



# Associating disabilities, school environments, and child victimization

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## ABSTRACT

Inclusive education has become one of the key policy objectives for the education for children with disabilities in recent decades. However, its effectiveness in promoting happy school life among those children has been questioned. In this study, we aimed to provide a detailed profile of the associations between disabilities and child victimization, and to examine the effects of school environments on those associations. We conducted a cross-sectional survey with a sample of 4114 school-aged children (6–18 years), who were receiving primary or secondary education in Hong Kong in 2016–2017. Children's experiences of 7 types of victimization in the past year, status of disabilities, type of school attending, and other demographic factors were captured with questionnaire completed by the children or their parents. Apart from descriptive statistics, we conducted logistic regression analyses to examine the associations between disabilities, types of school, and child victimization. Children with ADHD, internalizing disorder, autistic spectrum disorder, and restrictions in body movement were at higher risks of victimization while other types of disabilities were not. Children attending special schools were at lower risks of victimization, while children with disabilities who had been placed in ordinary schools for inclusive education were at higher risks of most types of victimization when compared to children without disabilities. Our findings suggested an important role of the school environments on the associations between disabilities and victimization. When placed in a protective environment, children with disabilities could even be less vulnerable to victimization than those without disabilities.

## 1. Introduction

Violence victimization has long been identified as a significant health issue for individuals with disabilities (Horner-Johnson & Drum, 2006). Most literature on violence and disability has indicated a greater risk of victimization among individuals with disabilities (Brownridge, 2009; Hodgins, Alderton, Cree, Aboud, & Mak, 2007). The link between victimization and disability inevitably exists among children (Rand & Harrell, 2009; Sullivan, 2009). Findings from a large-scale school-based study in the U.S. indicated that children with disabilities were three times more likely to experience violence than children without disabilities (Sullivan & Knutson, 2000). In a recent meta-analysis on 16 studies ( $N = 14,700$ ), researchers from the World Health Organization (WHO) revealed pooled prevalence estimates of child victimization with 27% for any type of abuse, 20% for physical abuse, and 14% for sexual abuse; and disability was found to heighten the risk of child victimization for about 3.7 times (Jones et al., 2012).

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Past studies have demonstrated evidence supporting that different types of disability are independently associated with different forms of victimization. For example, physical abuse is more likely to be found among children with learning or language disabilities, sensory impairments and attention problems (Knutson, Johnson, & Sullivan, 2004; Oland & Shaw, 2005). On the other hand, sexual violence is more often found among children with emotional problems and internalizing disorders including depression and anxiety (Foshee, Benefield, Ennett, Bauman, & Suchindran, 2004). Other research on peer victimization has demonstrated the link between peer bullying and internalizing disorders and externalizing conduct problems (Finnegan, Hodges, & Perry, 1998; Oland & Shaw, 2005). Turner and colleagues conducted a national study ( $N = 4046$ ) to examine the links between different types of disabilities and exposure to multiple forms of victimization among children in the U.S (Turner, Vanderminden, Finkelhor, Hamby, & Shattuck, 2011). Their results replicated previous findings that associations with victimization vary across different disabilities. In particular, internalizing emotional problems elevated the risk for child maltreatment by caregivers and sexual victimization by non-caregivers, and attention deficit/hyperactivity disorder (ADHD) and learning disorders increased the risk of property crime. However, contrasting with past findings, Turner et al.'s results did not suggest a link between physical disabilities and victimization. Whether physical disabilities increase the risk of victimization therefore remains inconclusive, and clearly there is a need for more empirical evidence for the independent associations between different types of disabilities and victimization.

Undoubtedly, a warm and friendly environment could promote healthy development and minimize violence experience of children, especially those with disabilities. To facilitate social inclusion in schools, inclusive education has become the key policy objective for the education among children with disabilities (Lindsay, 2007). However, the effectiveness of inclusive education in promoting happy school life among those children has been questioned. For example, children with disabilities often report being stigmatized, discriminated, or even bullied by their peers when studying together mainstream ordinary schools (Cooney, Jahoda, Gumley, & Knott, 2006). Left unaddressed, children with disabilities may be put in high risks of victimization, which could seriously hamper their development, under the policy of inclusive education (Cooney et al., 2006). Nonetheless, there has been a lack of literature on how inclusive education, or the types of schools that the children attend, could affect the experience of victimization among children with disabilities.

This study aimed at filling the research gap by extending Turner et al.'s study (2011) on disabilities and victimization. On the basis of the categorizations of disabilities in previous research (Jones et al., 2012; Turner et al., 2011), we classified disabilities into five main groups that covered as most disabilities as we could. These included physical disabilities, learning and developmental disabilities, intellectual disabilities, internalizing disorders, and autism spectrum disorders. Our major objectives were: (a) to provide a thorough profile of the experience of different types of victimization among children with different disabilities; (b) to investigate the associations between disabilities and victimization, and in particular to explore whether there would be disability-specific victimization among children; and (c) to examine the associations between the types of school that children with disabilities were attending and child victimization.

## 2. Methods

### 2.1. Study design and setting

We conducted a cross-sectional survey with a representative sample of school-aged children, who were receiving primary or secondary education (around 6–18 years of age), in Hong Kong in 2016–2017. Very often, children who were identified with severe disabilities or special learning needs by the Education Bureau in Hong Kong would receive intensive supportive services at special schools; whereas children with less severe disabilities or special learning needs might be placed in ordinary schools and receive inclusive education. To ensure a large and representative sample with children receiving different education services, we sampled children with disabilities attending special schools, children with disabilities attending ordinary schools, and children without disabilities using separate procedures. Ethics approval for the study was obtained from the Institutional Review Board of the University of Hong Kong and the Hospital Authority, Hong Kong West Cluster, and all study design and procedures were ensured to follow the safety protocol strictly.

### 2.2. Procedures

In this study, we first sampled and recruited participants at the school level. We invited all ordinary primary and secondary schools to complete a screening questionnaire about the number of students with disabilities studying at their schools. Schools are expected to keep record on such figure as extra subsidy is allocated from Education Bureau for each student with special learning needs. No identifying information about the children was obtained at this stage. Then, we conducted random selection of ordinary primary and secondary schools with the modes of financing of schools as the stratification. Systematic sampling was used, such that with the sampling frame sorted by geographical district, the sample of schools selected would be evenly distributed in different districts throughout the territory. We then sent out invitations for participation to a total of 78 ordinary schools and special schools, and received written agreement for participation from 67 of them (response rate = 85.9%).

To recruit children with disabilities, we asked all students who were attending the sampled special schools to participate. All children with disabilities in the sampled ordinary schools were also recruited with the assistance of the schools, which held a list of all students with disabilities. We then sampled students without disabilities randomly from each grade of the participating ordinary schools. At the end of the recruitment stage, we have sampled 4336 eligible children with and without disabilities.

All eligible children and their parents or guardians were explained for the purpose and procedures of this study either face-to-face

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