Safeguarding Children with Disabilities: A Life Course Perspective

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Evidence alludes to the abuse and neglect of children with disabilities, occurring at significantly higher rates than for their majority population peers. Compounding the presence of higher maltreatment rates are complex and varied barriers to effective professional safeguarding. These barriers include practical impediments such as problems gaining credible disclosures of abuse. Also present may be cultural, attitudinal, and social justice issues including lowered application of service thresholds and lack of an assertive rights perspective. Rather than viewing this as a matter exclusively about childhood, maltreatment ought to be conceptualised as occurring across a wider life course trajectory for children who are victimised. To achieve this broader perspective, lifespan effects will be understood through the critical application of seminal developmental lifespan theories. In combination, these substantiate a life course perspective on the maltreatment of children with disabilities. To translate insights into future safeguarding practices and academe, recommendations are presented before the conclusion. Moving forward, the complexity that underlies persistence, in disproportionately higher rates of maltreatment of children with disabilities, should be considered relevant across a long and varied life course.

Keywords: Life course; lifespan; maltreatment; child protection and welfare; children with disabilities

Introduction

Rates of maltreatment are disproportionately pronounced for children with disabilities above their majority population peers (Flynn, 2020, 2021; Stalker & McArthur, 2012; Taylor et al., 2014). This is also a persistent rather than transient problem. In 2000, for instance, Sullivan and Knutson (2000) published a longitudinal and internationally high-impact study from the United States demonstrating that the rates of maltreatment of children with disabilities were approximately three and half times the prevalence than for non-disabled peers. By 2012, Jones et al. had published a metanalytic study demonstrating sustained evidence of this prevalence over time and geographical space. Regrettably, to date, no proof has been forthcoming of effective remedial action, in resolving this increased prevalence of abuse and neglect for children with disabilities.

Accepting, therefore, that safeguarding children with disabilities from abuse and neglect is a persistent problem (Flynn & McGregor, 2017; Stalker & McArthur, 2012; Taylor et al., 2014), this article probes beneath the surface of presenting complexity. The intention is to apply a life-course perspective, through the confluence of seminal life-span developmental theories across almost a century of research. Brought to bear are core conventions and implications drawn from the most established theories,

including the psycho-social stages of human development by Erik Erikson (Erikson, 1958, 1963), the lifespan model of ageing (Baltes, 1987) and attachment theory (Ainsworth 1989; Bowlby, 1951). The commonality across developmental theories such as this is the proposition that the lifespan generally entails developmental stages (Smart, 2019). Cognisant of the butterfly effects of major events like incidents of abuse, attention is drawn away from conceptualising events as sequestered snapshots in time. Rather, a conceptualisation of those events as occurring within and across a wider life-course trajectory is considered most helpful and supportive of a life-course perspective (White & Wu, 2014). Within this, the intention is not to conflate developmental life-span theories with a life course perspective, but rather to use the former to develop the latter, in the interests of better understanding the maltreatment of children with disabilities. The core aim of the article, over-arching this, is to raise awareness among interested child protection students and practitioners, policy makers, managers, researchers, activists and advocates. To add an applied policy and practice focus, the article ends with some theoretically-informed measures for making change happen in safeguarding work.

The article proceeds across several stages. First, life course theory is introduced. Within this, the relationship of developmental lifespan theories to the life course perspective is set out in the clearest terms possible. Next, key concepts, theory and terminology around disability is clarified. Thereafter, a review of safeguarding children with disabilities with respect to the life course is presented in three themes. Respectively, these are: Non-intervention and delays in intervention have life course impacts; disability may be a complicating factor in comprehending lifespan developmental impacts; and support for children with disabilities should be provided around life-stage challenges. In conclusion, parting recommendations are presented as pathways forward. These pertain to a compilation of developmental history, the utility of reflective practice and critical thinking, and training and research as key resources for enhanced understanding. Overall, rather than a definitive and conclusive account of the maltreatment of children with disabilities, the intention is to be strongly informative, in addressing an issue that "*remains both critical and broadly neglected"* (Flynn & McGregor, 2017, p. 258).

Life Course Theory

This article will employ popular and persuasive developmental lifespan theories of the previous century, toward the critical consideration of the maltreatment of children with disabilities. These theories derive from a distinct scholarly tradition that, in many ways, differentiates them from life course theory. As such, they are used to substantiate a broader life course perspective, but in doing so, ought not to be conflated with it.

Starting with some definition of the life course perspective, this approach enables the conceptual integration of various factors that occur over time across a life or life period (Brady and Gilligan, 2018). According to White and Wu (2014, p.146), the life course perspective provides a helpful paradigm with which to organize concepts, theories, and ideas in child welfare research. From this approach, life is considered a progressive path that is followed by an individual, in tandem with ageing, from conception to death. The life course perspective offers a viewpoint which is considerate of the whole of life as encompassing opportunities for development and growth (Walker and Crawford, 2014). Rather than compartmentalised, a holistic view of life entails disparate life events, turning points, life transitions, cultural and social contexts, and biological and psycho-social factors, amid a rich megadiversity of key

influences (McGregor and Dolan, 2021). The life course perspective facilitates an appreciation of the cumulative effects of life experiences, including adverse experiences, and how early life can be instrumental for later life outcomes (Brady and Gilligan, 2018; Spratt and Kennedy, 2020).

Arguably, one way to promote a life course perspective is through theories that attend to life patterns unfolding over time. Developmental theories of the lifespan derive, oftentimes but not exclusively, from a common branch of psychology. Here, lifespan developmentalists conceptualise human development to be discernible across fixed, sequential stages (Payne, 2014). Many of these theories leave an impression of childhood as particularly character forming and instrumental for the future lifespan. Attachment theory, for instance, promotes the importance of early bonding and responsive caregiving for a child's future emotional welfare (Ainsworth 1989; Bowlby, 1951). Many theories also conceive of set life stages as entailing developmental needs that must be met, so that an individual can thrive and progress moving forward (Erikson, 1958; Freud, 1964).

Whilst theorists such as Erik Erikson, Jean Piaget and Mary Ainsworth have laid a bedrock of immense repute for future scholarship, their theoretical contributions are also dated and come with limitations. These theories can be overly simplistic, fail to account for and even perpetuate social injustices, be too linear, and lack nuance and sophistication in reflecting the complexity of human and life course diversity. The emergence of differing perspectives which place better emphasis on diversity across life pathways as well as the individualistic nature of life course experiences, has been progressive (Gitterman and Germaine, 2008; Payne, 2014).

There are also theoretical alternatives to developmental stage approaches. The psychologization of life experiences within many of these theories differs greatly from sociological perspectives of the life course. C. Wright Mills' (1959) account, for instance, of the sociological imagination has been seminal in promoting a perspective of the social reality of one's life, as enmeshed within a wider societal context. Alternatively, George L. Engel's (1977) biopsychosocial model promotes the centrality of converging biological, psychological and social factors in one's life. It is therefore less fixated on sociology or psychology alone. Finally, from a social work theoretical perspective, issues of equality, non-discrimination and social justice are key (Payne, 2014). Yet early developmental theories of the lifespan do little to account for this aspect, such as addressing why children from particularly marginalised communities experience more developmental disadvantage.

Whatever the case may be, regarding the best balance of focus on life course dimensions, it remains the case that core ideas from key lifespan developmental theories have stood the test of time. It is these core ideas with the most wide-ranging influence, that will be taken up to substantiate a life course view, all the while remaining critical of limitations to their use.

Disability Theory

The core aim of this paper is to inform understanding about safeguarding children with disabilities through a life course perspective. Having established key conventions of life course theory, some starting terminology and theory related to disability needs to be clarified. Abuse and neglect against children with disabilities and young people occur in the context of discrimination, prejudice and disadvantage faced by the disability community (Higgins and Swain, 2009). One aspect of this is a traditional medical model of disability that conceptualises children with disabilities as in need of

curative treatment to restore 'normal' biology or functioning (Goodley, 2016). Whilst bio-medical views on disability exhibit great variation, and medicine has made many constructive contributions to the disability community, the medical model has been criticised on some reputable grounds (Thomas, 2007). These contributed to the popularisation of a social model of disability that de-individualises disability and views it as a product of exclusionary societies that present impaired people with barriers to inclusion and equality (Oliver, 2013). As social inequality is an instrumental dimension of disability and child protection (such as with the marginalisation of disabled voices (Higgins and Swain, 2009) and the presence of disparate outcomes (Stalker et al., 2010)) disability terminology has ultimately been selected in this article to align with a social model and a rights perspective.

Review of Safeguarding Children with Disabilities

The purpose of this article is to examine the issue of safeguarding children with disabilities, taking a life course perspective. Thus far, we have established that there are increased challenges and complexities to safeguarding children with disabilities which are alluded to in existing research (Stalker & McArthur, 2012; Taylor et al., 2014). We have also now established that there are different theoretical perspectives on the life course and on disability. For the purposes of this article, the most authoritative developmental stage theories will be the focus. Moreover, a view of disability that aligns most closely with theory on a social model and a rights perspective will be taken up.

In the following sections, a review of safeguarding children with disabilities will be presented thematically. This is done through key propositions for future practice and knowledge. The specific focus is on attaining a life course perspective, using developmental stage theories to substantiate and inform this. Accordingly, the first theme will proceed with this focus, whilst attending to the critical, ethical and at times emotionally laden practice of child protection and welfare intervention.

Non-Intervention and Delays in Intervention have Life Course Impacts

The first proposition is that life course impacts of non-intervention, and delays in intervention, for children with disabilities in child protection and welfare, must be accounted for. Children with disabilities may be less likely to benefit from timely child protection and welfare interventions, or indeed have interventions at all, due to social inequality issues and evidence of misapplication of thresholds (Flynn & McGregor, 2017; Stalker et al., 2010; Vanderminden et al., 2017). Life-course theory also illustrates negative developmental impacts when crucial interventions do not happen early enough or are not timed correctly in life-cycle developmental terms (Ainsworth 1989; Bowlby, 1951; Greene, 2008). Contextual here is evidence of differences in child protection and welfare services and out-of-home care placements for children with disabilities above majority population peers (Flynn & McGregor, 2017; Kelly et al., 2017; Thomas et al., 2023). Moreover, the sum total of a century of life-span developmental theory and research, tells us that this must have developmental impacts for many children with disabilities.

Internationally, there is evidence of more permissibility toward the abuse and neglect of children with disabilities within the operation of child protection and welfare services, for example, having higher thresholds for intervening (Stalker et al., 2010; Vanderminden et al., 2017). The genesis of this permissibility may potentially be

traced back across several lines. Practical issues such as lack of available foster care, respite, or residential care placements for children with disabilities with advanced medical and social care needs should not encourage permissible practices, and yet sometimes do. Research evidence serious delays in some cases, in removing children with disabilities from home environments where they are at risk. This can relate to a lack of placements or bureaucratic, managerial, and funding issues at the intersection of cross-departmental and cross-agency working (Flynn & McGregor, 2018; Commission of Investigation, 2021; Office for the Ombudsman for Children, 2018). Delays also link to the exhaustion of excess resources in child protection and welfare work for children with disabilities (Adams & Leshone, 2016). Moreover, children with disabilities who lack verbal articulacy or have cognitive impairments may need additional support, for instance, with communication, such as with rapport building and the use of assistive tools and technologies (Kelly, 2007). Yet, it is vital that their voices are heard, should they need to disclose maltreatment, in the context of a higher propensity for them to experience it (Kelly et al., 2023).

Overall, child protection work oftentimes unfolds in time-pressurised practice environments (Ravalier et al., 2023). Additional measures for safeguarding children with disabilities such as dedicated staff training (Brown, 2003), may be deprioritised in favour of responding to immediate caseload risks, known colloquially in some child protection settings as 'firefighting'. At the intersection of all these factors, is a core propensity for children with disabilities to lack timely child protection and welfare interventions, or indeed have interventions at all, at potentially higher rates than for non-disabled peers. The core proposition has been that the life course impacts of this circumstance, for children with disabilities, must be accounted for.

Disability may be a Complicating Factor in Comprehending Lifespan Developmental Impacts

Having established concerns around the timing of child protection interventions for children with disabilities, should they occur at all, the second proposition covered in this section is one pertaining to disentanglement. Specifically, the proposition is that disability may be a complicating factor in comprehending lifespan developmental impacts. Where disentanglement is needed, is with reference to the intersection and convergent space of effects of disability, enmeshed with developmental impacts of abuse and neglect.

In looking to unpack the consequences of this from a life-course perspective, attachment theory as a developmental theory relevant to the life course, is instructive. With reference to child welfare, White et al. (2020, p.viii) conclude that *"it is difficult to overstate the soaring accent of the persuasive collection of ideas that is attachment theory".* When a theory has been so immensely persuasive, however, one is perhaps best to exercise caution to remain a critical consumer of ideas. Taking this as a starting point, the core postulations of attachment theory will now be outlined. Firstly, between an infant and their primary caregiver, an attachment ought to form as an affectional and enduring bond that is sufficiently intense as to meet the child's needs (Ainsworth 1989). After this, reciprocal and affectional bonding between caregivers and infants is important for the infant's development across their lifespan (Bowlby, 1951) and impacts upon the infant's formation of self-identity (Adams, Dominelli, & Payne, 2017). Attachment has life-course implications as one's attachment style impacts the way they conduct and conceptualise future relationships. Attachment styles include 'secure' which enables emotional intelligence and resilience, and 'fearful avoidant'

which promotes a proneness to emotional overwhelm and feelings of abandonment (Howe, 2011). Here, of course, some attachment styles are more preferable to have than others (Ainsworth 1989; White et al., 2020). The key implication of attachment theory for the present account is that unique safeguarding issues for children with disabilities may undermine optimal child protection responses as informed by attachment theory.

Attachment may look different, for instance, for children with disability. These children are often less likely to form optimal attachments. This is due to disability-related impediments to healthy attachment like the child having cognitive impairment affecting their interactions with their caregivers. Infants with disability may also show different attachment behaviours, for example, children with autism may not seek proximity with care-givers due to touch aversion and sensory issues (Fletcher, Flood, & Julian Hare, 2016). Adding complexity to this, is the effects of maltreatment. Consider one example of this for illustration. There is a risk, in safeguarding children with disabilities, to misidentify signs of abuse as being consequences of disability. A child with disability who is non-verbal, for instance, may exhibit challenging and self-injurious behaviours which could be assumed to derive from disability. Yet, children with disabilities are considerably more likely to endure poverty (Emerson, 2004). Thus, the astute practitioner should consider the potential for this behaviour to be a sign of hunger related to unwilful, or indeed wilful, neglect (Flynn & McGregor, 2018; Emerson, 2004). Also, consider the case of bodily bruising or discernible injury to the child that could be equated with self-injurious behaviour due to the child's disability. With a higher propensity for children with disabilities to be victimised through physical violence (Jones et al., 2012), this should be considered as a potential sign of physical abuse.

Returning, in this context, to attachment theory, signs of poor attachment linked to unresponsive caregiving or behavioural and emotional issues stemming from poor attachment could fail to be recognised as such. Rather, a child's disability could be assumed to be the cause for their concerning presentation. Here, the overarching challenge is a formidable one. Specifically, practitioners may struggle to dis-entangle signs of abuse from signs of disability, and ought to critically question any embedded assumptions held in this context (Shah and Bradbury-Jones, 2018). In doing so, the proposition has been that disability may present a complicating factor, in comprehending lifespan developmental impacts.

Support for Children with Disabilities should be Provided around Life Stage Challenges

The third and final proposition pertains to life-stage challenges. Specifically, it is proposed that support for children with disabilities should be provided with specific reference to life-stage challenges. To make this case, lifespan developmental theories are particularly informative. First, however, it is helpful to establish the focus on child protection disparities as a case for illustration. Where child protection concerns are unresolved about the family home, then stints in out-of-home care may be necessary. It is notable here that existing research emphasises the importance of the life course for transitions in and out of care for care-experienced young people (Brady & Gilligan, 2018). Children with disabilities are evidenced in some contexts to experience disparities around rates of care admissions and durations in care when compared to majority population peers (Flynn & McGregor, 2017; Kelly, Dowling, & Winter, 2012; Sainero, De Valle, Lopez, & Bravo, 2013). A review, for instance, of 58 empirical and

theoretical studies by Kelly, Dowling and Winter (2012) demonstrated that children with disabilities are over-represented in 'looked after child' populations. Children with disabilities have reduced likelihood of returning to their birth family, and if they do return home then the likelihood is this will happen after a longer period of time in State care so those children will be older. It is also troubling that children with disability are adopted, and achieve permanence with foster parents, less regularly than non-disabled peers (Kelly, Dowling, & Winter, 2012). Considering that out-of-home placement is a significant life event (Brady & Gilligan, 2018), lifespan development theories may help practitioners understand how to optimize the value of these events in creating momentum for positive change.

Rutter and Rutter (1993), for instance, studied orphans adopted into Western families, thereby producing a theory around life-course development. Their work highlighted chain reactions that arise from key events creating life-span butterfly effects. Their work also emphasized the value of 'turning points' as well as 'windows of opportunity' in a child's life which may be normative (such as moving from primary to secondary education) or non-normative, such as being placed in foster care with a familiar relative (Rutter and Rutter, 1993). This theory is also far from unique in supporting the case being made. In this sense, other theories also indicate the presence of set life challenges and thus the value of supporting children with disabilities with specific reference to these is evident.

Jean Piaget (1896–1980), for instance, has made a seminal theoretical contribution with respect to set stages of cognitive development. These included an early 'sensorimotor' stage from 0-2 years old where *"mental processing consists of sensory perceptions and simple bodily responses"* (Sudbery, 2009, p.310). Thereafter lies the 'pre-operational' stage which unfolds between 2-7 years, where the child develops a more differentiated and developed internal representation of the outside world (Sudbery, 2009). This is also followed by further stages as the child grows and develops. Piaget's work provided an evidence base for the idea that cognitive development occurred in set stages, not dissimilar to Kolberg's (1963) rendition of moral reasoning. The latter depicts moral development as building with age across key stages. Within this, moral reasoning is incremental and developmental, and as such, the rigidity of alignment between stages and ages is of interest to question. Alternatively, in Coleman's focal theory of adolescence, there is some flexibility, rather than total rigidity, where relationship patterns for adolescents are at increased focus at different age periods. Patterns, however, overlap, meaning there is no exclusive relationship between a pattern and a particular age (Coleman, 1989; Coleman and Hendry, 1999). Within this, qualities of 'storm and stress' were not mandatory parts of teenage life, but rather the convergence of challenges would create stress, and as such, the adolescent would seek to take one challenge at a time (Coleman, 1989).

What is at the heart of all of these theories, arguably, is the idea that there are common life challenges and phases of development to be undertaken. The overarching proposition has been that support for children with disabilities ought to be provided with specific reference to these life-stage challenges. In this context, existing literature establishes the significance of intersectionality and the life course as two converging concepts of importance related to support and protection (Dettlaff and Boyd, 2022; McGregor and Dolan, 2021). Within this, intersectionality is a concept centred on overlapping identities, creating associated conditions of privilege and disadvantage (Crenshaw, 2017). Therein, disability is evidenced to be one key identity. This is an identity integral to the intersectionality of child protection and welfare (Thomas et al.,

2023), and one that should be considered when looking to support best outcomes whilst protecting children from harm (McGregor and Dolan, 2021).

Recommendations and Pathways Forward

Thus far, a review of key dimensions of safeguarding children with disabilities has been presented with respect to the life course. Therein, lifespan developmental theories have been applied for a substantive effect. Moving forward, what remains to be considered, are pathways forward for enhancing and informing safeguarding practice and academe. For the remainder of the article, this will be the focus. Three areas of recommendation are presented. First, attention is given to the value of a developmental history informed by the voice of the child with disability. Second, focus is applied to the utility of reflective practice and critical thinking for addressing biases and assumptions. Third, training and research are considered key resources for enhanced understanding.

In presenting recommendations, it is helpful to retain awareness of 'life course challenges' which link to social problems that are not irrelevant to child protection and welfare. Practitioners need to think about support and protection as related, and in doing so, affirm *"social support across the life course"* (McGregor and Dolan, 2021, p.95). In tandem, outcomes and outcomes measurement are integral to child protection and welfare work (Hood et al., 2020), and here, the life course must also be considered with respect to improved outcomes in later life for children with disabilities (McGregor and Dolan, 2021). The overall assertion is that awareness of a wider life course is important in safeguarding children with disabilities. Accepting this is the case, it is now timely and constructive to turn toward the first area of recommendation.

Compile a Developmental History informed by the Voice of the Child

First and foremost, it is recommended that practitioners compile, or benefit from the compilation of, a developmental history informed by the voice of the child with disability. Whilst some cases, such as those immediately screened out, would not require this, a developmental history is arguably a critical resource where more in-depth assessment, planning and intervention are scheduled. Compilation of a developmental history as a chronology that accounts for the child's past developmental needs and experiences may be vital for safeguarding practice rigour. Illustrating this is Erik Erikson's stages of psycho-social development which are both long-established and influential upon theories of human development (Pelaez et al., 2008). The contribution of a Eriksonian theoretical framework is also complimentary of other impactful stage theories of development, such as theories derived from the work of Sigmund Freud (see Freud, 1964) and Kohlberg (1963), in one relevant way.

Specifically, these theories set out common and discontinuous psycho-social challenges or crises that the child must resolve or contend with across the life course. Whilst it is important to acknowledge criticisms of these theories, such as limitations around the language used and common misinterpretation of original works (Pelaez et al., 2008), the theories do illustrate the importance of supportive environments and caregiving across life stages. In Eriksonian stage theory, the caregiver and environment must be supportive and conducive to resolving challenges (Erikson, 1958), which has relevance for children with disabilities who may intersect with child protection and welfare services due to experiences of neglect. The first psycho-social stage between ages one and three years, referred to as 'autonomy vs shame and doubt', for instance,

is resolved where the infant is supported to explore their environment independently and gain autonomy needed for healthy development. Alternatively, this theory purports that infants who are restricted severely at this stage, experience shame and doubt, translating to a lack of confidence and independence (Erikson, 1958, 1963).

Yet, with specific reference to unique safeguarding challenges for children with disabilities, it may be harder in some respects to compile a developmental history and profile of the child to account for their experiences of these life-stage challenges. Warley et al. (2014, p.94) contend that the *"concept of development is sufficiently important in social work practice insofar as change or disturbance in biological, psychological, or social conditions can produce deviation from normal"* healthy development and presentation. The expected developmental trajectory of the child may also be impacted by disability making it harder to compile an accurate developmental history. Moreover, some children with disabilities struggle to have their experiences heard (Kelly, 2007), and in child protection and criminal justice systems, the credibility of their accounts can be undermined on account of disability (Flynn, 2021). One expression of this is poor rates of proceeding to prosecution in cases of abuse of children with disabilities (Edwards, Harold, & Kilcummins, 2012). In this context, verbal accounts that are gathered from children with disabilities may be undermined by notions of being prone to suggestibility, acquiescence bias and being easily influenced due to the child having an intellectual or learning disability (Flynn, 2021; Goldsmith & Heather, 2015; Simons, Booth, & Booth's, 1989).

In this context, one useful tool for child protection practitioners, attempting to compile a chronology or developmental history of the child with disability's life, is a lifeline map. Using crayons, markers or paints, and assisted where required, the child draws a line on paper from birth to present date, and plots along that line major events and influences depicted through drawings, colours and shapes. In the compilation of this piece, the practitioner may also engage the child in conversation, where possible, to ascertain the meaning and significance according to the illustrations (Morgaine & Capous-Desyllas, 2014). The artistry of the process may enable non-verbal children to disclose past harm which could supplement any non-verbal disclosures and indications of abuse such as major changes in personality, soiling or signs of inflicted injury (Crowley, 2016; DCYA, 2017; Vanderminden et al., 2017).

It ought to be acknowledged, however, that whilst it is valuable for child protection practitioners to understand theory and integrate it with their work, this is not always possible to prioritise given the demands of their work. Practitioners in the trenches of child protection must prioritise the acute, day-to-day management of immediate risk due to demanding caseloads (Ravalier et al., 2023). In this context, it is suggested that a developmental assessment could be something that contracted service providers compile for any child with disability who is expected to avail of medium to long term and significant service intervention, such as placement in state care. The history could also be compiled by external psychological or social care services commissioned by the child protection agency, or indeed completed internally by staff with availability that frontline social workers don't have. The key point is that social workers should be developmentally aware when planning significantly for children with disabilities in a child protection context. If a social worker can have such a history prepared for them, it can then be used to inform the purchasing of services, co-creating of expectations with foster carers, plans for reunification or other social work led activities.

In this context, the core recommendation is one grounded in inclusivity and life course awareness. Namely, it is recommended that practitioners compile, or consult a

developmental history and do so whilst being informed by the voice of the child with disability.

Use Reflective Practice and Critical Thinking to Address Biases and Assumptions

The second recommendation put forth here is that life course-attentive practitioners should use reflective practice and critical thinking to address any biases and assumptions that may be present around disability. Child protection and welfare practitioners ought not only to be concerned with determining whether maltreatment has occurred but also with conducting optimal planning for the child moving forward (Beckett, 2007). Whilst the future developmental trajectory and needs of the child are considered here, the contribution of Paul Baltes' (1987) seminal lifespan model of ageing adds the dimension of ageing as an active process to be successfully achieved rather than a passive and solely biological inevitability. Baltes' (1987) set out conditions of ageing including that it is multi-dimensional with cognitive, socio-emotional and biological components, and that it is contextual, such as related to normative age-graded historical and cultural practices like graduating school. In planning for healthy ageing for the child with disability in a holistic sense, the practitioner should be mindful of unique life-course challenges for children with disabilities.

Mark Preistley's work (2001; 2003) is particularly explanatory here. Therein he demonstrates how people with disabilities are oftentimes assigned to life stages that are childlike or similar to an older person and are accordingly denied conditions reflective of normal life-stage positioning. The latter would include denied access to paid employment once reaching working age or being unsupported to become a parent when reaching a normative parenting age range (Preistley, 2001, 2003). As social inequalities are evident around child protection and welfare for children with disabilities (Crowley, 2001; Nazer et al., 2017), practitioners need to consider whether embedded assumptions and biases exist. Accordingly, the proposition has been that they should allow time for reflection, notwithstanding the overall dearth of time available, in child protection practice (Taylor et al., 2014).

Considering the lack of available time in frontline practice, with which to reflect, one way to enhance reflective practice is to maximise the value of reflective spaces already in operation in practice. Social workers can test bias, for instance, by actively and critically reflecting on their conceptualisation of disability, with their supervisors during mandatory professional supervision. Here, the supervisory space can be utilised to discuss and unearth any assumptions around disability, including whether any differential treatment of a child with disability is present, and what life-span impacts of child protection interventions could be envisioned for a child with disability. Furthermore, effective reflection may be embedded in practice simply by being life-course attentive. Through inputs like ideas-sharing, training, social work education and reading, attention may be drawn to the high relevance of the life-course for children with disability in child protection. The practitioner, who then reflects naturally 'in-action', according to seminal theorist Schön (1987), will be more prone to considering the life-course, and any biases related to disability, within their natural assessment of practice situations. The life-course, thereby, becomes a more central focus within *"the competence and artistry already embedded in skilful practice"* (Schön, 1987, p. xi).

Use Training as a Resource for Understanding

The third and final recommendation to be made refers to training. It is proposed that training should be viewed as a key resource to inform understanding regarding childhood disability, child maltreatment and the life course. Training would need to be evidence-based, and accordingly, underpinned by theory and research. Theories and research provide vital aids to complement practice wisdom. Consider the immense contribution of attachment theory to contemporary child welfare work (White et al. (2020). It designates that life-span impacts of the timing of interventions, or lack thereof, must be considered. When safeguarding children with disabilities, attachment theory is instructive across all stages. It designates, for instance, that the removal of a child from their primary caregiver, or indeed placement planning to promote bonding with a foster caregiver, should be understood in terms of developmental impacts across the lifespan (Howe, 2011). It is also just one of a suite of available developmental theories that reminds us that the disproportionate maltreatment rates of children with disabilities, and social inequalities in safeguarding responses (Flynn and McGregor, 2017; Stalker et al., 2010), should be understood in the context of the child's wider life-course (Greene, 2008; Howe, 2011).

Children with disability's care needs may be understood differently to other children of the same life stage (Priestley, 2001; 2003). Adolescent young people with disabilities may be raised in a childlike way, for instance, that would be normative for younger children such as being denied social independence. Such life-stage biases can also feature among professionals assessing children with disabilities' needs. Disability training is therefore important in child protection and welfare to avoid problematic responses evidenced in research such as over-empathy with caregivers, rather than centralising the child with disability's needs and adopting a children's rights perspective (Flynn and McGregor 2017; Raymond 2010; Stalker et al. 2010). A life-course perspective may be useful here in addressing professional's attitudes and perceptions as well as organisational culture which in some cases undermines effective safeguarding work with children with disabilities (Brown 2003; Crowley 2016; Higgins and Swain 2009; Stalker et al. 2010). Taking account of these complexities, the overall recommendation has therefore been, that training should be recognised as a vital resource to inform understanding.

To operationalise this recommendation into practice, governmental and agency funding streams that not only support training, but support practitioners to have the time to attend training, is vital. Policy makers, trainers and academics who want to target the issue of continued barriers to equality in safeguarding disabled children, need to be realistic about the pressures of frontline practice. Rolling out training on child development and disability to target newly on-boarding workers, who do not yet have a full caseload, is one way to be strategic about the pressures of practice. Whilst child development training is already a feature of child protection systems, addressing complicating factors related to disability and child maltreatment is not commonplace in the provision of this training. Stand-alone training about the specific intersection of disability, child protection and the life-course is arguably needed, given the complexity inherent in this subject matter. As it is children's lives at stake, within the continued presence of significant barriers to safety and equality for disabled children (Stalker & McArthur, 2012; Taylor et al., 2014), measures such as dedicated training need to be urgently prioritised.

Conclusion

There is much left to comprehend with respect to the lifespan and developmental impacts of maltreatment on children. Disability may also add an additional complex layer to this picture. Therefore, multiple avenues for future research remain. In particular, research geared toward exploring how child protection inequalities for children with disabilities can impact their developmental trajectories would be helpful. A research question around better understanding prejudices that underlie the over-representation of children with disabilities in child protection and out-of-home care is warranted. Moreover, research investigating how different out-of-home care rates for children with disabilities affect these children, across the life-span, would be immensely valuable. Overall, fruitful opportunities for future research around the intersection of childhood disability, the life-course and child protection, remain abundant.

As rates of maltreatment are disproportionately pronounced for children with disabilities above majority population peers (Flynn, 2020, 2021; Stalker & McArthur, 2012; Taylor et al., 2014), there is a continued onus on practitioners, researchers, and policymakers to understand key contributing factors. In this article, a life course perspective has been taken up, given its established relevance to the provision of support and protection in child protection and welfare services (McGregor and Dolan, 2021). In future, research that seeks to disentangle disability in its vastly variable forms, from the effects of maltreatment, will be helpful in considering how influences on the *"life course affects developmental trajectories"* moving forward (Boyd, 2020, p.221).

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There are no conflicts of interest to disclose.

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