



# The abuse of children in care in Scotland: A research review - Summary report

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## **Executive summary**

This report was commissioned by the Scottish Child Abuse Inquiry to inform their work on raising public awareness about the abuse of children in care. It was a desk based review of research evidence and published sources on the prevalence and nature of child abuse and neglect in Scotland from 1930 to 2014. Sixty one studies were included in the review.

The research aimed to address the following questions:

- 1. What is known from the current research literature in high income countries about the nature and prevalence of child abuse?
- 2. What is known from research into the nature, prevalence and incidence of child abuse in the UK and in Scotland within the selected time period, 1930 to 2014?
- 3. What are the significant gaps in knowledge within this literature on prevalence from high income countries?
- 4. What is known from the current research literature in high income countries about the nature and prevalence of the abuse of children in care?
- 5. What is known from research into the nature, prevalence and incidence of the abuse of children in care in Scotland within the selected time period, 1930-2014?
- 6. Are there any significant gaps in the existing published research on child abuse relating to Scotland, what gaps might be addressed by further research, and could these gaps be addressed in time to inform the Inquiry's work?

### **Key findings**

1. What is known from the current research literature in high income countries about the nature and prevalence of child abuse?

Measuring the extent of child abuse and neglect and comparing rates globally is difficult because of conceptual and methodological differences in measuring 'childhood', 'abuse' or 'violence'. Many countries across the world, especially high income regions such as the UK, collect data on the numbers of cases recorded by the police and child protection services that concern children who experience violence or abuse. However laws and policies vary from place to place and in most countries children find it difficult to report experiences of abuse to social workers or the police. Rates of incidence based on cases of abuse and neglect subject to prosecution or child protection registration in any one year are substantially lower than the past year rates young people in the community report when asked in confidential surveys. Self-report surveys are seen to provide the most realistic

estimates of the prevalence of child abuse and neglect, and surveys directly asking children and young people about their experiences have increased in the past 15 years. Meta-analyses and systematic reviews of the global data show that violence, including abuse and neglect from parents and caregivers, affects a large number of children across the world<sup>1</sup>.

Globally, more than one in eight (12.7%) of children and young people say they have experienced sexual abuse at some point in their childhoods<sup>2</sup>. More than one in every five (22.6%) children and young people say they have experienced physical violence from a parent/caregiver at some point in their childhoods<sup>3</sup>. 36.3% of children and young people say they have experienced emotional abuse from a parent/caregiver at some point in their childhoods<sup>4</sup>. Between 16.3% to 18.4% of children and young people say they have experienced neglect at some point in their childhoods<sup>5</sup>.

Boys and girls are equally likely to be victims of maltreatment by a parent or caregiver. In high income countries, girls typically report rates of child sexual abuse that are at least 3 times higher than rates reported by boys.

Some groups of children are more vulnerable to abuse and neglect than are others. Children with disabilities, especially those associated with interpersonal and behavioural difficulties, have a higher risk of maltreatment from a parent or caregiver than non-disabled children<sup>6</sup>. Physical disability however has been found not to increase the risk for any type of victimisation once confounding factors and co-occurring disabilities are controlled for in the analysis<sup>7</sup>.

<sup>&</sup>lt;sup>1</sup> Stoltenborgh, M. Stoltenborgh, M. Bakermans-Kranenburg, M. Alink, L. & van IJzendoorn, M. (2015) The Prevalence of Child Maltreatment across the Globe: Review of a Series of Meta-Analyses *Child Abuse Review* 24: 37–50

<sup>&</sup>lt;sup>2</sup> Stoltenborgh, M. van Ijzendoorn, M. Euser, E. & Bakermans-Kranenburg, M. (2011) "A Global Perspective on Child Sexual Abuse: Meta analysis of prevalence around the world", *Child Maltreatment*, vol. 16, no. 2, pp. 79–101.

<sup>&</sup>lt;sup>3</sup> Stoltenborgh, M., Bakermans-Kranenburg, M.J., van IJzendoorn, M.H. and Alink, L.R. (2013a) Cultural–geographical differences in the occurrence of child physical abuse? A meta-analysis of global prevalence. *International Journal of Psychology*, 48(2), pp.81-94.

Stoltenborgh , M. Bakermans-Kranenburg , M. Alink, L. & van IJzendoorn, M. (2012) The Universality of Childhood Emotional Abuse: A Meta-Analysis of Worldwide Prevalence *Journal of Aggression, Maltreatment & Trauma* 21:870–890
 Stoltenborgh, M. Bakermans-Kranenburg, M. & van IJzendoorn, M. (2013b) The neglect of child neglect: a meta-analytic review of the prevalence of neglect *Soc Psychiatry Psychiatr Epidemiol* 48:345–355

<sup>&</sup>lt;sup>6</sup> Jones, L., Bellis, M.A., Wood, S., Hughes, K., McCoy, E., Eckley, L., Bates, G., Mikton, C., Shakespeare, T. and Officer, A. (2012) Prevalence and risk of violence against children with disabilities: a systematic review and meta-analysis of observational studies. *The Lancet*, 380(9845), pp.899-907; Mueller-Johnson, K., Eisner, M.P. and Obsuth, I., (2014) Sexual victimization of youth with a physical disability an examination of prevalence rates, and risk and protective factors. *Journal of interpersonal violence*, 29(17), pp.3180-3206; Svensson, B., Bornehag, C.G. and Janson, S. (2011) Chronic conditions in children increase the risk for physical abuse—but vary with socio-economic circumstances. *Acta paediatrica*, 100(3), pp.407-412.

<sup>&</sup>lt;sup>7</sup> Turner, H. Vanderminden, J, Finkelhor, D. Hamby, S. & Shattuck, A. (2011) Disability and Victimization in a National Sample of Children and Youth *Child Maltreatment* 16:4. 275-286

Children who have been maltreated by a caregiver, or who have been sexually abused by an adult or peer or who have experienced physical violence in the community have a significantly higher risk of experiencing multiple types of abuse (being polyvictimsed)<sup>8</sup>. Because of their prior experiences of abuse and neglect, children in the care system should be regarded as particularly vulnerable to further victimisation.

## 2. What is known from research into the nature, prevalence and incidence of child abuse in the UK and in Scotland within the selected time period, 1930 to 2014?

No Scotland specific research on the prevalence of child abuse was found so estimates on prevalence are based on the UK population data.

The most recent prevalence research in the UK <sup>9</sup> shows:

The most frequent victimisations young people (aged 11-17) report are perpetrated by peers (35.3% report this happening in the past year, 59.5% at some time during childhood) and by siblings (16% report this happening in the past year, 31.8% at some time during childhood).

9.4% (1 in 10) report experiences of sexual victimisation (from an adult or peer) in the past year, 16.5% (1 in 6) experience this at some time during childhood.

6% (1 in 16) report at least one act of maltreatment from a parent or caregiver in the past year, 21.9% (1 in 5) experience this at some time during childhood.

2.5% (1 in 40) report exposure to parental domestic violence in the past year, 17.5% (1 in 6) experience this at some time during childhood.

5% (1 in 20) report victimisation from their own intimate partner (boyfriend or girlfriend) in the past year, 7.9% (1 in 13) experience this before reaching the age of 18.

The above rates cover the whole age span from 11 to 17 years but prevalence rates vary considerably with the age of the child, with older adolescents reporting higher rates for most types of past year victimisation (apart from victimisation by siblings) than rates reported for younger children. Rates of victimisation also vary according to gender and age, with sexual and intimate partner victimisation rates being highest for adolescent girls and physical violence from peers in the community being highest for adolescent boys.

<sup>9</sup> Radford, L., Corral, S., Bradley, S., Fisher, H.(2013) The prevalence and impact of child maltreatment and other types of victimization in the UK: Findings from a population survey of caregivers, children and young people and young adults. *Child Abuse & Neglect* 37, 801–813

<sup>&</sup>lt;sup>8</sup> Finkelhor, D., Ormrod, R.K., & Turner, H.A. (2009b) "Lifetime assessment of poly-victimization in a national sample of children and youth" *Child Abuse and Neglect*, *33*(7), 403-411

Past year parent or caregiver maltreatment rates reported for children and young people under the age of 18 are between seven to seventeen times higher than the rates recorded for children subject to a child protection plan or on a child protection register.

#### Trends in the prevalence of child abuse over time

Taking a longer term historical view, available evidence from high income European countries indicates a general reduction in levels of inter personal violence against adults and children since the mid 19<sup>th</sup> century.<sup>10</sup>

There was a steady decline in rates of homicides and child maltreatment related deaths across the UK and a number of European countries from late 19<sup>th</sup> century up to 1950s. Overall homicide rates across the UK and a number of European countries (and the USA) increased from the 1950s to the 1990s and then declined. However, reported cases of child abuse, measured as recorded crimes against children and by child protection plans/registrations, show an increase across all four nations of the UK since at least 2005<sup>11</sup>. Self-report surveys on child victimisation in the USA and the UK show reduced rates of reporting for some acts of physical violence and sexual abuse but no decline in rates of parental neglect<sup>12</sup>.

In recent times reported cases of child abuse have increased as a result of expanded definitions while the actual prevalence of certain types of abusive experience may have declined because of changes in attitudes and behaviour <sup>13</sup>. New technologies can support new access routes to abuse and risks for children <sup>14</sup>.

# 3. What are the significant gaps in knowledge within this literature on prevalence from high income countries?

The biggest gap in the research evidence on prevalence is the lack of research specifically focusing on Scotland.

<sup>&</sup>lt;sup>10</sup> Eisner, M. (2008) Modernity Strikes Back? A Historical Perspective on the Latest Increase in Interpersonal Violence (1960–1990) *International Journal of Conflict and Violence* 2: 2, 288 – 316

<sup>11</sup> Bentley, H. O'Hagan, O. Raff, A. & Bhatti, I. (2016) How Safe Are Our Children? NSPCC: London.

<sup>&</sup>lt;sup>12</sup> Finkelhor, D. Shattuck, A. Turner, H. & Hamby, S. (2014a) "Trends in Children's Exposure to Violence 2003 to 2011", JAMA Pediatrics online, April.

Eisner, M. (2008) op cit; Pinker, S. (2011) *The better angels of our nature: Why violence has declined* Viking; Parton, N. (1985) *The politics of child abuse* Basingstoke: Macmillan; Parton, N. (2014) *The politics of child protection* Basingstoke: Palgrave Macmillan

<sup>&</sup>lt;sup>14</sup> Barter, C., McCarry, M., Berridge, D. and Evans, K. (2009) *Partner Exploitation and Violence in Teenage Intimate Relationships, London, NSPCC.* 

A national parent/caregiver and child and young person self-report survey conducted at regular intervals of five years is recommended by global welfare and human rights organisations such as the World Health Organisation and UNICEF<sup>15</sup>. It is important that research on the prevalence of child abuse takes into account the varied developmental risks for children and young people, including data on very young children. Data gathering from multiple sources, including tracking administrative data changes over time and linking these with child wellbeing indicators, would provide a more comprehensive picture of trends and the outcomes for children in Scotland. It would be helpful to include questions on child sexual exploitation in self-report prevalence surveys in the future so that the specific vulnerabilities of children at risk can be investigated in the UK and Scottish context.

## 4. What is known from the current research literature in high income countries about the nature and prevalence of the abuse of children in care?

International research data on the prevalence and nature of abuse in care did not emerge until the 1990s and is still sparse. Research studies on the prevalence and incidence of abuse in care are not easily compared as the estimates are based on different units of analysis, typically either based on inquiry reports, or agency case records, or surveys and consultations with professionals or foster carers or residential care workers or with children themselves.

Research from the USA and Europe shows that the majority of children currently in care are not abused or neglected by caregivers in the care system. However, due to the vulnerabilities that bring children into care in the first place, targeting by perpetrators, systemic factors and inequalities of power within the care system, children living in care are more vulnerable to abuse than children living with their families <sup>16</sup>.

Stein<sup>17</sup> identified four dimensions of abuse in care - *individual direct abuse* (which is similar to the physical, sexual, emotional abuse and neglect of children in the family but perpetrators are foster carers or residential care workers); *programmed or sanctioned abuse* (covering unfair policies and regimes such as Pindown); *organised/systematic abuse* (where groups of perpetrators in or outside the care system target children to abuse or exploit); *system outcome abuse* (where there is systemic and organisational failure to safeguard children and

<sup>&</sup>lt;sup>15</sup> Meinck, F. Steinhert, J, Sethi, D. Gilbert, R. Bellis, M. Mikton, C. Alink, L. & Baban, A. (2016) *Measuring and monitoring national prevalence of child maltreatment : a practical handbook* World Health Organisation Europe : Copenhagen; UNICEF (2014) *Hidden in Plain Sight: A statistical analysis of violence against children*, UNICEF, New York

<sup>&</sup>lt;sup>16</sup> Euser, S., Alink, R., Tharner, A., IJzendoorn, M., Bakermans-Kranenburg, M. (2014) Out of home placement to promote safety? The prevalence of physical abuse in residential and foster care. *Children and Youth Services Review* 37, 64-70 <sup>17</sup> Stein, M. (2006) Missing years of abuse in children's homes *Child and Family Social Work* 11, 11-21

aid their recovery from harm). Stein's framework is helpful for understanding the nature of abuse in care and the specific issues that need to be addressed in safeguarding.

Research with children aged 12 to 17 years in care and living in the community in the Netherlands<sup>18</sup> found the risk of physical abuse in care was three times higher than for young people in the general population. One in every four (25.7%) of the young people in care reported experiences of physical abuse in 2010, with higher rates reported by boys (31%) than girls (18%) in care.

One study in Finland<sup>19</sup> found the opposite that children living with their families in the community reported significantly higher rates of physical and psychological abuse from caregivers than did children living in residential care.

Research shows lower rates of abuse reported by children and young people in foster care, with typically 4% of those in foster care having allegations of abuse but less than 1% being confirmed, many cases not subsequently actively proven nor disproven<sup>20</sup>.

Rates of allegations in foster care tend to be higher in kinship care<sup>21</sup>.

The Netherlands prevalence study found relative risks of abuse in different care contexts compared to the general population were 2 x higher in group care, 3.2 x higher in secure care and 1.6 x higher in foster care<sup>22</sup>.

The studies of abuse in residential care show that both boys and girls are at risk from physical and sexual abuse in the care system<sup>23</sup>.

Some research studies also show that boys are more vulnerable to sexual abuse than girls in certain care environments, such as in single sex, Catholic church based residential care homes<sup>24</sup>.

<sup>19</sup> Ellonen, N.& Pösö, T., (2011) Violence Experiences in Care: Some Methodological Remarks based on the Finnish Child Victim Survey *Child Abuse Review*, 20: 197–212

<sup>&</sup>lt;sup>18</sup> Euser et al (2014) op cit

<sup>&</sup>lt;sup>20</sup> Biehal, N. (2014b) Maltreatment in Foster Care: A review of the evidence. *Child Abuse Review* Vol. 23: 48–60.

<sup>&</sup>lt;sup>21</sup> Font, S. (2015) Are children safer with kin? A comparison of maltreatment risk in out-of-home care, *Children and Youth Services Review* 54: 20-29

<sup>&</sup>lt;sup>22</sup> Euser et al (2014) op cit

<sup>&</sup>lt;sup>23</sup> Baker, Amy J. L. Curtis, Patrick A. Papa-Lentini, C. (2006) Sexual Abuse Histories of Youth in Child Welfare Residential Treatment Centers: Analysis of the Odyssey Project Population *Journal of Child Sexual Abuse* 15:1 29-49; Euser et al (2014) op cit;

<sup>&</sup>lt;sup>24</sup> Langeland, W.Hoogendoorn, A. Mager, Smit, D. & Draijer, N. (2015) Childhood sexual abuse by representatives of the Roman Catholic Church: A prevalence estimate among the Dutch population *Child Abuse & Neglect* 46, 67-77

5. What is known from research into the nature, prevalence and incidence of the abuse of children in care in Scotland within the selected time period, 1930-2014?

#### Recent evidence on the prevalence of abuse in care in Scotland

In 2011 there were 2,228 children in foster care in the UK. On average each year in the UK, research<sup>25</sup> shows there were 2,100-2,400 alleged cases of abuse of children in foster care (a rate of 3 - 4 allegations of abuse per 100 children in foster care per year between 2009-2011). In 2011 there were 11,682 children in residential care in the UK. There were 1,100-1,400 alleged cases of abuse of children in residential care (a rate of 10-12 per 100 children in residential care per year). Three quarters to four fifths of allegations of abuse in care are not subsequently actively proven nor disproven.

On average each year in the UK there are 450-550 confirmed cases of abuse in foster care (a rate of 0.80 - 0.88 per 100 children in care per year) and 250-300 confirmed cases of abuse in residential care (a rate of 2-3 cases for every 100 children in residential care per year).

In 2011 there were 8,978 children in foster care in Scotland, 54,705 children in foster care in England and Wales. Scotland was found to have the lowest rate of allegations and confirmed cases of abuse in care when compared with rates reported for England and Wales.

The allegation rate in foster care was 1 per 100 children in Scotland compared with 3-4 per 100 in England and in Wales.

In 2011 there were 1,461 children in residential care in Scotland and 8,275 children in residential care in England and Wales. The allegation rate in residential care was 2 allegations per 100 children in residential care in Scotland compared with 13-15 per 100 in England and 10-18 per 100 in Wales.

The rate for confirmed cases of abuse in foster care was 0.14 -0.23 per 100 children in foster care in Scotland compared with 0.82 – 0.94 per 100 in England and 1 per 100 in Wales.

Over half of the alleged cases were not actively proven nor disproven.

The rate of confirmed cases of abuse in residential care was 0.66 -0.92 cases of among every 100 children in residential care in Scotland compared with 2-3 confirmed per 100 in residential care for England and in Wales. Almost three quarters of the alleged cases were not actively proven nor disproven.

<sup>&</sup>lt;sup>25</sup> Biehal, N.Cusworth, L. Wade, J. & Clarke, S. (2014a) *Keeping children safe : allegations concerning abuse and neglect of children in care* NSPCC, London

These figures are likely to undercount the true extent of the problem.

One study in the UK found that many of the recent confirmed cases of abuse in residential care involved physical violence or the excessive use of force in restraint, often where a residential staff member had acted inappropriately to a young person's challenging behaviour<sup>26</sup>. Findings from research on the prevalence of alleged and confirmed abuse of children in foster care in the UK are similar to those from the international research literature, showing allegations of abuse against 3-4% of foster carers each year with typically lower rates of confirmed cases, less than 1% per year<sup>27</sup>.

Drawing together evidence from several sources, it is estimated that 8% of children in care in Scotland were subject to known or confirmed sexual exploitation in the past year, with 21% likely to have been exposed to suspected or confirmed sexual exploitation in the past year<sup>28</sup>.

No research sources were found that directly addressed the prevalence of abuse in care in Scotland over the entire period of this review. The evidence from research prior to the 1990s is particularly sparse. Grey literature sources and inquiry reports provide some information but it is inconclusive. No robust estimates of the historic prevalence of abuse in care can be made as a result. There is information from survivors' accounts on the nature and experiences of abuse in several residential care homes in Scotland, some of which has been reviewed in previous inquiries<sup>29</sup>.

6. Are there any significant gaps in the existing published research on child abuse relating to Scotland, what gaps might be addressed by further research, and could these gaps be addressed in time to inform the Inquiry's work?

Further research on the prevalence of violence against children in Scotland would help to address some of the gaps in knowledge identified in this review, particularly the lack of robust data on children's experiences across the different settings in which they spend their lives. Research to address gaps in knowledge about the risks of sexual exploitation, abuse

<sup>&</sup>lt;sup>26</sup> Biehal et al (2014a) op cit

<sup>&</sup>lt;sup>27</sup> Biehal, N. (2014b) Maltreatment in Foster Care: A review of the evidence *Child Abuse Review* Vol. 23: 48–60; Farmer, E. & Moyers, S. (2008) Kinship care: fostering effective family and friends placements. Jessica Kingsley Publishers: London; Nixon S & Verity P (1996) Allegations against foster families. Foster Care 84: 11-14; Triseliotis J, Borland M, & Hill M (2000) Delivering Foster Care. British Association for Adoption and Fostering: London

Lerpiniere, J., Hawthorn, M., Smith, I., Connelly, G., Kendrick, A., Welch, V.(2013) - The sexual exploitation of looked after children in Scotland CELCIS/SIRRC, Strathclyde University

<sup>&</sup>lt;sup>29</sup> Campbell, B. (2003) 'Sisters of no mercy', *The Guardian,* 12 April 2003; Frizell, E. (2009) *Independent Inquiry into Abuse* at Kerelaw Residential School and Secure Unit. Scottish Government; Marshall, K. Jamieson, C. & Finlayson, A. (1999) Edinburgh's Children: Report of the Edinburgh Inquiry into Abuse and Protection of Children in Care, Edinburgh: City of Edinburgh Council; Shaw, T. (2007) Historical Abuse Systemic Review: Residential Schools and Children's Homes in Scotland 1950 to 1995. Scottish Government: Edinburgh; Shaw, T. (2011) Time to be heard: a pilot forum Scottish Government : Edinburgh

in foster care and risks of online abuse in Scotland could be part of this work. The survey and use of multiple data gathering would be an investment to improve children's wellbeing and life chances by enabling government to monitor trends in levels of abuse and violence but also the impact of initiatives to prevent and safeguard more effectively. Further work would be needed to assess the cost and feasibility of achieving this within the time frame of the Inquiry however a scoping study could be done. A survey of experiences of historic abuse in care is also needed.