

SAFETY ISSUES IN THE LIVES OF CHILDREN WITH LEARNING DISABILITIES

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Abstract

Quantitative and qualitative data were collected from 116 special education students aged 11–17 years (61 females and 55 males) who had been identified as 3 or more years behind their peers in all aspects of the curriculum. The study confirmed the vulnerability of children with learning disabilities to the risks of drugs, violence, psychological bullying, pornography and sexual abuse. Significant levels of violence were found in both schools and homes. The study also showed the need for special attention for the protection of boys. It is possible that children with learning disabilities were targeted because they were less likely than others to (a) recognise abuse as wrong, (b) understand their rights and report abuse, and (c) be regarded as competent witnesses for court proceedings. On the other hand, it is possible that they were learning-disabled as a result of abuse. The findings suggested that children with learning disabilities require more vigilant and more intensive, explicit forms of protection than other children.

INTRODUCTION

The particular vulnerability of children with disabilities to all forms of abuse was brought to public notice in the 1980s. American and Canadian studies suggested that these children are up to seven times more likely to be sexually abused than their non-disabled peers (Senn 1988, Kennedy 1989, Mouny and Fetterman 1989, Sullivan et al. 1987).

The literature suggests that children with disabilities are at highest risk of all forms of abuse because they are devalued by society in general (Sobsey 1994). They were found to be the least well informed about their rights, their sexuality and the limits of acceptable social behaviour (Sobsey 1994, Senn 1988). They are inadequately protected by the justice system and child welfare agencies and lack self-esteem and the confidence to complain (Sobsey 1994, Briggs 1995). Furthermore, there is a high risk that abuse will

1 Acknowledgements

The research was conducted with Associate Professor Russell M.F. Hawkins, National Institute of Education, Nanyang Technological University, Singapore, for New Zealand Police.

continue into adulthood (Sobsey 1994). Research by Kennedy (1990) showed that the victimisation of children with disabilities compounds the low self-esteem, emotional problems, sense of helplessness, frustration, anger, depression, fearfulness and withdrawal associated with their disabilities.

In the 1980s, many countries introduced child protection curricula following the initiatives of some Canadian and American education departments. Victoria Police and South Australian education authorities adopted the Wisconsin Protective Behaviours programme in May 1985. Michelle Elliott's *Kidscape* was made available in the United Kingdom in 1986 offering "good sense defence" for 5–11-year-olds to counter bullying and dangerous strangers. Canadian academics, teachers and parents had already created the CARE Kit, which was independently evaluated with young children.

New Zealand Police and the Ministry of Education rightly rejected "packaged" overseas programmes and worked together to produce a developmentally and culturally appropriate curriculum, *Keeping Ourselves Safe*, which now caters for all ages from kindergarten to school-leaving. It also incorporates parent information and opportunities for their participation, videos and other teaching resources covering all aspects of safety. This national school-based curriculum is delivered by teachers. They are supported by health coordinators and 138 specialist trained police education officers who provide several safety programmes for schools.

Briggs and Hawkins (1996b) evaluated the curriculum with 252 intermediate school children aged 11 and 12 years and their parents in both North and South Islands. Children identified as having severe learning problems were at greatest risk of all forms of abuse and exposure to illegal drugs, pornography (63% versus 24% of others), drug abuse (50% versus 12%) and sexual abuse (81% versus 4%). Eighty-one per cent of girls in special education groups for learning disabilities had previously reported substantiated sexual offences committed by from two to 10 offenders before the age of 11. In all cases, students had been shown pornography to stimulate their curiosity, desensitise them and normalise deviant sex. Disclosures were made following their participation in *Keeping Ourselves Safe*.

Although the school programme has parent participation built into it, children with learning disabilities were the ones least likely to have had any conversations with parents about personal safety issues (44% versus 82% of others). Clearly, it is more difficult for staff to communicate effectively with parents if children travel by school bus. Communications are even harder to achieve if parents also have learning disabilities and are illiterate. Most abuse was committed by mothers' boyfriends, siblings and uncles. Only one student in this group was sexually abused by her biological father. The low rate of father–daughter incest could possibly be explained by the fact that most students in this group had little or no contact with their fathers.

The researchers were concerned about the safety of boys, many of whom stated that child protection programmes were irrelevant to them because only girls and homosexuals are sexually abused. A previous study of safety issues for New Zealand secondary students (Briggs and Hawkins 2001) supported these concerns and also showed that boys would be afraid to disclose abuse by males because of confusion about their sexuality, embarrassment and the fear of (a) being disbelieved; (b) violent retribution and (c) being labelled as gay and bullied by peers.

Because of the finding that girls with learning disabilities were so highly vulnerable to drug and sexual abuse and violence, the present study was extended in 2003/2004 to examine more closely safety issues affecting children with learning disabilities (both boys and girls).

METHOD

One hundred and sixteen subjects (all the available students) were interviewed individually in special education centres using the 1996 questionnaire designed for intermediate school children. Issues for boys (N = 55) were then compared with issues for girls (N = 61).

The period of time that subjects had spent in special education ranged from five weeks to two years. Before that, all subjects previously attended mainstream schools in both the North and South Islands of New Zealand. A few older respondents continued to attend the local mainstream school in a part-time capacity. All participants had an individually designed curriculum to cater for the fact that they were at least three years behind their chronological age group in all areas. Some were diagnosed as having ADD or ADHD, one with Down Syndrome, and one was brain damaged as a result of physical abuse in infancy. Some had minor intellectual disabilities. The ages of respondents ranged from 11 to 17 years (mean age = 13.8, SD = 1.3). There were slightly more girls (61, or 53%) than boys (55, or 47%). Almost half the respondents were of European descent (51%), with 24% Māori and 23% Māori/mixed race.

RESULTS

Students' Views on Who Should Teach Personal Safety Skills

Nearly all of the students (96%) said that personal safety skills should be taught in schools to help children to stay safe from the risk of sexual abuse. Police Education Officers were chosen as the best people to conduct this teaching.

Table 1 Professionals Regarded as the Most Suitable for Teaching Personal Safety Skills

Type of Person	N	%*
Police Education Officer	72	66
Class teacher	25	23
Parents	14	13
School counsellor	11	10
School nurse	5	5
Health coordinator	2	2

*Percentages add to more than 100 as some respondents nominated more than one choice.

The popularity of Police Education Officers was attributed to their knowledge of the world of adolescents, their experience of abuse and abusers, and the belief that they can be trusted with confidential information. Some students explained that teachers were remote from the world of adolescents and could not be trusted to maintain confidentiality.

Violence at School

Students were asked to assess and compare the levels of violence experienced in special education units versus mainstream schools. Although some had anger management problems requiring medication, children with learning disabilities said they experienced more violence in mainstream schools (47%) than in separate single-sex special education centres (34%). There were no sex differences on this variable.

Violence at Home

One-quarter of respondents thought there was a lot of violence in their own homes. Males (male carers or brothers) were reported as being the most frequent users of physical violence against children with learning problems in the family home.

Table 3 Ratings of Violence Level at Home

Violence Level At Home	N	%
A lot of violence	29	25
Not much violence	41	35
No violence	46	40

Table 4 Frequency of Particular People Hitting Children in the Home

People Identified as Hitting	N	%
Male carer	47	41
Mother	34	29
Brothers	17	15

Why Children Were Hit at Home

Children gave various reasons for why they were hit at home. There were no consistent sex differences in the pattern revealed. These children with special needs were shown to be very vulnerable to the aggression of irritable adults and siblings. When students were asked what they might have done to deserve being hit, their responses included the following:

"I do nothing to get bashed. It's because they are in a shitty mood and take it out of me. I've run away for a few days. My parents don't really care."

"I don't have to do anything except be there when they're in a bad mood."

"He just feels like it and loses it but only with me. I don't have to do anything."

"Dad does it for the hell of it. He's an angry man and takes it out on us."

Some children admitted being punished for serious misdemeanors:

"I get belted because I smoke and sell weed."

"I get belted for pulling pranks such as toothpasting pillows ... breaking into next door and flooding their bathroom; setting off car alarms to piss off shopkeepers."

"I did stupid stuff – set fire deliberately to houses."

Others referred to being punished for "answering back", "being smart", swearing at parents and teasing siblings.

Bullying at School

Although bullying was considered to be a big problem for many children with learning disabilities in special education (38%), it was more frequently perceived to be a problem when they attended a mainstream school (56%).

Name-calling and teasing were most frequently identified by girls (60%) and boys (57%) as the most distressing form of bullying. Spreading false, unpleasant, sex-related rumours (such as “She’s got AIDS”, “She’s a lesbian”, “She’s a prostitute”, “She’s promiscuous”) and insults relating to body appearance (fat, ugly) were twice as prevalent among girls (13%) than boys (6%), who were usually referred to as “poofter” or homosexual to create distress.

Drug Abuse

Boys were significantly more likely to have been offered various major types of drugs than girls.

Table 7 Drugs Types Offered to Students by Sex

Drug	Female		Male		Total		Chi Square Result
	N	%	N	%	N	%	
Alcohol	16	26%	31	57%	47	41%	$x^2 = 11.52, df = 1, p = .001$
Cigarettes	16	26%	27	50%	43	37%	$x^2 = 6.91, df = 1, p = .009$
Marijuana	15	25%	26	48%	41	36%	$x^2 = 6.92, df = 1, p = .008$
Heroin	3	5%	12	22%	15	13%	$x^2 = 7.56, df = 1, p = .006$
Speed	5	8%	9	17%	14	12%	NS
Cocaine	0	0%	7	13%	7	6%	$x^2 = 8.42, df = 1, p = .004$

Table 8 shows reported drug use patterns (drug use may be understated given students’ awareness that drug trafficking is illegal).

Table 8 Drugs Used

Drug	N	%
Alcohol	67	58%
Marijuana	40	35%
Vivid markers	32	28%
Petrol	32	28%
Other people’s asthma medication	19	16%
Amphetamines	17	15%
Ecstasy or Fantasy	11	10%
None	16	14%

Exposure to Pornography

Almost two-thirds of the students (63%) reported having seen hardcore pornography. Magazines and videos were the most frequent source of such material

The Risk of Abduction by Strangers

Twenty cases (or 17%) reported that a stranger had tried (unsuccessfully) to persuade them to accompany them. There was no significant difference in the frequency with which this had happened to boys and to girls. The common theme for both girls and boys was an attempt by a male stranger to get the children into their car.

The Risk of Child Sexual Abuse

While school counsellors indicated that 44% of girls were victims of (substantiated) sexual abuse, only 32% of female respondents disclosed these offences to researchers. Offences against girls included oral and vaginal rape by stepfathers, older brothers, mothers' boyfriends, an uncle and a girlfriend's adult brother. For boys, cases included sexual intercourse with older females, masturbation by a babysitter (older female) and being required to provide oral and anal sex for males.

It is important to note that sexual abuse was equally common for boys and girls. Older youths were responsible for sex offences in a little over half of the cases (54%) and the other people identified included stepfathers (four cases) mothers' boyfriends (three cases) and family friends (six cases).

Two boys and one girl referred to sex with "boy friends" or "girl friends" aged from 21–33 years. It appeared that parents and caseworkers were aware of this and that it is against the law, suggesting that different standards exist for children with learning disabilities.

The risks to girls with learning disabilities are illustrated in the following statements. Most reports involved father figures:

"My stepfather used to rape me when I was 11. He told me to keep it secret so I did. Mum caught him redhanded. She reported him to police and kicked him out."

"The rape was reported. He lied and denied it, went to court and got off."

"Mum's boyfriend. I reported it to school staff. He went to court."

"My mum told me I was only five when it happened. She told me about it because he was being released from jail."

"I can hardly remember it. He threatened to hurt Mum if I told."

"I reported Mum's boyfriend for raping me and he went to court. Mum supported and absconded with him leaving me in foster care. I haven't seen them for five years."

Some girls reported being raped by older brothers. Other relatives and family friends were also mentioned. Older youths allegedly raped or had what female victims described as "consensual sex":

"It was my friend who persuaded me. Seven boys watched. She asked me to let her adult brother have sex with me. I did it to please my friend. My Mum would have a fit. You won't tell her, will you?"

"I was 15. An older boy asked me out. He wanted sex and when I said 'No' he took no notice and did it. He raped me several times before I ditched him."

Only two boys reported rape. Boys were comfortable discussing offences involving "wanking", a term that is used in their everyday language. Boys typically did not report this type of offence.

"Wanking is a private thing. I didn't tell because they'd get into trouble and get at me for telling."

"Older boys in this school told me to go into the toilet yesterday at PE time and help them with wanking."

Twenty-two per cent of respondents reported that "kids at school" had used force or tricks to involve them in underage sex. This was equally likely to happen to boys and girls.

The Reporting of Sexual Abuse

In 23 cases (62% of abuse cases), the child reported abuse to a trusted adult. Girls were significantly more likely than boys to report sexual abuse. Most girls disclosed abuse to their mothers and/or police. Some mothers ignored reports or defended the perpetrators. Six girls and no boys were involved in prosecutions. There were also several comments that "nothing happened" following a report being made to police.

Two students (a boy and a girl) could not participate in the study because they had just reported intra-familial abuse and were being counselled. Two boys and one girl reported abuse during the research (the two reports from boys to a principal were the result of reports to the interviewer).

Students found it difficult to report sexual misbehaviour involving older youths. The most common reasons given for not reporting were the fear of violent retribution, embarrassment and being disbelieved. One boy who did not report said that he had been threatened that he would be killed if he "told". One girl said she would be in trouble if she told her parents. Male students also found it difficult to report abuse because of the stigma relating to (implied) homosexuality. No cases involving older youths were said to have gone to court.

Understanding Their Rights in Relation to Sexual Abuse

Students exhibited some confusion about rights and responsibilities in relation to sexual behaviour; 7% thought it was "OK" for adults to use children for sex and 10% were unsure. Although 79% said that it was not acceptable, some qualified this by suggesting that it could be acceptable if victims were of certain ages (none of the ages falling within legal limits). Those who had completed a personal safety/child protection programme were more likely (55.2%) than others (12.1%) to know that adults are not allowed to "do sex things to kids".

Fifty-eight per cent of girls and no boys provided mature responses referring to the damage that sexual abuse can cause: "It might spoil children's lives when they are older"; "it affects them forever"; "it scars them"; "it damages you forever" – suggesting that these issues had been discussed in school. Some girls referred to unfairness in adults' abuse of power and one noted that adults should protect children, not abuse them. Thirteen per cent of girls and no boys explained that sexual abuse can be psychologically damaging.

Several girls and no boys said that offenders should be reported to (a) get treatment and (b) stop them from hurting other children. An additional factor mentioned was that "victims might think it's OK to do that and then they would do it to other kids". Many boys (20%) could offer no explanation for why sexual abuse by adults is reportable or inappropriate; 20% said, "it's disgusting". Only two revealed an understanding of the abuse of power.

Views on the Rights of Boys to Force Girls to Have Sex

There was also some confusion as to whether boys should force girls to have sex. A majority (72%) of respondents did not approve of force, 15% were unsure and the remainder (13%) thought it was "OK". Boys were more likely than girls to see forced sex as acceptable.

There was also confusion about whether a relationship gave boys the right to force girls to engage in sexual activity against their wishes. Some girls who thought that such behaviour was appropriate qualified their statements by restricting it to girls aged over 14 years. Although taught about contraception in sex education, only two girls (and no boys) associated unprotected sex with pregnancy and only one boy mentioned AIDS. Some girls had been taught that they have choices and can say "No". However girls did not underestimate the difficulties of saying "No" to boys, some referring to the threats that males use to break down their resistance. Even when boys said that it was not appropriate for boys to force girls to have sex, they often added "unless it's your girlfriend".

Knowing What to Do in the Event of Inappropriate Sexual Behaviour

Twenty-two per cent of boys and 8% of girls did not know what to do if an older person tried or forced them to engage in sexual misbehaviour. Twenty-nine per cent of boys would try to escape but they would tell no one for fear of revenge.

The girls who lacked safety knowledge had not completed Keeping Ourselves Safe. Overall, one-third of girls said they would try to escape from sex offenders but they did not mention reporting them. Eleven per cent of girls said they would use physical violence as demonstrated in a Kidpower self-defence programme recently undertaken (e.g. kick in the genital area and scratch the eyes), but only if the offenders were strangers.

Of the boys, 13% provided violent responses to all questions relating to safety strategies. Regardless of age, height and build, and with no training in self-defence, they proclaimed that, whatever the circumstances, they would stab or "bash" the predator. None would report the incident to the police; one said, "It would be a waste of time. Cops wouldn't believe a Māori kid in our town". The message that came through loudly and clearly from both boys and girls was that it would depend on who the offender was as to whether it would be reported. Most said they would only report strangers because there would be less risk of retaliation. In real-life situations, none of the boys had defended themselves or responded violently to sex offenders.

In the event of inappropriate sexual behaviour by peers or older "kids", girls commonly said they would escape and 5% suggested using karate and stabbing. Interestingly, only 25% of girls who had completed the Kidpower programme said they would use it on youths, and only 16% suggested sensible strategies as taught in school programmes; 21% suggested making reports and 8% might involve police.

Twenty-seven per cent of boys said they did not know what to do if sexually abused by youths. It became clear that the majority accepted sexual misbehaviour as the norm and did not think it worth reporting.

What Parents Taught Children to Keep Them Safe

About half of the respondents (59 cases or 51%) reported that their mother or father or adult looking after them had given them information about keeping safe from sexual abuse. When girls were asked what the messages were, the only safety advice received was to avoid strangers. This advice typically came from mothers.

Occasionally mothers gave girls vague hints such as not to tolerate touch that “makes you feel funny”, including “no hugs or stuff I don’t want”. Girls were warned about pregnancy risks (a very small number mentioned being advised about condoms). However, none of the girls had been warned about potential harm closer to home (e.g. from family friends, neighbours or family members). Mothers were most likely to say, “Don’t do it” without necessarily explaining what “it” meant. Mothers aimed to maintain their daughters’ virginity by alarming them with, “Stay away from boys or you might get pregnant”.

Fifty-one per cent of boys could not recall being given any information from caregivers about staying safe from sexual predators; 34.5% were told to stay away from strangers.

More boys than girls received advice from their fathers. The emphasis of advice pertained to risks of kidnapping by strangers. There was no evidence of more specific advice about other risks, even when these children had already been sexually abused.

Basic Safety Knowledge

To test their basic safety knowledge, respondents were asked what would be the safest thing to do in a variety of potentially unsafe situations. Responses indicated a need for a greater emphasis on safety in general.

If molested by someone on a bus, 75% of girls and 63% of boys would change seats, but only a third of girls and 17% of boys would report the problem to the bus driver or anyone else. Boys (17%) were more likely than girls (0%) to suggest using an aggressive response (e.g. hitting) if a man behaved in this way. Only 39% of girls and 29% of boys would say “Stop it” to the offender.

When referring to harassment by groups of beer-drinking youths cruising the neighbourhood in cars and asked what would be the safest thing to do, boys often responded with violent but unrealistic suggestions, such as punching the men through car windows. Only 2% of boys and no girls said they would take a description of the vehicle.

When asked what they would do in the event of smoke coming from a TV set while at home alone, 51% of boys and 22% of girls did not mention switching off the power. Only 40% of boys and 55% of girls would phone the fire brigade while 28% of boys and 15% of girls said they would throw water over it (ignorant of the risk of electrocution).

DISCUSSION

The study confirmed the vulnerability of children with learning disabilities to the risks of drugs, violence, psychological bullying, pornography, sexual abuse and other safety hazards. The study showed significant levels of violence in both schools and homes. This presents challenges to finding ways of assisting children to protect themselves against older and more powerful perpetrators. The reporting of abuse was infrequent. Embarrassment, fear and a lack of faith that reports will be well received or acted on adequately by adults are partial explanations for low reporting rates for both boys and girls.

Teaching Safety Programmes

One should not underestimate the difficulties involved in teaching safety concepts to children with learning disabilities. The concepts are often complex and difficult to grasp. Quite clearly, safety messages require thorough exploration using a variety of means, including activity methods, videos/DVDs, role-play and problem-solving scenarios. Children need clear reporting skills plus frequent reassurance that they will be protected from offender retaliation if reports are made. Repetition should involve minor modifications until there is evidence that the strategies are thoroughly understood. Information has to be broken down into small segments using opportunities for practice on a daily basis (Anderson 1982, Briggs and Hawkins 1997, Briggs 1998).

Finkelhor and colleagues (1993) interviewed 2,000 children aged 10–16 years and parents to gain a comprehensive picture of the scope, variety and consequences of child victimisation and the ability of school programmes to influence children's responses to real-life encounters. The researchers found that education did not prevent attempts at victimisation, but children reported incidents quickly, prevented them from becoming serious and felt empowered and positive about their actions. The study showed that the best results came from the most comprehensive, explicit programmes that involved parents.

Involvement of Police Education Officers in the delivery of safety education in the New Zealand model was well accepted by the respondents in the present study. This model should be considered by other countries since the involvement of Police Education Officers relieves teachers of having to develop yet another set of professional competencies. Involvement of these experts may lead to greater willingness on the part of schools to accept the child protection curriculum. While researching the teaching of Protective Behaviours in South Australia, Johnson (1995) found that it was taught selectively and spasmodically, and vital sections that relate to sexual abuse were omitted, probably due to embarrassment on the part of teachers who were uncomfortable with the more sensitive aspects of the programme. The use of specialists may thus improve the integrity of programme delivery.

Parent/Caregiver Education Should Be a Priority

The current study showed that most parent figures had not provided any realistic child protection education. Some male carers had sexually abused the children in their care and some mothers supported the abusers, resulting in their children being removed from home. This is likely to have increased the psychological damage associated with the abuse and contributed to children's angry, violent behaviours. It also suggests parental ignorance relating to both the habitual nature and harmful effects of abuse and the need to support victims.

Caregiver education programmes should be a joint priority, together with classroom programmes for the children. Earlier research (Briggs and Hawkins 1991, 1994, 1996b) in mainstream schools showed that the children with the best safety knowledge and skills were those taught *Keeping Ourselves Safe* by enthusiastic teachers with parental reinforcement. Briggs and Hawkins (1996b) showed that some parents are reluctant to attend child protection information sessions unless given personal invitations by teachers. Even good quality caregiver programmes will not be a total solution, since not all parents or caregivers are in a position to respond well. Many children said they spent prolonged periods of time in the care of their grandmothers because their parents protected sex offenders and abandoned their child, or suffered mental illness or drug addiction. Grandmothers found that, lacking support, they could not cope with the angry behaviour of sex abuse victims and after a few months the children were placed in foster care.

Parent education is vital to help counter myths such as that the sexual abuse of children with disabilities matters less than the abuse of non-disabled children "because they don't understand". Research by Kennedy (1990) showed that the victimisation of children with disabilities compounds the low self-esteem, emotional problems, sense of helplessness, frustration, anger, depression, fearfulness and withdrawal associated with their disabilities.

We found that on some rare but not insignificant occasions, both caseworkers and parents seem to have turned a blind eye to children being used for under-age sex by adults who called themselves boyfriends or girlfriends.

Sex Differences and the Special Needs of Boys

The results showed that there are important sex differences in the problems identified. Boys, for example, were significantly more likely than girls to be offered a variety of drugs. Perhaps contrary to conventional wisdom, boys were at as great a risk of sexual abuse as were girls.

The current study confirmed earlier concerns (Briggs and Hawkins 1996a, 2001) that boys do not define sexual abuse accurately. They dismissed child protection information as irrelevant to them, claiming that rape only happens to girls and “poofters ... who deserve it”. Homophobia makes it more difficult for boys to report offences. The responses of male victims indicated the need to appear “macho” and in control. This resulted in a tendency to normalise sexual abuse and dismiss it as insignificant and not reportable. Nevertheless, sexual misbehaviour would appear to be widespread, especially in school toilets and sports and swimming pool changing rooms, when supervision is lax.

Boys were much less knowledgeable than girls about all sex-related issues and abuse. They were uncertain about adults’ rights to use children for sex, or their own rights to force girls into sexual activity, especially those referred to as girlfriends.

It is a particular concern that girls participated in unprotected sex to please male partners and, despite explicit sex education, neither boys nor girls readily associated sex with pregnancy or sexually transmitted diseases. It was also worrying that a significant minority of respondents believed that under certain circumstance it was acceptable for a boy to force sexual compliance from a girl.

The Broader Picture

While it is arguable that the need for child protection programmes has never been greater, there are risks that improved protection programmes may not eventuate. Enthusiasm for personal safety education has declined in some quarters. Increasing reports of sexual abuse have sometimes been interpreted as programme failure rather than programme success, and overworked social services may not automatically welcome any development that improves reporting rates, thus adding to their heavy caseloads.

Our own series of evaluations supports the value of the Keeping Ourselves Safe programme. In addition, Perniskie (1995) evaluated the New Zealand programme with 137 children and parents in three schools. All those involved in Keeping Ourselves Safe showed significant increases in safety knowledge at post-test. Children with the least prior knowledge gained the most. Woodward (1990) also evaluated the implementation of Keeping Ourselves Safe at a time when few Dunedin schools were using it. One of her recommendations was that developmentally appropriate sexuality education should be taught alongside child protection information.

New Zealand Police administrators accepted that school programmes provided safety knowledge but questioned whether children actually used the strategies taught given the complexity of intra-familial abuse and the power that adults have over them.

Recent surveys by New Zealand's Education Review Office (2004) suggest that between 70% and 80% of primary schools have used Keeping Ourselves Safe in the last two years. Current issues relate to motivating schools to teach it regularly and conscientiously in the manner intended (Owen Sanders, personal communication, New Zealand Police Youth Education Manager, 2005).

The political will to persist with prevention programmes is often affected by landmark events. The New South Wales Department of Education and Training was motivated to rewrite Child Protection Education (1998) following the findings of the New South Wales Wood Royal Commission into Paedophilia (1998). Similarly, interest was revived in South Australia in response to the Layton Report (Layton 2003) "Keeping them safe". A new curriculum, similar to the New Zealand model, is being introduced using developmentally appropriate modules covering a wide range of safety issues. South Australian authorities have recognised the importance of teacher support for the conscientious delivery of this programme.²

Given the marked difference in risks to children with learning disabilities compared with other students, it is worth asking whether such children were targeted because they were learning disabled. Perhaps they were seen as safer targets in terms of an expectation that they would be less aware of the difference between right and wrong and less likely than other children to make a report about any abusive behaviour. If this speculative hypothesis is correct it means that learning disabled children require even more vigilant and explicit forms of protection than other children.

2 Freda Briggs is a member of the multi-professional advisory committee assisting in the production of the curriculum.

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