

Working With Children And Young People With Disability



This resource is part of a series of tip sheets on working with children and young people from diverse backgrounds. These tip sheets aim to assist in building the capacity of workforces to apply an intersectional lens when working with children and young people from diverse backgrounds, and in the assessment and management of family violence and child wellbeing issues.

Please ensure you have read *Diversity in Practice Tip Sheet 1: Intersectionality (A Core Concept)* before proceeding with this one.

Research suggests that children and young people who have a disability are likely to be four times more likely to experience family violence than children and young people who do not have a disability. Organisations and services have a responsibility to provide an accessible and inclusive service to all children and young people with disability as enshrined in the [United Nations Convention on the Rights of Persons with Disabilities \(UNCRPD\)](#).

It is crucial that practitioners are aware that when children and young people with a disability engage with services, they may need specific supports. Professionals should consider how to safely engage, communicate, support, and include a child or young person with disability in accessing appropriate family violence services that can respond to their specific wellbeing and safety needs.



Accessing Supports and Services

Children and young people with disability who experience family violence or child wellbeing issues often face multiple and complex barriers when trying to access services and supports. Children and young people with disability may have faced challenges such as isolation, lack of access or autonomy to appropriate supports, or ableism which involves children and young people being treated unfairly or in a negative way because of their disability.¹

These challenges can culminate into barriers that see children and young people with disability not being able to access the services and the support they need.

For example:²

- Not being **listened to** or **believed**.
- Not being **understood**, or having the ability to communicate to name or identify what they are experiencing.
- Feelings of **fear** and/or **intimidation**.
- **Lack of safe support** to disclose what they have been experiencing.
- **Limited access to services** and supports due to transportation and/or lack of accessibility at services (i.e., limited access to interpreters, communication devices, assistance to communication and information in an appropriate format).
- **Dependency** on caregivers/adults.
- **Bias of professionals** in their recognition or engagement with children and young people with disabilities.
- Children and young people with disabilities may be reluctant to report family violence as the perpetrator may be **controlling or isolating them** through their assistance with essential activities (i.e., personal care, communication, parenting, mobility, transport, etc.).
- Children and young people with disabilities can be the subject of **negative stereotypes** or **discrimination**, which can mean they are often not believed when they report family violence.

Understanding that children and young people with disability may need specific supports when engaging with services is crucial to providing a safe and inclusive service. This understanding can assist children and young people with disability in making them feel safe, respected, and supported.

Feelings of safety, respect, and support can assist in children and young people feeling comfortable in disclosing their disability and their experiences of family violence. However, some children and young people may be hesitant about disclosing their disability or answering questions related to their experience of family violence.³ This could be due to negative experiences with services in the past. It is important for professionals to recognise these concerns and respond appropriately.

1. Victorian Equal Opportunity & Human Rights Commission N.D.

2. ACT Community Service 2020; State of Victoria 2021b.

3. Safe and Equal N.D.

Building a Safe and Inclusive Space

Professionals should provide safe and inclusive services and supports that are tailored and suited to the individual and unique needs of children and young people with disability.

When building a safe and inclusive space professionals should consider:

- How is the child and young person is **being heard**? For example, is someone speaking on their behalf? How do you ensure that the child and/or young person's views and wishes are being heard and considered?
- How does the child or young person's **experience of family violence intersect with their disability**? Perpetrators may target the victim survivor's perceived 'vulnerabilities' or use ableist beliefs to weaponise barriers, systemic discrimination and inequality, and discrimination experienced by the victim survivor.⁴
- Consider what it might look like if the perpetrator removed aids supports of a child or young person? How would this impact on them **accessing a service**?
- What does **safety planning** look like for children and young people's individual needs around disability supports?

Asking these questions before and when engaging with children and young people with a disability ensures that professionals are able to effectively respond to their unique experiences and needs.



4. State of Victoria 2021b.

Building a Safe and Inclusive Space

Furthermore, when engaging with and supporting children and young people with disability, it is important that professionals consider the following:

Listening to Children and Young People's Voices

- This could look like **inviting a conversation** with a child or young person with disability and asking questions to help support their needs or listening to how children and young people with disability describe themselves in relation to their disability (e.g., I use a mobility device like a wheelchair or walker and require accessible spaces, I have low vision and require assistive devices, I will be bringing a service animal, I have difficulties with speech and communication, etc.).⁵
- It is also important that professionals also **listen to how children and young people describe themselves in relation to their experience of family violence**. For example, listen for cues in their language (e.g., their carer “just snapped” or “they can’t help it” or “it’s hard for them”). The child or young person may also describe their carers actions, for example, restricting access to outside help, disability aids, or medication.
- Professionals should be aware that **not every child or young person wants to discuss their disability or understands their disability or their carers responsibilities in a family violence context**. Children and young people with disability are experts of their own disability and experience, it is important to recognise that they are the best people to explain how to support them effectively and safely.

Considering Communication

- Professionals should consider using **visual aids and/or sensory tools** to support conversations with children and young people with disability. Recognise that children and young people communicate differently, and that professionals should communicate with them in a way that works best for them (e.g., using plain or easy English, using visual resources, using sign language, etc.).⁶
- Sharing information with children and young people with disability accessing a family violence response and/or service about what is and isn't accessible through **access keys**.⁷ This gives children with disabilities increased agency and control over if and how they participate. When developing an access key ask yourself; how will people get into and around the venue? Is there a quiet space? Are restrooms accessible?⁸
- When engaging with a child or young person professionals should ask questions to **check if the child or young person is able to understand what is being said**. When asking questions to a child or young person with disability, professionals should consider the context, their relationship to the client, how important the question is, and how the question is prefaced.

5. YDAS 2019.

6. Safe and Equal N.D.

7. Access keys provide information about accessing venues for all people, regardless of ability (e.g., where disabled restrooms are located, accessible seats, etc.).

8. YDAS 2019.

Avoiding Assumptions

- Professionals should avoid making the assumption that a child or young person with disability **can't handle themselves or make their own decisions**.
- Avoid making assumptions about the child or young person's **strengths and/or abilities**. Professionals should **reflect on the assumptions and unconscious bias they may hold**.
- Do not assume that because a child or young person has the same disability that they experience family violence the same way or require the same supports and safety planning. For example, professionals should not assume all hearing-impaired children and young people are fluent in Auslan (Australian Sign Language) as this may not be the case.⁹ Professionals **should directly engage with and ask children and young people about what their own experience of the family violence is**, and what supports they may require, to ensure their safety and wellbeing needs are met.

Children and Young People with a Disability as Clients in Their Own Right

- Professionals should adopt a **'youth-focused' lens**.¹⁰ Adopting such a lens can assist in separating the needs of children and young people from those of other family members which can ensure that appropriate family violence supports are provided. Remember they will require a separate family violence risk assessment and safety plan from the adult victim survivor and/or carer. This should include having separate conversations with the child and/or young person, treating them as experts in their own lives, and making sure that they are included in the decision-making process.
- When supporting children and young people with disability in the **decision-making** process, professionals should support the child and/or young person's capacity to participate in decision-making and to ensure that the decisions made by the child or young person are **documented appropriately which includes their preferences are reflected in case plans, risk assessments, or safety plans**.¹¹ There should be a focus on listening to the young person – trusting the judgement of the child or young person and validating their views and wishes.
- It is important not to disregard the child or young person's opinion and to **keep conversations open** while also being realistic about expectations and requirements. Professionals should be honest about what information is to be shared as well as their privacy and confidentiality rights.

9. ACT Community Services 2020.

10. Robinson et al. 2022.

11. AIFS 2023.

Secondary Consultations & Referrals

Specific barriers to receiving appropriate and effective services include services lacking knowledge and confidence in working with people with disabilities, and professionals believing they are ill-equipped to respond.

Professionals can address this by working in a proactive and collaborative way, including through secondary consultation and referral with organisations specialising in working with people with disabilities (refer to victim survivor-MARAM focused Responsibilities 5 and 6).

If you're unsure how to effectively support a child with a disability, please seek that secondary consultation with a specialist service where appropriate.

The following are examples of services who can assist with this:

- [The Disability and Family Violence Crisis Response Initiative \(DFVCRI\)](#) at [Safe Steps](#) assists victim-survivors with a disability who are experiencing family violence to access the services and supports they need to stay safe. DFVCRI can help by providing access to brokerage funding, and information and referral to other support services.
- [Association for Children with a Disability \(ACD\)](#) is a not-for-profit organisation run by and for families of children with disability. ACD provides free advocacy support and information through a [telephone Support Line](#), [workshops](#), [online information and resources for parents, carers and professionals](#).
- Specialist Disability Practitioners are available to support child and family service professionals in their work linking children and parents with disabilities to supports, including the NDIS. Speak to your team leader about accessing support from the Specialist Disability Practitioners in your area.
- [The Youth Disability Advocacy Service \(YDAS\)](#) is an advocacy organisation that works with disabled young people who are aged 12 to 25. YDAS can support young people with disability with education, housing, or the NDIS.
- The Centre for Excellence in Child and Family Welfare hosts a free monthly training session for professionals on "*Working with the NDIS to support families at risk*". This training is available in two parts and offers practical tips on how to navigate through the scheme with families. [Register here](#).
- Ensure you are familiar with local, state, and national services that can support your diverse client group.

Practice Considerations

When children with disability engage with services, they might need specific supports. Practitioners should be aware of how to safely engage with and support a child who has a disability and is also experiencing family violence.

This may include:

- Develop an understanding that **disability exists on a spectrum**. The way each child or young person experiences disability is unique. Children or young people with the same disability may need different supports to one another and can be affected in different ways. In this way, it is important that professionals understand how to effectively tailor approaches and supports according to the child or young person.¹² **Person-centred responses** is a key concept for practice in the MARAM Framework – this type of response help improve children and young people’s capacities to respond to the demands of their context (i.e., providing access to communication supports and adjustments, etc.)¹³
- When working with a child or young person with disability professionals should focus on the child or young person as **a client in their own right**, not the disability.
- When working with a child or young person with disability, professionals should ask if they have an **advocate** they have worked with before or would like to use. Working with advocates can help ensure children and young people understand information shared with them, know what to expect when engaging with a service, and are supported in a safe, meaningful, and inclusive manner.¹⁴
- Professionals should use a respectful, strengths-based approach in line with **MARAM Responsibility 1: Respectful, sensitive, and safe engagement**. While this is important when engaging with all victim-survivors, it can be particularly important for children and young people with disabilities due to increased risks, barriers, assumptions, and stereotypes.¹⁵

12. ACT Community Services 2020.

13. State of Victoria 2021b.

14. ACT Community Services 2020.

15. State of Victoria 2021b.

Further Information

TERMINOLOGY AND LANGUAGE

- **Child and Young Person:** For the purpose of this tip sheet, the term “child and young person” encompasses age groups 0-18 including newborn, infant, toddler, children, and young people. Newborn refers to time of birth through to 3 months. Infants are typically from 3 months to 18 months, toddlers from 18 months to 3 years of age, child 3 to 11 years, and young people from 12 to 18. The term child may be used to describe all ages and stages.¹⁶
- **Disability:** “The definition of disability under the Disability Discrimination Act 1992 is broad. It includes physical, intellectual, psychiatric, sensory, neurological and learning disabilities. Disability can be permanent or temporary, visible or invisible. Some conditions and impairments are present from birth. Other people acquire or develop disability during their lifetime from an accident, condition, illness or injury. For some people, support requirements can increase over time. Others can experience fluctuating or episodic disability. Some people may have multiple disabilities, giving rise to different support requirements.”¹⁷

RESOURCES

- [MARAM Practice Guides and Resources](#) (VicGov)
- [Supporting People with Disability](#) (Safe and Equal)
- [Together: Building an Inclusive Youth Sector](#) (YDAS)
- [Engaging children with disability in supported decision making](#) (AIFS)
- [Practice strategies for working with children with disability](#) (Emerging Minds)

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Youth Disability Advocacy Service (YDAS) 2019, *Together: Building an inclusive youth sector together*, yacvic.org.au/ydas/resources-and-training/together-2/

16. State of Victoria 2021b.

17. State of Victoria 2021a.

