Recognizing and Reporting Signs of Abuse and Neglect

This fact sheet has general information. It is not intended as legal advice. Only an attorney can give you legal advice to help you with a problem, or answer a question.

Abuse and Neglect

A 2013 national survey found that 7 out of 10 people with disabilities reported that they had been abused. Of those, 98% of those victims reported that they knew and trusted their abuser. This fact sheet details signs and symptoms that may be indicative of abuse for a person with a disability. If you see any of these signs, please report them immediately.

Signs of Physical or Sexual Abuse

Physical Indicators
• Unexplained bruises, scratches, marks or burns on the wrists, ankles, or other parts of a body
• Difficulty walking or sitting
• Sexually transmitted infections (STI)
• Ulcers
• Unexplained stomach aches
• Frequent urinary tract infections (UTI)
• Bruising or bleeding in the genital area
• Pain or itching in the genital area
• Torn or bloody underclothing

Behavioral Indicators
• Increased aggression or non-compliance
• Over-willingness to appease
• Change in sleeping patterns
• Attempts to hurt oneself
• Sudden temper control problems
• Change in eating habits

Signs of Emotional Abuse

Physical Indicators
• Violation of other’s property
• Performance/social skills deterioration
• Touch phobia
• Promiscuity or seductive behaviors
• Isolation and/or Depression

Behavioral Indicators
• Habit disorders (biting, rocking, head-banging, etc.)
• Cruel behaviors (seeming to get pleasure from hurting others, including animals)
• Behavioral extremes (overly-compliant or demanding, withdrawn or aggressive, listless or excitable)
Signs of Neglect

Physical Indicators
- Poor hygiene (lice, scabies, bedsores, body odor, etc.)
- Unsuitable clothing (missing key articles of clothing i.e. underwear, socks, shoes or over/underdressed for climate conditions)
- Untreated injury or illness
- Indicators of prolonged exposure to the elements (excessive sunburn, insect bites, colds, etc.)
- Height and weight significantly below average for age

Behavioral Indicators
- Chronic hunger, tiredness, or lethargy
- Age-inappropriate behaviors (bedwetting, wetting, soiling, etc.)
- Reports of being left alone by caretakers
- Begging for food or leftovers
- Chronic absenteeism from school, work, or day programs

Reporting Abuse

DON’T STAY SILENT!

Remember, if you suspect abuse of a child, or vulnerable adult, you are legally bound to report it! Below are a few things to keep in mind if you suspect abuse or if someone tells you that they are being abused:

- Do not suggest or imply the story is hard-to-believe
- Do not assume caregivers should be called
- Believe
- Listen
- Validate the victim’s feelings and affirm the courageous act of reaching out to you
- Empower the victim as they work through the healing process
- Report the abuse

It is important that you report the abuse immediately. Again, don’t stay silent! The following are several places you can call to report the abuse:

- **Adult Protective Services**
  800) 371-7897

- **Utah Child Abuse/Neglect Hotline**
  (855) 323-3237

- **Disability Law Center**
  (800) 662-9080

- **24-Hour Statewide Assault Crisis and Information Line**
  (888) 421-1100

- **24-Hour Statewide Domestic Violence LINK Line**
  (800) 897-5465

- **Your local police station**

For More Information...

If you have further questions, or would like more information in general, please contact the Disability Law Center (DLC). Our services are offered statewide and free of charge. **Materials are also available in alternative formats such as audio, large print, Braille and Spanish.**

Call (800) 662-9080 or visit our office to speak confidentially with a Short Term Assistance Advocate. Office hours are Monday-Friday, 9:00 AM to 4:00 PM.

Disability Law Center
205 North 400 West
Salt Lake City, UT 84103
(800) 662-9080
disabilitylawcenter.org/contact
disabilitylawcenter.org/civil-rights

This publication is funded in part by the U.S. Department of Health and Human Services, the Center for Mental Health Services, the U.S. Department of Education and the Social Security Administration. The contents of this publication are the sole responsibility of the authors and do not represent the official view of these agencies.