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Advocating for the Fair Treatment of Crime Victims

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Message from
The Director

During the past two decades, the victim assistance field has made tremendous progress in securing fundamental justice and comprehensive services for all crime victims. However, many crime victims remain unidentified and unserved. To ensure these "invisible" victims are reached, the Office for Victims of Crime (OVC) provided funding to the National Organization for Victim Assistance (NOVA) for the project *Working with Crime Victims with Disabilities.* As part of this project, NOVA coordinated a symposium that brought together experts in the disability advocacy, victim assistance, and research fields to address the issues of justice and access to services for crime victims with disabilities. This symposium was one of the first national scope initiatives that focused exclusively on individuals with disabilities within the criminal justice system, not as offenders, but as victims.

The findings of the symposium communicated in this *OVC Bulletin* illustrate that many crime victims with disabilities have never participated in the criminal justice process, even those who have been repeatedly and brutally victimized. The highlighted recommendations will assist advocates in their efforts to ensure that crime victims with disabilities have full access to the criminal justice system and receive their entitled services. Lastly, a few of the existing programs that are working actively to serve crime victims with disabilities are described.

We know that the issues involved in assisting victims with disabilities present tremendous challenges. But we have full confidence that the victim assistance and disability advocacy communities will embrace these challenges like they have so many others. *Working with Crime Victims with Disabilities* represents a small but significant step toward ensuring justice and access to services for all crime victims.

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Acting Director

Working with Victims of Crime with Disabilities

by Cheryl Guidry Tyiska, Director of Victim Services
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Introduction

This *Bulletin* is a product of the *Symposium on Working with Crime Victims with Disabilities,* funded by the Office for Victims of Crime (OVC) and coordinated by the National Organization for Victim Assistance (NOVA), on January 23-24, 1998, in Arlington, Virginia. The Symposium brought together experts from the disability advocacy and victim assistance and research fields, and they raised as many questions as they answered, thus opening the way for the victim assistance field to look more closely at a large and underserved crime victim population. As a result of their discussions, they developed recommendations for OVC and the victim assistance field on improving the response in serving crime victims with disabilities, which are included in this *Bulletin.*

Historically, all victims of crime have been denied full participation in the criminal justice process. Crime victims with disabilities and their families are even less likely to reap the benefits of the criminal justice system. Disability advocates report that crimes against people with disabilities are often not reported to police. Of those that lead to an investigation and an arrest, very few are prosecuted. When going through the criminal justice process, few victims with disabilities come into contact with a crime victim advocate. Often when victim services are provided, they may be inappropriate due to inadequate training of victim service providers.

As with most types of crime and crime victims, underreporting of crimes perpetrated against people with disabilities is a major problem. Currently there is no authoritative research that details how many individuals with a disability become crime victims or how many people become disabled by criminal attacks. Nor has the victim assistance field adequately identified the best practices for serving victims with unique needs or how to train criminal justice system personnel – including victim specialists – to make services truly accessible to all crime victims.

Limited information exists regarding the criminal victimization of people with disabilities, but the little that is

available is horrifying in nature and scope. Joan Petersilia, Researcher and Professor of Criminology at the University of California, Irvine, stated that persons with developmental disabilities have a 4 to 10 times higher risk of becoming crime victims than persons without a disability, in her Report to the California Senate Public Safety Committee hearings on "Persons with Developmental Disabilities in the Criminal Justice System." In addition, she says, "Children with any kind of disability are more than twice as likely as nondisabled children to be physically abused and almost twice as likely to be sexually abused." Others in the crime victims field recount anecdotal experiences from their work that illustrate that crimes against people with disabilities are often extremely violent and calculatedly intended to injure, control, and humiliate the victim.

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Reginald Robinson, former Acting Director of the Office for Victims of Crime, asked the Symposium participants—"How can we better identify and serve all crime victims who need advocacy and services? Are we rising to the challenge of being inclusive as we define the populations that deserve our attention and support?" This *Bulletin* highlights the main discussion points and recommendations developed by the Symposium participants and seeks to encourage victim assistance program staff to take the necessary steps to better serve crime victims with disabilities in their communities.

Obstacles Unique to the Disability Community

Some of the numerous social and legal problems faced by people with disabilities can be summarized as follows:

Isolation

Our society often segregates persons with disabilities through physical and social isolation, with institutionalization representing the extreme. As a result of pervasive isolation, people with disabilities may not learn about available services and resources nor are they routinely informed of rights they have by law. This is particularly true for people with more severe disabling conditions, older people with disabilities, and younger people with developmental disabilities. Indeed, many people who are chronically victimized do not even know that society condemns such predatory conduct and has tools to end and redress that wrong.

Limited Access

Physical Accessibility: In many instances, crime victims with disabilities do not have physical access to services. Architectural barriers in buildings and public transportation systems mean that many crime victims with disabilities cannot visit criminal justice agencies or victim assistance programs. The Americans with Disabilities Act of 1990 (ADA) addresses key issues of accessibility, but as Symposium participants pointed out, there is an extensive lack of understanding of how Titles II and III of the ADA pertain to the criminal justice and victim assistance fields. Moreover, this lack of understanding is frequently coupled with a fear that making services accessible to crime victims with disabilities will require expensive, disruptive adaptations.

Attitudinal Accessibility: Attitudes toward the person with a disability is as important or more so than physical accessibility. In addition to accessible physical environments, program staff must be welcoming toward people with disabilities and show in their demeanor and in the quality of their programs that they sincerely want to work collaboratively to serve the community.

In California, a woman was stabbed in the back during a robbery attempt. As a result of the assault, she became paraplegic. Unfortunately, neither the police nor hospital staff told her about victim assistance or independent living services. Because the assailant was never apprehended, the prosecutor-based victim assistance program did not provide her with services. In her anger and depression, she became suicidal. She survived a suicide attempt only because an alert nurse resuscitated her in time.

Underreporting of the Crime

Underreporting of crime is a pervasive problem that the victim assistance field is addressing on many fronts. For example, the Rape, Abuse, and Incest National Network (RAINN)[1] estimates that 1,000 rapes occur every day in the U.S., but only about 300 will ever be reported to the police. A crime may go unreported for many reasons: mobility or communication barriers, the social or physical isolation of the victim, a victim's normal

1 RAINN, 635-B Pennsylvania Avenue, S.E., Washington, DC 20003

feelings of shame and self-blame, ignorance of the justice system, or the perpetrator is a family member or primary caregiver. In crimes involving a victim with a disability, one or more of these factors may prevent the crime from ever being reported. When the crime is reported, the reporting agency often fails to note that the victim had a disability, especially if the crime is reported by someone other than the victim. Later, assumptions and prejudice about the reliability of the testimony of victims with disabilities can deny them access to justice in the courts.

Limited Advocacy

Despite progress by disability rights activists, advocacy on their own behalf is still limited. Again, just as with many crime victims, a person who wants to access criminal justice decisionmaking processes is unable to do so without adequate tools to enable full participation.

Myths

The following three myths contribute to stereotyping which often results in discrimination against people with disabilities:

The first myth is the perception that people with disabilities are "suffering." Rather than extending legal rights and protections, as with other oppressed groups, a societal response prior to passage of the ADA typically was to extend "charity." Being kind to a person with a disability is not an acceptable substitute for the provision of civil rights protections.

The second myth is that people with disabilities lack the ability to make choices or determine for themselves what is best for them in all spheres of life (physical, mental, emotional, spiritual, political, sexual, and financial). Although individuals with severe cognitive impairments may need greater support and advocacy services, this does not impede their ability or preclude their right to participate actively in decisions affecting their lives.

The third myth, according to crime victim advocates, is that many people in society fear contact with crime victims generally, as though their distresses are contagious. An even stronger stigma attaches to people with disabilities. Our society is not socialized to integrate differences in abilities as a part of our perception of "normality." The cultural norms for functioning include good hearing and vision, physical independence and mobility, mental alertness, the ability to communicate primarily through the written and spoken word, and physical attractiveness. Deviations from those norms tend to frighten those in the "able-bodied majority" who define the concept of normal abilities. When the two forces of stigma are joined—victimization and disability—attitudinal barriers to providing healing and justice can seem even more formidable.

Until recently, the crime victims' movement has not worked *systematically* to identify issues and challenges involved in responding more effectively to victims with disabilities. Improving service delivery to people with disabilities must become a priority because the crime victims' rights movement is founded on the premise that every crime victim deserves fundamental justice and comprehensive, quality services.

Background

Since the early days of the victims' rights movement, the effort has been animated by a two-fold desire to address the trauma of victimization and to move crime victims from outside of the criminal justice system, looking in, to the center of the process. Fostering full participation of crime victims has been at the heart of what the victims' rights movement has sought to achieve. Victim advocates, in particular, provide the tools that allow crime victims to reconstruct their lives and regain the control that was taken from them by the criminal. This healing process enables victims to perceive themselves as survivors and in most instances, to seek and achieve full engagement with society once again.

Inclusion and participation have been at the heart of a *parallel* civil rights movement. The *disability rights movement* has worked diligently to ensure that people with disabilities are able to contribute their considerable talents to society. A primary difference for a person with a disability who becomes a crime victim, however, is that the criminal victimization frequently compounds existing problems caused by a lack of accessibility to basic social services, poverty, institutionalization, and other barriers to equal rights. A crime that would be damaging to an able-bodied person is frequently a devastating blow to a person with a disability. Indeed, for many, it is the criminal assault itself that results in a disability, when major life functions—the ability to move, to communicate, to understand—are disrupted temporarily or permanently.

Many people with disabling conditions are especially vulnerable to victimization because of their real or perceived inability to fight or flee, or to notify others and testify about the victimization. Frequently, because a person with a disability may be more physically frail, the victimization may exacerbate existing health or mental health problems. For those who hope

that their disability may "protect" them from criminal victimization, it is shocking to learn that many criminals do not act upon a perceived "desirability" of the intended victim. Indeed, many perpetrators may be unaware that their victims have a disability. Here, the victim is truly random—another one of us in the wrong place at the wrong time—although that victim's ability to frustrate the criminal's intent may be less than a person's without a disability.

Another reality is that many offenders are motivated by a desire to obtain control over the victim and measure their potential prey for vulnerabilities. Many people with disabilities, because they are perceived as unable to physically defend themselves, or identify the attacker, or call for help, are perfect targets for such offenders. People with disabilities are also vulnerable to abuse by the very professionals and other caregivers who provide them with services. Just as many pedophiles gravitate to youth-serving occupations, so do many other predators seek work as caregivers to people with disabilities. Indeed, in one survey, virtually half—48.1 percent—of the perpetrators of sexual abuse against people with disabilities had gained access to their victims through disability services.[2]

People who are victimized are vulnerable to exacerbated suffering. Most victims will experience a sense of shock, disbelief, or denial that the crime occurred, often followed by cataclysmic emotions: fear, anger, confusion, guilt, humiliation and grief, among others. But people with disabilities may have intensified reactions because they may already feel stigmatized and often have low self-esteem due to societal attitudes. The sense of self-blame, confusion, vulnerability, and loss of trust may be exaggerated, as may be an ambivalence or negativity related to their perception of their bodies. Denial and avoidance of the need to cope with the aftermath may complicate the identification of crime victims with a disability. Some victims, particularly elderly and those with developmental disabilities, will need services designed to enhance a feeling of safety and security regarding future victimization.

Unlike most in this series of *OVC Bulletins* focusing on special categories of victims, this one offers no authoritative "census" describing the numbers and characteristics of the victim population under review. The implementation of such a census is very high on the agenda of those working in both the victim rights and disability rights arenas so that, at last, the nation will have reliable data on who among the population with disabilities is hurt by crime, in what way, and how frequently. Despite the absence of an authoritative census, there are a number of studies that indicate that the risk of criminal victimization is much higher for an individual with a disability than for someone without a physical or cognitive disability.

The following are statistics revealed by some studies. For example, research has found that 68 percent to 83 percent of women with developmental disabilities will be sexually assaulted in their lifetime, which represents a 50 percent higher rate than the rest of the population.[3] People with developmental disabilities are more likely to be

A blind woman who was regularly beaten by her spouse received nothing but disdain from her family and few friends. She felt isolated and ashamed. After an appearance by the Executive Director of NOVA on a national television show, the woman called NOVA and asked for help—on the condition that she be allowed to maintain her anonymity.

An elderly woman who was unable to walk was cared for at home by family members. Her grandson, a drug user, frequently stole money from her, especially after the third of each month, when her Social Security Disability Income check arrived. The woman would tuck her money under her to hide it from her grandson. Once, in a state of anger when he could not find her money, he flipped her over and she fell out of the bed onto the floor. She sustained several bruises but was not seen by a doctor. She did not report the abuse or the theft to the police out of fear that her family would no longer want to care for her.

2 Violence and Abuse in the Lives of People With Disabilities: The End of Silent Acceptance?, *Dick Sobsey, R.N., Ed.D., 1994, pp. 75-76, Paul H. Brookes Publishing Co.*

3 Your Safety . . . Your Rights & Personal Safety and Abuse Prevention Education Program to Empower Adults with Disabilities and Train Service Providers. *T. Pease and B. Frantz, 1994, Doylestown, PA: Network of Victim Assistance.*

re-victimized by the same person and more than half never seek assistance from legal or treatment services (Pease & Frantz, 1994). It is not just individuals with developmental disabilities who suffer very high rates of victimization. A study of psychiatric inpatients found that 81 percent had been physically or sexually assaulted.[4] The Colorado Department of Health estimates that upward of 85 percent of women with disabilities are victims of domestic abuse, in comparison with, on average, 25 to 50 percent of the general population.[5]

About 54 million Americans live with a wide array of physical, cognitive, and emotional disabilities. Some disabilities will be more easily discernable than others. People who use wheelchairs, service animals, or walkers are easy to identify. Less obvious will be those with intellectual or mental disabilities (such as people who have learning disabilities or schizophrenia) and those with chronic illnesses (such as people with chronic fatigue syndrome, seizure disorders, arthritis, alcoholism and drug addiction, and HIV disease). As with any crime victim, people with disabilities may be victims of domestic violence, child abuse, sexual assault, homicide, fraud and other types of crimes. They are victimized by family members, acquaintances, strangers, institutional personnel, and caregivers. Many are victimized multiple times.

In addition to people who have been disabled since birth, some people are disabled as a result of violent assaults. Catastrophic physical injuries may result in loss of abilities to see, hear, touch, taste, feel, move, and think in the usual ways. Although statistics on crime-related physical injuries are imperfect, it has been estimated that at least 6 million serious injuries occur each year due to crime, resulting in either temporary or permanent disability. The National Rehabilitation Information Center (NARIC) has estimated that a large percentage—perhaps as many as 50 percent—of patients who are long-term residents of hospitals and specialized rehabilitation centers are there due to crime-related injuries. Those patients seldom receive outreach from a crime victim assistance or compensation program.

Pending a more comprehensive portrait of crime victims within the disability community, it is important for the victim assistance field to gain a better understanding of that community as a whole.

According to the National Council on Disability:

As a group, people with disabilities are older, poorer, less educated, and less employed than people without disabilities. The most widely accepted estimate of the number of people with disabilities is 49 million non-institutionalized Americans (McNeil, 1993). As such, people with disabilities constitute the single largest minority group identified in the United States, surpassing the elderly (about 33.2 million) and African Americans (about 32.7 million) (Bureau of the Census 1995). *[Note: The October 1997 update to this report indicates 54 million Americans reporting having some level of disability, with 26 million of those having a severe disability.]*

Data from the 1990 Census indicate that about 2.3 million residents of institutions have disabilities, most of these residing in nursing homes. Others live in mental hospitals, correctional institutions and mental retardation facilities. Mental disability is the most frequent impairment cited among those living in institutions (LaPlante 1991). In the last decade, the number of people with disabilities who are homeless has increased, particularly those with mental disabilities.

The percentage of people with a disability increases with age. While 5 percent of the population less than age 18 has a disability, 84.2 percent of those age 85 and over have a disability. Of those age 18-44, 13.6 percent have a disability, while of those age 45-64, 29.2 percent have a disability (McNeil, 1993). As the baby boom generation advances in age, the number of people with disabilities will likewise increase.

There are differences in the prevalence of severe disability among races, ethnicity groups and sexes. For the population aged 15-64, 7.4 percent of Whites had severe disabilities, compared to 12.7 percent of African Americans, 11.7 percent of American Indians, Eskimos or Aleuts, 9.1 percent of those from Hispanic origin and 4.5 percent of Asian or Pacific Islanders. Males had a disability rate of 18.7 percent and a severe disability rate of 8.1 percent. For females, the corresponding rates were 20.2 percent and 11 percent (McNeil, 1993).

— *Achieving Independence: The Challenge for the 21st Century,* Report of the National Council on Disability, July 26, 1996, pages 13-14.

4 Assault Experiences of 100 Psychiatric Inpatients: Evidence for the Need for Routine Inquiry. *Jacobson, A. and Richardson, B. (1987) American Journal of Psychiatry, 144(7), 908-913.)*

5 Domestic Violence and Women and Children With Disabilities, Millbank Memorial Fund Report, Paul Feuerstein, June 1997, unpublished

Purpose of the Project

The Symposium participants came together to develop an action plan for victim service providers and other allied professionals to improve their capacity to identify and respond to crime victims with disabilities. Over the course of 2 days, participants identified issues, service gaps, and barriers to access; recommended needed changes; and spotlighted successful programs and promising practices that reach and serve crime victims with a wide array of disabling conditions. The Symposium provided an opportunity for a candid exchange of ideas among a diverse array of individuals and the organizations that they represented. Although unanimity did not always reign, participants were united in their quest of affording all crime victims fundamental justice and comprehensive services.

In the months before the Symposium, NOVA and OVC staff identified knowledgeable people from the fields of disability rights, protection and advocacy, crime victim assistance, law, and research. A number of these pioneers were invited to attend the 2-day transfer-of-knowledge Symposium. Resource materials were identified for Symposium attendees to review, and an agenda was designed that included presentations from experts, facilitated discussion, and small working groups. Symposium participants focused on promising practices currently in use and identified areas for future action. The Symposium was recorded so that a full transcript would be available to aid in developing the recommendations report and subsequently this *Bulletin*.

Participants began their discussion by addressing the following questions:

1. ***How do we begin to understand the experiences of crime victims who are disabled?***

- What are the psychological, economic, social, and legal experiences of people with disabilities who come in contact with the law enforcement, judicial, correctional, emergency medical, and victim service systems?
- How has the passage of the ADA affected the criminal justice system's response to these victims?

2. ***How do we improve service delivery to crime victims who are disabled?***

- How can we improve reporting of crimes against people with disabilities?
- How can we perform better outreach to crime victims with disabilities?
- How can we better serve victims whose perpetrators are their primary caregivers?
- What may be different for those who were disabled prior to their victimization than for those who became disabled as a result of the criminal assault?
- How do we prepare victim service programs to serve all victims with disabilities?
- What do victims with disabilities need/want from the system?
- What strategies can be employed to ensure that people with disabilities do not "fall through the cracks" of the service delivery system, especially those who are institutionalized or hospitalized for long periods of time and those who rely on the care of a personal assistant or home health care system?

3. ***What do crime victim advocates need to know to effectively respond to people with different kinds of disabilities (i.e., victims with developmental disabilities and their families, newly-disabled victims, victims with physical disabilities, and victims with other types of cognitive or mental disabilities)?***

4. ***What do crime victim advocates need to know about the Americans With Disabilities Act and its enforcement?***

Unique Issues Identified

During the Symposium, participants raised many issues that criminal justice and victim assistance professionals need to consider when working with crime victims with disabilities. Although this list is not exhaustive, it is representative of some of the main concerns of the group.

Crime Victims with Disabilities Have Distinct Issues

Most issues that confront crime victims with disabilities are issues that affect all crime victims. They include underreporting of crimes; a lack of responsiveness from law enforcement or prosecutors based on a perceived lack of credibility on the part of the victim; repeated victimization; lack of effective, appropriate services, physical or social isolation of the victim; and a judicial process that is centered on the rights and needs of the offender, not the victim. However, there are important issues and even distinctions that must be emphasized when serving victims with disabilities.

- Crime victims with disabilites have a higher risk of victimization than crime victims without disabilities, and face a greater risk of being revictimized, often at the hands of a caregiver or family member. Consequently, victims may not be in a position to report the crime without fear of retaliation from the care provider.

- A crime victim with a disability or a person who becomes disabled due to crime may not have the resources or the physical stamina to cope with the many delays and hurdles that typically occur in the criminal justice system. For example, if a victim is paralyzed as a result of a crime, the victim will be adjusting to this recent disability at the same time that he or she is interacting with the criminal justice system. The combination may well be overwhelming.

- Child custody issues are typically complex in cases of domestic violence. When the victim has a disability, the issues may be further complicated. According to disability advocates, some courts have awarded custody to the batterer, based on an assumption that children may be better-off with an able-bodied offender than with a victim who has a disability.

Vocabulary Assigned to the Disablility Community

The words that we use are important, as the following issues demonstrate:

- ***Victim*** is a loaded term in the disability rights community. In the medical system, people with disabilities have historically been considered "victims" of their disabilities, i.e., a "victim" of polio. The term reinforces an already-existing, socially-imposed negative identity. Disability advocates have struggled to transform their identity from "victim" to something more positive; therefore, admitting "victimization" is often experienced as a setback. Victim advocates have also long been concerned about using language that would include all crime victims and yet not be stigmatizing. Service providers working with crime victims could clarify the issue by asking the victims how they prefer to be characterized. Some individuals may prefer the term survivor, while others may feel that the use of victim is an appropriate word to describe their status in the aftermath of violent or repeated victimization.

- ***Special services*** is another loaded term with negative connotations. Crime victims with disabilities do not want anything special. They want the rights and services to which they are rightly entitled and request common-sense accommodations to ensure that they can receive them. However, many crime victims (not just those with physical or cognitive disabilities) will need *individualized* attention and services.

- ***Disability*** is more than a physical/emotional/mental issue. It is a political and social issue as well, and frequently is a major source of a person's identity because of societal attitudes. Many people with disabilities view their disabilities as disabling only to the extent to which society does not provide an accommodating environment.

- Just as with many victims, ***violence*** may be defined differently for many people with disabilities. For example, the withholding of a wheelchair, thus forcing a person to slide along the floor, might be considered an act of violence. In that regard, it is important to note that many acts of criminal violence committed against vulnerable individuals, such as children, the elderly, and individuals with disabilities, are referred to as forms of ***abuse.*** While the behavior is certainly abusive, using the term ***abuse*** instead of ***violence*** can serve to minimize the severity of the crime against the victim.

- The ***disability community*** includes family members, who, like the family members of many crime victims, are frequently secondary victims.

Diverse Needs

There is no single, monolithic "disability community." It is made up of many smaller communities that may vary from one geographic location to another, and according to the type of disability:

- Not all disability advocates support mandatory reporting of crimes against people with disabilities. An individual struggling to maintain independence may perceive mandatory reporting as excessive "protectionism," while others believe that the legal requirement to report crimes against "vulnerable adults" is integral to ensuring their safety.

- There are varying numbers of Deaf and Hard-of-Hearing people throughout the country. For example, a large number of Deaf and Hard-of-Hearing people are in the Washington, D.C. area, probably because of the presence of Gallaudet University, the largest 4-year liberal arts university for the Deaf in the United States. Other communities of similar size may have far fewer Deaf residents. However, even within the communities of people with similar disabilities (for example, those with spinal cord injuries, or those who are blind, or those with learning disabilities), it must be remembered that the community is composed of separate, unique individuals who differ from one another and will require individualized assistance. All racial, ethnic, and socio-economic groups include people with disabilities.

- Accessibility is different depending on the disability (also see p. 2 *Limited Access*).

Highlighting Promising Practices

In preparation for the Symposium, NOVA staff identified victim assistance programs that were making inroads in reaching out to crime victims with disabilities, as well as pertinent training materials. NOVA is continuing to seek information about effective programs and training materials that focus on serving crime victims with disabilities. The following are organizations which were highlighted at the Symposium, as well as a few from programs who were unable to have a representative present.

1. The ***Domestic Violence Initiative for Women With Disabilities*** was founded to create, promote, and support viable alternatives for women with disabilities who are victims/survivors of domestic violence and/or caretaker abuse. This program also serves those who have become disabled as a result of domestic abuse. DVI provides extensive education and training to relevant service providers and the public about domestic violence and disability issues. For more information, call 303–839–5510 voice/tdd (Denver, CO).

2. The ***Metropolitan Organization to Counter Sexual Assault Developmental Disabilities Resource Center*** operates a sexual abuse prevention and information program for persons with disabilities. For more information, call 816–931–4527 (Kansas City, MO).

3. The ***Network of Victim Assistance*** has produced a training curriculum and video entitled "Your Safety, Your Rights," which highlights personal safety and abuse prevention information for adults with disabilities and for service providers. For more information, call 215–348–5664 (Doylestown, PA).

4. ***Abused Deaf Women's Advocacy Services*** (ADWAS) is a program of advocacy and services specifically for Deaf, Deaf-Blind, and Hard-of-Hearing victims of domestic violence and sexual assault. Services include a 24-hour crisis line and safe homes for battered women. ADWAS was developed and is administered by Marilyn Smith, a sexual assault survivor who is Deaf. In 1996, Ms. Smith received the Crime Victim Service Award, the highest Federal award for service to victims. For more information, call 206–726–0093 (TTY only) or email to hilsmjs@aol.com (Seattle, WA).

5. The ***Hennepin County Attorney's Office and Crime Victim Initiative*** have spearheaded development of a training program entitled "Police and People with Disabilities," focusing on the important role of law enforcement in serving crime victims with disabilities. For more information, call 800–279–8284 (Minneapolis, MN).

6. The ***Victim Services Unit of the Ventura County District Attorney's Office*** has a history of seeking out under served victim groups in the county. Their program which serves crime victims with disabilities is one of several unique services they provide. For more information, call 805–654–2500 (Ventura, CA).

7. ***Victim Services 2000***, a demonstration project funded by OVC to showcase a comprehensive, seamless model of victim assistance, has worked closely with disability rights specialists in the community to provide training to local victim service providers on how to best serve crime victims with disabilities. For more information, call 303-640-4933 (Denver, CO).

8. ***Victim Assistance to Deaf Adults and Children*** (VADAC). The Department of Public Safety in South Carolina awarded VOCA funding to the State Department of Mental Health Services to deliver comprehensive victim assistance to Deaf and Hard-of-Hearing crime victims in fifteen counties in upstate South Carolina. Most services are provided in the home by case managers who are fluent in American Sign Language. Services include interpreting, case management, crisis counseling, therapy, victim rights information, and information about other available services. For more information, call 864–297–5044 or 864–297–5130 (TTY) (State of South Carolina).

9. ***Domestic Violence Access Project.*** In the State of Hawaii, the Department of the Attorney General has awarded Violence Against Women Act (VAWA) grant funding to a statewide project that is developing linkages between domestic violence programs and service providers working with women with disabilities. The project provides specialized equipment to aid in providing services, as well as training for disability service providers on the nature of domestic violence and how to recognize it, how to elicit necessary information from victims and how to access available services. The development of partnerships and protocols for collaborative efforts should result in better services for domestic violence victims with disabilities. For more information, call 808–534–0040 (State of Hawaii).

10. ***Barrier Free Living, Inc.***, (BFLI) has been working with family violence victims with disabilities for the past 10 years, and has recently expanded its program to include a hotline for victims with disabilities.

In 1986, BFLI received a national award from the National Safety Council for Improving the Lives of People With Disabilities. A report entitled *Domestic Violence and Women and Children with Disabilities* by BFLI Executive Director Paul Feuerstein provides an excellent overview of the problems of women and children with disabilities. For more information, call 212–677–6668 (New York, NY).

11. ***Advocacy for Women and Kids in Emergencies*** (AWAKE) is a program for battered women who are recovering from substance abuse, as well as battered women with physical and cognitive disabilities. Services are offered in a local hospital, community health center, and a public housing project. The available counseling, educational, and advocacy services focus on the development of self-esteem, parenting skills, healing and self-discovery, and ultimately, for a future based on sobriety. For more information, call 617–355–4760 (Boston, MA).

12. ***Back to Life*** is a private, nonprofit organization dedicated to creating opportunities for people with disabilities to participate fully and safely in their communities. The organization provides training and technical assistance to crime victims with disabilities and to the practitioners who work with these victims. For more information, call 512–255–1465, Fax 512– 255–1746, or email: btl@inetport.com (Austin, TX).

Recommendations for Criminal Justice Agencies and Victim Service Programs

Many of the recommendations presented by the Symposium participants apply to all criminal justice agencies: law enforcement, prosecution, judiciary, corrections, and victim assistance. All agencies must work in concert with one another to ensure that vulnerable victims are identified and served. However, since the focus of this *Bulletin* is on improved victim assistance services, emphasis is placed on recommendations for those who work in victim assistance programs. Victim assistance program staff interested in implementing any of the recommendations are welcome to contact NOVA or OVC staff for suggestions on how to get started. Many of the recommendations apply equally to those victim assistance programs that are not based in a criminal justice agency.

Physical Accessibility

1. Criminal justice agencies and victim assistance programs should receive training on the requirements of the Americans with Disabilities Act (ADA) and should support its vigorous enforcement. Agencies/programs should take advantage of technical assistance provided by the Federal government to help ensure enforcement of the ADA. Programs that are not required to abide by the letter of the law should commit to adhering to the spirit of the law. This will help to ensure equal access to the justice system—as called for by Federal law and State constitutional amendments and statutes.

2. When full physical accessibility is not immediately achievable, criminal justice agencies and victim assistance programs should initiate transition planning that focuses on obtaining accessibility by a designated date. Public and nonprofit agencies should understand that development of compliance plans are typically mandated under Titles II and III of the ADA, and with some exceptions, compliance plans are required, not optional. These compliance plans serve as a roadmap in taking incremental steps to improve accessibility, even if complete implementation of the plan must be delayed. The victim assistance sector should join with disability advocates and representatives of the various populations within the community to conduct a community needs assessment survey to ensure that the compliance plan is appropriate and effective.

Networking and Cross-Training

3. Criminal justice and victim assistance personnel should receive training on disabilities, including developing an understanding of disability cultures. Special efforts should be made to identify qualified victim advocates with disabilities as trainers. In addition, criminal justice agencies and victim assistance programs should enlist qualified people with a wide range of different disabilities to lead in all stages of policy development, decisionmaking, program development, and service delivery for crime victims with disabilities from the time of the crime through case disposition and beyond. People with disabilities should be proactively recruited and trained to become volunteers and paid staff members in criminal justice-oriented programs, especially in system-based or private victim assistance programs.

4. Criminal justice agencies and victim assistance programs should reach out proactively to local disability service organizations. They should provide them with information about victim rights and services, then the service organization in turn, can inform their constituents on how better to access the criminal justice system, particularly the victim assistance programs.

5. Criminal justice agencies and victim assistance programs must develop coalitions, cross-training, and joint training opportunities with disability advocacy and services programs to build better working relationships and to better understand the services each offer when working with people with disabilities.[6] In some communities, this coalition could be formalized as an interagency team or coordinating council, including involvement of local or State governmental task forces on disabilities. Communities may wish to emulate the models developed within the domestic violence victim advocacy community. The Commonwealth of Kentucky's *Model Protocol for Local Coordinating Councils on Domestic Violence* could be a useful guide. Call 502–564–2611 for information.

6. Collaborative partnerships must also be fostered with other community-based entities, such as schools, social service agencies, citizen groups, and churches or synagogues. Utilizing the resources of the entire community will help to ensure that service delivery is seamless, more inclusive, and does not duplicate or waste limited resources.

7. Leaders in the victim assistance and disability advocacy fields should work together to develop and utilize innovative ways to communicate, such as e-mail listservs. These links would allow the timely sharing of information and ideas between disability groups and individuals with expertise in disability rights and services with similar experts in victim rights and services. Regional and State Web sites devoted to the needs of crime victims offer another way of fostering this exchange.

Direct Services

8. Agencies should implement or extend streamlined interviewing and intake procedures so that crime victims with disabilities, particularly those with cognitive or communications disabilities, do not have to bear repeated interviewing in different locations. A multidisciplinary approach involving a law enforcement officer, a prosecutor, a victim assistance specialist, and others, as needed, in victim-friendly environments would be more effective and cost-efficient.

9. Agencies should develop and implement specific protocols on disclosures, confidentiality, and safety for crime victims with disabilities, particularly where there is potential for retaliation by a caregiver or a disability services agency. For example, when a crime victim reports to a law enforcement officer (or, when it does not get reported to a police agency, to a victim advocate), that he or she is being victimized by a caregiver and has reason to fear for his or her safety, that victim should be provided with assistance to relocate if necessary and to have emergency replacement caregiver services provided.

10. Criminal justice agencies and victim assistance programs should be proactive in acquiring assistive technology that would help crime victims with disabilities to be informed, present, heard, and understood more effectively when they communicate with law enforcement officers, prosecutors, judges, and victim advocates. For example, victim assistance service providers should know what accommodations will be needed so that a person with a communication disability can make a Victim Impact Statement at the time of sentencing. Assistive technology and accommodations costs (i.e., for computer software, sign language interpreters, paratransit, etc.) should be considered part of the cost of "doing business."

Victim assistance agencies should be aware that under Federal VOCA guidelines, VOCA funds may be used to make services accessible to victims with disabilities. Specific allowable costs include the purchase of items such as Braille equipment or TTY/TTD machines, or for minor building improvements that make services more accessible to victims with disabilities. Specific guidance is contained in the Office of Justice Programs, Office of the Comptroller, *Financial Guide.*

11. Once the agency is accessible and staff is trained, criminal justice agencies and victim assistance programs should publicize their ability to work with crime victims with disabilities by putting the universal symbol of access (the line drawing of a wheelchair) and a TDD/TTY number on all literature, promotional materials, business cards, etc., used by the agency.

12. Victim assistance and criminal justice agencies should incorporate into existing policies, procedures, and protocols the specific inclusion of persons with disabilities who are victims/witnesses of domestic violence, sexual violence, child abuse, impaired driving crashes, survivors of homicide victims, or other violent

6 NOVA has presented at least one workshop on a disability-related topic at its annual conferences since the early 1980's. In 1998, NOVA will present a plenary session on working with crime victims with disabilities, along with a track of six workshops devoted to this issue. The Office for Victims of Crime is sponsoring two of these workshops, including one on requirements of the ADA and technical assistance available to victim assistance agencies to meet these requirements. Crime victim advocates with disabilities will work closely with the conference coordinator to design and present the plenary session and the workshops.

personal crimes. Parallel policies should be written to cover economic crimes committed against people with disabilities.

13. Statistical information about crime victims with disabilities should be systematically collected by criminal justice agencies and victim assistance programs, using the ADA to define disability status.

14. Prosecutors should invoke hate crimes statutes, if indicated, when prosecuting crimes against people with disabilities. Judges should apply equal sentencing or sentencing enhancements, when allowed, for offenders who victimize people with disabilities.

15. When a *violent personal crime* occurs against a person with a disability who is institutionalized, the investigation of the crime should not be handled administratively or informally by the institution's own investigators. Dan Sorensen, in his California Victims of Crime Committee Report (January 12, 1997), noted that there were several studies that suggested that 80 percent to 85 percent of criminal abuse of residents of institutions (an estimated 2.3 million people) never reached law enforcement authorities. Criminal prosecution should be pursued in cases of violent crime.

Recommendations for National, State, and Local Disability Rights Specialists

While many of the recommendations listed above for victim assistance and allied professionals in the justice system also apply to disability rights specialists, the following are suggestions that are specific to disability rights communities. Furthermore, NOVA and OVC staff can make suggestions on how to locate the necessary information to get started with these recommendations.

1. Disability rights and services specialists should learn about State and local victim rights legislation. They should learn how victim assistance programs (both system-based and private agencies) are set up and how services and resources, including crime victim compensation, are accessed. In addition, this information should be shared with crime victims with disabilities and their families.

2. People with disabilities, especially young people, should be educated about the nature of criminal victimization, to whom they should report crimes against them, and how to access help.

3. Personal safety training should be provided for people with disabilities. People with substantial disabilities should work with a knowledgeable specialist to develop personal safety plans.

4. Independent living center staff, benefits rights specialists, protection and advocacy program staff, and legal rights specialists should be trained on how to access State crime victim compensation programs to benefit their clients.

5. National disability rights organizations should establish a national scope criminal justice committee. This committee would establish a national agenda that calls for disability rights organizations and criminal justice authorities to systematically address the issue of crime against all groups of people with disabilities.

6. Disability rights advocates need to work with appropriate allies to establish a personal assistant "bank" for emergencies (to provide backup assistants and financial resources to pay for them).

7. Disability rights advocates should advocate for State laws requiring criminal background checks on prospective personal assistants and other direct service providers before they are hired to care for individuals with disabilities. The Office of Juvenile Justice and Delinquency Prevention (OJJDP), Office of Justice Programs, U.S. Department of Justice, in conjunction with the American Bar Association Center on Children and the Law, recently published *Guidelines for the Screening of Persons Working with Children, the Elderly, and Individuals with Disabilities in Need of Support* (NCJ# 167248). While these guidelines do not mandate criminal record checks for all care providers, they do provide advice on establishing policies to ensure an appropriate level of screening based on specific situations. To obtain a copy of this publication, call or write the Juvenile Justice Clearinghouse/ NCJRS, P.O. Box 6000, Rockville, Maryland 20849-6000, telephone number 800-638-8736, fax number 301-519-5212. This document may also be viewed online or downloaded from the OJJDP Home Page: www.ncjrs.org/ojjhome.htm.

8. Personnel of programs that provide services to people with disabilities should be encouraged and trained to ask about a client's victimization history as part of the routine intake/ assessment process. The disclosure should be entirely voluntary and should be confidential. If a client discloses that he or she has been a crime victim in the past or is currently being

victimized, the service provider should inform the client that there may be victim rights laws that offer protection and offer to refer the client to an appropriate victim assistance agency.

Recommendations for the Office for Victims of Crime

1. OVC should lead the victim assistance field in ensuring that crime victims with disabilities are afforded basic rights and access to needed services. OVC should encourage a strong State response to Section IV.A.4 of the *Final Program Guidelines* for the VOCA Victim Assistance Grant Program. This Section encourages States to identify gaps in available services, not just by the types of crimes committed but also by victims' demographic characteristics, including disability status.

2. OVC should work cooperatively with State Crime Victim Assistance and Compensation Programs to ensure that regional training for VOCA sub-recipients on the requirements of the ADA is available. OVC could then develop an annual accessibility "checklist" for State VOCA administrators, who in turn could provide guidance to VOCA sub-recipients about complying with the ADA.

3. OVC should promote the use of available resources and foster the identification and development of other resources to help ensure that the victim assistance field—in particular those programs funded by VOCA—is educated about issues and concerns relevant to crime victims with disabilities and trained to provide services efficiently, effectively, and with compassion.

- States receiving VOCA funds have the option of using up to 6 percent of the State's victim assistance grant for the purpose of conducting statewide and/or regional trainings of victim services staff. States should be encouraged to use this option to provide needed training to practitioners on the best practices in serving crime victims with disabilities.

- OVC should propose and encourage the formation of a Working Group composed of State VOCA Administrators and service providers to help determine the most effective ways to utilize available resources.

4. OVC should ensure that training materials developed under OVC Grants and Cooperative Agreements are available through the OVC Resource Center. They should be offered in a variety of formats that can be used by victim advocates with disabilities or disseminated to the disability rights community to better educate consumers with disabilities and disability service providers. For example, videos produced with OVC funding should be required to be open-captioned so that Deaf people will be able to use them.

5. OVC should direct VOCA discretionary grant funding to develop training and technical assistance projects that include a strong focus on serving crime victims with disabilities. Special attention should be addressed to crime victims with disabilities from minority and low-income groups, who are least likely of all crime victims to receive victim assistance services. OVC is currently funding several multiyear demonstration projects, *Victim Services 2000*, which are designed to serve as models for communities in rural and urban settings that wish to develop networks of integrated and comprehensive services for crime victims. OVC should ensure that the needs and issues of crime victims with disabilities are addressed comprehensively in these demonstration projects.

6. OVC should work closely with State victim compensation administrators to identify issues and service gaps related to the long-term medical and mental health needs of crime victims with disabilities when developing crime victim compensation guidelines. For example, a long-term medical expense for one Symposium participant who became blind after being shot, is to be refitted for and to replace her prosthetic eyes every few years; an expense of about $1,700.

7. OVC should encourage presentations on themes relevant to increasing accessibility of services for crime victims with disabilities at all State, regional, or national conferences, conventions, symposia, focus groups or meetings funded by OVC. In particular, training for VOCA administrators attending the annual VOCA conference should promote the importance of serving this population of crime victims. The training should present the most efficient ways to use State VOCA funds to increase physical access through facility modifications or acquiring specialized communication equipment. OVC should also study how much VOCA funding is currently being spent annually to increase access of services to crime victims with disabilities, and how much additional VOCA funding will be needed to ensure full accessibility.

8. OVC should establish dynamic partnerships with disability communities at the national level (paralleling local efforts) to encourage policy and program development that will benefit crime victims with disabilities.

9. OVC should develop a mechanism for using and disseminating the information on disability status that is currently collected by VOCA subrecipients. Such statistics could be used to develop "benchmarking" standards.

The Federal Performance Report Working Group should be composed of representatives from (1) the Office for Victims of Crime and the Violence Against Women Grants Office of the Office of Justice Programs at the U.S. Department of Justice and (2) The Center for Disease Control and Administration on Children and Families of the U.S. Department of Health and Human Services. The Working Group will develop a standardized *Statistical Summary Subgrant Award Report* that could be used by all organizations receiving Federal funding to assist victims of crime from any of these Federal funding sources. OVC should formally recommend that this standardized report include disability status and the nature of the disability as part of the demographic data that is collected.

10. The National Victim Assistance Academy, funded by OVC, should build on the current training component on working with crime victims with disabilities.

Recommendations for Other Department of Justice Agencies

1. The National Institute of Justice should work with the appropriate disability-related research agencies to establish a long-term research agenda focusing on the needs of crime victims with disabilities from the time of the occurrence of the crime through the entire criminal justice process. Such research should seek to determine the best methodologies for identifying the level and nature of victimization risk, the impact of criminal victimization on victims with disabilities, the need for specialized types of victim services, the ability to access victim services, and the challenges posed to the criminal justice system in investigating and prosecuting the offenders, as well as preventing future victimization.

2. The OVC funded project administered by the National Institute of Justice on "The Effectiveness of VOCA Funding in Meeting the Needs of Crime Victims" should incorporate specific strategies to measure the ability of VOCA subrecipients to identify and serve crime victims with disabilities and to identify the barriers that impede those efforts.

3. The National Crime Victimization Survey, the Unified Crime Report, and other data collection surveys should be redesigned to capture data on the incidence of violence against people with disabilities and the number of people who become disabled due to crime-related catastrophic physical injuries. If alternative survey methods are used, they should be designed and implemented with sufficient resources so that their findings are as authoritative as others produced by the Department of Justice.

4. Appropriate offices in the Department of Justice should work collaboratively to focus on the problems of crime against people with disabilities to foster cooperation in the development of policy initiatives at all governmental levels.

5. The Violence Against Women Grants Office and the Civil Rights Division of the Department of Justice should work to enhance the physical and attitudinal accessibility of domestic violence and sexual assault programs to women with disabilities and actively discourage any kind of discrimination in service provided to persons with disabilities.

These recommendations represent only a first step toward building a better service delivery system for crime victims with disabilities. The Symposium participants who developed these suggestions are committed to continuing their work and to recruiting others to continue the work that they have begun.

Implications

The victim assistance field has made great progress since its beginnings in the early 1970's. However, there is much more to achieve in order to ensure full inclusion and full participation of all crime victims.

Currently, few networks exist to bring together the various specialists in the field of victim rights and services and their parallel colleagues in the disability rights field. Until such networks are developed, it is likely that strategies for outreach, training, and coordinated service delivery will be delayed. Effective networking could promote participation of people with disabilities in our criminal justice process, ensure timely delivery of appropriate services to crime victims with disabilities, promote community awareness of the special needs and concerns of victims with disabilities, and help disseminate facts about victimization in the varied communities of people with disabilities. Developing such networks will take the time and energy of many committed individuals and agencies in both the victim rights and the disability rights arenas.

It is clear that policies will not be changed, service providers will not be trained, and help will not be provided without the active involvement of the constituencies for whom the services are intended. People with disabilities must take a leading role in helping to determine the future of victim rights and services for themselves, and they must work in concert with all the various criminal justice entities to make that happen.

Leadership and funding will be needed not only from OVC but also from other appropriate funding sources to ensure that our criminal justice agencies and victim assistance programs are fully accessible to people with disabilities and that the staffs of those programs are appropriately trained to provide quality services. Given the large numbers of crime victims with disabilities, programs will need additional funding in order to provide the level of services needed. When funding is not immediately available, program managers will need to be creative in seeking alliances with new partners to help make service delivery a reality. Lack of funding should never be an excuse for excluding any crime victims from our American system of justice.

Americans with disabilities are a widely diverse group of people with varying levels of independence and needs. The challenge for the future is to ensure that all people with disabilities become full participants in the criminal justice system. The National Council on Disability noted in its *Achieving Independence* report that the "achievement of independence for people with disabilities is a test of the very tenets of our democracy. It is a test we can pass." As victim advocates, we now know that there is a potentially huge population of unserved and under served crime victims who have the right to the services that we are committed to giving to all crime victims:

- The right to protection from intimidation and harm.
- The right to be informed concerning the criminal justice process.
- The right to counsel.
- The right to reparations.
- The right to preservation of property and employment.
- The right to due process in criminal court proceedings.
- The right to be treated with dignity, compassion, and respect.

While the United States is viewed as the world leader in civil and disability rights, crime victims with disabilities are largely invisible and their legal rights for service—and justice—go unaddressed. C*riminal* rights are carefully monitored by the justice and legal system; the crime victims' rights movement is striving to achieve recognition of similar rights and services for the *victim*, including those with disabilities.

The challenge for the future is to ensure that all people with disabilities become full participants in the criminal justice system.

Meeting the needs of crime victims with disabilities presents the criminal justice system, including the victim assistance field, with a great challenge. It will not be accomplished simply by extending the umbrella of "victim assistance" to cover more or even all crime victims with disabilities. Rather, a partnership between the victim assistance and disability advocacy fields needs to be built that fosters mutual respect and sharing of ideas, knowledge, capabilities, successes, and collaborative efforts in order to develop strategies to address the problems. Such a partnership will strengthen the capability of both victim and disability advocates in their efforts to ensure that all crime victims are afforded fundamental justice and access to quality, comprehensive services.

The facts are before us. We cannot turn back now.

For Further Information

For additional information about the project and products related to *Working With Disabled Crime Victims*, contact NOVA or OVC at the following addresses and phone numbers:

Office for Victims of Crime
U.S. Department of Justice
810 7th Street, N.W., 8th Floor
Washington, D.C. 20531
202–307–5983
202–514–6383 fax
Web Site:
http:\www.ojp.usdoj.gov\ovc\

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The Office for Victims of Crime is a component of the Office of Justice Programs which also includes the Bureau of Justice Assistance, the Bureau of Justice Statistics, the National Institute of Justice, and the Office for Juvenile Justice and Delinquency Prevention.

National Organization for Victim Assistance
1757 Park Road, N.W.
Washington, D.C. 20010
202–232–6682
202–462–2255 fax
E-mail: nova@try-nova.org
Web Site: http:\www.try-nova.org

Additional Resources

Following are useful resources. The list, of course, is not complete, in the interest of brevity.

Books

Violence and Abuse in the Lives of People With Disabilities: The End of Silent Acceptance? Dick Sobsey, R.N., Ed.D., Paul H. Brookes Publishing Company, Baltimore, MD.

Violence & Disability: An Annotated Bibliography, Dick Sobsey, Don Wells, Richard Lucardie, Sheila Mansell, Paul H. Brookes Publishing Company, Baltimore, MD.

Caregiver Abuse and Domestic Violence in the Lives of Women With Disabilities, Meeting the Needs of Women With Disabilities: A Blueprint for Change, a Project of Berkeley Planning Associates. Marlene F. Strong and Ann Cupolo Freeman. 510–465–7884 (booklet).

Curricula and Videos

Your Safety, Your Rights, a personal safety and abuse prevention program for adults with disabilities and for service providers. Terri Pease, Ph.D. and Beverly Frantz, Network of Victim Assistance, 215–348–5664.

Charting New Waters: Responding to Violence Against Women With Disabilities, Video and Facilitators' Guide. Justice Institute of British Columbia, 604–525–5422.

Together We Can Make a Difference: A Police Orientation Manual on Citizens With Disabilities. Pennsylvania Commission on Crime & Delinquency, Harrisburg, PA.

Police and People With Disabilities. Law Enforcement Resource Center. Minneapolis, MN 800–279–8284.

Miscellaneous

San Francisco Police Department's "Transition Plan for Police Stations and the Hall of Justice" (re: Americans With Disabilities Act), contact Sgt. Michael J. Sullivan, ADA Coordinator, 415–553–1343, 415–558–2406 (TTY).

Personal Safety Awareness Center Resource Lending Library Listing of Materials, Austin Rape Crisis Center, 512– 445–5776 x 210.

National Council on Independent Living, 2111 Wilson Boulevard, Suite 405, Arlington, VA 22201, 703–525–3406 (voice), 703–525–3407 (TTY), to locate the nearest Center for Independent Living.

ADA Information Line
800-514-0301 (Voice)
800-514-0383 (TDD)
www.usdoj.gov/crt/ada/adahom1.htm
The U.S. Department of Justice answers questions about the ADA and provides free publications by mail and fax through its ADA Information Line; publications may also be viewed or downloaded at its website.

Disability and Business Technical Assistance Centers (DBTACs)
800-949-4232 (Voice/TTD)
www.icdi.wvu.edu/tech/ada.htm
The National Institute on Disability and Rehabilitation Research (NIDRR) of the U.S. Department of Education has funded a network of grantees throughout the nation to provide information, training, and technical assistance to agencies and businesses regarding their responsibilities and duties under the ADA. Your call to the above toll-free number will be routed to the DBTAC in your region.

President's Committee on Employment of People With Disabilities, List of Chairpersons, Vice Chairpersons and Secretaries of Governors' Committees on Employment of People With Disabilities, 202–376–6200 (voice)/376–6205 (TDD). The Job Accommodation Network (JAN) is a service of the President's Committee on Employment of People With Disabilities, and provides personalized consulting services by giving callers detailed accommodation solutions and answers to specific questions about the ADA. Call 800–ADA–WORK (800–232–9675) voice/tty. Computer Bulletin Board: 800–Dial–JAN, 800–342–5526). Web Site: http://janweb.icdi.wvu.edu. The Access Board provides ADA accessibility guidelines for new construction and compliance issues for facilities built with Federal dollars. Call 202–272–5434 voice, 202–272–5549 tty, Web site: http://access-board.gov.

Related Web Sites

www.cavnet.org
www.boystown.org/research/abused.html
www.quasar.ualberta.ca/ddc/ddb/sobleymansell.html
www.psych-health.com/death.html
www.psych-health.com/tony.html
www.vh.org/Welcome/UIHC/UIHCMedDepts/Peds/ChildAbuse/DHSAdult.html
www.realtime.net/austinrapecrisis/HTML/psac.htm
www.pcepd.gov
www.icdi.wvu.edu/tech/ada.htm

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