

# NEW DVIRC DISCUSSION PAPER

## Violence-Induced Disability

**How many women experience ... disability as a result of family violence? Well we don't know. No one is counting** (Jennings 2004: 3).

**We are women of broken spirits, broken bodies and broken minds. Not so much because of impairment or disability, but as a result of violence...** (Doe et al 1999: 1).

Much disability is actually caused by violence. However, the most common connection made when disability is discussed in research literature is that disability is a risk factor affecting the likelihood of violence being perpetrated against women. This Discussion Paper considers violence and disability in a causal relationship.

The paper explores the relationship of experiences of violence to particular disabilities, for example cerebral palsy, behavioural and learning disabilities in children, acquired brain injury, and the effects of depression and anxiety in older years. We hear from women and children about their own experiences. The paper also takes a look at government policy and practice.

This paper is written primarily to raise public awareness of violence-induced disability. It is aimed at a broad audience including policy-makers, educators and service providers, and women who have experienced violence-induced disability.

**Available Now**

Violence is preventable and disability arising from violence is also preventable.

### *Violence-Induced Disability: the Consequences of Violence against Women & Children*

DVIRC Discussion Paper (72pp) Available Now - \$20 each (including postage)

Contact DVIRC on (03) 9486-9866

Email [dvirc@dvirc.org.au](mailto:dvirc@dvirc.org.au)

Fax DVIRC on (03) 9486 9744

Order form for DVIRC's 'Violence-Induced Disability' Discussion Paper - fax to 03 9486 9744

• DVIRC •

292 Wellington St.,  
Collingwood, 3066

T: 9486 9866

F: 9486 9744



Tax Invoice  
ABN 31 202 397 579

Name: .....

Organisation: .....

Address: .....

Postcode: .....

Phone: ..... Fax: ..... Email:.....

Number of Copies: ..... Total: \$.....

Payment by Credit Card: Visa  Mastercard  Bankcard  please tick

Name on Card: .....

Card Number:             Expiry Date: .....

Amount: \$..... Signature of Card Holder: .....

fax-back order form

