



Safeguarding Disabled Children

Rachael Clawson: Development
Manager - Safeguarding Disabled
Children Services



Ann Craft Trust

- The Ann Craft Trust (ACT) is a national charity based in the Centre for Social Work at the University of Nottingham
- The Trust works with professionals and agencies across the statutory, voluntary and independent sectors in the interests of children and adults with learning disabilities who may be at risk from any form of abuse.
- Services include consultancy, training, membership, research, campaigning, information and advice

Human Rights

Disabled children have exactly same human rights to be safe from neglect and abuse, to be protected from harm and achieve ECM outcomes in same way as their non disabled peers.

Setting the scene

- Around 770,000 (7%) of children in the UK are disabled (Aiming High).
- Between 1975 and 2002, the disabled child population rose 62% while the general population increased by just 7%. (Contact a Family)
- Rise in children with ASD/complex needs
- Disabled children are more vulnerable to abuse than their non-disabled peers
- Children living away from home in residential establishments are most vulnerable

Setting the scene

- We know very little about the experiences of disabled children within the child protection system
- only a small minority of disabled children receive social care support
- families with disabled children more likely to live in poverty/lone parent household

Incidence of harm

Disabled children are

- 3.4 times more likely to be abused
- 3.8 times more likely to be neglected
- 3.8 times more likely to be physically abused
- 3.1 times more likely to be sexually abused
- 3.9 times more to be emotionally abused

Sullivan and Knutson 2000

Disability has changed

in terms of

- expectation
- levels of impairment

Have we altered our mindsets, policies, practices and procedures?

There is a need to place equal value on safeguarding disabled children

Increased Vulnerability

- Low self worth/self esteem
- Not given means or skills to complain
- Wide range of carers
- Increased desire to please/taught compliance
- Perpetrators believe it is safer to victimise a disabled child
- May be disbelieved when disclose
- Identification
- Family stress

Increased Vulnerability

- Increased likelihood of social isolation
- Dependency on parents and carers for practical assistance in daily living
- Impaired capacity to resist or avoid abuse
- Speech, language, communication needs
- Lack access to trusted person if wanted to disclose
- Vulnerable to bullying and intimidation
- LAC – additional dependency on residential/hospital staff for daily care
- Forced Marriage research

Indicators of abuse

“Disabled children can be abused and neglected in ways that other children cannot and the early indicators suggestive of abuse or neglect can be more complicated than with non-disabled children” (p9)

Possible indicators of abuse

- Bruise in a site that might not be of concern on ambulant child (eg shin)
- Not getting enough help/time with feeding leading to malnourishment/hunger/dehydration
- Poor toileting arrangements
- Lack of stimulation
- Unjustified/excessive use of restraint
- Rough handling/extreme behaviour modification
- Inappropriate use of medication

Differing Thresholds

- Barriers to recognising safeguarding/ protection issues
- Barriers to needs being adequately assessed
- Barriers in child protection investigations
- Barriers in other parts of the system

(Ann Craft Trust 2000, NSPCC 2003)

Safeguarding Disabled Children multi-agency guidance 2009

- Informs LSCB procedures
- Makes clear the issues which influence safety and welfare, emphasises need to ensure these are understood by all AND ACTED UPON
- Recognises need for expertise in safeguarding and promoting welfare to be brought together so disabled children receive same levels of protection
- Makes clear critical importance of communication – recognise all children can communicate preferences if asked in right way by people with skills
- Reinforce importance of integrated approach to safeguarding and promoting welfare

Why don't we recognise abuse?

'There was a feeling by the Social Workers that there is a tendency "not to see" the abuse of disabled children'

(Cooke and Standen 2002)

Do we avoid processes when children have profound impairments?

Why don't we recognise abuse?

‘Professionals may find it more difficult to attribute indicators of abuse or neglect, or be reluctant to act on concerns in relation to disabled children, because of a number of factors, which they may not be consciously aware of’

Safeguarding Disabled Children (p38)

Factors impeding safeguarding of disabled children

- Over identifying with parent/carer can lead to reluctance in accepting abuse/neglect taking place or seeing it as being attributable to stress of caring for a disabled child
- Lack of knowledge about impact of disability on child
- Lack of knowledge of child – usual behaviour
- Not understanding method of communication
- Confusing behaviours that indicate a child might be being abused with those associated with disability
- Behaviour – sexually harmful or self injury can be indicative of abuse
- Being aware medical/health complications may influence way symptoms present eg fragile bones

Serious Case Review Lessons

- Comprehensive child-focused assessment of their needs in which their views and expectations are central ... the needs of the disabled child are not allowed to mask safeguarding and child protection concerns.
- Shared understanding of individual child ... enable all agencies to fulfill their safeguarding responsibilities towards such children and to help distinguish between disability and child protection issues

Serious Case Review Lessons

- Services to individual disabled children should be coordinated to ensure that agencies work together ... the needs of the child can be met and the safeguarding responsibilities of each agency are fulfilled.
- Children must be communicated with directly and their experiences, wishes and feelings placed at the heart of all assessments and interventions.
- All agencies and professionals have a responsibility for acting on, and following up, concerns about a child.
- Open mind as to the possible range of reasons for a particular kind of behaviour in a child with a disability, and not just attribute it to the disability.
- Where there are concerns about neglect, agencies must be clear with parents about what constitutes acceptable standards of care, and must rigorously monitor.

Serious Case Review Lessons

- The role of management and supervision ... important part to play in enabling practitioners to 'stand back' from their day-to-day involvement with a case and reflect on what they are seeing.
- Professionals still do not always recognise the signs and symptoms of abuse and neglect in children and how to act on them. This could be a particular challenge where the prime focus of intervention begins as one of offering support.

Good Communication is Key

“Ascertaining how and what a child communicates is key to safeguarding them whatever their level of impairment”

(Marchant and Page NSPCC 2003, p62)

- Take a ‘can do’ approach, don’t assume your actions won’t make any difference
- Co-working/skill sharing between ‘child protection’ workers and ‘disabled children’ workers

Something to Think About

- Do we value all children equally and recognise that distress is always distress?
- Do we listen to what disabled children tell us?
- Do we really put disabled children at the heart of our services?
- How do we balance the needs of parents and children?



ACT contact details

Rachael Clawson

Development Manager

Safeguarding Disabled Children Services

Ann Craft Trust

Centre for Social Work University Park Nottingham

NG7 2RD

Tel: 0115 9515415

Email rachael.clawson@nottingham.ac.uk