



Abuse of Persons  
with *Disabilities*



# Abuse of Persons *with Disabilities*

Abuse can happen to anyone with any level of ability, female or male, young or old, rich or poor. Abuse can happen in heterosexual, same sex or LGBTQ\* relationships, long- or short-term relationships and between people who live together or separately. Abuse happens in cities, towns, villages, rural areas, isolated communities, reserves and settlements. It happens in all ethnic and racial groups and in all cultures. However, persons with disabilities may be more at risk of being abused than other persons. This booklet tells you why.

The disability community is working toward making our province a safe place for everyone. Awareness of the abuse of persons with disabilities is steadily increasing. Each year, more safeguards are being put into place.

Abuse of persons with disabilities is a serious problem, but there is help and hope.



## *What is in this booklet*

- Four reasons why persons with disabilities may be more at risk of being abused
- Signs that a person may be abused
- What you can do if you are being abused
- What you can do if you are concerned that someone else is being abused
- Where to get help

\* Lesbian, gay, bisexual, transgendered, trans-identified, two-spirited and queer identities.

### *Definition of family violence*

Family violence is the abuse of power within relationships of family, trust or dependency that endangers the survival, security or well-being of another person. It can include many forms of abuse including spouse abuse, senior abuse and neglect, child abuse and neglect, child sexual abuse, parent abuse, and witnessing abuse of others in the family. Family violence may include some or all of the following behaviours: physical abuse, psychological abuse, criminal harassment/stalking, verbal abuse, sexual abuse, financial abuse, and spiritual abuse.<sup>1</sup>

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*“I am not as scared to stand up for myself as some of the other people in our apartment building, because I did not have disabilities until the accident when I was 18. I was used to saying what I thought, and I will still say what I want. But other people are afraid that if they say anything, the care will be cut off. Then what will they do?”<sup>2</sup>*

### *What is a disability?*

*A disability is any limitation that significantly affects a person’s mobility, agility, sight, hearing, verbal communication or intellectual functioning. It also includes limitations arising from psychological, emotional or mental health issues.*

## What is family violence?

Family violence is the abuse of power within relationships of family, trust or dependency that endangers the survival, security or well-being of another person. It can include many forms of abuse including spouse abuse, senior abuse and neglect, child abuse and neglect, child sexual abuse, parent abuse, and witnessing abuse of others in the family. Family violence may include some or all of the following behaviours: physical abuse, psychological abuse, criminal harassment/stalking, verbal abuse, sexual abuse, financial abuse and spiritual abuse.<sup>3</sup>

Like other people, persons with disabilities may experience any of these forms of abuse within relationships of trust or dependency.

### AN ONGOING PATTERN

Family violence almost never happens “just once.” Once an act of abuse occurs, a barrier has been broken and the risk of further abuse is higher.

To an outside observer who is not aware of what goes on behind closed doors, family violence may appear to be an isolated incident. In fact, family violence happens over months and years. As it continues, it almost always becomes more frequent and more severe.

### FIVE FORMS OF ABUSE

All forms of abuse are meant to increase an abusive person’s power and control over the abused person. The most visible form may be physical abuse, but psychological abuse can be just as harmful. Psychological abuse is also a danger sign that there is a risk of physical abuse.<sup>3</sup>

**Physical abuse** includes a wide range of assaults by the abusive person such as hitting, hair pulling, biting, kicking, pushing, choking, scratching, burning and shaking. Physical abuse can also include locking or tying someone up or preventing someone from getting medical help.

**Psychological abuse** causes emotional pain, injury and fear. Instead of physical assaults, the abusive person uses psychological methods. This includes name-calling, put-downs and controlling the person’s activities and contact with others. Psychological abuse also includes intimidation tactics such as using words or actions to scare someone, stalking, harassing and threatening to or actually harming other people or pets.

**Sexual abuse** includes an abusive person forcing someone to kiss or touch him/her, touching a person who does not want to be touched or in places the person does not want to be touched, forcing sexual acts, forcing intercourse and forcing the person to look at someone’s private parts or sexual pictures or videos. Sexual acts are abusive if the abused person finds them unsafe, unwanted, humiliating or painful.

**Medication abuse** includes using medication for any purpose other than to deal with a health issue. This can include:

- manipulation of medications to cause pain or reduce ability
- over- or under-medicating against a doctor’s direction
- not filling a prescription (for financial or convenience reasons)
- stealing the person’s medication for other uses or resale.

Neglect includes not being given proper housing, enough food, medication, clothing, love or attention, the withholding of personal care, and destroying or withholding assistive aids.

# Who abuses persons with disabilities?

## People they know

Persons with disabilities, like other victims of family violence, are most often abused by people they know. This may be a caregiver in the person's residence, a spouse or common-law partner, another family member, or a professional with whom they have some contact as a patient or client.

## Sometimes abuse goes both ways

In some cases, abuse is directed by one person against another, and in other cases, parties are abusive to one another. The issue of persons with disabilities sometimes being abusive to caregivers or other family members has also been identified.<sup>4</sup>

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## What are signs that a person may be abused?

The following signs may indicate abuse.<sup>5</sup>

### Signs of psychological abuse:

- extreme, unusual behaviour such as aggression, submissiveness or withdrawal
- constant apologies
- destructive behaviour
- decreased ability to cope with familiar situations
- high levels of anxiety, especially when asked to go to a certain place or accompany a certain person
- lack of attachment to others.

### Signs of physical abuse:

- unexplained physical injuries such as bruises, burns, cuts, scratches, broken bones or bite marks
- defensive answers when they are asked about an injury
- being wary of physical contact
- sleep disturbances
- signs of new injuries before old injuries have healed (one injury could happen to anyone in any situation; if new injuries appear before old injuries have healed, this could suggest a pattern of abuse).

### Signs of sexual abuse:

- stained or torn clothing or underclothing
- a significant change in sexual behaviour or attitude
- pain while walking or sitting without a logical explanation
- emotional distress
- child-like behaviour
- inappropriate sexual behaviour.

### Signs of medication abuse:

- reduced mental alertness or physical ability
- being groggy or doopy
- depression
- heightened, reduced or absent response to the medication (indicating the medication has not been used as directed)
- prescriptions not being filled or being filled too often.



*“When the person who is supposed to be my care aide came in the morning to help me get up and dressed, we had a disagreement. We argued for a while. And then the care aide looked at me and said, “So did you want to get out of bed today?””<sup>2</sup>*

*Did you know...*  
According to some studies, persons with disabilities are 50 per cent more likely to be victims of violence or abuse.<sup>6</sup>

### Signs of neglect:

- poor hygiene
- the same clothes worn every day
- inappropriate clothing for the weather
- unattended medical or dental needs
- underweight or overweight (when not associated with the disability)
- unhappy with care but feeling unable to change the situation
- unexplained frequent hospitalizations.

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## Four reasons why persons with disabilities may be more at risk

A 2002 study conducted by Alberta Committee of Citizens with Disabilities<sup>7</sup> identified four factors that increase the risk of abuse.

### 1. The disability itself

Abuse is more likely to happen in circumstances where some people have more power than others. A disability may increase the perceived difference in power between two people.

Different types of disabilities create different potential for the dynamics of abuse.

For example:

- A person who has limits in moving physically may be less able to escape a violent situation.
- A person who has a hearing impairment may be able to escape, but then encounter communication barriers when seeking help.
- A person who has a developmental disability may find it takes longer to understand that someone is abusing them.

### 2. Myths and stereotypes about persons with disabilities

Myths about persons with disabilities could increase the risk of abuse. For example, if someone believes that persons with disabilities are helpless or child-like, that person might think it is appropriate to deprive a person with a disability the freedom to make choices, be independent, participate fully in society and be accountable for decisions. A person who believes that someone with disabilities is less worthwhile than others may also believe it is acceptable to abuse a person with disabilities.

### 3. Dependency

Some persons with disabilities rely on others for care. Caregivers may be family members or paid caregivers. Assistance may include personal care such as bathing and getting dressed, and health care such as administering medication and hygiene routines. Caregivers may be in the home most of the time or only for a few hours a few times a week.

Dependency on others for care can create a culture of compliance in which persons with disabilities believe they need to accept the direction and preferences of other people. Persons with disabilities may be afraid to challenge a caregiver who is abusive because they are afraid to lose the care.

### 4. Isolation

Having a disability may increase barriers to being included in social activities with other people. Chances of abuse are greater when someone is socially or physically isolated. The obstacles that people with a disability face may include inaccessible buildings, lack of accessible transportation and negative stereotypes. This means that persons with disabilities may be less likely to work, go to school, run their own errands, take part in social events, or generally be visible to others. Under these circumstances, if someone is being abused, it may be weeks or months before it is detected.

# How can you tell if you are abused?

Sometimes people who are abused do not know that what is happening is abuse. They think it is normal or that it has to be that way. The charts that follow will help you see if your relationship with a partner, other family member or caregiver is healthy, unhealthy or abusive.

## HEALTHY, UNHEALTHY AND ABUSIVE RELATIONSHIPS WITH A PARTNER OR FAMILY MEMBER

Look at the chart that follows. For each relationship factor, think about your relationship with a partner or family member. Then ask yourself, “Is my relationship with this person most like the healthy, unhealthy or abusive relationship?”

<b>RELATIONSHIP FACTORS</b>	<b>HEALTHY RELATIONSHIP</b>	<b>UNHEALTHY RELATIONSHIP</b>	<b>ABUSIVE RELATIONSHIP</b>
<b>Sharing Feelings</b>	You feel safe and strong enough to tell the other person how you really feel.	You feel awkward telling the other person how you really feel.	You are afraid to tell the other person how you really feel because you fear getting put down or threatened.
<b>Communicating</b>	You respect and listen to each other even when you have different opinions.	The other person ignores you and does not respect your opinions when there is a difference of opinion.	The other person treats you with disrespect and ignores your ideas and feelings or makes fun of them.
<b>Disagreements</b>	You can have disagreements and still talk respectfully to each other. You resolve your disagreements.	Your disagreements often turn into fights.	You are afraid to disagree because you do not want to unleash the other person’s anger and violence. The disagreement is an excuse for abuse.
<b>Time alone</b>	You can each spend time alone and consider this a healthy part of your relationship.	You think there may be something wrong if you want to do things without your partner. Your partner tries to keep you to him or herself.	Your partner does not allow you to spend time doing things on your own. Your partner sees this as a challenge or threat to your relationship.
<b>Verbal abuse and violence</b>	You and your partner take care not to speak harshly or make mean comments. There is no physical violence in your relationship.	There have been a few incidents of harsh comments or controlling behaviour in your relationship. There is no pattern of abuse or violence.	There is a pattern of increasing or ongoing verbal, psychological, physical and/or sexual abuse in your relationship.

## If this is an intimate relationship

<b>RELATIONSHIP FACTORS</b>	<b>HEALTHY RELATIONSHIP</b>	<b>UNHEALTHY RELATIONSHIP</b>	<b>ABUSIVE RELATIONSHIP</b>
<b>Intimacy and sex</b>	Both of you can be honest about your feelings about physical affection and sex. Neither of you feels pressured to do anything you do not want to do.	You are embarrassed to say how you feel because you think your partner may not listen or care. You “go along” with some things.	Your partner ignores your needs and wants. Your partner pushes you into situations that make you uncomfortable, frighten you or degrade you.
<b>Trust regarding others</b>	You trust each other. You are both comfortable with your partner spending time with another man or woman.	Your partner feels jealous every time you talk to another man or woman. You feel jealous every time your partner talks to another man or woman.	Your partner accuses you, or you accuse your partner, of flirting or having an affair and orders you not to talk to another man or woman.

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## HEALTHY, UNHEALTHY AND ABUSIVE RELATIONSHIPS WITH CAREGIVERS

Look at the chart that follows. For each relationship factor, think about your relationship with a caregiver. The caregiver may be a family member, a volunteer or someone who is paid to provide care. As you look at the chart, ask yourself, “Is my relationship with this caregiver most like the healthy, unhealthy or abusive relationship?”

<b>RELATIONSHIP FACTORS</b>	<b>HEALTHY RELATIONSHIP</b>	<b>UNHEALTHY RELATIONSHIP</b>	<b>ABUSIVE RELATIONSHIP</b>
<b>Agreements and contracts</b>	You decide together what help the caregiver will provide, when, and at what cost in a way that works for both you and the caregiver. Both of you honour the agreement.	You cannot be sure the caregiver will provide help as agreed. Sometimes agreements are followed, sometimes not.	The caregiver does not respect your wishes, and does not do what was agreed. The caregiver threatens to withhold care if you do not do what the caregiver wants.
<b>Communicating</b>	You respect and listen to each other even when you have differing opinions on a topic.	The caregiver ignores you and does not respect your opinions when there is a difference of opinion.	The caregiver disrespects you and ignores your ideas and feelings or makes fun of them.

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<b>RELATIONSHIP FACTORS</b>	<b>HEALTHY RELATIONSHIP</b>	<b>UNHEALTHY RELATIONSHIP</b>	<b>ABUSIVE RELATIONSHIP</b>
<b>Sharing feelings</b>	You feel safe and strong enough to tell the caregiver how you really feel.	You feel awkward telling the caregiver how you really feel.	You are afraid to tell the caregiver how you really feel because you fear being put down or threatened.
<b>Disagreements</b>	You can have disagreements and still talk respectfully to each other. You resolve your disagreements.	Your disagreements often turn into fights	You are afraid to disagree because you do not want to unleash the caregiver's anger and violence. The disagreement is an excuse for abuse.
<b>Dealing with changes in circumstances</b> (For example, if your condition changes or if there is something new in your life.)	As circumstances change, you and the caregiver talk about the changes and agree on any changes that may be needed in your care agreement.	The caregiver does not want to talk about how things are changing, or is slow to change when your circumstances change.	The caregiver refuses to adapt to changes even if the care is no longer appropriate. Or, the caregiver makes changes without consulting or telling you in advance.
<b>Medication and adaptive devices</b> (For example, canes, hearing aids or other equipment to help with a disability.)	You and the caregiver understand and follow your medication requirements. Your assistive aids are in good repair and available to you when you need them.	Sometimes medications are missed or late. Sometimes adaptive devices are not kept in good condition or are not available to you when needed.	The caregiver uses medication to try to control you or the caregiver steals your medication. The caregiver threatens to deprive you of your medication or assistive aids.
<b>Verbal abuse and violence</b>	You and your caregiver do not say mean things to each other. There is no physical violence.	There have been a few incidents of putdowns, and mean or controlling behaviour in your relationship. There is no pattern of violence.	The caregiver hurts you and does not stop even if you say it is hurting. The caregiver has injured you. The physical or sexual abuse and/or intimidation are increasing.

Are your relationships more like the healthy, unhealthy or abusive examples?

If they are more like the healthy relationships, congratulations! If your relationships are more like the unhealthy ones, or if you see that you are in a relationship that is abusive, the sections that follow may give you ideas about what you can do to get help and stay safe.



## **IF YOU ARE IN AN ABUSIVE SITUATION, YOU MIGHT FEEL...**

### **Like you are all alone**

**You are not alone.** People from all walks of life have experienced abuse and there are many resources to help. Friends, family members, caregivers, neighbours, social workers, doctors and others are all possible sources of support for you. Some sources of help are on page 15 of this booklet.

### **Like you shouldn't say anything**

**Tell someone.** No matter what your situation, you do not have to accept being abused. Silence will only give your abuser more power and allow the abuse to continue.

### **Like there is nothing you can do about it**

**There is something you can do.** If you live in a care facility or a group home, report the abuse to a staff member that you trust. The law says that a staff member is required to take action. If you live independently or with the person who is abusing you, tell another person — an aide, nurse, doctor, social worker, police officer, relative, friend, pastor or other person you trust. Keep telling people until you get the help you need.

### **Like it is your fault**

**It is not your fault.** No one deserves to be abused. It does not matter what the circumstances are. Abuse is never okay.

### **Like you are worthless**

**You are a valuable human being.** Living with abuse can lower your self-esteem, self-image and self-confidence. Abuse is not about your worth; it is about how your abuser chooses to behave.

### **Like it may not happen again**

**Abuse does not stop until someone does something to stop it.** Often abuse becomes more frequent and more severe over time, unless you let someone know and something is done to stop the abuse.

## **FOUR THINGS YOU CAN DO IF YOU ARE BEING ABUSED**

### **1. Tell someone**

- Tell someone about what is happening.
- If the person you tell does not seem to take you seriously, tell someone else, and keep telling until you find a person who is helpful.
- The more people that know about the abuse, the more likely it is that someone will be able to help stop it.

### **2. Protect yourself**

#### **Protect yourself from medication abuse**

- Arrange for someone outside the household to know about your medical condition and medications.
- The person could be a doctor, a home care worker, a volunteer visitor or a trusted friend. Arrange for the person to visit from time to time. Arrange for the person to visit sometimes without telling anyone in advance.

## **Protect yourself if someone is hurting or scaring you**

- **If you are in immediate danger, phone 911.**
- If someone is hurting you physically, making unwanted visits or phone calls, or is frightening you, tell the police.
- You may be able to arrange for a protection order that would stop an abusive person from having contact with you. The police, police-based Victim Services Unit or the 24-hour Family Violence Info Line at **310-1818**, toll-free in Alberta, can help you learn how to get a protection order. More information about protection orders is at the end of this booklet.

**Be aware that if you are thinking of leaving a situation where violence or abuse has happened, this is often a dangerous time.** That does not mean you should stay. It means you need to take care to be safe.

### **3. Get help to make a safety plan**

- See “Five Parts of a Safety Plan” on page 10.
- A trusted caregiver, police or a police-based Victim Services Unit may be able to help you develop a safety plan.
- The 24-hour Family Violence Info Line at **310-1818**, toll-free in Alberta, can also provide information about other resources in your community that can help you develop a safety plan.

### **4. Build your strength**

- Changing or leaving an abusive situation can be very difficult and stressful. Keep in mind that you are doing this for the well-being of yourself and others. Be proud of yourself for doing this even though it may be difficult.
- Every day, try to do at least one thing that you enjoy and that lifts your spirits.

*“I would get a lot of emotional abuse from my husband. Sometimes, I would ask him to read the mail, and he would say, “I’m your husband not your slave. Hire somebody or get home care.” He was also very jealous over my guide dog. If I wanted to go somewhere with my husband, I had to leave my dog at home, which left me totally dependent on [my husband].”<sup>9</sup>*

## FIVE PARTS OF A SAFETY PLAN

A safety plan can help anyone at risk of being abused. For a person with disabilities, the safety plan needs to take into account:

- how the disability may affect the safety plan
- how an abusive person could take advantage of barriers that may prevent you from leaving quickly or from using family violence prevention services in the community.

To develop your safety plan:

**1. Tell people** you trust that you are in an abusive relationship.

- Let them know how they can help you be safe.
- If the first person is not helpful, tell someone else.
- The more people who know about the abuse, the more people there are who can help.
- Tell them when and how they should check to make sure you are okay.

**2. Plan where you can go** if you need to leave in a hurry.

- Look for places that are open 24 hours, where you can be safe while you call for help.
- Get help to arrange emergency transportation with someone who understands the situation. Arrange a signal so the person will know to get transportation to you quickly.
- Have a backup plan in case you are not able to get to the place you planned to go.

**3. Make sure you have emergency numbers** for the police and emergency transportation, like taxis or the transit service. Keep the numbers in a safe place where the abusive person won't find them and where you can get them fast in an emergency. If you can, memorize them instead.

**4. Pack a small bag** and put it in a place the abuser will not find it. (You could ask a trusted person to help you with this task.) Include things you will need, such as:

- cash if you have it, debit or credit cards
- health care cards, children's health care cards, copies of prescriptions
- identification documents like a driver's license, passport, Old Age Security Card, school ID card, etc.
- prescription drugs or medications, any assistive aids
- copies of any no-contact orders.

**5. If there are children**

- Pack items that will meet children's immediate needs.
- Tell the children exactly what they should do in an emergency. Teach them how they will know it is an emergency, where they should go and what they should do when they get there.

## IF YOUR ORGANIZATION HELPS PERSONS WITH DISABILITIES DEVELOP SAFETY PLANS...

Organizations that help persons with disabilities to develop safety plans could incorporate the following procedures:

- Review safety plans and update them periodically as the situation changes.
- Present safety-planning material in clear language, and have it available in alternate formats.
- Consider help that may be available from other disability resources.
- Include knowledge of assistive aids for persons with disabilities and updated resource information on new technology to improve safety.
- Ensure staff receive ongoing training to enhance skills and discuss issues raised in safety planning for persons with disabilities.

*“In my first 16 years, I spent nine years in the hospital. Most of my hospital stays were not near family. I was 500 miles from home. So they were my family. And if you are not treated right where do you go? Back then they controlled you and you did what you were told.”<sup>9</sup>*

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## If you suspect that a person with disabilities is being abused

### RESPECTFUL COMMUNICATION

To understand a person’s disability and how best to communicate with them, speak with the person. Persons with disabilities need to be treated with dignity and respect. It is important to remember that they are people first, and their disability is secondary. These individuals are as diverse as any other group and their abilities and capabilities are not based on their disability.

### FIVE THINGS YOU CAN DO

1. **Watch** for the signs of abuse listed earlier in this booklet.
2. **Check** your concerns with someone who is knowledgeable about abuse and ask that person for suggestions about how to proceed.
3. **Talk** to the person if you see signs of abuse. For example, you could say, “I’ve noticed that you seem troubled lately and I wonder if something is bothering you.” Or, “I notice you often seem uneasy when \_\_\_\_ is around. I’m wondering, are you afraid of \_\_\_\_?”
4. **Understand** that the person may not realize it is abuse. Many abused people do not know that the behaviour they are experiencing is abuse, especially if it is someone they live with or someone who they depend on for care.
5. **Encourage** the person to contact community organizations to get help if abuse is confirmed. Suggestions on where to find help in your community are listed on page 15 of this booklet.

*“I didn’t know about the male/female physical relationship, about what’s supposed to happen between a man and woman, the biological part. I didn’t know what happens when you don’t feel right and can say “no.” I needed to learn how to say “no” sooner and tell when something’s right and something’s wrong.”*”

## **If a person tells you about abuse**

### **WHEN THE PERSON TELLS YOU**

- 1. Listen.** Take the person seriously. Listen quietly and carefully. Let them speak at their own pace and in their own way. Encourage the person to continue talking by not interrupting.
- 2. When the person has finished speaking,** reassure them that telling you was the right thing to do. Support them by saying something like, “This must be very difficult for you.” You may want to confirm that you have understood the situation. Say something like, “I want to make sure I have heard you correctly...”
- 3. When you and the other person are clear that you understand each other,** state what you are able to do to help the person with the situation.
- 4. If you are going to be talking for a while, check for the person’s immediate physical and medical well-being.**
  - Is the person in a physically safe environment?
  - Does the person need to eat, have a glass of water, get to a bathroom, take medications or rest for a while?
  - Take care of any immediate needs.
- 5. Reassure the person** by reminding them that:
  - It was right to tell someone about the abuse.
  - The abuse is not the person’s fault.
  - The abuse is the responsibility of the person who is abusive.
- 6. Make sure the person is safe.**
  - Check what can be done to make sure the person is safe right now.
  - Encourage the person to develop a longer-term safety plan. (See box: “Five Parts of a Safety Plan” on page 10.) Phone the 24-hour Family Violence Info Line at **310-1818**, toll-free in Alberta, for information about resources that may be available in your community to assist in developing a safety plan.
- 7. Pave the way for the person to get other help.**
  - Find out what the person would find helpful.
  - Offer to help the person connect with sources of help in the community. The information listed on page 15 of this booklet can help get you started.
- 8. Ask, “Is there anything you would like me to do right away?”**
- 9. Before the conversation ends, confirm what will happen next.** For example, you will call back in an hour or a day, you will find some information, etc.

## **AFTER THE PERSON HAS TOLD YOU**

- 1. If the abuse involves theft, fraud, assault, neglect or other illegal actions,** notify the police.
- 2. If the abuse took place in a group home, day program, shelter, personal care home, lodge, hospital, nursing home or other continuing care facility,** you are required to report the abuse through the toll-free Protection for Persons in Care Reporting Line at **1-888-357-9339**. Anonymous reports are not accepted.
- 3. Write down** what the person told you, quoting his/her words as much as possible. Record the date and time. If there is an investigation, this information may be useful.
- 4. Find out about help in the community.** Start by contacting some of the resources listed at the back of this booklet.
- 5. Keep checking** what the person wants to do and be supportive. The person may decide something and then decide something different. That is okay. Abusive situations can be very hard to change or leave.
- 6. Accept that the person may want to stay in the situation.**  
Do not criticize or judge. Understand that changing or leaving an abusive situation is not easy. Remind the person that you are there and you will help if you can, no matter what the person decides.

## **RESPONDING TO SOMEONE WHO ABUSES A PERSON WITH DISABILITIES**

### **If you are a family member or guardian**

- Your first concern is the safety of the person being abused.
- Report the abuse to police.
- If the person who is abusive is an employed caregiver, report the abuse to the employer and state that the person who is abusive must not have further contact with the abused person.
- If the abuse happened in a care facility, phone the toll-free Protection for Persons in Care Reporting Line at **1-888-357-9339** to report the abuse. Anonymous reports are not accepted.
- Do not confront the abusive person directly. That could cause more risk for the abused person.



### **If you are an employer**

- You are responsible for the actions of your employees. You must take action to stop the abuse and prevent the abusive person from doing further harm.
- If you have concerns about talking to an abusive person, do not do it. Trust your instincts. Confronting a violent or abusive person can be dangerous. Be aware of the risks and do not leave yourself open to harm.
- If the abuse involves fraud, theft or physical injury of a person, report the abuse to police.
- If your organization is a care facility, you are required to phone the toll-free Protection for Persons in Care Reporting Line at **1-888-357-9339** to report the abuse. Anonymous reports are not accepted.
- Ensure the person who has been abusive is not in a position to abuse anyone else.

### **If you are a co-worker**

- Do what is necessary to protect the immediate safety of the person who is being abused. For example, stay in the room and do not leave an abusive person alone with the person with a disability.
- If you have concerns about talking to an abusive person, do not do it. Trust your instincts. Confronting a violent or abusive person can be dangerous. Be aware of the risks and do not leave yourself open to harm.
- Within your organization, report the abuse to someone who is in a higher position than the abusive person.
- If the abuse involves fraud, theft or physical injury, report the abuse to police.
- If the abuse happens in a care facility, such as a group home, day program, shelter, personal care home, lodge, hospital, nursing home or other continuing care facility, you are required to phone the toll-free Protection for Persons in Care Reporting Line at **1-888-357-9339** to report the abuse. Anonymous reports are not accepted.
- Write down what you have seen and heard, as well as what you have done about it. You may need to have a record of this information when the abuse is investigated.

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## **Get help**

### **HELP IN AN EMERGENCY**

**If you or someone you know is in immediate danger, phone 911.**

**If you suspect a child is being abused, neglected or exposed to family violence,** phone your local Child and Family Services Authority, the 24-hour Child Abuse Hotline at **1-800-387-KIDS (5437)** or the police.

### **Protection orders**

- **An Emergency Protection Order** provides legal protection to victims of family violence under the *Protection Against Family Violence Act*. Through an emergency protection order, the court can order an abusive person not to go to places where the victim regularly goes, and not to communicate with the victim. The emergency protection order can allow the victim to stay in the home and order the abusive person to leave. It can also address other conditions necessary to provide for the immediate protection of the victim.

Police and Children's Services caseworkers can apply for an emergency protection order on behalf of a child or adult victim of family violence, 24 hours a day, seven days a week. Victims can apply at a courthouse during business hours. The *Know Your Rights: Alberta's Protection Against Family Violence Act (PAFVA)* information sheet is available at [www.familyviolence.alberta.ca](http://www.familyviolence.alberta.ca).<sup>8</sup>



- **Restraining orders and peace bonds** are other court orders to stop an abusive person from contacting a child or adult. Police or a police-based Victim Services Unit can provide information about how to apply to a court for one of these protection orders.

**Supports for Albertans fleeing abuse.** Alberta Works can help Albertans find jobs and cover basic costs of living when eligibility criteria are met. Phone **1-866-644-5135**, toll-free in Alberta, or **(780) 644-5135** in Edmonton.

**Protection for Persons in Care.** If you suspect someone is being abused in a group home, day program, shelter, personal care home, lodge, hospital, nursing home or other continuing care facility, phone the toll-free Protection for Persons in Care Reporting Line at **1-888-357-9339**. Anonymous reports are not accepted.

## **RESOURCES FOR PERSONS WITH DISABILITIES**

- For information about family violence resources available in your community, phone the 24-hour Violence Info Line at **310-1818**, toll-free in Alberta, or visit **[www.familyviolence.alberta.ca](http://www.familyviolence.alberta.ca)**.
  - Health Link is available 24 hours a day. A registered nurse will answer your questions and give health advice and information. Phone **1-866-408-LINK (5465)**, toll-free, or visit their website at **[www.healthlinkalberta.ca](http://www.healthlinkalberta.ca)**.
  - **The Child Disability Resource Link** gives callers information about services and supports available for a child. Call **1-866-346-4661**, toll-free, Monday to Friday from 8 a.m. to 8 p.m. and Saturdays from 8 a.m. to 4 p.m.
  - **The Bullying Prevention Helpline** provides information and strategies on bullying prevention. Phone **1-888-456-2323**, toll-free in Alberta, 24 hours a day.
  - **The Alberta Committee of Citizens with Disabilities (ACCD)** promotes full participation in society for Albertans with disabilities. ACCD provides public education, research, bursaries, awards, information and referral services. Phone **1-800-387-2514**, toll-free, or visit **[www.accd.net](http://www.accd.net)** for links to provincial associations and government programs.
  - **The Canadian Association of Independent Living Centres (CAILC)** works to empower people with disabilities and remove barriers. Visit **[www.cailc.ca](http://www.cailc.ca)**.
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- 1 Alberta Children's Services. (2005). *Alberta Roundtable on Family Violence and Bullying: Finding Solutions Together*, p. 2. Edmonton, AB. Alberta Children's Services. [http://www.child.alberta.ca/home/documents/familyviolence/rpt\\_opfvb\\_finding\\_solutions\\_high.pdf](http://www.child.alberta.ca/home/documents/familyviolence/rpt_opfvb_finding_solutions_high.pdf)
- 2 Quotes from a man who moved from a continuing care facility to an apartment building for persons with disabilities.
- 3 Alberta Children's Services. (2005). *Alberta Roundtable on Family Violence and Bullying: Finding Solutions Together*, p. 2. Edmonton, AB. Alberta Children's Services. [http://www.child.alberta.ca/home/documents/familyviolence/rpt\\_opfvb\\_finding\\_solutions\\_high.pdf](http://www.child.alberta.ca/home/documents/familyviolence/rpt_opfvb_finding_solutions_high.pdf)
- 4 Alberta Committee of Citizens with Disabilities (ACCD). (2002). *Violence Against Women with Disabilities*, p. 44. Retrieved August 2007 from the Alberta Committee of Citizens with Disabilities website: [http://www.accd.net/publications/Projects\\_and\\_Research/2002\\_Violence\\_Against\\_Women\\_With\\_Disabilities.pdf](http://www.accd.net/publications/Projects_and_Research/2002_Violence_Against_Women_With_Disabilities.pdf)
- 5 Alberta Committee of Citizens with Disabilities (ACCD). *Violence Against Women with Disabilities: Is Someone You Know Being Abused?* [Brochure.] ACCD, and Signs of medication abuse were provided by an expert reviewer during the development of this booklet.
- 6 Government of Canada. (2005). *Family Violence in Canada: A Statistical Profile*, p. 78. Ottawa, ON: Canadian Centre for Justice Statistics. <http://www.statcan.ca/english/freepub/85-224-XIE/85-224-XIE2005000.pdf>
- 7 Alberta Committee of Citizens with Disabilities (ACCD). (2002). *Violence Against Women with Disabilities*, p. 10-12. Retrieved August 2007 from the Alberta Committee of Citizens with Disabilities website: [http://www.accd.net/publications/Projects\\_and\\_Research/2002\\_Violence\\_Against\\_Women\\_With\\_Disabilities.pdf](http://www.accd.net/publications/Projects_and_Research/2002_Violence_Against_Women_With_Disabilities.pdf)
- 8 Alberta Children's Services. (2006). *Know Your Rights: Alberta's Protection Against Family Violence Act (PAFVA)*. [http://www.child.alberta.ca/whatwedo/fvp/pdf/Final%20-%2006898ACS\\_Info\\_sheet\\_Rights.pdf](http://www.child.alberta.ca/whatwedo/fvp/pdf/Final%20-%2006898ACS_Info_sheet_Rights.pdf)
- 9 Alberta Committee of Citizens with Disabilities (ACCD). (2002). *Violence Against Women with Disabilities*, p. 12-17. Retrieved August 2007 from the Alberta Committee of Citizens with Disabilities website.





**Alberta Children and Youth Services**  
**Prevention of Family Violence and Bullying**  
3<sup>rd</sup> Floor, Sterling Place  
9940 - 106 Street  
Edmonton, AB T5K 2N2  
Family Violence Info Line: 310-1818  
[www.familyviolence.alberta.ca](http://www.familyviolence.alberta.ca)

## Abuse of Persons with *Disabilities*