



Three Critical Asks for Gender Equity and Safety

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Women With Disabilities Australia (WWDA) calls on all political parties to commit to systemic reforms addressing the intersection of gender, disability, and violence. Our platform sits within the context of our recommendations for transformative reform through the Disability Royal Commission (DRC) and is grounded in data from the 2023 NDIS Review, Australia's Disability Strategy and The National Plan to End Violence against Women and Children 2022–2032.

ASK 1: Funding for a disability-led gender-based violence working group

Problem

Women with disability experience disproportionately high levels of violence, including intimate partner violence, sexual assault, and stalking as well as specific forms of disability-based violence. We are twice as likely as women without disability to experience sexual violence in our lifetime and are more likely to experience intimate partner violence (36% compared to 21% of women without disability)¹. Structural barriers and ableism and gendered oppression further expose women with psychosocial or intellectual disability to violence, with 72% experiencing violence since age 15 and 45% subjected to sexual assault, often in domestic or institutional settings where perpetrators are frequently known to them².

Mainstream services and advisory groups often lack disability expertise and are inaccessible, leaving survivors without trauma-informed support. The short-term funding of disability-specific groups and projects limits potential for transformative impact and workforce succession planning.

Solution

Establish a disability-specific gender-based violence working group led by Disability Representative Organisations (DROs), with the core function to support the

implementation of The National Plan to End Violence against Women and Children 2022–2032³.

Why this matters

- The DRC found that women with disability face systemic dismissal of their reports due to stereotypes about their credibility, perpetrators often performing carers roles, and lack of accessible crisis accommodation⁴.
- About 90 percent of Australian women with intellectual disability are understood to experience sexual abuse, 68 percent before they reach adulthood, typically perpetrated by a carer⁵.
- The National Plan to End Violence Against Women lacks disability inclusion metrics – through targeted initiatives this advisory group will ensure the Disability Lens achieves intended aims.

What we are asking for

1. Dedicated funding for the duration of the National Plan for DRO led evidence-based resources and programs for the National Plan’s disability implementation.

Target: Minister for Social Services | *Deadline:* First 100 days of government

ASK 2: Reform legal definitions of ‘domestic violence’

Problem

Violence against women with disability frequently occurs in residential settings that are often closed to public scrutiny. Current laws exclude carer relationships and disability-specific abuse, for example forced medication which is currently enabled through policies and legislation⁶. The Disability Royal Commission recommended that laws about domestic and family violence be changed to better include the experiences of women with disability. This recommendation has not been fully accepted.

Solution

1. Task the Disability Reform Ministerial Council or the Family, Domestic and Sexual Violence Working Group under the Standing Council of Attorneys-General, with specific remit for implementing recommendation 8.24 of the

Disability Royal Commission: 'Disability-inclusive definition of family and domestic violence.

2. Redefine 'domestic violence' in the Family Law Act to include all relationships and institutional settings.

Why this matters

- Only 3 out of 8 states and territories⁷ recognise coercive control⁸ – none address disability-specific control tactics like withholding assistive technology.
- The DRC found systemic failures in addressing violence against women with disability, particularly in institutional settings⁹.

What we are asking for

1. Task the Disability Reform Ministerial Council or the Family, Domestic and Sexual Violence Working Group under the Standing Council of Attorneys-General, with specific remit for implementing recommendation 8.24.
2. Allocate \$500,000 for DROs to co-design training for judges on disability-based violence.

Target: Attorney-General | *Deadline:* Legislation introduced by 2026

ASK 3: Gender-responsive foundational supports for chronic health conditions

Problem

Women are more likely than men to live with multiple chronic health conditions (CHCs)¹⁰, including autoimmune disorders like lupus, rheumatoid arthritis, and multiple sclerosis, which are four times more prevalent in women¹¹. Despite this, adults with CHCs account for 56,000 declined access requests— over half of all people deemed ineligible from the Scheme inception until 2022¹². The proportion of declined access requests related to CHC conditions is increasing, and is now estimated to be closer to 75%¹³. This issue is important to our members. In a recent survey conducted by WWDA, WWDACT and WDV most respondents had a chronic health condition, but many did not have access to the NDIS¹⁴. Nearly 20% had applied but were not granted access to the Scheme¹⁵. Many people with disability related to CHC are not getting the support they need from either health or disability services.

Solution

- By 2026, establish gender-responsive foundational supports in all states/territories that specially address chronic health conditions, ensuring:
 - 80% of participants report improved access to tailored supports
 - Reduced rates of preventable hospitalisations related to chronic health conditions

Why this matters

- Autoimmune diseases are a leading cause of death for women under 65¹⁶.
- Many CHCs are episodic and require flexible support models. In current disability/health systems, these are either fragmented or completely absent¹⁷.

What we are asking for

1. 30% of foundational support funding being directed to address disability connected to conditions with gendered prevalence. In addition to the autoimmune conditions named above, some examples include long COVID¹⁸, chronic fatigue syndrome¹⁹, fibromyalgia²⁰ and lymphoedema²¹.
2. Embedding episodic disability pathways in the Foundational Supports Strategy:
 - Mobile outreach teams for rural/remote areas
 - “Flare-up” funding pools for episodic conditions
 - Mandatory training on gendered diagnostic bias
 - Trauma-informed approaches to access and delivery

Target: Disability Reform Ministerial Council | *Deadline:* 2026

References

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- ⁵ JM Maher and others, Women, Disability and Violence: Barriers to Accessing Justice: Final Report (Australia's National Research Organisation for Women's Safety (ANROWS), 2018).
- ⁶ Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, Final Report: Executive Summary, Our Vision for an Inclusive Australia and Recommendations, p. 107.
- ⁷ L Twyford, 'Coercive Control Is Insidious and Costing Lives. Here's What States, Territories and the Commonwealth Are Doing About It', ABC News, 13 April 2024.
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- ¹² Independent Review into the National Disability Insurance Scheme, Working Together to Deliver the NDIS- Supporting Analysis (Commonwealth of Australia, 2023), p. 29.
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- ¹⁴ Women with Disabilities ACT, Women with Disabilities Australia, and Women with Disabilities Victoria., Survey Report Foundational Supports: For Submission to Part 1 of the Foundational Supports Consultation (General Supports), 4 December 2024, p. 15.
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- ¹⁸ J Cohen and van der Meulen Rodgers Y, 'An Intersectional Analysis of Long COVID Prevalence', *International Journal for Equity in Health*, 22.1 (2023), p. 261, doi:10.1186/s12939-023-02072-5.
- ¹⁹ Mònica Faro and others, 'Gender Differences in Chronic Fatigue Syndrome', *Reumatologia Clínica*, 12.2 (2016), pp. 72–77, doi:10.1016/j.reuma.2015.05.007.
- ²⁰ Caroline A. Arout and others, 'Gender Differences in the Prevalence of Fibromyalgia and in Concomitant Medical and Psychiatric Disorders: A National Veterans Health Administration Study', *Journal of Women's Health*, 27.8 (2018), pp. 1035–44, doi:10.1089/jwh.2017.6622.
- ²¹ Australian Institute of Health and Welfare, Towards an Estimate of the Prevalence of Lymphoedema in Australia (Australian Government).