

7 JULY 2026



# Disability Representative Organisations forum

Second Action Plan consultation report

# Purpose of the session

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The Disability Representative Organisations Forum met with representatives of the Domestic, Family and Sexual Violence Commission to provide a specific focus on disability considerations to inform the development of the Second Action Plan under the *National Plan to End Violence against Women and Children 2022–2032*. Discussions focused on exploring how mainstream and specialist systems currently respond and where gaps remain, as well as priorities, barriers and opportunities in addressing domestic, family and sexual violence for women and children with disability.

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## Executive summary

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A strong and consistent theme throughout the consultation was that women and girls with disability continue to face significant barriers to safety, support and recovery across mainstream and specialist systems. Participants described accessibility and inclusion gaps across domestic, family and sexual violence, housing, disability and government services, often requiring women and girls with disability to navigate multiple disconnected systems while experiencing violence. There was a strong view that the Second Action Plan should better recognise the unique experiences of women and girls with disability, including the role of ableism, systemic discrimination and structural disadvantage in increasing vulnerability to violence.

Housing, service accessibility and system fragmentation emerged as major concerns. Participants highlighted critical shortages of accessible crisis accommodation and long-term housing, barriers to maintaining supports during periods of crisis, and poor coordination between disability, housing and violence response systems. Concerns were also raised about the role of government systems, including the National Disability Insurance Agency (NDIA) and Services Australia, with participants describing policies, processes and workforce capability gaps that can create or exacerbate safety risks. Many called for stronger safeguards, improved system coordination and more accessible and inclusive service delivery.

Another dominant theme was the need to better recognise disability-specific experiences of violence. Participants emphasised that existing definitions of family and domestic violence and coercive control do not adequately capture forms of violence experienced by women and girls with disability, including abuse perpetrated by carers and support workers, violence occurring in supported accommodation settings, restrictive practices and other forms of coercion linked to dependency and support needs. There were strong calls for the Second Action Plan to align more closely with the Disability Royal Commission recommendations and adopt a stronger human rights-based approach, including greater accountability through alignment with Australia's Disability Strategy and the Convention on the Rights of Persons with Disabilities.

Participants also highlighted the importance of addressing the underlying drivers of violence through prevention, education and improved social and economic supports. Ableism, poverty, social isolation and dependency were identified as factors that can increase vulnerability to violence and make it more difficult to leave unsafe situations. Stakeholders emphasised the need for trauma-informed and disability-responsive responses, stronger economic security measures, and accessible education on rights, consent, healthy relationships and bodily autonomy. Participants also stressed the importance of ensuring the Second Action Plan better reflects the experiences of children and young people with disability, women from culturally and linguistically diverse backgrounds, and those experiencing multiple and intersecting forms of disadvantage.

# What we heard

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## Overarching themes

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- Women and girls with disability are experiencing accessibility and inclusion gaps across systems.
- The Disability Lens on the First Action Plan does not address the unique factors women and girls with disability experience in situations of violence, including crisis accommodation and transportation.
- Housing is a critical concern, with major gaps in accessible crisis accommodation, shortages of social and public housing, and inappropriate assumptions that the National Disability Insurance Scheme (NDIS) can address housing needs.
- Often the onus is placed on women and girls with disability to navigate multiple disconnected systems.
- Significant concerns were raised about the NDIA, Services Australia and other government systems creating or exacerbating safety risks.
- Disability-specific experiences of violence must be recognised in definitions of family and domestic violence (FDV) and coercive control.
- The Second Action Plan will need a greater recognition of ableism and systemic discrimination as key drivers of violence.
- The Second Action Plan will need stronger alignment with the Disability Royal Commission recommendations, Australia's Disability Strategy and the Convention on the Rights of Persons with Disabilities to support measurement of outcomes and stronger accountability mechanisms.
- Stakeholders voiced the importance of trauma-informed and disability-responsive approaches to mental health impacts.
- Financial insecurity identified as a key factor contributing to vulnerability and dependence on perpetrators.
- Strong calls for education on rights, consent, healthy relationships and bodily autonomy for women and girls with disability.
- The Second Action Plan must better reflect the experiences of children and young people with disability, women and girls from culturally and linguistically diverse backgrounds, and those living with intersectionality.

## Accessibility and service inclusion

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### What participants told us

There was strong concern that mainstream domestic, family and sexual violence (DFS) services are often not accessible to women and girls with disability. Barriers include physical inaccessibility, limited availability of accessible information, lack of disability capability among staff, and attitudinal biases that can affect access to appropriate support.

### What participants said needs to change

- Improve physical accessibility of domestic, family and sexual violence services.
- Provide Easy Read and accessible information and guidance materials.
- Address attitudinal bias among frontline staff.
- Improve disability capability within mainstream DFS services.

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## Housing and crisis accommodation

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### What participants told us

- Accessible crisis accommodation is often unavailable.
- Mainstream accommodation frequently cannot meet accessibility or assistive technology needs.
- Mothers with children with disability face additional challenges maintaining supports and schooling when relocating.
- Women's shelters have often not been upgraded to contemporary accessibility standards.
- Greater investment in social and public housing is needed to support long-term safety and recovery.

### What participants said needs to change

- Increase investment in public and social housing.
- Develop longer-term housing strategies rather than short-term crisis responses.
- Improve accessibility of crisis accommodation.
- Upgrade women's shelters to meet contemporary accessibility standards.
- Ensure accommodation can support women with disability who have children with disability.
- Stop relying on the NDIS as the solution for crisis accommodation needs and have explicit understanding of what the NDIS can and can't provide.

## Transportation and continuity of support

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### What participants told us

Participants identified transport as a critical but overlooked issue. Women and girls with disability require reliable transport to maintain safety, independence, access to services, employment, education and community participation during periods of crisis.

### What participants said needs to change

- Improve access to transport supports.
- Ensure transport supports continue during periods of crisis and transition so women can maintain schooling, employment, services and daily activities.

## System fragmentation and structural barriers

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### What participants told us

Stakeholders described a system characterised by repeated referrals, poor coordination and significant structural barriers. Concerns were raised about:

- Difficulties navigating service systems.
- Challenges transitioning from unsafe group home environments.
- Limited coordination between disability, violence and housing services.
- Structural barriers across the NDIA, Services Australia and state government systems.

### What participants said needs to change

- Reduce repeated referrals and redirections between systems.
- Consider introducing system navigators to help women and girls move between disability, DFSV, housing and government services.

## NDIA safeguarding concerns

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### What participants told us

Significant concerns were raised about NDIA policies and processes, including:

- Difficulties navigating service systems.
- Lack of internal procedures to identify and respond to family violence risks.
- Safety risks where perpetrators act as plan nominees and can access information about disclosures of violence.
- Workforce capability gaps in recognising and responding to risk.
- Concerns that recent NDIS reforms may reduce supports that contribute to participant safety and social connection.

### What participants said needs to change

- Develop NDIA procedures and safeguards for responding to violence.
- Improve NDIA workforce capability to identify and respond to risk.
- Address unsafe nominee arrangements where perpetrators can access participant information.
- Strengthen safety considerations in NDIS reforms ("Safety by Design").
- Address harmful practices and barriers across the NDIA, Services Australia and other Government agencies.

# Disability-specific experiences of violence

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## What participants told us

Stakeholders emphasised that existing definitions of family and domestic violence and coercive control do not adequately capture the violence experienced by women and girls with disability. Participants supported Disability Royal Commission recommendations to recognise:

- Violence perpetrated by carers and support workers.
- Disability-related violence and abuse.
- Violence occurring in supported accommodation.
- Broader forms of coercive control beyond intimate partner relationships.
- Better address restrictive practices and guardianship arrangements.
- Highlight coercive control in relation to reproductive rights.
- Implement Disability Royal Commission Recommendation 6.41 on prohibiting non-therapeutic sterilisation.

## What participants said needs to change

- Implement Disability Royal Commission Recommendation 8.24.
- Expand definitions of family and domestic violence to include:
  - Violence by carers and support workers.
  - Disability-based violence and abuse.
  - Violence occurring in supported accommodation settings.
- Broaden definitions of coercive control beyond intimate partner relationships.

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# Ableism and drivers of violence

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## What participants told us

There was a strong call for the 2AP to address ableism as a key driver of violence. Participants noted that power imbalances are often reinforced by systems, policies and legal frameworks, contributing to isolation, dependence and increased vulnerability to abuse.

## What participants said needs to change

- Better explain the drivers of violence against women and girls with disability in the 2AP.
- Explicitly recognise ableism as a driver of violence.
- Examine how policies and legal systems can create or reinforce violence and abuse.

# Human rights and accountability

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## What participants told us

Stakeholders advocated for stronger alignment with:

- The Disability Royal Commission recommendations.
- Australia's Disability Strategy.
- The Convention on the Rights of Persons with Disabilities (CRPD).

There was also support for embedding human rights outcome measures within the 2AP to strengthen accountability and monitor progress.

## What participants said needs to change

- Undertake a whole-of-system analysis of safeguards and risk.
- Align the Second Action Plan with Australia's Disability Strategy and CRPD principles.
- Embed human rights outcome indicators in the Second Action Plan.
- Use indicators to strengthen accountability for government action.

# Mental health, trauma and supported decision-making

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## What participants told us

Participants highlighted the importance of recognising:

- Trauma and post-traumatic stress disorder (PTSD) among women and girls with disability who experience violence.
- The mental health impacts on people who have experienced domestic, family and sexual violence and their dependants.
- The need for consideration of supported decision-making, particularly for women and girls with intellectual disability.

## What participants said needs to change

- Recognise PTSD, trauma and mental health impacts within DFSV responses.
- Ensure mental health needs of women and girls with disability and their dependants are reflected in the Second Action Plan.

## Economic security and social protection

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### What participants told us

Stakeholders strongly emphasised the connection between poverty and vulnerability to violence. Concerns included:

- Inadequate income support settings.
- Income testing that can reinforce dependency on perpetrators.
- Poor access to information about available payments and crisis supports.
- The need for stronger economic safety nets to enable women and girls with disability to leave unsafe situations.

### What participants said needs to change

- Reform how the DSP and income support systems operate.
- Reduce policies that keep people dependent on perpetrators.
- Improve access to information about payments and entitlements, including crisis payments.
- Strengthen economic safety nets to prevent violence, abuse, neglect and exploitation.

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## Education, rights and prevention

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### What participants told us

Participants highlighted the need for:

- Rights-based education and self-advocacy support.
- Education on consent, healthy relationships and body autonomy.
- Greater awareness of appropriate and inappropriate touch, particularly recognising the unique experiences of women and girls who receive care and support.

### What participants said needs to change

- Deliver education that empowers women and girls with disability to understand their rights.
- Strengthen education on:
  - Consent.
  - Healthy relationships.
  - Body autonomy.
  - Appropriate and inappropriate touch.

# Intersectionality and diverse experiences

## What participants told us

Stakeholders stressed the importance of recognising the experiences of:

- Children and young people with disability.
- Women and girls from culturally and linguistically diverse (CALD) communities.
- Women living in supported accommodation and group homes.
- Participants noted that isolation, stigma and barriers to accessing mainstream services often require proactive outreach and culturally responsive approaches.

## What participants said needs to change

- Improve outreach and in-reach into CALD communities.
- Develop approaches that better reach isolated communities.
- Recognise and respond to the additional barriers faced by CALD women and girls with disability.

**We sincerely thank everyone who generously shared their time and insights with us.**

