Missing from View: Lessons from recent studies on disabled children's abuse and sexual exploitation.

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Disabled Children's Research Network
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Abuse of disabled children

- 3–4 times higher than for non-disabled children (Jones et al 2012; Sullivan & Knutson 2000)


- Those with speech and language impairments, intellectual disabilities or ‘behavioural disorders’ at greater risk (Sullivan & Knutson 2000)
Talking about Child Protection (Taylor et al 2015)

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Talking about Child Protection (Taylor et al 2015)

- Aim – to fill a gap in knowledge by exploring deaf and disabled children’s experiences and views of child protection in UK

- In-depth interviews with 10 deaf/disabled children and adults
Communication Issues

- Research assistant a native BSL user
- Team worked closely with two interpreters
- Participants offered two meetings each
- Interviews audio or video recorded
- RAG included communication specialists
- We also had three young disabled advisers
- Research materials in accessible formats
Method – Pictorial information

We care about protecting children and young people

The Child Protection Research Centre,
University of Edinburgh

Have you been hurt by someone? Or not looked after? Or touched or made to touch in ways you didn’t want? Or anything that made you feel really bad? Did you get any help? Or not?

You can choose the place.

You can bring someone else to help, if you want.

2 Meetings:
1: short
2: up to one hour

If you have questions, please get in touch:
Dialogic approach to consent
Sample characteristics

- 3 males, 7 females
- Aged 12 – 51
- 6 in Scotland, 2 in England, one Wales, one N. Ireland
- One BME background
- Range of impairments, 7 were deaf
- Had experienced a range of abuse, all for several years.
Disclosure

- 7 people had disclosed as children
- In only two cases this led to positive action which stopped abuse
- Most found it extremely difficult to disclose
- Some tried to communicate distress in other ways... usually unsuccessfully
- A few were skilled in keeping silent for many years
“When I first started showing signs of mental illness I think someone should have sat down and asked me why, ‘cause it’s not a normal thing for an 8 year old to do.” (woman who had tried to commit suicide aged 8)

“[The abuse] 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”. (woman)
Confusion about what ‘counts’ as abuse of disabled children

Disabled children’s credibility questioned

The children themselves sometimes blamed

Fear and social isolation

Invisibility of disabled children within services
“When I was growing up, over the 10 years, I always thought, it was my fault because I didn’t know….I thought it was my fault or was it his fault? Or both, our fault? Then I started to think and panic that I can’t really tell anyone.” (Male).

“They should’ve recognised me when I was more littler…that I wasn’t getting looked after.” (girl with learning disabilities)
Enablers of help-seeking

- Supportive, trusting relationships
- Access to professional interpreters

“It was good to see a policeman who could sign. I felt comfortable straightaway, I felt a candle was being lit and felt warm.” (Adult male).
Police investigations abandoned > sense of injustice

Long-term consequences of abuse

“They never charged him or took him to court. Never. No charge or court. Nothing. The police said I had to forget about it. There was nothing more they could do about it. He was free to walk. I was so upset.” (Adult female)
“It’s made me part of who I am so...it’s why I do what I do. I help people, give people better lives, and why communication is really important to me. And what I do is communicate with people who find communication difficult.” (Adult female).
Sexual Exploitation of Children and Young People: Research into the Needs of Young People with Learning Disabilities
Learning from previous research

- Disabled children and young people are more likely to be maltreated than their non-disabled peers, esp. those with learning disabilities (e.g. Stalker & McArthur, 2012; Jones et al, 2012).
- Lack of research on children and young people with learning disabilities who experience, or are at risk of, child sexual exploitation (CSE).
- Small number of UK CSE studies have reported how children and young people with learning disabilities/difficulties are at risk of CSE (Beckett, 2011; Brodie & Pearce, 2012; Smeaton, 2013).
- The OCCE final report (2013) on CSE in gangs and groups identified how learning disabilities are a typical vulnerability in a child prior to abuse.

Evidence of increased vulnerability but no detailed examination of practice and the views of young people with learning disabilities remain unheard.
“The sexual exploitation of children and young people under the age of 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive “something” (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities”. (English Govt Guidance on CSE (2009) – Safeguarding Children and Young People from Sexual Exploitation)

Definitions of CSE are contested in the UK with variations in the definitions used by the governments in each of the four nations
Aims of the research

1. Scope and detail current provision

2. Explore the views of practitioners and policymakers

3. Identify barriers and enablers to good practice

4. Understand the needs of children and young people with LD

5. Identify gaps in policy, practice, evidence and research

6. Generate evidence-based recommendations for future developments in policy and practice
Research methodology

- Overview of current literature and a policy analysis
- Survey with local authorities/Health and Social Care Trusts (n=71)
- Survey with specialist learning disability (n = 14) and CSE services (n=23)
- Interviews with professionals and practitioners (n = 34)
- Interviews with children and young people with learning disabilities aged 12 – 23 (n=27)
- Development of recommendations with key stakeholders including young people and young adults with learning disabilities who have experienced CSE, and with professionals across the four nations.
Disclosure or discovery of sexual exploitation

- Lack of general awareness of CSE amongst professionals and general public.

- Some professionals not seeing the exploitation
  - Not believing this could happen to a disabled child
  - Over protection of disabled children
  - Thinking the young person “consented” – not recognizing a LD

- Invisibility of some children with learning disabilities - high threshold for services.

- Lack of education about sex, relationships and exploitation. Limited prevention work -.

- Young people had difficulties recognizing/understanding that they were being exploited.

- Could take months of intensive support for the child to recognize the exploitation.

- Needed someone who they could trust and who would believe them.
Disclosure or discovery of sexual exploitation

“He [the abuser] told me not to tell anyone that we were together because they would stop us being together. ... I didn’t really get on with my social worker. ... She was alright and everything, but I didn’t know her; I didn’t trust her. She wasn’t the kind of person you talk to about sex and boyfriends.” Sian now aged 20

She was really nice, too. ... She didn’t judge me. ... She listened to me. ... I trusted her too.” Zoe, aged 19.

“Other girls were doing it [having sex with adults] and I thought it was something you just did. ... I didn’t know it was wrong for an adult to have sex with a child. I didn’t think to say no when someone told me they wanted to have sex with me.” Zoe, now aged 19.

“They just thought we were being silly or dramatic but we were just telling the truth. They made us feel like it was our fault. I didn’t feel I could talk to them “ Chantelle, aged 14.
Young people’s experiences of being referred to specialist CSE services

- Few specialist CSE services in UK (only 1 in 5 local authorities in UK stated in the survey they had services to meet the needs of this group)
- Young people not given full information about why they were being referred or information not accessible
- All young people reported that they did not mind being referred – now had someone who listened to them
- All valued the support they received
- Often first time their learning needs were identified: led to referrals for assessment and diagnosis
- Quite often referred because deemed at risk... then discovery or disclosure occurred
What worked to support the young people

- Access to specialist CSE service
- One-to-one intensive support, tailored to their learning needs
- Trust, positive relationship with CSE worker who listened to them
- Working at child’s pace to help them understand exploitation and what had happened to them
- Long-term input – not a quick fix
- Working with the whole family
- Building resilience, positive secure attachments, persistence and not giving up on a child
What worked in supporting the young people

“We do work like what I would like my boyfriend to be like, a good one and a bad one. We watch DVDs on grooming. It is good to watch them and see how it really is and then it’s like I don’t want to get myself in those situations cos then things can really happen. I prefer to watch a film rather than reading a book”. Katie, aged 14.

“She’s trying to get me some help with where I live and that. … We’ve talked about how I might have a learning disability – other people have said that – and that I should get some help with that.” Caitlin, aged 19

“She knows that if I have had enough, I’ve had enough. She won’t keep going on about it. … She knows that if I don’t want to talk about it I won’t say anything. … When people keep asking me and asking me, that’s when I flip.” Emma aged 18
Outcomes identified by young people

- Felt listened to
- Understood CSE and how to keep safe (online and “real world”)
- Improved family relationships
- Better friendships
- More confident and higher self-esteem
- Improved physical and sexual health
- Improved school/college attendance
- Disclosure

- But difficult work...some still at risk or being exploited.
- Service ceased at age 18... still vulnerable young adults.. No support

But lack of therapeutic services, unmet mental health needs and we know nothing about the long terms impact/outcomes for these children.
Conclusions across both studies

- Disabled children still not being listened to and often not believed – not seen as credible
- Professionals not recognizing indicators/signs of abuse (esp. non verbal signs/behavioral indicators)
- Invisibility of disabled children in services/community
- Importance of relationships/access to communication
- Lack of SRE and not knowing about “abuse”
- Lack of support and justice
- Strength and resilience in these young people