentation of people with disability in the criminal justice system is vital to understanding the overlap between disability, ableism and FDSV. Led by BOCSAR and DSS, the NSW Justice Test Case used state and Commonwealth data to identify 2.8 million people who received a core disability support and/or who had recent contact with the NSW Justice system. The Pilot found that people with disability are over-represented in the criminal justice system and more than twice as likely to experience violent and domestic violence-related crimes, relative to the total NSW population.

2.3 Disaggregate data to promote intersectional understanding

We use data disaggregation – breaking down data into specific population groups – to better understand how different experiences and identities intersect.

Where possible, we will disaggregate data by Indigenous status to the lowest practical level to support more accurate, community-led service planning and delivery by the Aboriginal Community Controlled Organisation sector. We also respect Indigenous Data Sovereignty²⁴ by recognising the rights of First Nations peoples to control how data about their communities is collected, accessed, used and interpreted. In all cases, we ensure that data disaggregation practices protect individual privacy.

2.4 Make data collection more inclusive.

We make efforts in data collection to reach people with undiagnosed disability, intellectual disability, psychosocial disability and disability acquired through brain injury.

We ensure that data collection methods acknowledge and record the specific barriers faced by CALD and CARM women and children, including specific language needs. This will allow us to design targeted services and deliver accessible resources to those who need them most.

“Everyone has unique circumstances and communication needs. By making data collection more inclusive, accessible and consistent, we can better capture people’s experiences, provide a clearer picture of intersectionality and shape how services are developed and programs are funded.”

- Disability Representative Organisation

Example in practice

[Disability Data at Work](#), Diversity Council Australia and Australian Disability Network

Diversity Council Australia and Australian Disability Network have partnered to produce the research report Disability Data at Work: How organisations can capture disability data safely and respectfully. The report features research-based guidelines to assist organisations in creating environments where people with disability feel safe to share their disability status. The research includes a state-of-play of employment of people with disability, a strong case for change to create disability-inclusive workplaces, and a lock-and-key approach to creating safe and inclusive environments for employees to share their disability status.

ACTION 3

Workforce capability

Action 3 in the First Action Plan 2023–2027

Increase and strengthen the capability of mainstream and specialist workforces to deliver quality services, activities and programs across the four domains, including those that are tailored to respond to the unique experiences of all victim-survivors.

A disability lens on Action 3

Increase and enhance the capability of mainstream and specialist workforces to deliver inclusive, quality services, activities, and programs across the four domains, including those that are tailored and accessible to the unique needs and experiences of victim-survivors.



Disability perspectives on Action 3

When women and children with disability seek support for FDSV, it is hard to find services that are accessible.²⁵ Accessibility means that every element of support is designed to meet the diverse needs of people with disability in their homes, their workplaces and public spaces.

- Physical accessibility includes features like ramps, automatic doors, and accessible bathrooms so that more people can access spaces with dignity and autonomy.²⁶
- Information accessibility means providing multiple formats, such as braille, large print, audio, AUSLAN, social scripts and Easy Read versions as well as translations where possible, so that more people can understand the information.²⁷
- Channel accessibility means offering a range of culturally appropriate ways to get in touch, such as telephone helplines with relay services, online chat platforms, text, and in-person support, so that people with sensory or communication differences can reach out in the way that suits them best.²⁸
- Attitudinal accessibility means addressing unconscious bias, ableism, and misconceptions about disability, so that people are treated with respect and not excluded due to assumptions or lack of awareness.

When people have experienced violence and then have a brain injury, systems may be difficult to navigate and require a high level of executive functioning. User friendly and trauma-informed service design empowers individuals to engage with the help they need.

- FDSV Organisation

Violence against women and children with disability can occur in every setting – at home, in supported accommodation, in institutions, and in group living arrangements.²⁹ It is a choice made by a range of individuals, including family members, intimate partners, carers, service providers, and co-habitants. At times, violence can be perpetrated by those with caring responsibilities; for example, people who use violence might withhold essential medications, restrict access to assistive devices, or misuse funds that are meant for care, all to control and isolate the person. It is important that there is widespread recognition and understanding of these types of violence, so that professionals and support workers can better identify, prevent, and respond to such practices and support the recovery of people who have experienced violence.

Women and children with disability come from every part of our community and have intersecting identities.³⁰ Staff training needs to go beyond gender equality and disability to explore how disability, gender, sexuality, race, and cultural and economic background interact, ensuring they can recognise and respond to the compounded barriers faced by women and children with multiple, intersecting identities. This is especially important in areas where there are workforce shortages and limited services, such as regional, rural and remote areas. An intersectional understanding means that services can be more flexible; resources can be pooled across sectors; and people are treated holistically.

Action 3 in practice for women and children with disability

3.1 Improve service accessibility of FDSV services.

We are committed to making family and domestic violence services welcoming and fully accessible to all those seeking help. This means services not only address physical barriers – such as ensuring safe houses can accommodate wheelchair users – but also improving the way information is provided so that it is easy to understand in multiple formats.

Example in practice

[Building Access project](#), People with Disability Australia

People with Disability Australia created the Building Access project to bridge gaps within FDSV workforces. The program aims to improve accessibility of frontline workers in FDSV areas and remove attitudinal barriers faced by people with disability when accessing FDSV services. The training program is delivered by women with disability who also have lived experience of FDSV. Resources were created specifically to upskill knowledge within frontline workers, such as a handbook and video on supporting people with intellectual disability who have experienced FDSV, information on how to create an Inclusion Action Plan within frontline services, and a guide for policy and practice for women with disability experiencing FDSV. The Building Access End of Project report found that inclusive policies and practices produced better outcomes for women with disability who have experienced FDSV.



Example in practice

Modified Service Delivery Pilot, Patricia Giles Centre for Non-Violence with WA Government

Delivered by the Patricia Giles Centre for Non-Violence and funded by the WA Department of Communities, the pilot focuses on intersectional service provision for specialist family and domestic violence services to support women with an intellectual and/or cognitive disability, and their children. Pat Giles collaborates with both the family and domestic violence and disability sectors to increase safety outcomes for women with disability experiencing or at risk of family and domestic violence, address the key issues and barriers to providing specialist supports, and enhance service capacity across Western Australia. The pilot prioritises training and awareness raising across both sectors as a foundational approach to building workforce capacity so that there can be more joined up responses available to women with disability experiencing family and domestic violence in future.

Example in practice

Sexual Assault Services and New Street Services Access Strategy for People with Disability 2021–2025 Accessible Resources, NSW Government

NSW Health continues to implement its Sexual Assault Services and New Street Services Access Strategy for People with Disability 2021–2025. The NSW Health strategy aims to improve access for people with disability by building workforce capacity to support improved accessibility and appropriate clinical practice in NSW Health Sexual Assault Services and New Street Services. The NSW Health Education Centre Against Violence (ECAV) has co-developed resources to support Sexual Assault Service practitioners to work competently with people with intellectual disability. These disability resources promote best practice and are available on ECAV's website.

3.2 Strengthen workforce capability and training.

We build a strong, knowledgeable workforce by investing in ongoing training and resources to better understand disability. Training programs help staff learn about the specific needs and rights of women and children with disability and the intersection of various factors such as gender, age, race, sexuality, and economic and cultural background. These programs will support culturally safe, inclusive practice that recognises the diverse identities and experiences of the people accessing services.

“The first people to notice something’s not right or who are more likely to be confided in are those someone may see regularly, like their hairdresser, bus driver, or a supermarket worker. It’s not just up to the professionals. Everyone in the community can play a role in recognising subtle cues and providing early support.”

- Government official

Example in practice

DV-alert, Lifeline and Australian Government

DV-alert is a nationally recognised training program with training and assessment delivered by Lifeline Australia and approved third parties on behalf of Lifeline Australia. Led by experienced trainers committed to ending violence against women and children, the program includes a free workshop designed to help frontline workers recognise and respond effectively to domestic and family violence experienced by women with disability. Participants who complete the training can work towards a nationally recognised Statement of Attainment.

Example in practice

Preventing Violence Against Migrant and Refugee Women and Gender Diverse People with Disabilities, Women with Disability Victoria

Preventing Violence Against Migrant and Refugee Women and Gender Diverse People with Disabilities is a collection of resources produced by WDV in partnership with the Multicultural Centre for Women’s Health in 2024 and 2025. The resources, which include a background paper, an animation, a factsheet and an online micro-webinar, aim to build and deepen understandings of the intersection of race, gender, and disability. The resources support actions to promote gender and disability equality for migrant and refugee women and gender diverse people with disability.

3.3 Share knowledge across sectors.

We foster cross-sector collaboration by building competency in disability and family and domestic violence support among professionals in health, education, child protection, Aboriginal Community-Controlled Organisations, and other sectors. This integrated approach ensures that individuals receive comprehensive, informed assistance across all services.

Example in practice

[Abuse and violence: working with our patients in general practice, 5th edition \(the White Book\)](#), Royal Australian College of General Practitioners (RAGCP) and Australian Government

The White Book was developed by GPs and subject matter experts to strengthen general practice responses to FDSV. It provides practical guidance on trauma-informed care, dating violence, intimate partner abuse, and LGBTQIA+ family violence. It also includes a dedicated chapter on violence and abuse experienced by people with disability, recognising heightened rates of violence and the importance of tailored, accessible care. The White Book supports cross-sector knowledge sharing by helping GPs identify risk, understand complexity and respond to abuse, including for people with disability.

Example in practice

[Modified Service Delivery Pilot: FDV & Disability Training Workshops](#) Patricia Giles Centre for Non-Violence

The Patricia Giles Centre for Non-violence offers free domestic and family violence workshops for workers in the disability sector, to boost the capacity of the disability sector to support people with disability experiencing violence. Each three-hour workshop aimed to increase confidence and skills in supporting women and children with disability who experience family and domestic violence and have a greater understanding of how family and domestic violence intersects with disability and the ways in which people with disability experience violence. The workshop also covers how to respond to disclosures of violence and support people towards a safety plan.

In addition, the team also offer free Disability & FDV workshops for the FDV sector, focussed on understanding disability, accessibility and how to effectively support victim-survivors with disability experiencing violence.

 Example in practice**Assessment and Referral Team, Queensland Government**

The Assessment and Referral Team (ART) supports disadvantaged cohorts and individuals with disability to access the National Disability Insurance Scheme (NDIS). By ensuring equitable access to the NDIS, ART helps address systemic barriers that often prevent people with disabilities from receiving tailored and essential supports, thereby contributing to their overall safety, independence and wellbeing. Between July 2022 and December 2024, ART directly supported over 300 women and children experiencing or at risk of family domestic violence to access the NDIS. This support included clinical services such as diagnostic assessments and support to successfully navigate the application process. Having an NDIS plan provides women and children at risk of family domestic violence with access to essential supports, such as safe housing modifications, therapeutic services, assistive technology, and personal care, which can empower them to rebuild their lives, enhance their safety, and increase their independence.

ACTION 4

Capacity of services and systems

Action 4 in the First Action Plan 2023–2027

Build the capacity of services and systems that support victim-survivors to provide trauma-informed, connected and coordinated responses that support long-term recovery, health and wellbeing.

A disability lens on Action 4

Build the capacity of services and systems that support victim-survivors to provide trauma-informed, accessible, rights-based, connected and coordinated responses that support ongoing recovery, health and wellbeing.



Disability perspectives on Action 4

Women and children with disability often experience a disconnected and uncoordinated response to violence from disability services, FDSV services, and other critical sectors such as mental health, housing, aged care and child protection.³¹ Many women and children with disability describe themselves as isolated, unsupported, and trapped in unsafe situations. Without shared understanding and coordinated supports, structural ableism can lead to serious consequences, such as the over-removal of children from parents with disability. These outcomes often reflect disconnected services and a lack of joined-up support, rather than the needs or capabilities of the families themselves.

This fragmentation is partly due to the historical separation of service systems.³² Disability and family violence services have traditionally operated in silos, with little overlap in funding, training, or policy development. As a result, staff across these different areas may not be aware of each other's resources or best practices, making it difficult to build an integrated response. When a woman or child discloses violence, they might have to repeatedly explain their situation to different people, or worse, find that the support they need is not available or accessible to them.

Recovery looks different when you're navigating violence, disability and immigration stress. Services need to stop treating people like checklists.

- Disability advocate

Economic and financial abuse can severely limit recovery for women and children with disability, particularly if they rely on others for income management, access to technology, support or decision-making. Services need the capability to identify gendered and disability-specific forms of economic and financial abuse and provide coordinated, accessible pathways to safety, financial security and long-term recovery.

Integrated service models are a high priority for women and children with disability.^{33 34} When services share information and coordinate referrals, vital clues about a person's level of risk and needs can be identified, recorded and responded to. This is particularly important when a person requires a rapid response or has complex needs. It can help to create a safety net that ensures early intervention and continuous support.

Many people do not identify as having a disability or may not have a formal diagnosis. This can be due to cultural differences, fear of stigma, discrimination, or limited access to health care and support. Women and children are often underdiagnosed and inadequately treated for brain injury,³⁵ which can cause disability. Some brain injuries are the result of FDSV. Disability services that are kept separate from the mainstream and require diagnosis to access can lock people out of support. When services are inclusive by default, all people benefit regardless of their diagnosis or identity.

For older women with disability, support can be especially limited. Many are not eligible for the NDIS, and aged care services may not recognise or respond to disability-related needs. This can leave older women without access to coordinated, safe and appropriate care, particularly when navigating violence, housing or health systems.

Action 4 in practice for women and children with disability

4.1 Promote system-wide integration and referrals.

We establish robust, clear referral pathways between disability services and family and domestic violence support systems, so that no one is left without options in times of crisis. We shift away from isolated support models by embedding disability-informed practices across all mainstream services, ensuring that support is accessible regardless of diagnosis.

Example in practice

[Multi-Agency Risk Assessment and Management](#), Victorian Government

The Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM) ensures services are effectively identifying, assessing and managing family violence risk. Organisations that are authorised through regulations, as well as organisations providing funded services relevant to family violence risk assessment and management, must align their policies, procedures, practice guidance and tools to the MARAM Framework. This will enable organisations to recognise a wide range of risk indicators for children, older people and diverse communities, across identities, family and relationship types, as well as keep people.

Example in practice

[Applying a disability lens to MARAM](#), Eastern Metropolitan Regional Family Violence Partnership

The Disability Inclusion and Safety Resource Hub has been developed for organisations and practitioners who are working with people with disability who are experiencing or using family violence. These tools provide detailed disability and NDIS focused prompts to complement the MARAM victim-survivor focused comprehensive risk assessment, Safety Planning and Risk Management tools. The additional questions/prompts are designed to elicit further detail about family violence risk and safety when practitioners are conducting their usual risk assessments in line with the MARAM framework.

4.2 Address workforce capability across FDSV and disability sectors.

We work to change public perceptions of working in disability and FDSV sectors to highlight the flexible career options and rewarding work. We partner with the sectors to train, and increase the number of, support workers by facilitating new service models and innovation, and provide market information about business opportunities in the care and support sector. This includes recognising and supporting the leadership of people with disability within the workforce, not just as participants in services but as experts, decision-makers and peers.

Example in practice

[Gender-based undervaluation – priority awards review](#), Fair Work Commission

The Fair Work Commission's gender undervaluation review found that disability support roles under the Social, Community, Home Care and Disability Services Industry Award 2010 had been historically undervalued due to gender-based assumptions. The review recognised that this work, largely performed by women, had not been properly valued, resulting in lower wages across the sector. The Commission's decision to raise minimum pay rates for affected roles aims to improve equity, support workforce retention and acknowledge the essential contribution of disability support workers.

“ People shouldn’t have to struggle to find the right support – services need to meet them where they are.

- Disability Representative Organisation ”

Example in practice

[What’s my future? campaign](#), National Workforce Collaboration

The National Workforce Collaboration is a group of people living with disability, support workers, disability support providers, union representatives and advocates working together to co-design a campaign to grow a skilled disability workforce. The ‘What’s my future?’ campaign aims to change the narrative and societal attitudes towards people with disability and therefore change the value with which society views disability support work. The goal is to attract and retain disability support workers and enable people with disability to lead fulfilling lives. Designed to promote support work as a viable career option, this public facing campaign also closely aligns with several Outcome Areas of Australia’s Disability Strategy 2021–2031, Community Attitudes and Personal and Community Support.

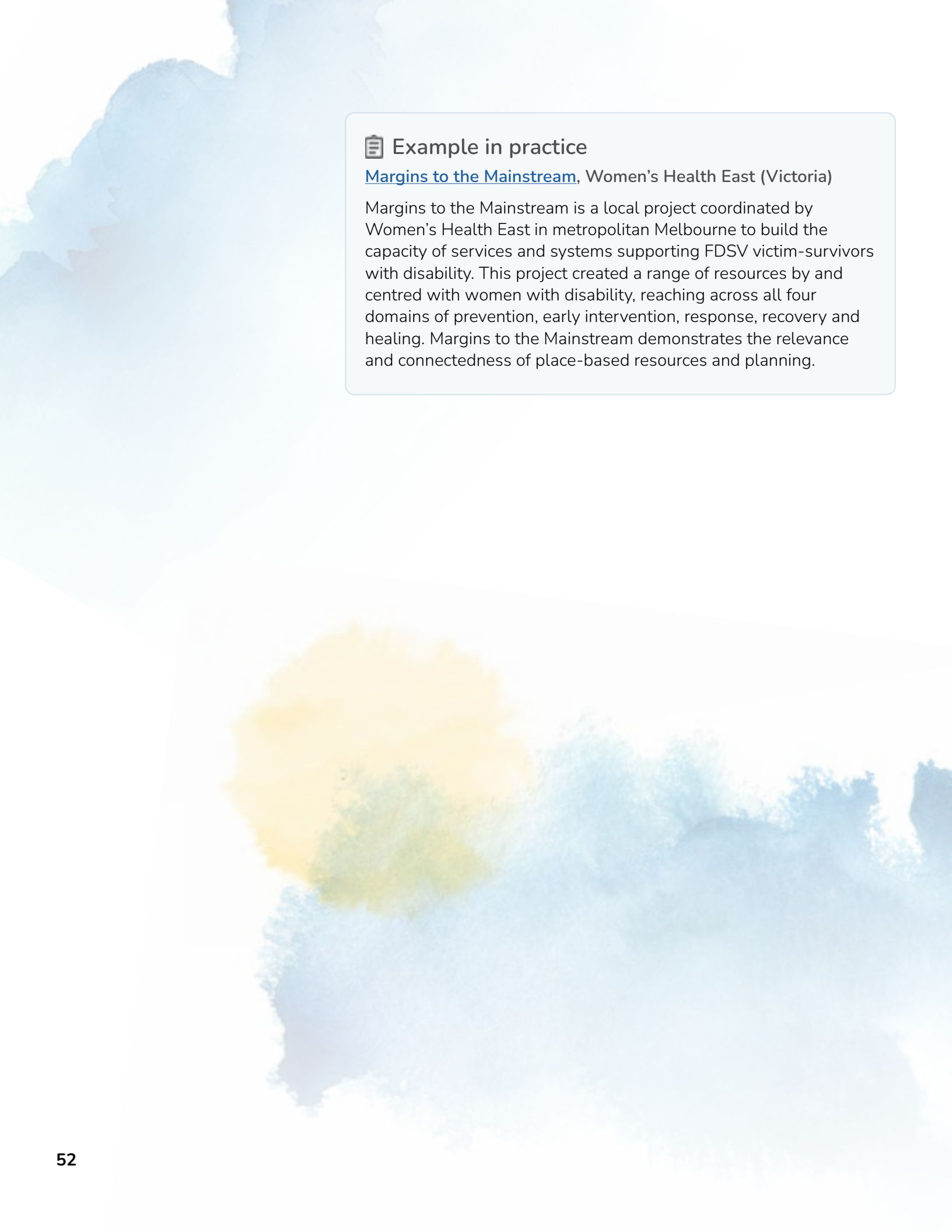
4.3 Provide specialised support for women and children with disability experiencing FDSV.

We invest in roles that hold bring together expertise in both disability and FDSV to ensure women and children with disability are not overlooked in service responses. This includes identifying roles where this combined knowledge is further strengthened by experience working with specific communities, such as First Nations women and children.

Example in practice

[Family Violence and Disability Practice Leader Initiative](#), Victorian Government

The Family Violence and Disability Practice Leader initiative (FVDPLI) aims to strengthen access to specialist family violence and sexual assault support for people with disability at risk of family violence and ensure that support is inclusive of and tailored to the needs of people with disabilities. Disability Practice Leaders across ten Victorian areas provide a capability building support for the family violence, sexual assault and disability sectors through the provision of inclusive practice leadership, secondary consultation, training, advice on emerging best practice, and the coordination and dissemination of information and advocacy to support a more inclusive and accessible service system. An additional statewide role provides a co-ordination, advocacy, policy advice, secondary consultation and support function for all practice leaders.



Example in practice

Margins to the Mainstream, Women's Health East (Victoria)

Margins to the Mainstream is a local project coordinated by Women's Health East in metropolitan Melbourne to build the capacity of services and systems supporting FDSV victim-survivors with disability. This project created a range of resources by and centred with women with disability, reaching across all four domains of prevention, early intervention, response, recovery and healing. Margins to the Mainstream demonstrates the relevance and connectedness of place-based resources and planning.

ACTION 5

Accountability

Action 5 in the First Action Plan 2023–2027

Strengthen systems and services to better hold people who choose to use violence to account, and provide opportunities to support people who have used violence, or are at risk of using violence, to change their behaviours, with the aim of protecting the safety and wellbeing of current and potential victim-survivors.

A disability lens on Action 5

Strengthen systems and services to better hold people who choose to use violence to account, including violence undertaken by those in caregiving roles and relationships, and provide opportunities to support people who have used violence, or are at risk of using violence, to change their behaviours and attitudes to disability and gender, with the aim of protecting the safety and wellbeing of current and potential victim-survivors.



Disability perspectives on Action 5

Australia's shared framework for the prevention of violence against women and children with disability, [Changing the Landscape](#), outlines how dominant social structures – including the devaluation of people with disability, misuse of disability supports by people using violence, and restrictive practices – intersect with male dominance and control.

It is critical to recognise that women and children with disability experience specific forms of violence in addition to those experienced by women and children without disability. Women with disability can face restrictions on their bodily autonomy, their decision-making power and access to resources due to the combined effects of gendered and disability-based discrimination. Women and children with disability experience violence in more settings and from a broader range of people, including those they rely on for daily care and support. This reliance can be used to create or maintain control, increasing the risk of harm. Effective responses must recognise these dynamics and ensure those who use violence are held to account.

They control your meds, your money, your support workers – but no one sees it as violence. That has to change.

- Disability advocate, describing a carer who uses violence

Accessible reporting is essential to ensuring accountability and effective support. Like any other service, reporting mechanisms must be designed to be fully accessible, particularly for women and children with intellectual disability who experience higher rates of violence and are often not believed when they come forward.³⁶

People with disability can also use violence. It is important to distinguish between behaviours linked to disability and a deliberate choice to use violence. Services and systems share responsibility for keeping people who use violence in view, including carers and people with disability. They must respond to the risks and support safe and effective pathways to stop the violence.

Action 5 in practice for women and children with disability

5.1 Strengthen the accessibility of reporting pathways.

We take a disability-responsive and informed approach to reporting pathways so that reporting is accessible and tailored to the specific contexts in which violence occurs.

5.2 Drive early intervention initiatives with a disability-informed approach.

We take a disability-informed approach to preventing violence which involves targeted education for carers, healthcare professionals, and law enforcement to spot early warning signs and intervene before violence escalates. Early interventions address power imbalances in caregiving roles while challenging both harmful masculine norms and the ableist cultural narratives that devalue women and children with disability.

We work with the Aboriginal Community Controlled sector to strengthen early intervention programs and build intersectional capability to prevent violence against women and children with disability.

Example in practice

[Violence prevention and early intervention for mothers and children with disability: Building promising practice](#), ANROWS

This project examined early intervention and violence prevention for mothers and children with disability at risk of domestic and family violence, centring their experiences and perspectives. Through a multi-method study, including evidence reviews and qualitative research on Family Referral Services in NSW, it found that holistic, flexible, and culturally safe approaches are key to improving support. Key principles include timely and personalised responses, strong local sector relationships, and better service coordination. The report recommends strengthening workforce capacity and training to ensure FDSV and early intervention services can effectively support families with disability.

Example in practice

[Supporting Adolescent Boys Trial](#), Australian Government

The Supporting Adolescent Boys Trial provides early intervention counselling and therapeutic supports to young men and boys aged 12 to 18 who are at risk of using FDSV. Eligibility is based on exposure to violence, adversity and other risk factors. The program includes a focus on accessibility and inclusion for boys with disability, neurodiverse participants and those with complex needs. It aims to interrupt the cycle of violence by supporting young people to process trauma and build safe, respectful behaviours.

ACTION 6

Sexual violence and harassment

Action 6 in the First Action Plan 2023–2027

Improve action to prevent and address sexual violence and harassment in all settings, across the four domains of the National Plan.

A disability lens on Action 6

Improve action to prevent and address sexual violence and harassment in all settings, across the four domains of the National Plan, including through providing accessible education, information and reporting, and through addressing ableist attitudes and practices that limit the bodily autonomy and choices of women and children regardless of their ability.



Disability perspectives on Action 6

Women with disability are more likely to experience sexual violence or harassment than women without disability, particularly those with brain injuries, psychosocial or intellectual disability.³⁷ There are more settings where violence can occur and a wider range of people who use violence.

As with Action 3, it is important to recognise that sexual violence and harassment occurs in contexts where disability support is provided, including at home, in supported accommodation, and during day programs. People who use violence also use positions of trust and control to take advantage of isolation and lack of independence in these settings.

Women and children with disability, particularly those with intellectual disability are increasingly targeted online for sexual exploitation.³⁸ They face higher rates of grooming, coercion, and image-based abuse due to the actions of people who use violence who exploit their communication differences, social isolation, and the lack of accessible safety education. This is exacerbated by barriers in recognising and reporting online harm. Stronger safeguards, education, and disability-inclusive online safety strategies are essential to prevent harm and support those affected.

“There can be a tendency to believe that people with an intellectual disability or higher cognitive needs can’t consent. I don’t agree with that. Everyone can consent if they are fully supported to understand the information.”

- Woman with lived experience

Paternalistic attitudes and misconceptions, such as the belief that women with intellectual disability are incapable of any consensual sex, create barriers for women and children with disability to access appropriate sexual health education and support. Accessible sex education fosters a shared language around consent and sexual health, empowering women to make informed decisions about their bodies and take control of their sexuality.

Action 6 in practice for women and children with disability

6.1 Provide accessible and inclusive resources on legal rights, sexual consent and respectful relationships.

We work with service providers to develop training and educational materials that clearly explain consent, healthy relationships, and the options and pathways for addressing sexual violence for women and children with disability. These materials are provided in simple language and available in accessible formats.



Example in practice

[Easy Read or accessible resources](#), WWILD

WWILD supports people with intellectual or learning disability who are victims or survivors of sexual violence or have been victims of crime. WWILD Easy Read or accessible resources include free videos, fact sheets and publications in Easy Read and Plain English to explain safety, rights and justice topics. There are also provider online training courses and resources for service providers to better understand intellectual disability.

Example in practice

[Sunny mobile app](#), 1800RESPECT

Sunny is a mobile app created by 1800RESPECT for people living with disability affected by FDSV. It supports telling and understanding stories of FDSV, legal rights, finding people to help and explaining what abuse is. 1800RESPECT reported in 2019 a 62% increase in usage of Sunny. Sunny was created for people with disability and was co-developed by Women with Disabilities Australia and women living with disability. The aim of Sunny is to support people with disability to understand FDSV and be able to find accessible support.

6.2 Advance Inclusive Practice to Uphold the Sexual Consent Rights of Women and Children with Disability.

We promote training for carers, educators, and healthcare professionals to understand that consent can be expressed in multiple ways when appropriate support is provided. This training addresses harmful myths and ensure that respectful care is the standard practice. Where relevant, new training will consider an intersectional perspective to safeguard the cultural safety and responsiveness of trainers and trainees, including First Nations trainers.



Example in practice

[SoSafe! Program](#), Sexual Health and Family Planning ACT

The SoSAFE! Tools and User Training provide teachers, trainers and counsellors with skills and simple visual tools to enhance the social, social-sexual and social safety training of people with moderate to severe intellectual disability. SoSAFE! uses a standardised framework of symbols, visual teaching tools and concepts to support individuals to build safe, respectful relationships at their own pace, and provides visual communication tools for reporting physical or sexual abuse. SoSAFE! tools encourage social safety through the provision of a simplified and rule-governed model of social reality that teaches the type and degree of verbal and physical intimacy appropriate with different categories of people.

Example in practice

[Teaching It Like It Is](#), Shine SA

Shine, South Australia has created a 2-day course of 'Teaching It Like It Is – Inclusive Education: Relationships Sexual Health Education for Students living with Disability'. This course facilitates discussion, explores information, skills and strategies for adults to deliver inclusive sexual health education to students living with disability.

Example in practice

[Introduction to consent](#), Sexuality, Education, Counselling and Consultancy Agency (SECCA) and Sexual Health Family Planning ACT

Introduction to consent is a picture-based, Easy English and Plain Language resource for teaching people about consent.

SECCA and Sexual Health Family Planning ACT have partnered together to design and develop this book about consent. The book is in Easy English with pictures to explain the text, and Plain Language to scaffold learning. The book was developed in consultation with people with disability.

ACTION 7

First Nations partnerships

Action 7 in the First Action Plan 2023–2027

Work in formal partnership with Aboriginal and Torres Strait Islander peoples to ensure policies and services are culturally competent, strengths-based and trauma informed and meet the needs of Aboriginal and Torres Strait Islander peoples and communities, aligning with the goals of the Aboriginal and Torres Strait Islander Action Plan.

A disability lens on Action 7

Work in genuine partnership with First Nations people with disability to ensure policies and services are culturally competent, inclusive, accessible strengths-based and trauma informed and meet the needs of First Nations peoples and communities, aligning with the goals of Our Ways – Strong Ways – Our Voices: National Aboriginal and Torres Strait Islander Plan to End Family Domestic and Sexual Violence and the National Agreement on Closing the Gap.



Disability perspectives on Action 7

First Nations communities often hold distinct perspectives on disability, viewing it through a holistic lens that emphasises interconnectedness and community relationships.³⁹ These perspectives consider the collective well-being and the role of each person within the community. Recognising and respecting these cultural understandings is crucial for developing policies and services that are culturally competent and effective.

The ongoing impacts of colonialism and systemic racism continue to profoundly affect First Nations peoples. Historical and present-day injustices, such as forced child removals, discriminatory policies, systemic marginalisation and institutional racism, have disrupted cultural practices and eroded trust in institutions and services.⁴⁰ These harms are further compounded by ongoing inequality in access to essential services like healthcare, education, income support, housing and justice, further entrenching disadvantage and contributing to higher rates of disability within First Nations communities. First Nations women also experience disproportionately high rates of family violence and associated acquired brain injuries. They are 69 times more likely to be hospitalised with head injuries from assault.⁴¹

People will tell you – I don't want a diagnosis because I don't want my kids taken away. If you say the wrong thing, they'll come and take your children. I've seen it happen.

- First Nations Woman with lived experience

Formal diagnoses of disability are notably low among First Nations women and children.⁴² This underdiagnosis can be attributed to several factors, including cultural differences in understanding disability, as well as barriers to accessing healthcare services. The stigma associated with disability labels, combined with a lack of culturally safe and appropriate diagnostic tools, discourages many from seeking formal assessments. This contributes to misdiagnosis and underdiagnosis across communities. For First Nations women and children with a diagnosis, disability supports are often not used because services are hard to access. NDIS funding is often significantly underutilised because culturally safe supports are not available or accessible in their location. Hesitancy to engage with services is often shaped by past experiences of being misunderstood, misdiagnosed or excluded.

Community-led healing initiatives align with local values and culture and promote self-determination and autonomy.⁴³ Services are most effective when delivered by people who are known to and trusted by the community. Outsiders, even with the best intentions, may lack the cultural competence and understanding necessary to provide appropriate support. Supporting these initiatives means building the capacity of the Aboriginal community-controlled sector to deliver effective services to First Nations women with disability and working in genuine partnership with community leaders and members.

Action 7 in practice for women and children with disability

7.1 Our work is informed by the priority reforms of the National Agreement on Closing the Gap.

We consider all actions through the lens of the four priority reforms of the National Agreement on Closing the Gap, which are:

1. Partnership and shared decision-making
2. Building the capacity of the Aboriginal community-controlled organisation sector
3. Transforming government
4. Indigenous data sovereignty.

Where appropriate, our actions reflect the intersectionality of commitments to Closing the Gap and the National Plan to End Violence Against Women and Children.

You can't build trust from a policy. It takes years of walking alongside communities. That's what real partnership looks like.

- First Nations Disability Provider

Example in practice

Disability cross-cutting outcome, Australian Government

The Department of Social Services and Department of Health, Disability and Ageing lead the disability cross-cutting outcome under the National Agreement on Closing the Gap, ensuring that the needs of First Nations people with disability are embedded across national policies and programs. This includes building capability across government to apply tailored, intersectional approaches and aligning reforms with Australia's Disability Strategy. Under this, the Disability Sector Strengthening Plan sets national priorities to grow the Aboriginal community-controlled disability sector and improve access to culturally safe, disability-responsive services.

7.2 Work in genuine partnership with First Nations communities.

We will work alongside First Nations organisations and disability advocacy groups to co-design policies and services that reflect lived experiences. This involves engaging in regular consultations, sharing decision-making responsibilities, and ensuring that cultural perspectives are integrated into all stages of policy development and service delivery.

Example in practice

[Wiyi Yani U Thangani \(Women's Voices\)](#), Australian Human Rights Commission and National Indigenous Australians Agency

The Wiyi Yani U Thangani (Women's Voices) report is a whole-of-life initiative that captures the voices of First Nations women and girls with disability, outlining the principles they believe should guide policy and program design. Building on this, the project has moved into implementation through a national framework and the establishment of the Wiyi Yani U Thangani Institute. These steps embed First Nations women's leadership and lived experience in policy development and demonstrate a sustained, co-designed partnership model across government and community.

7.3 Build capability in cultural competency and disability inclusion.

We will assess and modify existing frameworks to ensure they address the diverse experiences of women and children with disability in First Nations communities. This includes incorporating explicit guidelines and culturally specific practices to uphold safety and dignity. It is crucial for services to acknowledge the impact of colonisation as a fundamental factor contributing to violence, alongside the gendered drivers of violence.

Example in practice

[The Our Way Planning Resource](#), First Peoples Disability Network

The Our Way planning resource was developed in consultation with First Nations people with disability, Elders and community members across NSW, the Northern Territory, Queensland and the Torres Strait Islands. The Our Way Planning resource uses the traditional method of art and storytelling to assist First Nations people with disability to identify areas of their life they need assistance with. Communities can use the book in their own way to identify what type of support is needed to help keep them strong in their relationships, their family, community and culture.

We'd love for more [safe houses] to be community-led and run, providing a holistic support approach – not just a bed.

- Government official

Example in practice

[Cultural capability hub](#), Australian Government

The Cultural Capability Hub helps Australian Public Service staff to create safe and inclusive workplaces. Developed in partnership with the National Indigenous Australians Agency (NIAA), the Department of Defence, and 12 other agencies, it provides practical tools, learning modules, and resources for culturally informed practice. The Hub also supports agencies in workforce management, including recruitment, performance management, and professional development, ensuring APS policies and services respond effectively to the needs of First Nations people.

7.4 Promote community-driven, strengths-based, localised approaches to preventing violence.

We promote the leadership of local, community-based organisations that understand both culture and disability. We understand that these organisations are experts in their communities and are best placed to deliver culturally safe and inclusive support.

Example in practice

[Cultural capability hub](#), First Peoples Disability Network

The National Disability Footprint has been designed by First Peoples Disability Network (FPDN) to strengthen the representation of First Peoples with disability across all policy areas to ensure their needs, expectations and priorities are responded to. It has been specifically developed to align with Investment Priority Reform Two under the National Agreement on Closing the Gap – Building strong formal Aboriginal and Torres Strait Islander community-controlled service sectors.

ACTION 8

Children and young people

Action 8 in the First Action Plan 2023–2027

Develop and implement age appropriate, culturally safe programs across all four domains, informed by children and young people, that support recovery and healing from trauma, and intervene early to address violence supportive behaviours.

A disability lens on Action 8

Develop and implement age appropriate, culturally safe programs across all four domains, informed by children and young people, that support recovery and healing from trauma, and intervene early to address violence supportive behaviours.



Disability perspectives on Action 8

Children with disability are known to experience violence at higher rates than children without disability.⁴⁴ Nearly 30% of children subjected to domestic and family violence have a disability.⁴⁵ These children are twice as likely to have a mother hospitalised due to a domestic and family violence assault. They are also more likely to encounter child protection services and placement in out-of-home care, often due to unmet support needs and systemic responses to disability.

People who use violence often use violence against both mothers and their children. This violence can negatively impact families' access to services, and mothers may feel unable to leave abusive situations due to a lack of viable housing options that meet their child's needs. The people using violence against children with disability may be parents, siblings, or carers. Their dependency on others, and in some cases the normalisation of violence against them as way to manage behaviours, isolates them from seeking help.⁴⁶

Children with disability experiencing violence may display harmful behaviours,⁴⁷ either as a response to trauma or unmet support needs. Wherever possible, where children display harmful behaviours, families should be supported to stay together safely, with coordinated, cross-system support. This includes ensuring disability services take a family-centered approach where children display harmful behaviour, and that child protection is not the default crisis response. Instead, systemic collaboration is needed across services to deliver early, compassionate, and inclusive support that reflects the diverse needs and intersecting identities of children with disability.

Many children with disability are undiagnosed until they face barriers in the education system. This delay can prevent them from accessing necessary support services, exacerbating difficulties in learning and social integration. Restrictive practices and forced segregation in schools can also hinder their development and perpetuate ableism.⁴⁸

First Nations children and children from culturally and racially marginalised backgrounds have intersecting experiences of racism and ableism. Their exposure to violence may be shaped by historical and ongoing experiences of colonisation, forced removal, and systemic discrimination. These children are less likely to have access to early, culturally safe, trauma-informed supports, and more likely to be misdiagnosed, excluded from education, or placed in out-of-home care that does not reflect their cultural identity. A lack of appropriate housing, trusted services, and accessible therapeutic supports further isolates

“Empowering children means putting them at the heart of designing programs ... we honour their resilience and pave the way for genuine healing.”

- Government official

families and limits safe pathways for recovery. Without services that recognise and respond to their lived experience, these children remain at heightened level of risk and are often excluded from decisions about their own care and safety.

Children and young people with disability may face increased rates of cyberbullying, grooming, or exploitation.⁴⁹ This is due to intersecting factors such as ageism, ableism, social isolation, gender inequality and reduced access to safe online environments. Comprehensive sex and relationships education is vital, especially for those with intellectual disability, to help them understand consent, recognise inappropriate behaviour, and build healthy relationships.

Action 8 in practice for women and children with disability

8.1 Provide inclusive education on relationships and consent.

We develop accessible educational materials tailored for children and young people with disability. These resources use simple language, visual aids, and culturally relevant examples to clearly explain consent and healthy relationship dynamics. They are also available in different languages.

Example in practice

[Feel safe app](#), SECCA

Feel Safe is a free, accessible, interactive and multi-media resource that explores Protective Behaviours concepts. It was specifically designed with and for young adults with varying abilities. The resource aims to empower young individuals with the knowledge and skills to live safe lives. The resource has interactive elements to cover the basic Protective Behaviours concepts while also covering more advanced concepts including problem solving and emergencies, wanted and unwanted touch, internet safety and pornography. Feel Safe is also published in the Department of Education's internal catalogue for public schools throughout WA.

8.2 Improve capacity of organisations and professionals to identify and respond to violence.

We provide specialised training and resources to equip professionals with the skills to identify and respond to FDSV affecting children and young people. We develop clear protocols and guidelines to ensure a consistent and effective response across sectors.

Example in practice

[Responding to Disclosure of Sexual Abuse by Children and Young People resources](#), Children and Young People with Disability Australia

This resource has been developed for organisations and staff working with children and young people with disability. It is intended to provide a greater understanding about sexual abuse of children and young people and provide practical information about how to respond when a child or young person discloses abuse, or you suspect harm has occurred.

 Example in practice**[Connecting the dots, ANROWS](#)**

Connecting the dots: understanding the DFV experiences of children and young people with disability within and across sectors aimed to understand the experiences of children and young people with disability experiencing FDSV. Through data, the project identifies opportunities to better align services and processes to the needs of children and young people with disability.

 Example in practice**[Safe and Supported: National Framework for Protecting Australia's Children, SNAICC](#)**

Safe and Supported: The National Framework for Protecting Australia's Children 2021–2031 sets out how we can work together to ensure that children and young people in Australia reach their full potential by growing up safe and supported, free from harm and neglect. It is Australia's framework to reduce child abuse and neglect and its intergenerational impacts. Children and young people and/or parents/carers with disability experiencing disadvantage are one of four priority groups under the framework.

8.3 Holistic support for children and young people experiencing FDSV.

We improve capability in the disability sector to identify early signs of trauma and violence in children and young people with disability. We improve coordination and connectedness between the disability, education, health and FDSV sectors to provide holistic and culturally safe support to children and young people experiencing FDSV.

“ We need to raise the voice of children, about their experiences and needs in a family situation, whether the violence is directed to them, or by them.

- Government official

Example in practice

Disability Consultant Role, SA Government

A Disability Consultant Role has been created within the Department of Human Services to increase workforce capability, support families with disability and complex needs (including victim-survivors of FDSV). They meet directly with children and families referred to the Intensive Family Services program within Safer Family Services to help with assessments of disability, safety planning and ensure equitable access to supports and FDSV services. Since creation of role, 146 requests for consultations have been requested.

Example in practice

Change for Children, TAS Government

Change for Children was created by the Tasmanian Government with a disability and accessibility lens applied through consultation with a diverse collection of Tasmanians. Change for Children is adaptable and iterative, ensuring that the vast needs of young people and children are continuously captured to ensure their safety and protection from FDSV behaviours. It was directly created to uphold rights of all children and to prevent, identify and respond to child sexual abuse.

8.4 Address harmful behaviours with compassion and understanding.

We proactively address harmful behaviours by children with disability through targeted education, counselling and support services, as well as strategies for professionals undertaking early intervention with children and young people. For First Nations children, this means access to culturally safe supports delivered by professionals who are culturally competent, well-trained, and informed in working with First Nations children and young people.

For children from CALD backgrounds and their carers, this can mean access to information in multiple languages.

Example in practice

[Harmful sexualised behaviours workshop](#), Laurel House

A free specialised workshop focused on harmful sexualised behaviours by children and young people with disability. The workshop equips workers with practical strategies to prevent and respond to these behaviours, and includes a disability lens to the discussion, sharing some ideas and resources that can assist with discussing these tricky topics with young people with disability.

Example in practice

[Practice Guide: Understanding behaviours of concern for children with disability](#), Australian Government

Developed under the Child Family Community Australia project funded by the Australian Government, this practice guide draws on research evidence and practitioner knowledge to provide an overview of approaches to understanding the behaviours of children with disability and the concept of 'behaviours of concern'. It includes some practical principles for working with children with disability and their families. This guide is primarily intended for use by child and family support professionals who may work with children with disability and their families but may not be specialists in providing disability support. It synthesises general research evidence and broad practice knowledge.

Example in practice

[Children First 2022–2031](#), NSW Government

NSW Government's Children First 2022–2031 sets the vision and priorities for how NSW can and will work together to support children and young people who have displayed, or been affected by, problematic and harmful behaviours (PHSB) by applying a sector wide, multiagency public health approach. The policy framework is supported by [Talking About It](#), NSW's Governments whole of NSW prevention action strategy, and [Safety In Action](#), the first phase action plan. Children and young people with disability, particularly cognitive and intellectual disability, are a key priority group within the framework as they are also more likely to be identified as having displayed PHSB. The Framework identifies that children and young people with disability need prevention and responses that meet their specific developmental needs and consider the important role of family and carers.

ACTION 9

Police and justice

Action 9 in the First Action Plan 2023–2027

Improve police responses and the justice system to better support victim-survivors through the provision of trauma-informed, culturally safe supports that promote safety and wellbeing, and hold people who choose to use violence to account.

A disability lens on Action 9

Improve police responses and the justice system to better understand and support victim-survivors through the provision of trauma-informed, accessible, inclusive and culturally safe supports that promote safety and wellbeing and hold people who choose to use violence to account.



Disability perspectives on Action 9

Women and children with disability face structural barriers, including systemic ableism, when interacting with the police and justice systems.⁵⁰ Inaccessible physical spaces, complex legal language, and lack of appropriate communication supports disproportionately impact people with disability. These barriers are often hidden where disability status is not captured in police data systems, limiting the ability to monitor responses, ensure accountability, and understand the experiences of women and children with disability. This gap also undermines broader data integration efforts aimed at improving outcomes across the system.

Women and children with disability, particularly psychosocial disability, brain injury or autism often face scepticism if their behaviour doesn't align with the 'model victim' stereotype.⁵¹ Their actions or responses to trauma are misinterpreted as non-compliance or aggression, and they can be misidentified as a perpetrator of violence. Being treated as a perpetrator can echo the dynamics of coercive control they have already experienced. It reinforces the message that they are at fault and can cause lasting psychological harm.

Many of the girls I worked with didn't even know they had a disability. By the time it was picked up – if at all – they'd already cycled through courts and detention several times.

- FDSV Worker

There is a significant underdiagnosis of disability among incarcerated women and children, particularly First Nations women.⁵² For women with hidden or undiagnosed disabilities, interactions with police, courts and correctional facilities can be marked by miscommunication, criminalisation of disability-related behaviours, and a lack of appropriate support. This increases the risk of re-traumatisation, extended incarceration, and barriers to rehabilitation or diversion.

Women with disability leaving incarceration often face significant gaps in accessing disability supports, including the NDIS. There is a need for coordinated systems that enable timely access to disability supports as part of release planning and reintegration, rather than relying on crisis responses after re-entry.

Action 9 in practice for women and children with disability

9.1 Improve cultural and disability competency in the police and justice systems.

We support the development of disability-inclusive justice systems by building the capability of police, legal practitioners, prosecutors and judges in disability awareness, inclusive communication and the complex interplay between trauma and disability. While training has a role, particularly in understanding situations that put people with disability at risk of violence, structural changes are also needed to ensure accountability and safety. We place particular emphasis on the needs of women and gender diverse people with intellectual disability, including access to clear, accessible information, interpreters, supported decision-making and communication resources tailored to their needs.

We work to ensure that all legal and support services are accessible to women and children with disability. This includes access to information, legal processes and support services in formats that are inclusive, appropriate and easy to understand. Where full accessibility cannot be achieved, one-on-one support may be required to uphold a person's rights, safety and participation. These efforts are grounded in an intersectional approach, ensuring disability competency is complemented by cultural competency and led by First Nations perspectives.

Example in practice

[Disability Justice Strategy](#), ACT Government

The ACT Disability Justice Strategy was launched in 2019 to provide equitable justice system support for people with disability. Through their work, they've been able to create multiple resources, including:

- Easy Read resources for people interacting with the justice system
- a needs adjustment tool to identify any considerations required during interactions with the justice system
- an Intermediary Program to help children and vulnerable people who need additional support communicate effectively in courts
- resources for lawyers to assist adults make a Disability Action and Inclusion Plan within local prisons.



Example in practice

Training and Capacity Building for Frontline Justice Staff, IDRS and NSW Government

The NSW Department of Communities and Justice (DCJ) funds the Justice Advocacy Service (JAS), which is delivered by the Intellectual Disability Rights Service (IDRS) and is a key mechanism to enhance the capacity of frontline justice staff to support people with a disability. JAS includes an education, training and capacity building component that focuses on training justice staff (including police, court staff, judicial officers, lawyers, and correctional staff) to better identify and respond to individuals with a cognitive impairment in contact with the justice system. This includes online training sessions and the development of tailored training materials which aim to embed disability awareness and inclusive practices across the justice system. JAS also provides individual advocacy support for victims, witnesses, suspects, and defendants with a suspected cognitive impairment across NSW. At six Local Courts, JAS provides a targeted case coordination service to defendants with a cognitive impairment who are seeking diversion from the criminal justice system. The delivery of JAS is an action in DCJ's Disability Inclusion Action Plan (2026–2029).

Example in practice

Autism alert cards, WA Government with the Autism Association of Western Australia

The WA Police have worked with the Autism Association of Western Australia to assist individuals with Autism when they encounter situations with police and first responders, to promote more positive interactions. The Autism Alert Card alerts emergency services that the person carrying the card has Autism and may require additional support. It lets responders know that the cardholder may have difficulties in communicating and may show signs of unusual behaviour. It also includes two named contacts who can offer their support to help emergency and public services to understand the individual with Autism's needs.

Understanding what disability is, how it may present, and how to respectfully communicate with someone with a disability is a great first step. Simply having this knowledge can help first responders give an appropriate response or direction to a support service.

- Government official

Example in practice

SMSAssist, WA Government

SMSAssist© is a text messaging service for people who are deaf, hard of hearing or speech impaired, which can be used for contacting the WA Police Force and requesting assistance. People who are deaf, hard of hearing or unable to speak clearly can use SMSAssist© to contact the police and a police operator then sends a reply. This applies even if the disability is temporary or only occurs at certain times, for example, when someone becomes stressed.

9.2 Expand access by funding advocacy and supported decision making in the legal and justice systems.

We provide dedicated advocacy services to assist women and children with disability in navigating the legal and police systems. Our aim is to ensure they are supported, heard, and able to exercise their rights at every stage of the process. This includes access to supported decision-making, particularly for women with intellectual disability, to ensure they can understand information, communicate their views, and participate fully in legal processes.

Example in practice

Supporting Justice, Centre for Innovative Justice

The Centre for Innovative Justice at RMIT University developed the Supporting Justice project to address the overrepresentation of people with disability in the criminal justice system. This initiative involved co-designing resources with individuals who have lived experience of disability and justice system involvement, as well as professionals from legal, health, and social service sectors. The project produced practical tools, including an online resource, to assist legal professionals in recognizing and responding appropriately to the needs of people with disability. Additionally, it established the Voices for Justice self-advocacy training program, empowering individuals with acquired brain injuries to contribute to policy discussions and reforms.

Example in practice

[NDIS Appeals Program](#), Australian Government

The NDIS Appeals Program assists people with disability in challenging decisions made by the NDIA. Participants who have undergone an internal review and wish to seek an external review through the Administrative Review Tribunal (ART) can access support through this program. The program offers free assistance from skilled disability advocates who help individuals understand the review process, prepare necessary documentation, and provide support during ART conferences and hearings. In cases where legal representation is deemed beneficial, funding may be provided through Legal Aid Commissions. This support is particularly crucial for individuals facing complex legal issues or those unable to represent themselves.

ACTION 10

Housing

Action 10 in the First Action Plan 2023–2027

Improve access to short-term, medium and long-term housing for women and children experiencing violence, including those living in institutional settings, and support women to stay in their own homes when they choose to do so.

A disability lens on Action 10

Improve access to safe short-term, medium and long-term accessible housing for women and children experiencing violence, including those living in institutional settings, and support women to stay in their own homes when they choose to do so.



Disability perspectives on Action 10

Victim-survivors with disability seeking housing often require modifications such as ramps, wide doorways, and adaptable layouts, as well as communication supports, such as Easy Read, Auslan information and interpreting, and quiet zones. Shortage of transitional and long-term social and affordable housing forces many women and children with disability to choose between returning to an unsafe environment or facing homelessness.⁵³ This choice is especially dire for children with disability who are escaping violence without parental support.

In many instances, crisis accommodation does not provide the specialised supports that women and children with disability might need, such as assistance with everyday tasks like cooking and showering, and with transport. Crisis accommodation is often inaccessible or unsuitable for women and children with disability. Some services exclude older male children, which can prevent families from entering together. These gaps limit safe options and make referral pathways ineffective when there is nowhere appropriate to go.

In regional, remote, and very remote locations, accessible housing and specialised services are difficult to find and transport is often not available. Relocating to find suitable accommodation can disrupt vital connections with local support networks and essential care services. A lack of accessible and reliable transport can also prevent women and children with disability from reaching available housing or support services. For many First Nations women and children with disability, this can mean choosing between leaving Country to seek safety or remaining in an unsafe environment without support.

Women and children with disability often face housing systems that undermine their safety, dignity and independence. The Disability Royal Commission highlighted that institutional and supported accommodation settings can be sites of violence, neglect and abuse,⁵⁴ with limited access to justice, reporting pathways or independent oversight. Inaccessible and unsafe housing across crisis services, long-term disability housing and mainstream options contributes to the isolation and marginalisation of people with disability. The shortage of accessible, appropriate community housing means that many women and children with disability have no choices other than group homes and institutions.

Action 10 in practice for women and children with disability

10.1 Enhance safety and accessibility of housing options.

We provide information on FDSV service accessibility so that referrals for women and children with disability are appropriate. We remove barriers to access refuges and crisis, short term and transitional accommodation for women and children with disability. We improve accessibility of the homes of women with disability experiencing FDSV so that they can remain in their own homes.

Example in practice

[Keeping Women Safe in their Homes](#), Australian Government

Improving accessible, safe housing has been a key part of the National Initiatives program with the creation of the Keeping Women Safe in their Homes (KWSITH) program. KWSITH focuses on victim-survivors of FDSV remaining in their homes safely, rather than having to find alternative, suitable and accessible accommodation. The main purpose of the program is to provide housing safety upgrades such as window and door locks, door chains, security window screens and doors, security cameras and mobile phones. Accessibility home modifications can also be provided for people with disability. An evaluation of the program is scheduled for 2025–26. The findings may help inform future improvements to housing safety and accessibility for women with disability.

Example in practice

[Safe Places Emergency Accommodation Program Inclusion Round](#), Australian Government

Safe Places provides capital works grants to support the renovation, building or purchase of new crisis or emergency accommodation places for women and children experiencing family and domestic violence. The Safe Places Inclusion Round (Inclusion Round) focuses on providing specific accessible supports to meet the housing needs of people with diverse needs including women and children with disability.

10.2 Improve conditions in group housing with a focus on individual needs.

We will promote investments in housing that offers privacy, accessibility, autonomy, and space for recovery rather than large institutional group settings. We ensure women and children with disability have control over their daily lives, upholding their rights to independence and decision making. We remove barriers to reporting violence in institutional settings, so that it cannot be normalised or perpetrated without consequence.

Example in practice

[Own Motion Inquiry into Aspects of Supported Accommodation](#), NDIS Quality and Safeguards Commission

The NDIS Commission's Inquiry into Supported Accommodation examined reportable incidents and complaints made to the NDIS Commission. It identified safety and quality issues in group homes, including gaps in regulation, limited resident choice, and the impact of workforce attitudes. It also highlighted the need for better data, market understanding and coordination between services. In response, the NDIS Commission is implementing an Action Plan that includes a public commitment to develop and deliver Practice Standards for Supported Independent Living (SIL), improve provider education, oversight and increase participants understanding of their rights. The NDIS Commission has worked with Inclusion Australia since early 2025 to co-design the new SIL Practice Standards and this work has been informed through consultation and co-design with over 200 participants, support workers, and providers.

Monitoring and reporting

Accountability

The Australian, state and territory governments are jointly responsible for implementing the National Plan through the actions and activities of the Action Plans. Accountability and governance is supported by ministerial oversight, intergovernmental working groups, and the Outcomes Framework, which links actions to measurable outcomes.

The Disability Lens does not create new action under the National Plan but offers a way to look at existing programs and commitments through an accessible, inclusive and affirming lens. It highlights how governments can strengthen delivery for women and children with disability and provides practical examples for others to follow when implementing the First Action Plan.

Activities that address violence against women and children with disability will be incorporated into annual implementation and reporting processes under the National Plan. This ensures the needs and rights of women and children with disability are reflected in how governments deliver and report on progress each year.

First Action Plan 2023–2027

The First Action Plan outlines the initial scope of activities, areas for action, and responsibilities under the National Plan. Monitoring and reporting of progress are supported by two key tools: the Performance Measurement Plan and the Activities Addendum

- [Performance Measurement Plan \(PMP\)](#): This plan sets out the initial key performance indicators intended to measure and report on progress over the life of the National Plan. It includes national-level targets such as reducing female intimate partner homicide and improving community attitudes towards gender-based violence. The PMP is designed to be a living document, reviewed and updated as new data becomes available and as the understanding of effective measures evolves.

- **Activities Addendum:** Published annually, the Activities Addendum provides a detailed breakdown of specific activities that each Australian government is undertaking under the ten actions of the First Action Plan. Each activity outlines the responsible entities, implementation timeframes, and the nature of the actions to be taken.

The Disability Lens will integrate with these existing mechanisms to ensure that activities relevant to women and children with disability are clearly described and tracked. This means that the experiences of women and children with disability will be reflected in how progress is defined, implemented, and reported.

Embedding this within the existing reporting infrastructure reinforces that disability inclusion is a central and ongoing priority of the National Plan – not a separate or peripheral concern. It also creates stronger incentives for governments to identify and commit to additional activities that address the needs of women and children with disability.

Over time, Governments will draw on insights from the Disability Lens to design the Second Action Plan, ensuring it reflects the rights, needs and perspectives of women and children with disability from the outset.

Australia's Disability Strategy 2021–2031

Alignment to the Outcomes Framework

Australia's Disability Strategy is Australia's national disability policy framework. It sets out a plan for continuing to improve the lives of people with disability and a vision for an inclusive Australian society that ensures people with disability can fulfil their potential as equal members of the community. Achieving the Strategy's vision requires a whole-of-community response, inclusive of governments, business, the non-government and services sectors, the community and individuals. All levels of governments are committed to implementing the Strategy and improving outcomes for people with disability in line with the 7 Outcome Areas.

The Strategy is supported by a national Outcomes Framework that tracks progress across the Outcome Areas which are:

1. Employment and Financial Security
2. Inclusive Homes and Communities
3. Safety, Rights and Justice
4. Personal and Community Support
5. Education and Learning
6. Health and Wellbeing
7. Community Attitudes

All seven Outcome Areas of the Strategy are relevant to the Disability Lens, reflecting the broad range of systemic factors that shape safety and access to support. For example, inclusive education, secure housing, economic participation, and positive community attitudes all play a role in preventing violence and supporting recovery.

The most direct alignment is with the Safety, Rights and Justice and Personal and Community Support Outcome Areas. The Disability Lens reinforces national efforts to prevent violence, uphold rights, and improve access to safe, appropriate supports. It highlights the need for coordinated service responses that are tailored to the circumstances of women and children with disability, including those who face additional barriers due to location, culture, or systemic discrimination.

Data on the Australia's Disability Strategy Outcomes Framework are updated quarterly, where data is available. An annual report is produced and published by the end of January each year. More information can be found on [Australia's Disability Strategy Outcomes Framework webpages.](#)

Targeted Action Plans

Under Australia's Disability Strategy, governments at all levels deliver Targeted Action Plans (TAPs) to make headway in achieving outcomes in specific areas of the Strategy. Targeted Action Plans make sure extra work is done over one to three years to improve outcomes in these areas. There are currently 3 Targeted Action Plans running from 2025 to the end of 2027. These are based on recommendations from the Disability Royal Commission and priorities of the disability community:

- The Safety, Rights and Justice TAP sets out key actions to prevent people with disability from experiencing harm, through well designed and integrated service systems, improved supports for those at risk of harm and appropriate pathways for action if things go wrong.
- The Inclusive Homes and Communities TAP sets out key actions to improve outcomes for people with disability relating to housing accessibility and increased inclusive communities, which people with disability identified as priority areas for action.
- The Community Attitudes TAPs sets out key actions to improve outcomes for people with disability relating to their inclusion and participation in Australian society.



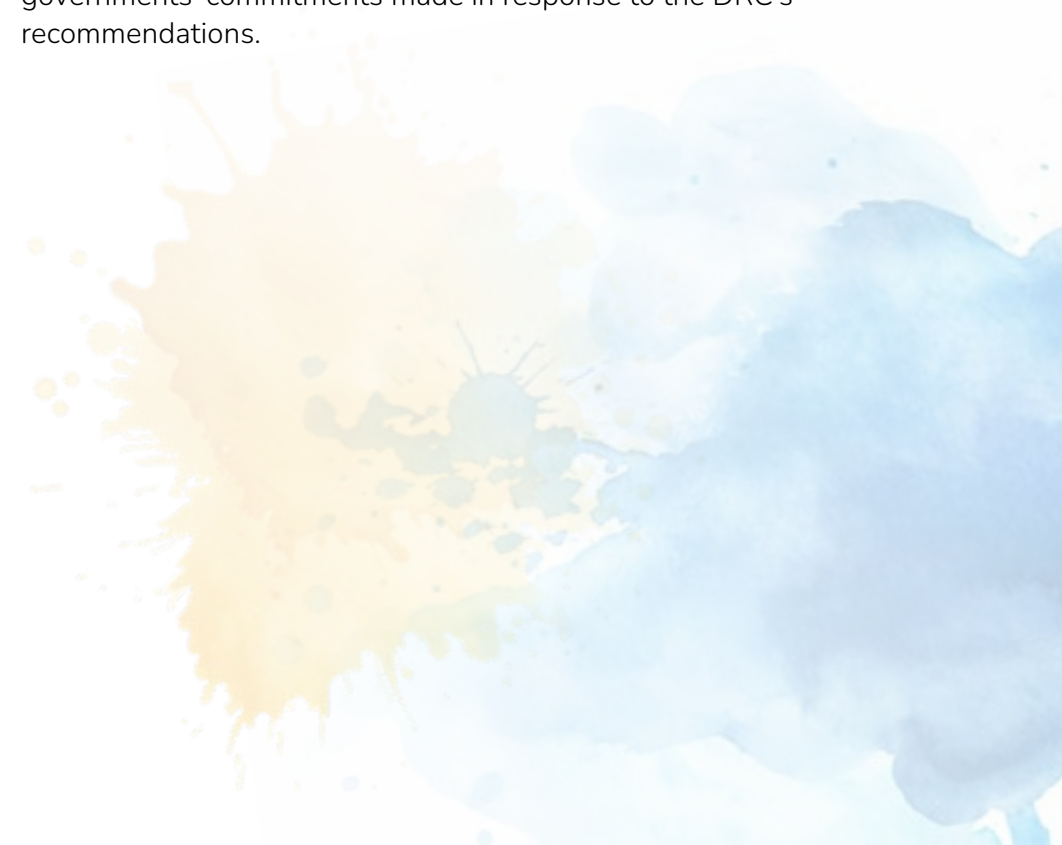
There is strong alignment between the actions and objectives of each TAP and the Disability Lens actions. Each are mutually reinforcing, supporting a consistent national approach to improving safety, rights, and access to support for people with disability. Alignment between specific actions in each TAP will be noted in the National Plan Activities Addendum to support coordinated implementation and clearer tracking of progress.

Disability Royal Commission

The Disability Royal Commission was established in April 2019 in response to community concern about widespread reports of violence, abuse, neglect and exploitation of people with disability. Over 4 and a half years of inquiry, the Disability Royal Commission heard from people with disability, their families, organisations and government officials through 32 substantive public hearings, 1,785 private sessions, 7,944 submissions, and more than 700 community engagements.

The Disability Royal Commission Final Report was released on 29 September 2023. It covers key themes of rights, safety and protection from harm, inclusion, and accessibility for all people with disability over 12 volumes, 6,788 pages and 222 recommendations. The Australian Government Response to the final report was released on 31 July 2024 and noted the need for successive phases of implementation to reflect the broad range of reforms required.

The Department of Health, Disability and Ageing is responsible for producing public reports that update the progress of all the governments' commitments made in response to the DRC's recommendations.



Public reporting

Progress under the National Plan is publicly reported through the Outcomes Framework, which is published by the Australian Institute of Health and Welfare (AIHW). The framework includes key national indicators across prevention, early intervention, response, and recovery. It is updated annually to track how governments are delivering on their commitments, including those recorded in the Activities Addendum. For more information visit [National Plan Outcomes – AIHW website](#).

The First Action Plan Activities Addendum is updated annually to track implementation of the activities that governments have committed to and add any new activities. Work will be undertaken to incorporate the Disability Lens into the next Activities Addendum.

Public reporting will also occur through existing mechanisms such as relevant government department's annual reports and annual Closing the Gap reports.

The DFSV Commission also provides annual reports to Federal Parliament measuring progress towards the National Plan.

Glossary

Term	Definition
Ableism	Ableism is discrimination or prejudice towards people with disability. It can be described as the systemic and interpersonal exclusion and oppression of people with disability.
Aboriginal and Torres Strait Islander people	A collective term used to refer to the First Peoples of the land now called Australia. It includes the diverse nations, language groups and communities of Aboriginal peoples and Torres Strait Islander peoples. While widely used in across many contexts, it is important to recognise that ways of identifying are personal and individual; many people prefer to identify by their specific Nation, language group or as First Nations.
Accessibility	Accessibility is whether a product, service, process, or design can be used and/or understood by everyone who interacts with it.
ANROWS	Australia's National Research Organisation for Women's Safety, a not-for-profit independent national research organisation. ANROWS was established by the Commonwealth, state and territory governments to produce, disseminate, and assist in applying evidence for policy and practice addressing violence against women.
Australia's Disability Strategy (The Strategy)	Australia's policy framework for all levels of government, to improve the lives of people with disability in Australia. It also plays an important role in protecting, promoting, and realising human rights of people with disability in line with Australia's commitments under the United Nations Convention on the Rights of Persons with Disabilities.
Brotherboys and Sistergirls	Sistergirl and brotherboy are terms used in Aboriginal and Torres Strait Islander communities to describe transgender people. Using these terms can validate and strengthen their gender identities and relationships. Sistergirls and brotherboys might be non-binary, female or male.
CALD	An acronym for 'culturally and linguistically diverse'. It is a term used to refer to people who see themselves (or their parents) or are seen by others as being from a non-English speaking background, and/or being from a non-Anglo-Celtic cultural background.

Term	Definition
CARM	An acronym for 'culturally and racially marginalised'. It is a term used to refer to people who cannot be racialised as white. This group includes people who are Black, Brown, Asian, or any other non-white group, who face marginalisation due to their race. The term 'culturally' is added because it recognises that people may also face discrimination due to their culture or background.
Co-design	Working together with people who have lived experience to design, deliver and review a policy, program or service. Everyone has an equal say, and decisions are made together.
Coercive control	Coercive control is pattern of behaviour used to harm, punish, frighten, dominate, isolate, degrade, monitor or stalk or control the victim survivor. People using violence exert use a range of coercive and controlling behaviours that build up harm and fear over time and limits someone's freedom and independence. It can include a combination of emotional, financial abuse and isolation, stalking (including monitoring of technology), controlling behaviours, choking/strangulation, sexual and physical violence. Everyone experiencing family violence is experiencing coercive control.
Consent	Consent is the voluntary, informed, and clear agreement to engage in an activity, given without coercion and able to be withdrawn at any time. Legal definitions of consent vary between Australian, state and territory jurisdictions.
Culturally Responsive	An approach that adapts services to reflect and respect the cultural identities, needs and values of the people they support. For First Nations communities, this includes working in ways defined by community that uphold cultural safety and self-determination. For people from culturally and linguistically diverse, migrant and refugee backgrounds, it means addressing language, faith, trauma, racism and migration experiences. Culturally responsive practice recognises that safety, disability and violence may be understood differently across communities, and services must respond accordingly.
Cultural safety	An environment where First Nations people feel safe, respected and free from racism or denial of their identity. It requires ongoing reflection, action to address bias and discrimination, and support for self-determination, including shared decision-making and control over services.
Data	Facts or information about a topic or group of people.
Disability action plans	A formal framework developed by governments to promote inclusive, accessible services for people with disability. It ensures compliance with disability rights and supports the removal of barriers, fostering equality and participation in society for people with disability.

Term	Definition
Disability lens	A perspective or approach considering the needs and rights of people with disability in all areas of planning, policy, and service delivery.
Disability pride	A positive identity that embraces disability as a natural part of human diversity. It affirms the value, strengths and rights of people with disability.
Disability Royal Commission	The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability was established in April 2019 in response to community concern about widespread reports of violence against, and the neglect, abuse and exploitation of, people with disability. The Final Report was delivered to the Australian Government on 29 September 2023. In this report, the Royal Commission recommended how to improve laws, policies, structures and practices to ensure a more inclusive and just society.
Disablism	Disablism is the belief that people with disability are inferior to people without disability. It involves discriminatory attitudes, behaviours, or actions, such as using slurs, ignoring someone, or speaking in a patronising way. Unlike ableism, which refers more broadly to systemic privilege and structural barriers that disadvantage people with disability, disablism focuses on direct prejudice and discrimination
Evidence-based	Models, approaches, or practices that have been shown to be effective through evaluation, peer-reviewed research, or data.

Term	Definition
Family, domestic and sexual violence (FDSV)	As any behaviour that occurs in family, domestic or intimate relationships that is physically or sexually abusive; emotionally or psychologically abusive; economically abusive; threatening or coercive; or is in any other way controlling that causes a person to live in fear for their own safety or wellbeing or someone else's safety. For First Nations communities, this can include social, spiritual, cultural, abuse that occurs within families, intimate relationships, extended families, kinship networks and communities. Children experience family violence when a family member causes them to hear or see or experience the effects of violence on themselves or other family members. Family member includes extended families, kinship networks and communities, and people who are considered family. Sexual violence happens any time a person is forced, made to be involved or manipulated into any sexual activity or where they didn't agree to that activity. This includes sexual touching, sexual abuse, sexual assault, rape, sexual harassment and intimidation, and forced watching or filming of pornography. It can include unwanted sexualised comments, questions or harassment and forced marriage or trafficking.
First Nations people / First Peoples	A term used to recognise the distinct and sovereign Nations of Aboriginal and Torres Strait Islander peoples. It reflects the cultural and political identity of peoples who have lived on and cared for this land for over 65,000 years. It is important to recognise that ways of identifying are personal and individual; many people prefer to identify by their specific Nation, language group or as Aboriginal or Torres Strait Islander.
Gender	A social construct that refers to the roles, behaviours, identities and expectations placed on people based on how they are perceived (such as male, female or another gender). These can change over time and vary between cultures. Gender is different from biological sex.
Gender-based violence	Any form of violence directed at someone because of their gender. It is often linked to gender inequality and discrimination, affecting women and girls disproportionately.
Gendered practices	Gendered practices are actions and behaviours that reinforce and perpetuate gendered norms and structures.
Gender inequality	A social condition where people are treated unequally based on their gender. It includes unequal access to power, resources, and opportunities, and can affect people of all genders in different ways.

Term	Definition
Harmful behaviour	Actions that cause physical, emotional, psychological or social harm to oneself or others. For children and young people, and some adults with disability, harmful behaviour is often a response to trauma or unmet needs, and requires a supportive, therapeutic response.
Holistic support	Support that addresses all aspects of a person's needs, such as emotional, psychological, social, and physical.
Human rights model	The human rights model of disability recognises disability as a natural part of human diversity and asserts that people with disability have the same rights as everyone else. It places responsibility on governments and institutions to remove barriers and ensure full participation in society. This model is grounded in international frameworks like the Convention on the Rights of Persons with Disabilities and the Convention on the Elimination of All Forms of Discrimination against Women, which address issues such as forced sterilisation and restrictive practices. It also emphasises the leadership of people with disability in shaping policies that affect their lives.
Intergenerational trauma	A form of historical trauma transmitted across generations. Survivors of the initial experience who have not healed may pass on their trauma to further generations. In Australia, intergenerational trauma particularly affects Aboriginal and Torres Strait Islander peoples, especially the children, grandchildren and future generations of the Stolen Generations.
Intersectionality	Recognising the inequality and discrimination experienced by certain people and communities, and the barriers to access, safety and participation they face. Intersectionality is a framework for understanding how systems of power such as racism, ableism, sexism, colonialism and classism combine and reinforce each other to create structural disadvantage. It examines how these systems shape policies, institutions and services, often compounding exclusion for those who are marginalised in multiple ways. Intersectionality is used to analyse and challenge systemic injustice by addressing the root causes of inequality. These factors of identity can include gender, ethnicity and cultural background, language, First National identity, socioeconomic status, disability, sexual orientation, gender identity, religion, age, geographic location or visa status.
Intersectional approach	An approach to policy, service design or research that considers how overlapping systems of power create compounded disadvantage for some people and communities. It moves beyond one-size-fits-all responses by examining how factors such as gender, disability, First Nations identity, culture, class, migration history or location interact to shape people's experiences of discrimination and access. An intersectional approach focuses on addressing structural barriers, not just individual circumstances.

Term	Definition
Institutionalisation	The practice of placing people with disability in settings where they are isolated from the community and subject to systems of control, routine and restriction. These environments are often structured around institutional rules rather than individual rights, leading to limited freedom, choice and autonomy.
Institutional setting	Any setting where people receive a service or support, including educational institutions, residential institutions, and hospitals.
LGBTQIA+	People who are Lesbian, Gay, Bisexual, Trans and/or Gender Diverse, Queer, Intersex, Asexual and other sexual and gender identities.
Lived experience	Personal knowledge gained through direct, first-hand involvement in a situation or issue, such as disability, violence or the use of services. It reflects the insights, expertise and perspectives of people who have experienced something themselves, not just observed or studied it.
Mainstream	Referring to services, policies, and practices that apply to the general population, as opposed to specialised services for particular groups.
NDIS	The National Disability Insurance Scheme , which provides access to disability supports for eligible people with disability.
Outcomes framework	The Outcomes Framework links actions in the First Action Plan to desired outcomes, guiding policy, investment, and progress tracking to achieve a future free from gender-based violence in all settings.
Our Watch	Our Watch is an independent, not for profit organisation established to drive nationwide change in culture, behaviours and power imbalances to prevent violence against women and their children.
Perpetrator	Someone who commits an illegal, criminal or harmful act, including domestic, family or sexual violence.
Person who uses violence	Someone who chooses to use abusive, controlling or violent behaviour towards others. This term focuses on the person's actions rather than defining them by their behaviour, and is used to support accountability and change.
Person-centred	An approach that prioritises the individual needs, preferences, and aspirations of the person receiving services.

Term	Definition
Restrictive practice	Any practice or intervention that limits a person's human rights or freedom of movement. It is sometimes used to keep a person with disability or others safe. It is important to note that restrictive practice does not lead to lasting positive change, meet the person's needs, or improve quality of life. It often fails to address the cause of the behaviour and can make it worse.
Segregation	The enforced separation of people with disability from mainstream society in areas such as housing, education, employment, and community life. This often occurs through institutional settings, group homes, special schools, or sheltered workshops, where individuals have little or no control over their environment, relationships, or daily decisions. Importantly, the term segregation does not apply when people with disability make informed, voluntary choices to be in settings with others who share similar experiences or cultural identities—such as Deaf schools or culturally specific programs—where participation is based on autonomy, community, and shared values.
Settings	Environments where people live, work, learn, socialise, and play, including institutional settings like educational institutions and residential institutions.
Sexuality	The component of identity that includes a person's sexual and emotional attraction to another person.
Social model of disability	The social model of disability sees disability as a product of societal barriers rather than individual impairments. It emphasises removing physical, social, and attitudinal barriers to ensure full participation for people with disability.
Systems abuse	When someone uses legal or government systems to control, threaten or harass a partner or ex-partner. This can include making repeated complaints or applications through courts or services like Centrelink or Child Support to cause stress, waste time and money, or make it harder for the other person to work or care for their children.
Systems and structures	Macro-level mechanisms, both formal (policies, institutions and laws) and informal (social norms), which serve to organise society, and create power relationships between different groups of people and patterns of social and political power.
Trauma	A response to an event or series of events that causes lasting harm to a person's emotional, psychological or physical wellbeing. Trauma can affect how a person feels, thinks, and interacts with the world around them.

Term	Definition
Trauma-informed	An approach that recognises the widespread impact of trauma and integrates this understanding into all aspects of service delivery. It prioritises physical, emotional and cultural safety, fosters trust, and empowers people to have choice and control. A trauma-informed approach seeks to avoid re-traumatisation by acknowledging how trauma can affect a person's behaviour, relationships and engagement with services. It is guided by principles such as safety, trustworthiness, collaboration, empowerment, choice and respect for diversity.
UN CRPD	The United Nations Convention on the Rights of Persons with Disabilities is an international human rights treaty that protects and promotes the rights and dignity of people with disability. It sets out the obligations of countries to ensure full and equal enjoyment of all human rights by people with disability, including access, inclusion, equality, and freedom from discrimination. Australia signed the Convention in 2007 and ratified it in 2008, committing to eliminate discrimination and promote accessibility, inclusion and equal participation in all areas of life.
UN Convention on the Elimination of All Forms of Discrimination Against Women	UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) is an international treaty that sets out the rights of women and girls and calls on governments to end discrimination in all forms. It covers areas such as education, employment, health, and violence against women. Australia ratified CEDAW in 1983, committing to take action to promote gender equality and eliminate discrimination against women in law and practice.
UN Convention on the Rights of the Child	UN Convention on the Rights of the Child (CRC) is an international treaty that outlines the civil, political, economic, social and cultural rights of all children. It recognises children's right to be safe, heard, healthy, and educated, and to grow up free from violence and discrimination. Australia ratified the Convention in 1990, agreeing to uphold and protect the rights of all children in law, policy and practice.
Victim-blaming	Refers to comments and suggestions that directly or indirectly, intentionally or unintentionally, put blame on the person experiencing violence for the abuse they have or continue to experience.
Victim-survivor	A person who has experienced family violence. This includes anyone with disability who may face increased risk due to systemic barriers, discrimination, or dependence on support relationships. Children are recognised as victim-survivors in their own rights.

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