

What do we know about domestic violence experienced by adults with intellectual disabilities?

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International context

- In 2001 it was estimated that there were 1.2 million people, representing 2% of the population of the UK, with a mild or moderate ID (Department of Health, 2011).
- Intellectual disabilities, previously referred to as learning disabilities include any set of conditions, resulting from genetic, neurological, social, traumatic or other biological or environmental factors occurring prior to birth, at birth or during childhood up to the age of brain maturity, that affect intellectual development (World Health Organisation, WHO, 2000).
- Article 16 of the United Nations Convention on the Rights of Persons with Disabilities (2008) mandates States Parties to “take all appropriate legislative, administrative, social, educational and other measures to protect persons with disabilities, both within and outside the home, from all forms of exploitation, violence and abuse, including their gender-based aspects”.

Intellectual disability and violence

- Emerson and Roulstone (2014) found that individuals with disabilities were significantly more likely than individuals without disabilities to experience any form of violence in a 12-month period, with the likelihood of this experience increasing 2.71 times for individuals with IDs.
- Recent reviews have indicated that the increased risk of individuals with disabilities having experienced violence in the last year is approximately 50% (Hughes et al, 2012).
- Taylor, (2002) completed a review of prevalence rates of aggression in populations of adults with IDs and found rates of aggression of between 11% and 27% in this population

Intellectual disability and partner violence

- ID may be more vulnerable to aggression and violence victimisation due to being more passive, which may then reinforce the aggressors behaviour (Sabornie, 1994).
- Alternatively, individuals with ID may mis-read social cues or misinterpret neutral non-threatening behaviours (Rose, Espelage & Monda-Almaya, 2009).
- Lack of socialisation which enables individuals without disabilities to avoid victimisation, may increase the vulnerability of adults who have ID to violence (Nabuzoka, 2003).
- Some individuals with ID display more aggressive and bullying behaviours as a consequence of social learning, a reaction to prolonged victimisation, or due to a general lack of social skills (Rose Monda-Almaya, & Espelage, 2009).

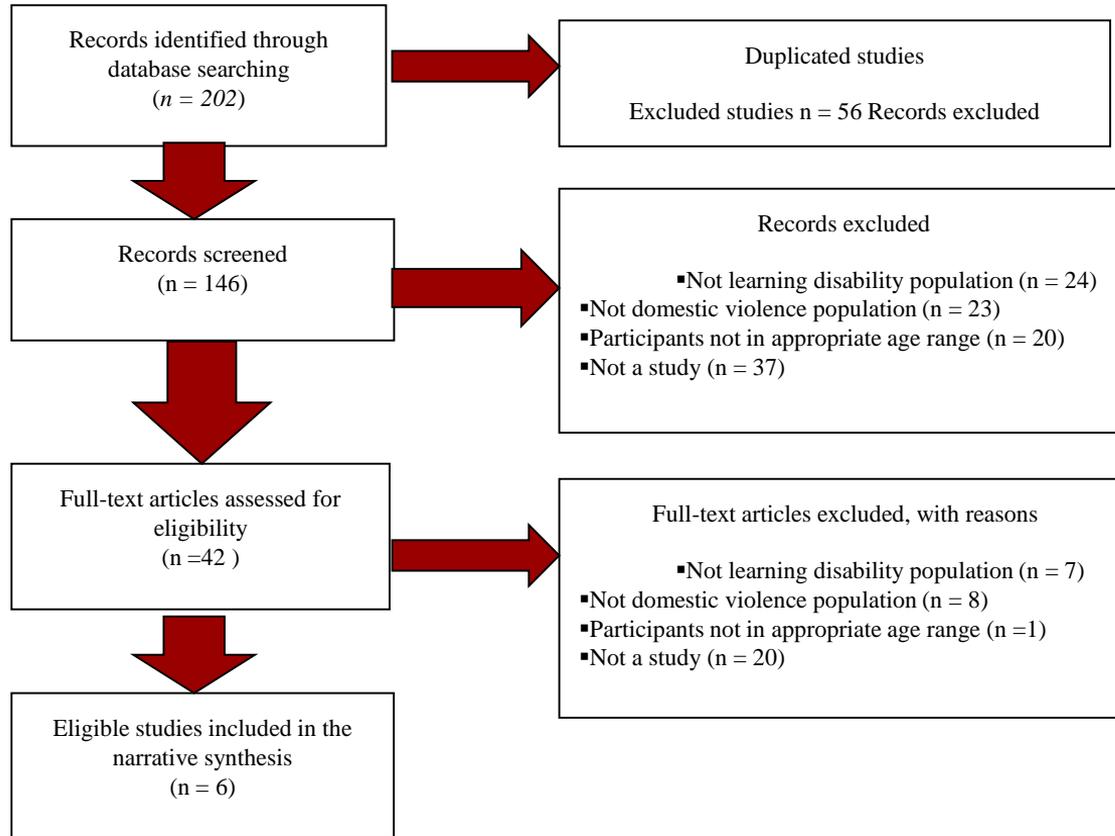
Intellectual disability and partner violence

- Henning, Jones and Holdford (2003)
 - treatment needs of men (n = 2,254) and women (n = 281) arrested for IPV.
 - 36.7% of men and 33.7% of women = 'borderline to mentally deficient' based on estimated IQ scores transformed from scores on the Shipley Institute of Living Scales (SILS).
- Stewart and Powell (2014)
 - risk and criminogenic need characteristics of Canadian federal offenders who were identified as having a history of IPV (n = 4,261) in comparison to those without a history of IPV (n = 4,261).
 - Offenders with a history of IPV were more likely to have a diagnosis of learning disability than those without a history of IPV (18.4% vs. 15.2% respectively).
- Unclear criteria
- No focus on needs of those 'borderline' or with 'learning disability'

Systematic review

- What is known about IPV experienced by adults with ID?
- The systematic review is registered with PROSPERO, registration number: CRD42016052301
- Inclusion criteria:
 - 1) they had to have been published before 2017,
 - 2) they had to have been published in a peer-reviewed journal in English,
 - 3) they had to consist of an original quantitative or qualitative study,
 - 4) they had to have a sample composed of adults (aged 21 or older) with an identified ID.
- In addition, the studies had to have examined either the experience or perpetration of IPV or the characteristics of ID individuals who experienced or perpetrated IPV.

Systematic review

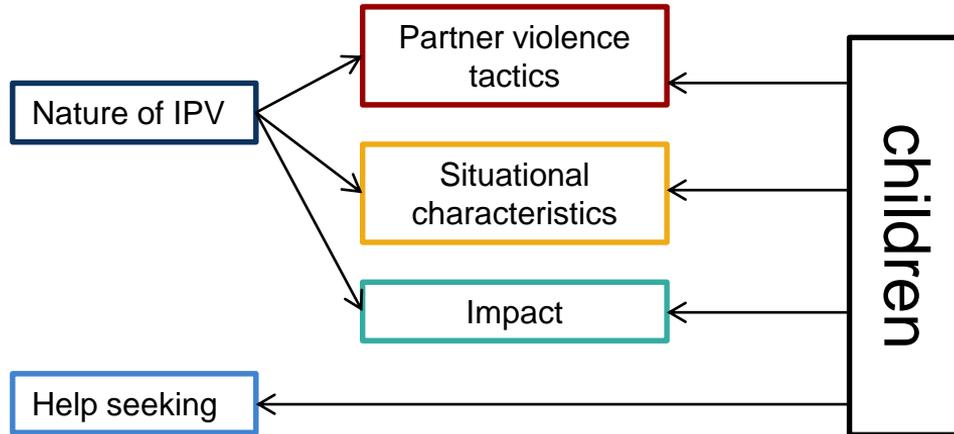


Summary of studies

Study	1	2	3	4	5	6
Sample	47; 22 women	1 male	5 women	21; 19 gay men, 2 lesbian	4 women	15 women
Design	Mixed methods	Qualitative	Qualitative	Qualitative	Qualitative	Qualitative
Method	Survey, interviews	Therapy transcript analysis	Interviews	Interviews	Interviews	Interviews
Focus	Prevalence and nature	Impact of therapy	Nature of experience	Nature of experience	Nature of experience	Nature of experience
ID	Not detailed	Not detailed	Not detailed	Not detailed	Not detailed	not detailed

Findings

- Prevalence?
 - Non-representative; 60% any IPV; 90% men, 79% women emotional IPV. No sig diffs by gender.
- Thematic analysis (Braun & Clarke, 2006)



Nature of IPV

Tactics

he would normally like push me against the wall, grabbed my neck', (female participant study 6);

'She never hurt me but she put a lot of fear in me that she was going to' (male participant, study 1);

'I was depressed, on depression tablets. He [husband] found them, he said I don't think you're taking them, and threw them away' (female participant, study 3);

'because I had learning disabilities and needed support he used to drive that in my face..he used to show me up in front of his mates if I couldn't work something out. He'd say 'you're useless, you can't do nothing"' (female participant).

Situational characteristics

Financial exploitation/strain

I could buy groceries \$40 and he says it's not enough to last us for the winter. But I say, you know, if you help too and he gets mad and upset and he takes it out on me' (female participant, study 1);

Impact

'Everything is still there, the mental abuse, name calling, what he's said in the street, the hospital, when we split up, the night he stabbed me, it not actually the physical abuse sometimes that affects you it's the mental torture' (study 3);

Help seeking

I had what they called postnatal depression. They [social services] said I didn't love the child in the way I should've done. I just needed some help, I never had the chance' (study 3).

'When we ask for help there's no one to help us, they seem to take your children away instead of helping you' (study 6);

The social worker brought me to a safe place where people could look after me and take care of me' (study 6).

Children

Tactics:

H was dragging me and hitting me and my daughter was slapping him saying 'let mummy go'. He turned around and said to her 'shut up, before you get the same' (study 6).

Situation

I was worried about [child], he [partner] said I shouldn't have gone to social services, I got the abuse because I did what was best for my kid'.

Impact:

'Sally would run outside about two houses down and cry in the gutter' (study 5).

Help seeking, or not

I felt terrified but I wanted to stay with him for a while cause he was the children's dad...even though he didn't do anything for the kids' (study 5).

Summary and implications

- Few, poor quality studies, mainly qualitative
- Non-representative samples so prevalence not known
- Unknown if IPVA by adults with ID – experience reported similar to non-ID
- Unknown if help-seeking challenges of victims different due to ID
- No knowledge of perpetrators, risk factors, needs

Summary and implications

- Future research
 - Representative larger samples for prevalence
 - Comparative studies of victims with/without ID to identify variations in experience, and needs
 - Comparative studies of perpetrators with/without ID to identify variations in antecedents, profiles of IPVA and rehabilitation needs
- Future practice
 - Options for rehabilitation
 - Options for specialist support
 - Evidence-informed

Thank you for listening, any questions?

