

Descriptive Analysis of the Characteristics of Proven Cases of Sexual Abuse in Victims  
With Intellectual Disabilities and Children With Typical Development in Spain

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## **Abstract**

Children and people with intellectual disability (ID) are considered to be highly vulnerable and in need of special protection against sexual abuse (SA). The objective of this work was to analyze the characteristics of cases of SA in children with typical development and in people with ID in Spain. To do so, 25 cases of each type that had been investigated by specialized groups of the Judicial Police of the Spanish Civil Guard and that had been classified as proven and confirmed by police and forensic-medical evidence were analyzed. The results allowed the establishment of the typical minor victim profile as Spanish female (76%), with an average age of 8.64 years. Typical victim with ID was characterized as being of Spanish, aged 20.28 years on average, without prior sexual experience, and similar percentages of males (40%) and females (60%). In both cases, the aggressor usually acted alone, was known to the victim, had an average age of 42 years, and without a history of sexual offenses. The most common child sexual crime was SA with penetration, practiced repeatedly, using strategies such as the use of force, authority, rewards, or secrecy. Victims with ID suffered sexual abuse with penetration, using force, authority, threats or blackmail. Finally, 36% of minors not disclose the events by only 8% of victims with ID. Spontaneity was found in the 40% first disclosure in both victims, with greater police evidence and greater recognition of guilt on behalf of the aggressors against victims without disabilities. Minors took an average of 26.26 days to report the facts, and victims with ID of 64.94. It is necessary to know more about these types of offenses to design appropriate prevention and detection programs.

## **Keywords**

sexual abuse, children, intellectual disability, forensic psychology, criminology

## **Introduction**

During the past decade, there have been increasing reports of cases of sexual abuse (SA) against minors and people with intellectual disability (ID). In most cases, the SA is not reported, which, together with the limited validity of the research methods, makes it impossible to estimate its true frequency. In reference to the prevalence rates of SA among the general population, significant variations have been found between different countries and cultures. However, the occurrence of this type of sexual offense is common to all societies. In Argentina, Bringiotti and Raffo (2010) determined that 19% of university students in Buenos Aires reported having suffered SA before the age of 19 years. In a cross-sectional study with students from six Chinese universities (Chen, Han, Lian, & Dunne, 2010), 24.8% of women and 17.6% of men reported one or more types of SA occurring before the age of 16 years. In India, Choudhry et al. (2018), analyzing 51 studies, found a prevalence of 3% to 39% in women before the age of 18 years and of 4% to 57% among men. In the first meta-analysis (Finkelhor, 1994), the 19 most rigorous investigations carried out in the United States, Canada, and England were analyzed, finding a prevalence of 20% in women and 10% in men. Barth, Bermetz, Heim, Trelle, and Tonia (2013) investigated the prevalence of SA in children by analyzing 55 studies in 24 countries, finding rates of 8% to 31% in girls and 3% to 17% in boys. Similar figures were obtained by a meta-analysis by Pereda, Guilera, Forns, and Gómez-Benito (2009b) that included 65 studies with information on SA in 22 countries, resulting in 19.7% of

women (19.2% without extreme values) and 7.9% of men (7.4% without extreme values) having suffered some type of SA before the age of 18.

Research carried out in Spain shows that between 7% and 33% of women, and between 3% and 15% of men have suffered SA during childhood (López, Carpintero, Hernández, Martín, & Fuertes, 1995), with an average prevalence of around 20% in women and less than 10% in men (Cantón-Cortés, 2014; Pereda, 2016; Pereda, Guilera, Forns, & Gómez-Benito, 2009a). Pereda and Forns (2007) evaluated the prevalence of SA in a sample of university students in Barcelona and found that 17.9% of the total students reported having suffered SA with physical contact before the age of 18 (19% in women and 15.5% in men), of which 14.9% declared having suffered this experience before the age of 13 years and the other 3% between the ages of 13 and 18 years. A higher prevalence was found in a subsequent investigation with a sample of university students from Granada (Cantón-Cortés & Justicia, 2008) in which 9.46% of the participants were victims of SA (9.96% of the women and 6.5% of men), although this difference could be due in part to the fact that it was taken as a reference to have been a victim of SA before the age of 13. Two years later, extending the age limit to 18 years, Cortés, Cantón, and Cantón-Cortés (2011) found an increase in prevalence with 269 (12.5%) Granada university students being victims of SA (13.2% of women and 8.4% of men).

In any case, these prevalence studies carried out at national and international level show a high number of SA victims, even at the lowest rates, and therefore, childhood SA should be considered a widespread problem in many countries (Chiu et al., 2013; Pereda et al., 2009a). Despite the high prevalence rates across both genders, the results of studies on the occurrence of SA in childhood show a higher frequency in women than in men, being the risk of abuse 2 to 3 times higher in girls than in boys (Cortés et al., 2011; Pereda et al., 2009b). However, some international exceptions have been found, such as the Indian meta-analysis cited above (Choudhry et al., 2018). Also, Madu and Peltzer's (2001) research with South African students found a prevalence of 60% for men and 53.2% for women. Figueiredo et al.'s (2004) study found a small difference between the prevalence of men and women in favor of the latter (2.7% in women, 2.6% in men). A meta-analysis of 36 articles with a total of 125 independent samples from a Chinese population (Ma, 2018), resulting in a prevalence of SA in women of 8.9% and of 9.1% in men. A possible explanation for this inversion of the rates is the great value given to the chastity of women within the different cultures, and with it, the greater supervision and safeguarding of girls and/or a greater propensity to hide cases of SA in girls. The fact that some studies do not show significant gender differences, and even that the prevalence of SA in men is found to be greater than in women, may be due to the general definitions of SA used; the social, cultural, and economic differences of the samples used; and so on.

Analyzing the rest of the characteristics of the victims of SA, it was found that in Spain, the average age of the first abuse is between 8 and 13 years (Cortés et al., 2011; López et al., 1995; Pereda & Forns, 2007). The majority consist of touching (without penetration). The figures are distributed with equity between victims who claim to have suffered a single abuse and those who report suffering abuse on more than one occasion or continued abuse (Cortés et al., 2011; Finkelhor, 1994; López et al., 1995). Generally, the events take place in the victim's or the aggressor's home, taking advantage of care situations (Cortés et al., 2011).

In relation to the aggressors, in the great majority of cases, they are male (Cortés et al., 2011; López et al., 1995). Among the strategies used to commit the abuse, the most common is deception, followed by play and affection (Cortés et al., 2011; López et al., 1995). Threats and requests for secrecy are the most frequently used to guarantee silence on behalf of the victim (Cortés et al., 2011) or to commit the abuse in victims older than

13 years of age (Pereda & Forns, 2007). Generally, the aggressors can be either known or unknown to the victim, in equal measure (López et al., 1995), although differences have been observed in studies that divide the sample by age groups, such as Pereda and Forns's (2007) study. This study reported that most abuses occurring before 13 years of age are committed by acquaintances while abuses occurring between the ages of 13 and 18 years are committed by a greater number of unknown aggressors.

The differences in results between studies may be due to the variability of the occurrence of new cases between different time periods, the delimitation of the SA term, the attitude toward the crime report of each country, the selected sample, and the multiple research methodologies used. In this way, the results obtained are not always comparable or generalizable from one country to another (Stoltenborgh, Van Ijzendoorn, Euser, & Bakermans-Kranenburg, 2011). On the other hand, most research has focused on studies conducted with samples of university students through the use of surveys, where no distinction is made between different types of SA, which could lead to a bias in the results. This sample of participants is not representative of the general population due to their level of awareness about this type of crime, but also the context of the university may favor the tendency to report this type of offenses. It cannot be ruled out that the university students participating in these surveys have received some type of training on this problem, due to the fact that many of them are enrolled in a psychology degree.

In this study, contrasted cases of SA have been analyzed based on police or forensic evidence. The sample of the study at hand is composed of minors and people with ID victims of SA, as this population is more likely to be victims of sexual crimes (Fyson & Cromby, 2010; González, Cendra, & Manzanero, 2013; Horner-Johnson & Drum, 2006; Sullivan & Knutson, 2000; Westcott & Jones, 1999). People with ID are considered more vulnerable because of their dependence and need for care, which causes a loss of privacy. In addition, they may have deficits in social and communicative skills, preventing them from stopping the abuse or reporting it a posteriori. They often lack sexual education and the ability to discern between good and evil. These factors favor an attitude of obedience and submission, making victims more accessible to the aggressors (Verdugo, Alcedo, Bermejo, & Aguado, 2002). In a Spanish study with 2,099 people with disabilities involved in Civil Guard actions between 2008 and 2010, 46.64% had ID, with 59.55% of them being victims, of which 11% were victims of abuse and sexual aggressions (González et al., 2013).

The objective of this study is to determine the characteristics of the investigated cases of SA that were considered credible among minor victims and victims with ID from cases investigated by specialized groups of the Judicial Police of Civil Guard.

## **Method**

### *Design*

A descriptive study of the characteristics of the cases considered as credible by the Criminal Behavior Analysis Unit ("Sección de Análisis del Comportamiento Delictivo," SACD) and the Minor-Female Unit ("Equipo Mujer Menor," EMUME) of the Civil Guard Judicial Police was carried out. To do so, the following variables were analyzed (see Table 1).

The selection of variables analyzed was made based on the review of previous studies, where the most relevant characteristics of SA cases were mentioned. Afterward, in the framework of the Holistic procedure for the evaluation of the testimony (HELPT) (Manzanero & González, 2015) for the investigation of SA cases, the pertinence of each variable was discussed with the experts of the SACD Unit.

**Table 1.** Description of Variables in the Study.

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Characteristic of the Victim
Chronological age
Gender
Nationality
Manifested anxiety
Previous sexual experience
Subsequent psychological care
Dysfunctional family environment
Characteristic of the aggressor/s
Number of aggressors
Familiarity with the victim
Age of the aggressor
History of sexual offenses
Characteristic of the event
Frequency
Place of the event
Type of event
Type of abuse
Use of force/authority
Threat
Deceit/deception
Blackmail
Rewards/gifts
Confidentiality request/secretcy
Witnesses
Characteristic of the testimony
Disclosure
Delay between the first episode and the testimony
Delay between the last episode and the testimony
Post-event information
Multiple recall
Memory aids
Place of interview
Type of interview
Characteristic of the judicial procedure
Type of evidence
Arrest of the aggressor
Recognition of guilt

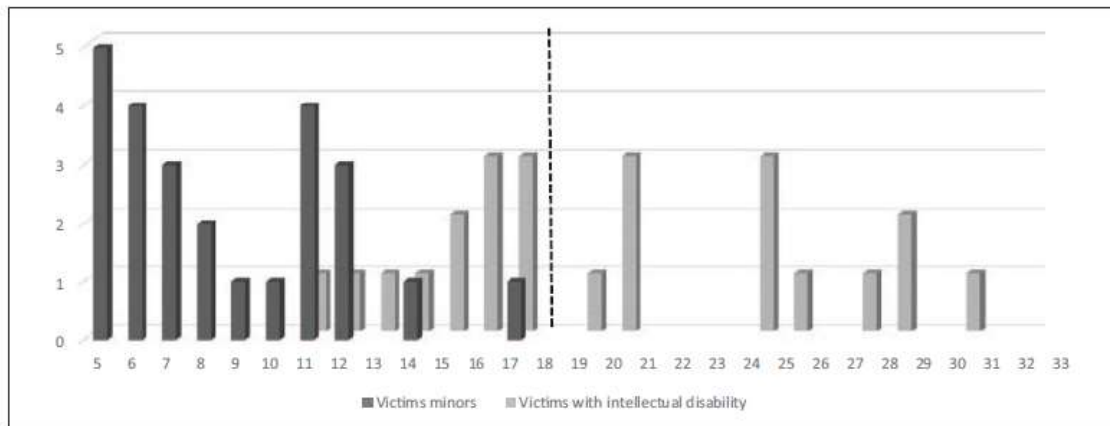
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### *Participants*

The participant selection was carried out through a representative sampling of 50 cases of the total cases of SA investigated by the SACD and EMUME Judicial Police units of the Civil Guard between 2005 and June 2018 that possessed sufficient documentation to be the subject of analysis, a recording of the statements given by the victims and the police decision of “proved case” based on police or forensic evidence. Those cases in which no objective evidence was found that provided evidence of the existence or nonexistence of the sexual offense were excluded.

Of the 50 cases analyzed, 25 involved victims with ID. There were 19 girls and six boys in the cases of victims without disabilities, and 15 women and 10 men among the sample of victims with disabilities. The mean age of the sample with ID was 20.28

years ( $SD = 6.66$ ), and of 8.64 years ( $SD = 3.29$ ) for the sample of minors without disability. In Figure 1, the frequency by age can be observed.



**Figure 1.** Age frequencies of the victims.

*Note.* Dotted line points out the limit of legal adult age in Spain.

The victims of the cases considered in the study were in no way psychologically evaluated by the police officers. Victims were considered to have an ID because they met one of the following requirements: having a disability certificate recognized by Spanish institutions, being under the care of an institution responsible for the well-being of persons with disabilities, or having relatives or guardians provide some documentation specifying the condition of ID. The type and degree of disability of the victims is unknown. As persons with mild ID represent 80% of persons with ID (Fletcher, Loschen, Stavarakaki, & First, 2007), we can assume this condition. In the same direction, the immense majority of people considered as having an ID may fit into what we might call “nonspecific origin.”

### *Procedure*

After the sample selection, the data from the documentation related to the procedures carried out in each case was read and collected, and all the interviews conducted by the professionals from the SACD and EMUME were viewed. All variables were recorded on an Excel spreadsheet designed for the purpose of systematic observation of influence factors, by viewing all the interviews that were recorded on video and the reading of all the procedures carried out in each case. To ensure confidentiality of the cases, the viewing of the videos and the analysis of the proceedings were carried out on the computer equipment of the office assigned to the police unit. The registration and codification of the personal data of the victims were carried out by means of an alphanumeric code. The data collected were those strictly necessary to characterize the sample (age, sex, origin, etc.). All the data were protected and subject to the guarantees provided by law 15/1999 of 13 December and will never be transmitted to third parties or institutions.

### *Analysis*

Given the descriptive nature of this study, we reported for all variables listed in Table 1 the percentages of occurrence (in dichotomous variables) and for each category (in polytomous variables) within each group (i.e., minor victims and victims with ID). In addition, statistical tests have been incorporated to contrast the equality of proportions to identify, within each group, those variables that present statistically significant differences between their categories.

## Results

The results were analyzed separately for minor victims and victims with ID. These results will be presented for each of the five categories of variables that appear in Table 1: characteristics of the victim, aggressor/s, event, testimony, and judicial procedure.

First, the typical profile of the SA minor victim was characterized as being a Spanish (84%) female (76%) of 8.64 years ( $SD = 3.29$ ), without any sexual experience (92%), manifested anxiety (16%), or psychological care (8%) prior to the interview. No significant difference was observed between the percentages of cases of dysfunctional families (60%) versus functional families (40%). On the other hand, the typical profile of the victim with ID was characterized as being of Spanish nationality (84%), aged 20.28 years on average ( $SD = 6.66$ ), without prior sexual experience (80%), who received little psychological care (28%), and showed anxiety at the time of the interview (8%). No significant differences were observed between the percentages of cases who live in a dysfunctional family environment (40%) or functional family environment (60%) nor were significant differences observed in the percentages of males (40%) and females (60%) (see Table 2).

**Table 2.** Characteristics of the Victim.

	Minor Victims	<i>p</i>	Victims With ID	<i>p</i>
Mean chronological age	8.64 ( $SD = 3.29$ )	—	20.28 ( $SD = 6.66$ )	—
Gender				
Male	24.0%	.015	40.0%	.424
Female	76.0%		60.0%	
Nationality				
Spanish	84.0%	.001	84.0%	.001
Others	16.0%		16.0%	
Manifested anxiety	16.0%	.001	8.0%	.001
Previous sexual experience	8.0%	.001	20.0%	.004
Psychological care	8.0%	.001	28.0%	.043
Family environment				
Dysfunctional	60.0%	.424	40.0%	.424
Functional	40.0%		60.0%	

Note. ID = intellectual disability.

Second, Table 3 shows the characteristics of the aggressors in each of the groups of SA victims considered here. In minor victims, abuses were committed by a single aggressor (96%), known to the victim (60%), aged 43.24 years on average ( $SD = 17.95$ ), and without a history of sexual crimes (76%). In the other group, victims with ID, abuses were committed by a single aggressor (92%), known to the victim (60%), aged 41.6 years on average ( $SD = 16.38$ ), and without a history of sexual offenses (84%). In the few cases in which there was more than one aggressor, the same aggressors were involved in the different episodes of abuse that might have taken place.

**Table 3.** Characteristics of the Aggressors.

	Minor Victims	<i>p</i>	Victims With ID	<i>p</i>
Number of aggressors				
1 aggressor	96.0%	.001	92.0%	.001
2 aggressors	4.0%		8.0%	
Familiarity				
Non-identifiable	8.0%	.001	8.0%	.001
Identifiable	60.0%		60.0%	
Familiar	32.0%		32.0%	
Mean age	43.24 ( <i>SD</i> = 17.95)	—	41.60 ( <i>SD</i> = 16.38)	—
History of sexual offenses	24.0%	.015	16.0%	.001

*Note.* ID = intellectual disability.

**Table 4.** Characteristics of the Event.

	Minor Victims	<i>p</i>	Victims With ID	<i>p</i>
Frequency of the event				
Once	16.0%	.001	36.0%	.230
More than once	84.0%		64.0%	
Place of event				
Non-familiar	60.0%	.424	60.0%	.424
At home	40.0%		40.0%	
Type of event				
Abuse	52.0%	.008	76.0%	.001
Aggression	0.0%		4.0%	
Others (pornography, exhibitionism, etc.)	48.0%		20.0%	
Type of abuse				
Touching	24.0%	.004	28.0%	.001
Penetration	64.0%		68.0%	
Others	12.0%		4.0%	
Use of force/authority				
Threats	32.0%	.108	24.0%	.015
Deceit/deception	24.0%	.015	32.0%	.108
Blackmail	32.0%	.108	24.0%	.043
Rewards	40.0%	.424	40.0%	.424
Secrecy	48.0%	1.00	60.0%	.424
Witnesses	52.0%	1.00	48.0%	1.00

*Note.* ID = intellectual disability.

Third, in relation to the characteristics of the event (see Table 4), minor victims suffered abuse on more than one occasion (84%), with penetration in its majority (64%) and the type of event was mainly abuse (52%) despite a high number of cases in which other types of events occurred (pornography, exhibitionism, etc.) or several of these (48%).

However, there are no significant differences regarding where the event occurred: at home (40%) or nonfamily context (60%). No differences were found in relation with the use of force/authority (44%), with rewards (40%), with the presence of witnesses (52%), or with requesting secrecy (48%). On the other hand, victims with ID suffered SA (76%) with penetration (68%), for which the aggressor used force or authority (72%), and with a significantly low percentage of appearance threats (24%) and blackmail (24%). No significant differences were observed between the percentages of cases who are attacked on more than one occasion (64%) or in the place where the event occurred: at home (40%) or nonfamily context (60%). No differences were found in relation with rewards (40%), with the presence of witnesses (48%), or with requesting secrecy (60%).

Fourth, the variables of the system were analyzed in two subgroups: those related to the statement of the victim (see Table 5) and those related to the evidence of the events (see Table 6). In the case of minor victims, no significant differences were observed in the disclosure of the facts: mostly spontaneous (44%), followed closely by the investigation of the facts by a third party without requiring disclosure on behalf of the victim (36%) and disclosure through questions (20%). They took 26.26 days ( $SD = 29.84$ ) to report the facts. They were asked about the facts in multiple occasions during the judicial and police procedures (72%). The interview practiced by the professionals of the Judicial Police was carried out with hardly any differences within a nonfamiliar (52%) and a familiar (48%) context, using memory aids (88%) and to a greater extent with specific questions (60%) and few spontaneous recalls (40%). In the case of victims with ID, they revealed the facts when asked by a third party (52%) or spontaneously (40%). It took them an average of 64.94 days ( $SD = 107.52$ ) to report the abuse; the recall of information was practiced on several occasions and before different professionals (96%). The interview by the professionals of the Judicial Police was carried out almost equally in a non-familiar context (56%) or in a family context (44%), using memory aids (92%) and specific questions (76%).

Finally, with respect to the evidence of the crime (see Table 6), the selection of cases was carried out based on the criterion that there was evidence to show the reality of the facts. Minor victims presented more police evidence (88%), less medical-forensic evidence (12%), and more arrest of aggressor/s (84%). In this group, there are no significant differences between the percentages of cases in which the aggressor recognizes guilt (40%) or does not recognize it (60%). However, in the cases of victims with ID, it is usual that the aggressor/s do not recognize guilt (96%). No significant differences appear between the type of evidence: medical-forensic (40%) versus police (60%). In these cases, there are no significant differences in the percentages of arrest of the aggressor/s (68%); despite the existence of a tendency, this difference does not reach the threshold of statistical significance.

**Table 5.** Variables of the Judicial Procedure: The Testimony.

	Minor Victims	<i>p</i>	Victims With ID	<i>p</i>
Delay until statement (days)	26.26 ( <i>SD</i> = 29.84)	—	64.94 ( <i>SD</i> = 107.52)	—
First disclosure				
No	36.0%	.326	8.0%	.021
Spontaneous	44.0%		40.0%	
Questions	20.0%		52.0%	
Post-event information	28.0%	.043	40.0%	.424
Multiple recall	72.0%	.043	96.0%	.001
Memory aids	88.0%	.001	92.0%	.001
Place of interview				
Familiar	48.0%	1.00	44.0%	.690
Non-familiar	52.0%		56.0%	
Type of interview				
Spontaneous recall	40.0%	.424	24.0%	.015
Specific questions	60.0%		76.0%	

*Note.* ID = intellectual disability.

**Table 6.** Variables of the Judicial Procedure: The Evidence.

	Minor Victims	<i>p</i>	Victims With ID	<i>p</i>
Type of evidence				
Medical/forensic evidence	12.0%	.001	40.0%	.424
Police evidence	88.0%		60.0%	
Recognition of guilt	40.0%	.424	4.0%	.001
Arrest of the aggressor/s	84.0%	.001	68.0%	.108

*Note.* ID = intellectual disability.

## Conclusion

Despite the limitations found due to the fact that not all cases of SA are reported, and the debated validity of the research methods used, the prevalence figures of SA found in the different investigations carried out at national and international level continue to be alarming, with victims of SA representing between 7% and 25% of the general population samples analyzed. Particularly, among the most vulnerable groups due to their high probability of being victims of sexual crimes are those included as sample for this study, minors and people with ID.

Analyzing the characteristics of SA proved cases investigated by the specialized groups of the Judicial Police of the Civil Guard; only among victims without disabilities, a higher SA commission was maintained toward female victims, as is concluded by several studies on the prevalence of SA showing a frequency that doubles or triples in the case of women or girls (Cortés et al., 2011; Pereda et al., 2009b). The underage victims without disabilities were abused at around the age of 9 years, thus supporting the data obtained by other investigations that established the average age of the first abuse between 8 and 13 years (Cortés et al., 2011; López et al., 1995; Pereda & Forns, 2007). In the case of victims with disabilities, the average age was 20 years.

In relation to the characteristics of the aggressors, it was found that for both types of victims, aggressions were usually committed by a single aggressor, without a history of previous sexual crimes, and being in most cases identifiable or recognizable by the victim

as a person from their immediate environment (9 out of 10 aggressors were identified, with 3 out of 10 belonging to the direct family environment of the victim). These data, far from counteracting the vulnerability of these groups, actually increase it, as it means that the aggressors are known to the victims and are people in whom they place their trust, favoring the aggressor's access to the SA and making it difficult for the victim to identify the behavior as abusive at the time and the subsequent disclosure or confession. Previous research (Pereda & Forns, 2007) has found that the probability of being an unknown aggressor is a function of the victim's age, with abuses by known aggressors being committed mostly before the age of 13 years and by unknown aggressors between the ages of 13 and 18 years. In most cases, the aggressors lacked criminal records of SA. The data on the characteristics of the event show that, in both types of victims, repeated SA occurred more frequently than that performed in isolation (6 out of 10 victims with disabilities and 8 out of 10 victims without disabilities were abused in more than one occasion). Previous research has found no differences in prevalence rates between those victims who report a specific abuse and those who report continued abuse (Cortés et al., 2011; Finkelhor, 1994; López et al., 1995). No differences were found regarding where the events occurred (family vs. nonfamily places) in both minors and ID victims. Previous studies (Cortés et al., 2011) have shown most of the events taking place in the residence of the victim or the aggressor.

With regard to the type of event, it was observed that episodes of abuse without violence prevailed against sexual assault, although the SA committed was carried out with penetration (6 or 7 out of 10 victims of both cases had suffered some type of abuse with penetration). However, in victims without disabilities, no differences were observed between the frequencies related to cases of abuse and other sexual crimes (such as pornography, exhibitionism, harassment, grooming, or several of these crimes), which could be related to a greater use of social networks, technological equipment, and so on, together with early access and poor supervision. To carry out the crimes, in the case of the minors, a great variety of procedures were used without any of them being used more than the other. In victims with ID, it was mainly the use of force, authority, threats, or blackmail. Violence was the least used strategy in both cases, becoming almost nonexistent among victims without disabilities. To ensure the victim's silence, the aggressors used the request of secrecy followed by threats, the frequency of both strategies being similar among victims without disabilities, that is, the aggressors of victims without disabilities would counteract the loss of effectiveness in the request for secrecy with the formulation of threats. These data are congruent with those obtained in previous research (Cortés et al., 2011; López et al., 1995; Pereda & Forns, 2007).

With regard to the variables of the Judicial Procedure, the statements of victims with ID were delayed almost 3 times more than in victims without disabilities. In relation to the victim's statement, there was a greater frequency of not revealing the facts in victims without disabilities, which could be due to the greater effectiveness of the strategies used to guarantee their silence, with the crime being finally known thanks to third persons who had witnessed the facts or through police intervention. Similarly, a recently published meta-analysis (Azzopardi, Eirich, Rash, MacDonald, & Madigan, 2018) showed that more than a third of minors do not reveal SA in forensic contexts, with younger victims being the least likely to do so.

In the case of victims with ID, probably due to communication deficits (or beliefs about it) and their high vulnerability, suggestive interview methods and multiple recall were more frequently used, with a greater use of memory aids and specific questions and finding a lower frequency of free recalls than in victims without disabilities. Regarding the place where the interview was conducted, no differences were found, occurring in

both familiar settings (at home or at usual referral center of the victim) and in non-familiar (judicial and police units) settings.

According to the variables that intervened based on the evidence collected, the existence of disability influences the frequency of medical-forensic evidence, due to a greater frequency of physical abuse and penetration. Police evidence rates are higher in victims with ID. Regarding the recognition of guilt, it multiplied by ten in the case of victims without disabilities. Although this study has not been able to find information in this regard, a cause of the low percentage of detainees and confessions in the cases of victims with ID could be due to the fact that some of the aggressors were also people with ID. In the study on prevalence of SA in Spain in which people with ID were involved (González et al., 2013) was found that 3% of the aggressors with ID had committed sexual crimes (approximately 45 cases per year). Other possible causes can be the social perception of disbelief of people with ID and the external motivation of the reduction of the sentence imposed for sexual crimes that count with objective police evidence such as conversations with the victim through social networks, audio-visual or photographic material intervened, and so on.

In summary, taking into account the high prevalence rates of SA at present, the prevention and detection of SA is a global objective. Therefore, the differences between victims with and without ID must be taken into account, as can be observed from the results of our study, where it is evidenced that the particular characteristics of each type of victim influences the type of event, the strategies used to commit it, and the factors related to the evidence and statements of the victims.

#### *Limitations of the Study*

The main limitation of the study is the lack of information on the type and degree of disability of victims with ID. One of the recommendations for police interventions with this type of victim would be to take into account the specific disability of the victim. In this way, it would be possible to carry out future studies on the relationship between the degree and type of ID and vulnerability in cases of SA.

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## References

- Azzopardi, C., Eirich, R., Rash, C. L., MacDonald, S., & Madigan, S. (2018). A metaanalysis of the prevalence of child sexual abuse disclosure in forensic settings. *Child Abuse & Neglect*, *93*, 291-304. doi:10.1016/j.chiabu.2018.11.020
- Barth, J., Bermetz, L., Heim, E., Trelle, S., & Tonia, T. (2013). The current prevalence of child sexual abuse worldwide: A systematic review and meta-analysis. *International Journal of Public Health*, *58*, 469-483. doi:10.1007/s00038-012-0426-1
- Bringiotti, M. I., & Raffo, P. E. (2010). Abuso sexual infanto-juvenil. Prevalencia y características en estudiantes universitarios de la ciudad de Buenos Aires [Child and adolescent sexual abuse. Prevalence and characteristics in university students of the city of Buenos Aires]. *Revista Derecho de Familia*, *46*, 293-305.
- Cantón-Cortés, D. (2014). Prevalencia y características de los abusos sexuales a niños [Prevalence and characteristics of child sexual abuse]. *Archivos de Criminología, Seguridad Privada y Criminalística*, *12*, 1-7.
- Cantón-Cortés, D., & Justicia, F. (2008). Afrontamiento del abuso sexual infantil y ajuste psicológico a largo plazo [Coping with child sexual abuse and long-term psychological adjustment]. *Psicothema*, *20*, 509-515.
- Chen, J. Q., Han, P., Lian, G. L., & Dunne, M. P. (2010). Prevalence of childhood sexual abuse among 2508 college students in 6 provinces of China. *Zhonghua Liu Xing Bing Xue Za Zhi*, *31*, 866-869.
- Chiu, G. R., Lutfey, K. E., Litman, H. J., Link, C. L., Hall, S. A., & McKinlay, J. B. (2013). Prevalence and overlap of childhood and adult physical, sexual, and emotional abuse: A descriptive analysis of results from the Boston Area Community Health (BACH) Survey. *Violence and Victims*, *28*, 381-402.
- Choudhry, V., Dayal, R., Pillai, D., Kalokhe, A. S., Beier, K., & Patel, V. (2018). Child sexual abuse in India: A systematic review. *PLoS ONE*, *13*(10), e0205086. doi:10.1371/journal.pone.0205086
- Cortés, M. R., Cantón, J., & Cantón-Cortés, D. (2011). Naturaleza de los abusos sexuales a menores y consecuencias en la salud mental de las víctimas [Characteristics of sexual abuse of minors and its consequences on victims' mental health]. *Gaceta Sanitaria*, *25*, 157-165.
- Figueiredo, B., Bifulco, A., Paiva, C., Maia, A., Fernandes, E., & Matos, R. (2004). History of childhood abuse in Portuguese parents. *Child Abuse & Neglect*, *28*, 669-682. doi:10.1016/j.chiabu.2003.11.021
- Finkelhor, D. (1994). The international epidemiology of child sexual abuse. *Child Abuse & Neglect*, *18*, 409-417. doi:10.1016/0145-2134(94)90026-4
- Fletcher, R., Loschen, E., Stavrakaki, C., & First, M. (Eds.). (2007). *Diagnostic Manual—Intellectual Disability (DM-ID): A textbook of diagnosis of mental disorders in persons with intellectual disability*. Kingston, NY: NADD Press.
- Fyson, R., & Cromby, J. (2010). Memory, sexual abuse and the politics of learning disability. In J. Haaken & P. Reavey (Eds.), *Memory matters: Contexts for understanding sexual abuse recollections* (pp. 157-174). London, England: Routledge.

- González, J. L., Cendra, J., & Manzanero, A. L. (2013). Prevalence of disabled people involved in Spanish Civil Guard's police activity. *Research in Developmental Disabilities, 34*, 3781-3788. doi:10.1016/j.ridd.2013.08.003
- Horner-Johnson, W., & Drum, C. E. (2006). Prevalence of maltreatment of people with intellectual disabilities: A review of recently published research. *Mental Retardation and Developmental Disabilities Research Reviews, 12*, 57-69. doi:10.1002/mrdd.20097
- López, F., Carpintero, E., Hernández, A., Martín, M. J., & Fuertes, A. (1995). Prevalencia y consecuencias del abuso sexual al menor en España [Prevalence and consequences of child sexual abuse in Spain]. *Child Abuse & Neglect, 19*, 1039-1050. doi:10.1016/0145-2134(95)00066-H
- Ma, Y. (2018). Prevalence of childhood sexual abuse in China: A meta-analysis. *Journal of Child Sexual Abuse, 27*, 107-121. doi:10.1080/10538712.2018.1425944
- Madu, S. N., & Peltzer, K. (2001). Prevalence and patterns of child sexual abuse and victim-perpetrator relationship among secondary school students in the northern province (South Africa). *Archives of Sexual Behavior, 30*, 311-321. doi:10.1023/A:1002704331364
- Manzanero, A. L., & González, J. L. (2015). A holistic model for the evaluation of the testimony (HELPT). *Papeles del Psicólogo, 36*, 125-138. Retrieved from <http://www.papelesdelpsicologo.es/English/2568.pdf>
- Pereda, N. (2016). One in five? Child sexual victimization in Spain. *Papeles del Psicólogo, 37*, 126-133.
- Pereda, N., & Forns, M. (2007). Prevalencia y características del abuso sexual infantil en estudiantes universitarios españoles [Prevalence and characteristics of child sexual abuse in Spanish university students]. *Child Abuse & Neglect, 31*, 417-426. doi:10.1016/j.chiabu.2006.08.010
- Pereda, N., Guilera, G., Forns, M., & Gómez-Benito, J. (2009a). The international epidemiology of child sexual abuse: A continuation of Finkelhor (1994). *Child Abuse & Neglect, 33*, 331-342. doi:10.1016/j.chiabu.2008.07.007
- Pereda, N., Guilera, G., Forns, M., & Gómez-Benito, J. (2009b). The prevalence of child sexual abuse in community and student samples: A meta-analysis. *Clinical Psychology Review, 29*, 328-338. doi:10.1016/j.cpr.2009.02.007
- Stoltenborgh, M., Van Ijzendoorn, M. H., Euser, E. M., & BakermansKranenburg, M. J. (2011). A global perspective on child sexual abuse: Metaanalysis of prevalence around the world. *Child Maltreatment, 16*, 79-101. doi:10.1177/1077559511403920
- Sullivan, P. M., & Knutson, J. F. (2000). Maltreatment and disabilities: A population-based epidemiological study. *Child Abuse & Neglect, 24*, 1257-1273. doi:10.1016/S0145-2134(00)00190-3
- Verdugo, M. A., Alcedo, M. A., Bermejo, B., & Aguado, A. (2002). El abuso sexual en personas con discapacidad intelectual [Sexual abuse in people with intellectual disabilities]. *Psicothema, 14*, 124-129.
- Westcott, H. L., & Jones, D. P. (1999). Annotation: The abuse of disabled children. *The Journal of Child Psychology and Psychiatry and Allied Disciplines, 40*, 497-506.

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