Violence against children with disabilities: legislation, policies and programmes in the EU

Summary

Article 24 of the Charter of Fundamental Rights of the European Union guarantees all children in the European Union (EU) a general right to protection, which includes the right to express their views freely, to maintain a relationship with their parents, and to have actions relating to them be guided by their best interests. Article 3 guarantees all individuals in the EU respect for their physical and mental integrity, while Article 26 recognises the right of persons with disabilities to benefit from measures to ensure their integration and participation in community life.

Children with disabilities face significant barriers to enjoying their fundamental rights. They are often excluded from society, sometimes living in institutions or other facilities far from their families. Children with disabilities are denied access to basic services, such as health care and education, and endure stigma and discrimination, as well as sexual, physical and psychological violence.

The European Union Agency for Fundamental Rights (FRA) carried out research on violence against children with disabilities, focusing on the extent, forms, causes and settings of such violence. This summary presents FRA’s main research findings, which are published in full in the report entitled Violence against children with disabilities: legislation, policies and programmes in the EU (see Further information).

Violence against children with disabilities: a fundamental rights issue

International and European legal and policy frameworks acknowledge that the issue of violence against children with disabilities requires particular attention by policymakers and practitioners. The United Nations (UN) Convention on the Rights of Persons with Disabilities (CRPD) recognises the right of persons with disabilities to benefit from measures to ensure their integration and participation in community life.

Data collection and coverage

For this research, FRA carried out desk research covering all 28 EU Member States, examining legal and policy provisions addressing violence against children with disabilities, as well as national measures for preventing, and protecting against, this violence.

In addition, individual interviews based on semi-structured questionnaires were conducted with stakeholders from designated bodies of the national frameworks for implementing the Convention on the Rights of Persons with Disabilities (CRPD). These interviews were carried out in 13 EU Member States: Austria, Bulgaria, Croatia, the Czech Republic, Denmark, Italy, Lithuania, the Netherlands, Poland, Portugal, Slovenia, Sweden, and the United Kingdom.

Responding stakeholders include public authorities, health professionals, educational professionals and service providers for children with disabilities; civil society organisations, including organisations representing people with disabilities; parents’ organisations; victim support organisations; NGOs working in the field of child rights; as well as various human rights bodies, such as national human rights institutions and Ombudsman institutions.
Violence against children with disabilities is a significant issue that affects children with disabilities in various ways. The Child (CRC) and its Convention on the Rights of People with Disabilities (CRPD) are essential in ensuring that children with disabilities are protected from violence; one specifically relates to children and the other to living with a disability. All EU Member States have ratified the CRC and, as of September 2015, 25 EU Members States have ratified the CRPD. In 2010, the EU also acceded to the CRPD, meaning that the convention is now an integral part of the EU legal order, and that all EU legislation and practices must be consistent with its requirements.

The treaty bodies of both of these UN conventions have elaborated on violence against children with disabilities in several General Comments and in Concluding Observations to States Parties’ reports. Member States have also acknowledged the protection needs of children with disabilities in various ways, such as when criminalising violence or when defining national policies to address it. In its recent Concluding Observations to the European Union, the CRPD Committee recommends that the EU take necessary measures to mainstream disability in all legislation, policies and strategies for fighting violence, abuse and exploitation.

Violence against children with disabilities is difficult to substantiate since these children are largely invisible in official statistics. Few reliable estimates of the number of children with disabilities exist, due to outdated and varied definitions of disability; a lack of reliable data-collection methods on disability, especially among children; as well as differences in approaches to collecting data on disability prevalence across countries. The 2011 World Report on Disability, citing the 2004 Global Burden of Disease study, estimates that the average global prevalence of moderate and severe disability in children aged 0–14 years is 5.1%. This corresponds to about 93 million children around the world. There is no unified source that provides data on children with disabilities in the EU.

Although there are similarly little data regarding the extent of violence against children with disabilities, respondents in the context of this research indicated a high prevalence of abuse against such children. UNICEF estimates that children with disabilities are three to four times more likely to experience physical and sexual violence, as well as neglect, than non-disabled children.

Children with disabilities can fall victim to violence in different settings, including schools, at home, or in institutions. Compared with adults, all children are in a situation of vulnerability, due to their stage of development, limited legal capacity and dependence on parents or other caretakers. This situation is exacerbated when a child has an impairment. Children with disabilities experience higher rates of violence as well as disability-specific forms of violence, which are different to that experienced by children without disabilities. They include violence motivated by prejudice towards the disability, restraint, sexual abuse during daily hygiene routines, violence in the course of treatment, as well as overmedication. Research shows that children with disabilities are particularly vulnerable to psychological, sexual and physical abuse, which can devastate their lives.

“Children with disabilities are among the most stigmatised and marginalised children and it could be said that the risk of violence for them is significantly higher namely because they are ignored by society and there is a negative traditional mindset.” (Public authority representative, Bulgaria)

Social isolation and stigma, as well as their particular situation and higher reliance on care – at home, in care centres and in institutions – increases the risk of violence for children with disabilities for a variety of reasons. Impairments often make children appear as ‘easy targets’, because they may lack the skills to protect themselves, face barriers in reporting violence, or their complaints might not be taken seriously. Gender and ethnic, migrant or socioeconomic status can add additional layers of risk. The impact of these factors, which increase the risk of violence, is multiplied when child protection services do not respond adequately to specific needs of children with disabilities – whether due to inaccessibility or a lack of trained professionals.

“We estimated that [...] if you were a black boy, classed as ‘special educational needs’ from a low income background, you were 168 times more likely to be excluded from school than a girl from a more affluent area without ‘special educational needs’.” (Respondent from a national human rights body, United Kingdom)

Children with disabilities are often excluded from child protection services or initiatives that cater to child victims without disabilities. This makes it more likely for children with disabilities to fall between the cracks of general child protection services and specific services for persons with disabilities. Furthermore, providing services to children with disabilities is often in the hands of several organisations or different authorities that do not properly coordinate their efforts.

“Children with disabilities appear to be very vulnerable, much more vulnerable than all other children.”
(Representative of a children’s rights NGO, Netherlands)

“It definitely happens to them. It’s [...] very serious. And evidently the cases that are dealt with are just a fraction of the actual number [...] It’s a problem that’s much larger than we think.” (Clinical psychologist, Czech Republic)
"For example, it can happen that three bodies are acting in parallel, without networking in terms of information sharing, without case conferencing or coordination of some segments of action. They would be much more effective if they were interlinked and networked, if they were exchanging information.” (Respondent from a national human rights body, Croatia)

Child protection systems, reporting mechanisms and victim support services often fail to take into account the needs of children with disabilities, placing further obstacles in the way of those seeking support, trying to report abuse, or seeking redress. The European Commission reflection paper on “Coordination and cooperation in integrated child protection systems” has emphasised the need to ensure that national child protection systems are accessible to children in vulnerable situations, including children with disabilities.

Key findings and evidence-based advice

Based on its research, FRA believes that policymakers and relevant stakeholders should concentrate their efforts to fight violence against children with disabilities, and to effectively protect them from abuse and exclusion across the EU, on the action areas outlined below.

Establishing more inclusive child protection systems

Measures to prevent and address violence against children with disabilities are most effective when they are holistic and cross-cutting. FRA research indicates that efforts need to involve and target all actors who play a role in a child’s life – from families, communities, professionals and institutions to the general public.

When combined with disability, other factors – such as a child’s gender, socioeconomic, ethnic or migrant background – increase the risk of violence. It is therefore important to recognise the multiple layers of risk, take preventive measures, and craft services and measures to provide multi-faceted support. Many respondents stressed that early intervention systems are often inadequate for children with disabilities, failing to rapidly identify and respond to risk situations.

Child protection services play a vital role in ensuring that the multiple needs of children with disabilities are adequately addressed. But they sometimes fail to cater to the specific needs of children with disabilities, and are often inaccessible, both in terms of physical accessibility and a lack of staff with the requisite skills or training.

General services and measures targeted at children or adults with disabilities tend to overlook the specific support needs of, and barriers faced by, children with disabilities, which can prevent them from accessing services.

Member States have adopted different policy approaches to tackling violence against children with disabilities. Some include the protection of children with disabilities in child protection policies, while others address this in policies on the rights of persons with disabilities; others have devised specific policies to address violence against all children in schools or at home. While these general policies acknowledge the higher risk of violence faced by children with disabilities, they often fail to establish concrete measures. A majority of respondents asserted that policies should have a holistic aim, cover all children – including children with disabilities – and thus avoid having separate instruments covering different groups of children (for an in-depth analysis, see Sections 2.2., 3.1., 3.3. and 4.6. of the full report).

FRA opinions

EU Member States should address violence against children with disabilities through an integrated approach. General policies targeting children or persons with disabilities should recognise that children with disabilities face a higher risk of violence and set out concrete, specialised measures and accessible support services. Such an integrated approach helps ensure that protecting children with disabilities is part of the general national child protection system, and that all measures and support services for children who are victims of violence are age-, gender- and impairment-sensitive.

Child protection services should provide all-round support to children with disabilities and their families. They should also take into consideration other characteristics that could increase the children’s vulnerability to violence, such as gender, ethnicity and socioeconomic background. Prevention programmes could include early intervention programmes, awareness-raising measures, training on responsible parenting and family support, as well as respite programmes.
Enhancing the legal and political frameworks for protecting children with disabilities

Respondents identified a number of challenges in addressing violence against children and ensuring that crimes against them are efficiently prosecuted. These include difficulties in viewing children with disabilities as reliable witnesses in court, a lack of trained professionals, a lack of age-appropriate and accessible complaint mechanisms, and low levels of reporting.

FRA research shows that most EU Member States consider disability and age as aggravating factors for violent crimes. At the EU level, several directives protect children with disabilities from violence. Directive 2011/93/EU on combating the sexual abuse, sexual exploitation of children and child pornography and Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime (Victims’ Rights Directive) aim for a certain level of harmonisation of criminal law provisions, including regarding support for child victims, reporting of crimes and prosecuting offenders.

Only 13 EU Member States explicitly address bias based on disability in their criminal code. Of these, only a few separate the hate motivation from the basic offence by using enhanced penalties to stress the severity of bias-related offences; most define bias motivation as an aggravating circumstance.

The European Commission has adopted policy documents on both children’s rights policy and disability policy – the EU Agenda on the Rights of the Child and the European Disability Strategy 2010–2020, respectively. Both refer to the rights of children with disabilities. In addition, the Commission has established two groups consisting of Member State representatives – one of experts on the rights of the child, and one on the rights of persons with disabilities – allowing for cooperation and exchanges of information, experiences and good practices. As a party to the CRPD, the EU is bound by the convention’s obligations to the extent of its competences. In the Concluding Observations on the initial report of the EU, the CRPD Committee specifically recommended that all disability strategies address and mainstream the rights of boys and girls with disabilities.

The European Parliament has two distinct Inter-groups – one to deal with issues relating to children and another relating to disability policy. These structures could increase the attention paid to children with disabilities, particularly to issues of protection from violence, in discussions and actions (see Chapters 1 and 2 of the full report).
Ensuring coordination and appointing a focal point for children with disabilities

Respondents emphasised that a holistic framework bringing together all bodies involved in child protection is essential to prevent violence against children with disabilities. Such a framework should include disabled persons’ organisations and organisations that represent children with disabilities and their families. Respondents stressed that cooperation needs to start at the stage of developing strategies and action plans, and then be reflected in the actual implementation of policies and the provision of services.

Services for children with disabilities are often developed by a range of actors. To avoid overlaps or gaps, regular and coordinated cooperation is crucial. But respondents note that a lack of cooperation often hinders the effective provision of services; that formal coordination mechanisms are either missing or not implemented in practice; and that cooperation is mainly informal and takes place outside of established channels. Even where formalised coordination mechanisms are in place, they often fail to address children with disabilities’ particular risks of, and greater vulnerability to, violence. Professionals generally lack the competence and knowledge to adequately address potential risk situations and cases of abuse concerning children with disabilities.

In addition, respondents noted a lack of unified procedures across professional groups – such as police, social, health and educational staff – and stressed that often even a common understanding of how to recognise and address abuse against children with disabilities is lacking (see Sections 2.2., 2.3., 4.4. and 4.5. of the full report).

Addressing societal attitudes, promoting diversity and countering isolation

Violence against children with disabilities takes many forms and occurs in diverse settings. Respondents identified various causes of violence, ranging from negative societal attitudes based on prejudice and a lack of knowledge or understanding about disability to professional or individual attitudes rooted in intolerance towards the ‘other’.

According to the respondents, social exclusion and isolation increase the risk of violence against children with disabilities in various settings. They noted that the institutional isolation of children with disabilities limits their interaction with the general population, hampering broad awareness and understanding of disabilities.

Respondents also stressed that children who are disabled and have other vulnerable characteristics – due to their socioeconomic status, ethnicity, migrant status, or gender – face an increased risk of violence (see Section 3.2. and Chapter 4 of the full report).

FRA opinions

EU Member States should consider appointing a national focal point for children with disabilities, as suggested in CRC Committee General Comment No. 9, to ensure appropriate coordination between all actors – both public and private – who provide services and support to children with disabilities. This focal point should closely cooperate and coordinate with the national mechanisms in place for implementing the CRPD, defined in its Article 33.

To facilitate the work of such national focal points, Member States could create, at the local level, a network of coordination mechanisms responsible for overseeing the implementation of national policies and measures, improving collaborative and integrated responses in cases of violence, and ensuring adequate cross-professional capacities in assessing risk situations. Such coordination mechanisms could bring together professionals from the health, social, and educational sectors; judicial authorities; social workers; practitioners working in victim support organisations; as well as representatives of DPOs and organisations of children with disabilities and their families. This would help avoid the compartmentalisation of responses and improve the coordination of services for children with disabilities.
Promoting child-focused prevention measures and child participation

The research shows that EU Member States have established a number of measures to address violence against children with disabilities, targeted at various groups, including children themselves. However, including children with disabilities in mainstream activities is not always ensured. Respondents noted that, due to their isolation, children with disabilities are often excluded from formal and informal activities that teach children how to identify risks and respond to violence.

Respondents point to children with disabilities’ lack of understanding of what constitutes abuse as a main risk factor. Many children with disabilities may not be aware that certain behaviour is unacceptable, particularly in the case of sexual abuse.

Promoting the participation of children and persons with disabilities is one of the key pillars of the CRC and the CRPD. Respondents believe that, despite the efforts of DPOs, NGOs, NHRBs and other actors, children with disabilities remain excluded from opportunities to express their views. When children with disabilities are not given a voice, they remain invisible in policy planning and their needs unmet by inaccessible general services. Respondents highlight the importance of including children with disabilities in activities that promote their general participation in all aspects of life as key to preventing violence and giving them tools to identify and report violent incidents (see Section 2.5. and Chapters 3 and 4 of the full report).

Providing family-focused services

Violence against children with disabilities also occurs in domestic settings. Respondents identified exhaustion, burnout, economic distress and a feeling of being “left alone” amongst families and carers of children with disabilities as the main triggering factors. Respondents highlighted insufficient support in easing the financial, physical and emotional burden placed on families and care givers of children with disabilities, and stressed the importance of providing programmes – such as respite programmes – to reduce stress. Many pointed out that rural areas particularly lack support services for children with disabilities and their families.
Respondents believe that the exposure and response to violence may be linked to a child’s personal or family situation, such as being at risk of poverty, having a migrant or ethnic minority background, or growing up in a single-parent household. Respondents often mention the financial strain on families as a possible cause of neglect and a key area in which social support is needed. Respondents found that families living beneath the poverty line have less knowledge of, and access to, services, and hence fewer opportunities to get support.

Respondents also noted that feelings of shame and disappointment are sometimes attached to the disability of a family member, especially of a child, and that disability can be considered taboo. This makes family members reluctant to access support services to address exhaustion or burnout (see Sections 3.2., 3.3., 4.3. and 4.6. of the full report).

FRA opinions

*EU Member States should provide child protection services with the necessary training and resources to prevent abandonment, and assist families in ensuring that children with disabilities stay with their family, while safeguarding the child’s best interests. To this end, child protection services should provide targeted information, orientation, counselling, peer support and training to families, as well as direct and indirect financial support reflecting the needs of children with disabilities and their families. Respite care programmes should be offered to parents or other carers at an affordable cost to prevent burn-out or neglect due to exhaustion.*

*Member States should ensure that the multiple layers of risk faced by children with disabilities are acknowledged and addressed by child protection services, such as through the early identification of risk and comprehensive family-focused support services. Special attention – including through outreach by organisations that represent children and children and adults with disabilities – should be given to migrant and single-headed families, families at risk of poverty or in other vulnerable situations, and families living in rural areas, as they may not be aware of available support.*

Ensuring inclusive education and participation in all aspects of life on an equal basis with others

Respondents indicate that children with disabilities are more vulnerable to abuse at school, both from their peers and from teachers. This reflects a lack of proper mechanisms to ensure inclusion in mainstream schools, inadequate training of teachers and the absence of robust prevention mechanisms. Respondents spoke about widespread bullying of children with disabilities, as well as other, more subtle, forms of violence, such as exclusion and isolation. The research shows that Member States implement various instruments to address bullying in schools, and that these could more strongly consider children with disabilities.

Article 24 of the CRPD reflects a clear commitment by States Parties to ensure an inclusive educational system for children with disabilities, and obliges states to provide the support necessary to facilitate their full and equal participation in education. However, many respondents noted difficulties in accomplishing an inclusive education, and argued that ensuring a safe environment for all children, including children with disabilities, in mainstream schools requires proper support to enable genuine participation, and not just integration (see Sections 3.3., 4.2. and 4.4. of the full report).

FRA opinions

*EU Member States should ensure that schools provide a safe and supportive environment with “zero tolerance” for any form of violence, and that they have effective mechanisms in place to respond at the earliest sign of hostility. Anti-bullying policies and procedures should specifically include children with disabilities.*

*Member States should ensure that all teachers, support staff and other educational professionals have the skills and tools necessary to identify and react to cases of violence against children with disabilities in school settings. Educational authorities could consider incorporating children’s rights, with a particular focus on children with disabilities, into teacher training curricula. They should also address the lack of, or shortages in, appropriate training on recognising violence and on early intervention.*
National human rights mechanisms, including equality bodies, national human rights institutions and children’s ombudspersons, should be mandated, resourced and encouraged to monitor and raise awareness on the rights of children with disabilities in education and to investigate and follow up on cases of violence, denials of access to mainstream schools and bullying of children with disabilities.

Organisations representing children and children and adults with disabilities should be encouraged to support children with disabilities and their families to ensure their inclusion in education, and should develop and conduct educational campaigns to be carried out by self-advocates and role models in schools. Reaching out to school authorities to provide information and knowledge on the specific support needs of children with different forms and extents of impairments would strengthen the effectiveness of such actions.

Advancing deinstitutionalisation efforts and strengthening the monitoring of institutions

There are no reliable data on the exact number of children living in different institutional settings, but estimates suggest that around 150,000 children live in residential settings across the EU. Member States have in recent years made progress in gradually moving from institutional-based care systems to family-based care. However, the institutionalisation of children with disabilities remains a concern, as repeatedly highlighted by the CRC and the CRPD committees. Institutionalisation increases the likelihood of children becoming victims of neglect and mental, physical or sexual violence; some respondents view institutionalisation itself as a form of violence. In addition, the vetting of residential care personnel in Member States does not always cover all groups of professionals, and its frequency is not determined by law. Respondents felt that violence and neglect can easily be hidden in institutions. They criticised monitoring mechanisms for lacking rigour, noting that inspections of institutions are often not systematic, and are reactive rather than preventive – for example, only after the media reports on abuse or deaths in institutions. Some respondents also claimed that certain monitoring bodies lack competence or independence.

Other challenges highlighted by respondents include problematic working conditions for staff, resulting in burnout, and training that is inadequate, sporadic and often not mandatory.

The legislative package for the European Structural and Investment Funds (ESIF) for the period 2014–2020 brought important changes that prioritise deinstitutionalisation and compliance with the CRPD. The criteria attached to promoting social inclusion and combating poverty and discrimination – the so-called ‘ex ante conditionalities’ that Member States must meet to benefit from ESI funds – are particularly important, and include “measures for the shift from institutional to community based care” (see Sections 3.2. and 3.3. of the full report).

FRA opinions

Member States should consider banning placing children – especially those under the age of three – in institutions, regardless of the type or severity of their impairment, as endorsed in the UN Guidelines for the Alternative Care of Children. Member States should allocate resources for the prompt deinstitutionalisation of children with disabilities and their full inclusion in the community. In this respect, Member States should make use of the EU Structural and Investment Funds to support both children with disabilities and their families in the transition from institutional to family-based care.

Member States should strengthen monitoring and inspections of institutions and other closed residential settings to address neglect, mistreatment and other forms of violence. This is particularly important with deinstitutionalisation under way (partly funded through the EU’s Structural and Investment Funds). Monitoring should be independent, well-resourced and involve regular and unannounced inspections.

Developing targeted tools, allocating adequate resources and improving human resource capacity

The research suggests that the existing national legal and policy frameworks can address violence against children with disabilities only if adequate resources are provided for their implementation. Respondents identify overextended and untrained personnel, staff burn-out, a lack of resources and

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problematic working conditions as some of the obstacles to effectively addressing violence against children with disabilities.

Respondents suggest that, in addition to ‘specialised’ professionals in daily contact with children with disabilities, professionals providing general services – such as doctors, nurses and teachers – should be trained on the rights of children with disabilities, accessible communication methods, as well as on means and processes to identify, respond to and report violence against them.

Respondents consider the lack of practical guidance and tools to be a main challenge in the implementation of laws and policies. These should target different professionals, and clearly outline how to prevent and respond to violence.

The EU has established EU funding schemes – such as the Rights, Equality and Citizenship Programme 2014–2020, which replaced Daphne in 2013 – to support activities relating to research, training, guidance development, and good practice exchanges, including in the area of combating violence against children. Respondents recognise the positive impact these funding schemes can have at the national level (see Sections 2.3., 4.4. and 4.6. of the full report).

FRA opinions

**EU Member States should facilitate the effective implementation of existing laws and policies on preventing violence against children with disabilities by developing practical guidelines, protocols and training to enable professionals to recognise violence against children with disabilities, adequately support victims and their families, and ensure that perpetrators face justice. Such tools should be jointly developed with organisations that represent children and adults with disabilities and their families, and be supported with the human and financial resources necessary for their implementation.**

**Member States should review the required qualifications and working conditions of professionals working with children with disabilities to ensure that these professionals have the requisite skills and time for preventing, and responding to, violence against the children.**

**Member States should provide compulsory training for professionals who may potentially work with children with disabilities. Such training should be based on a systematic needs assessment, and should cover the legal and policy framework, stress management, and recognising and reporting violence. Training should also cover how to accessibly communicate with children, including those with hearing, cognitive, speech, intellectual or psychosocial disabilities. Different professionals should be targeted, including: teachers and other educational professionals; doctors, nurses and other healthcare professionals; and providers of specialised and general services for children and care workers.**

Guidelines and toolkits for practitioners working with children with disabilities, as well as for general services staff – such as health and educational professionals – should be developed to provide clear guidance on responsibilities, prevention, referrals and steps to take when suspecting violence.

To achieve sustainable and tangible results with respect to social inclusion, Member States should make use of available EU funding – such as via ESIF and the Rights, Equality and Citizenship Programme – to develop community-based services for children and their families, and to raise public awareness.

The European Commission should ensure that the Concluding Observations of the UN CRPD Committee regarding the use of European Structural and Investment Funds are implemented. These recommend that the European Union strengthen the monitoring of the use of ESI funds to ensure they are being used strictly for the development of support services for persons with disabilities in local communities and not the re-development or expansion of institutions; and that the European Union suspend, withdraw and recover payments if the obligation to respect fundamental rights is breached.

Collecting data

The research shows increased awareness of violence against children with disabilities and the legal obligations established in the CRC and the CRPD, but reliable data regarding the situation in the EU remain lacking. Respondents believe that the lack of information on the scale, forms and characteristics of violence against children with disabilities inhibits the development of targeted policies and programmes. Without proper data, service providers are not aware of the needs of children with disabilities, putting them at risk of being overlooked by inaccessible and unresponsive services.
The research also shows that some countries collect data on violence against persons with disabilities, but do not filter the data based on age, while others collect data on violence against children in general, but do not collect information about the children’s disability status. This is true of both official governmental sources as well as of information collected by civil society.

Respondents emphasised that, where data and research on the situation of children with disabilities are available, efforts should be made to disseminate results widely among all concerned actors to trigger evidence-based reforms and targeted measures (see Sections 2.4. and 4.2. of the full report).

FRA opinions

In line with their obligations under international law, the EU and its Member States should collect disaggregated statistical and research data to permit them to formulate and implement policies to prevent and address violence against children with disabilities. Member States that already collect data on violence against children should make sure that these data are appropriately disaggregated and in accessible formats. Data should at a minimum include information on reported cases of violence against children with disabilities, and on investigations, prosecutions and protection services provided. Data should provide information on the type of violence, including whether discriminatory or bias-motivated; the perpetrator; the type of impairment, including multiple or severe impairments; and other victim characteristics, such as gender, migrant status and socioeconomic background, to uncover patterns and information about sub-groups of children with disabilities.

Member States should also collect and publish disaggregated data on the operation of crisis hotlines, child helplines and victim support services.

Member States could consider establishing a database listing the different forms of support available through public services and civil society organisations, including disabled persons’ organisations and victim support organisations. This database could also act as a gateway to existing tools, such as training or awareness-raising materials.

Member States could consider developing, with the support of FRA, fundamental rights indicators that can support monitoring and evaluating the implementation of policies and measures addressing violence against children with disabilities.
Children with disabilities face significant barriers to enjoying their fundamental rights. They are often excluded from society, sometimes living in facilities far from their families. They are also denied access to basic services, such as health care and education, and endure stigma and discrimination, as well as sexual, physical and psychological violence. International, European and national law all recognise the right to protection from all forms of violence. But even though protective measures are available, girls and boys with disabilities are more likely than their peers to experience violence, sexual abuse or bullying in schools, at home or in institutions across the European Union; they also often face violence linked to their disability.

The European Union Agency for Fundamental Rights scrutinised the important but under-reported issue of violence against children with disabilities, carrying out desk research and conducting interviews with knowledgeable stakeholders. This report presents the results of that research. It outlines relevant international and European standards and reviews national legislation and policies addressing violence against children with disabilities. The report also explores the extent and different causes, settings and forms of such violence, and presents measures and initiatives to prevent it.

Further information:


See also other FRA publications in this field:
