Research on Victimization Among People with Disabilities

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Definitions vary

- For purposes of this presentation, disabilities include:
  - A physical, mental, or health impairment that substantially limits one or more major life activities of an individual;
  - A record of such impairment; or
  - Being regarded as having such an impairment.

- Approximately 1 in 5 Americans has some type of disability.*

Types of Disability

Individuals may have one or more of the following types of disabilities:

- **Cognitive disabilities** (e.g., intellectual, developmental, and severe learning disabilities)

- **Physical disabilities** (e.g., amputations, quadriplegia and others conditions requiring wheelchairs or walkers)

- **Sensory disabilities** (e.g., low vision/blind, hard of hearing, Deaf)

- **Psychiatric disabilities** (e.g., bipolar disorder, schizophrenia, and other mental illnesses)

Each has unique victimization risk factors, reporting challenges, and research considerations.
Importance of Research on Victimization Among People with Disabilities

- Their voices are often silenced.
- They may not have channels to report their victimization on their own.*
- Despite suffering and negative outcomes, they may not label what’s happening as victimization.
- They may depend on perpetrators for survival, care, and housing.
- Their rates of victimization are often very high.
- Their access to informed help sources is often very limited.

* (See Child et al., 2011; Oschwald et al., 2011; and Tyiska, 2001 for barriers to reporting crimes against persons with disabilities.)
NCVS Violent Victimization Data

2012 Rates of Violent Victimization per 1,000 People

<table>
<thead>
<tr>
<th></th>
<th>With Disability</th>
<th>Without Disability</th>
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</thead>
<tbody>
<tr>
<td>Women</td>
<td>62</td>
<td>20</td>
</tr>
<tr>
<td>Men</td>
<td>59</td>
<td>25</td>
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Current literature suggests that women with disabilities:

- Experience more severe sexual assaults and
- more types of sexual assaults
- by more perpetrators
- over a longer period of time.

Little research on men with disabilities. Some studies indicate they experience higher levels of sexual assault than among women or men without disabilities.

Victimization may also take non-violent forms, such as controlling access to or breaking the victim’s adaptive or assistive equipment, and withholding medication or food.
Individuals with disabilities may:

- Appear to be easy targets, unable to protect themselves.
- Be taught compliance from an early age.

Many people with disabilities—especially people who have intellectual or cognitive disabilities—are taught to follow the directions of others, usually with the intent of ensuring that they cope effectively with daily life and for their safety. This conditioning, however, may also increase their vulnerability to abuse.

- Be viewed as less credible by authorities and others, and/or experience challenges in communicating and thus be discounted.
Perpetrators of Abuse Against Individuals with Disabilities

Perpetrators often are:

- Individuals the victim relies on for care, housing, and survival, frequently those they are in proximity to on a regular basis, including:
  - Family members / intimate partners;
  - Individuals associated with family members;
  - Other clients, consumers, or patients at providers, in group homes and care settings, and in hospitals;
  - Personal care attendants;
  - Program or hospital staff;
  - Transportation providers.
Factors Contributing to Reluctance to Report Among People with Disabilities

- Concern about not being believed or seen as credible.
- Concern that a ‘disability’ label will be used against them.
- Concern that their disability will be made public or be made a matter of public record.
- Concern about retaliation by caregivers or about losing caregivers/family members.
- Concern that they will be institutionalized.
- Concern that they will be referred to Adult Protective Services.
Considerations When Conducting Research among People with Disabilities

① Sampling Issues
① Instrument Considerations
② Data Collection* / Interview Location
③ Informed Consent & Mandatory Reporting
④ Confidentiality Issues

1. Sampling Issues

- Estimates of the number of people with disabilities in the United States vary widely. Reasons include:
  - Lack of standardized definitions of disability or types of disabilities.
  - Individuals may not identify themselves as having a disability.
- People with disabilities are often hard to reach through traditional random sampling techniques (e.g., phone, mail, door-to-door).
  - Large-scale/epidemiologic studies are difficult (access, subsets).
  - Existing studies often rely on convenience samples (e.g., providers).
- Surveys often do not ask about disability status (e.g., the UCR), or they do ask but combine types of disabilities, conflating responses.

*Standardizing language/definitions, and distinguishing types of disabilities and associated risks, is crucial for future research.*
2. Instrument Considerations

- **Must be accessible and suitable for a diverse range of individual needs, e.g.,**
  - Simplified language and lack of repetition (to reduce confusion, anxiety, and challenges in interpretation).
  - Accommodations/modifications for Deaf participants.
  - Qualified ASL interpreter selection of interpreters:
    - Experienced in working with people with disabilities;
    - Able to accurately translate nuances of content involving trauma.

- **Should capture unique realities/risks/considerations, e.g.,**
  - Include measures of types of abuse *unique* to certain disability types.
  - Be based on an understanding of the potential for victims not to identify behaviors as abuse, and to fear loss of freedoms and family based on answers.
3. Data Collection

- Caution regarding proxy respondents (e.g. family, caregivers) to respond for the participant for phone, in-person, and home visits.
  - Might underreport victimization due to lack of knowledge.
  - Might underreport victimization due to being the perpetrator.
  - Might misunderstand victims’ perceptions, concerns, and experiences.

- Location considerations for in-person interviews include:
  - Accessibility for individuals with a range of disabilities.
  - Waiting areas or nearby activities for family members who might accompany respondents.
  - Consideration of seasonal weather conditions, accessibility of public transportation, costs of transportation, and transportation conditions.
3. Data Collection Considerations (contd)

- Training and Resources for In-person Interviews, including:
  - Pre-training for interviewers in working with persons with disabilities, based on anticipated study respondents.
  - Pre-training for interviewers in identifying and responding to fatigue or other needs that might arise during interviews.
  - Resources available for post-interview counseling or other supports related to victimization for respondents with disabilities.
4. Informed Consent & Mandatory Reporting

- Considerations for Informed Consent Forms
  - Simplified language
  - Elimination of repetitive language (e.g., for translation)
  - Built-in, non-insulting, competency assessment
  - Supportive process to encourage maximum understanding and participation among people with disabilities.

- Considerations Regarding Mandatory Reporting
  - Some states require researchers to file mandatory reports of abuse if violence or risk is disclosed during interviews.
  - Respondents should be made aware of this possibility if applicable, before the interview begins.

(See rainn.org for maps at state level for this requirement)
5. Confidentiality and Methods

- Pre-planning when recruiting for a study *focused* on victimization regarding how to maintain confidentiality, including keeping confidential that the respondent may have had a victimization experience. *(See earlier slide re: perpetrators.)*
  - This would include content in flyers, scripts for calls or emails, and any other materials describing the focus of the study.

- Pre-planning for in-home interviews related to the potential presence of perpetrators or questions and answers being overheard.

- Selection of a ‘neutral’ location for centralized interviewing that is accessible and welcoming, but NOT a location (e.g., provider) where the respondent is known if the study focuses only on respondents who have experienced violence/sexual violence.
5. Confidentiality and Methods (contd)

- Use of interpreters who will not recognize a study respondent (e.g., interpreters from a different city or area) to protect the respondent’s confidentiality.

- Pre-planning for responses to personal assistants and family members who might want to remain with the respondent during the interview. This would include:
  - Methods for how to ascertain whether the respondent would prefer to be interviewed in private, and how to mitigate potential risk if this is communicated to a person accompanying the respondent;
  - Plans for when a personal assistant/care giver’s presence is necessary during the interview and study responses in those circumstances.
Summary

- Individuals with disabilities risks of victimization are high. Yet channels for seeking help are often limited, and reporting the victimization may risk retaliation and loss if perpetrators are families and/or caregivers.

- Research among people with disabilities is challenging and must take into account the unique considerations potential respondents may face in designing the study, sampling, recruiting, and interviewing methods, including issues of accessibility, confidentiality, and consent.

- Research studies on victimization typically do not ask about disabilities or disaggregate types of disabilities if data on disabilities is collected, even when studying victimization, help-seeking, and justice system responses.

- As NIJ expands its research agenda, it is our hope that the Institute will encourage the advancement of research methods and data collection among this population whose experiences so often remain hidden.
Resources:


Resources:


[http://www.bjs.gov/content/pub/pdf/capd0912st.pdf](http://www.bjs.gov/content/pub/pdf/capd0912st.pdf)
Resources:


Resources:


