

A RISK REDUCTION WORKBOOK **for parents and service providers**



**Policies and Practices to Reduce the Risk of Abuse,
Including Sexual Violence, Against People with
Intellectual and Developmental Disabilities**

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(Second Edition)

Preface

IRP – Individual Response Plan or what to do in the event of abuse/crime victimization of individuals with developmental disabilities

In light of the fact that individuals with disabilities are more likely to experience crime victimization than their peers who do not have disabilities, and that statistically, those who have experienced crimes are more likely to be victims of crime again, it is prudent to discuss this frankly with individuals with developmental disabilities and their families, and to make a plan.

In my professional experience, those who have worked together as a family and designed such plans have had a much better outcome following succeeding crime victimizations than those who did not make a plan. In other words, the victim feels much less traumatized because many of the typical symptoms including shame, helplessness, and feeling dirty are absent from post-rape experience. Instead, the individual feels good that they had a plan and executed the plan under such critical circumstances, good that their planning partner (parent, sibling, etc.) also did their part of the plan, and a sense of empowerment seems to overshadow all other post-trauma events.

The perpetrator has a plan, but potential victims tend to walk around without a plan, and get caught off guard. They do not focus on making plans for emergencies. Yet, when crime happens, the attacker has a plan...so should potential victims, which means all of us. It just makes sense.

This book describes the elements of an individualized plan. It is divided into the only three possible time frames that exist for potential victims: before, during, and after.

When you implement this plan, the victim feels empowered by having done all that is possible to do in this situation. Many victims find that what would normally be traumatic and result in feelings of shame, helplessness, and other negative feelings are instead feelings of empowerment, pride in self, and less trauma. They understand that the criminal has done terrible things, but the victim and partner had a plan also, did their plan, and have had the best possible outcome. “My power is AFTER” is the motto for DURING, and “Knowledge is Power” is the motto for AFTER. The key for BEFORE is the understanding that the criminal or perpetrator has a plan, so should you.

This book was designed and developed by Dr. Nora J. Baladerian, licensed psychologist.

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1. INTRODUCTION: Why “Risk Reduction”?

I began working with people with developmental disabilities who were victims of sexual and other types of abuse in the early 1970s. That was only 8 years after C. Henry Kempe, M.D. blew open the secret of physical child abuse with his landmark article titled, “The Battered Child Syndrome.” (C.H. Kempe, Frederick N. Silverman, Brandt F. Steele, William Droegemuller, Henry Silver: “The Battered Child Syndrome,” *Journal of the American Medical Association*.) Child abuse was still a taboo subject, and the public was just barely getting used to acknowledging that children were beaten and physically injured by their parents and other caregivers. Since that time, other issues suffered by children and adults such as sexual assault/rape, emotional and verbal abuse, bullying, neglect, and murder have come into the public’s attention.

Despite the increasing public knowledge of generic child abuse, awareness that these things happen to people with intellectual and developmental disabilities has been slow in coming. It is still a shock to many.

In the wake of societal acknowledgment of child abuse involving generic children, many people came to seek and speak about PREVENTING abuse. Terms were thrown about such as “ZERO TOLERANCE” for abuse...but actions did not match the slogans. Many mandated reporters still do not report even what they have seen with their own eyes. Parents who suspect abuse do not report what they fear to the authorities. Many factors play into this fact, yet it remains a fact that a high percentage of abuse of children and adults is not reported.

I learned that in public health terms, there are three types of prevention: Primary prevention means alerting everyone to a problem, such as was done with flu epidemics. Secondary prevention means targeting those who may be most susceptible to a problem, such as focusing primarily upon elders and children for flu shots, or a better example, in the 1950s focusing on children to administer polio vaccines. Tertiary prevention means addressing the needs of those who have already been impacted by a problem, such as treating HIV-positive newborns or persons who have acquired HIV so the problem does not get worse.

I believe that it is not possible to eradicate abuse from the face of the earth. There are many who proclaim this as their goal...yet 25 years later the problem remains rampant. Every day we read in the paper of another perpetrator who has committed crimes against school children, parishioners, scouts, campers, etc. Although many argue that it is possible to eradicate bad things from our planet, I take a less lofty approach.

My approach is to significantly reduce the *risk of abuse* happening either in one's agency or home, of individuals with whom one has responsibility and regular contact.

Equipping individuals with disabilities with knowledge and skills, and equipping those who are responsible for their well being with the knowledge and skills to recognize and respond when abuse happens is something that is possible and produces results. Further, I believe that when abuse does happen, a quick and effective response will result in a higher rate of arrests, if not convictions – topics which are beyond the scope of this book.

My experience with parents of children and adults with intellectual and developmental disabilities has taught me that the risk reduction plans that I have designed are effective. They are effective in preparing the child and family for this tragedy when it occurs. Such plans lead to faster response by law enforcement and services for victims. Finally, and best of all, an effective Risk Reduction Plan leads to less psychological trauma for the victim and the parents/ loved ones of the victims.

This book will equip you to design effective Individual Response Plans for your family and loved ones with disabilities. My goal is to equip readers with the appropriate knowledge and awareness of abuse among members of this population, including incidence and prevalence; an understanding of who the perpetrators are and how they think; and, activities and skill building that can ameliorate the effects of abuse and accelerate discovery of abuse. The reader will be better able to discern danger signs, build skills directly and indirectly addressing the perpetrator, identifying signs of abuse with their loved one, knowing how to respond to such signs, practice overcoming social inhibitors, and mastering development of “disaster planning.”

I recommend that prior to reading this book you read my first book on this topic, *A Risk Reduction Guidebook on Abuse to Use for Children & Adults with Developmental Disabilities* (1994). The motto throughout that book is “Knowledge is Power.” Then use this workbook to develop, design, and revise your plans as circumstances change, including your child's abilities to communicate.

This book contains some words that you may not be familiar with. Therefore, I created a glossary for some of these words.

In referring to people, regarding those with disabilities, I say “person with a disability.” Instead of saying “person without a disability,” I use the term “generic individual.”