CHILDREN WITH DISABILITIES IN CHILD WELFARE

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HISTORY
- Small scale studies showed a connection between child abuse and disability since the 1960s
  - Questioned for procedural reasons
  - But there were a lot with consistent findings
- 1993 Westat Study – Mixed results fatally flawed
- Cohort studies
  - Sullivan and Knutson 2000

HISTORY
- Odds ratios for all categories of disability
  - 3.68 for any abuse
  - 3.56 for physical abuse
  - 2.88 for sexual abuse
PREVALENCE

Spencer, Devereux, Wallace, Sundrum, Shenoy, Bacchus and Logan, 2005, Pediatrics

- 158 229 Child Health Computer data file with special conditions files from 1983–2001 West Sussex, UK
- 119 729 (76%) included in this study - had complete data
- Crossed with West Sussex Social Services' child-protection register

PREVALENCE: ADJUSTED ODDS RATIOS

<table>
<thead>
<tr>
<th>Disability</th>
<th>Any</th>
<th>Physical Abuse</th>
<th>Sexual Abuse</th>
<th>Emotional Abuse</th>
<th>Neglect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological/Conduct</td>
<td>7.59</td>
<td>4.09</td>
<td>7.65</td>
<td>11.58</td>
<td>8.22</td>
</tr>
<tr>
<td>Moderate/Severe Intellectual</td>
<td>4.69</td>
<td>3.43</td>
<td>6.38</td>
<td>2.93</td>
<td>5.34</td>
</tr>
<tr>
<td>Psychological/NonConduct</td>
<td>4.38</td>
<td>3.06</td>
<td>1.99</td>
<td>8.04</td>
<td>2.73</td>
</tr>
<tr>
<td>Speech/Language</td>
<td>2.96</td>
<td>3.43</td>
<td>1.27</td>
<td>4.21</td>
<td>3.79</td>
</tr>
<tr>
<td>Cerebral Palsy</td>
<td>1.79</td>
<td>3.00</td>
<td>X</td>
<td>X</td>
<td>2.71</td>
</tr>
<tr>
<td>Autism</td>
<td>0.79</td>
<td>1.23</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Vision/Hearing</td>
<td>0.76</td>
<td>0.44</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Adjusted for birth weight, gestational age, maternal age, and socioeconomic status.

X = too small for meaningful analysis

Spencer, Devereux, Wallace, Sundrum, Shenoy, Bacchus and Logan, 2005, Pediatrics

THE STRESS DEPENDENCY HYPOTHESIS!

- This theory suggested:
  - having a child with a disability increased parental stress
  - parental stress resulted in abuse
- Not supported by research- Stress levels did not predict risk for abuse
- Victim-Blaming
- Reflects negative view of children with disabilities
FAMILIES OF CHILDREN WITH DISABILITIES

RESEARCH FINDINGS SHOW:

• Having a child with a disability increases parental stress and decreases marital satisfaction….

• Having a child with or without a disability increases parental stress and decreases marital satisfaction….

PREVALENCE: MINNESOTA

• This study finds that more than a fifth (22%) of children with a recorded finding of substantiated maltreatment in Minnesota are labeled in administrative records as having a disability, and more than a quarter of children (27.9%) over age five — Lightfoot, Hill, & LaLiberte, 2011, Children & Youth Services Review.

• This study also finds that children with disabilities of all ages were 1.87 times more likely to be in out of home placement than children without disabilities, and children with disabilities over age five were 2.16 times more likely to be placed out of home than children without disabilities. — Lightfoot, Hill, & LaLiberte, 2011, Children & Youth Services Review.

VIOLENCE & DISABILITY: 3 CONNECTIONS
VIOLENCE TO DISABILITY

- Physical violence contributes to mental and physical disabilities.
- Emotional effects may be more damaging than physical effects.
- Prenatal effects MAY BE major significant.
- Spousal violence affects child development.

MUTUAL RISK FACTORS

- Violence
- Risk Factor
- Disability
- Mutual Risk Factors:
  - Poverty
  - Substance Abuse
  - Spousal Abuse
  - Culture
  - War

A MULTIFACTORIAL MODEL

- Culture
- Environment
- Relationship
- Person with Disability
- Social Control Agents
- Interaction
- Unequal power
- Potential Offender
- Inhibition
DISABILITY TO VIOLENCE: DIRECT EFFECTS

Disability

• Impaired ability to
  • avoid
  • escape
  • defend
  • recruit help

Violence

DISABILITY TO VIOLENCE: INDIRECT EFFECTS

Disability

Response to Disability

• 1. Actions
• 2. Attitudes & Beliefs

Violence

ACTIONS

• Isolation
• Increased numbers of caregivers
• Placed in foster care or congregate care setting
• Taught compliance
• Drugging
ATTITUDES & BELIEFS

• Devaluation:
• Interference with attachment:
• Victim blaming:
• Constructing child disability as a source of parental stress:

SOME PRACTICAL IMPLICATIONS

• Start with normal expectations and outcomes accommodate differences.
• Not all children with disabilities or all families have the same needs.
• Screening, make sure appropriate disability related services are in place
• Coordinate child welfare efforts with services to families of children with disabilities. Dual Case Assignment.
• Specialist CPS workers by training &/or experience
• Consultation and collaboration

SOME PRACTICAL IMPLICATIONS

• Preserve potentially healthy families.
• If placements are necessary, try for stable, long-term placements.
• Don’t keep people in bad placements just because they are difficult to place.
• Support natural family attachment.
• Support Foster-parent attachment.
COPING & TRANSFORMATION

• TRANSFORMATION:
  • For families of children with significant disabilities, adjustment may be about reformulating worldview and behavior - Not about going on with life as it was before.

• COPING:
  • May be appropriate for some parents and families but a recipe for disaster for others.


