Forging New Collaborations
A Guide for Rape Crisis, Domestic Violence, and Disability Organizations

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Executive Summary

People with disabilities experience domestic and sexual violence at alarming rates. Yet they are less likely to receive the services, supports, and justice that their counterparts without disabilities receive. However, victim services and disability organizations across the country have begun collaborating to ensure people with disabilities have equal access to the community-based supports and criminal justice responses that are critical to surviving violence and healing after trauma. The U.S. Department of Justice’s Office on Violence Against Women (OVW) has led this effort by providing communities with funding for collaborative efforts to improve services for survivors with disabilities. Through its Accessing Safety Initiative, Vera’s Center on Victimization and Safety supports these efforts by providing training and consultation on collaboration and capacity-building at the intersection of violence and disability.

By the end of 2010, OVW’s Disability Grant Program had fostered more than 40 such collaborations. This report is based upon Vera’s work with and observations of those collaborations from 2006 through 2010, as well as in-depth interviews with representatives from 10 of the groups and an extensive literature review on effective collaboration. It is designed for policy makers, practitioners, and first-responders interested in using collaboration to address violence against people with disabilities. It offers concrete recommendations for how to build effective collaboration between victim services and disability organizations, practical strategies for overcoming common obstacles, and steps to begin the collaboration process.
FROM THE CENTER DIRECTOR

In the 1990s, public and private funders began encouraging social service organizations to collaborate with one another after recognizing that such an approach could create a more seamless social service delivery system and better leverage communities’ limited resources. Unfortunately, as the idea gained momentum and more funders made collaboration a requirement, many service providers, pressed for time, resources, and support, lost sight of what it means to work in genuine collaboration and instead engaged in coordinated efforts that fell short of addressing the gaps in social service delivery systems that collaborations can solve. Today, organizations too often come together because a funder tells them to do so. But, there is a more compelling reason to collaborate, especially when working to improve services for people such as survivors of violence with disabilities who are caught among multiple service delivery systems: collaboration works.

No one organization offers all the services survivors with disabilities need in the aftermath of violence or possesses all the expertise needed to provide those services in a way that is safe and accessible. There is little chance that funding is forthcoming to create the type of organization that could handle the full range of services. That’s why victim services and disability organizations across the country are forging collaborations, expanding their understanding of survivors’ needs and combining their resources to create a system of services that is more complete and integrated and that better meets the needs of survivors with disabilities.

This report examines the experiences of collaborative efforts to improve services for survivors with disabilities and sheds light on lessons learned from their work. Perhaps the most salient of these is that collaborating does not just mean working together. It means coming together and creating a new approach that encompasses the perspectives of each partner and prioritizes safety, healing, and accessibility—factors that are essential to meeting the needs of survivors with disabilities.

Nancy Smith
Director, Center on Victimization and Safety
“The likelihood that any woman with a disability who experiences sexual assault in Illinois will be treated compassionately and in an individualized manner is very, very high now. Nobody could have achieved this alone. It’s the result of bringing the right people to the table, building on their strengths, and committing to the tough conversations and hard work.”

—Teresa Tudor, Illinois Department of Human Services
Maria¹ is a woman with a physical disability who lives in a small town in the United States. She employs a personal care attendant (PCA) who assists her with daily activities such as bathing and getting dressed and drives her to work. When her PCA of three years takes a two-week vacation, Maria’s local disability organization helps her find a temporary replacement. During the first week of working for Maria, the temporary PCA sexually assaults her.

Distressed and unsure about what to do, Maria contacts the disability organization and speaks to a staff person named Marcus. Understanding only that she wants a new PCA, Marcus begins working to find her an immediate replacement, but he estimates that it may take a few days. Maria tells Marcus that she is going to fire the temporary PCA and wait for the new one. Marcus reiterates that it could take a few days and urges Maria to reconsider. Maria ends the phone call still distressed and upset and now frustrated.

She desperately wants to talk to somebody about what happened but does not feel that Marcus would understand and does not know where else to turn. She has the added stress of knowing she will miss work until she gets a new temporary PCA—a person she’s not sure she can trust.

Maria’s story is not exceptional. Across the country, survivors with disabilities who reach out for help are met by service providers from both disability and victim service organizations who are not fully equipped to work at the intersection of violence and disability. As a result, these survivors face formidable barriers to getting the services and supports they need for safety and healing. These obstacles can have dangerous consequences. For example, compared to women without disabilities facing similar circumstances, women with disabilities who lack access to services experience violence that is more severe, lasts for longer periods, and occurs at the hands of a larger number of perpetrators.²
Introduction

Although fictional, Maria’s story represents experiences that are all too common. Fortunately, this is starting to change. Domestic violence programs, rape crisis centers, disability organizations, and criminal justice agencies are increasingly recognizing that people with disabilities who have survived violence or sexual assault cannot be effectively served in their communities if victim services and disability organizations continue to work in isolation from each other. Across the country, communities are finding that the solution comes from combining the expertise of victim services and disability organizations. As a result, these organizations are joining forces, sharing expertise and other resources to improve their individual and complementary responses to survivors with disabilities.

The U.S. Department of Justice’s Office on Violence Against Women (OVW) has been a leader in this trend. Since 2006, its Education, Training and Enhanced Services to End Violence Against and Abuse of Women with Disabilities Grant Program has provided three-year grants to 50 communities throughout the United States to build multidisciplinary collaborations aimed at improving services for survivors with disabilities. OVW partnered with the Vera Institute of Justice to provide these communities with intensive training and consultation and to share lessons learned from their work in the field.

This report is about lessons learned from these collaborations. It is based on Vera staff’s observations of and work with Disability Grant-funded collaborations from 2006 through 2010 and in-depth interviews with representatives from 10 of the collaborations. It begins with an overview of what it means to collaborate—both generally and at the intersection of violence and disability. Next, it explores the factors that contribute to success-
ful collaboration and the main challenges collaborators face, offering ideas for how to overcome them. Finally, it presents an argument for why, despite the obstacles, communities should embrace collaboration to address this form of violence against women.

What Does It Mean to Collaborate?

Michael Winer and Karen Ray, coauthors of The Collaboration Handbook, define collaboration as “a mutually beneficial and well-defined relationship entered into by two or more organizations to achieve results they are

FEDERAL EFFORTS TO ADDRESS VIOLENCE AGAINST WOMEN WITH DISABILITIES

The U.S. Department of Justice’s Office on Violence Against Women is working to address violence against women with disabilities and Deaf women through its administration of the Education, Training and Enhanced Services to End Violence Against and Abuse of Women with Disabilities Grant Program. The purpose of this grant program is to create sustainable, systemic change that will result in effective services for individuals with disabilities and Deaf individuals who are victims of sexual assault, domestic violence, dating violence, and stalking and hold perpetrators of such crimes accountable. This grant program provides funding to local collaborations made up of organizations that serve people with disabilities and those that serve survivors of domestic and sexual violence, as well as state-level collaborations comprising coalitions and advocacy organizations that are working to improve services within multiple communities across their state. The collaborations engage in an intensive planning and development phase to strengthen and formalize their collaboration, identify strengths and gaps in their individual and collective capacities to serve survivors with disabilities, and develop a strategic plan to address the gaps they have identified. The collaborations then go on to implement the initiatives outlined in their plan.
“Collaboration means counting on each other to get the work done instead of thinking we have to bear the burden alone, or do this work alone.”

—Amy Walker, Self-Advocate

more likely to achieve together than alone.”

Winer and Ray identify the elements of an effective collaboration, including a commitment to building a strong relationship and shared goals; a jointly developed structure and allotment of responsibility; mutual authority and accountability; and the sharing of resources and awards. Most important, members should be committed as much to common objectives as they are to their individual organizational goals.

Following this definition, the multidisciplinary collaborations fostered through OVW’s Disability Grant Program began with frequent in-person meetings (up to four per month) over three to six months. During this initial time, participants focused on learning about each agency involved, including the services they provide, their organizational structure, and the philosophies, values, and language that guide their work. They then trained one another in their respective areas of expertise and developed a mutual understanding of how these intersect in the lives of women with disabilities.

Once this understanding was established, they developed a shared vision for their work that merged the interests of their organizations with the needs of survivors with disabilities. The next step was to identify ways of working together to achieve their vision. This included agreeing to respective roles and responsibilities and establishing optimal methods for communicating with one another, sharing relevant information with their agencies, and making joint decisions. To ensure that they stayed accountable to the process and each other, they recorded their decisions and work plan in a formal document called a collaboration charter. In many of the communities, the charter served as a living document that they relied upon and revisited throughout their journey.

Despite their similar approach, the collaborations var-
ied considerably in purpose, size, and membership. Some, such as Kansas City’s Safety First Initiative, came together to enhance services to better meet the needs of all women with disabilities who have experienced domestic violence, sexual assault, and stalking. Other collaborations focused on women with specific disabilities or specific forms of violence. The Open Door Initiative, in Lancaster County, Nebraska, for example, formed to better meet the needs of survivors of domestic violence with mental health concerns; Intersections in Boulder, Colorado, focused on men and women with disabilities who have experienced sexual assault.

These collaborations have ranged in size from two to seven organizations, with the average of four involved. They have included a variety of community-based non-profits, such as domestic violence programs, rape crisis centers, statewide domestic and sexual assault coalitions, independent living centers, Arcs (organizations that advocate for people with disabilities and their families), Goodwill Industries, and community mental health providers. They have also included government entities, such as law enforcement agencies and prosecutor’s offices. Whatever its size or composition, each collaboration serves as a laboratory for developing an understanding of the factors that are needed to improve services for survivors with disabilities.

What Contributes to a Successful Collaboration?

Research has identified 20 factors that contribute to the success of any collaboration. These include the environment in which the collaboration exists, its purpose, the characteristics of the organizations and people involved,
VIOLANCE AGAINST WOMEN WITH DISABILITIES AND DEAF WOMEN

Women with disabilities experience domestic violence, sexual assault, and stalking at alarming rates. Because the category of disability encompasses a broad and diverse range of disability types, including cognitive, physical, sensory, and psychiatric, it is difficult to make general statements about the rate of victimization among women with disabilities. Research in this area suggests that incidence and prevalence of victimization varies by disability type. For example, people with cognitive disabilities are disproportionately affected by sexual violence. One study found that individuals with developmental disabilities, for example, are up to 10 times more likely to experience sexual assault than adults without these disabilities. In another study of adults who had a developmental disability, as many as 83 percent of females and 32 percent of males were victims of sexual assault. Research on people with physical disabilities, on the other hand, suggests they experience rates of domestic violence that are equal to or higher than people without physical disabilities. One study found that women with and without physical disabilities were equally likely (62 percent) to experience physical or emotional abuse from intimate partners. However, this research also showed that for women with disabilities and Deaf women, the abuse is different. Women with disabilities, compared to people without disabilities, are more likely to experience more severe victimization, experience it for a longer duration, be survivors of multiple episodes of abuse, and be survivors of a larger number of perpetrators.

There are a number of factors that contribute to people with disabilities experiencing higher rates of domestic and sexual violence and higher recurrence rates. Isolation within a community, reliance on caregivers for personal care, and limited transportation options can create unsafe situations for people with disabilities. Perpetrators may perceive people with disabilities as easy targets because of societal stereotypes and extremely low rates of prosecution of perpetrators of crimes against people with disabilities. Finally, the severe underreporting of these crimes serves to further compound the overall inability of the system to address this problem.
the process and structure of the collaborators’ work, the quality and frequency of their communication, and the supportive resources available. Many useful resources discuss these factors in detail. Collaboration: What Makes It Work, by Paul W. Mattessich and colleagues, and the Collaboration Handbook: Creating, Sustaining, and Enjoying the Journey, by Michael Winer and Karen Ray, are two such resources, providing step-by-step guidance. The wisdom of these general resources combined with the experiences of the collaborations funded through OVW’s Disability Grant Program suggest that the following elements are essential for successful collaboration to improve services for survivors with disabilities.

**SHARED UNDERSTANDING, VALUES, AND VISION**

Each agency participating in a collaboration will bring its own set of values, philosophical foundations, and knowledge. Even if they seem similar, these often differ significantly. For instance, the definition of “intimate partner” may vary from organization to organization: disability programs are often inclined to include abuse by hired caregivers in the definition; domestic violence programs tend to restrict the term to people in romantic relationships. Recognizing such differences is a first step to finding common ground, a prerequisite to developing a collaborative vision.

**APPROPRIATE CROSS-SECTION OF MEMBERS**

A successful collaboration will focus on areas where members have both expertise and influence. For instance, a collaboration that hopes to influence the delivery of mental health services should include a representative from that system. Additionally, it should create opportunities for people with disabilities and survivors to participate in the collaboration. This will ensure that

“A healthy collaboration has a culture of teamwork, sharing, openness, learning, problem-solving, diversity, mutual respect, and commitment with an intentional movement towards a common vision.”

—Shirley Paceley, Blue Tower Training and End Violence Against Women International
the collaboration’s efforts are based in the experiences of the populations for which it will have the most impact. A collaboration may have to add or remove members to ensure that it has the necessary expertise and its representatives possess the capacity and influence to implement the changes.

INvolvement of staff at all levels of the organization
To change the way it delivers services, an organization must enhance both its policies and practices and its responses to individual cases. Everyone involved needs to be represented, from the executive director who can endorse changes in policies and procedures to front-line staff responsible for implementing them. Ideas and concerns of staff from all layers of the organization should be solicited and incorporated into the collaboration’s work to ensure its acceptance and support.

Clear roles and responsibilities
Achieving the collaboration’s vision takes a lot of work, and each member has a role to play. Each organization must commit to the collective vision and work plan. Each one needs to commit a staff person and resources such as time, meeting space, and materials. Each has unique contributions to make based on its expertise. Disability organizations, for example, may share their knowledge about working with people with disabilities, while victim service groups bring their insights about violence against women. Successful collaborations jointly define each member’s roles and responsibilities and hold one another accountable for meeting them.

Open and frequent communication
Honest and frequent communication among collaborators prevents misunderstandings, builds relationships,
and ensures that everyone has an equal understanding of the initiative’s work. Collaborators should discuss their perspectives on the importance of communication and come to an agreement about those that will guide their work together. It is also valuable to have a meeting schedule and to articulate how members should communicate between meetings. A collaboration aiming to improve services for survivors with disabilities needs to develop a confidentiality agreement to ensure that the group’s activities do not compromise survivors’ privacy and safety. This is particularly important if information about survivors with disabilities is being shared, given the existence of mandatory reporting laws for vulnerable adults in some states. A successful collaboration becomes familiar with the laws in its jurisdiction and fashions a confidentiality plan that reconciles its legal responsibilities with its ethical obligations to survivors, creating a clear understanding among its members about what information must be and what cannot be kept confidential.

CLEAR DECISION-MAKING AUTHORITY AND PROCESS
To increase ownership among all its members, a collaboration needs to articulate who can make decisions and what process to follow to arrive at them. While it is neither realistic nor feasible for every member of the collaboration to be involved in every instance, all members must be involved in decision making that affects the group’s fundamental direction, such as developing its mission, adding partners, and determining how to allocate resources. While many decision-making processes exist, Vera staff have observed consensus to be the most effective. It does not mean that every member is in total agreement but, instead, requires that nobody opposes the decision. This allows everyone’s voice to be included, while moving the process forward efficiently.
“Our conflict resolution plan has allowed us to address concerns head on. When issues come up, we’ve all felt safe enough to just say, ‘I don’t agree with this. I have concerns about it.’ We get all the issues out on the table, discuss them with passion, clear them up, and move on.”

—Cheryl Atwood, OPTIONS for Independence

ABILITY TO MANAGE CONFLICT AND COMPROMISE

Every collaboration inevitably encounters conflict; the healthiest ones embrace it. Conflict or exploring differing ideas about a subject is an essential part of creating a new understanding and approach. For a collaboration working to improve services for survivors with disabilities, this means openly addressing varying perspectives about core issues such as mandatory reporting, definitions of intimate partners, strategies for securing safety, and balancing legal requirements for accessibility with those that are not mandated by law but that promote inclusive and accessible services for all people with disabilities. Through this process, a collaboration reaches compromises on crucial issues that ultimately provide solutions incorporating multiple perspectives that are representative of the multi-faceted reality of survivors’ lives.

MUTUAL RESPECT, UNDERSTANDING, AND TRUST

Members of a collaboration must respect and trust one another to be able to engage openly and honestly in discussions and group processes that are necessary to create a multidisciplinary approach. This is especially true for collaborations that seek to bring together organizations that are often guided by different philosophies, values, cultures, structures, and procedures, as is often the case with disability and victim service organizations. To build this trust and respect, OVW-funded collaborations have helped their members learn more about the constituent organizations by providing time on meeting agendas for agency-specific presentations and by organizing agency tours. In addition, collaborations have created opportunities for members to get to know one another. These opportunities have taken many forms, from an icebreaker or game at the beginning of a meet-
ing to an event specifically organized to encourage networking. Members have also strengthened their bonds by traveling together to conferences and trainings.

**SUFFICIENT RESOURCES**

The old adage, “If you want to go fast, go alone. If you want to go far, go together,” acknowledges that working collaboratively takes much more time than working alone. But it can also be far more effective.

A collaboration that melds diverse and sometimes conflicting perspectives and goals requires a strong foundation built through intentional conversation and maintained by deliberate planning and execution. This requires a substantial commitment of time from member groups and the individuals who represent them. People involved in the collaborative efforts highlighted in this guide dedicated an average of 12 hours a month to the work. Most said they spent six to eight of these hours attending working group meetings. The rest was spent keeping their respective organizations informed of the collaboration’s work, building member support, and making policy and practice changes within their agency to better achieve the goals of the collaboration.

Other necessary resources include space, money, and technology. An accessible meeting space is essential, and many collaborations rotate their meetings sites so that no one organization is always the host. A small amount of money may be required to cover the costs of any accommodations members need to participate, such as American Sign Language interpreters. Some collaborations have benefitted from using online technologies to increase the efficiency of working together. These include document storage and sharing programs that allow members to easily access and edit documents and scheduling tools that help organizers more easily find mutually convenient meeting times. When considering
any technology, the access needs of people with disabilities who will be using them must be evaluated, along with privacy and security issues.

**SKILLED LEADERSHIP**
The collaborations funded through OVW’s Disability Grant Program were fortunate to have a full-time, dedicated staff person to oversee and direct their work. While most communities do not have the funding resources for full-time staff, successful collaborations need people at the helm who have experience coordinating multidisciplinary work. The ideal candidate should be able to communicate, organize, build relationships, manage strong personalities, and embrace multiple work styles. Experience in project management and facilitation, an ability to handle conflict and find common ground, and tact are also valuable.

**Common Challenges to Collaborating**

Collaborations at the intersection of violence and disability face a variety of obstacles, some of which are unique to the nature of their work. This section highlights the principal challenges and shares strategies that OVW-funded groups have found useful in overcoming them.

**LACK OF AWARENESS AND SUPPORT**
Building awareness and support among stakeholders is critical to the success of any effort. It is particularly important to efforts that require organizations and individuals to commit time to the endeavor and to change their operations. Collaborations focused on improving services for survivors with disabilities may experience challenges in getting this level of commitment. There is little
research on the subject of violence against people with disabilities, making it difficult to rely on data to make the case. These collaborations also struggle to draw upon real-life experiences to highlight the need for change, as many victim service providers and disability advocates do not currently serve survivors with disabilities.

There are innovative ways to ensure that collaborators learn about the barriers facing survivors with disabilities and prioritize their work together. OVW-funded collaborations start by having direct conversations with their members to identify what motivates them and their organizations to participate. This allows them to structure their work around those motivating factors. Some also conduct interviews and focus groups with staff and the people they serve to gather information about what’s working and what’s not working when serving survivors with disabilities. They may also identify survivors with disabilities in their communities who are interested in their work and create opportunities for them to share their experiences and advocate for change. The collaborations that have been most successful at gaining and maintaining support for their work have used a combination of these strategies.

**INSUFFICIENT TIME**

In an era when nonprofits are being asked to do more with less and staff members are overcommitted, how can collaborations ensure organizations commit the time required to fully participate? The experiences of the OVW grantees point to some possible answers. At the beginning of their work together, these collaborations compile a list of contributions and commitments that each member organization must meet in order to participate. Leaders of potential member organizations are asked to sign off on the list. The agreements typically include monthly estimates of time commitments. Collaborations that

“Plan on spending a lot more time than you think the work is possibly going to take.”

—Kathleen Cammarata, VIBS Family Violence and Rape Crisis Center
have achieved a high degree of trust among members and space for honest communication refer back to these agreements, seeking recommitments from members who are struggling to make the time for the work.

Organizers have created structures to ensure productivity. These include:

- clear and attainable goals and time lines,

- work groups that make the best use of people’s expertise and skills,

- agendas to make the best use of meeting times, and

- allocating time for information sharing.

Collaborations also have set time aside to reflect on their accomplishments and to celebrate them. These strategies have helped members and their supervisors to view their time spent together as a good investment.

EXCLUSION OF PEOPLE WITH DISABILITIES AND SURVIVORS

Involving the people who are affected by the work is important, but ensuring that these members are engaged in meaningful ways is critical to a collaboration’s success. Without careful thought to the selection of members and the support afforded them, collaborations run the risk of tokenizing service recipients by assuming their mere presence at meetings will enrich the work. Instead, a collaboration should give these members an equal voice and honor their expertise in a way that allows them to contribute to the work in meaningful ways. A collaboration should be prepared to offer additional support to these people, many of whom may not have had previous experience with this type of work, so they can fully participate. Collaborations should consider partnering with

“Always include women with disabilities in your work in a meaningful way. The people who are most affected by the work and the decisions made must be at the table to be effective.”

—Stephanie Sanford, Kansas Association of Centers for Independent Living
local self-advocacy groups to identify potential members and to offer leadership development training to support their involvement.

FAILURE TO MAKE MEETINGS AND EVENTS SAFE AND ACCESSIBLE

To ensure that everyone can participate fully in a collaboration, organizers must ensure that its meetings and other activities are accessible to people with disabilities and structured in ways that create a safe place for people who have experienced violence. This often requires additional planning and preparation. When organizers do not have both access and safety in mind as they map out the collaboration’s initial meetings, they run the risk of creating barriers to participation or an unwelcoming environment that could alienate people who are critical to the success of the collaboration’s work.

Collaborations funded by OVW’s Disability Grant Program have avoided this issue by committing to convene safe and accessible meetings from the onset of their work, drawing on the unique expertise of each organization to do so. For example, members from disability organizations help to identify accessible meeting locations, which might include using their offices as a place to meet, or helping collaborators make their offices more accessible. They also may assist organizers in meeting any accommodation requests members may make, which could include anything from American Sign Language interpreters to being flexible about health-related absences. These experts can also help organizers to set up meeting rooms to ensure maximum access for all participants and to structure agendas so everyone can fully participate, which might involve going slower, repeating information, and reviewing what occurred at previous meetings, depending on the members’ needs.

Similarly, a collaboration should also tap into members’
expertise to share best practices for keeping survivors’ information confidential—a critical strategy for ensuring safety. This includes creating guidelines for maintaining the confidentiality of information shared during meetings. Collaboration leaders should also make sure support and other resources are available to collaboration members when topics are discussed that may evoke an emotional response or trigger one’s past experience of abuse. Creating safe and accessible meetings promotes the full participation of members from different disciplines and backgrounds. Such inclusivity is central to offering effective services for survivors with disabilities in any community.

**LIMITED OR NO FINANCIAL RESOURCES**

Because funding for social services is on the decline and few grants exist to fund services for survivors with disabilities, many collaborations struggle to develop and sustain new services and positions that serve this population exclusively. Recognizing this challenge, OVW has encouraged its grantees to focus on improving what currently exists rather than creating new, specialized services. In this spirit, collaborations have focused on enhancing organizations’ existing budgets, training programs, policies, and practices to better address disability and violence. They have also worked to better share resources and coordinate services between member organizations. This way, the improvements they have made are not dependent on special funding; they have been integrated into the fabric of organizations and systems, making smarter use of existing resources and ensuring that their changes will be sustainable.
Why Collaborate?

Although collaborations aimed at improving systemic responses to survivors with disabilities involve lots of potential obstacles, the collaborations funded by OVW have discovered that many of these can be avoided by preemptive actions that address them before they become insurmountable. Similarly, they have found that the costs of collaboration in time and resources are outweighed by the benefits—changes no member group could have accomplished alone.

OVW-funded collaborations have conducted reviews to increase the accessibility and safety of their partner organizations; implemented screening tools in disability organizations to identify survivors; created policies and procedures within victim services to discover and address the accommodation needs of people with disabilities; and launched comprehensive training programs to ensure staff have the necessary knowledge and skills to work at the intersection of violence and disability. They have also developed interagency agreements on confidentiality and information sharing, liaison systems, cross-disciplinary case reviews, and other models of co-advocacy to enhance the way disability and victim services work together to better serve these survivors.

As a result, in these communities, survivors with disabilities who have historically only encountered barriers when they sought help are now finding support and resources. No matter where they first reach out, they receive immediate crisis intervention and long-term support that is safe, accessible, and responsive to their needs. In addition, the service providers who received OVW collaboration grants feel better equipped to serve this population and supported in their own development. Even in a period of scarce funding, because of a

“Collaborating allows you to accomplish things together that you would not be able to accomplish by yourself.”

—Allison L. Iser, King County Coalition Against Domestic Violence
commitment to collaboration, under-resourced organizations across the United States are able to report remarkable achievements that make it possible for survivors with disabilities to get the help that they need.

**Next Steps**

Building a successful collaboration to address the intersection of violence and disability begins with a dialogue: first within an agency and then among potential community partners. Dialogue within an agency should include an examination of its culture and attitude toward survivors with disabilities as well as some consideration of its accessibility and responsiveness. An agency that wants to reach out to potential community partners might begin by inviting them to tour the agency or to participate in trainings offered there. As the relationship grows, agencies will be increasingly able to bridge the differences in their services, philosophies, and approaches. Eventually, all the potential collaborators can determine if they can commit the time and resources necessary to build a formal process to fill critical gaps in the community’s services, thereby improving the lives of survivors with disabilities.
ENDNOTES

1 Maria is a fictitious character whose story is reflective of the plight of victims of sexual abuse with disabilities.


4 Ibid.


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