

## CHILD ABUSE AND CHILDREN WITH DISABILITIES

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### Selected Journal Articles

(\*Full Article available w/LOGON in *Training* section - Updated: 5/4/2016)

\*Alriksson-Schmidt, A. I., Armour, B. S., & Thibadeau, J. K. (2010). Are Adolescent Girls With a Physical Disability at Increased Risk for Sexual Violence? *Journal of School Health*, 80(7), 361–367.

This article investigates if an adolescent female with a physical disability or health problem is more likely to report having been sexually abused compared to a female without a physical disability or health problem. The findings state that adolescent girls with a physical disability or long-term health problem are at a higher risk for sexual violence.

\*American Academy of Pediatrics Committee on Child Abuse and Neglect and Council on Children with Disabilities. Hibbard, R. A. & Desch, L.W. (2007) Clinical Report: Maltreatment of Children with Disabilities, *Pediatrics, Update*, 119(5), 1018-1025.

This is the latest (2007) version of the clinical report produced by the Committee on Child Abuse and Neglect and the Council on Children with Disabilities within the American Academy of Pediatrics. It once again recognizes that children with disabilities as a population need to be recognized as at risk for maltreatment. It cautions medical providers to not be confused by some conditions related to disability which can present as maltreatment. Early intervention and ways that a medical home can facilitate the prevention and intervention of child maltreatment are the subjects of this report.

\*Anderson, J. & Heath R. T. (2006). Forensic Interviews of Children Who Have Developmental Disabilities. Part 1 and Part 2. Update. *American Prosecutors Research Institute*, 19(1); 19(2).

Provides general information on interviewing strategies when investigating a case with a child with developmental disabilities. The first short summary (Part 1) emphasizes the importance of preparations before an interview including being sure all information is obtained, establishing child characteristics and who will be the lead interviewer, etc. Part 2 highlights some general guidelines during the forensic interview including developmental screening, dynamics of abuse with this particular population. Articles are very short, but provide good points to consider for this population of children.

Appelbaum, K. L. (1995). Assessment of criminal-justice-related competencies in defendants with mental retardation. *Journal of Psychiatry and Law*, 311-327.

Provides a succinct overview of strategies to detect mental retardation in defendants during forensic evaluations. Recommends that professionals pay particular attention to an individual's psychosocial history, responses to functional tasks, and specific aspects of communication and cognition for preliminary evidence of a disability. A helpful outline of these initial clues to the presence of mental retardation is included. Issues pertaining to diagnosis and classification, competence, and supports are also briefly addressed. While slightly outdated, this medical perspective provides a readable and well-organized overview of ways for professionals to detect mental retardation in defendants during forensic evaluations.

Aunos M., Goupil G. & Feldman M. (2003). Mothers with intellectual disabilities who do or do not have permanent custody of their children. *Journal on Developmental Disabilities*, 10(2), 65-79.

Many parents with intellectual disabilities (ID) lose custody of their children due to real or perceived parenting inadequacies. It is not clear how parents with ID who keep their children differ from parents who lose their children. In this study, 30 mothers with an intellectual disability, who still had custody of all their children, were compared to 17 mothers whose children were placed in care. The results suggest that services should then be offered to both mothers and children and be adapted as the children grow.

Aunos, M., Goupil G. & Feldman, M. (2008). Mothering with Intellectual Disabilities: Relationship Between Social Support, Health and Well-Being, Parenting and Child Behaviour Outcomes. *Journal of Applied Research in Intellectual Disabilities* (21)4, 320-330.

There is a general agreement in the literature that no systematic correlation exists between parental intellectual disability per se and parenting performance. Yet, a few studies in the field of parents and parenting with intellectual disability have explored other potential determinants of parenting and child outcomes. In this study, the authors examined the relationship between maternal social support, psychological well-being, parenting style, quality of the home environment and child problem behaviors.

Ballard, M.B. & Austin, S. (1999). Forensic interviewing: Special considerations for children and adolescents with mental retardation and developmental disabilities. *Education and Training in Mental Retardation and Developmental Disabilities*, 34(4), 521-525.

An excellent short summary of the special considerations that professionals need to remember as they interview children and adolescents with Mental Retardation and Developmental Disabilities. These general considerations are presented in an easily read narrative format, and are discussed in the context of the different phases of the forensic interview.

Bayat, M. (2015). The stories of 'snake children': killing and abuse of children with developmental disabilities in West Africa. *Journal of Intellectual Disability Research*, 59(1), 1-10.

This is an interesting article from a cultural context perspective regarding how children with developmental disabilities are viewed and treated in the Ivory Coast. They are typically believed to be snakes living in children's bodies, subjected to one of three possible outcomes, i.e. they are killed, abandoned/left to die, or allowed to live in the community as "non-human".

Bickel, P.S. (2010). How long is a minute? The importance of a measured plan of response in crisis situations. *TEACHING Exceptional Children*, 42(5), 18-22.

This article, about restraint and seclusion, explains the importance of the first minute of a crisis to prevent injury. It also includes the components of a proactive emergency intervention plan, and the student safeguards that should be included.

\*Blake, J. J., Lund, E. M., Qiong, Z., Oi-man, K., & Benz, M. R. (2012). National Prevalence Rates of Bully Victimization Among Students With Disabilities in the United States. *School Psychology Quarterly*, 27(4), 210-222.

This article looks at the prevalence rates of victimization and repeated victimization in the form of bullying, specifically for students with disabilities. Bullying rates were reported highest for students who had emotional disturbances. This study also discovered that students who were bullied once were usually bullied many times. Students who had been diagnosed with autism and orthopedic impairments were at the highest risk for repeated victimization.

Booth T. & Booth W. (2005). Parents with learning difficulties in the child protection system: Experiences and perspectives. *Journal of Intellectual Disabilities*, 9(2), 109-129.

The article documents the views and feelings of parents with learning difficulties as they reflect on their first-hand experience of going through care proceedings. Interviews with mothers and fathers who have learning difficulties describe how they are handled by the child protection system and the family courts. The authors provide a parental perspective on assessments, support, case conferences and the court process as well as the aftereffects on the families themselves.

Bottoms, B. L., Nysse-Carris, K. L., Harris, T. and Tyda, K. (2003). Jurors' Perceptions of Adolescent Sexual Assault Victims Who Have Intellectual Disabilities. *Law and Human Behavior*, 27(2), 205-227.

Children and adolescents with intellectual disabilities are vulnerable to sexual abuse. Even so, their claims are often not heard in court, possibly because people assume that jurors will not believe them.

Breslau, N., Koenen, K. C., Luo, Z., Agnew-Blais, J., Swanson, S., Houts, R. M., & Moffitt, T. E. (2014). Childhood maltreatment, juvenile disorders and adult post-traumatic stress disorder: A prospective investigation. *Psychological Medicine*, 44(9), 1937-1945.

The risk of post-traumatic stress disorder (PTSD) following trauma is examined among those who also suffer from one of several psychiatric disorders as children, including anxiety and depressive disorders, conduct disorders, and ADHD. It's found that those who have any of these psychiatric disorders are significantly more likely to develop PTSD following trauma than those who do not have a psychiatric disorder. The article emphasizes the need for follow-up care for this group.

\*Brown, D. A., Lamb, M. E., Lewis, C. N., & Stephens, E. (2012). The influences of delay and severity of intellectual disability on event memory in children. *Journal of Consulting and Clinical Psychology*, 80(5), 829-841.

This article studied if children with intellectual disabilities had the ability to reliably take their own personal experiences and recount them during an interview. This work took into consideration the effects of the child's delay, the severity of their disability, and the prompts used during the interview. The findings show that children with intellectual disabilities could be valued informants when in a forensic interview.

Bull, R. (2010). The investigative interviewing of children and other vulnerable witnesses: Psychological research and working/professional practice. *Legal and Criminological Psychology*, 15(1), 5-23.

This article gives the definition of what a vulnerable witness is, and then explains why it is important to obtain effective witness accounts from these vulnerable witnesses. The article further discusses the steps needed to guide professionals on how to interview in a more skilled manner.

Caldas, S. J., & Betsy, M. L. (2014). The sexual maltreatment of students with disabilities in American school settings. *Journal of Child Sexual Abuse*, 23(4), 345-366.

The prevalence rates of various forms of sexual abuse (with and without contact) in schools among children with disabilities are listed here. Characteristics of those who are more likely to be sexually abused and types of abusers are described in detail, including typical school responses to these incidents.

Cambridge, P., Beadle-Brown, J., Milne, A., Mansell, J., & Whelton, B. (2011). Patterns of risk in adult protection referrals for sexual abuse and people with intellectual disability. *Journal of Applied Research in Intellectual Disabilities*, 24(2), 118-132.

This article studies patterns of risk for sexual abuse concerning people with intellectual disabilities (ID) in England. The sexual abuse cases for people with ID were compared with other types of abuse cases for individuals with ID.

CCBD's position summary on the use of seclusion in school settings. (2009). *Behavioral Disorders*, 34(4), 235-243.

A policy summary of the Council for Children with Behavior Disorders (CCBD) views on the use of seclusion and time-out procedures in school settings.

Cederborg, A.C., Danielson, H., Rooy, D.L., & Lamb, M.E. (2009). Repetition of contaminating question types when children and youths with intellectual disabilities are interviewed. *Journal of Intellectual Disability Research*, 53, 440-449.

This article discusses how victims of crime are interviewed by police officers in Sweden, and how this may affect their ability to report information accurately. When the officers asked focused questions, not open-ended questions, they were more likely to receive in accurate information. Use of open-ended questions, shorter sentences to achieve the best results.

Cederborg, A., Hultman, E., & La Rooy, D. (2012). The quality of details when children and youths with intellectual disabilities are interviewed about their abuse experiences. *Scandinavian Journal of Disability Research*, 14(2), 113-125.

This study was produced to develop an understanding for how children and youths with intellectual disabilities (ID) provide details when interviewed about their experiences being abused. This article analyzes the types of questions being used during these interviews. The article looks at the use of open-ended questions and option-posing questions for children and youths with ID.

Christensen, L. L., Fraynt, R. J., Neece, C. L., & Baker, B. L. (2012). Bullying Adolescents with Intellectual Disability. *Journal of Mental Health Research in Intellectual Disabilities*, 5(1), 49-65.

This article assessed how prevalent, chronic, and severe bullying is with individuals who have intellectual disabilities (ID). Interviews and questionnaires were taken from mothers of children with and without intellectual disabilities. Individuals with ID were reported to be bullied significantly more than their typically developing peers, but they did not report the bullying to be more chronic or severe.

Cooke, P. & Davies, G (2001). Achieving best evidence from witnesses with learning disabilities: New guidance. *British Journal of Learning Disabilities*, 29(3), 84-87.

The new legislation contained within the UK Youth Justice and Criminal Evidence Act 1999 came into force in 2001 and offered special measures' to enable vulnerable witnesses to give improved evidence in court. It emphasizes the need for early identification of witnesses with learning disabilities, and offers suggestions regarding identification and the type of support which should be offered in terms of attitude, conditions, practice and language.

\*Council for Exceptional Children. (2010). Council for Exceptional Children's Policy on Physical Restraint and Seclusion in School Settings, *TEACHING Exceptional Children*, 42(5), 24-25.

This document outlines the CEC policy on restraint and seclusion and suggested principles and policies for the use of restraint/seclusion in school settings.

Couvillon, M., Peterson, R., Ryan, J.B., Scheuermann, J. & Stegall, J. (2010). A review of crisis intervention training for schools. *TEACHING Exceptional Children*, 42(5), 6-17.

This article highlights the importance of school districts making an informed decision regarding which "crisis intervention" training they should provide to their staff because of the spotlight put on restraint and seclusion procedures used in schools. The article lists the various training programs available to school districts and some details of each one.

Danner, N., Corr, C., & Catlett, C. (2015). Resources for Professionals Working with Young Children with Disabilities Who Have Experienced Abuse or Neglect. *Young Exceptional Children*, 18(3), 52-53.

This article provides a listing of resources for professionals working with young children with disabilities who have experienced abuse or neglect. Information included on the detection, intervention, and outcomes for these children.

Dinehart, L. H., Katz, L. F., Manfra, L., & Ullery, M. A. (2013). Providing quality early care and education to young children who experience maltreatment: A review of the literature. *Early Childhood Education Journal*, 41(4), 283-290.

This paper highlights the role of early care and education on the outcomes, both developmentally and academically, for children who experience maltreatment. The article delves into exposure to stress, role of child protective services, and how to improve outcomes for this age group of children.

Doughty, A. H., & Kane, L. M. (2010). Teaching abuse-protection skills to people with intellectual, disabilities: A review of the literature. *Research in Developmental Disabilities*, 31(2), 331-337.

This article discusses different studies related to sexual abuse, verbal abuse, and physical abuse protection skills for people with intellectual disabilities. The studies involved training, a follow up, skill-maintenance tests, and skill generalization.

Dunlap, G., Ostry, C. & Fox, L. (2011). Preventing the Use of Restraint and Seclusion with Young Children: The Role of Effective, Positive Practices. Retrieved from: [http://www.challengingbehavior.org/do/resources/documents/brief\\_preventing.pdf](http://www.challengingbehavior.org/do/resources/documents/brief_preventing.pdf)

This article defines what restraint and seclusion are in the context of young children. The authors go on to outline the problems with seclusion and restraint that currently exist including: potential injury, risk of psychological problems, lack of therapeutic benefit, and overuse. The authors advocate for the promotion of a framework of prevention that involves the promotion of appropriate social emotional behaviors, as well as prevention of violent or disruptive behaviors. The authors outline an approach (i.e. the LEAD process) to handling what they deem to be serious and "out-of-control" behaviors.

Elman, R.A. (2005). Confronting the sexual abuse of women with disabilities. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/ Pennsylvania Coalition Against Domestic Violence. Retrieved 10/5/10: <http://www.vawnet.org/research/>

This article gives an overview of various studies focusing on sexual abuse of women with disabilities. The variety of studies available, make it hard to find appropriate responses and conclusions. The article also discusses data on perpetrators. Research finds that the majority of perpetrators are male caregivers, most of whom are paid service providers in a disability service setting. Suggestions on sexual violence prevention strategies for women with disabilities are also provided.

\*Ericson, K., Perlman, N. & Isaacs, B. (1994). Witness competency, communication issues and people with developmental disabilities. *Developmental Disabilities Bulletin*, 22(2), 101-109.

While slightly outdated, this article provides a readable discussion of the communication and competency issues involving individuals with developmental disabilities who have been victims of sexual abuse or assault. A comprehensive set of guidelines for interviewers outlines a number of practical ways to support the communication needs of witnesses who have developmental disabilities. Presented in a numbered list, these guidelines provide the dos and don'ts for interviewing individuals with developmental disabilities.

Finlay, W. M., & Lyons, E. (2002). Acquiescence in interviews with people who have mental retardation. *Mental Retardation*, 40, 14-29.

Current and comprehensive explanation of the occurrence and causes of acquiescence in interviews with individuals who have mental retardation. Specifically deals with one aspect of acquiescence, yes-saying, the tendency of individuals to respond affirmatively regardless of the question asked. The researchers emphasize that in addition to acquiescence being caused by an individual's desire to please, it should also be viewed as the result of asking questions that are too complex linguistically or in terms of content. Specific and practical strategies for reducing acquiescence in interviews are offered.

Flynt, S. W., & Morton, R. (2004). Bullying and Children with Disabilities. *Journal of Instructional Psychology*, 31(4), 330-333.

This article discusses the relationship between bullying and students with disabilities. It examines the term bullying and different programs designed to decrease bullying in schools.

Focht, G. (2008). Persons With Developmental Disability Exposed to Interpersonal Violence and Crime: Approaches for Intervention. *Perspectives in Psychiatric Care*, 44, (2), 89-98.

Persons with developmental disabilities experience interpersonal violence (from caregivers, family members, etc.) and the effects at a much higher rate than persons without disabilities. Healing from the trauma can be a slow process for persons with developmental disabilities. In order to heal, they need time and a caring environment. They may also benefit from the traditional therapeutic approaches when adjusted to their level of communication and understanding.

Fuller-Thomson, E., Mehta, R., & Valeo, A. (2014). Establishing a link between attention deficit disorder/attention deficit hyperactivity disorder and childhood physical abuse. *Journal of Aggression, Maltreatment & Trauma*, 23(2), 188-198.

The association between childhood abuse and later diagnosis of attention deficit disorder/attention deficit hyperactivity disorder (ADD/ADHD) are examined in this article. Those who reported having been abused physically were 7 times more likely to later be diagnosed with ADD/ADHD compared to those who did not report childhood abuse. Authors discuss types of symptoms that could result in a greater chance of parental abuse as well and vice versa.

Goff, S. (2016). Child Protection and Disability Toolkit by *WithScotland* and the Scottish Government's Ministerial Working Group on Child Protection and Disability, 2014. *Child Abuse Review*, 25(1), 74-75.

This is a basic overview of a toolkit developed in Scotland that was created to train professionals working with children with disabilities and families. One part of this toolkit is specifically designed around: recognizing abuse in children with disabilities, barriers to detection, and factors related to under-reporting. Communication is the primary focus. Another part covers working with parents who are disabled. <http://withscotland.org/resources/child-protection-and-disability-toolkit>

Heckler, S. (1994). Facilitated communication: A response by child protection. *Child Abuse and Neglect*, 18(6), 495-503.

Discusses the case of a 7-year-old child with autism from Minneapolis, MN who reported via facilitated communication that she had been sexually abused. This case is used as a springboard for a thorough discussion on several of the issues concerning facilitated communication, including a research-based rationale for its use, the influence of the facilitator, and strategies for demonstrating the independence of produced messages. While outdated, this discussion provides a clear and readable introduction to the controversial method of facilitated communication, as well as a valuable explanation of the key issues that references actual cases of abuse reported via facilitated communication.

Heestermans, M. (2010). Interviewing victims of sexual abuse with an intellectual disability: A Dutch single case study. *Journal of Social Work Practice*, 24, 1-17.

This article discusses and demonstrates how to conduct interviews of victims that have been sexually abused in order for them to disclose the information in their own words. A single Dutch case study, but worth a review.

\*Hershkowitz, I., Lamb, M. E., & Horowitz, D. (2007). Victimization of children with disabilities. *American Journal of Orthopsychiatry*, 77(4), 629-635.

The risk of sexual victimization and abuse is much greater for children with severe disabilities, as opposed to those children with "minor" disabilities. Article highlights that children with disabilities are more likely to be a victim of sexual abuse rather than physical abuse those who have been abused are more likely to delay in reporting the abuse, or not report it at all, compared to their typically developing peers that have been abused.

Higgins, D. (2010). Sexuality, human rights and safety for people with disabilities: the challenge of intersecting identities. *Sexual and Relationship Therapy*, 25 (3), 245-257.

This article overviews sexual victimization, sexual assault, and gender-based discrimination of people with a disability. Discusses the issues in the context of human rights as well.

\*Hollomotz, A. (2009). Beyond 'Vulnerability': An ecological model approach to conceptualizing risk of sexual violence against people with learning difficulties. *British Journal of Social Work*, 39(1), 99-112.

In the UK, people with learning difficulties are more likely to experience sexual violence than non-disabled people. This article looks at the risk factors associated with sexual violence and learning difficulties. It concludes that risk factors are often socially created, and not the origin of the individual. It also concludes that confining people to "safe" environments, such as group homes, does not stop sexual violence. Authors conclude that increasing self-defense skills is key to protect people with learning difficulties against sexual violence.

\*Huer, M.B., & Yaniv, K. (2006). Access to justice: An SLP's guide to helping persons with complex communication needs voice their case. *The ASHA Leader*, 11(17), 6-7, 28-29.

Describes the responsibilities and challenges of Speech-Language Pathologists (SLP) as they prepare persons with complex communication needs (PWCCN) for the court system. The article suggests that SLPs should acquire additional knowledge, skills, and education before entering the legal arena (e.g. basic rules of law, and procedures). Work is needed in this area to advocate for increased accommodations and these professionals can assist. Judges and attorneys may also need to be immersed in training programs for greater acceptance of communication through augmentative and alternative communication (AAC) systems and other strategies. A very critical topic with cross-training needed in many disciplines.

James, H. (2004). Promoting effective working with parents with learning disabilities. *Child Abuse Review* 13 (1), 31-41.

This article outlines the risks of children of parents with intellectual disabilities (i.e. called *learning disabilities in the UK*), including the risk of developmental delays from genetic and/or environmental factors. The children of parents with intellectual disabilities are more likely to experience behavior problems, and language delay. The article also states there is a risk of neglect. The article further explains the ways that risks can be reduced: family supports and small family size.

\*Jones, L., Cross, T., Walsh, W., Simone, M. (2007). Do children's advocacy centers improve families' experiences of child sexual abuse investigations? *Child Abuse and Neglect*, 31(10), 1069-1085.

Children's Advocacy Centers (CACs) seek to increase multidisciplinary coordination in sexual abuse investigations and provide an independent, child-friendly environment for forensic interviews, increase training for interviewers, and increase children's access to medical and therapeutic services. The agencies have developed rapidly. Although CACs vary and emphasize different objectives, all aim to improve the experience of children and families with sexual abuse investigations. This study presents results measuring caregivers' and children's experiences with child abuse investigations.

Kapperman, G., Brown-Ogilvie, T., Yesaitis, J., & Peskin, A. (2014). Prevention of sexual assault against children who are visually impaired. *Division on Visual Impairments Quarterly*, 59(2), 33-37.

This article provides a good overview of sexual assault against children who are visually impaired, including general information, warning signs, and ways to reduce risk of sexual assault. It discusses this information within the general population, as well as its relation to the unique experiences of children with visual impairment.

\*Katz, C., Hershkowitz, I., Malloy, L. C., Lamb, M. E., Atabaki, A., & Spindler, S. (2012). Non-verbal behavior of children who disclose or do not disclose child abuse in investigative interviews. *Child Abuse & Neglect*, 36(1), 12-20.

This article is focused on nonverbal behavior during investigative interviews for suspicion of child abuse. The aim of this article is to determine whether non-verbal behaviors predicted whether a child would disclose the alleged abuse later in the interview. This article identified nonverbal behaviors related to disclosing or not disclosing abusive situations.

Kebbell, M. R., & Hatton, C. (1999). People with mental retardation as witnesses in court. *Mental Retardation*, 3, 179-187.

Provides a dense, yet helpful review of the literature concerning eyewitness testimony given by individuals who have mental retardation. Research on such topics as recall accuracy, questioning style, suggestibility, and alternative interviewing methods is clearly presented and suggests that individuals with mental retardation can provide accurate accounts of events when appropriate questioning and cross-examination techniques are used. While more difficult to read than others given its empirical focus, it is a well-organized and comprehensive resource that is recommended for all professionals involved in evaluating/interviewing DD individuals.

\*Kendall-Tackett, K., Lyon, T., Taliaferro, G., & Little, L. (2005). Why child maltreatment researchers should include children's disability status in their maltreatment studies. *Child Abuse and Neglect the International Journal*, 29(2), 147-151.

Approximately 8% of children in the US have disabilities (US Census Bureau, 2002), and these children are more likely to be abused or neglected than their non-disabled peers. The studies that have identified this vulnerability have varied in methodology and sample, and yet the findings have been remarkably consistent. But much work still needs to be done to know the magnitude of the problem, and what professionals can do to help. The authors are writing to encourage researchers in the child maltreatment field to include children's disability status in their studies of abuse and neglect.

Kistin, C. J., Thompson, M. C., Cabral, H. J., et al (2016). Subsequent maltreatment in children with disabilities after an unsubstantiated report for neglect. *Journal of the American Medical Association*, 315(1), 85-87.

This article raises concerns over abuse and neglect among children with disabilities after an unsubstantiated claim of abuse or neglect. Children with disabilities are much more likely to be reported again than those without disabilities, and in much less time. This increased risk calls for a need for more thorough investigations and follow-up, particularly for this group.

Klein, B., Damiani-Taraba, G., Koster, A., Campbell, J., & Scholz, C. (2015). Diagnosing attention-deficit hyperactivity disorder (ADHD) in children involved with child protection services: Are current diagnostic guidelines acceptable for vulnerable populations? *Child: Care, Health & Development*, 41(2), 178-185.

The authors discuss concern over how frequently children who have been abused, or are suspected to have been abused, are often diagnosed with ADHD. They discuss the other factors that often result in ADHD-like symptoms and call for reform in the practice of diagnosing children who have been or may have been abused.

Konstantareas, M. M. (1998). Allegations of sexual abuse by nonverbal autistic people via facilitated communication: Testing of validity. *Child Abuse & Neglect*, 22(10), 1027-1041.

Presents a comprehensive alternative approach to establishing the validity of allegations of sexual abuse by nonverbal children with autism produced through facilitated communication. The assessment protocol for this new approach is clearly described and illustrated using actual cases of reported sexual abuse. Table I provides a helpful outline of the assessment instruments employed as part of an evaluation of allegations of abuse via facilitated communication. Historical study.

Kvam, M. H. (2005). Experiences of Childhood Sexual Abuse among Visually Impaired Adults in Norway: Prevalence and Characteristics. *Journal of Visual Impairment & Blindness*, 99(1), 5-14.

This research from Norway highlights that children who are visually impaired are significantly more likely to be sexually abused than the general population, and that the abuse is typically more severe. The author discusses risk factors, protective factors, and implications for adults in the children's lives. Worth the review despite older research data.

Leeb, R. T., Bitsko, R. H., Merrick, M. T., & Armour, B. S. (2012). Does Childhood Disability Increase Risk for Child Abuse and Neglect? *Journal of Mental Health Research in Intellectual Disabilities*, 5(1), 4-31.

This article reviews the evidence that children with disabilities are at a higher risk for child maltreatment. The article also discusses how parents with disabilities are more likely to perpetuate the act of child abuse and neglect to these children.

Lightfoot, E.B., & LaLiberte, T.L. (2006). Approaches to child protection case management for cases involving people with disabilities. *Child Abuse & Neglect*, 30, 381-391.

This study looks at the services from child protection agencies given to cases where a family member had a disability. The study reports that few of the agencies in the study had formal written reports for working with families with disabilities. The study also recommended that further standardization and training for workers is needed in this realm.

Little, L. (2004). Victimization of children with disabilities. In K.A. Kendall-Tackett (Ed.), *Health consequences of abuse in the family: A clinical guide for evidence-based practice* (pp. 95-108). Washington, DC: *American Psychological Association*.

Extensively reviews the unique vulnerabilities of children with disabilities in a way that is readable and well-organized. Practical suggestions are also offered for assessing, reporting, and treating the abuse of children who have disabilities. Chapter is very readable, and comprehensive. A must-read for all involved in these issues involving children with disabilities.

Maguire, S. A., Williams, B., Naughton, A. M., Cowley, L. E., Tempest, V., Mann, M. K., & Kemp, A. M. (2015). A systematic review of the emotional, behavioural and cognitive features exhibited by school-aged children experiencing neglect or emotional abuse. *Child: Care, Health & Development*, 41(5), 641-653.

This is a review intended to identify characteristics of children that may be victims of neglect or emotional abuse in order to assist in detecting children who should be assessed. They found that children who were victims of neglect or emotional abuse were much more likely to exhibit poor academic performance, ADHD symptoms, or abnormal behavior.

Mallén, A. (2011). 'It's Like Piecing Together Small Pieces of a Puzzle'. Difficulties in reporting abuse and neglect of disabled children to the social services. *Journal of Scandinavian Studies in Criminology and Crime Prevention*, 12(1), 45-62.

This article delves into how Swedish law requires individuals to report abuse and neglect of individuals with disabilities to social services. However, only a small number of children who are suspected of being victims of abuse are reported to social services. Reporting was shown to be a last resort, based on which acts against children were more reprehensible.

\*Manders, J.E., Stoneman, Z. (2009). Children with disabilities in the child protective services system: An analog study of investigation and case management. *Child Abuse and Neglect*, 30(4), 229-237.

This study looked at how case workers perceived victims of abuse when they had a physical disability. Victims with a physical disability were more likely to be seen as having a characteristic which contributed to the abuse than those victims without disabilities. Victims with an emotional/behavioral disorder were more likely to gain empathy from the interviewer.



\*Martin, S.L. et. al (2006). Physical and sexual assault of women with disabilities. *Violence Against Women*, 12(9), 823-837.

This article investigates whether or not a disability status makes a woman more likely to experience physical or sexual assault. Based on a survey in North Carolina, women with disabilities are not more likely to experience physical assault than their non-disabled counterparts. Women with disabilities were four times more likely to be sexually assaulted than their non-disabled counterparts. Additional training for clinicians to be more aware of violence issues of these patients.

Mikton, C., Maguire, H., & Shakespeare, T. (2014). A systematic review of the effectiveness of interventions to prevent and respond to violence against persons with disabilities. *Journal of Interpersonal Violence*, 29(17), 3207-3226.

This is a review of 10 studies evaluating the effectiveness of interventions that prevent or lessen the consequences of abuse among children with disabilities. There is a useful table breaking down key components of each study, e.g. disability assessed, how effective the intervention was found to be.

Moreno-Manso, J., García-Baamonde, M., Blázquez-Alonso, M., Pozueco-Romero, J., & Godoy-Merino, M. (2016). Social communication disorders and social cognitive strategies and attitudes in victims of child abuse. *Journal of Child & Family Studies*, 25(1), 241-250.

This study looks at the effect of child abuse on development of communication and social skills. It demonstrates that victims of child abuse have significantly lowered abilities to communicate and interact socially. The implications for those who are assessing, interviewing, or treating these children need to respond appropriately to these language or social development delays. Highlights best interventions to prevent or improve these deficits as well.

Nathanson, R. & Crank, J.N. (2004). Interviewing children with disabilities. *Children's Law Manual*, 31-39.

Children with disabilities, such as those with lower IQ and learning disabilities, are at a heightened risk for coming into contact with the legal system. They may be victims of abuse, perpetrators in delinquency cases or witnesses in placement decisions. Although there is an increased likelihood of children with disabilities participating in the investigative and judicial process, children with disabilities are often unlikely to be questioned about their experiences. Guidelines provided..

\*Nathanson, R. & Platt, M. (2005). Attorneys' perceptions of child witnesses with mental retardation. *Journal of Psychiatry & Law*, 23(1), 5-42.

Children with mental retardation are more likely to be abused than the general population, yet are often denied access to the justice system. Research on children without mental retardation has revealed skepticism as to their reliability as witnesses in the court of law. Even more so, children with mental retardation face the issue of credibility because of their age and disability. This study assesses attorneys' perceptions of child witnesses with mental retardation.

Nowak, C. B. (2015). Recognition and prevention of child abuse in the child with disability. *American Journal of Medical Genetics*. Part C, Seminars In Medical Genetics, 169(4), 293-301.

This author lists the increased risks of various types of abuse related to a number of different types of disabilities. She also discusses how children with disabilities are more likely to have their abuse missed or have the results of their condition be mistaken for abuse. Disabilities often characterized by self-injurious behavior are described as examples to reduce the risk of false claims of abuse.

\*Oosterhoorn, R., & Kendrick, A. (2001). No sign of harm: Issues for disabled children communicating about abuse. *Child Abuse Review*, 10(4), 243-253.

Describes an exploratory research project that analyzed the views of professionals working with children using alternative or augmentative communication systems on the issues pertaining to communication about abuse. The study and its findings are clearly written, easy to read, and comprehensive, especially the subsection discussing the barriers to communicating abuse. Given the importance of communication in protecting children with disabilities from being abused, this resource is especially meaningful for settings and professionals responsible for selecting and utilizing augmentative communication systems.

Orelove, F. P., Hollahan, D. J., & Myles, K. T. (2000). Maltreatment of children with disabilities: Training needs for a collaborative response. *Child Abuse and Neglect*, 24, 185-194.

Describes the results of a research project conducted at the Virginia Commonwealth University to determine the current knowledge, experience, and training interests of parents, educators, and investigators concerning responses to children with disabilities who have been maltreated. Researchers used a needs assessment instrument to assess the knowledge level of 125 Child Protective Services (CPS) workers and law enforcement personnel, 199 educators, and 101 parents of children with disabilities. Results suggest that knowledge levels in most assessed areas were not extensive. Excellent article to review to build more coordinated and multidisciplinary training efforts that can provide disability-specific knowledge and systematic approaches to recognizing and responding to instances of suspected child abuse related to this group.

Oswald, M. (2008). Development of an accessible audio computer-assisted self interview (A-CASI) to screen for abuse and provide safety strategies for women with disabilities. *Journal of Interpersonal Violence* 24(5), 795-818.

This article describes the development of the Safer and Stronger Program. This is an audio computer-assisted self-interview program that is used with women with disabilities, and women who are Deaf, in order to screen for abuse. The use of this program has identified potential barriers often seen when interviewing women with disabilities. Women have been more likely to disclose abuse using a technology based program, rather than a paper and pencil format, or face-to-face interview.

Palusci, V. J., Datner, E., & Wilkins, C. (2015). Developmental disabilities: Abuse and neglect in children and adults. *International Journal of Child Health and Human Development*, 8(4), 407-428.

This is a great resource for key characteristics to look for when assessing for abuse among children with intellectual and developmental disabilities, as well as strategies to use while interviewing. In addition, it reviews handling situations where the parents are the ones with a disability.

Pava, W. (1994). Visually impaired persons' vulnerability to sexual and physical assault. *Journal of Visual Impairment & Blindness*, 88(2), 103.

This survey in the greater Seattle area examines the perceived and actual risk of assault facing people who are visually impaired. The study explored situations in which respondents felt most vulnerable and what made them feel more comfortable. It also briefly covers strategies for reducing the risk of assault among the visually impaired population.

Perlman, N. B., Ericson, K. I., Esses, V. M., & Isaacs, B. J. (1994). The developmentally handicapped witness: Competency as a function of question format. *Law and Human Behavior*, 18, 171-187.

Provides a readable and comprehensive discussion of the effects of question format on the response competency of individuals with disabilities. Specifically, it presents a study that investigated the ability of 30 individuals with developmental disabilities and 30 individuals without disabilities (17-26 years old) to accurately and completely respond to different types of questions concerning a real event. Results support the conclusion that there are ways to facilitate accurate testimony by individuals with developmental disabilities, using a combination of free recall and specific, non-leading questions, .

Perske, R. (1994). Thoughts on the police interrogation of individuals with mental retardation. *Mental Retardation*, 32, 377-379.

While slightly outdated, this brief, yet thorough article provides an excellent introduction to mental retardation and its effects on cognition, communication, and behavior. Offers several practical suggestions to ensure fair and just outcomes for individuals with mental retardation. As such, this more historical reading is recommended for law enforcement personnel and other individuals examining or interviewing individuals with mental retardation.

Raskauskas, J. & Modell, S. (2011). Modifying anti-bullying programs to include students with disabilities. *TEACHING Exceptional Children*, 44(1), 60-67.

This article gives an overview of bullying in schools today and especially the prevalence of bullying of students who have disabilities. Many professionals believe that students with disabilities are more likely to be bullied, and this can interfere with their ability for academic advancement. This article also states that children who are victimized by their peers are most likely to display physical, behavioral, developmental, and learning disabilities.

Roberts, A. L., Koenen, K. C., Lyall, K., Robinson, E. B., & Weisskopf, M. G. (2015). Association of autistic traits in adulthood with childhood abuse, interpersonal victimization, and posttraumatic stress. *Child Abuse & Neglect*, 45, 135-142.

This work looks at women with autism and examines their level of autistic traits as they are associated with increased risk of childhood abuse, interpersonal victimization, and post-traumatic stress (PTSD). Those who had a greater number and more severe autistic traits were more likely to have been victims of physical abuse, sexual abuse, emotional abuse, and muggings with a greater chance of developing PTSD due to these experiences. This article highlights the importance of those working with victims of abuse or crime to be familiar and comfortable with individuals on the autism spectrum in order for them to receive the proper help following a trauma.

Rosenberg, M. S. (2012). Violence prevention and students with disabilities: Thinking functionally and providing evidence based supports and accommodations. *Behavioral Disorders*, 37(3), 206-209.

This article discusses the type of instruction required for students with disabilities who demonstrate challenging behaviors. These instructions use function-based thinking and are sensitive to the student's behaviors. These strategies must be evidence-based and include supports, adaptations, and accommodations.

Russell, A. (2009). Electronic recordings of investigative child abuse interviews. Center Piece, *National Child Protection Training Center Newsletter*, 1(8).

Interviews of alleged child abuse victims and witnesses are often the primary source of information on possible criminal activities. Therefore, it is critical that investigative interviews conducted with children, especially those with disabilities, are completely and accurately documented to effectively capture the child's statements regarding any abuse allegations, events witnessed or denials of witnessing or experiencing traumatic events. This article will examine the benefits and drawbacks of electronically recording investigative interviews, including case law.

\*Russell, A. (2004). Forensic Interview Room Set-Up. Half A Nation, *State & National Finding Words Courses Newsletter*, Fall, pgs 1-4.

Interviews of alleged child abuse victims and are never easy especially involving children with disabilities. But there are ways that the environment can be prepared to make the interview process more productive. This is an excellent article that provides concrete strategies and ideas for waiting areas, interview rooms, materials and support to children AND interviewers as well. Well worth checking this more informal article out.

Schenkel, L. S., Rothman-Marshall, G., Schlehofer, D. A., Towne, T. L., Burnash, D. L., & Priddy, B. M. (2014). Child maltreatment and trauma exposure among deaf and hard of hearing young adults. *Child Abuse & Neglect*, 38(10), 1581-1589.

This study examined the prevalence rate of childhood maltreatment among college-aged deaf and hard of hearing people. It found that being deaf or hard of hearing was associated with an extremely high risk of child abuse or neglect (76%). Additionally, the risk of abuse or neglect increased as hearing impairment severity increased.

Sinanan, A. N. (2011). Bridging the gap of teacher education about child abuse. *Educational Foundations*, 25(3), 59-73.

The article describes the roles and responsibility that educators and school psychologists have when protecting children from abuse. They are the first line of defense and should be aware of the signs of child abuse for reporting to Child Protective Services (CPS). Training and education of child abuse critical coursework for prospective teachers.

Smith, S. A., & Hudson, R. L. (1995). A quick screening test of competency to stand trial for defendants with mental retardation. *Psychological Reports*, 76, 91-97.

This is an excellent overview article on the general parameters that need to be considered when setting up an appropriate interview room for forensic interviewing. It is especially useful as it also considers issues and concerns PRIOR to the actual interview, including materials and activities in a waiting room along with suggestions for staff and ways to interact. Extremely important points made as one considers issues related to children with disabilities, especially in terms of physical set-up and gifts. Definitely well worth reading and passing along to all members of a multidisciplinary team.

Taylor, J., Stalker, K., & Stewart, A. (2016). Disabled children and the child protection system: A cause for concern. *Child Abuse Review*, 25(1), 60-73.

This Scottish interview-based study explores the various concerns of respondents across authority areas and services working with disabled children who are suspected of having been abused. Of particular interest is the lowered confidence many of the respondents had when working with children with disabilities as well as the tendency to make the assessment and investigation more parent-centered and less child-centered.

\*Tiapula, S. (2005). Learning to read the signs: Prosecution strategies for child abuse cases with deaf victims and witnesses. *Update. American Prosecutors Research Institute*, 18(5).

Provides excellent strategies for investigators, prosecutors, and interviewers working with victims who are deaf or who have a hearing impairment and need to appear in court. The article includes issues that should be addressed during investigation in terms of assessing the victim's communication skills, safety, educating the court, and acknowledging diversity within the deaf community. Although a short article, it is very useful in summarizing the issues.

Tymchuk, A. & Feldman, M. (1991). Parents with mental retardation and their children: Review of research relevant to professional practice. *Canadian Psychology*, 32(3), 486-496.

Although this is an old article, it ongoing concerns around persons with intellectual disabilities also having children. These families are a challenge to social service agencies, and misconceptions about them abound in the professional, legal, and lay communities. Despite a recent increase in research, there is still much to learn about identification of at-risk conditions, effects on the children, valid measures of parenting competencies, and effective interventions. This article advocates for continued efforts to research, develop intervention strategies to avoid possible detrimental effects on children or parents.

U.S. Department of Education. (2006). Teaching children with attention deficit hyperactivity disorder: Instructional strategies and practices. Retrieved from: <http://www2.ed.gov/rschstat/research/pubs/adhd/adhd-teaching2006.pdf>

Provides strategies for teaching individuals with Attention Deficit Hyperactivity Disorder (ADHD). It overviews how to identify these individuals and possible instructional strategies that are effective to use. The article details a three component approach to instructing those with ADHD, i.e. academic instructional strategies, behavioral interventions and classroom accommodations. Although this refers to a classroom situation, same principles could apply in child abuse interviews.

Valenti-Hein, D. C., & Schwartz, M. A. (1993). Witness competency in people with mental retardation: Implications for prosecution of sexual abuse. *Sexuality and Disability*, 11, 287-294.

While outdated, this provides a short and readable overview of the competency issues raised when individuals with mental retardation testify in court. Clearly distinguishes competency from credibility, and includes an excellent discussion concerning the implications for prosecution of abuse despite the year this article was published.

Villodas, M. T., Litrownik, A. J., Thompson, R., Jones, D., Roesch, S. C., Hussey, J. M., & Dubowitz, H. (2015). Developmental transitions in presentations of externalizing problems among boys and girls at risk for child maltreatment. *Development and Psychopathology*, 27(1), 205-219.

This study looks at the risk of developing externalizing problems (i.e. ADHD, oppositional defiant disorder, and conduct disorder) among children with maltreatment allegations. Article found that children with physical abuse, sexual abuse, or neglect allegations were much more likely to exhibit these externalizing problem behaviors. It explores the implication that these problem behaviors can be targeted and treated early in vulnerable groups to reduce further emerging disorders.

Walsh, W., Lippert, T., Cross, T., Maurice, D., & Davison, K. (2008). How long to prosecute child sexual abuse for a community using a children's advocacy center and two comparison communities? *Child Maltreatment*, 13(1), 3-13.

This article explores the length of time between key events in the criminal prosecution of child sexual abuse cases (charging decision, case resolution process, and total case-processing time), which previous research suggests is related to victims' recovery. The sample included cases in three communities served by the Dallas County District Attorney. Total case processing generally took more than 2 years. Implications include the need to better monitor, shorten case resolution time.

\*Warfield, J. L. (2006). Silent voices: Preparing deaf children for court. *Update: American Prosecutors Research Institute*, 19(10).

A concise overview of preparing a deaf child for court procedures and providing the services, such as deaf interpreters, that will serve, assist, and communicate with the child. The article explicitly describes the importance of understanding the child's communication skills and differentiating between the various certifications that interpreters hold. These factors facilitate better communication between the investigators and the child. Good add-on to Tiapula article.

Weber, M. C. (2002). Disability harassment in the public schools. *William and Mary Law Review*, 43(3), 1079-1158. [Excerpt only, 1110-1123, 1155-1158]

Review of disability harassment in public schools written from a legal perspective. Provides an excellent discussion of legal claims and potential remedies for disability harassment under the Individuals with Disabilities Education Act (IDEA), common law, and Constitutional due process and equal protection. Discussion supports the need for school personnel and parents to increasingly work together to create a school environment where harassment is not tolerated, while the judicial system supports such policies with more serious and effective responses to claims. Provides some general background related to the possible social contract of harassment and potential abuse for this particular population of students.

Weiss, J. A., MacMullin, J., Waechter, R., & Wekerle, C. (2011). Child maltreatment, adolescent attachment style, and dating violence: Considerations in youths with borderline-to-mild intellectual disability. *International Journal of Mental Health and Addiction*, 9(5), 555-576.

This article discusses the connection between adolescents who have a past of maltreatment in the form of dating violence and adolescents who form an insecure attachment to their partners. This article considers the connections between adolescents with borderline-to-mild intellectual disabilities and possibility of a higher risk of attachment and dating violence.

Wilczynski, S. M., Connolly, S., Dubard, M., Henderson, A., & McIntosh, D. (2015). Assessment, prevention, and intervention for abuse among individuals with disabilities. *Psychology in the Schools*, 52(1), 9-21.

Many children with disabilities have cognitive and/or communication impairments which can make it difficult to assess their history of abuse. Strategies for both the assessment of suspected abuse, as well as adjustments related to interventions and treatments are also discussed.

Wissink, I. I., van Vugt, E., Moonen, X., Stams, G. J., & Hendriks, J. (2015). Sexual abuse involving children with an intellectual disability (ID): A narrative review. *Research in Developmental Disabilities*, 3620-3635.

This is a literature review examining sexual abuse experienced and perpetrated by children with an intellectual disability. The authors discuss numerous strategies to prevent and intervene in cases where the child is a victim or perpetrator.

\*Young, L. T., Riggs, M., & Robinson, J. L. (2011). Childhood sexual abuse severity reconsidered: A factor structure of CSA characteristics. *Journal of Child Sexual Abuse*, 20(4), 373-395.

This survey was taken from males and females who had a reported history of sexual abuse. This article discovers the correlation between the type and severity of the sexual abuse experience and the factors that lead to humiliation, fear, emotional and psychological issues.

Zand, D. H., Pierce, K. J., Nibras, S., & Maxim, R. (2015). Parental risk for the maltreatment of developmentally delayed/disabled children. *Clinical Pediatrics*, 54(3), 290-292.

This study worked to identify risk factors in parents for maltreatment of their developmentally delayed or disabled children. It was found that parents who had inappropriate expectations of their children's abilities or who were less empathetic toward their children's need were more likely to maltreat them.