

## The Issues

Studies have constantly shown that 65-85% of developmentally delayed adults have been sexually abused. Much of this abuse begins in childhood and continues into adulthood.

The overwhelming majority of the abusers are well known to the victim. Common abusers include family members and paid caregivers.

### Why are people with developmental disabilities more at risk?

- *may have a variety of care providers and may be reliant on physical assistance*
- *frequently taught to be compliant to request from caregivers or other authority figures*
- *often isolated or living in institutional/group settings*
- *have not typically received appropriate sexuality education which addresses healthy sexual relationships*
- *may not have been allowed privacy or had the chance to learn about the private areas of the body*
- *may have limited communication skills, therefore making it harder to resist or disclose abuse*
- *often not believed or viewed as credible*

Perpetrators of abuse against a developmentally delayed individual have little fear of consequences because many cases go both undetected and unreported. This increases the likelihood that the abuse will be repeated, many times over a period of months or years.

### Sexually abused persons may demonstrate the following behaviors:

- *seems fearful of a particular person*
- *resists physical exams*
- *having added difficulties in school or social situations*
- *sleep disturbances or nightmares*
- *depression*
- *increased sexual “acting out” behavior*
- *regression to childlike behaviors*
- *new or increased interest in sexual issues*

A major obstacle to detecting sexual abuse in this population is the fact that the common symptoms of sexual abuse are often overlooked and attributed to the victim’s disability. Do not dismiss suspicious events or behavior as being part of the disability.

### Symptoms to look for in a living environment:

- *lack of privacy and dignity for the resident*
- *the expectation of complete compliance as a condition of residence*
- *high client-to-staff ratio, which limits supervision & opportunities for disclosure*
- *staff without a positive attitude towards the residents*
- *institutional settings that cluster potentially sexually aggressive and vulnerable individuals together*
- *loose standards for “therapeutic restraint”*

### How can you help make it safer?

- support the individual in finding activities that he or she enjoys and which can boost self-esteem
- make sure a facility carefully screens staff before employment
- choose a facility that supports regular visits by outside agencies
- be certain that appropriate sexuality education is taught. Do not assume that it’s not necessary even if it makes you uncomfortable
- be available to talk in an unrushed manner on a regular basis
- teach that there are some valid situations for noncompliance
- provide support for positive, healthy relationships with romantic partners.

### Teaching Self-Protection

Any program of defensive strategies for people with developmental disabilities should also acknowledge that they may still not be able to prevent the abuse and the sole responsibility of what happens falls on the perpetrator. Be very careful that it is not implied that if you are abused, you must not have followed the rules.

People with developmental disabilities can learn skills that will reduce their vulnerability to sexual abuse. When introducing personal safety concepts it is important to gauge your presentation to the age, type of disability, and learning the style of the audience. Verbalize your instructions/ideas appropriately. Stick with the concrete, avoid the abstract. Break down complex ideas into smaller, clearer notions. Check frequently to make sure your message is being received as intended.

## **Basic Principles of Self-Protection**

Have a clear understanding of healthy sexual expression. Generally know what is exploitative or harmful. Be aware that sexual contact as a condition of service provision or by service providers is abuse.

Be aware that everyone has a right to some privacy. Your body, personal details about yourself, etc. do not need to be discussed or displayed in a manner that is embarrassing or without dignity.

You have a right to say “NO” to touch that makes you feel uncomfortable. You can say “no” even to someone who you love or someone who provides care for you.

Seek out someone you trust who has the time to listen. Tell this person any time someone is bothering you or if you need help deciding if a situation is okay or not.

Know your personal rights. Nobody has a right to touch you if you do not want him or her to. You have a right to be safe in your home, and safe in the community.

Feel good about yourself. Know that you are special and powerful. You can stop or report someone who tries to make you feel differently.

For more information call the  
Arkansas Coalition Against  
Sexual Assault at:

1-866-63-ACASA

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## **Sexual Abuse of People with Developmental Disabilities**

### **An Educational Guide**

