

STAY

SafeGuard

AGAINST ABUSE & NEGLECT



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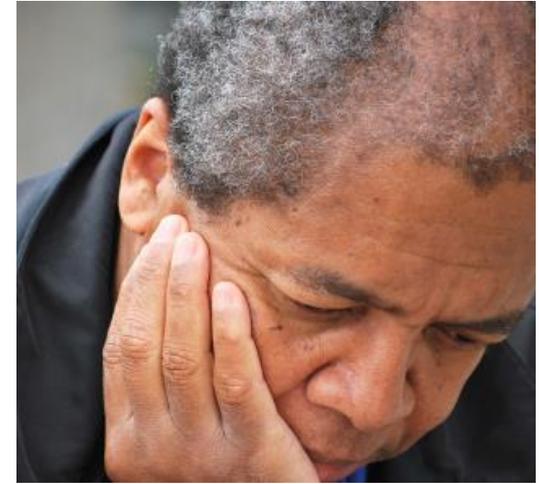
Charleston Civic Center

Funded by:

West Virginia Developmental Disabilities Council



The Arc



Who Is The Arc?



- Family focused grassroots organization
- Largest community based organization for people with intellectual and developmental disabilities(I/DD)
- Resource for people with I/DD and their families
 - Focused on real abilities
 - Real Needs
 - Real Barriers and Obstacles to full inclusion

The Arc's Mission



To make a critical difference in the lives of the citizens we serve, with individuals, parents, friends, and other family members relying on us to encourage, assist, and empower them to live, work, learn, worship and play in their community alongside those they choose.

Why Be Involved?



- Know of the increased potential for abuse and neglect
- Confidence to observe, report, or support PWD that have been maltreated
- PWD experience significantly higher incidence and longer duration due to lack of knowledge of caregivers and educators
- Negative impact is compounded by lack of investigative and support services
- This impact significantly diminishes the health, learning, behavior, academic performance, and life opportunities of PWD

The Issue



A 2013 report released by the Spectrum Institute, *Abuse of People with Disabilities: Victims and Their Families Speak Out*, reveals frightening statistics.

- Report conducted in 2012
- 7,289 respondents
 - Individuals with disabilities
 - Family Members
 - Advocates
 - Service Providers, Therapists, Social Workers
 - Law Enforcement
 - Child Welfare Workers
- 67.6% were PWD or family members of PWD

Findings of 2013 Report



- PWD who took the survey
 - Over 70% reported they had been victims of abuse
 - More than 90% who were victims of abuse said they had experienced abuse on multiple occasions
 - Nearly half of PWD who had been abused did not report the abuse to authorities.
 - Nearly 54% of those reporting said nothing happened
 - In fewer than 10% of the reported cases was the perpetrator arrested

Findings of 2013 Report



- More than 63% of parents and immediate family members reported that their loved one with a disability had experienced abuse
- When therapy is provided to victims with disabilities, the therapy is helpful
 - Only about 2/3 of victims were referred to a therapist
- Survey not limited to those with developmental disabilities, but the results clearly show that PWD often are the victims of traumatic abuse

Findings of 2013 Report



- 90% of victims suffered abuse on multiple occasions
- 57% the abuse was more than 20 times
- 46% the abuse was too many times to count
- 83% of victims who got therapy said it was helpful
- But. . . 66% of victims were not referred to a therapist
- Fewer than 10% of victims of sexual or physical abuse received benefits from a crime victim program.

Crimes Against People with Disabilities



- Females with disabilities had higher rate than males with disabilities
- Males with disabilities had higher rate than females without a disability
- Persons with cognitive disabilities had a higher rate than people with any other type of disability
- Half of all nonfatal violent crimes against PWD were perpetrated against people with multiple disabilities

Bureau of Justice Statistics, 2007



Crimes Against People with Disabilities



- Researchers found that 11.5% of adults with a disability were victims of sexual assault vs. 3.9% of adults without disabilities
- In addition, 13.0% of PWD were victims of attempted sexual assault compared to 5.7% without disabilities

References:

- Petersilla JR. Crime victims with developmental disabilities: a review essay. *Criminal Justice & Behavior* 2001; 28(6): 655-94.
- Sobsey D., Mansell S. An international perspective on patterns of sexual assault and abuse of people with disabilities. *International Journal of Adolescent Medicine & Health* 1994;7(2): 153-78.
- Centers for Disease Control and Prevention (CDC). *Behavioral Risk Factor Surveillance System Survey Data*. Atlanta, Georgia.
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2006.

More . . .



- Powers et. Al. (2002) study found that women with physical and cognitive disabilities:
 - 67% experienced physical abuse in their lifetime
 - 53% experienced sexual abuse in their lifetime
 - These are approximately twice the rates for the non-disabled population
- Nosek, Young & Rintala (1995) study found women with physical disabilities:
 - 62% experienced some form of abuse in their lifetime



Children and adults with disabilities have among the highest rates of physical, emotional and sexual abuse compared to any other group in our society today.

Abramson, Emanuel, Gaylord, & Hayden, 2000



Statistics for Children with Disabilities



- About 6 million children with disabilities, ages 3-21 receive special education services in this country (U.S. Department of Education)
- West Virginia Statistics (Disability Statistics Compendium, 2013)
 - 38,711 students aged 6-21 receive special education services in WV
 - 4th highest percentage of children receiving special education services under IDEA-Part B
 - 10.7% of the school population
- 5,383 children aged 3-5 served through IDEA-Part B in pre-school settings
 - Elevates percentage to 15.76% in WV schools

Prevalence of Violence Against Children with Disabilities



- Twice as likely to be physically and sexually abused
- Child abuse may also result in disabilities
- Child abuse in children with disabilities
 - Referred less frequently for abuse than peers
 - When reported, less likely to receive as much attention as other children's abuse cases
 - Less likely to be effectively and sensitively investigated
 - Fewer cases are filed for prosecution
 - When prosecuted, there are fewer convictions
 - When there are convictions, sentences for the perpetrators are lighter than for other children



Hospitals, doctors' offices, special education classrooms, specialized transportation services and other disability related settings may create a restrictive environment by separating children and adults from their assistive devices, and restraining them or isolating them from others who could provide assistance, which diminishes their ability to defend themselves.

Nosek, Howland & Hughes, 1999



What makes abuse *different* with PWD



- It is a bigger “secret”
- It is more extensive
- Abuse response agencies are not trained and do not announce that their services are for everyone (LEA, non-profits, protective services)
- Disability service agencies are not yet fully “on board” in conducting outreach, information & referral or direct services dealing with abuse and neglect

What makes abuse *different* with PWD



- Children with disabilities are often completely “left out” of information processes that would give them a vocabulary to understand and describe the abuse and to know that they can get help
- Although the abuse is not significantly different than abuse and neglect with the generic population, aspects of the abuse only occur because of certain disabilities:
 - Withholding assistive devices
 - Withholding medications
 - Complete physical control over the PWD
 - Threats by the abuser/Personal Care Attendant to leave which would threaten the life of the victim



Many myths create barriers around the issue of child abuse among children with disabilities.

Myths



- Belief that PWD are more protected than non-disabled peers.
 - False sense of security can lead to denial that the abuse could occur or is occurring
- Belief that PWD are less important than people without disabilities
- Belief that PWD are less sensitive to suffering from physical or sexual abuse since they are perceived as infantile or asexual
- Belief that the victim has provoked the abuse
- Reluctance to accuse professional caregivers if they are the source of the abuse
- Belief that PWD are less credible than non-disabled individuals

For people with severe disabilities, it might take particularly flagrant signs (death, pregnancy, venereal disease, or a new physical injury) before abuse is noted. This challenge can cause PWD to be left in danger for many years.



While many of the risk factors for children with disabilities and those without disabilities are the same, specific areas of concern that make children with disabilities especially vulnerable include:

~A Guide for Professionals in Recognizing and Reporting the Abuse and Neglect of Children with Disabilities produced by TeamWV





- Dependency for care will make a child trusting and unlikely to question
- Children learn compliance and do not complain
- Some children with disabilities have a limited social group and fear that if they report the abuse, they will damage or end the relationship with the abuser. They might also fear retribution.
- A child with a disability might never have the opportunity to learn about personal boundaries and self-protection or have inadequate socialization to understand “right” and “wrong” behavior.
- Self-injury will mask the source of the abuse
- Physical disabilities could seriously hamper efforts to flee
- Communication difficulties prevent children from reporting abuse
- Communication problems and lower cognitive functioning sometimes make a child appear less credible, and therefore they are not believed.

Vulnerability Factors



- Language, speech or vocabulary barriers
- Impaired or limited cognitive abilities
- Lack of abuse prevention education
 - Education on relationships, sex and what is and is not appropriate
- Unprotective organizational structures and policies
- Powerlessness
- Need for personal care
- Isolation
- Physical defenselessness

Barriers to Overcome



- Stereotypes
- Myths
 - Cannot distinguish the truth from a lie
 - Cannot understand the consequences for lying
 - Don't have a sufficient or correct vocabulary to describe the abuse . . . Their communication style is suspect.
 - Alternative methods of communication cannot be used
 - Are just plain not bright enough to be able to repeat their story
 - Are making up lies to get attention
 - Are asexual and engaging in wishful thinking

Abuse is a BIG problem for People with Disabilities.



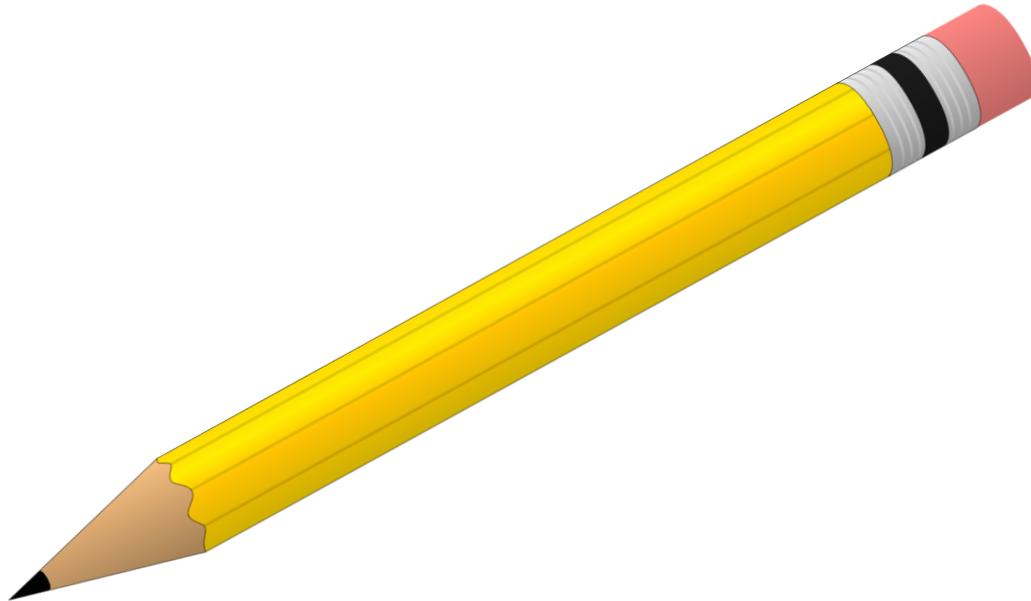
- Responding to Abuse
- Getting disclosures so we can provide supportive services
- “Preventing” the abuse
- Becoming a raving advocate ! ! ! ! !

Preventing Abuse



- Understanding public health concepts:
 - Primary – Educating everyone about a problem
 - Secondary – Educating those likely to have the problem
 - Tertiary – Providing intervention services to those who have experienced the problem
- Using effective and successful abuse awareness models
 - “Stranger Danger” is not effective since 99% of the problem is missed

Pencil Exercise



Power / Control



What is Power?

- Power is a noun
- Ability to make decisions for yourself or someone else
- Ability to influence others
- Ability to do what you want
- Possession of authority

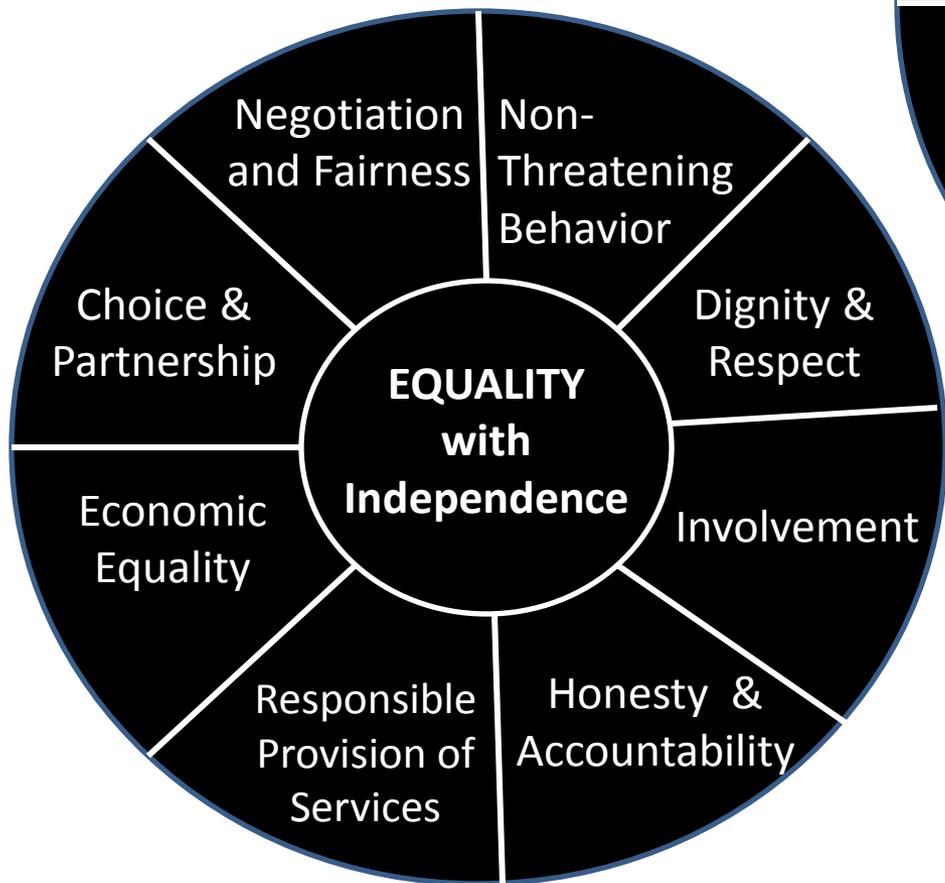
What is Control?

- Control is a verb
- To exercise restraining or directing influence
- Control situation
- Control others behaviors

How are Power and Control interrelated

How are they different

- **Power** is a noun describing ability and **Control** is a verb describing an action
- **Control** is doing or committing an act while **Power** is the ability to have influence over someone or something with no action involved.
- Abuse begins when one takes advantage of their **Power** and crosses the line to **Control** another person



Power And Responsibility

“With great power comes great responsibility!”

Stan Lee, Author, Spiderman

What does safety mean to You?

Comfort

Non-Threatening

Confidence

Happiness

No Fear

No Worries

What are things you do to stay safe?

Mindful of surroundings

Lock my doors

Avoid certain people

Travel in Pairs

Wear a seat belt

If you weren't safe, what would you do?

Seek Help

Look at Options

Call 911

Make a Plan

Tell Someone

- Safety is not being in danger
- Safety is being free from harm or risk of harm

How is safety different for people with disabilities?

- Person without a disability can:
 - Choose who comes to their house and who is around them
 - Control their transportation
 - Control their finances
 - Control their body and their needs
 - Can choose who they live with

How Can We Make A Difference?



- Talk about abuse to PWD
 - Help PWD understand abuse
 - Ask about abuse
 - Let PWD know they can trust you
- Recognize and look for signs of abuse
- Provide help
 - Make sure PWD are safe
 - Direct PWD to services and resources
 - Report responsibly

It was estimated that compared to the general population, individuals with developmental disabilities are 4 to _____ times more vulnerable to crime victimization.

a.5

b.7

c.10

Adults with intellectual disabilities had greater rates of victimization when compared to adults without disabilities as follows: Three times greater for crimes of assault and _____ times greater for crimes of sexual assault.

a.6

b.8

c.11

Males with disabilities are _____ more likely than males without disabilities to be sexually abused in their lifetime.

a. Twice

b. Three times

c. Four times

_____ % of women and _____ % of men with intellectual disabilities have been sexually assaulted.

a. 30 and 10

b. 50 and 15

c. 80 and 30

_____ % of those women who have
been assaulted more than 10
times.

a.20

b.35

c.50

Only _____ % of sexual abuse cases involving people with developmental disabilities are ever reported.

a.3

b.10

c.20

_____ % of boys who are deaf have been sexually abused, compared to 10% of boys who are hearing. _____ % of girls who are deaf have been sexually abused, compared to 25% of girls who are hearing.

a. 23 and 30

b. 30 and 44

c. 54 and 50

Why does this Happen?



- Access to help and resources may be limited or restricted by the abuser
- PWD are easy to manipulate
- Sometimes PWD won't tell because they are afraid they will get into trouble
- Often when a PWD tells, they are not believed because of how they tell and who they tell.

Why is this Important to Us?



- We can identify abuse
- We can keep people safe
- We can help stop the abuse
- We can get them the help they need
- We can save someone's life

What is Abuse?

Types of Abuse



- Financial
- Neglect
- Emotional
- Verbal
- Physical
- Sexual

Financial Abuse



The intentional misuse of another person's money or assets for personal gain.

- Stealing or helping oneself to another's possessions without permission
- Not treating reports of theft seriously
- Borrowing from one client for another client without permission
- Not returning proper change after making purchases
- Forcing people to pay for food for someone else

Financial Abuse Indicators



- Missing clothing
- Missing valuables
- Missing food or other personal belongings
- No spending money

Neglect



The failure of a caregiver to provide for a person's basic needs.

- Withholding food, medicine or other items needed.
- Not assisting when you know someone needs help
- Ignoring or postponing calls for help
- Forgetting or delaying help with eating, drinking, bathroom assistant
- Leaving essentials out of reach (water, dentures, walker, call button)

Neglect Indicators



- Loss of weight
- Dirt under the fingernails, matted hair, body odor, or heavily soiled or stained clothes
- Reduced ability to walk
- Skin breakdown or breakouts
- Symptoms over or under medication
- Psychological indicators including withdrawal, change in behavior, depression, agitation, anger or demanding behavior

Emotional Abuse



The use of manipulation, deception or deprivation intended to violate the emotional or psychological integrity of a person.

- Threatening with punishment if they do not behave
- Talking to others about the person as if they are not there
- Using demeaning language or ridicule
- Prohibiting free choice
- Not allowing to participate in activities
- Ignoring questions or comments
- Exposing body without concern for privacy

Emotional Abuse Indicators



- Recent or sudden changes in behavior
- Seemingly unjustified fear
- Unwarranted suspicion
- Denial of situation
- New or unexplained depression
- Lack of interest
- Change in activity level

Verbal Abuse



The use of specific language that humiliates or insults another person. This can include profanity, name calling and yelling.

- Yelling
- Screaming
- Name calling
- Teasing
- Use of profanity
- Blaming
- Judgmental

Verbal Abuse Indicators



- Recent or sudden changes in behavior
- Seemingly unjustified fear
- Unwarranted suspicion
- Denial of situation
- New or unexplained depression
- Lack of

Physical Abuse



The infliction of injury or unreasonable confinement resulting in bodily harm or injury.

- Hitting
- Beating
- Shoving
- Striking with object
- Squeezing roughly
- Scratching
- Biting
- Using overly hot or old water
- Slapping
- Punching
- Spitting
- Pulling / Twisting
- Pinching
- Tripping
- Burning
- Improper use of restraints
- Improper use of meds

Physical Abuse Indicators



- Bruises
- Swelling
- Change in walking
- Withdraw
- Change in behavior
- Unusual fear
- Skin tears or cuts
- Limbs out of place
- Scratches
- Burns
- Unexpected depression
- Denial of situation

Sexual Abuse



Occurs any time a person is forced, coerced, and/or manipulated into any unwanted sexual activity.

This can include anything from sexual harassment, to groping and rape.

- Fondling of another's private parts without consent
- Intimate touching of private parts during bathing
- Unwanted sexual advances
- Any sexual activity that occurs when one or both parties do not consent

Sexual Abuse



- Sexual harassment
- Any sexual activity between a paid care provider and the client
- Unwanted sexual talk
- Unwanted sexual imagery or pornography
 - Photographs
 - Films
 - Video taping

Consent



To agree to something

- Pizza for dinner
- Going to the store
- Use of your cell phone

Consent



- We can agree to something in many ways
 - We can say Yes
 - We can nod our heads up and down to show yes
 - We can say things like “I want to do that”
 - We can show an “Okay” sign with thumbs up
 - We can use American Sign Language to sign yes
- We can say No in several ways also
 - Put our hand up to exhibit “Stop”
 - We can say “Stop”
 - We can say “No”

Consent



Why is consent important in sexual activity?

- Each person feels comfortable with the sexual activity and understands what they are agreeing to
- Important to know that the other person is agreeing to the sexual activity
- Sexual activity is always a choice
- Agreeing to kiss is not agreeing to touching, and touching is not agreeing to oral sex or intercourse. Each act requires consent
- Both people need to consent to all acts
- Consenting once does not mean you consent forever
- You can take away consent by saying things like “No” or “Stop” or “I don’t want to”.
- You can take away consent at any time by showing you don’t want to do something

- Bottom line – In the case of sexuality there is
ALWAYS a choice.

Sexual Abuse Indicators



- Bruises, scratches, tears, irritation and swelling around genitalia
- Changes in sitting or walking ability
- Abnormal discharge
- Psychological indicators, including withdrawal or depression
- Sexually transmitted infections (STI)

How can people with disabilities keep themselves safe from neglect, verbal, physical and sexual abuse?

- Say “No” to the abuser
- Tell someone that they are being abused
- Tell again if they don’t do anything
- Tell someone else
- Tell until someone does something to help

What can PWD do to keep their money and belongings safe?



- Keep belongings and valuables in a safe place
- Use the bank to keep additional money
- Don't lend money or things to people they don't trust
- Create a spending plan and re4view their finances frequently
- Speak out to someone they trust about what is happening
- Keep telling until someone does something

Signs & Indicators of Abuse



- Physical
 - Cuts and bruises
 - Difficulty in walking
 - Dirty or disshelved appearance
 - Skin breakouts or breakdowns
 - Weight changes
 - Soreness or tenderness of genitalia
 - Unusual discharge from genitalia
 - STI

Signs & Indicators of Abuse



- Psychological
 - Withdrawal
 - Depression
 - Sudden change in behavior
 - Erratic behavior (aggressive, angry or agitated)

How Can We Make A Difference?



- Talk about abuse to PWD
 - Help PWD understand abuse
 - Ask about abuse
 - Let PWD know they can trust you
- Recognize and look for signs of abuse
- Provide help
 - Make sure PWD are safe
 - Direct PWD to services and resources
 - Report responsibly

Asking and Talking About Abuse



- Has anyone made you feel uncomfortable?
- Has anyone made you do things you did not want to do? Or has done thing to you that you didn't want?
- Is there anyone in your life you are afraid of?
- Has this person ever hurt you?
- If you talk to other people or go out with friends are you afraid of what this person might say or do to you?
- Has this person made you do things you did not want to do? Or done thing to you that you didn't want?

How to Tell . . .



- Tell what happened
- Tell someone you trust
- Keep telling until someone does something
- Have someone you trust with you when you tell

How to Tell . . .



- Look serious
- Don't laugh or smile
- Tell the facts
- Use a loud voice
- Look the person in the eye or face

Report Responsibly



Are you a mandated reporter?

West Virginia Law identifies certain groups as mandatory reporters. This means that individuals in one of these groups, who is aware of or believes that an incapacitated adult or facility resident is being abused, neglected or is in an emergency situation, must report this to the Department of Health and Human Resources immediately. The privileged status of communications between husband and wife and with any person identified as a mandatory reporter is nullified in circumstances involving abuse or neglect of an incapacitated adult. The only exclusion to this requirement is communication between an attorney and their client which continues to be considered privileged communication.

- medical professionals;
- dental professionals;
- mental health professionals;
- Christian science practitioners;
- religious healers;
- social workers;
- law enforcement officers;
- state and regional long-term care ombudsmen; (effective June 10, 2000) and,
- employees of any nursing home or other residential facility. (effective June 10, 2000)

Mandatory reporters must report suspected or known cases of abuse, neglect or emergency situations immediately. This initial report must then be followed by a written report, submitted to the local Department of Health and Human Resources, within forty-eight (48) hours following the verbal report. In certain situations the report must also be filed with other parties.



Reportable Crimes



- Any physical form of sexual abuse should be reported to a rape crisis center and the police
- Any serious form of physical abuse should be reported to the police
- Financial abuse or stealing may be a crime. You can consult with the police for verification of criminal activity

Where to Report



- Call 911 if abuse is happening right now
- Call DHHR Abuse Hotline 1-800-352-6513
- Follow Agency Protocol
 - Your Supervisor
 - Case Manager
- Advocacy Agency
 - Arcs
 - Centers for Independent Living

Tips for Caregivers of PWD



- Know and believe that abuse can happen to your loved one
- Become familiar with signs of abuse, including: signs of injury, changes in behavior, mood, communication, sleep or eating patterns
- When you suspect something is wrong, honor your feeling and take action
- When you suspect abuse, call a Child or Adult Protective Services Agency and the police
- Do not discuss your suspicions with anyone at the program where you believe abuse is occurring as they may not respond appropriately
- Remove your loved one from the program immediately

Tips for Caregivers of PWD



- If there are injuries or physical conditions, take your loved one to a physician. Take your loved one to a mental health practitioner who can document the changes in behavior and mood and who can document what your loved one's memories are of the abuse
- Create a detailed journal document in which you write all of your activities, document all of your conversations, and changes in your loved one. Notify your disability services center's case manager
- Notify your disability services agency director
- Get a police report. Contact the Victims of Crime program in your area, and get therapy

For Additional Information



The Arc of the Mid Ohio Valley

304-422-3151

www.thearcmov.org



*For people with intellectual
and developmental disabilities*

