

NHS Scotland We Matter Too

Disabled people and domestic and sexual abuse

ann craft trust
acting against abuse

Sarah Goff for 19 March

Welcome!

환영(hwan-yeong)

Korean

Tere tulemast

Estonian

maligayang pagdating

Filipino

أهلا بك

Arabic

soo dhaweyn

Somali

خوش آمدید

Urdu

સ્વાગત Gujurati

Bine ati venit

Romanian

באַגריסן

Yiddish

Croeso

welsh

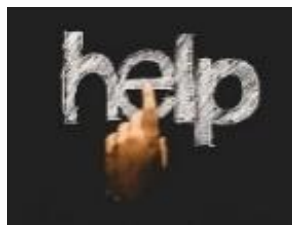
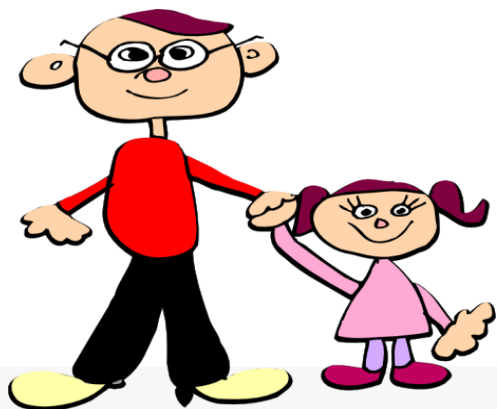
Benvenido

Spanish

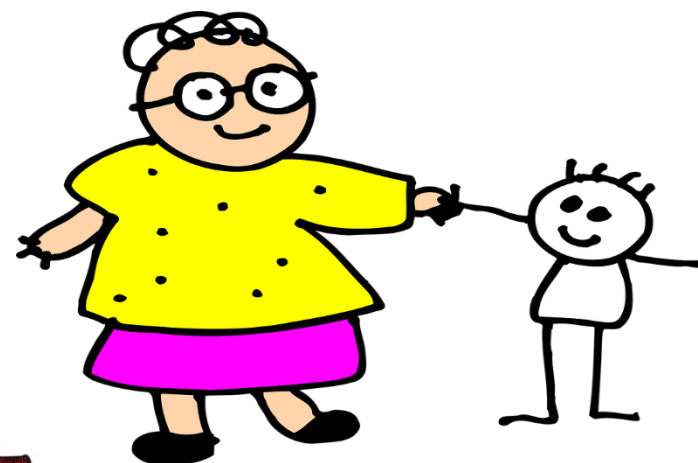
Fáilte

irish

Many disabled children, young people and adults receive good and loving care

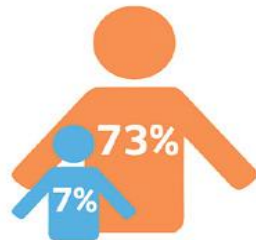


LOVE





Life chances for those with learning needs are poorer Keys to Life Implementation plan highlights this



People with learning disabilities die on average, **20 years earlier** than the general population.¹



The estimated employment rate for people with a learning disability is **7%** compared to Scotland's national employment rate of **73%**.²

There are **14,200 children with a learning disability** registered as receiving additional support in Scotland's schools.³



There were **1,434 (6.2%) adults with learning disabilities** known to local authorities enrolled in further education in 2017.⁴

52% of people recorded as having 'a learning disability' lived in social housing, compared with **21%** of the population as a whole.⁵



39% of people with learning disabilities live in owner occupied property, compared with **66%** of the population as a whole.⁶

Risks of violence - disabled young people and adults

15% disabled women compared to about 7% non disabled women experience domestic abuse

8% disabled men compared to 4% non disabled men experience domestic abuse

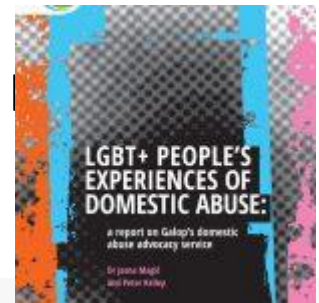
Key issues

- Greater risks,
- Lack of awareness
- Dependence on abusive carers
- Lack of voice

Risks of violence - disabled young people and adults

Recent research highlights groups who may be marginalised within service provision

- Womens' Aid; Nowhere to Turn Report 2017
- Womens' Aid Survival and Beyond 2018
- SafeLives Spotlight report Disabled Survivors Too! 2017
- Ravi Thiara 2011
- LGBTQ Galup Jasna Magic 2018 55% of their sample had mental needs/disabilities



Spotlight report 'Disabled Survivors Too!' looking at practice

Possible reasons

- poor commissioning
- lack of awareness or
- understanding in practice
- social stereotyping of victims of domestic abuse
- services being inaccessible
- around four fifths of disabled survivors not supported by MARACs and many MARACs do not record disability
- no referrals had come from adults' services and only 9% survivors were receiving adult social care support

Spotlight report 'Disabled Survivors Too!' looking at practice

Disabled victims of domestic abuse experienced

- more severe and frequent abuse over longer periods of time
- average of 3.3 years before seeking support, compared to 2.3 years for non-disabled victims.
- 8% more likely than non-disabled victims to continue to experience abuse
- 20% experienced ongoing physical abuse
- 7% ongoing sexual abuse.

Implication for disabled adults of legacy of increased risks as children

- 3.4 times more likely to be abused 3.76 times more likely to be neglected (Sullivan and Knutson 2000)
- 26.7% disabled children have experienced abuse ie 3 to 4 times more likely to than non-disabled children.
- Over 20% have experienced physical violence and 14% sexual violence (Jones et al (2012) Lancet).
- What does this mean for the life histories of some of the young women we are now working with?

Related research

- Sexual exploitation increased risks for teenagers with learning disabilities; Unprotected Overprotected (Franklin, Smeaton and Raws, 2015))
- Criminal exploitation?
- Newcastle Joint Children and Adults' Serious Case Review
- Risks in transitions David Spicer 2018
- 'Don't Hold Back' (2018) Sally Holland Welsh OCC

My Marriage My Choice

Learning disability and Forced Marriage

Reasons

- Future care concerns
- Genuine misunderstandings
- Practitioner and family awareness

Training

- Mental capacity Assessments
needed

Forced Marriage Unit



Andrea Hollomotz 2011 Sexuality and Learning disability; A Social Approach

Study of 29 adults with learning disabilities understanding of sexual abuse

- Tyler had not reported sexual assault by an older young man because he did not know that men could assault other young men
- Josie did not have sex with her boyfriend although she desperately wanted to because she had been told it was rude when you were not married
- Paul liked another boy at college but felt very bad about this and became distressed. He had not been told about gay sex
- Keisha did not realise that being shown sexual material by staff on his phone was not ok; when he asked her to let him take pictures of her at first clothed, then with her top off. She did not say no because he was a member of staff and she did not know that people she knew could harm her; she thought abuse was by strangers

Hollomotz Study: Factors in care and home environments

- Fear of being in trouble for having relationships
- Fear of masturbation as rude or naughty
- Lives very programmed and managed
- Lack of open dialogue increasing risk
- Need positive approach and access to appropriate privacy
- Dangers of absorbing key information via media with gender and sexual stereotyping

Self defence skills Hollomotz 2011

- Knowledge about sex and sexuality
- Vocabulary needed to report
- Social awareness to detect sexually violating situations
- Ability to distinguish sexual behaviours from personal care
- Awareness of one's right to resist sexual contact
- Self-esteem needed to resist
- Feeling in control over what is happening to one's body
- Ability to make decisions

Good practice in helping young disabled people understand sexual awareness and choices

- Good basic knowledge but concrete, accessible and broad
- Even more comprehensive than for non learning disabled children
- Non judgemental re sexual practices and identities
- Consent and forced participation need to be discussed
- Need opportunity to discuss media images and peer talk
- Development of choice and resistance skills
- Duty both to protect and maximise capacity and independence
- Must be informed by awareness of ecological context of risk and underlying social processes involved in the formation of risk

Sex education and developing sexual assertiveness

- More than just knowing about body parts – 80% could name body parts of self but not opposite sex – implications for reporting abuse
- Some (a third) believed sex was bad or rude increasing risks of guilt and shame
- Sex as pleasurable but may also be painful; need to be able to recognise differences
- Need to learn about gay and lesbian as well as straight identities
- May be factually knowledgeable but not yet have skills to recognise unwelcome events or say 'no'
- Etiquette or social behaviours eg men's loos
- Condoms but not just to prevent pregnancy
- Many in the study were able to develop strategies with help, to ward off unwelcome or uninvited sexual advances and 33% had acted to do so

Disabled young person/adult
less likely to recognise or be able
to tell us

Professionals less
likely to recognise
and think critically

Targetted if seen by
some as less likely to
tell or be believed?



Dependence

**Parents/carers
needs may not
be met for support**

Cuts and strategic gaps;
impact of scarce
resources in MH, DA
specialists,
short breaks, speech
therapy, PBS, advocacy,
CAMHS,

How does harm, risk and abuse come to light/notice?

Significance of role of eyes and ears people; our responsibility to ask – not to rely on ‘disclosure’

- Dangers of relying on ‘disclosure’
- Importance of listening and noticing, asking and attentiveness, perseverance
- Importance of professionals’ ability to spot and recognise harm
- Active attention to their responsibility to communicate in the person’s preferred style
- Active attention to finding out how their impairment affects them
- Critical thinking
- Use of observation skills
- Hints?
- Behaviour is a form of communication
- Not making assumptions that behaviours are related to impairment
- Hearing tone of voice, watching gaze, manner of treatment

Legacy of narrow focus in practice?

Research on practice in social work with disabled children and young people in Scotland

‘Disabled Children and Child Protection in Scotland: An investigation into the relationship between professional practice, child protection and disability’
(Taylor et al 2014)

Realising later as the young person grows up

- **I knew nothing over the years. I thought it was alright but I realised that it was not alright. Later, I realised that it was abuse and it was not right. When I was reading the news about child abuse, I realised that it was the same for me.**
- Deaf and Disabled Children Talking about Child Protection (Taylor, J et al; NSPCC 2015)

Young people's voices and experiences; trying to tell, not being heard

-workers should have thought why I was always so angry, why I was always behaving badly to the foster parents. **Liz 11FA**
- It was wrong but I kept quiet. I didn't know how to tell anyone. I didn't know how to break the silence. I didn't know how to tell my Mum that he had been touching me. I didn't know how so I had to keep quiet. **Tessa 5FA**
- I did have counselling but with a woman who couldn't sign. She would use a laptop to communicate with me. She typed, 'How are you?'. I thought it was strange. I typed back 'I am ok'. She said, 'Do you want to talk about anything?' ... It wasn't possible because we couldn't communicate with each other. **Tessa 5FA**
- **Deaf and Disabled Children Talking about Child Protection 2015**

I thought it was normal

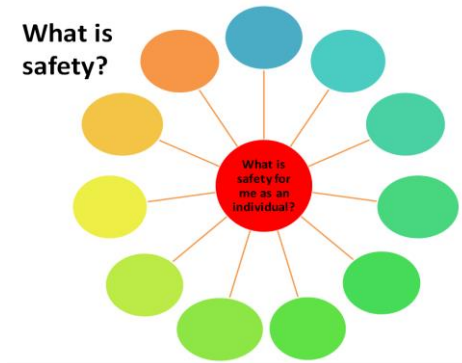
- I think ... I'd grown up around it for like ages it was like all I know and I just thought it was normal. **Sara 1FA**
- ... I didn't know it was illegal. There was no information, there was no books when I was kid, or posters, nothing. There was no information, didn't have social workers. **Wendy 8FA**
- ...when you're immersed in an abusive environment as a child, you don't realise that it's abuse, I didn't know it was abuse, I just knew I was unhappy, I knew I didn't like how I was being treated, but I didn't realise it was abuse, I didn't know it was wrong, or that it shouldn't have been happening to me. **Maggie 10FA**

Deaf and Disabled Children Talking about Child Protection 2015;

Making sense of what young people have learned

How did we learn?

- How to make choices?
- How to take risks, make mistakes?
- About what are friends?
- About who are safe friends?
- About safe touch?
- About trust in self and ability to try things
- About trust
- About sexuality



Based on Firmin's model; how is the young person seen



Importance of making sense of the values which underlie practice. (Taylor et al Strathclyde 2014)

Medical model	Disabled child viewed as sick, limited by the impairment and the focus of intervention is on the impairment	The child is seen as not meeting milestones, unable to do things and in need of intervention; seen in deficit terms
Philanthropic model	Disabled child seen as object of pity; the disability is seen as a personal problem; helping them is doing good work	Consequences maybe that the person is seen as helpless and has to be grateful and passively accept help
Belief's Model	Disability is a punishment for wrong doing and may be based in religious or other beliefs or superstitions And that the person needs to try harder	It is seen as fate and has to be accepted passively
Social model	Based on the view that a person has an impairment but that what disables them is how they are treated and how society responds to them	The person/child is valued and intervention is needed to change how they are responded to

Unprotected, overprotected:

meeting the needs of young people with learning disabilities who experience, or are at risk of, sexual exploitation

(2015)

False perception that young people with learning disabilities do not have needs, wishes or desires to have relationships and that they cannot be sexually exploited.

Time and attention and an individual approach to communicating and supporting the development of a young persons' understanding of relationships, online safety, grooming and exploitation.

Entrenched societal perceptions in how we treat young people with learning disabilities.

Infantilisation of young people.

Lack of empowerment and voice.

Overprotection and underprotection.

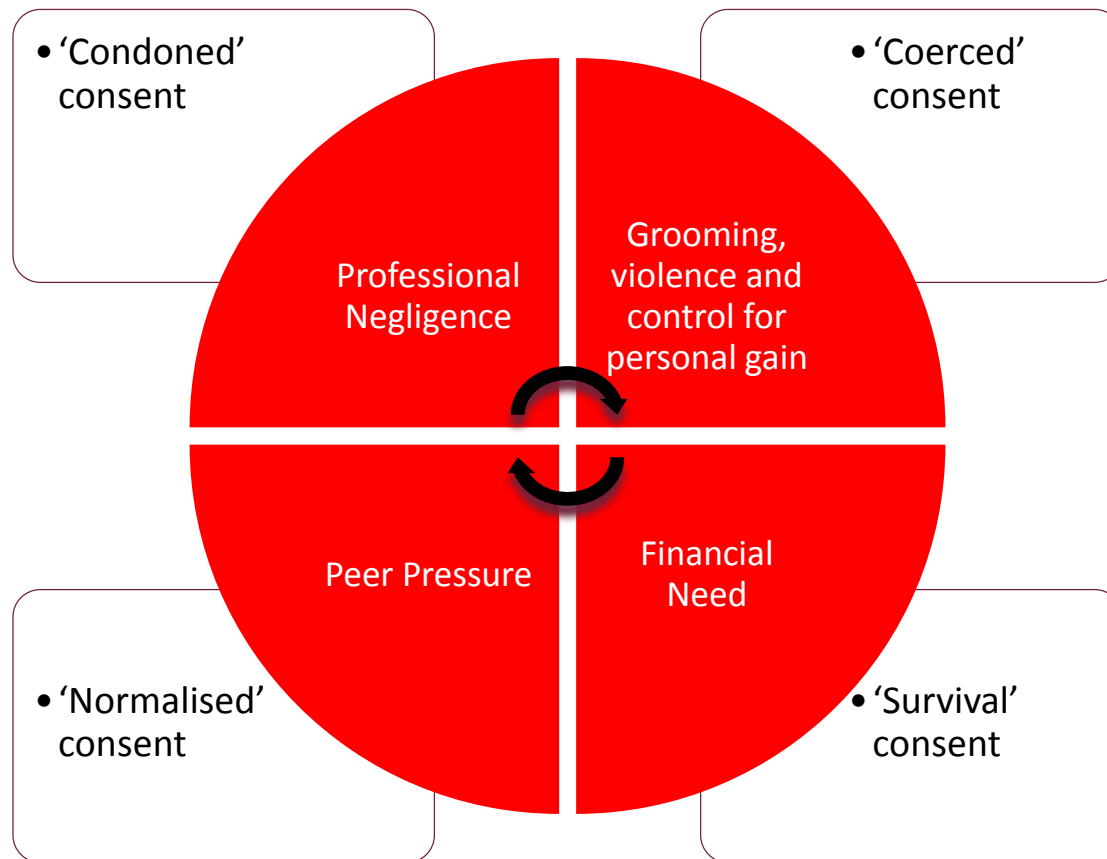
Social isolation and invisibility.

Lack of access to support for mild or moderate learning difficulties and young people with Autistic Spectrum Conditions (ASC) or ADHD.

Lack of; practitioner knowledge on learning disabilities, information sharing, multi-agency working and available services.

Particularly vulnerable to online grooming.

CSE: Social Model of Consent (2015)



JENNY PEARCE 2015
University of Bedfordshire

Domestic abuse and disability; looking at experiences of disabled young people of domestic abuse

Lloyds Bank Foundation Funded project Ann Craft Trust

- Currently underway led by Sarah Goff at the Ann Craft Trust with Dr Anita Franklin from Coventry University
- Interviews carried out with young people with over 30 professionals and sessions with groups and some individual young people

Aim

- To understand the experiences of disabled young people of support and intervention
- To explore what disabled young people want from domestic abuse services and support agencies
- To understand from professionals what works to support disabled young people and what are the barriers to delivering this support.
- To develop training materials and policy and practice recommendations.

Emerging findings from domestic abuse and disability

(Lloyds Bank Foundation funded study by ACT with Coventry

University)

- young people want to learn about healthy relationships
- they need help to make sense of behaviour and responses
- lack of awareness in domestic abuse processes /tools eg risk assessments
- assumptions that problems are related to impairment
- not seeing behaviours as abusive because carers are seen as overloaded
- not recognising distress
- not asking the right questions
- young person labelled challenging as opposed to finding out what the behaviour is communicating

Isolation and dependence

quotes taken from practitioner interviewed for ACT Disability and Domestic Abuse (Lloyds Foundation funded study by Ann Craft Trust (ACT) with Coventry University)

- ‘The person who’s perpetrating it can be also somebody who has a disability as well but also somebody who could be providing the care to that they’re very dependent on and that they’re often at times much more isolated than I guess your generic victim of domestic abuse. Maybe because of the care and support needs that they have of the perpetrator of the abuse but also the small community that they’re part of that the perpetrator can be a part of as well’.
- ‘whether it’s the noise and the emotions that is the impact on them. And to me that’s really sad because they can’t run away. They can’t tell anybody; they’re literally imprisoned in their own fear.’

Some responses....

(quotes taken from practitioner interviewed)
(Lloyds Foundation funded study by Ann Craft Trust (ACT) with Coventry University)

- ‘One of the women who we were working with in a refuge, it was quite clear she had learning difficulties and she said I've only got the learning of an eight to a nine-year-old. There was nowhere to refer her to. Nobody would take her.’
- ‘I don't think he'd even realise that there was something wrong if dad hit mum or boyfriend. I think he would if it was him. I think he'd come and tell you if he'd been harmed. But I don't think he'd come and say anything about mum being harmed or any abuse in the home. Especially not boys’.

Emerging issues

(Lloyds Foundation funded study by Ann Craft Trust (ACT) with Coventry University)

- Lack of data held by projects about the numbers of disabled young people experiencing domestic abuse
- Evidence of young people not understanding rights, choices
- Workers indicate they do not necessarily deal with issues of young people/young adults and domestic abuse, but when they start to talk about support, then issues of domestic abuse do emerge.
- Questions about how far workers are aware of domestic abuse of young people/young adults with LD and the greater risks which they experience.
- Gaps in transition support

Challenges in practice emerging issues from Disability and Domestic abuse study

(Lloyds Foundation
funded study by Ann Craft Trust (ACT) with Coventry University)

- Children and young peoples' services fit with adults' services /transitions
- Different discourses; adult social care tendency to focus more on disability and care needs, financial abuse by carers etc
- Lack of focus on understanding of relationships in children's and young peoples work continues to be an issue as identified in previous research
- How able are adults services to focus on family dynamics in the context of perceptions of individual and choice, capacity and rights
- Overlap with themes from CSE
- Issues around diagnosis and recognition of disability and its impact /meaning for day to day lived experience on the young person/adult's life
- Social and holistic approach needed with multi-agency coordination to ensure understanding of both the disability and of domestic abuse

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Everyone has a right to be treated with respect and dignity.
Everyone deserves to be safe.