

PROTECTION OF CHILDREN WITH DISABILITIES FROM VIOLENCE AT HOME, AT SCHOOL, ON THE STREET, IN THE COMMUNITY

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Abstract. Social and pedagogical practice shows that children with disabilities are not sufficiently protected from manifestations of violence. They and their families often either do not know their rights or do not demand their observance. Being children at risk, they are protected by law and receive institutional protection, but the problem stems from the fact that violence against children with disabilities remains invisible. The conducted research aims to study the opinions of specialists working in social services for children, including children with disabilities. The results obtained are analyzed in several directions: reasons for the manifested violence; types of violence; perpetrator (parents, relatives, teachers, classmates, specialists from practice). The legal regulation for ensuring the protection of children with disabilities, especially against manifestations of discrimination, rejection, cruelty, is also justified.

Keywords: violence; children with disabilities; protection

Children with disabilities are particularly vulnerable, not only because of their developmental deficits, but also because of their inability to protect themselves in a society of normal people. In this sense, they often do not recognize violence as violence, and even less do they know how to assert their rights. Usually, the parent or institutions have the power in this direction, but this requires awareness, activity, attitude, and understanding. Good knowledge of the law is also a mandatory requirement for providing adequate care. „The integration of children and students with learning difficulties caused by psychophysical disabilities is a complex and multifaceted process that requires cooperation between educational specialists, medical and social services, and families. This cooperation is extremely important for creating a supportive environment in which children can develop and learn in accordance with their individual needs and abilities“ (Marcheva-Yoshovska,

2025, p. 253). „A review of the current regulatory framework makes it clear that institutions in the education system must: support the personal development of children/students as they progress through the stages and levels of education; adapt the curriculum in a timely manner, as well as provide therapeutic support and rehabilitation; provide training in curricula and subjects for children/students with sensory impairments“ (Marcheva-Yoshovska, 2021, p. 31).

1. Research

In 2024 and partly in 2025, 50 specialists from the socio-pedagogical practice working with children with disabilities and their families were surveyed. Their opinions were analyzed in several main directions: types of violence against children; causes; consequences; frequency; reaction of institutions, benefits for the child and the community; attitude of citizens. It is important to study the work attitudes of specialists, especially when it comes to domestic violence and their direct intervention, understanding that parents are the ones who probably provide the only and most adequate care for their child. It is also important to seek their responsibility for the lack of institutional protection regulated in the laws of the Republic of Bulgaria, especially when there is no official data on violence committed. The study is pilot and is to be expanded by studying the opinions of parents, teachers, and other specialists from the sociopedagogical practice. 94% (47 people) of the respondents are women, and the remaining 6% (3 people) are men. 96% (48 people) work in the social sphere, including: Sheltered housing; Shelter for human trafficking; Judicial system; Day center for children and/or adults with disabilities, Community social service for adults with disabilities, Private kindergarten, Center for public support with emergency admission, Day center for adults with severe multiple disabilities, Crisis center, Crisis center for children who have experienced violence, Center for public support, Center for social rehabilitation and integration, Social service management, Center for support and social rehabilitation and integration of survivors of violence, Sheltered housing for people with mental disorders, Social counseling, Project “Downtown”, etc. The individuals surveyed hold various positions in the listed social services: technical assistant, expert, rehabilitator, social worker, manager, psychologist, childminder, educator, director, occupational therapist, hygienist, clinical psychologist, leader of a specialized program for perpetrators of domestic violence, lawyer, training coordinator, occupational therapist. The professional experience of the respondents working in the social sector shows considerable variation, as detailed in Table 1. This diversity in experience levels reflects a wide range of expertise among the participants, which may influence the outcomes and interpretations of the study. Notably, the largest group (36%) has between 1 and 5 years of experience, indicating a relatively young workforce, while a significant portion (20%) has over 16 years of experience, bringing valuable long-term knowledge and stability to the sector.

The presence of respondents with less than one year of experience (10%) suggests ongoing recruitment of new professionals, which may affect team dynamics and the implementation of innovative practices. These data help to underscore the reliability of the survey, as the professional experience of the specialists serves as a key criterion for the validity of their observations regarding cases of violence against children with disabilities. The varied levels of expertise among the respondents enhance the credibility of the findings, since seasoned professionals bring in-depth knowledge, while those with less experience may offer fresh perspectives. This combination strengthens the overall trustworthiness of the collected data and supports comprehensive insights into the issue under study.

Table 1. Respondents' professional experience in social sector

Category	Number of Respondents	Percentage (%)
Less than 1 year	5	10%
From 1 to 5 years	18	36%
From 6 to 10 years	10	20%
From 11 to 15 years	7	14%
16 years or more	10	20%

The data presented in Table 2 show that the majority of respondents (48%) are between 41 and 50 years old, indicating a predominance of mid-career professionals in the social sector. This is followed by equal representation (20% each) in the 31 – 40 and 51 – 60 age groups, suggesting a balanced presence of both younger and more experienced specialists. A smaller proportion of respondents are under 30 (4%) or over 60 (8%), reflecting limited representation from the youngest and oldest age groups. The age diversity among participants contributes to a comprehensive perspective on the issues explored in the study.

Table 2. Age distribution of respondents

Age Group	Number of Respondents	Percentage (%)
19 – 30 years	2	4%
31 – 40 years	10	20%
41 – 50 years	24	48%
51 – 60 years	10	20%
61 years and above	4	8%

A large majority of respondents (82%) believe children with disabilities are definitely more vulnerable to violence. Only 18% indicated that this is not necessarily the case. These findings emphasize a strong consensus among professionals regarding the heightened risks faced by children with disabilities. The data presented in Table

3 reveal that respondents identify multiple, interconnected causes contributing to the increased vulnerability of children with disabilities to violence. The most frequently cited reason is the child's inability to protect themselves (74%), followed closely by a lack of understanding from peers and adults (64%) and discriminatory attitudes (58%). These findings point to both individual vulnerabilities and systemic societal factors. Equally notable is the acknowledgment of a lack of awareness regarding disabilities (50%) and failure to recognize violence as traumatic (48%), suggesting that insufficient education and social sensitivity remain significant barriers to protection. Only 32% of respondents highlight lack of skills among educational agents, which may indicate either confidence in existing support systems or an underestimation of their role. Overall, the responses reflect a nuanced understanding among professionals of the complex interplay between personal, social, and institutional factors that heighten the risk of violence against children with disabilities.

Table 3. Factors contributing to violence against children with disabilities

Caus	Responses	Percentage (%)
Discriminatory attitudes toward people with disabilities	29	58%
Inability to protect themselves	37	74%
Lack of understanding from peers and adults about the child's everyday difficulties	32	64%
Lack of awareness about the disability and the challenges it entails	25	50%
Lack of skills among educational agents (parents, teachers) to provide adequate support	16	32%
Failure to recognize violence as a harmful and traumatic experience	24	48%

Psychological violence is the most frequently reported type, with 74% of respondents indicating it. Physical violence follows closely at 70%, showing it remains a major issue. Neglect and emotional violence are also significant, reported by over 60% of respondents. Cyberbullying is reported the least, at only 12%, which might indicate either lower prevalence or underreporting. The high percentages for psychological, physical, neglect, and emotional violence suggest that many individuals may experience multiple types of violence simultaneously or that these forms are closely linked. The relatively low figure for cyberbullying could reflect its more recent emergence or limitations in awareness/reporting. The data highlights the importance of addressing psychological and physical violence as priorities in intervention programs. Emotional violence and neglect also require attention given their high occurrence. Cyberbullying, while lower, should not be overlooked, especially with increasing digital interactions (Table 4).

Table 4. Types of violence reported and their prevalence among respondents

Type of Violence	Number of Responses	Percentage (%)
Psychological	37	74%
Physical	35	70%
Neglect	34	68%
Emotional	31	62%
Cyberbullying	6	12%

The vast majority of respondents (90%) indicated that classmates and peers are involved in violent acts toward children with disabilities. This underscores peer-related violence as the most prevalent problem. More than half of the respondents (56%) reported violence from strangers or unknown individuals, which highlights safety concerns outside familiar environments. Violence by family members is also significant, reported by 34% of respondents, showing that the home environment is often not safe for these children. Workers in specialized institutions (10%) and teachers/resource teachers (8%) have lower reported involvement, which might reflect fewer interactions, underreporting, or better safeguards in these settings. Specialists like psychologists or speech therapists are very rarely identified as perpetrators. Since respondents could give multiple answers, children may face violence from several sources simultaneously, pointing to a need for comprehensive protective measures (Table 5).

Table 5. Most common perpetrators of violent acts against children with disabilities

Perpetrator	Number of Responses	Percentage (%)
Parents and relatives	17	34%
Classmates and peers	45	90%
Workers in specialized institutions	5	10%
Teachers and resource teachers	4	8%
Strangers and unknown people	28	56%
Other specialists (psychologist, psychiatrist, speech therapist, rehabilitator)	1	2%

Next paragraph describes a wide variety of ways in which violence or abuse against children can be detected and reported. These include direct disclosures by the child, observation of physical or psychological indicators, and information coming from multiple stakeholders – family, school, social and medical professionals, as well as anonymous witnesses and hotlines. Information about violence can come from diverse sources – the child themselves, parents, relatives, classmates, teachers, specialists (psychologists, social workers, doctors), as well as from random

witnesses and neighbors. This highlights the need for a comprehensive approach that involves various social levels to identify violence. A key part of the process is direct disclosure by the child – verbally, through drawings, or other creative means. This underscores the importance of creating a safe, trusting environment where the child feels comfortable expressing their experiences without fear. There is an observations of physical signs (e.g., bruises, injuries) and behavioral changes (fear, anxiety, aggression, withdrawal). These are critical elements for early detection, especially for children who may be unable or unwilling to share directly. The role of various specialists – educators, psychologists, social workers, police, as well as institutions such as child protection departments – is emphasized. Their active involvement is crucial for gathering information, analysis, and taking appropriate action. Phone lines like 116 111 and 112 are explicitly mentioned as important channels for reporting – both by the child and witnesses. Anonymity helps remove barriers to reporting and increases access to assistance. It is emphasized that conversations with the child and their close ones should be conducted with understanding, support, and special methods so as not to retraumatize the child or make them feel further abused. Continuous monitoring by school staff, specialists, and social workers, as well as information sharing among various institutions, are vital for early detection and prevention of violence. Media, the internet, and the wider community also play roles in raising awareness and recognizing cases of violence, indicating the need for broad public dialogue and education. Respondents presents a comprehensive and multi-layered model for recognizing and reporting violence against children. The approach is complex, involving direct communication with the child, observation of physical and behavioral signs, active involvement of professionals and institutions, and support for both anonymous and direct reports. Effective protection requires coordination between different social structures and creating an environment where the child feels safe to share. Here follows an analysis of specialists' opinions on legal measures for protecting children with disabilities from violence. Some respondents explicitly mention the Child Protection Law and related legislation, showing awareness of the existence of legal measures and police protection. Reporting signals and alerts to appropriate authorities such as the Child Protection Department, Social Assistance Directorate (DSP), police, and emergency services (phone number: 112). Immediate intervention and protection of the child, including removal from the abusive environment and placement in crisis centers, foster families, or specialized institutions. Issuance of restraining orders or legal restrictions to limit contact between the child and the abuser. Disciplinary actions and inspections within institutions, including notifying managers and conducting official checks. Multidisciplinary coordination mechanisms between social, educational, and law enforcement bodies to ensure timely and comprehensive responses. Many answers emphasize creating a safe and protected environment for the child, which includes both family-based support and

out-of-home care when necessary. Psychological support and counseling for the child and family are mentioned, recognizing that protection goes beyond physical safety to include emotional and mental health. Prevention and education efforts are referenced, though less frequently, indicating some attention to broader systemic approaches. Several responses point out persistent challenges despite legislative improvements: the coexistence of outdated practices that impede progress; lack of sufficient resources, infrastructure, and trained personnel to implement rapid and effective protection measures; limited follow-up or intervention with perpetrators, highlighting a gap in addressing the root causes of violence („usually no work is done with the offenders“); the system’s sometimes slow or bureaucratic responses that can delay the provision of urgent help. One detailed comment refers to specific institutional procedures at a specialized center for children with disabilities describing: mandatory reporting obligations for staff under the Child Protection Law; procedures for notifying managers and child protection departments promptly; regular team meetings and risk assessments to coordinate protective actions; rapid response times (within 30 minutes) for immediate threats to the child’s life or health. This highlights a structured approach in at least some institutions, suggesting a model that could be expanded. Overall, specialists express hope and recognition that legal frameworks have improved over recent years and that more discussion and work are taking place in this area. However, there is a shared sentiment that much remains to be done – to modernize practices, increase resource allocation, improve professional training, and ensure that protective measures are effectively implemented and enforced. The majority of respondents (60%) believe that the current measures for protecting children with disabilities from violence have room for improvement. This indicates a general perception that while some efforts exist, they are not yet fully effective or sustainable. Only 24% of specialists are confident that the measures are definitely effective and long-lasting, suggesting that a smaller portion of professionals sees the current system as sufficiently strong and reliable. A notable 16% responded with „not necessarily,“ reflecting some uncertainty or skepticism about the effectiveness and longevity of the protection measures. Overall, the data point to a widespread need for enhancement and reform in the approaches and resources allocated to protect children with disabilities from violence, with most professionals calling for more consistent and impactful solutions (Table 6).

Table 6. Perceived effectiveness of legal protection measures for children with disabilities

Respons	Number of Responses	Percentage (%)
Yes, definitely	12	24%
Not necessarily	8	16%
There is room for improvement	30	60%

The responses suggest a strong consensus among professionals that public attitudes play a significant role in the occurrence of violence against children with disabilities. The largest portion of respondents (46%) believe that changing societal attitudes and promoting inclusion is critical. This highlights the need for educational campaigns and social interventions aimed at improving acceptance and understanding of people with disabilities. Another 36% emphasize that open discussion of the problem increases the chances of resolving it. This implies that raising awareness through media, schools, and institutions is seen as a key factor in reducing violence. A smaller yet relevant portion (10%) note that children mirror adult behavior, indicating that role modeling by parents, teachers, and society is essential in shaping non-violent attitudes in youth. 8% point out that group dynamics influence individual behavior, reinforcing the idea that peer pressure and social norms must also be addressed in efforts to prevent violence. The data show that professionals overwhelmingly see societal mindset as a critical factor. There's a clear call for systemic public education, inclusive policy-making, and long-term advocacy efforts to foster empathy, reduce stigma, and ultimately minimize violence against children with disabilities (Table 7).

Table 7. Perceived role of public attitudes in cases of violence against children with disabilities

Statemen	Number of Responses	Percentage (%)
The more the issue is discussed, the more likely it is to be overcome	18	36%
The opinion of the group always influences individual behavior	4	8%
Work is needed to change attitudes toward people with disabilities	23	46%
Children reproduce the behavior of adults	5	10%

36% of respondents believe that parents usually seek help from institutions, indicating some level of trust in external support systems such as child protection services or the police. 22% think that parents actively defend their children's rights, which reflects a proactive approach among a notable portion of the population. On the other hand, 18% of responses suggest that only extreme circumstances motivate parents to act, implying a reactive rather than preventative stance. 16% of the specialists report that parents are not aware of their rights, pointing to a need for greater outreach and education on child protection legislation. Finally, 8% say

that parents talk about the issue but don't take further steps, highlighting barriers such as fear, helplessness, or systemic inertia. While a good number of parents are perceived to be engaged—either directly or through institutional channels—there remains a significant portion that is passive or unaware. This suggests that targeted awareness campaigns, legal literacy programs, and empowerment initiatives for parents of children with disabilities are critical to ensuring that their rights are protected effectively and consistently (Figure 1).

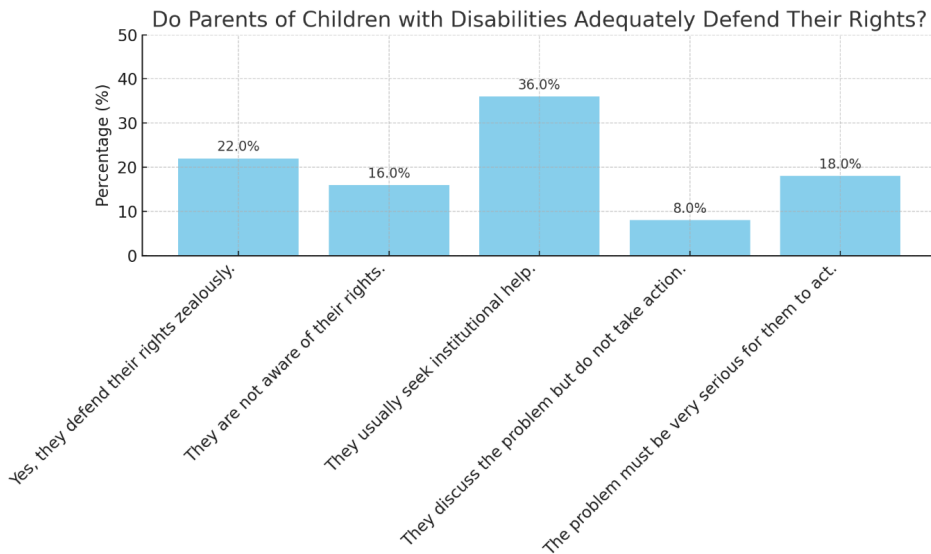


Figure 1. Data highlights a varied perspective on how parents respond when their children with disabilities are subjected to violence

The majority of respondents believe that children with disabilities may provoke violence against themselves primarily due to misunderstood behavior (26.9%), vulnerability (23.1%), and society's inability to adequately respond to differences (36.5%). Only a small fraction believe that people are sympathetic or understanding, with 5.8% saying people are understanding and 3.8% suggesting that people feel sorry for them. No one selected the option that these children remain unnoticed. This reflects a clear concern that societal attitudes, miscommunication, and a lack of preparedness contribute significantly to the risk of violence these children face (Table 8).

Table 8. Respondents' opinion about the possibility children with disabilities to provoke violence against themselves

Respos	Count	Percentage (%)
Yes, because their behavior is misunderstood.	14	26.9%
Yes, because they are vulnerable.	12	23.1%
Yes, because society does not know how to respond to differences.	19	36.5%
No, people feel sorry for them.	2	3.8%
No, people are understanding.	3	5.8%
No, they remain unnoticed by others.	0	0.0%

The results indicate that public concern and awareness regarding the protection of the rights of children with disabilities and safeguarding them from violence is limited: 56.0% of respondents believe people are uninformed and uninterested in the topic; 24.0% observe that people often disengage from the problems of others; only 10.0% acknowledge the existence of institutions working on the issue; a small 8.0% see signs of active civic engagement; merely 2.0% believe the state should handle the issue alone, without expecting involvement from citizens. This highlights a clear need for greater public engagement, awareness initiatives, and efforts to empower civil society to take a more active role in protecting vulnerable children (Table 9).

Table 9. Public opinion on the protection of the rights of children with disabilities and protection from violence

Respos	Count	Percentage
People are uninformed and uninterested	28	56.0%
People often disengage from others' problems	12	24.0%
There are institutions working on the issue	5	10.0%
An active civic stance is clearly observed	4	8.0%
The state should take care of the issue without relying on citizens	1	2.0%
Total	50	100%

The majority of respondents (35 out of 50, or 70%) believe that the current legal measures for protecting children with disabilities are insufficient and need improvement. Only 15 respondents (30%) think that the existing legal framework is adequate. This indicates a general concern among the participants about the effectiveness of legal protections for children with disabilities. The responses reveal a broad range of opinions and concerns about the legal protection and support for

children with disabilities. A significant number of respondents indicate uncertainty or feel they are not competent to provide a detailed opinion, which suggests that this is a complex and sensitive issue. Many highlight the need for stricter enforcement and monitoring of the existing legal framework. They stress that although laws may exist, their application is often weak or inconsistent. Closely related to this is the call for more severe sanctions and penalties, especially targeting those who neglect or abuse children with disabilities, including family members. A recurring theme is the importance of working with families and parents. Several respondents believe that supporting and educating parents is crucial for the protection and well-being of these children. This also includes cooperation with schools and educational environments to ensure children receive adequate support. Some respondents suggest that the legal framework itself needs updating to better reflect practical realities and current needs. For example, there is a proposal to adopt a comprehensive mental health law that also addresses the support needs of children with disabilities and their families. Another important area is the enhancement of professional support systems. This includes increasing the number of resource teachers, school psychologists, and specialists who can actively engage with children and families. Several comments point out the need for mandatory, rather than voluntary, involvement of such professionals in schools, and for them to raise awareness among other students. There are calls for improved access to services and information, ensuring families know their rights and available resources. Some suggest learning from international best practices to modernize and strengthen protection mechanisms. Inclusive education is also mentioned, with suggestions to create specialized classes within mainstream schools and increase the number of kindergartens and schools that can accommodate children with disabilities. Finally, a minority of respondents believe that no legislative changes are necessary but emphasize the importance of proper application and control of current laws.

Conclusion and findings

First, violent acts against children with disabilities are an extremely common phenomenon. It also happens at home, with the perpetrators being the parents themselves. One of the reasons may be their powerlessness to cope with the difficulties, the lack of skills for adequate care, impatience, intolerance. From this it can be concluded that families of children with disabilities do not receive serious professional support from institutions and the state. Second, violence against children with disabilities in educational institutions is an everyday occurrence. They are victims of physical bullying, insults, humiliation, stigmatization, prejudice. They suffer unfair treatment from peers, teachers and parents of normal children. From this it can be concluded that much more work needs to be done to create a safe and inclusive educational environment. Third, children with disabilities are bullied on the street and in the community. The lack of sufficient architectural improvements

for easier access and movement also affects their motivation for an independent and active lifestyle. The protection measures provided for in the law often prove to be insufficient or inapplicable in individual cases. From this it can be concluded that institutions and the state must work to raise people's awareness of the problem, to change their thinking towards more tolerance of differences, to create an accepting society in which everyone feels fulfilled, fulfilled, satisfied.

More work is needed to intensify work with parents of children with disabilities, to increase the responsibility of specialists, and to optimize regulatory texts.

This study surveyed 50 socio-pedagogical specialists working with children with disabilities and their families in Bulgaria during 2024 and early 2025. The findings provide a comprehensive understanding of the nature, causes, and institutional responses to violence against children with disabilities. A vast majority of respondents (82%) agree that children with disabilities are significantly more vulnerable to violence. Psychological violence is the most commonly reported type, with 74% indicating its prevalence, followed closely by physical violence (70%). Neglect and emotional violence also affect over 60% of cases, highlighting multiple, often overlapping forms of abuse. Cyberbullying, while reported by only 12%, may be underrecognized but remains a concern in the evolving digital context. Respondents pointed to several key causes contributing to the heightened risk of violence: the child's inability to protect themselves (74%); lack of understanding from peers and adults (64%); discriminatory attitudes toward people with disabilities (58%); lack of awareness about disabilities (50%); failure to recognize violence as traumatic (48%). These findings illustrate that both individual vulnerabilities and systemic societal shortcomings create a dangerous environment for these children. Peer violence emerges as the most critical issue, with 90% of respondents reporting classmates and peers as perpetrators. Violence by strangers affects 56% of children, while family members are implicated in 34% of cases. Violence from institutional workers and teachers is less frequently reported, suggesting either better safeguards or potential underreporting. Despite the existence of legal frameworks such as the Child Protection Law, only 24% of specialists believe current protective measures are definitely effective and long-lasting. A majority of 60% feel there is substantial room for improvement, pointing to systemic issues like insufficient resources, delayed responses, and lack of enforcement. While multidisciplinary cooperation is recognized as important, many respondents emphasize gaps in follow-up with offenders and practical application of laws. The role of societal attitudes is seen as pivotal. Nearly half of the specialists (46%) stress the need for changing public perceptions and promoting inclusion to reduce violence. Additionally, 36% believe open discussion of the issue is crucial, while smaller portions highlight the influence of adult behavior and group dynamics. Public awareness and engagement are perceived as low: 56% say people are uninformed and uninterested, and only 8% observe active

civic involvement. Regarding parental responses to violence, 36% of specialists believe parents usually seek institutional help, and 22% think parents actively defend their children's rights. However, 18% report that parents intervene only in extreme cases, and 16% note a lack of parental awareness about their rights. This diversity in parental engagement points to the need for increased legal literacy and empowerment initiatives. The surveyed specialists reflect a broad range of experience: 36% have 1–5 years in the social sector, 20% have over 16 years, and 10% are newcomers with less than one year. This mix of fresh perspectives and seasoned expertise strengthens the reliability of the findings.

In conclusion, the survey reveals a multifaceted problem where children with disabilities face high risks of multiple forms of violence, primarily perpetrated by peers and sometimes family members. Causes include both personal vulnerability and widespread societal discrimination and ignorance. Although legal protections exist, their effectiveness is limited by resource constraints and enforcement challenges. Changing public attitudes and improving parental involvement are seen as key areas for progress. The findings strongly indicate the need for comprehensive reforms – enhanced legal frameworks, better-trained professionals, improved inter-institutional coordination, and sustained public education campaigns—to safeguard the rights and well-being of children with disabilities. The pilot nature of the study underlines the importance of expanding research to include parents, teachers, and other specialists to develop holistic, evidence-based policies and practices.

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