

Report on the Healthy Relationships Programme for people with Intellectual Disabilities

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On behalf of:
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EXECUTIVE SUMMARY

In 2011 the Kidpower Teenpower Fullpower® Trust New Zealand commissioned SAMS (Standards and Monitoring Services) to undertake an evaluation of a programme designed to assist people with intellectual disabilities keep safe in their community. The Healthy Relationships programme was initially developed as three CD ROMs and accompanying booklets and supporting material. In November 2010 the programme became available on-line and offered on-line support by the Kidpower Teenpower Fullpower® Trust (hereafter referred to as Kidpower). The Department of Justice has sponsored development of this programme at various stages.

The Healthy Relationships programme offers 40 interactive scenarios that have been taken from real life situations. They appeal to a wide audience of people including school age children, people who are in work, moving around the community and in interpersonal relationships. The scenarios that focus on interpersonal relationships have a direct link to issues of intimacy and sexual abuse. The skills learned in the programme include how to assess a situation (for example, not keeping important/risky things a secret), saying stop or no, walking away from risky situations, seeking help and persisting in seeking help (to name a few).

The programme is designed to be utilised by people such as support workers or teachers with minimal assistance from Kidpower personnel. The interactive programme offers instructions on the steps needed to learn specific skills and to explore the scenarios. How people role play the scenarios is left to the group itself but drama is a popular method, with the scenarios used as scripts.

The evaluation aimed to determine whether supporters (support workers, teachers etc) were able to utilise the Healthy Relationships material effectively and whether the skills learned were relevant and transferable to real life experiences. The work involved direct observation of three groups that used the material and included audio and video footage. Post project interviews are still underway but some had been completed at the time of this report.

Overall the research indicated that once supporters understood how to use the material they were quickly able to engage the groups they were working with in a number of scenarios of choice. The biggest hurdle seems to be getting started and being able to work out how the programme is to be approached. The three groups that were involved in this project each needed initial input from Kidpower or SAMS personnel until they reached that "ah ha!" moment. Kidpower is currently working on support material that might assist potential users to reach this moment of realisation a little bit more quickly and without the direct support of Kidpower.

Once the material was presented to each of the three groups discussion about the scenarios quickly followed. The content of the discussion indicated people were able to relate the stories to their own experiences and in some cases the groups were able to invent their own scenarios using the Healthy Relationship skills. These discussions were a vital part of learning the skills and indicated very early in the process that some transference of skills was possible.

The scenarios each group chose to practice were very similar and typically involved chance encounters when in the community and interpersonal relationships. Most common was the “on the bus” scenario where a drunk person interferes with a person. The skills included saying stop and making a physical barrier between the person and the drunk and then seeking assistance. Most of the people in all three groups use public transport in their community. The most common relationship scenario was “Adam wants to hold hands”. In this scenario Adam’s advances are unwanted and as they become more persistent the individual must seek help from others. This scenario generated discussion about saying “no” and being able to accept rejection. All three groups involved in this research were younger to middle aged people who were or had been involved in interpersonal relationships or who had situations where rejection was an issue.

The video sequence of scenarios as they were practiced clearly showed individuals mastering the scripts and being able to talk openly about the skills presented in each scenario. Being able to relate the skills to real life situations also indicated that learning was becoming less abstract and more applied. Near the close of the programme two people were able to describe real situations they encountered in the community and how they applied the skills they used in the programme. One in particular, described a situation and then named the skills he used to successfully extract himself from a potentially risky encounter. In interviews he then went on to describe what he would have done next if the situation had not been resolved in the way it did.

Incidence and prevalenceⁱ studies of violence and abuse of people with intellectual disabilities has consistently been shown to be higher than the general population (the range appears to be 1.5 to 3 times higher than the general population)ⁱⁱ. Actual prevalence, however, varies widely depending on what type of violence or abuse is being considered (for example the prevalence sexual assault for women has ranged from 25 to 53% of the intellectually disabled population, while maltreatment regardless of gender was as high as 77%)ⁱⁱⁱ. The Healthy Relationships programme is one of very few training systems aimed at assisting people to recognise, avoid and escape from potentially risky situations^{iv}. Thus the need to introduce a training programme such as this is well justified. Previous research using this programme^v for school age children and young people indicated that teachers adapted the material to suit the aims of a particular course of study or they encouraged children to seek scenarios that had particular resonance. Once identified these scenarios could then be used as a basis of further discussion and training. In one situation it was noted that a teacher used the programme to work individually with one young person. For these people the programme was successful because it was adaptable and relevant.

The results of the present research clearly indicated that people chose scenarios based on their own life experiences. Furthermore, typical educational milestones were reached as

people practiced the skills in each chosen scenario and as they were able to relate the skills with real life situations. Finally, in at least one example, individuals were able to use the skills learned in the Healthy Relationships programme in real life thus demonstrating transference of skills.

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ABOUT SAMS

SAMS is an organisation run by people with disabilities and their family members. SAMS undertakes developmental evaluation of services or programmes for people with disabilities using (typically) a qualitative and strengths based approach. In addition, SAMS provides training to front line staff and managers, support and education for family members, and runs discussion groups and forums in the sector. SAMS also undertakes research in the sector and adheres to a policy of involving the subjects of research as active participants.

SAMS has been working in the disability sector for over 30 years and is well respected by service providers, advocate groups and government agencies. Further information about the organisation can be found at www.sams.org.nz.

KIDPOWER (KIDPOWER TEENPOWER FULLPOWER® TRUST NEW ZEALAND)

Kidpower New Zealand is a part of an international organisation that provides violence prevention courses to all age groups. Kidpower in New Zealand works with school age children and teenagers in classroom settings (typically but not exclusively to intermediate school age and older) and was the subject of a SAMS review in 2010^{vi}. As well as these groups Kidpower also provides courses for adult groups and has in recent years developed the Healthy Relationships programme for people with intellectual disabilities. The skills utilised in the Healthy Relationships programme are the same skills taught to school age children and teenagers and adults.

METHOD AND METHODOLOGY

SAMS utilised a partnership approach with participants of this project. This meant that everyone involved understood the material collected would be used to present publically or would be written-up for publication purposes. Publishable material will be presented as a plain language version endorsed by the participants, and the participants will be assisted to understand the content of such material. As well as this work there has been one public presentation of this work at the Department of Justice using collated video footage, with the participants available to answer questions.

Qualitative methods are used to evaluate this material since this type of work is most accessible to the participants and provides detailed descriptions of learning experiences and milestones.

Material was collected using real time voice recording, video tapes and record keeping during each session. The main researcher visited each group at intervals of one to three weeks (depending on timetables), to record and observe each session.

At the end of the project the main researcher met with some of the people involved in this project to talk about whether they have used any of the skills learned during the project in real life situations. These interviews were transcribed and/or filmed.

Three groups took part in this research. All were adults and all were part of a vocational or day service. The groups sizes were six (three men and three women), three (one man and two women) and eight (seven men and one woman). All participants completed permission forms for written the material and for using video/auditory footage.

THE HEALTHY RELATIONSHIPS PROGRAMME

The Healthy Relationships programme was devised in New Zealand and utilises simple cartoons to enact scenarios drawn from real life situations. The programme begins with discussion of what healthy relationships and interactions are by highlighting four simple questions, “is this...:

Okay with both?
(or necessary for health and safety?)



Safe?



NOT a secret?
(can others know?)



Allowed?”



The questions are designed to start discussion about what is okay and what can cause problems in relationships. For example, the question “is it okay with both” refers to situations where the player must consider both people. The health and safety reference refers to situations where people may need to do something even when they don’t like it, such as getting a flu injection. The question about safety is reasonably straightforward but the question about keeping secrets is not. This question is designed to generate discussion about keeping secrets through fear or because of embarrassment. In some of these situations people can be urged to talk with someone they trust. The question, “is it allowed”, refers to rules in certain environments (such as school, the workplace or laws).

Once people have investigated the four questions using a number of scenarios they typically explore the remaining scenarios either alone or as a group. The remaining scenarios focus on specific skills that are common to all Kidpower courses and are often followed by the word “power”. For example, when you walk away from a situation you use your “walk away power” or when saying “no” or ask someone to stop you use your “stopping power”.

The Healthy Relationships programme is divided into three sections of increasing complexity. The first section reviews scenarios relating to the four questions listed above and talks about healthy relationships. The second section reviews when and how to say “stop” and listening when others say “no” or “stop”. The third section builds on earlier skills and adds when to get help, where to get help, and how to persist in getting help.

RESULTS

The aim of this evaluation was to determine whether supporters (coaches) were able to utilise the Healthy Relationships material effectively and whether the skills learned were relevant and transferable to real life experiences.

To date (mid May 2013) Kidpower NZ has 170 registered as online players and supporters for the on-line version of the Healthy Relationships programme and has sold 43 copies of the hard copy teaching kits (with CD ROMs). Up-take may have been slow due to initial concerns regarding how the system could work with the target group. It was noted for example that when a service provider was visited and shown how the computerised programme worked *in conjunction* with role plays, then a willingness to take on the material improved. Interest grew even more when people could relate role play with dramatic presentations. For example all three of groups involved with this paper welcomed the use of video equipment and have enjoyed viewing the end results. There is also continued interest in refining the video footage further to include props and costumes to give the role plays a real feel.

The utility of the programme is based on the ability of the supporters to use the interactive programmes with minimal support from Kidpower. The three groups involved in this research all received assistance from Kidpower or the lead researcher either directly or in an advisory capacity. Kidpower were quick to acknowledge that it takes time for supporters to understand how the cartoons on the CD rom link with the role plays. As a result they are currently working on methods to show potential users how the interactive material relates directly to role plays and practicing the skills.

Illustration 1: “Marama” sets a clear boundary



One response Kidpower made immediately was to provide still footage of the cartoon frames in the interactive programme with photographs of actual role plays by participants. In illustration 1 below, the character “Marama” on the interactive programme (cartoon) tells “Adam” she does not want him to hold her hand. The interactive programme then scripts the role play so that people can act out each role. In the script the role of the antagonist (the person acting inappropriately) is taken by the supporter, while the role of Marama is taken by the learner. The third person in the sequence below is a coach who may be either a learner or another supporter. His/her role is to assist when either party needs assistance remembering the skills involved in the role play. In Illustration 1 the coach is using a booklet provided with the CD rom version of the programme which also scripts each of the roles in cartoon form.

The three groups each had time to review some of the scenarios in the interactive programme. Discussion about which scenarios best suited their own lives followed and this generated examples of situations people have encountered in real life. For one of these groups in particular the discussion about the scenarios generated a number of real life examples. For instance, one person described a situation where someone was sitting in their seat at the movie theatre. The group immediately decided to role play the situation and use the “getting help” skills they viewed in the healthy relationships scenarios.

Player 1: [to a friend] They’re sitting in our place. What shall we do?

Player 2: I’m sorry... these are our receipts, can I see your ticket?

Antagonist: [No response].

Player 1: Can you move to your seats.

Antagonist: No!

This situation was discussed some more with the group and it was decided that the players would need to get help from the usher.

Usher: Okay guys can I see your tickets?

Antagonist: No!

Usher: If you don’t move to your own seats you will have to leave.

Antagonist: [Moves seat].

This adhoc scenario demonstrates that the group was able to use the Healthy Relationships scenarios to generate discussion about situations they had already encountered in real life. What was interesting was the general willingness to then role play the real life situations and incorporate the skills used in the Healthy Relationships programme. The people in the example above also generated a second scenario about how someone could be included or join in a conversation or small group. One of the supporters sets up a situation where the player arrives late and the group had already started playing cards. The player suggested he could break the ice by asking how the game was going. One person suggested talking to the organiser of the event. The player suggested the line, “could I have a talk to you another time?” One of the supporters suggested adding, “...I really like talking to you’... It can make them feel good about it.” They went on to talk about rejection, “you have to be alright if they say ‘no!’ ” The group then set up the role play.

[arriving late]

Player 1: How's the game going?

Group member: We're a bit busy right now.

Player 1: Maybe we can catch up another time when you're not busy.

[hypothetical next day]

Player 1: How's the game going today?

Group member: Okay, but not so interesting. Would you like to play?

Player 1: I'd like to catch up.

Group member: Okay. What if we play for 20 minutes then talk.

[at the end]

Group member: Okay, let's talk.

This adhoc role play was generated from the scenarios the players viewed in the programme and could relate to their own situation. The group discussion helped people problem solve in order to reach a conclusion that satisfied the player concerned.

That's the hardest play we've done in this course so far. I'm actually better at it than I thought I'd be... I was a bit nervous... I will have to practice it heaps... maybe with my support worker.

It is perhaps true that the most difficult aspect of this scenario is dealing with possible rejection. "Sometimes I feel like they are ditching me if they say 'no!' " Healthy Relationships can generate discussion about coping with negative feelings and impulses. The skills presented in the programme suggest talking with friends or authority figures that are trusted and not to keep things inside or a secret if they are important. It was noted in the previous work in a classroom that facing rejection was a normal part of life. In that situation the class practiced asking people to dance (as a school dance was coming up) and learned that when people said, "no thank you", it was okay.

The interpersonal scenarios attracted a lot of attention in all three groups because most of the people involved in this project had been or were currently in relationships with others. In one group the participants discussed situations with other people "bothering" them or receiving unwanted physical contact. The scenarios touch on relationships with relatives (such as a grandparent pinching ones cheek) and interpersonal relations with age peers (holding hands, staring, kissing etc). One person noted she would tell someone to shake hands if they were trying to pat her on her head (e.g. a relative) and another noted they had experienced a situation where someone in their family had pinched their face.

The other set of scenarios that attracted attention where ones that involved bullying by either someone known to the person or by strangers. All three groups chose the scenario "getting help on the bus", as it involved a drunk person bothering someone on the bus. Most of the people involved in this work used the bus service on a regular basis and sometimes in the evening; when situations like the one described in the scenario could

occur. The third group also practiced a scenario where someone was being bullied at a bus stop. This scenario was popular because bullying of this type could occur in a number of places including a bus stop or even at the day service. Subsequent discussion outlined examples of being bullied or “bothered” and what actions people typically take. Most common was going to find assistance from a support worker or manager, or going to the nearest shop and asking for help. Some people stated they would get help from the police if they were bullied at a bus stop.

The discussion about the scenarios as they were watched by the people in each group suggested that many of the stories were relevant. This was particularly the case where the scenarios triggered memories of situations people encountered in real life.

The aim of Kidpower programmes is to assist people to use specific skills to avoid or extract themselves from difficult situations, to get help and persist in getting help. Each of the scenarios used specific skills that were identified by name, such as using your “stopping power” (saying stop and using hands as a physical barrier) or your “walk away power” (to avoid difficult situations). As each scenario is practiced the supporters highlight the skills and in some cases practice them separately before or after the scenario. It was noted during the research that individuals quickly started using the same terminology when referring to the skills and self-corrected one another when elements of the skills were absent (such as the “stopping power” being used verbally but not physically). This was particularly evident for participants who were acting as coaches. The coach sometimes had access to the scripts as in the case in Illustration 1 above. Here the coach would prompt the player when they forgot their lines, but also were seen to prompt for physical actions. As coaches became more familiar with the scripts they were able to prompt without the books.

The video footage of each group as they practiced the scenarios indicated people were retaining skills as they polished each scenario. The players progressive became less dependent on coaches and the coaches become more proficient in prompting lines and actions. In some cases people started to improvise or spontaneously join scenarios together, often taking other players by surprise. The following transcript shows how one player linked the “Adam wants to hold hands” scenario with the “getting help at the Mall” scenario. In this situation the player that was coaching then became one of the players and had to adlib initially (it began half way through the scenario).

[Player 1]: Stop.

[Player 1]: I don't want it.

[Antagonist]: Oh. I'd still like to hold your hand. Can I?

[Player 1]: Stop!.. Don't touch me.

[Coach: 1]: Or I'll tell

[Player 1]: Or I'll tell

[Antagonist]: Oh. Okay.

[Another player]: Now, we'll need a shop keeper on this one.

[Researcher]: Do you think so?

[Researcher]: Do you want her to go and tell? ... Somebody?

[2nd player]: Hmm.

[Researcher]: Okay

[Researcher]: Who do you want to go an tell ..?

[Player 1 to Coach]: that person keeps touching me.
[Coach]: Um. I didn't.
[Coach]: Who was that person you are talking about?
[Player 1]: Um that person holding my hand.
[Coach]: What's his name?
[Researcher]: Just make one up.
[Player 1]: Um. Sam.
[Coach]: Sam.
[Coach]: Well I'll go and talk to him and tell him to stop... and thank you for coming in to tell me.

This group kept practicing the two joined scenarios and soon had the new script perfected.

[Player 1]: Stop
[Antagonist]: Would you let me hold your hand?
[Player 1]: or I'll tell.
[Antagonist]: Oh.
[moves to tell someone]
[Shop keeper]: What are you buying? Mam.
[Customer]: Oh. I just want...
[Player 1]: [interrupts] Excuse me.
[Customer]: ...To buy this milk please.
[Shop Keeper]: Oh yeah sure.
[Player1]: Excuse me!
[Shop keeper]: You have to go at the end of the line
[Player 1]: Okay.
[Shop Keeper acting as Coach]: And now you come. You insist.
[Shop keeper]: Come! Come, come!
[Player 1]: Excuse me!
[Shop Keeper]: I haven't got time.
[Shop Keeper]: What's the matter with...
[Player 1]: This is urgent!
[Shop Keeper]: Can't you see I'm busy
[Shop Keeper]: Oh. What is urgent?
[Player 1]: Um, that lady Sam is bothering me.
[Shop keeper]: Oh...
[Antagonist]: No, I'm not.
[Shop keeper]: You're just making things up.
[Player 1]: No I'm not.
[Shop keeper]: Oh well. Then we'd better look at that, together.
[Shop keeper to customer]: Um. I'm sorry. It really sounds like urgent.
[Shop keeper to customer]: I'll get somebody else to look after you.
[Shop keeper]: Okay... so.

The added section to this scenario is taken from "at the mall" where skills of "getting help" and "persist in getting help" are practiced.

All three groups evidently enjoyed practicing the scenarios and taking turns at the roles. Obviously some people were able to grasp the concepts quite quickly while others took more time. The real test of the usefulness of the learning system was whether people were able to transfer the skills to the real world. At least two concrete examples were forthcoming while the course was still in progress. The first involved a stranger offering one woman a ride. She politely refused and then reported the incident to staff at the day service. The staff were able to debrief with her and reinforced her actions. Seeking advice or assistance is one of the skills offered in the Healthy Relationships programme and this woman was able to talk about the incident with staff and subsequently her group. The second situation involved a man who was being abused at a bus stop.

[Player]: At the ... bus stop. The guy was angry with me. And, and. I was looking at the baby.

And I used my 'walk away power'. And he still followed me.

[Supporter]: What did he say to you?

[Player]: He said, "if I see you at night time", 'I'll'... he will punch me one.

[Supporter]: Did he say anything to you... When you were looking at the baby?

[Player]: Yeah. He said, "don't look at the baby".

[Supporter]: How close were you to the baby? Say that I'm the man with the pram. I've got a pram here [gets up to demonstrate]. Yes. And you're you. How close did you get to the baby?

[Player] [Stands up]: About that close.

[Supporter]: About that close. That's perfectly normal isn't it? That's a fine place to look at people... And observe things.

Why do you think he got angry?

[Player]: I don't know.

[Supporter]: You don't know? Hmm. We talked about it yesterday. Didn't we?

[Supporter]: And I remember being at a bus stop. And I just glanced my eyes around like that... passed somebody and somebody screamed at me, "what are you looking at?" "What are you doing?" So I used my walk away power. And I walked away to the next bus stop.

[Player]: I told [named someone].

[Supporter]: Yeah. Yeah. And did they think you had done the right thing?

[Player]: Yeah.

[Supporter]: Yeah. That's great. That's great. So, so that's something you've learned from this group... Isn't it?

[Player]: Yeah. And, like you said [pointing at researcher]. "Stop, I don't like it". And if he still keeps on going then I go to the nearest shop and get help.

[Supporter]: Get some help.

[Researcher]: That's good. That's good.

[Supporter]: That's great.

In the sequence above, the player was able to identify (without prompting) the name of each of the skills he used in the Healthy Relationships course and with discussion with supporters considered strategies for what to do next. Several months after this event the individual is still able to recall what to do should an event like this occur in the future.

DISCUSSION

One of the aims of this project was to see whether people were able to learn the skills presented in the Healthy Relationships programme and whether these skills can be transferred to real life. The video sequences of each of the three groups indicates typical learning milestones in terms of remembering lines and most importantly, remembering skills. After several practice sessions (usually five or six) the groups were able to role play the scenarios they had chosen with relatively few prompts. Most importantly however, they were able to name the skills and discuss what to do in situations that were similar. In discussing situations that were similar individuals were able to link the skills they were learning with real life.

Transference of the skills used in the Healthy Relationships programme to real life situations was witnessed for at least one person. The individual used the skills learned in the programme to extract himself from a potentially challenging situation and was then able to discuss with others what he could have done next if the event escalated. While there is only a couple of concrete examples to date, there is enough evidence from these three groups to indicate that the skills demonstrated in the Healthy Relationships programme can be transferred to real life situations for some people. It is fair to say, however, that in highly stressful situations not all people will fall back on the skills learned in this programme, it is more a question of what percentage would make the use of the skills and whether even a small percentage would be enough.

The main challenge for the developers of the Healthy Relationship programme is creating a package that supporters understand how to use quickly and with very little assistance from Kidpower. Clearly linking the interactive scenarios with the fun people have engaging in the actual role plays is probably the best method of demonstrating the programme. Also having people demonstrate the role plays to other groups and/or acting as coaches to new groups will also potentially aid understanding of how to engage with the material.

It was noted that all three groups gravitated toward scenarios that had resonance in their own lives. Most of the players were young to middle aged individuals who were reasonably able to access the community using public transport. Thus the bus scenario was popular and the two scenarios where people needed to seek help and persist in getting help. In these two scenarios (at the Mall and at the Bus stop) people tended to focus on shop keepers or support workers. The other set of scenarios that had resonance were the ones involving relationships with other people. How and when to say no (or stop), is a skill that requires some confidence, particularly where friends or family are involved. The Healthy Relationships programme not only offers skills people can use in these situations but provides an avenue to discuss similar situations in a relatively risk free environment.

The material presented in the Healthy Relationships programme has been taken from real life situations. Kidpower personnel report that when they offer similar programmes in

schools there are some rare instances where children or teenagers find the material personally challenging because it is too close to their own experiences. It is typical for these people to act up or leave the classroom (with a support person or teacher) in the early stages of the programme. The Kidpower and Teenpower instructors note however, that almost all of these young people will return or settle into the programme as it progresses and may well reach a point that they seek assistance for themselves. Given that the incidence of violence and abuse is high among people with intellectual disabilities then the Healthy Relationships programme may provide avenues for individuals to discuss their own circumstances either privately with tutors or during the many discussions held between members of the group.

The skills in the Healthy Relationships programme are the same skills used in the school and adult based programmes run by Kidpower, Teenpower and Fullpower internationally. It was interesting to note during discussion with supporters that some were concerned that if taken literally a specific skill may not be the best approach in some situations. For example, the “stop power” skill is practiced with the person putting up his/her hands as a barrier and saying “stop”. Some supporters believed the skill may seem out-of-place or artificial in some situations and may escalate the event. It is not clear at this stage whether this would be the case, or whether people naturally adapt a skill to suit a situation. Certainly for some people with Autism or intellectual disability the concrete examples represented by the skills may be more likely to be used without adaptation. However, for skills such as the “walk away power”, the benefits may still outweigh the potential risks if used literally. It may well be the case that any skill rather than none may be more useful in potentially risky situations.

Overall, there appear to be a number of benefits in introducing the Healthy Relationships programme for people with intellectual disabilities. It was noted in earlier research with this programme that it can be used successfully with younger people who are still in school or who are working individually with a support worker. For the three groups of older individuals in this work the programme generates discussion and the players seem to particularly enjoy the process, especially when video equipment was introduced. There is also evidence that skills are refined and can be transferred to real life situations.

ENDNOTES

ⁱ Incidence refers to the number of times an event occurred over a given period of time (usually a calendar year), whereas prevalence refers to whether an event has occurred at all over a typically longer period of time.

ⁱⁱ Horner-Johnson, W and Drum, C.E. (2006). Prevalence of Maltreatment of people with intellectual disability: a review of recently published research. *Mental Retardation and Developmental Disabilities Research Reviews*, 12, 57-69

Huges, K., Bellis, M.A., Jones, L., Wood, S., Bates, G., Eckley, L., McCoy, E., Mikton, C., Shakespeare, T., Officer, A. (2012). Prevalence and risk of violence against adults with disabilities: a systemic review and meta-analysis of observational data. *Lancet* doi 10.1016/S0410-6736(11)61851-5. Published on-line 28th February 2012.

ⁱⁱⁱ Lin et al (2009) in a study in Taiwan reported sexual assault to be 3.3% compared with the general population rate of 0.6%. Rand (2009) in a US study indicated a rate of 2.0 compared with 0.9 in the general population for sexual assault while general violence occurred at 27.8% for people with intellectual disability compared with 21.3% in the general population. Lin, L.P., Yen, C.F., Kuo, F.Y., Wu, J.L., and Lin, J.D. (2009) Sexual assault of people with disabilities: Results of a 2002-2007 national report in Taiwan. *Res. Dev. Disabilities*, 30(5), 969-75.

^{iv} Work by Khemka and associates have created a programme called ESCAPE (Effective Strategy-based Curriculum for Abuse Prevention and Empowerment) that is well founded on research and provides similar methods to the Healthy Relationships programme. ESCAPE is a USA based programme run out of AHRC New York City and is not widely available as yet. A second programme CIRCLES: Abuse Stop is commercially available but is costly (at \$499 US) in contrast to Healthy Relationships (\$25NZ on-line or \$85 CD rom version). For more information on ESCAPE refer to the AHRC website www.ahrcnyc.org or contact the author of this paper for a publication list. For the CIRCLE programme refer to www.stanfield.com

^v Wilson, C.S. (2012). Healthy Relationships Programme. Unpublished manuscript, on behalf of Kidpower Teenpower Fullpower® New Zealand.

^{vi} Wilson, C.S. Teenpower Violence Prevention Project. Unpublished manuscript, on behalf of Kidpower Teenpower Fullpower® New Zealand.