

# Young people with learning disabilities who sexually abuse: understanding, identifying and responding from within generic education and welfare services

**Rachel Fyson, PhD**

Lecturer in Social Work,  
Centre for Social Work, University of Nottingham, Nottingham, NG7 2RD  
Email: [Rachel.Fyson@nottingham.ac.uk](mailto:Rachel.Fyson@nottingham.ac.uk)  
Phone: (0115) 951 5226

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This chapter will start by providing an overview of current knowledge about young people with learning disabilities who sexually abuse. Research cited will, unless otherwise indicated, be limited to UK studies since international variations in the definitions of both learning disability and sexual abuse make the use of a wider literature base problematic – particularly that relating to prevalence and incidence. It will then go on to report key findings from a recent study (Fyson et al, 2003; Fyson, 2005) which examined how special schools and statutory child protection and youth offending services in four English local authorities responded to sexually inappropriate or abusive behaviours exhibited by young people with learning disabilities. It will conclude by highlighting areas of current practice which give cause for concern, and suggest some pointers for future best practice.

For the purposes of this chapter, the term 'learning disability' will be used in accordance with the current UK Government definition:

"Learning disability includes the presence of a significantly reduced ability to understand new or complex information, to learn new skills (*impaired intelligence*), with a reduced ability to cope independently (*impaired social functioning*), which started before adulthood, with a lasting effect on development." (Department of Health, 2001)

## **Current understandings of the association between learning disability & juvenile sexual abuse**

In attempting to explore and explain the phenomena of young people who sexually abuse others, many UK studies have noted the apparent over-representation of young people with learning disabilities. As long ago as 1995 Vizard et al, in their review of the research literature on young people who sexually abuse stated that "learning difficulties and poor school achievement are commonly noted". As evidence for this assertion they cite a study by Epps (1991, cited in Vizard et al, 1995), which found that 44% of referrals to a specialist clinic for young people who sexually abuse others had some degree of learning disability, with half of these having attended a special school.

Other, more recent, UK studies have consistently found that a high proportion of young people who sexually abuse have some degree of learning disability. For example, James and Neil (1996) found that 58.1% of the cases identified in their prevalence survey of juvenile sexual offending were individuals of "below average ability". In the same year, Dolan et al (1996) undertook a retrospective analysis of case study notes on 121 young people referred to an adolescent forensic unit because of their sexually abusive behaviour. They found that:

"Just over half (68, 56.2%) required special schooling. A total of 55 (45%) had learning difficulties with 46 (38%) classified as mildly impaired, 7 (5.8%) moderate and 2 (1.6%) severely impaired" (ibid, p. 344).

In 1998 O'Callaghan, writing about a service for young abusers, commented that:

"While the project has continued to work with young people from across the ability spectrum, young people assessed as having some form of learning disability now constitute approximately half of all referrals to the service." (ibid, p. 437)

Similarly, Manocha and Mezey (1998) analysed the background characteristics of 51 young people referred to a specialist assessment and treatment facility for young sexual abusers and found that:

"There were 17 (33.3%) who were described as poor academic achievers with 10 (19.6%) formally diagnosed as learning disabled (mild 8, moderate 2). Of the subjects 16 (31.4%) had been formally 'statemented'." (ibid, p. 592)

More recently, in 2002, Boswell and Wedge reported, in their evaluation of a residential therapeutic community for sexually abusive adolescent males, that eight out of ten of those who completed the therapeutic programme and participated in their study "had been assessed as having mild, moderate or serious learning difficulties" (ibid, p. 18).

Yet, despite these findings, few researchers have chosen to focus their work directly on young people with learning disabilities who sexually abuse. The limited evidence which is available about this sub-set of abusers tends to be drawn from research based on clinical samples, studies which by their very nature are skewed (O'Callaghan, 1999; Balogh et al, 2001). However, despite their limitations, such studies have identified a number of characteristics which appear to differentiate learning disabled juvenile sexual abusers from those of average or above average ability.

The seminal work – undertaken in Canada – of Gilbey, Wolf and Goldenberg (1989) involved comparisons between learning disabled and non-learning disabled adolescents who had been referred to a specialist psychiatric service. They found that adolescents with a learning disability were no more or less likely than others to have perpetrated sexual assaults, but they were more likely to have engaged in 'nuisance' behaviours, including flashing, public masturbation and voyeurism. It was also noted that the adolescents with a learning disability appeared to be less discriminating in their choice of victim, offending equally against males and females, and in 30% of cases offending against victims of both gender. This finding is in line with findings from studies of men with

learning disabilities who sexually abuse (Thompson & Brown, 1997), and has been interpreted as suggesting that people with learning disabilities who sexually abuse may often do so in a less planned, more impulsive, manner.

In the years since the study by Gilbey et al, a number of further studies have been undertaken in the UK and elsewhere based on clinical samples of young people with learning disabilities who sexually abuse. None of these has contradicted the key findings of Gilbey et al, and several have added further to our understandings. Work published by Tudiver and Griffin in the United States (1992) and Balogh et al in the UK (2001) both confirm the hypothesis that young people with learning disabilities who sexually abuse are less gender specific than other young people with regard to their choice of victim. The findings of Balogh et al (2001) and Firth et al (2001) suggest that there are further gender differences in the patterns of previous victimization experienced by these young people. A number of authors, from both sides of the Atlantic, confirm the tendency of some young people with learning disabilities to abuse on impulse and the fact that they may have poor social skills (Tudiver & Griffin, 1992; Sternac & Sheridan, 1993; O'Callaghan, 1998; Timms & Goreczny, 2002; Hackett, 2004), both of which are characteristics which have elsewhere been associated with an increased risk of sexual offending.

Despite these findings, it remains true that there are more commonalities than differences between young people with and without learning disabilities who sexually abuse. In particular, findings from both the United States and the UK indicate that these two groups of young people are likely to share similar histories of family dysfunction, abuse and neglect (Sternac & Sheridan, 1993; O'Callaghan, 1998; McCurrey et al, 1998).

### **Identification & treatment of young people with learning disabilities who sexually abuse others**

A number of UK studies have provided evidence that young people with learning disabilities who sexually abuse others can benefit from therapeutic interventions (Lindsay et al, 1999; O'Callaghan, 1999; Boswell & Wedge, 2002). However, it remains the case that there are insufficient therapeutic services willing and able to offer support to this group of young people (O'Callaghan, 1998; Vail, 2002; Masson & Hackett, 2003).

In relation to *all* young people who sexual abuse others, Hoghugh (1997) estimated that only 10-15% of cases where adolescents are known to have behaved in a sexually harmful or abusive manner ever become 'cases' in statutory services of any kind, let alone are referred for specialist assessment or treatment. More recently, Hackett (2004) has asserted that:

“One of the key changes in the response to adolescent sexual aggression over the past decade is a rapid increase in the number of young people with learning disabilities being identified and referred for intervention” (ibid, p. 44).

However, care must be taken in determining the reasons for this, which may have little to do with any changes in the behaviour of young people with learning disabilities and much to do with changes in patterns of referral (Balogh et al, 2001).

Reasons for the over-representation of learning disabilities amongst clinical populations of young people who sexually abuse are undoubtedly complex and should certainly not be taken as evidence of any greater propensity for abuse on the part of young people with learning disabilities (Hackett, 2004). Indeed, studies of men with learning disabilities who sexually abuse which have been undertaken in both Australia (Hayes, 1991) and the UK (Thompson & Brown, 1997) demonstrate that these men are no more or less likely than others to engage in acts of sexual abuse.

In addition to the individual characteristic noted earlier, such as impulsivity and social skills deficits, there are a number of wider factors which may impact upon both the (sexual) behaviour of young people with learning disabilities and the likelihood of such behaviour resulting in a referral to specialist services:

- Young people with disabilities, including learning disabilities, are more likely than non-disabled young people to have experienced abuse of all kinds (Kelly, 1992; NSPCC, 2003; Sullivan & Knutson, 1998 & 2000) and disability is also associated with longer durations of abuse (Westcott & Jones, 1999). Whilst there is no direct or linear relationship between experiencing childhood abuse and going on to perpetrate acts of sexual abuse (Freidrich, 1998), high levels of abuse are noted in almost all samples of sexual abusers.
- The sex education available to young people with learning disabilities may be limited and insufficient (O'Callaghan, 1998 & 1999; Hackett, 2004). Even when high quality sex education is provided by schools, the nature of a learning disability may mean that it is difficult for such young people to translate concepts which they have been taught in a classroom situation into their everyday behaviours – particularly in situations where they may be sexually aroused.
- People with learning disabilities have, in the recent past, commonly been regarded by others in society as somehow 'asexual' (Craft, 1987). Some parents and carers may still find it difficult to accept sexual expression as a natural part of the expressive behaviour of a young person with a learning disability (O'Callaghan, 1998). This may lead not only to a denial of the sexuality of young people with learning disabilities, but also to a failure on the part of parents and care givers to socialise young people with learning disabilities in the same way that they would other children, thus making it even harder for this group of young people to learn the unspoken social norms of sexual behaviour.

- Young people with learning disabilities who sexually abuse may be less adept than others at hiding or denying what they have done and, in some cases, less aware that what they have done is socially unacceptable (Timms & Goreczny, 2002). Those with moderate to severe learning disabilities may also be subject to higher levels of supervision than young people of average ability, thus making their acts of abuse disproportionately likely to come to the attention of adults.
- There is a tendency for criminal justice systems in both the UK and elsewhere to favour diverting juvenile sexual abusers, especially those who have a learning disability, away from criminal proceedings and towards alternative clinical services (Gilbey et al, 1989; O'Callaghan, 1999).

To summarize: factors such as those outlined above have led to a number of commentators noting the apparent overlap between populations of young people who sexually abuse and populations of young people with learning disabilities (Vizard, 1995; O'Callaghan, 1998 & 1999; Hackett, 2004), but our understanding of the dynamics of this relationship remain at best sketchy. More importantly, it is not yet clear what the implications of this knowledge are for those who work with young people who sexually abuse, although Masson & Erooga (1999) suggest that:

“Clearly management and treatment of these young people have to be planned in the light of careful assessment of their cognitive and social functioning so that, for example, treatment delivery attends to issues such as shortened attention spans, more experiential styles of learning and the need for careful use of language and repetition of messages.” (ibid, p. 8)

## **The present study**

Although the various studies cited above all reveal facts of interest, they shed very little light – individually or collectively – on why and how the behaviours of some young people with learning disabilities who sexually abuse others come to the attention of statutory social work and/or criminal justice agencies, whilst others do not. They also fail to address the role of non-specialist statutory services in identifying sexually inappropriate behaviours and responding to these in a timely fashion, such that they do not lead on to acts of more serious sexual abuse. Several of the studies cited have demonstrated the efficacy of specialist therapeutic interventions, but it is clear that such services are only ever made available to a small minority of young people with learning disabilities who sexually abuse. The more immediate interventions of professionals who work directly with children and young people with learning disabilities under a wider educational or social welfare remit are therefore likely to be of importance.

The Ann Craft Trust (<http://www.anncrafttrust.org/>) is a national charitable organisation, based in Nottingham, which works to protect people with learning disabilities from abuse through providing training to

professionals, producing publications and undertaking original research. It first became aware of the problem of young people with learning disabilities who sexually abuse others when it's then Director, Pam Cooke, undertook a study of disabled children and abuse. In it, she compared the outcomes for a matched sample of disabled and non-disabled children who were identified by statutory social services as having been abused (Cooke, 2000; Cooke & Standen, 2002). An unexpected finding of this study was that a significant minority of the abused children had been sexually abused by young people with learning disabilities. Further investigation revealed that not only was legal action pending against some of these young people with learning disabilities – in particular those who had offended against non-disabled children – but that all of the young people with learning disabilities who had abused others had previously suffered abuse themselves and *no* action had been taken against any of their abusers. It appeared that, for these young people, their plight as victims of abuse was ignored whilst any perpetration of abuse was liable to be punished. In no cases had these young learning disabled victim-abusers been offered help in the form of therapeutic interventions.

From these findings, it was hypothesised that sexual abuse perpetrated by young people with a learning disability may be one of the many factors which puts children with disabilities at increased overall risk of abuse in comparison to non-disabled children. The Ann Craft Trust therefore wanted to find out more about the phenomenon of young people with learning disabilities who sexually abuse, in order to both explore how statutory services might develop strategies which could offer more supportive interventions to these troubled and troubling young people and to support the Trust's wider aim of helping to protect (disabled) children from potential abuse.

## **Methodological overview**

The research consisted of two separate, but linked, elements – both of which were undertaken simultaneously in four English local authorities. The first element involved a survey of all special schools to determine their experiences of, and responses to, any sexually inappropriate and/or abusive behaviours displayed by pupils. A total of 40 special schools whose intake was wholly or primarily composed of children with learning disabilities were identified within the research areas. Each school was asked to complete a brief questionnaire which asked about the frequency with which they identified sexually inappropriate or abusive behaviour between pupils; the nature of the behaviours noted; the extent to which schools had sought assistance from statutory social services and/or other welfare agencies; and details of school policies which might inform staff responses to incidents arising. Permission was also sought to undertake follow-up interviews with staff in order to gather more in-depth information about school policy and practice in relation to incidents of potential or actual sexual abuse.

At the same time, work was undertaken in conjunction with statutory child protection and youth offending services to identify all cases of young

people with learning disabilities who sexually abused others which came to light over a twelve month period.

Whenever such a case was identified, the author undertook a structured interview with a key worker. By this means information was gathered about the young person's family and educational background; any known history of abuse; details of the abuse which was alleged to have been perpetrated, including information on victims; details of any involvement with the criminal justice system; and evidence of any therapeutic interventions. In all, 15 cases were identified during the twelve months of data collection. The findings from these case studies are presented alongside wider commentaries on issues arising, from the viewpoints of the various professions involved. It is important to note, however, that there were undoubtedly other cases held by statutory child protection and youth offending teams during this period which, due to failures of communication, were not identified for inclusion in this study. The author was personally made aware of three other cases during the research period where it was not possible to identify a key worker willing to be interviewed; other cases also undoubtedly existed which simply never came to light.

The difficulties experienced in identifying all relevant cases highlights the problems inherent in using a prospective survey methodology when working across four large and complex organisations. However, despite the drawbacks, this approach benefited from the fact that the professionals who participated were all currently and actively engaged with the young people concerned. This therefore ensured that a more detailed and holistic understanding of each young person was gathered than would have been possible from an analysis of historical case notes.

### **Key findings: special schools**

Of the 40 special schools initially contacted, 26 returned a completed questionnaire. This gave a response rate of 65%. In addition, staff from ten of the schools agreed to be interviewed about their policies and practices in this area. The individuals interviewed were all either the school's designated child protection co-ordinator (often the head teacher or deputy head teacher) or the member of staff with particular responsibility for sex education.

#### *Prevalence of sexually inappropriate or abusive behaviour*

It was clear that sexually inappropriate behaviour was, to a greater or lesser extent, a problem which arose in most special schools. In total, 88% of schools indicated that they had experienced sexually inappropriate or abusive incidents between pupils, with (cumulatively) 19% reporting that such incidents occurred at least once a week; 46% reporting incidents at least once a month and 65% at least once a term. Only 12% of schools stated that they had never experienced any incidents of sexually inappropriate or abusive behaviour between pupils. This represented 3 individual schools, one of which was at pains to explain that the reason for this seemingly unlikely scenario was that all of their pupils

had profound and multiple handicaps, which precluded them from independently initiating any physical engagement with others.

#### *The nature of the sexual behaviours observed*

The sexually inappropriate and abusive behaviours between pupils which were identified within special schools ranged from the relatively minor to the extremely serious: 54% of schools reported incidents of genital exposure (flashing); 58% reported public masturbation; 88% unwanted sexual touching; and 15% reported that actual or attempted vaginal or anal penetration had occurred. Although the first of these four categories might be dismissed by some as likely to include instances of behaviour which were neither intentionally abusive nor necessarily always harmful, the final category undoubtedly demonstrates that serious acts of sexual abuse can and do occasionally occur – even in the highly structured and well-supervised setting of special schools. The four schools which reported the most serious acts described them in the following ways: ‘anal rape’; ‘vaginal rape’; ‘digital penetration of vagina’; and ‘alleged rape – not proven’.

#### *School policies*

Despite evidence of the extent of sexually inappropriate and/or abusive behaviours between pupils in these schools, only a small minority (19%) had in place specific policies to govern staff responses to, and recording of, such incidents. Interviews revealed that the minority of schools which had policies in place also regularly updated them. However, it was more common to find that schools relied on standard child protection guidance issued by local Area Child Protection Committees, which inevitably focussed on how staff should respond when they suspected that a child was being abused at home, rather than advising how to proceed if a pupil acted in a sexually abusive manner. One interviewee commented that their school’s policies were “generic documents that are suitably bland and not necessarily written for our setting”; another admitted that at their school “a lot of people, if I’m honest, have probably never read it.”

In practice, what typically appeared to happen was that sexually inappropriate or abusive behaviours – particularly those which could be classified as ‘nuisance’ rather than abuse – were dealt with under the broader remit of school behavioural guidelines. This usually meant imposing simple behaviour modification programmes, designed to prevent unwanted behaviours without necessarily exploring any of the underlying reasons why such behaviours might have developed in the first place. Given that so many apparently sexual behaviours amongst this group of young people were described by school staff as lacking in intent such an approach would appear to be both pragmatic and largely effective. However, for more serious acts this approach may run the risk of minimising the impact of abusive behaviours and disregarding early indicators of an emerging problem – a scenario which O’Callaghan (1998) has argued is detrimental to longer term outcomes for young people with learning disabilities who sexually abuse.

#### *Key triggers for intervention*

Despite often lacking relevant policies, interviewees unanimously identified four factors which they said were used to determine whether any given incident was simply a case of inappropriate behaviour or might more properly be viewed as indicative of abuse. These factors were:

1. **The act itself** – unwanted sexual contact of any kind between two pupils was of greater concern than 'nuisance' behaviours such as exposure or public masturbation (although, importantly and depending on their age and other factors, interviewees also noted that in some cases such nuisance behaviours could indicate that a pupil had been the victim of abuse).
2. **Imbalances of power** between the two pupils involved. This included any significant differences in age, physical size and cognitive ability.
3. **Attempts at secrecy** were also thought to be potentially indicative of abuse, since seeking secrecy implied that a pupil knew that what they were doing was wrong.
4. **Repetition** of sexually inappropriate acts was likewise viewed with concern, on the basis that behaviours which could not be ameliorated by behavioural interventions could be either another sign that a pupil might themselves have been abused, or an indicator that the behaviour was in danger of escalating into something more serious.

Taken at face value, these four factors would seem to represent a reasonable approach to assessing the seriousness of any given incident. However, further questioning revealed that putting these principles into practice was neither straightforward nor consistent. Of particular concern was the indication from a majority of interviewees that their schools lacked a consistent approach to the recording of incidents – a situation which immediately made a mockery of the idea that repetition of sexual behaviours would give rise to concern, for there was no obvious way of knowing whether such repetition had occurred.

#### *The involvement of other services*

Where an incident was serious enough to be regarded as being of immediate concern teachers typically informed the school's designated child protection co-ordinator and/or the school nurse. It was stressed that any decision to intervene would be based initially on the school's knowledge of the particular pupil(s) concerned, but if simple behavioural techniques failed to improve the situation then a variety of other strategies might be adopted.

However, schools varied widely in their willingness to engage the support of statutory social services or other relevant social welfare agencies. The reason for this appeared to be that a significant number of schools had previously experienced negative outcomes following requests for help from social services. The survey results indicated that although over half (54%) of special schools had previously sought help from local authority

child protection services because of concerns about sexually inappropriate or abusive behaviour between pupils, in 43% of these cases the schools were dissatisfied with the response they received. No other potential sources of external support received such a high dissatisfaction rate. For example, only one quarter of schools expressed dissatisfaction with the assistance offered by educational psychologists, and this was largely on the basis that there was insufficient availability of such services.

Although almost every interviewee was keen to express their support for hard-pressed social workers, they nevertheless remained frustrated that when issues of sexually inappropriate or abusive behaviour arose between pupils, statutory child protection services typically failed to provide effective input. There were a number of specific issues which were repeatedly brought up, relating to both the organisational structure of children's social services and the lack of knowledge amongst many social workers about disabled children.

On an organisational level, staff in special schools reported that they could largely expect supportive advice if the pupil with a difficulty already had a named social worker. However, despite the fact that – under the Children Act 1989 – *all* disabled children are automatically classified as 'children in need', most disabled children do not in fact have a designated social worker. In light of this, when problems arose schools were frequently obliged to make contact with social services through the 'duty team' system, which meant speaking to someone with no prior knowledge of the child concerned.

Complaints about duty teams took various forms: that they were unable to offer advice, and would act only to initiate a full-blown child protection investigation:

"If you just go cold to somebody quite often it triggers a 'We must investigate it' because they don't know us and they don't know the school."

Or that they were unwilling to get involved in allegations involving children with disabilities:

"I would like social workers to respond as if I wasn't working in a special school, because the minute you say the name of the school then you can hear the silence. [...] It does mean more work, but I'm sorry, that's just the way it is."

Part of the difficulty was presented by another interviewee as stemming from resource constraints:

"In this area at the moment we've just been told they can't do anything other than child protection. So there's no preventative stuff. And sometimes we can see what's going on. We can see that a bit of help in the home – just to explain that perhaps if the boys slept in one room and the girls slept in another – that might help."

Whatever the precise nature of the difficulties experienced by particular schools, communication with social services always worked best when based on individual relationships between teachers and social workers and often fell apart when staff turnover or reduced resources meant relying on accessing support through official channels. Schools were aware that

social workers could not offer a panacea for all ills, but were also aware that social services were the gatekeeper for further resources, in particular some of the more specialist therapeutic services offered by voluntary and independent sector organisations. Schools therefore had an obvious vested interest in maintaining harmonious relations with social services. Despite this, many remained vocal in their criticisms: calling for all social workers to enhance both their awareness of disability and their skills in communicating with young people with learning disabilities.

## **Key findings: case histories**

Over the course of twelve months, case study interviews were undertaken with professionals in respect of fifteen young people with learning disabilities who were identified by child protection and/or youth offending services as having sexually abused others. The findings confirmed some of the outcomes from other studies of young people (with learning disabilities) who sexually abuse, but also highlight a number of issues which have not previously been addressed.

### *Demographic, family and educational backgrounds*

The young people whose histories were captured as case studies ranged in age from 11 to 17 at the time their sexually abusive behaviour came to the attention of statutory child protection or criminal justice agencies. Fourteen of the young people were male and one was female. Thirteen were of white British origin, one was of African-Caribbean origin and one was of dual British and African-Caribbean heritage.

Only four of the fifteen (26%) came from intact family backgrounds. The others lived in variety of family configurations and many had experienced numerous disruptions to their home life; three were in foster care. Two of the young people had mothers whom social services had identified as themselves having a learning disability.

In relation to education, five (33%) of the young people attended (or had attended) a special school for children with learning disabilities. Of the ten who attended mainstream school half (33% of the total) had statements of special educational need and half (the remaining 33%) did not. The fact that one third of the sample had neither attended special school nor been statemented should *not* be regarded as suggestive that they were not learning disabled. The policy of some of the education authorities where this research was undertaken explicitly rejects the idea that statementing is a necessary or helpful process. This has inevitably led to statementing becoming something of a postcode lottery: for example, one of the five young people who had *not* been statemented by his local educational authority was later assessed (at the request of his crown court defence team) and found to have "moderate to severe learning disabilities".

### *Histories of abuse*

In all but two of the fifteen cases the young people were either known to have been neglected; emotionally, physically or sexually abused; to have witnessed domestic violence; or social workers strongly suspected that

abuse had taken place. The category of 'strongly suspected' abuse was not based on the young person's behaviour, but on what social services knew about their family background, for example:

"There has been no disclosure, but in that house - while he was living there - we have got an allegation that birth dad was sexually abusing his sister; mum has been implicated in an assault on a child; this guy who was schedule one was living with mother. [...] I think it is quite possible he was sexually abused by any or all of them and I think it was almost impossible that he wasn't sexually abused, or at least witnessed his sister's abuse."

#### *The abusive acts & victim information*

The acts of sexual abuse which these young people were alleged to have perpetrated were almost always extremely serious. Five individuals were alleged or proven to have committed vaginal rape; two to have committed anal rape and one to have committed oral rape. In several cases the young person had been charged with raping more than one other person: one young man was charged in court with six counts of rape. Two others were alleged to have attempted to rape, with the remainder alleged or proven to have committed a variety of serious sexual assaults including – for example – breast biting and digital penetration.

There were only two cases where the alleged acts of sexual abuse were less immediately serious. In both of these cases the young person concerned was in foster care and had behaved in an inappropriately sexualised manner towards foster siblings.

The victims of these sexual assaults ranged from children as young as five or six through to (in one case) adult women. Most of the young people had abused exclusively female victims; two had abused only males, whilst a further two cases involved male and female victims. There were two cases of sibling incest. In three cases one or more of the victims had a disability of some kind.

In 7 out of 15 cases either the young person's school or a social services child protection team was aware of previous incidents of alleged sexual abuse which had not been acted upon in any formal capacity.

#### *Criminal justice*

The majority of these young people (12 out of 15) had been involved with the criminal justice system as a result of their sexually abusive behaviour. In fact, it was most often the case that social services only became aware of the young person when a victim complained to the police. The only exceptions to this were the young people who were already known to social services because they were the subject of care orders and/or were placed in foster care.

Six of the young people had been convicted on charges ranging from rape to indecent assault, and a further two had avoided court appearances by accepting a final police warning. This meant that over half of these young people (8 out of 15) were registered sex offenders. Interviewees doubted whether any of the young people had much idea what this meant.

### *Social work, youth offending and therapeutic interventions*

The input which each young person received from statutory child protection services and/or youth offending services varied considerably in both structure and content. None of the four local authorities adhered in the strictest sense to current Government guidance, which suggests that the needs of young people who sexually abuse should be assessed and met through children in need procedures (Department of Health et al, 1999). However, the same guidance also says that:

“A young abuser shall be the subject of a child protection conference if he or she is considered personally to be at risk of continuing significant harm.” (ibid, para. 6.37)

Two of the local authorities had chosen to use this proviso to bring *all* such cases forward as child protection procedures, with initial child protection conferences - when necessary - resulting in the young person being registered on their YPSA (Young People who Sexually Abuse) register. This meant that case reviews occurred every six months and the young people continued to benefit from the more substantial level of input and review provided by child protection teams, as compared to children in need teams. In cases where the police had brought charges, this was handled separately - and would result in the additional involvement of the youth offending team.

The two other social service departments had devised rather different procedures, involving all young people who were alleged to have sexually abused appearing before multidisciplinary ‘assessment and early intervention panels’. These panels included representatives from child protection teams, youth offending teams, and the local police. Panels considered all relevant available information before recommending a particular course of action; they sought to divert away from the criminal justice system whenever possible, passing cases on to child protection; children in need or YOT teams as deemed appropriate.

In all authorities the involvement of youth offending services was dependent upon charges being laid. As previously noted, this had the immediate effect of requiring the young person to register as a sex offender. However, it also had an impact upon the nature of the support which the young people could expect to receive. Put simply, support from child protection social workers was individual but largely unstructured; support from youth offending teams could be provided on a one-to-one or group basis, but normally followed a predetermined, carefully structured programme.

Each approach had its advantages and its drawbacks. Child protection social workers expressed concern that:

“It seems that once young people are on the YPSA register it is impossible to get them off. And yet, when they reach eighteen, they come off just like that.”

Whilst some youth offending team workers were concerned that young people with learning disabilities were unable to keep up with the pace of

programmes which had been designed with young abusers of average or above average ability in mind.

However, both sets of workers were acutely aware that what many –if not all – of these young people needed was long-term therapy from professionals specialising in working with young people who sexually abuse. Unfortunately, such services were not readily available. At the time interviews took place only 3 out of the 15 young people were receiving therapeutic support. Of the others, one had been sent to a residential school for children with learning disabilities; two were detained in young offender institutes and nine were receiving no input other than that offered by generic child protection and youth offending services.

Interviewees described a number of barriers to accessing the limited therapeutic services which were available, including funding issues and – worryingly – the reluctance of some services to work with young people with learning disabilities. None of the interviewees were confident that, given the right (or perhaps wrong) circumstances the young person with whom they were working would not sexually abuse again. In 9 out of 15 cases it was thought that the young person would ‘almost certainly’ abuse again. This made the lack of appropriate therapy all the more alarming; as one interviewee put it:

“I think he is a worrying teenager who is going to turn into an incredibly worrying young man. I worry that I am going to see him on *Crimewatch* in a few years time if something isn’t done now.”

#### *Other issues*

Over and above their concerns over the lack of appropriate specialist provision for young people who sexually abuse, interviewees were also acutely aware of the own lack of knowledge and skills in relation to learning disability. In several cases the interviewee had never previously worked with a young person with a learning disability and many expressed uncertainty as to whether their approach was the right one.

## **Discussion**

Perhaps the most immediately striking fact about this study was the almost complete lack of crossover between the young people with learning disabilities who were the focus of each of the two elements of research. In contrast to the difficulties experienced within special schools, which most often constituted ‘nuisance’ behaviours, young people who became ‘cases’ within child protection or youth offending teams had committed far more serious acts of abuse – in most cases constituting sexual offences. However, the preponderance of known histories of earlier, less serious, acts of sexual abuse amongst the individual case histories makes a compelling argument in favour of the proposition that concerns expressed by staff in special schools should be taken more seriously by social services’ duty teams.

In practice, the apparent reluctance of overstretched child protection teams to involve themselves in ‘nuisance’ cases, and perhaps also the

(understandable) reluctance of special schools to identify their pupils as sexual abusers, enabled a small but dangerous minority to progress from nuisance behaviours to serious acts of sexual offending. These young people were typically being failed twice by the system – once when it failed to protect them from abuse and again when it failed to prevent their nuisance behaviours from escalating. The result of this failure was evident in the number of young people known to statutory child protection and youth offending services (8 out of 12) that ended up on the sex offender register. The social consequences (both immediate and long term) of being 'legally' labelled as a sexual abuser in this way are extremely damaging to young people in general (Longo & Calder, 2005) – and arguably even more damaging for those whose life chances are already circumscribed by learning disability.

Frontline professionals from both child protection and youth offending teams were evidently doing their utmost to offer effective support to young people with learning disabilities who had sexually abused. At an organisational level, managers of child protection services had also put time and effort into devising policies and procedures intended to enable their staff to take on these cases. However, there remained a dearth of therapeutic services, or indeed any professionals with specialist knowledge of both learning disability and young people who sexually abuse. Most worryingly, a number of the specialist services which did exist for young people who sexually abused had refused (after an initial assessment period) to work with young people with learning disabilities, on the basis that they were not able to progress fast enough. This might appear unfair, but in fact is probably a case of service providers having to put organisational survival above the needs of any individual – these services were typically funded on the basis of a prescribed minimum throughput of clients and so could not afford to become 'clogged up' with young people with learning disabilities.

## **Conclusion**

The findings from this study highlight a number of issues, some of which may help to explain the apparent over-representation of young people with learning disabilities in clinical samples of young people who sexually abuse. In particular, the lack of confidence expressed by staff from child protection and youth offending teams in working with this group of young people may explain their eagerness to refer on to specialist facilities whenever possible. The fact that low-level or nuisance behaviours are often left to develop into more serious (and, in all likelihood, more intransigent) sexually abusive behaviours may be another reason why specialist interventions become necessary.

It is evident that educational and welfare services could work more closely together, but perhaps unsurprising that such co-operation is only easily forthcoming when based on individual relationships: just as special school staff complained about social services' duty teams, so child protection and youth offending teams complained that these young people were

frequently excluded from schools and – once this happened – it was often extremely difficult to find an alternative educational placement.

Our original hypothesis, that the abuse perpetrated by young people with learning disabilities was one of the factors which contributes to the elevated rates of abuse amongst children with disabilities was given some credence by the research findings. The rates of sexually inappropriate and abusive behaviour reported in special schools demonstrated that many disabled children experience low levels of abuse or harassment from their fellow pupils, and a few fall victim to serious sexual acts. Equally, the fact that three of the individual case studies involved disabled victims – suggests that disabled children may be disproportionately targeted by young people with learning disabilities who sexually abuse. This may be due to the proximity of other children and young people with disabilities to impulsive young people with learning disabilities who are potential abusers, but the arguable lack of intent is of scant consolation to victims.

Better sharing of both information and expertise between education, child protection and youth offending services is required in order to minimise the likelihood that young people with learning disabilities sexually abuse others. Systems need to be developed which both identify, and respond to, problematic sexual behaviours at an early stage. Alongside their continuing battle to minimise the social exclusion experienced by many young people with learning disabilities, educational and welfare services must seek a more effective way of meeting the *specific* needs of young people with learning disabilities who sexually abuse. In doing so, they will need to weigh their reluctance to label nuisance behaviours as sexually abusive against the consequences (for a minority) of later being labelled through the sex offender registration process.

The needs of young people with learning disabilities who sexually abuse are complex, rooted in both their cognitive impairment and their often difficult home circumstances. In responding to these needs, statutory services will need to take into consideration not only the act of sexual abuse that has arisen, but also the circumstances in which it occurred. All professionals need to be fully aware of the way in which these young people are frequently (if not continually) disempowered by their social and cognitive impairments and of how they may struggle to grasp and replicate the intricate rules of social interaction, including those of a sexual nature, which most other people understand implicitly.

It is certain that many (and probable that most) young people with learning disabilities who sexually abuse will never come into contact with specialist services. It is therefore important that, despite the difficulties inherent in identifying and studying non-clinical samples of these young people, research is not limited to clinical and/or therapeutic settings. Generic education, child protection and youth offending workers are in many instances attempting to work with these young people without the benefit of expert training or other forms of guidance. It is true that more specialist services need to be provided, but it is doubtful that such provision will ever meet demand: long-term therapeutic services are expensive to run and, outside of the major cities, population demand for

such provision is unlikely to be deemed cost-effective. It therefore appears to be imperative that information and simple programmes outlining effective intervention strategies are developed for use by non-specialist staff, for it is they who continue to bear the brunt of this heavy caseload.

This research upon which this chapter is based was funded by the *Diana, Princess of Wales Memorial Fund* and was undertaken by the author whilst she was working as Research Fellow for the Ann Craft Trust.

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