

# A Review of the Association Between Childhood Disability and Maltreatment

## Comments on a New Meta-Analysis

by Thomas F. Coleman

When a package arrived at the office of Dr. Nora J. Baladerian a few weeks ago, I was the first to open it. Dr. Baladerian was out of town that day, delivering an educational presentation on various aspects of disability and abuse. She and I are colleagues at Spectrum Institute. She directs the Disability and Abuse Project and I direct the Disability and Guardianship Project. Both projects focus primarily on people with intellectual and developmental disabilities, including issues of abuse of children and adults in this population.

I noticed that a new book – *Maltreatment of People with Intellectual and Developmental Disabilities* – was just released by the American Association on Intellectual and Developmental Disabilities. Chapter One immediately caught my eye. “The Association Between Childhood Disability and Child Maltreatment” is a systematic review of 31 studies – including 21 done in the United States – that compare the rates of maltreatment of children with disabilities and children without disabilities.

The review focuses on studies that have analyzed maltreatment in general, and children with disabilities in general, as well as specific types of abuse (physical, sexual, emotional, neglect) and various types of disabilities (physical, communication, cognitive, etc.)

Excerpts from this 70 page article by Rebecca T. Leeb, Jennifer W. Kaminski, Rebecca H. Brisko, Brian Armour, and Melissa T. Merrick, appear below. The findings of this literature review are

likely to stimulate discussions among scholars, educators, practitioners, advocates, and government officials – discussions about their application to individual, professional, and institutional responses to a constellation of issues involving disability and abuse.

This meta analysis makes one thing clear – the relationship between disability and abuse is very complex and quite nuanced. It calls into question the usefulness of broad generalizations about the

rates of abuse of children who have disabilities. It suggests that awareness of subtle distinctions in the data will better serve those who develop responses to abuse of children with disabilities, and those who devise methods to reduce the risk of such abuse.

A meta-analytical review of 11 risk studies done by Jones and Colleagues (2012) found that

“pooled risk estimates for abuse and neglect of children with any disability . . . were greater than for children with no disability.” This new review is consistent, finding “an association in which children with disabilities are more likely to experience maltreatment.”

The authors of this new meta-study, however, are much more cautious than some prior researchers who have declared that children with disabilities are three to four times more likely to be victims of abuse than their typically developing peers. The data in these 31 studies does not support such a broad assertion. But regardless of the specifics of risk rates, the problem of disability and abuse is significant and needs more attention.

A new meta-study shows that children with disabilities are abused at a higher rate than non-disabled children . . . but how much more is not clear. Some studies, however, suggest that a majority of disabled children are victims during their childhood years.

## **Excerpts from and Comments on the Study**

Many studies have attempted to determine whether children with disabilities are abused at a higher rate, lower rate, or same rate as children without disabilities. Knowing the prevalence of disability among children in the United States is foundational to such an analysis.

### *Prevalence of Disability*

According to several studies cited in the current article, “prevalence estimates of disability among children in the United States vary from 7% to 20% (Boyle et al., 2011; Halfon, Houtrow, Larson, & Newacheck, 2012; US Department of Health and Human Services [DHHS], 2015).” (Leeb, 2016, p. 12) With such a wide range of estimates, it is no wonder that risk estimates vary so greatly. Knowing the rate of disability is foundational.

Such a variation in estimates on the prevalence of disability prompted the current authors to comment: “With respect to child maltreatment, 12.6% of children who were identified as victims of child maltreatment by social services in 2013 were reported as having a disability (DHHS, 2015). This suggests that children with disabilities may not be over represented in the population of maltreated children identified by child protective services.” (Leeb, 2016, p. 12)

### *Limitations of Prior Studies*

The current article points out two distinct limitations of current studies that examine the association between childhood disability and child maltreatment. One involves the failure of many studies to ascertain whether the disability preceded the abuse or was caused by the abuse. The other involves the failure of prior studies to look beyond the general construct of disability and to assess specific types of disability and their association with the risk of abuse.

The authors said: “First, few studies address the

timing of maltreatment relative to disability, making it impossible to draw conclusions about causality. Second, disability is commonly conceptualized as a general construct, and specific aspects of disability that may increase risk or exacerbate the association between disability and maltreatment are not addressed.” (Leeb, 2016, p. 12)

### *Concerns with Another Meta Study*

Citing a study published in 2012 by Jones, Bellis, Wood and others, the current article comments: “A more recent meta-analytic review of international and domestic studies examining the association between child disability and physical, sexual, and emotional abuse and neglect indicated that children with disabilities are three to four times more likely to be victims of violence than their typically developing peers.” (Leeb, 2016, p. 12)

The current article did not address a significant limitation in the Jones study – a deficiency that the authors of that study readily acknowledged. Referring to the 16 prevalence studies examined in their meta-review, the authors of the Jones study cited flaws in research methodology, poor standards of measurement, and “insufficient assessment of whether violence precedes the development of disability.” (Jones, 2012, p. 1)

Not knowing whether disability preceded abuse or not undermined confidence in a conclusion that children with disabilities are at a higher risk for abuse than children without disabilities. Maybe yes, maybe no.

Conclusions about rates and prevalence depend on several factors. Prevalence estimates depend on the percent of children in the population who have a disability. Rates of risk depend on the percent of children in the sample who had a disability *prior to* an act of abuse. The Jones study acknowledges that the latter issue was not adequately addressed in its analysis.

### *Exclusions from the Pool of Perpetrators*

Both projects of Spectrum Institute focus on abuse of children and adults with disabilities, regardless of who the perpetrators may be.

The potential pool of perpetrators in the life of someone with a disability includes people known to them (parent, household member, relative, neighbor, service provider, school personnel, etc) as well as strangers. For our purposes, and for purposes of developing risk reduction strategies and response procedures, reliable information is needed about the full range of potential perpetrators of abuse. Estimates about rates of abuse are affected when an entire category of perpetrators is excluded from the analysis.

The reliability of the findings of a study regarding rate of risk and prevalence of abuse depends on a variety of factors, including the size of the sample, which children were included or not, the scope of the pool of perpetrators, whether disability preceded the abuse, and whether the sample was local or national.

For the purposes of our projects, which focus on people with disabilities regardless of their relationship to the perpetrator, the current article has an additional limitation. The authors specifically excluded studies that involved perpetrators who were unknown to the victims.

The same concern applies to data from the National Child Abuse and Neglect Data System (NCANDS) and its annual child maltreatment reports. Its definition of “maltreatment” broadly included all types of abuse and neglect. However, its pool of perpetrators is much narrower in scope than the range of potential perpetrators in the lives of people with disabilities.

NCANDS focuses only on abuse and neglect caused by parents and caregivers. In real life, the range of perpetrators of abuse against children with a developmental disability, or any disability,

can include parents, household members, relatives, care providers, other service providers, transportation workers, day care workers, teachers, teacher aides, neighbors, school mates, strangers, and others.

So while the NCANDS data is relevant to our work to some extent, it must be carefully used so that we do not apply the data too generally. For example, the most recent NCANDS maltreatment report finds that 90 percent of perpetrators were parents. *Of course* that would be the case since the data sets are limited to actions or inactions of parents and caregivers.

Fortunately, the pool of perpetrators in the current study is much broader than that used by NCANDS. As a result, its findings and conclusions are more relevant to the work of the projects of Spectrum Institute.

### *Disability and Maltreatment in General*

Based on the 12 studies that examined the relationship between child maltreatment in general and childhood disability in general, the authors of the current study stated that its “findings generally point to a positive association.”

However, they added a cautionary note that the pattern “is not consistent across all individual disability categories or disorders.” (Leeb, 2016, p. 49)

### *Disability and Physical Abuse*

Five studies analyzed by the authors of the current article examined the association between childhood disability in general and physical abuse. Three studies found “significant, positive associations.” (Leeb, 2016, p. 25) The other two studies indicated “a positive association.” The authors of the current study commented that the studies “suggest that childhood disability in general is associated with physical abuse.” (Leeb, 2016, p. 27)

Referring to all the studies on physical abuse, including those focusing on its association with specific types of disabilities, the authors commented: “Studies of children with communication disorders, mobility impairment, chronic health conditions, mental disorders, hearing impairment, ID, and cerebral palsy generally support a positive association.” (Leeb, 2016, p. 51) On the other hand, they reported that aggregated results are mixed for visual impairments.

### *Disability and Sexual Abuse*

Three studies reviewed by the authors of the current study reported on the association between childhood disability in general and sexual abuse. Two of them found that “children with a disability were no more likely to experience sexual abuse than children without a disability.” (Leeb, 2016, p. 27) The other study had mixed results, with one portion of it showing an association of increased risk while the other portion did not.

The current authors observed that “when disability is considered as a unitary construct, childhood disability may not be associated with increases in reported sexual abuse.” (Leeb, 2016, p. 27) Note the inclusion of the modifier in the phrase “*reported* sexual abuse.”

The under-reporting of sexual abuse in general, and the added disincentives to reporting when victims have a disability, must be acknowledged.

I was the lead author of a report on disability and abuse that highlighted this problem. (Coleman, Baladerian, and Stream, 2013) The report was based on the largest national survey on abuse of people with disabilities ever conducted in the United States, with more than 7,000 people responding, including thousands with people with disabilities and their family members.

A high percent of abuse victims did not report the maltreatment to authorities. Many thought that reporting would be futile and that nothing would

happen. In a large percent of cases where reports were made, nothing did happen – there was no investigation or arrest. Fear of reprisal was another stated reason for not reporting abuse.

Thus, data on the incidence of sexual abuse of children with disabilities may very well minimize the real magnitude of the problem.

The authors of the current study concur with this conclusion. They noted that one limitation to the findings of their meta-analysis is the reliance of these studies “on maltreatment and disability data derived from cases reported to and investigated by social services.” (Leeb, 2016, p. 58)

The authors readily acknowledge that “children who come to the attention of social services represent only a small percentage of actual incidence of abuse and neglect” and that “child disability status is often not well documented in social service case records.” (Leeb, 2016, p. 58)

They cautioned that prevalence estimates of maltreatment of children with disabilities based on social service records “are likely substantially underestimated.” (Leeb, 2016, p. 58)

### *Disability and Emotional Abuse*

Two of the reviewed studies looked at the association between childhood disability as a unitary construct and emotional abuse.

One study reported higher rates of emotional maltreatment for children with a disability diagnosis, while the other had mixed results. One portion of the second study reported high rates but the other did not.

The current authors commented: “Conflicting empirical evidence from these analyses on the association between emotional abuse and childhood disability provide little information to guide research or practice. Future research may be better informed by including more specific pre-

dictors (e.g., types of disability) and outcomes.” (Leeb, 2016, p. 270)

Referred to studies of disability in general as well as studies on maltreatment in relation to specific types of disabilities, the authors added: “most studies examining the association between disability and emotional abuse showed evidence of a positive association for children in a variety of categories, including communication disorders, special education eligibility, mobility impairments, chronic health conditions, internalizing or externalizing disorders, externalizing disorders or symptoms, visual impairment, hearing impairment, and ID. (Leeb, 2016, p. 50)

#### *Disability and Neglect*

Three studies reviewed by the authors of the current study reported on the association between neglect and childhood disability in general.

Two of them reported higher rates of neglect among children with a disability than children with no identified disability. The third study looked at three specific subtypes of neglect – physical, emotional, and educational – and found “increased rates of all three neglect subtypes for children with disabilities when data from CPS and NIS-2 were combined, but no increased rates for children with disabilities for any of the three types of neglect based on CPS data alone.” (Leeb, 2016, p. 28)

In terms of studies analyzing the association between neglect and specific types of disabilities, the authors added: “A pattern of significant associations was found in studies examining children with communication disorders, special education eligibility, mobility impairment, chronic health conditions, mental disorders (as a general category and internalizing, externalizing disorders), ADHD, ASD, visual impairment, hearing impairment, ID, and cerebral palsy. (Leeb, 2016, pp. 50-51)

#### *Disability and Witnessed Violence*

Two studies reviewed by the authors of the current study examined data on the association between childhood disability and witnessing violence. Research indicates that witnessing violence can have adverse consequences to children similar to the effects caused by the direct experience of abuse.

The authors of the current study commented: “Cuevas et al. (2009) reported higher rates of witnessed violence among children with disabilities in the United States. Svensson (Svensson et al., 2011) found a positive association for a combination of physical abuse and witnessed violence, but no association for witnessed violence only, among youth with disabilities, ages 10, 12, and 15 years old, in Sweden.” (Leeb, 2016, p. 28)

#### *Maltreatment and Communication Disorders*

Several studies reviewed by the authors of the current study looked at the association between maltreatment and a group of children with and without communication disorders. The definition of “communication disorders” includes disabilities associated with speech, hearing loss, autism spectrum disorder, and learning impairments.

Of the three studies that analyzed the association between communication disorders and maltreatment in general, two found a high rate of maltreatment while the third did not.

*Neglect.* Two studies – both using reports of maltreatment substantiated by Child Protective Services – found a positive association between neglect and communication disorders.

*Emotional Abuse.* Of the only two studies to review the association between communication disabilities and emotional abuse, both reported a positive association.

*Sexual abuse.* There were mixed results when it came to communication disorders and sexual abuse. One study found a positive association while the other did not.

*Physical abuse.* The three studies examined by the authors of the current study all reported a positive association for physical abuse among children with communication disorders.

#### *Maltreatment and Cognitive Disorders*

Four studies reviewed by the authors of the current study examined whether children with cognitive disorders had a higher rate of maltreatment than children without disabilities. The term “cognitive disorders” includes several specific types of mental disabilities, such as learning disorders, autism spectrum disorder, and developmental delay.

With mixed results from these studies, the authors of the current study found “little support for an association between cognitive disorders in general and maltreatment.” (Leeb, 2016, p.32)

The authors added: “Studies investigating the association between cognitive disorders or developmental disabilities, whether studied as aggregate groups (e.g., cognitive disorders, sensory impairment) or individual disability types (e.g., autism spectrum disorder) reported little evidence of an association with maltreatment as a general construct, suggesting that these children may not differ in this regard from their peers without these disabilities.” (Leeb, 2016, p. 49)

#### *Maltreatment and Special Ed Students*

Six studies reviewed by the authors of the current study examined the relationship between “learning disabilities” and maltreatment. The results were mixed.

Two studies found higher rates of maltreatment among children who were receiving special

education services – one in Nebraska and the other in Hawaii. A study done in New York had mixed results, while a national CPS-based study found a lower rate.

*Physical abuse.* Of the two studies focusing on physical abuse, one showed a higher rate and the other found that special education students were no more likely to be physically abused than general education students.

*Emotional abuse.* Only one study examined the relationship between emotional abuse and special education students. It found that children with a learning disability “were more likely than their peers to have a CPS report of emotional abuse.” (Leeb, 2016, p. 34)

*Sexual abuse.* Of the four studies on the relationship between sexual abuse and special education students, all showed higher rates of abuse.

#### *Maltreatment and Physical Disabilities*

Several studies reviewed by the authors of the current study examined the relationship between maltreatment and physical disabilities (including chronic health conditions). This category includes impairments to mobility, vision, hearing, epilepsy, asthma, chronic allergies, and muscular dystrophy.

Three studies reported an increased risk of any type of maltreatment for children in this category.

*Sexual abuse.* All of the four studies that examined sexual abuse and physical or chronic health conditions reported a positive association.

*Mobility conditions.* Five studies reviewed the association between mobility impairments and specific types of maltreatment. In studies examining physical abuse, sexual abuse, emotional abuse and neglect, “maltreatment was found to be more likely for children with mobility impairments.” (Leeb, 2016, p. 36)

## *Maltreatment and Mental Disorders*

Twelve of the 31 studies examined the relationship between mental disorders and maltreatment. This category of disability includes what the authors call “internalizing disorders” (anxiety, depression, etc.) and “externalizing disorders” (ADHD, etc.) and symptoms of these disorders (emotional distress, etc.).

Based on the results summarized below, the authors of the current study noted a “positive association between mental disorders as a general category and child maltreatment,” adding that this is due in large measure “to the robust association between externalizing disorders and maltreatment.” (Leeb, 2016, p. 41)

*Both externalizing and internalizing.* Of the four studies that examined internalizing and externalizing disorders together, all reported a positive association between all types of abuse or neglect and this category of disorders.

*Physical abuse.* Two studies reported a positive association between physical abuse and mental disorders. One found a higher rate of emotional abuse and neglect with this population.

*Sexual abuse.* The authors of the current study noted that “evidence for a positive association between sexual abuse and childhood mental disorders is less clear.” (Leeb, 2016, p. 39)

*Only externalizing disorders.* Four studies examined the relationship between maltreatment and externalizing disorders. One found an increased abuse risk for children with conduct disorders. Another found an increase in risk of physical abuse and neglect for children with a high score for externalizing symptoms.

*Specific types of abuse.* Three studies examined the association between externalizing disorders and physical abuse, sexual abuse, and neglect. All three found that children with externalizing

disorders were more likely to experience these types of maltreatment. Two studies examining emotional abuse showed a positive association with externalizing disorders.

*Only internalizing disorders.* Four studies looked at the association between internalizing disorders and sexual abuse. Two reported no association while two others said there was a greater risk of sexual abuse for children with internalizing disorders as compared to their peers. Two others found no increased risk of sexual abuse for this population.

*Attention Deficit Hyperactivity Disorder.* Nine studies examined the association between ADHD and child maltreatment. Two studies looked at this category in general terms and the results of both were complementary: children with ADHD were at greater risk for maltreatment.

*Physical Abuse and ADHD.* Of the five studies examining the relationship between physical abuse and ADHD, all found a greater likelihood of such abuse for this population of children.

*Cerebral Palsy.* This type of disability significantly impairs a child’s mobility, balance, and posture. Children with CP were more likely to have experienced neglect and physical abuse.

## *Maltreatment and Autism Spectrum Disorder*

The authors note that ASD “is a developmental disability that may cause significant social, communication and behavioral problems.” (Leeb, 2016, p. 41) ASD is often included within the more general classifications of behavioral, cognitive or communication disabilities.

Only two studies review in this meta-analysis looked at the association between ASD and child maltreatment. One study found that children with autism in the UK “were no more likely to experience maltreatment in general or physical abuse in particular. The other reported similar findings for

physical and sexual abuse in the United States, but found a positive association with neglect.

### *Maltreatment and Sensory Impairment*

Several studies examined the association between child maltreatment and sensory impairment (visual, hearing, and vestibular problems). Two looked at children with sensory impairments generally and found no association between maltreatment and this type of disability. Both were conducted in the UK.

*Visual disabilities.* Two studies examined visual disabilities. One found that children with visual impairments experienced sexual abuse, emotional abuse, and neglect at higher rates than children without visual impairments, but not physical abuse. The other found an increased rate for physical abuse and witnessed violence combined.

*Hearing impairments.* Four studies focused on the association between hearing impairments and child maltreatment. The findings of each showed a positive association.

### *Maltreatment and Intellectual Disability*

Three studies looked specifically at the association between child maltreatment and intellectual disability. Participants in these studies were described as having an IQ of less than 85.

These studies found a positive association with abuse and neglect in general. Two of them found that children with an intellectual disability were more likely to experience physical abuse, sexual abuse, emotional abuse, and neglect than children without an intellectual disability.

However, one study reported that children with substantiated maltreatment were no more likely to have an intellectual disability than children in the general population.

### *Conclusions and Questions*

After noting that the “relationship between childhood disability and maltreatment is complex and multidimensional,” the authors concluded that “In order to ensure that all children in the population have the means to thrive, it is important to address the needs of those most vulnerable.” (Leeb, 2016, p. 60) I agree.

Accurate data is essential to properly address the needs of potential child-victims of abuse – especially those who have communication and cognitive disabilities. Although children with disabilities appear to more vulnerable to abuse than children without disabilities, there are large gaps in our base of knowledge about abuse and disability – gaps which need to be filled.

What percent of children have disabilities in general? What percent have specific types of disabilities? How much greater is the risk of abuse for children with disabilities in general than for children without disabilities? How much is the risk elevated for children with specific types of abuse?

What percent of children with disabilities will experience abuse during their childhoods? Is that percent higher or lower for children with specific types of disabilities?

When will there be a pooled database to identify all categories of perpetrators of abuse of children with disabilities rather than focusing primarily on studies of parents and caregivers?

Answers to these questions are long overdue.

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## *Addendum 1*

### Estimating the Percent of Children with Disabilities Who are Abused

The meta-study reviewed above did not estimate the actual prevalence of abuse experienced by children with disabilities. It acknowledged that the rate of abuse is higher than for children in the general population, but it did not venture an estimate as to what percent of disabled children experience abuse during their childhood.

A closer look at this issue is necessary, but for now I will share the conclusions of a meta-study published in 2012.

The study, funded by the World Health Organization, is titled “Prevalence and risk of violence against children with disabilities: a systematic review and meta-analysis of observational studies.”

It reviews 16 studies that involved 14,721 individuals. The authors are Lisa Jones, Mark A. Bellis, Sara Wood, Karen Hughes, Ellie McCoy, Lindsay Eckley, Geoff Bates, Christopher Mikton, Tom Shakespeare, and Alana Officer.

The study estimates that 27% of children with disabilities will experience some form of abuse or neglect during their childhood years.

The authors note that the rate of victimization varies according to the type of abuse. It suggests that 20% of children with disabilities will experience physical abuse, 14% will be victims of sexual abuse, 18% will be victims of emotional abuse, and 10% will suffer from neglect.

The study says that the prevalence of abuse also varies according to the type of disability. For example, it was estimated that 21% of children with mental or intellectual disabilities will experience abuse of any type during their childhood. However the rate increases for physical abuse (27%), but decreases for sexual abuse (18%) and neglect (8%).

Although this is only one meta-analysis, it has several attributes that add to its credibility: it reviews 16 separate studies; it is relatively recent; it involved a large number of subjects. The question is whether the estimates of this meta-study are consistent with a larger body of literature that addresses the percent of people with disabilities who will experience abuse as children. That question will be the focus of further research by Spectrum Institute in the coming years.

## *Addendum 2*

### Comparison of Rate of Abuse of Children with and without Disabilities

“Children who were reported as disabled were 54 percent more likely to be considered a victim of maltreatment than children who were not reported as disabled.” (Child Maltreatment 2006, Administration on Children, Youth, and Families, United States Department of Health and Human Services, page 29)

“Children with a disability are 52% more likely to experience a recurrence of victimization than children without a disability.” (Child Maltreatment 2006, page 30)

## *Addendum 3*

### Failure to Report Abuse

Studies indicate that most child abuse is not reported to authorities. Therefore, estimates about the prevalence of abuse of children in general, and children with disabilities in particular, are much too low.

A study released in 2008, based on a review of research done between 2000 and 2008 in high-income nations including the United States, indicated that a significant percent of child abuse cases are not reported to authorities. For example, one study revealed that “physicians reported only 6% of children's injury cases to protective services, even though they suspected the injury was a result of abuse 10% of the time.” (“Study: Most Child Abuse Goes Unreported,” Time Magazine, December 2, 2008) That means that 40% of abuses cases were not reported to authorities by physicians.

A journal article released in 2013 explains the problem with health care providers. “In 2008, 3.3 million reports of child abuse and neglect were filed (Centers for Disease Control and Prevention, 2010). As these numbers are on the rise, the number of reported incidences among healthcare providers is on the decline. A study reviewing the reporting of child abuse cases among primary care providers shows that 21% of suspected cases are not reported (Preidt, 2011)” (Eads, K. (2013). Breaking Silence: Underreported Child Abuse in the Healthcare Setting. Online Journal of Health Ethics, 9(1), page 2.)

More startling are the findings of another study. “A closer look at a study of clinician reported child abuse in a population of 1683 suspected cases shows that only 95 of those cases were reported to Child Protective Services (CPS) (Flaherty, Sege, Griffith, Price, Wasserman, Niramol, Harris, Norton, Lu Angelilli, & Binns, 2008). That is a startling six percent! Of those 1683 cases, 27% of injuries considered likely and very likely related to child abuse were not reported and 76% of injuries considered possibly caused by abuse were not reported (Flaherty et. al, 2008).” (Eads, K. (2013). Breaking Silence: Underreported Child Abuse in the Healthcare Setting. Online Journal of Health Ethics, 9(1), page 3.)

A study published in Israel in 2007, based on forensic statements made by more than 40,000 victims of child abuse highlighted the problem of under reporting of abuse involving typically developing children (TD) and children with disabilities alike. “When interviewed, TD children failed to disclose abuse 34.5% of the time 27.7% of the times when sexual abuse was suspected and 38.8% of the times that physical abuse was suspected. Children with minor and severe disabilities failed to disclose abuse much more often than TD children: 38.6% and 46% respectively . . .” (“Victimization of Children with Disabilities,” American Journal of Orthopsychiatry, October 2007, pages 632-633)

A recent report reviewing several disclosure studies showed that rates of non-disclosure varied, with one study showing 26% of child victim cases were not reported, while another showed that 55% were not, with others showing rates between these two. (Townsend, C. (2016). “Child sexual abuse disclosure: What practitioners need to know.” Charleston, S.C., Darkness to Light)

If the estimates from the study funded by the World Health Organization are correct, and 27% of children with disabilities are victims of reported abuse, then the problem is much worse when the percent of unreported cases are considered. If nearly 40 percent of child abuse cases involving victims with disabilities are unreported, as suggested by some studies, then as many as 45% of children with disabilities may experience abuse during their childhood years. If it is true that “most cases are not reported to anyone,” as stated in a journal article published in 2013 by the National Academy of Sciences, and if this applies to children with disabilities to the same extent as children in the general population, then a majority of children with disabilities will have experienced abuse during their childhood years. (New Directions in Child Abuse and Neglect Research, 2013)

The failure of victims to report abuse was addressed in the National Survey on Abuse of People with Disabilities conducted by Spectrum Institute in 2012. The report – Abuse of People with Disabilities: Victims and Their Families Speak Out – included responses of more than 7,200 individuals, including 1,249 people with disabilities and 2,501 of their family members. When responses of victim and family members of victims are considered, 48.3% said they did not report the abuse to authorities. This adds further evidence to the level of underreporting of abuse of people with disabilities.