

Abuse, neglect and exploitation - Factsheet

Risk of Harm

People with a disability, particularly those with highest needs are at greater risk of abuse, neglect and exploitation than the general population.

The abuse of people with disability is often more severe, maintained over a longer period, and more likely to involve multiple perpetrators, than the abuse of a person without a disability. For example, in Australia people with an intellectual disability are four times more likely to experience sexual assault; twice as likely to be the victim of a personal crime such as physical assault; one and a half times more likely to be the victim of property offence such as theft.

Understanding abuse neglect and exploitation

Abuse, neglect and exploitation are all concerned with harm, which may be intentional or unintentional, severe and sudden, or insidious and widespread.

It is important to use clear and consistent language when talking about abuse, neglect and exploitation. Accurate descriptions help people to recognise abuse, prevent harm from being trivialised and demonstrate the importance of people taking appropriate action when responding to abuse. For example, crimes such as assault or rape should be named as such and not described by the terms such as “inappropriate behaviour”.

The following provides definitions of different types of abuse, neglect and exploitation:

Abuse is the violation of a person’s human or civil rights, through and act or actions of commission or omission, by another person or persons.

Abuse includes, but is not limited to:

- Physical abuse - any non-accidental physical injury including inflicting pain of any sort causing bruises, fractures, burns electric shock or unpleasant sensation (e.g. taste, heat, cold), as well as restrictive practices that are not authorised.
- Sexual abuses - any sexual contact between and adult and a child or with an adult who is unable to understand, has not given consent, or is threatened, coerced or forced to engage in sexual acts, including intercourse, genital manipulation, masturbation, voyeurism, sexual harassment, and inappropriate exposure to pornographic media.
- Psychological or emotional abuse - verbal assaults, threats of maltreatment, harassment, humiliation, intimidation, failure to interact with a person or to acknowledge the person's presence. This may include denial of cultural or religious needs and preferences.

- Restrictive practices – Unauthorised containment, seclusion or restraint, including the use of chemical restraint, mechanical or physical restraint.
- Chemical abuse – misuse of medications and prescriptions, including the withholding of a person's resources.
- Legal or civil abuse – denial of access to everyday justice or legal systems, including informal or formal advocacy support requested by a person with a disability or his/her decision maker.
- Systemic abuse – structure processes and practices within a service system that contribute to or result in abuse or allow abuse to continue to occur.

Abuses that are considered as **criminal acts** include:

- Assault
- Rape
- Sexual assault
- Indecent assault
- Sexual offences such as indecent exposure
- Harassment
- Discrimination
- Deprivation of liberty
- Theft
- Sexual vilification and harassment
- Racial vilification
- Stealing
- Administration of a stupefying drug in order to commit an offence

Neglect is the failure to provide the necessary care, aid or guidance to dependent adults by those responsible for their care.

Neglect includes, but is not limited to:

- **Physical neglect** – failure to provide adequate food, shelter, clothing, protection, supervision and medical and dental care, or to place someone at undue risk through unsafe environments or practices.
- **Passive neglect** – a caregiver's failure to provide the necessities of life including but not limited to food, clothing, shelter or medical care.
- **Wilful deprivation** – wilfully denying medication, medical care, shelter, food, therapeutic devices or other physical assistance, thereby exposing that person to risk of physical, mental or emotional harm.
- **Emotional neglect** – failure to provide the care or stimulation needed for the social, intellectual and emotional growth or wellbeing of an adult or child.
- **Crimes or omission** – the failure to act upon a legal duty or responsibility.

Neglects that are considered as criminal acts include:

- Negligence
- Failure to provide the necessities of life

Exploitation is taking advantage of the vulnerability of a person and using them or their resources for profit or advantage (e.g. financial abuse).

Recognising abuse, neglect and exploitation

Abuse, neglect and exploitation can take many forms. Being aware of common indicators may improve recognition of and response to them. Although no single behaviour is an absolute indicator of abuse, neglect or exploitation, some examples may include:

Physical abuse:

- Unexplained injuries such as bruises, burns or swellings
- Injury for which the explanation does not fit the evidence
- Delay or reluctance in seeking medical treatment

Psychological or emotional abuses:

- Fear and withdrawal
- Low self-esteem
- Extreme passivity

Financial abuse or exploitation:

- Unexplained discrepancy between known income and standard of living
- Possessions disappearing
- Unusual bank account transactions by a third party

Sexual abuse:

- Genital pain, bleeding, itching, swelling, infection or discharge
- Unusual or inappropriate expression of affection
- New or unusual interest or knowledge of sexual matters
- Feeling angry, overwhelmed, numb, withdrawn or detached crying for no apparent reason

Chemical abuse:

- Reduced mental or physical activity
- Depression
- Reduced or absent therapeutic response

Neglect:

- Malnutrition
- Missing disability aids (e.g. communication device)

- Unkempt appearance- dirty or inappropriate clothing
- Untreated medical problems

Self-harm:

- Self-injurious behaviours can sometimes indicate other abuses in a person's life

Generic:

- Onset/escalation of challenging behaviour
- Mood swings or emotional outburst
- Expresses desire to die, loss of faith, attempts suicide
- Difficulties with concentration
- Regression in behaviour (e.g. bedwetting, thumb-sucking)
- Fear of being alone or with a particular person
- Fear of being touched or shying away from being touched
- Alcohol or substance abuse
- Eating disorders, dehydration, malnutrition or a sudden increase or decrease in appetite
- Poor hygiene
- Nightmare, restlessness or difficulty in sleeping.

Preventing abuse, neglect and exploitation

The prevention of abuse, neglect and exploitation of people with a disability requires a three-tiered approach that promotes positive cultures, safe environments and relationships based on mutual respect.

Primary prevention that targets the broad community is over the long term, the most effective strategies for preventing abuse as it promotes positive roles and enhances valued status for people with a disability throughout the community that includes the general public, families, workplaces, community networks and people with a disability who may or may not be using support services. This also includes raising awareness of the problem among the community members particularly those who have experienced abuse to seek assistance. Increased awareness also helps to create a sense of community responsibility.

What can you do?

- Promote positive attitudes toward disability-share positive stories of people with disability that you know, highlight their achievements.
- Do not tolerate abuse, neglect and exploitation. Let the people know that you care, and if you or someone you know is at risk, take appropriate action.

Secondary prevention targets people with a disability and strategies include:

- Providing effective support to both carers and people with a disability in families that can build resilience to stress and reduce risk of abuse
- Creating safer services to ensure that people with disability enjoy high quality services
- Building an individual's confidence and knowledge to help them understand their right to safety and to develop self-protective behaviour.

What can you do?

- Do you engage with disability support service? Provide feedback on the safety of others. Tell someone if you think that more could be done to reduce risk and enhance safety.
- Do you know someone at risk? Do they know their rights? Help them understand their right to safety and to develop self-protective behaviour.

Tertiary prevention targets known incidents of abuse that includes provision of support to victims of abuse including recovery support and links to the criminal justice system where appropriate.

Abuse is more likely to be reported if there are mechanisms in place for responding to the situation. These include:

- A clear commitment to treating all reports seriously and undertaking appropriate investigation.
- Mechanism to protect the safety of victims and whistle blowers
- Collaboration with other relevant agencies across sectors, including victim support services and criminal justice responses
- Mandatory training in abuse recognition, reporting and response, covered as part of staff induction and completed before client contact.

Responding to abuse, neglect and exploitation

Motiv8d Minds require in accordance with our Protection of Legal and Human Rights and Freedom from Abuse and Neglect Policy (as part of our Policy Manual) that response to any abuse, neglect and exploitation be reported directly to management for action and the steps outlined in that policy followed.