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Experiences of Childhood Sexual Abuse among Visually Impaired Adults in Norway: Prevalence and Characteristics

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Abstract: This study compared the prevalence of childhood sexual abuse among visually impaired children and sighted children in Norway. Visually impaired women and men aged 18–65 who lost their sight before age 18 reported sexual abuse with contact before age 18 more often than did the sighted group, and the abuse of the visually impaired children was more severe. Implications for parents and teachers are presented, and the need for adapted sexual education is stressed.

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the visually impaired adults in Norway who took part in the study.

Childhood sexual abuse is defined as the sexual exploitation of a child who is developmentally incapable of understanding or resisting the sexual contact. This article focuses primarily on the results of a Norwegian study dealing with childhood sexual abuse as reported by 333 adults who were born visually impaired (that is, blind or with low vision) or became visually impaired before age 18 (Kvam, 2003).

A potential abuser often chooses as a victim a child with little self-esteem, few good peer relations, and limited possibilities to tell about the abusive event (Conte, Wolf, & Smith, 1989). Children with disabilities often fall into this category (Appleton, Minchom, Ellis, Böll, & Jones, 1994; Armstrong, Rosenbaum, Ellis, Böll, & Jones, 1992). Various North American studies have drawn attention to the increased risk of sexual abuse for disabled children (see, for example, Sedlack & Broadhurst, 1996).

The purpose of the study presented here was to examine the prevalence of sexual abuse among children who are visually impaired in Norway and to compare the results with the prevalence in the general population. The study also aimed to determine the characteristics of the victims and the abusers and the nature of the abuse. The results are intended to provide

information regarding possible future preventive strategies.

Review of the literature

Sexual abuse of children in the general population

Gorey and Leslie (1997) conducted an integrative review that synthesized the findings of 16 cross-sectional surveys in the general North American population regarding the prevalence of child sexual abuse. All the samples were nonclinical adults (that is, adults who are not mental health patients). The authors estimated the prevalence of sexual abuse with physical contact to be 12%–17% for girls and 5%–8% for boys. Within the group that was exposed to abuse, they found a gender distribution of 68% girls and 32% boys. Finkelhor (1994) reviewed studies from 19 countries and found the same trend in gender distribution. He concluded that girls were abused 1.5–3 times more often than were boys. Two Norwegian studies reported similar findings among children younger than age 18: 14% and 9% (Sætre, Holter, & Jebsen, 1986) and 19.2% and 9.6% (Tambs, 1994) for girls and boys, respectively.

Sexual abuse of children with disabilities

The results of studies of sexual abuse among children with disabilities have differed from those of children in

the general population both in terms of the magnitude of the problem and of the gender distribution of the victims. Most studies have concluded that the risk of sexual abuse is doubled when a child is disabled (Chamberlain, Rauh, Passer, McGrath, & Burket, 1984; Crosse, 1998; Kvam, 2004; Sullivan, Vernon, & Scanlan, 1987). Sobsey and Mansell (1994) collected reports from 220 respondents (either victims with disabilities or the victims' advocates). They found that the children with disabilities were more often abused by family members or persons within their circle of acquaintances than were other children. In addition, the children with disabilities were subject to the added risk of abuse by caregivers who provided them with special care.

Sobsey, Randall, and Parrila (1997) reviewed studies of sexual abuse among disabled and nondisabled children with respect to gender distribution. They found significantly more boys among the victims with disabilities than would be expected from the proportion of abused boys without disabilities. Kvam (2000) found the same tendency among 1,293 children who were seen at Norwegian pediatric hospitals with the suspicion of sexual abuse. The nondisabled group had a gender distribution of 78% girls and 22% boys, whereas the disabled group had a gender distribution of 65% girls and 35% boys. Both Sullivan et al. (1987) and Kvam (2004) found about the same percentage of female and male victims among victims of sexual abuse who were deaf.

Tambs (1994) found that in the general population, having a friend was a protective factor against sexual abuse. Children with disabilities who are integrated into neighborhood schools have fewer friends than do nondisabled children (Appleton et al., 1994; Armstrong et al., 1992). While children with disabilities may find friends among peers in a boarding school, boarding schools and institutions represent a risk factor for sexual abuse (Kvam, 2004; Rindfleisch & Rabb, 1984; Sobsey & Mansell, 1994; Sullivan et al., 1987).

Few studies have specifically investigated possible sexual abuse among children with visual impairments. Through searches in the databases ERIC and Web of Science, I found no relevant articles. Thus, I thought it was important to describe the situation of the children with visual impairments with regard to sexual abuse, and toward this end, I conducted a study in Norway in 2001.

Method

Subjects

The Norwegian Association of the Blind has a register containing the names, addresses, and dates of birth of all people who are visually impaired in Norway. In 2001, this register included 1,600 people aged 18–65. The age and gender distributions of the association's members are spread rather evenly.

Since people who are visually impaired live in all parts of Norway, it is both economically and practically difficult to interview a randomly selected population. Since a relatively large sample size is desirable to make comparisons among subgroups, a self-administered questionnaire, adapted to those with visual impairments, was regarded as the most suitable data-collection method to meet this goal. The choice of a questionnaire as a data collection method made it necessary to define the sample as all those who were named in the register aged 18–65, who were capable of answering a questionnaire offered in large print or braille or on a computer disk or an audiotape. If the respondent did not have the intellectual capability to answer, the caretaker was instructed to return the paper questionnaire marked with a cross over the first page.

The questionnaire

The sexual abuse questionnaire (available from the author on request) was an adapted version of a previous survey of sexual abuse in the general population that was administered by the Norwegian National Institute of Public Health (Tambs, 1994). Some questions from Tambs's study (such as those on drug use and promiscuity in adulthood) were found to be unnecessary for the purpose of this study and hence were omitted. Also, questions about noncontact abuse (for example, experiencing flashing or people exposing their genitals and pornographic films) were omitted. Instead, the questionnaire was supplemented with some

questions regarding experiences at school during the school years.

Of the 48 main questions, the first 32 were general questions, intended for all the respondents, followed by 5 questions to be answered by those who had experienced unwanted physical sexual contact and 11 questions to describe the possible abuse. The questionnaire was designed to elicit specific information regarding

1. prevalence and characteristics of childhood sexual abuse with physical contact among children who are visually impaired (the types of abuse experienced, the child's age at the time of the first and last experience of each type of abuse, the place of occurrence, and the frequency of sexual abuse (once, 2–5 times, or 6 times or more),
2. the characteristics of the perpetrator (gender, age, status, visually impaired or sighted, use of force and violence), and
3. identification of possible predictors or risk factors, as well as protective factors (visual impairment during childhood, gender, school situation, boarding school, friends).

To ensure anonymity, the questionnaire did not ask for the identity (name, address, or exact date of birth) of the respondents. The Norwegian Data Inspectorate and the Norwegian Association of the Blind approved the

study protocol in June 2001.

To prepare the respondents, articles dealing with childhood sexual abuse and earlier research among persons with disabilities were written and disseminated in the different print or recorded journals for persons who are visually impaired in the four months before the study, together with information about the current study.

Questionnaires (in the four modes of communication listed earlier) were mailed to the total population of persons with visual impairments (1,600 addressees) through the Norwegian Association for the Blind in September 2001. The questionnaire gave information about telephone hotlines with professionals available if the respondents wanted practical help or psychiatric support. A short reminder was sent eight weeks later by the same method.

A total of 175 questionnaires were received with a cross over the first page, indicating that these respondents' caretakers had indicated that the persons had a low intellectual capacity. In addition, 122 telephone messages were received: 62 indicating that the addressees were unknown, 12 indicating that the recipients were dead, 29 indicating that the recipients had never been visually impaired, and 19 indicating that the recipients were mentally disabled. These 297 questionnaires were excluded from the sample, which then comprised 1,303 persons with visual impairments.

Altogether, 502 questionnaires were returned in completed form (for a response rate of 38.5%). In addition, 14 people telephoned to give additional information.

Since the main purpose of this article is to describe the risk of sexual abuse among children who are visually impaired, only the respondents who became visually impaired before age 18 are discussed here. The final respondent group thus consisted of 333 persons: 249 who became visually impaired at ages 0–3, 28 who became visually impaired at ages 4–8, and 56 who became visually impaired at ages 9–17. The remaining 169 persons, who became visually impaired at age 18 or older, were used as an extra comparison group in connection with possible protective or risk factors during childhood.

Of the 333 respondents, 51.7% were female and 48.3% were male, evenly spread in the different age groups. Most of the respondents (85.1%) had attended local neighborhood schools, 5.9% had attended schools for students with visual impairments most of the time, and 9.0% had been students at both local schools and special schools. The younger respondents had mainly attended only local schools. Among the older 50% of the respondents, 19% had lived in boarding schools for at least one year, compared to only 4.0% of the younger 50%.

The comparison group

An earlier survey of the general population (Tambs, 1994) was used as a comparison group (see [Table 1](#)). In the comparison study, Statistics Norway randomly drew a sample of 2,500 women and 2,500 men aged 18–60 and had a response rate of 37%. The age of the respondents was evenly spread. The gender distribution was 58% women and 42% men. The answers were anonymous. Since the questionnaires were printed in regular print, one can assume that all the respondents were sighted and therefore had attended local schools. The methods of ensuring anonymity and sending, receiving, and coding the material were similar in the two studies.

Data analysis

Statistical analyses were performed using the Statistical Package for the Social Sciences (for Windows release 11.0). The significance of observed associations or differences between the two groups (visually impaired children and the comparison group from the general population) was tested using the chi-square statistic. A difference was considered to be statistically significant at $p < .05$.

Results

Prevalence of sexual abuse

The respondents

The respondents were asked to report unwanted sexual occurrences before age 18 in accordance with five different types of contact abuse listed in the questionnaire. Altogether, 73 respondents who were visually impaired during childhood or adolescence had been exposed to unwanted sexual experiences with physical contact during childhood (21.9%). Within the abused group, 34.9% experienced a single episode of unwanted physical contact, 21.5% experienced 2–5 episodes, and 43.6% experienced 6 or more episodes. Most of the victims reported 2–4 different types of sexual abuse, totaling 195 types of abuse among the 73 respondents.

Only one person reported the first incidence of sexual abuse at age 17; the rest were aged 16 or younger. All were visually impaired when the first incident took place. Some respondents did not answer all the additional questions; hence, the number of answers may differ in some of the analyses.

Visually impaired versus sighted children

The Norwegian legal system refers to three types of sexual abuse with physical contact, with an increasing degree of seriousness. To conform to this categorization, the five types of abuse in the questionnaire were reduced to reflect these three categories.

- Erotic kissing and fondling was labeled *erotic*

contact without genital touching.

- Touching another person's genitals or being touched on one's own genitals in an erotic way was labeled *erotic genital touching*.
- Oral intercourse and coerced anal/vaginal intercourse were labeled *intercourse*.

Table 1 lists the sexually abused persons in the sighted comparison group and in the visually impaired group by gender according to the most serious form of abuse (percentages of the respective groups). Only 1% of the visually impaired respondents (both genders) reported erotic kissing as the most serious form, compared to 6% and 3% of the sighted girls and boys, respectively. The differences between the two groups increased with the increasing severity of abuse. Intercourse was reported by about three times as many visually impaired respondents as sighted persons. However, the difference between the two groups is significant only among the boys. If the less-serious "erotic kissing" is excluded, the difference between the two groups is significant for both genders ($p < .001$).

Characteristics of childhood sexual abuse

The age when the visually impaired victims first experienced contact sexual abuse varied from 3 to 17 years. The respondents who reported unwanted kissing as the most serious form of abuse were aged 14–16 at the first incident. The more serious forms of abuse

started earlier. The mean age when erotic genital touching occurred for the first time was 7.4 years and for intercourse, 8.8 years. Half the respondents who reported unwanted erotic genital touching or intercourse as the most serious form of abuse were aged 5–10 and 4–10, respectively, when the first incident occurred. Four persons reported serious sexual abuse that lasted 9–13 years.

Most of the victims (70%) reported that the sexual abuse took place mainly in their own or the offender's homes. The rest of the abusive events took place at school (14%); in a bus or car (6%); or in "other places, such as in a cabin, in the woods, or at a camp" (10%).

About half the victims (48%) reported that they were persuaded or enticed by the perpetrators to take part in the sexual incidents, with or without being offered gifts or alcohol. About every third victim (32%) reported that the offender used violence or force. Some (15%) thought that the abuser took advantage of a superior position. Despite the emphasis in the questionnaire on reporting incidents that included force, persuading, squeezing, or seducing, 5% regarded the reported sexual event to be voluntary, although some later realized that they were deceived. Despite the low number of "voluntary" victims, 39 were told by their abusers that they, the children, were the active ones who wanted the abuse to happen.

Most of the victims had negative reactions after the

sexual abuse. Thirty-five victims (48%) described the most serious instance as “terrible,” 13 (18%) described it as “very unpleasant,” 16 (22%) described it as “unpleasant,” and 9 (12%) described it as “OK/didn’t matter.” The last group consisted mostly of those who answered that the event was voluntary.

Two-thirds of the victims did not tell anybody about the abuse. A few (8%) had tried to tell about it but were not believed. The rest of the victims told their parents, siblings, or friends. Only three of the cases were reported to the authorities.

The perpetrators

The age of the abusers at the time of the first incident varied from 9 to 70, with a mean age of 33 years. The age was independent of the type of abuse or if the victim was a girl or a boy. Most of the victims (87%) reported one or more male perpetrators, 6% reported one or more female perpetrators, and 7% reported both male and female perpetrators. Boys more often than girls reported that their abusers were female. Twenty-four percent of the victims were abused by more than one person.

Some respondents gave more than one answer when asked how they knew the perpetrators. The most commonly reported abuser was an acquaintance (44%), followed by a family member or relative (27%), which may represent incest within families. Staff at school

and friends at school were responsible for 12% of the cases, while for 4%, the abuser was unknown. About 1 in 10 of the abusers was visually impaired (see [Table 2](#)).

Possible protective or risk factors

Table 1 showed that to be visually impaired during childhood is a risk factor for sexual abuse. This risk factor was confirmed when the 333 persons who became visually impaired before age 18 were compared with the 169 who became visually impaired after age 18. While 21.9% of the former group were sexually abused during childhood, only 14.8% in the latter group were. If only sexual abuse with genital touching or intercourse is included, the risk of abuse was nearly doubled for those who are visually impaired during childhood (21% versus 12%, $p = .04$). Furthermore, the difference was significant for both sexes ($p = .04$).

For the 333 respondents who became visually impaired before age 18, no difference in the risk of sexual abuse was found that could be related to the school setting. Students who attended neighborhood schools (78%), schools for students who are visually impaired (9%), or both school settings (13%) were equally abused. Those who lived in foster care were more often abused, but the number was too small to draw any conclusion.

There was a correlation between sexual abuse and the

respondent's stated satisfaction with the school situation, since those who were abused reported more discontent during the school years ($p = .01$). The children who were sexually abused more often than the others complained that they were bullied at school ($p = .02$). However, there was no statistical difference between the abused and the nonabused respondents in reported friendships at school or at home. In addition, when asked if they knew about other boys and girls who were sexually assaulted, 1 in 10 respondents said yes. Those who were abused themselves more often knew about others.

Discussion

This study found that adults who were visually impaired during childhood were more often sexually abused than were sighted children. This greater prevalence was found both in comparison to a sighted control group in the general population (Tambs, 1994) and in a comparison between the respondents who became visually impaired after age 18. The difference in prevalence within the visually impaired group and the sighted groups increased with the increasing severity of the abusive event.

These findings are in agreement with those of earlier studies of sexual abuse among persons with disabilities from North America (Chamberlain et al., 1984; Crosse, 1998; Sobsey & Mansell, 1994; Sullivan et al., 1987) and from Scandinavia (Kvam, 2004).

The male respondents reported childhood sexual abuse far more often than might be expected from the results of the control study. This result is in agreement with Sullivan et al. (1987), who found that the prevalence of sexual abuse among deaf boys was similar to that among deaf girls. Also Sobsey et al. (1997) found more sexual abuse among disabled boys than among nondisabled boys, as did Kvam (2000, 2004).

Some methodological difficulties with the study should be addressed. First, as in all retrospective studies and questionnaire surveys, details may have been forgotten or distorted. A questionnaire cannot guarantee that the questions and answers are in accordance with the intended purpose. This may be especially true when the reader is disabled, but this deficit is probably compensated for to a large degree by the different modes of presenting the questionnaire. Furthermore, there is no reason to believe that people who are visually impaired will remember more or less than will sighted people.

The second limitation was the use of a comparison group. The questionnaires in the two studies did not use exactly the same wording, but the aims and the content of the questions were the same and should not have influenced the answers.

The third limitation had to do with the response rates of the two studies (38.5% in the study of the

respondents who were visually impaired and 37% in the comparison group). The low response rate weakens the validity of both studies. The information given to the respondents with visual impairments four months before the study was conducted was probably important in order to prepare them for the sensitive content of the questionnaire. At the same time, it may have led to a bias in the responses.

Both studies found no difference in the prevalence of abuse between those who answered immediately after receiving the questionnaire and those who answered later or after the reminder. Neither of the two studies could estimate the prevalence and nature of possible sexual abuse among those who did not answer.

An additional uncertainty concerning the response rate in the study of the respondents with visual impairments is related to the questionnaires that were returned with the first page crossed out. Some of these questionnaires may represent people who were unwilling to answer the questions, not necessarily people who were unable to answer them.

This study was the first to collect data from a national sample of adults with visual impairments and thus to provide a population-based perspective on childhood sexual abuse in this group. Despite some methodological reservations, the study provides important new information. The study found a greater occurrence of sexual abuse for disabled children. The

abusers of the children with visual impairments were much the same as those who abuse children in the general population—family members, acquaintances, and friends—and, in contrast to the findings of Sobsey and Mansell (1994), this study did not find that caregivers were frequent perpetrators.

Within the group of visually impaired respondents who had been abused in childhood, two background variables were significantly different from those of the children who had not been abused. Those who had been sexually abused were more likely to indicate that they were discontented during their school years and had been bullied at school. However, it is not known whether they were discontent and bullied at school because they were sexually abused, or vice versa.

Having a friend is supposed to be a protective factor against sexual abuse (Tambs, 1994). However, in this study, about the same percentage of abused and nonabused respondents with visual impairments group reported having a friend at school and/or at home, so the protective factor of friendship was not confirmed. In contrast to the results of other studies (Kvam, 2004; Rindfleisch & Rabb, 1984; Sobsey & Mansell, 1994; Sullivan et al., 1987), I did not find more sexual abuse among those who attended a boarding school than among those who attended a neighborhood school.

It is important that parents, teachers, and caregivers learn about the range of signals that children may show

that they are unhappy. Teachers should be especially aware of children being bullied. Children with disabilities react in the same way as do those who are not disabled when they are unhappy, and adults have to find the reasons for the dissatisfaction. It is easy to explain a change in the behavior of a child who is visually impaired as being related to the disability, thus ignoring the sources of dissatisfaction. All children who are visually impaired need to be provided with adapted prevention programs in which they learn about their bodies, about natural sexuality, and to whom they may confide. They should not have to bear the extra burden of sexual abuse.

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