Risk of abuse in disabled children

A systematic review of studies from across the world suggests that more than a quarter of children with disabilities will experience abuse within their lifetimes and that children with disabilities are 3 to 4 times more likely to be victims of abuse than their peers without disabilities.

Overview: According to the World Health Organization, about 5% of children worldwide (around 93 million children) have a moderate or severe disability. Children with disabilities are thought to be at greater risk of violence for a variety of reasons including heightened vulnerability as a result of the need for increased care, including medical attention.

Current advice: The Department for Education has practice guidance for Local Safeguarding Children Boards, which makes clear that disabled children have the same human rights to be safe from abuse and neglect, to be protected from harm, and to achieve the Every Child Matters outcomes as non-disabled children. It also states that disabled children require additional action, because they experience greater and created vulnerability as a result of negative attitudes about disabled children, unequal access to services and resources, and because they may have additional needs relating to physical, sensory, cognitive and/or communication impairments.

Disabled children and young people should be seen as children first. Having a disability should not and must not mask or deter an appropriate enquiry where there are child protection concerns. This premise is relevant to all those involved with disabled children and is particularly relevant to healthcare workers given the key role they play and their close involvement with many disabled children and their families.

New evidence: A systematic review and meta-analysis synthesised evidence from 17 studies (15 cross-sectional and 2 cohort) to assess the prevalence and risk of violence against children with disabilities (Jones et al. 2012). The studies included 18,374 children with disabilities (mostly aged 2–18 years) from the UK, USA, Sweden, Finland, Spain, and Israel.

Results showed that 26.7% of children with disabilities have been exposed to some type of violence (physical, sexual, emotional abuse, or neglect). Children with mental or intellectual disability seemed to have a higher risk of violence than children with other types of disability (odds ratio 4.28). This was particularly apparent for the prevalence of physical violence (odds ratio 3.08), emotional abuse (odds ratio 4.31), and for the risk of sexual violence (odds ratio 4.62).

The researchers suggest that children with disabilities in all settings should be viewed as at high risk of violence, and that interventions shown to be effective for preventing and reducing the impact of violence in children without disabilities should be assessed in children with disabilities as a matter of priority. However, more research is needed, which encompasses all disability types and assesses whether disabilities were present before exposure to violence or were a direct result of violence.
Commentary: “This is an important study, indicating once again the greater vulnerability of some children to inflicted harm. The heterogeneity in the results due to variability of the data studied, and to which the authors rightly refer throughout, does not invalidate the overall message. One methodological difficulty is the use of the term ‘violence’ to describe the experiences of the children. The term also includes neglect, which would not be ordinarily associated with violence; nor is all emotional abuse necessarily violent. Indeed, as the authors point out, most of the studies actually describe maltreatment.

“Another difficulty in understanding the results is the grouping of the various disabilities in the results. Although the various types of disability included in the review are separately defined, when reporting the results they are combined in a way that obscures what is included. Thus, mental and intellectual disabilities were combined; disability associated with mental illness was also mentioned and the latter included depression, anxiety, post-traumatic stress disorder, emotional disorder, behavioural disorder, oppositional defiant disorder and conduct disorder.

As the authors point out, some of these could be secondary to maltreatment. Equally, it is not clear whether physical impairments mentioned in the results include long-term health problems. The nature of the vulnerability of these children is somewhat different from the vulnerability of children with physical or intellectual disabilities. This makes it more difficult to deduce explanatory mechanisms for the vulnerability of these children and the safe conclusion from this study must be that any child who has a functional difficulty is at risk of maltreatment.” – Danya Glaser is a Visiting Professor at University College London and Honorary Consultant Child and Adolescent Psychiatrist at Great Ormond Street Hospital for Children, London.

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