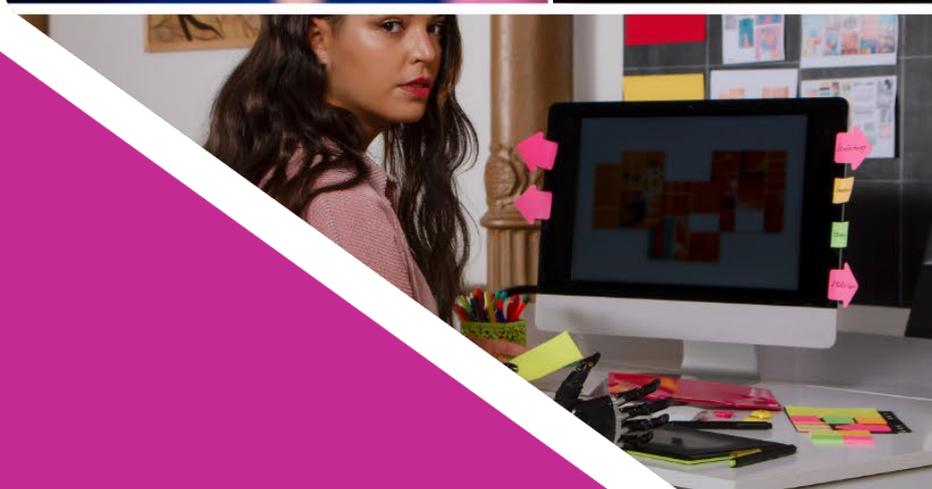


Údarás Náisiúnta Míchumais
National Disability Authority



Experience of sexual harassment and sexual violence by disabled students in Irish Higher Education Institutions

Experience of sexual harassment and sexual violence by disabled students in Irish Higher Education Institutions

February 2024

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Statement on language

In this report the terms “people/persons with disabilities” and “disabled people” are used interchangeably. Many people within the disability rights movement in Ireland recognise the term ‘disabled people’ because it is considered to acknowledge the fact that people with an impairment are disabled by barriers in the environment and society and so aligns with the social and human rights model of disability. However, we also recognise that others prefer the term “people/persons with disabilities”. This also reflects the language used in the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). We also acknowledge that some people do not identify with either term.

The terminology used to describe different disability types in this paper reflect the language used in the data collection tool rather than the language advised by the NDA. For example, the data collection tool asked about ASD (autism spectrum disorder). NDA advice is to use the terms autism or autistic and avoid use of the word disorder. For further information on disability-related language and terminology, please refer to the NDA’s Advice Paper on Disability Language and Terminology.¹

Content warning

The data collected in this report relates to personal experience of sexual misconduct, specifically sexual harassment and sexual violence. Some of the language used in the report is explicit and some people may find it uncomfortable.

Information on how to get help, if it is needed, can be found below:

- Dublin Rape Crisis Centre 24-hour helpline 1800 77 8888 and information on [Finding Your Way after Sexual Violence](#)
- Rape Crisis Help - website with information about the professional support and the choices available to survivors of sexual violence. See www.rapecrisishelp.ie
- [Consent Hub](#) developed by the University of Galway.
- Women’s Aid National Freephone Helpline 1800 341 900 is available 24 hours a day, 7 days a week; alternatively send an email to: helpline@womensaid.ie

¹ National Disability Authority (2022) *NDA Advice Paper on Disability Language and Terminology* Available <https://nda.ie/publications/nda-advice-paper-on-disability-language-and-terminology>

- The Samaritans, call the Samaritans free any time, from any phone, 365 days on 116 123 or email jo@samaritans.ie (note it may take several days to get a response by email).
- Speak Out is an online and anonymous reporting platform for staff and students of participating institutions² to report incidents of bullying, cyberbullying, harassment, discrimination, hate crime, coercive behaviour/control, stalking, assault, sexual harassment, sexual assault, and rape. Speak Out will help you to find relevant supports and highlight formal reporting procedures, should you wish to use them. The link to Speak Out can be found on each institution's website.

²Atlantic Technological University, Dublin City University, Dundalk Institute of Technology, Dun Laoghaire Institute of Art and Design Technology, Maynooth University, Munster Technological University, National College of Art and Design, National College of Ireland, Royal College of Surgeons Ireland, South East Technological University, Trinity College Dublin, Technological University Dublin, Technological University of the Shannon: Midlands Midwest, University College Cork, University of Galway and University of Limerick. University College Dublin have developed a bespoke anonymous reporting tool called Report & Support.

Executive summary

Introduction

This report conducts secondary analysis of the National Survey of Student Experiences of Sexual Violence and Harassment in Irish Higher Education Institutions (2021).³ This survey was conducted by the University of Galway on behalf of the Higher Education Authority (HEA). This is the first survey conducted on this topic at the request of the Minister for Further and Higher Education, Research, Innovation and Science, Simon Harris, T.D. As disability was not explored in depth in the original report, the purpose of this report is to establish whether students with disabilities were more likely to have experienced sexual harassment, sexual violence, and particular sexual violence perpetrator tactics compared to students without disabilities. Sexual harassment refers to non-physical forms of sexual misconduct; sexual violence refers to physical forms of sexual misconduct. Sexual violence perpetrator tactics are categorised into three groups: coercion; incapacitation, force, or threat of force; and engaging in the behaviour without indication that the behaviour was welcome.

Method

In 2022 NDA submitted a request to the Higher Education Authority (HEA) to access the National Survey of Student Experiences of Sexual Violence and Harassment in Irish Higher Education Institutions (2021) data and it was received from University of Galway in 2023. Data were sent in an anonymised, password protected format with no personal identifiers.

Sample

The survey was distributed to 245,000 students. In total, 7,901 students completed the survey. From the entire sample of students with and without a disability 41% (n=3,230) had experienced sexual violence since enrolling in their Higher Education Institutions (HEI).

Of the 7,901 students who completed the survey 19% (n=1,523) reported a disability. The largest cohort indicated they had a mental health difficulty (n=914, 62%), followed by ASD/Asperger's, ADHD or ADD (n=189, 13%). Respondents could only specify one disability.

³MacNeela, P., Dawson, K., O'Rourke, T., Healy-Cullen, S., Burke, L., Flac, W. (2022a) *Report on the National Survey of Student Experiences of Sexual Violence and Harassment in Irish Higher Education Institutions Summary of Survey Findings*. Available <https://hea.ie/policy/gender/national-survey-of-the-experiences-of-students-in-relation-to-sexual-violence-and-harassment/> Accessed May 2023.

While it is not possible to tell from available survey data when a student's disability was acquired, it is assumed that most disabilities were present at the time of experiencing sexual harassment or sexual violence. However, this cannot be assumed for respondents with a mental health difficulty, given this difficulty may have been directly caused because of sexual violence and/or sexual harassment experienced. Due to this and due to the large proportion of survey respondents with a disability having a mental health difficulty (62% of those who stated their disability type), we divided the cohort of disabled students into two groups for analysis: students with a disability (not a mental health difficulty) (n=536) and students with a mental health difficulty (n=914).⁴

A series of logistic regressions were performed to identify whether having a disability was associated with an increased likelihood of having experienced sexual harassment, sexual violence and particular sexual violence tactics. The gender identity and sexual orientation of respondents were controlled for in these regressions, as these variables may be linked to an increased risk of victimisation and the profiles of students with and without disabilities differed on these characteristics.

Key findings

Experience of sexual harassment

Students were asked a series of questions to indicate if in the last four years they experienced sexual harassment by someone related to their Higher Education Institute (HEI). Analyses were conducted on 11 questions about sexual harassment under a range of themes including sexual hostility, unwanted sexual attention, sexual coercion and sexual harassment via electronic communication or visual/written materials. Students' responses to these individual types of sexual harassment were used to create a general measure indicating whether they had experienced sexual harassment by someone related to their HEI or not. Out of the entire sample of students with and without a disability 70% (n=5,509) had experienced sexual harassment by someone related to their HEI.

Just over three quarters of respondents with a disability (not a mental health difficulty) (76%) had experienced sexual harassment by someone related to their HEI. While they were not significantly more likely to have experienced any form

⁴ Not all students who indicated they have a disability disclosed their disability type. For this reason, the number of students with a disability (not a mental health difficulty), n=536 and the number of students with a mental health difficulty n=914 does not equate to the proportion of students who indicated they had a disability (n=1,523).

of sexual harassment compared to those without a disability (71%), they were significantly more likely than those without a disability to experience three specific types of sexual harassment. These included being made to feel like they were being bribed with some sort of reward or special treatment to engage in sexual behaviour (sexual coercion), having someone imply they'd receive better treatment if they were sexually cooperative (sexual coercion) and experiencing someone spreading unwelcome sexual rumours about them by electronic means.

A large majority of students with a mental health difficulty (85%) had experienced sexual harassment from someone in their HEI. They were significantly more likely than those without a disability (71%) to have experienced sexual harassment from someone in their HEI in the previous four years, and to have experienced all 11 types of sexual harassment.

Experience of sexual violence

Students were asked since enrolling in their HEI if they had experienced any of the six acts of sexual violence: sexual touching, oral sex, vaginal penetration, anal penetration, being made to perform anal or vaginal sex and attempted oral, anal, or vaginal sex. Students' responses to the individual types of sexual violence were used to create a general measure indicating whether they had experienced sexual violence or not since enrolling in their HEI. From the entire sample of students with and without a disability 41% (n=3,230) had experienced sexual violence since enrolling in their HEI.

Almost half of students with a disability (not a mental health difficulty) (47%) experienced sexual violence and they were significantly more likely than those without a disability (41%) to have experienced sexual violence since enrolling in their HEI. They were also significantly more likely to experience all types of sexual violence, with the exception of being made to perform anal or vaginal sex (this question was only applicable to males and non-binary students).

Almost six in ten students with a mental health difficulty (58%) had experienced sexual violence since enrolling in their HEI. They were significantly more likely than those without a disability (41%) to have experienced sexual violence and they were significantly more likely to have experienced all forms of sexual violence.

Experience of sexual violence tactics

Students were asked how often they experienced six specific perpetrator tactics during sexual violence. These tactics were collated into three categories: coercion; incapacitation, force, or threat of force; and engaging in the behaviour without indication that the behaviour was welcome. Both groups of students with disabilities were significantly more likely than those without disabilities to have experienced each perpetrator tactic.

Conclusion and recommendations

The findings from this report show notable proportions of students with and without disabilities who have experienced sexual harassment and sexual violence. Out of the entire sample of respondents to this survey, 10% (n=780) of these students had a disability and had experienced sexual violence and 15% (n=1,185) had a disability and had experienced sexual harassment. Students with disabilities (not a mental health difficulty) were more likely to have experienced sexual coercion, having sexual rumours spread about them online and were more likely to have experienced all forms of sexual violence and all forms of perpetrator tactics than those without disabilities. Students with a mental health difficulty were more likely to have experienced all forms of sexual harassment, sexual violence and perpetrator tactics than those without disabilities.

NDA have four key recommendations based on the outcomes from this report, two in relation to Higher Education Institutions and two in relation to future data collection:

Recommendations for Higher Education Institutions

- The NDA recommends that all HEIs ensure consideration of disability is factored into all elements of their sexual harassment and violence awareness campaigns, on reporting mechanisms, in investigations of complaints, and in supports for people who have experienced harassment and/or violence.
- The NDA recommends that services provided by HEIs to support student disclosure, reporting and complaints of sexual harassment and/or sexual violence are universally designed accessible services.

Recommendations for future data collection

- The National Statistics Board recommends that the 2022 Census definition of disability be used for survey data collection.⁵ The National Disability Authority agree with this approach as it enables issues for people with disabilities to be identified and monitored in line with obligations under the UNCRPD.
- The NDA recommends that analysing the experiences of those with disabilities is a priority in future national surveys to ensure any subsequent recommendations are informed by and relevant to disabled people. This is particularly important for surveys such as this one, where it is widely

⁵ National Statistics Board (2021) *National Statistics Board Strategic Priorities for Official Statistics 2021 – 2026* <https://insb.ie/publications/>

assumed that disabled people will be more at risk for a negative outcome. The National Statistics Board also recommends that ‘disabled/non-disabled analyses of relevant statistics be made readily available’ when reporting on survey data.⁶

Next steps

The findings of this report will be produced in a visually appealing and informative format, for example a graphic or infographic. This will be used to publicise the findings to relevant bodies, including HEIs; students with disabilities; Government Departments; the HEA and relevant disability organisations (e.g., AHEAD). This will allow the findings to be disseminated to a wide audience. Opportunities to present the research findings will be pursued. Analysis on the National Survey of Staff Experiences of Sexual Violence and Harassment in Irish Higher Education Institutions will be explored at a future date.

Introduction

Article 16 of the UNCRPD recognises the rights of people with disabilities to live a life free from exploitation, violence and abuse. While evidence suggests that people with disabilities are at increased risk of experiencing violence and abuse,⁷⁸⁹¹⁰ in Ireland there has been limited national data to assess how people with disabilities in Ireland fare in relation to Article 16 (NDA, 2022).

In April 2021, the Minister for Further and Higher Education, Research, Innovation and Science Simon Harris launched a national study into staff and students from HEIs experiences of sexual harassment and sexual violence in Ireland. Along with questions about the experience of sexual violence and sexual harassment the survey collected data on the disability status of both student and staff respondents. This data is welcomed as it allows disaggregation on the experiences of sexual violence and sexual harassment by respondents with and without a disability. Although this sample is not representative of the general population the data yields important findings about the experiences of sexual violence and sexual harassment amongst staff and students in HEIs. In this study,

⁶ Ibid p.27.

⁷ <https://www.sciencedirect.com/science/article/pii/S1326020023012372>

⁸ <https://bmcpublikehealth.biomedcentral.com/articles/10.1186/s12889-018-5277-0>

⁹ https://iris.unito.it/bitstream/2318/1690810/1/ENG328_1.%20Longobardi.pdf

¹⁰ [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(11\)61851-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)61851-5/fulltext)

the Higher Education Authority (HEA) conducted online national surveys to monitor the experiences of students¹¹ and staff¹² in relation to sexual harassment and sexual violence. Sexual harassment refers to non-physical forms of sexual misconduct; sexual violence refers to physical forms of sexual misconduct. The surveys were completed by 7,901 students (19% reported a disability) and 3,516 staff members (6% reported a disability). Two significant reports have been published on the findings of these surveys.¹³ In October 2022, the ‘Ending Sexual Violence and Harassment in Higher Education Institutions Implementation Plan, 2022-2024’ was published to address recommendations arising from these surveys. As disability was not explored in depth in the original reports these recommendations were not directly informed by the specific experiences of people with disabilities.

The purpose of this report is to describe the experiences of sexual harassment and sexual violence by disabled students in Irish HEIs by conducting secondary analysis of the data collected by the HEA surveys. The experiences of disabled students will be compared to the experiences of students without disabilities. The analysis of staff experiences will be reported in a separate publication.

National data on the experiences of sexual violence and sexual harassment amongst people with disabilities

In 2020, a national survey on students’ sexual violence and harassment experiences in higher education institutions (HEIs) was conducted by University of Galway’s Active* Consent Programme in partnership with the Union of Students in Ireland (USI).¹⁴ A total of 6,026 students completed the survey and 14.7% of these respondents had a disability. This study found that students with a disability reported higher rates of negative experiences across all measures of

¹¹ MacNeela, P., Dawson, K., O’Rourke, T., Healy-Cullen, S., Burke, L., Flac, W. (2022a) *Report on the National Survey of Student Experiences of Sexual Violence and Harassment in Irish Higher Education Institutions Summary of Survey Findings*. Available <https://hea.ie/policy/gender/national-survey-of-the-experiences-of-students-in-relation-to-sexual-violence-and-harassment/> Accessed May 2023.

¹² MacNeela, P., Dawson, K., O’Rourke, T., Healy-Cullen, S., Burke, L., Flac, W. (2022b) *Report on the National Survey of Staff Experiences of Sexual Violence and Harassment in Irish HEIs*. Available <https://hea.ie/assets/uploads/2021/04/Full-report-Staff-Jan-2022.pdf> Accessed May 2023.

¹³ See <https://www.gov.ie/en/publication/09bb5-report-on-surveys-of-experiences-of-sexual-violence-and-harassment-in-higher-education/>

¹⁴ Burke, L. et al (2020) *The active* consent/union of students in Ireland sexual experiences survey 2020: Sexual violence and harassment experiences in a national survey of higher education institutions*. Available at <https://www.drugsandalcohol.ie/32244/1/Sexual-Experiences-Survey-2020.pdf>

sexual misconduct and harassment compared with students who did not have a disability. The three most prevalent experiences for those with disabilities were sexist hostility (76.5%), sexual hostility (69.0%) and unwanted sexual touching, completed or attempted penetration (55.7%). The largest gaps between students with and without disabilities were with regard to experiencing force or threat of force (31.8% of those with disabilities compared to 17.3% of those without) and unwanted sexual touching, penetration, or attempted penetration (55.7% of those with disabilities compared to 41.5% of those without disabilities).

In 2022 the Central Statistics Office conducted a Sexual Violence Survey exploring national prevalence rates of sexual violence in Ireland. This survey focused on respondent experiences of sexual harassment and sexual violence in their lifetime.¹⁵ The 2022 Sexual Violence Survey indicated that 52% of women and 28% of men reported experiencing sexual violence in their lifetime.¹⁶ In the Sexual Violence Survey 45% of respondents with a disability indicated they experienced sexual violence in their lifetime compared to 39% of those without a disability. Over one third of those with a disability (35%) indicated they had experienced sexual violence as a child compared to 26% of those without a disability. Finally, 30% indicated they experienced sexual violence as an adult compared to 25% of those without a disability. This suggests that people with disabilities are more at risk of experiencing sexual violence and sexual harassment.¹⁷

Methodology

National survey of student experiences of sexual violence and harassment in Irish Higher Education Institutions (2021)

The survey was distributed online in April/May 2021 using Microsoft Forms to 245,000 students and was completed by 7,901 students. The content of the survey was adapted from the Sexual Experiences Survey (SES) used in the Active*

¹⁵ For more details see <https://www.cso.ie/en/methods/crime/sexualviolencesurvey/>

¹⁶ CSO (2023) *Sexual Violence Survey 2022 – Main Results* Available: <https://www.cso.ie/en/releasesandpublications/ep/p-svsmr/sexualviolencesurvey2022mainresults/> Accessed 24/10/2023.

¹⁷ To provide national population results, the survey results were weighted to represent the entire population of persons aged 18 years and over.

Consent / USI national survey of students in 2020)¹⁸. This was an adaptation of the Administrator-Researcher Campus Climate Collaborative (ARC3) Campus Climate Survey (ibid). The HEA Advisory Group edited and adapted these sources and included questions based on analysis they conducted on what was necessary in the Irish context.¹⁹ The surveys examine a broad range of experiences relating to sexual harassment and sexual violence, as well as questions about the campus environment (how respondents think their institution would handle incidents of sexual misconduct); perceptions of campus safety and bystander attitudes and practices (making an intervention if a bystander of an incident).

Access to data

NDA submitted a data access request to the HEA in 2022 and the data was received from the University of Galway in 2023 in Excel and SPSS formats. NDA and HEA both signed a data sharing agreement. Data were sent in an anonymised, password protected format with no personal identifiers.

Analytic strategy

Data analysis was conducted using IBM SPSS version 29.

Preliminary analyses

Disability type

In total 19% (n=1,523) of this sample indicated they had a disability²⁰. These people were asked “What is your disability” and were provided with the following list (they could only choose one disability type):

- Specific learning difficulty e.g., dyslexia
- Physical or mobility related disability
- Blind or visually impaired
- Mental health difficulty
- ASD or Asperger’s ADHD or ADD
- Significant ongoing physical illness
- Other (they were asked to please specify)

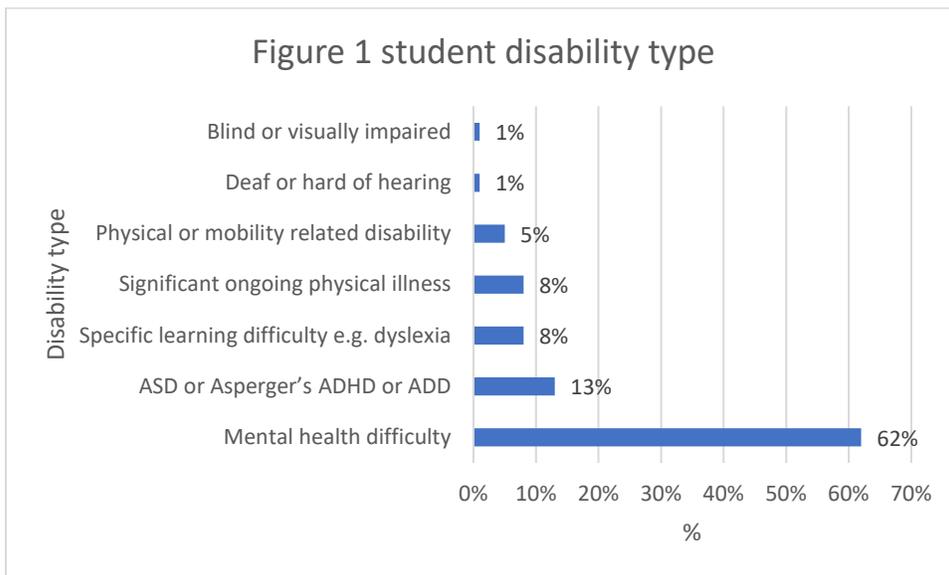
¹⁸ Burke, L., Dawson, Flack, W., O’Higgins, S., Mclvor, C., MacNeela, P. (2023) ‘alcohol, drug use and experiences of sexual violence victimisation among first-year college students in Ireland’ *Journal of Sexual Aggression*, <https://www.tandfonline.com/doi/full/10.1080/13552600.2023.2216221>

¹⁹ <https://hea.ie/policy/gender/ending-sexual-violence-and-harassment-in-irish-higher-education-institutions/>

²⁰ Respondents were asked “Do you have a disability including a mental or physical illness?”

- Prefer not to say.²¹

Ninety-five percent of these students specified which disability they had (n=1,450). The largest cohort of those with a disability indicated they had a mental health difficulty (n=914, 62%), followed by ASD/Asperger's, ADHD or ADD²² (n=189, 13%) (Figure 1). Students with a learning difficulty and students with a significant ongoing physical illness each made up 8% (n=124) of the sample followed by physical or mobility related disability (n=68, 5%). Respondents who were deaf or hard of hearing accounted for 1% (n=17) and respondents who were blind or visually impaired made up just under 1% (n=14) of the sample.



This report is interested in whether students with disabilities were more likely to have experienced sexual harassment, violence and particular sexual violence tactics compared to students without disabilities based on the hypothesis that people with disabilities are more at risk of harassment and violence. However, with the available data, there is no way of knowing whether a respondent's disability may have been acquired before or after an episode of sexual harassment and violence. While there is a possibility that some of the respondents who had a disability at the time of the survey did not have a disability at the time of experiencing sexual harassment or violence, we are assuming that for most disabilities, they were present at the time of the incident or incidents. However, we cannot assume the same for respondents with a mental health difficulty, given this difficulty may have been directly caused by the sexual violence and/or sexual harassment experienced. Due to this and also due to the large proportion of

²¹ The HEA recoded the other category into the main variables.

²² Please see Statement on Language at the start of this report.

survey respondents with a disability having a mental health difficulty (62% of those who stated their disability type), we divided the cohort of disabled students into two groups for all analyses²³:

1. Students with a disability (not a mental health difficulty)²⁴ (n=536)
2. Students with a mental health difficulty²⁵ (n=914)

The experiences of both groups will be described and compared to those without disabilities in separate analyses providing a more robust analysis.

Comparing key demographics of those with and without disabilities

A series of chi-square tests of independence were conducted to investigate whether respondents with disabilities differed from those without disabilities on the following demographic variables which may be linked to a higher likelihood of experiencing sexual harassment or sexual violence:

- Gender identity (female, male, or gender non-binary)
- Ethnicity (white Irish or minority ethnicity)
- Sexual orientation (heterosexual or minority sexuality)

Any statistically significant differences were controlled for in the main analyses.

Gender Identity

Table I represents the gender identities of the respondents without a disability, with a disability (excluding a mental health difficulty) and with a mental health difficulty. Over three quarters of respondents without a disability were female (76%), compared to 70% of those with a disability (excluding a mental health difficulty) and 83% of those with a mental health difficulty. Twenty-two percent of respondents without a disability were male, compared to 21% of those with a disability (excluding a mental health difficulty) and 11% of those with a mental health difficulty. One percent of respondents without a disability were non-binary, compared to 8% of those with a disability (excluding a mental health difficulty) and 5% of those with a mental health difficulty. The gender identity profile of respondents without a disability was significantly different to the gender identities of respondents with a disability (excluding a mental health difficulty) (χ^2

²³ This excludes students who did not indicate their disability type and refers only to the ninety-five percent of students that specified their disability type (n=1,450).

²⁴ These students may also have a mental health difficulty, but it is assumed based on their response that it is not their primary disability.

²⁵ These students may also have other disabilities, but it is assumed based on their response that a mental health difficulty is their primary disability.

(2, n = 6,560) = 150.8, $p < .001$) and respondents with a mental health difficulty (X^2 (2, n = 6,937) = 156.3, $p < .001$). Gender identity was therefore controlled for in the main analyses.

Table 1 Gender identities of respondents by disability status

Gender identity	No disability n (%)	Disability (excluding mental health difficulty) n (%)	Mental health difficulty n (%)
Female	4,614 (76%)	377 (70%)	762 (83%)
Male	1,359 (22%)	111 (21%)	96 (11%)
Non-binary	58 (1%)	41 (8%)	48 (5%)
Missing	18 (<1%)	7 (1%)	8 (1%)
Total	6,049 (100%)	536 (100%)	914 (100%)

Ethnicity

Respondents were asked to report their ethnicity (based on CSO Census categories). Responses were recoded into a White Irish category (as the majority ethnicity) and all other ethnicities were coded as ethnic minorities. The majority of respondents without a disability, with a disability (excluding a mental health difficulty) and with a mental health difficulty were White Irish (80%, 84% and 83%, respectively) (Table 2). Almost one fifth of those without a disability were of a minority ethnicity (19%) compared to 16% of those with a disability (excluding a mental health difficulty) and 17% of those with a mental health difficulty. The ethnicities of respondents without a disability were not significantly different to the ethnicities of respondents with a disability (excluding mental health difficulties) (X^2 (1, n = 6,552) = 3.3, $p = 0.07$) or with a mental health difficulty (X^2 (1, n = 6,931) = 1.7, $p = 0.19$).

Table 2 Respondents ethnicity by disability status

Ethnicity	No disability n (%)	Disability (excluding mental health difficulty) n (%)	Mental health difficulty n (%)
White Irish	4,867 (80%)	449 (84%)	755 (83%)
Ethnic minority	1,151 (19%)	85 (16%)	158 (17%)
Missing	31 (1%)	2 (<1%)	1 (<1%)
Total	6,049 (100%)	536 (100%)	914 (100%)

Sexual Orientation

Respondents were asked to report their sexual orientation²⁶ and their responses were recoded into two categories, heterosexual and minority sexuality. Over three quarters of respondents without a disability were heterosexual (77%), compared to 56% of those with a disability (excluding mental health difficulties) and 45% of those with a mental health difficulty (see Table 3). Just over one fifth of those without a disability were of a minority sexuality (21%), compared to 43% of those with a disability (excluding a mental health difficulty) and over half of those with a mental health difficulty (53%). The sexual orientation profile of respondents without a disability was significantly different to profiles of those with a disability (excluding mental health difficulties) ($X^2(1, n=6,465) = 127.8, p <.001$) and those with a mental health difficulty ($X^2(1, n=6,837) = 436.3, p <.001$). Sexual orientation was therefore controlled for in the main analyses.

Table 3 Sexual orientation of respondents by disability status

²⁶ Respondents could answer from the following options: asexual, bisexual, gay, heterosexual/straight, lesbian, queer, prefer not to say, a sexual orientation not listed here

Sexual orientation	No disability n (%)	Disability (excluding mental health difficulty) n (%)	Mental health difficulty n (%)
Heterosexual	4,657 (77%)	298 (56%)	410 (45%)
Minority sexuality	1,282 (21%)	228 (43%)	488 (53%)
Missing	110 (2%)	10 (2%)	16 (2%)
Total	6,049 (100%)	536 (100%)	914 (100%)

Main analyses

In the survey students were asked how often they had experienced a specific type of sexual harassment, sexual violence and sexual violence tactic. For the purposes of this report, these variables were recoded to binary variables indicating whether a student had experienced that specific type of sexual harassment, sexual violence, and sexual violence tactic or not. Similarly, these variables were used to create two general variables to indicate whether a student had experienced any form of sexual harassment or not, and any form of sexual violence or not. This means that anyone who had experienced any form of sexual harassment at least 'once or twice' as per the survey questions was coded as having experienced sexual harassment and anyone who had experienced any form of sexual violence at least 'once' as per the survey questions was coded as having experienced sexual violence. A series of logistic regressions were performed using these created variables to identify whether having a disability was associated with an increased likelihood of having experienced sexual harassment, sexual violence, or a particular tactic during an experience of sexual violence. As the two samples of students with disabilities is significantly different from those without disabilities with regard to their gender identity and sexual orientation, these variables were controlled for in the regressions.²⁷

²⁷ Statistical interactions between disability and gender identity and disability and sexual orientation were tested for but were only significant in 3 out of 52 regressions. The results of these significant interactions are reported, but otherwise results from original regressions without interactions included are presented.

A note on statistical significance

One of the main outcomes from the regressions conducted is the level of statistical significance of particular findings. This tells us how likely it is that any relationships or differences that are found between those with and without disabilities have occurred by chance. The level of significance is denoted by a 'p value' and a value less than 0.05 is considered 'statistically significant'. A value less than 0.05 means, for example, if our data is suggesting that there is a difference in likelihood of people with and without disabilities experiencing sexual violence, the probability of this finding occurring due to chance is less than 5%. This gives us a sufficient level of confidence to conclude that these are real, not random, differences. The closer the p value gets to zero, the smaller the probability that differences are due to chance. It is important to note that in the Key Findings, there may be quite small differences in percentages that are statistically significant, or what seem quite notable differences in percentages that are not statistically significant. Whether or not these differences between students with and without disabilities are statistically significant will depend on the size of the samples in each analysis, how all students in each group have answered the question, and in the case of regressions, the interrelations between our variables of interest and other relevant variables. When describing the results, if a finding is described as 'significant' it means it is statistically significant.

Key findings

Sexual harassment

Students were asked a series of questions to indicate if in the last four years they experienced sexual harassment by someone related to their Higher Education Institute. They were asked a series of questions on sexual harassment under a range of themes including²⁸:

1. Sexual hostility – Derogatory remarks and treatment that has a sexual basis.
2. Unwanted sexual attention – Persistent efforts by an individual to have a sexual or romantic relationship that is unwanted.
3. Sexual coercion – Bribery or special treatment that is provided contingent on sexual behaviour.

²⁸ Respondents were also asked about sexualised comments referring to race/ethnicity, gender, sexuality, religion, or trans / non-binary identity and sexist hostility referring to remarks and treatment that is derogatory and has a sexist basis. These were not included in the analyses as they were not applicable to the entire sample and as gender identity and sexual orientation were being controlled for in the main analyses.

4. Sexual harassment via electronic communication or visual/written materials – The use of the Internet or communication platforms as a basis for harassment, including pornography and sexual images that are not on the Internet.

The data indicates that 70% of all survey respondents, with and without a disability (n=5,509), had experienced sexual harassment by someone related to the HEI.

A series of logistic regressions were performed to identify whether having a disability was associated with an increased likelihood of having experienced sexual harassment, while controlling for respondents' gender identity and sexual orientation (please see Appendices A and B for the full results of these regressions). Table 4 shows the percentages of students with no disability, with a disability (not a mental health difficulty) and with a mental health difficulty who had experienced each form of sexual harassment. Any statistically significant differences between the students with some form of disability and those without a disability are marked in the table with an asterisk/s.

In general, the order in which all three groups experienced different types of sexual harassment was very similar. The two most common forms of sexual harassment experienced by both groups of students with disabilities were forms of sexual hostility: someone repeatedly telling sexual stories or jokes that were offensive to them, and someone making offensive remarks about their appearance, body, or sexual activities. Both of these were experienced by 68% of those with mental health difficulty and 54% of those with other disabilities (not a mental health difficulty). The most frequent form of sexual harassment experienced by students without a disability was also a form of sexual hostility, with someone making unwelcome attempts to draw them into a discussion of sexual matters (51%). The least frequent form of sexual harassment experienced by all three groups was sexual harassment via electronic communication or visual/written materials, by someone spreading unwelcome sexual rumours about them. This was experienced by 20% of people with no disability, 27% of people with a disability excluding mental health and 32% of people with a mental health difficulty.

Students with a disability (not a mental health difficulty) were significantly more likely than those without a disability to experience three types of sexual harassment, two of these were forms of sexual coercion and the other was a form of sexual harassment via electronic communication or visual/written materials. Almost one third of students with a disability (not a mental health difficulty) (32%) had been made to feel like they were being bribed with some sort of reward or special treatment to engage in sexual behaviour compared to

27% of those without a disability. Three in ten had someone imply they would receive better treatment if they were sexually cooperative compared to 25% of those without a disability and 29% of those with a disability (not a mental health difficulty) experienced someone spreading unwelcome sexual rumours about them by electronic means compared to 22% of those without a disability.

Students with a mental health difficulty were significantly more likely than those without a disability to have experienced all forms of sexual harassment, although for some forms of sexual harassment, the strength of this relationship depended on the students' gender identity and/or sexual orientation. See Figure 2 on interactions.

Table 4 Students' experience of sexual harassment by disability status

Type of sexual harassment experienced	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
Sexual hostility: Repeatedly told sexual stories or jokes that were offensive to you	47% (n=2,854)	54% (n=287)	68% *** (n=622)
Sexual hostility: Made unwelcome attempts to draw you into a discussion of sexual matters (for example, attempted to discuss or comment on your sex life)?	51% (n=3,105)	52% (n=281)	66% *** (n=605)
Sexual hostility: Made offensive remarks about your appearance, body, or sexual activities?	50% (n=3,047)	54% (n=288)	68%*** (n=622)
Sexual hostility: Made gestures or used body language of a sexual nature which embarrassed or offended you?	42% (n=2,558)	47% (n=251)	56% ²⁹ (n=514)
Unwanted sexual attention: Made unwanted attempts to establish a romantic sexual relationship with you?	49% (n=2,953)	51% (n=271)	63%*** (n=580)
Unwanted sexual attention: Continued to ask you for dates, drinks, dinner etc, even though you said "no"	38% (n=2,307)	42% (n=226)	52% *** (n=471)

²⁹ See Figure 2 on results of interactions

Type of sexual harassment experienced	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
Sexual coercion: Made you feel like you were being bribed with some sort of reward or special treatment to engage in sexual behaviour.	24% (n=1,455)	29%* (n=156)	39%*** (n=354)
Sexual coercion: Implied better treatment if you were sexually cooperative	22% (n=1,322)	27%** (n=146)	36%*** (n=330)
Sexual harassment via electronic communication or visual/written materials: Sent or posted unwelcome sexual comments, jokes or pictures by text, email, or other electronic means (for example via WhatsApp, Snapchat, Facebook etc)	36% (n=2,152)	40% (n=215)	52%*** ³⁰ (n=474)
Sexual harassment via electronic communication or visual/written materials: Spread unwelcome sexual rumours about you by text, email, or other electronic means (for example via WhatsApp, Snapchat, Facebook etc)	20% (n=1,203)	27%*** (n=144)	32% ³¹ (n=292)
Sexual harassment via electronic communication or visual/written materials: displayed, used or distributed sexist or suggestive materials (e.g., pictures, stories	42% (n=2,554)	46% (n=249)	59%*** (n=539)

³⁰ See Figure 2 on results of interactions

³¹ See Figure 2 on results of interactions

Type of sexual harassment experienced	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
or pornography which you found offensive)			

* $p < .05$, ** $p < .01$, *** $p < .001$

Figure 2. Results of interaction analyses

Statistical interactions between disability and gender identity and disability and sexual orientation were tested for but were only significant in 3 out of 52 regressions. The results of these significant interactions are reported below and in Appendix C, but otherwise results from original regressions without interactions included are presented.

Interaction analyses found that having a mental health difficulty was associated with an increased likelihood of having experienced the three forms of sexual harassment discussed below, but that the strength of these relationships depended on the student's gender identity and/or sexual orientation.

The increased risk of **experiencing sexually hostile gestures or body language** was much higher for non-binary people with a mental health difficulty than for females or males with a mental health difficulty (while controlling for their sexual orientation).

Similarly, the increased risk of **having unwelcome sexual rumours spread about them electronically** was also much higher for non-binary people with a mental health difficulty than for females or males with a mental health difficulty, and that increased risk was slightly higher for heterosexual people with a mental health difficulty compared to minority sexualities with a mental health difficulty.

The increased risk of **receiving unwelcome sexual materials electronically** was also slightly higher for heterosexual people with a mental health difficulty compared to minority sexualities with a mental health difficulty (while controlling for gender identity).

Students' responses to these individual types of sexual harassment were used to create a general measure indicating whether they had experienced sexual harassment from someone in their HEI in the previous four years or not (Table 5). The data illustrates that 71% of people without a disability had experienced sexual harassment, compared to 76% of those with a disability (not a mental health difficulty) and 85% of those with a mental health difficulty. Students with a

disability (not a mental health difficulty) were not significantly more likely to experience sexual harassment in general compared to those without a disability, but those with a mental health difficulty were significantly more likely to have experienced sexual harassment from someone in their HEI in the previous four years (see Appendix D for full results).

Table 5 Overall experiences of sexual harassment by disability status

	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
Experienced sexual harassment	71% (n=4,324)	76% (n=408)	85%*** (n=777)

* $p < .05$, ** $p < .01$, *** $p < .001$

The experiences of sexual harassment by disability type are illustrated in Table 6. Those with a mental health difficulty had the highest proportion of people experiencing sexual harassment (85%), followed by those with a significant ongoing physical illness (81%), a specific learning disability (78%), deaf or hard of hearing (76%), ASD or Asperger's ADHD or ADD (75%), a physical or mobility issue (72%), and blind or visually impaired (50%).

Table 6 Experience of sexual harassment by disability type

Experienced Sexual Harassment	No n (%)	Yes n (%)	Missing n (%)	Total n (%)
Mental health difficulty	92 (10%)	777 (85%)	45 (5%)	914 (100%)
ASD or Asperger's ADHD or ADD	39 (21%)	142 (75%)	9 (5%)	189 (100%)
Significant ongoing physical illness	16 (13%)	100 (81%)	8 (6%)	124 (100%)

Experienced Sexual Harassment	No n (%)	Yes n (%)	Missing n (%)	Total n (%)
Specific learning difficulty e.g., dyslexia	20 (16%)	97 (78%)	7 (6%)	124 (100%)
Physical or mobility	11 (16%)	49 (72%)	8 (12%)	68 (100%)
Deaf or hard of hearing	<5 ³²	13 (76%)	<5	17 (100%)
Blind or visually impaired	6 (43%)	7 (50%)	1 (7%)	14 (100%)
Total	Not Publishable³³	1,185 (82%)	Not Publishable	1,450 (100%)

Sexual violence

Students were asked since enrolling in their Higher Education Institute if they had experienced any of the following six acts of sexual violence:

1. Non-consensual sexual touching (someone touching the person in a sexual manner, kissing, or rubbing up against the private areas of their body or removing some of their clothes without consent).
2. Non-consensual oral sex (receiving oral sex or being made to perform oral sex without consent).
3. Non-consensual vaginal penetration (someone put their penis, fingers, or other objects into their vagina without their consent).
4. Non-consensual anal penetration (someone put their penis, fingers, or other objects into their anus without their consent).
5. Being made to perform anal or vaginal sex (using their penis to insert into anus or vagina without consent).

³² Numbers here are less than 5 and are not published to avoid the possible identification of respondents.

³³ The figures on Deaf or hard of hearing category cannot be published as they are under 5, therefore these totals will not be published.

6. Attempted oral, anal, or vaginal sex.

The data indicates that 41% of all survey respondents, with and without a disability (n=3,230), had experienced sexual violence since enrolling in their HEI.

A series of logistic regressions were performed to identify whether having a disability was associated with an increased likelihood of having experienced sexual violence, while controlling for respondents' gender identity and sexual orientation (see Appendices E and F for the full results of these regressions).

Table 6 shows the percentages of students with no disability, with a disability (not a mental health difficulty) and with a mental health difficulty who had experienced each form of sexual violence. Any statistically significant differences between the students with some form of disability and those without a disability are marked in the table with an asterisk/s.

In general, the order in which all three groups experienced different types of sexual violence was very similar. The most common form of sexual violence experienced by all respondents was non-consensual sexual touching, which was experienced by 37% of those without a disability, by 43% of those with a disability (not a mental health difficulty) and by 54% of those with a mental health difficulty. The least common form of sexual violence experienced by all respondents was being made to perform anal or vaginal sex (someone using their penis to insert into anus or vagina without consent) (responses from males and non-binary respondents only were included in these analyses). Five percent of males and non-binary respondents without a disability had experienced this form of sexual violence, while 7% of males and non-binary respondents with a disability (not a mental health difficulty) and 12% of those with a mental health difficulty had been made to perform anal or vaginal sex non-consensually.

Students with a disability (not a mental health difficulty) were significantly more likely than those without a disability to experience all types of sexual violence except for being made to perform anal or vaginal sex. Students with a mental health difficulty were significantly more likely than those without a disability to have experienced all forms of sexual violence.

Table 6 Students' experience of sexual violence by disability status

Type of sexual violence experienced	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
Sexual touching	37% (n=2,247)	43%* (n=232)	54% *** (n=495)
Oral sex	14% (n=846)	19%* (n=101)	27% *** (n=249)
Vaginal penetration³⁴	19% (n=894)	27%* (n=111)	34%*** (n=273)
Anal penetration	6% (n=390)	9%* (n=48)	16% *** (n=149)
Being made to perform anal or vaginal sex³⁵	5% (n=71)	7% (n=11)	12% ** (n=17)
Attempted oral, anal, or vaginal sex	19% (n=1,166)	29%*** (n=155)	34% *** (n=313)

* $p \leq .05$, ** $p < .01$, *** $p < .001$

Students' responses to these individual types of sexual violence were used to create a general measure indicating whether they had experienced sexual violence or not since enrolling in their HEI (Table 7). This analysis found that 41% of people without a disability had experienced sexual violence, compared to 47% of those with a disability (not a mental health difficulty) and 58% of those with a mental health difficulty. Students with a disability (not a mental health difficulty) and those with a mental health difficulty were significantly more likely to have

³⁴ Only responses from females and non-binary respondents were included in these analyses (n=6,218)

³⁵ Only responses from males and non-binary respondents were included in these analyses (n=1,807)

experienced sexual violence in general compared to those without a disability since enrolling in their HEI (see Appendix G for full results).

Table 7 Overall experiences of sexual violence by disability status

	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
Experienced sexual violence	41% (n=2,450)	47%* (n=250)	58%*** (n=530)

* $p < .05$, ** $p < .01$, *** $p < .001$

Table 8 illustrates the largest cohort to have experienced sexual violence are students who have an ongoing physical illness (60%). This is followed by students with a mental health difficulty (58%), students who are deaf or hard of hearing (53%), students with a specific learning disability (49%), students with ASD, Aspergers, ADHD, ADD (41%), and students with a physical/mobility related disability (40%). The numbers of students who are blind or visually impaired were too small to publish.

Table 8 Experience of sexual violence by disability type

Experienced Sexual Violence	No n (%)	Yes n (%)	Missing n (%)	Total n (%)
Mental health difficulty	206 (23%)	530 (58%)	178 (19%)	914 (100%)
ASD, Aspergers, ADHD, ADD	73 (39%)	77 (41%)	39 (21%)	189 (100%)
Significant ongoing physical illness	27 (22%)	74 (60%)	23 (19%)	124 (100%)
Specific learning difficulty e.g., dyslexia	37 (30%)	61 (49%)	26 (21%)	124 (100%)
Physical/mobility related disability	23 (34%)	27 (40%)	18 (26%)	68 (100%)

Experienced Sexual Violence	No n (%)	Yes n (%)	Missing n (%)	Total n (%)
Deaf or hard of hearing	6 (36%)	9 (53%)	2 (12%)	17 (100%)
Blind or visually impaired	8 (57%)	n<5	n<5	14 (100%)
Total	380 (26%)	Not publishable	Not publishable	1,450 (100%)

Sexual violence tactics

Each of the statements examining student experiences of sexual violence was followed by six tactics that a perpetrator might use during sexual violence, and these tactics were collated into three categories. The three categories and six tactics are:

1. Coercion

- Telling lies, threatening to end the relationship, threatening to spread rumours about me, making promises I knew were untrue, or continually verbally pressuring me after I said I didn't want to.
- Showing displeasure, criticising my sexuality or attractiveness, getting angry but not using physical force, after I said I didn't want to.

2. Incapacitation, force, or threat of force

- Taking advantage of me when I was too drunk or out of it to stop what was happening.
- Threatening to physically harm me or someone close to me.
- Using force, for example holding me down with their body weight, pinning my arms or having a weapon.

3. Engaging in the behaviour without indication that the behaviour was welcome

- Simply engaging in the behaviour without any indication from me that such behaviour was welcome.

A series of logistic regressions were performed to identify whether having a disability was associated with an increased likelihood of having experienced particular tactics, while controlling for respondents' gender identity and sexual orientation (see Appendices H and I for the full results of these regressions).

Table 9 illustrates the results relating to experiencing each tactic for those without a disability, those with a disability excluding mental health difficulties and those with a mental health difficulty.

The order in which all three groups experienced different types of sexual violence was identical. For all students who had experienced sexual violence, the most commonly experienced tactic was the perpetrator simply engaging in the behaviour without any indication from them that such behaviour was welcome. This was experienced by 35% of those without a disability, 43% of those with a disability (excluding mental health difficulties) and 52% of those with a mental health difficulty. The least common tactic experienced by all groups was having someone threaten to physically harm them or someone close to them. This was experienced by 3% of those with no disability, 9% of those with a disability (excluding mental health difficulties) and 10% of those with a mental health difficulty.

Both groups of students with disabilities were significantly more likely than those without disabilities to have experienced each perpetrator tactic.

Table 9 perpetrator tactics experienced by disability status.

Tactic	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
Telling lies, threatening to end the relationship, threatening to spread rumours about me, making promises I knew were untrue, or continually verbally pressuring me after I said I didn't want to.	15% (n=885)	23%*** (n=124)	30%*** (n=277)
Showing displeasure, criticising my sexuality or attractiveness, getting angry but not using physical force, after I said I didn't want to.	20% (n=1,181)	27%** (n=143)	35%*** (n= 316)

Tactic	No disability	Disability (excluding mental health difficulty)	Mental health difficulty
Taking advantage of me when I was too drunk or out of it to stop what was happening.	24% (n=1,478)	29%* (n=157)	42%*** (n=384)
Threatening to physically harm me or someone close to me.	3% (n=192)	9%*** (n=49)	10%*** (n=89)
Using force, for example holding me down with their body weight, pinning my arms or having a weapon.	13% (n=762)	19%*** (n=103)	28%*** (n=255)
Simply engaging in the behaviour without any indication from me that such behaviour was welcome.	35% (n=2,121)	43%** (n=228)	52%*** (n=479)

* $p < .05$, ** $p < .01$, *** $p < .001$

Conclusion and recommendations

This report involved conducting secondary data analysis of the National Survey of Student Experiences of Sexual Violence and Harassment in Irish Higher Education Institutions (2021). The purpose of this work was to explore whether students with a disability in this sample were more likely to experience sexual harassment, sexual violence and/or particular sexual violence tactics than those without a disability.

From the entire sample 41% of all survey respondents, with and without a disability (n=3,230), had experienced sexual violence since enrolling in their HEI and 70% of all survey respondents, with and without a disability (n=5,509), had experienced sexual harassment by someone related to their HEI. These are quite stark figures however the sample is not representative of the entire student body. Also, people who have experienced sexual violence and/or sexual harassment might be more inclined to fill out a survey of this nature.

Almost one fifth of the 7,901 survey respondents reported having a disability. Our analyses identified that out of the entire sample of respondents to this survey, 10% (n=780) of these students had a disability and had experienced sexual violence and 15% (n=1,185) had a disability and had experienced sexual harassment. While this report showed the breakdown of those who had experienced sexual harassment and violence by disability type, due to some of the smaller numbers it was not meaningful to statistically compare whether one group of disabled students was more at risk than another. However, these numbers did show that respondents who had experienced sexual harassment or sexual violence had a range of disabilities.

The majority of respondents with a disability had mental health difficulties (62%). Considering this and the fact that mental health difficulties may be directly caused by experiences of sexual harassment or violence, separate analyses were conducted for students with disabilities (not a mental health difficulty) and students with a mental health difficulty. A large majority of 85% of those with a mental health difficulty had experienced sexual harassment by someone associated with their HEI and 68% had experienced sexual violence since enrolling in their HEI. Those with a mental health difficulty were significantly more likely than those without a disability to have experienced all forms of sexual harassment, all forms of sexual violence, and all sexual violence perpetrator tactics. Given the relationship between victimisation and mental health difficulties these findings are not surprising. However, they do highlight a potentially vulnerable cohort of students who likely would benefit from specialist supports in HEIs.

Over three quarters of those with a disability (not a mental health difficulty) (76%) had experienced some form of sexual harassment by someone associated with their HEI. While this is notable, this group were not significantly more likely than those without a disability to have experienced sexual harassment in general (71%). For most of the specific types of sexual harassment experiences, students with a disability (not a mental health difficulty) were not significantly more likely to have experienced them relative to those without disabilities. However, students with a disability (excluding a mental health difficulty) were significantly more likely than those without a disability to have experienced 3 out of the 11 forms of sexual harassment. Two of these were forms of sexual coercion – they were more likely to have been made feel like they were being bribed with some sort of reward or special treatment to engage in sexual behaviour, and more likely to have had someone imply better treatment if they were sexually cooperative. They were also more likely than students without disabilities to experience someone spreading unwelcome sexual rumours about them electronically.

Almost half of students with a disability (excluding mental health difficulties) had experienced sexual violence since enrolling in their HEI (46%). They were significantly more likely than students without disabilities to have experienced sexual violence in general, and specifically, non-consensual sexual touching, non-consensual oral sex, non-consensual vaginal penetration, non-consensual anal penetration and someone attempting oral, anal or vaginal sex with them without consent. They were also significantly more likely than those without disabilities to experience all types of perpetrator tactics, including tactics of coercion, incapacitation, force or threat of force, and having someone engage in the behaviour without any indication it was welcome.

Although our analyses sought to control for gender identity and sexual orientation in order to isolate the link between disability and risk of sexual harassment, violence and violence tactics, these two variables were often statistically significantly associated with a person's risk. As a result, a series of interaction analyses between gender identity and disability and sexual orientation and disability were conducted. This was to examine whether the relationship between disability and risk of harassment or violence was impacted by the person's gender identity and/or sexual orientation. Interactions were only relevant in three of the 52 regressions which were conducted, and only in the group of students with a mental health difficulty and with regard to particular sexual harassment experiences. These analyses found that non-binary people with a mental health difficulty were at a greater risk of having experienced sexually hostile gestures or body language or having unwelcome sexual rumours spread about them electronically than females or males with a mental health difficulty. Heterosexual people with a mental health difficulty were also at a higher risk than minority sexualities with a mental health difficulty to have experienced having unwelcome sexual rumours spread about them electronically or receiving unwelcome sexual materials electronically.

In October 2022, the 'Ending Sexual Violence and Harassment in Higher Education Institutions Implementation Plan, 2022-2024' was published based on recommendations emerging from the National Surveys of Staff and Student Experiences of Sexual Violence and Harassment in Irish HEIs. The implementation plan includes an aim to use the surveys to conduct further analysis of diverse groups and an aim to roll out pilot initiatives targeted at supporting high-risk groups and smaller or hard to reach groups in a small number of HEIs in 2024 (it is assumed disabled people are included in both of these initiatives). While these are welcomed, mainstream projects and initiatives within HEIs addressing sexual harassment and violence should be accessible and applicable to people with disabilities – separate initiatives may not be warranted if the communication and support needs of disabled people are taken into

consideration into existing projects. Indeed one of the key framework outcomes from Ireland’s national policy framework “Safe, Respectful, Supportive and Positive: Ending Sexual Violence and Harassment in Irish Higher Education Institutions”, is that HEIs will provide “accessible, trauma-informed services; for supporting student disclosure, reporting and complaints, and for counselling and advocacy”.³⁶ It is particularly important that mainstream initiatives, supports and services can meet the needs of people with disabilities, especially given in this sample that one quarter of students who had experienced some form of sexual violence had a disability. This is also pertinent considering the number of people with disabilities attending a HEI institution is on the rise. Data from AHEAD³⁷ indicates that the number of disabled people attending HEI institutions is increasing annually, for example the numbers have increased from 12,630 in 2016/17³⁸ to 17,866 in the 2020/21 academic year.^{39 40}

The findings from this report show notable proportions of students with and without disabilities who have experienced sexual harassment and sexual violence. However, students with disabilities (not a mental health difficulty) were more likely to have experienced sexual coercion, having sexual rumours spread about them online and were more likely to have experienced all forms of sexual violence and all forms of perpetrator tactics than those without disabilities. Students with a mental health difficulty were more likely to have experienced all forms of sexual harassment, sexual violence and perpetrator tactics than those without disabilities. These findings enhance Ireland’s national data on Article 16 of the UNCRPD. NDA have four recommendations based on the outcomes from this report two in relation to HEI’s and two in relation to future data collection:

³⁶ HEA (2022) *Ending Sexual Violence and Harassment in Higher Education Institutions IMPLEMENTATION PLAN 2022-2024* <https://hea.ie/policy/gender/ending-sexual-violence-and-harassment-in-irish-higher-education-institutions/>

³⁷ For more information about AHEAD See <https://www.ahead.ie/>

³⁸ AHEAD. Numbers of Students with Disabilities Studying in Higher Education in Ireland 2016/17. 2018. <https://www.ahead.ie/userfiles/files/shop/free/Rates%202016-17%20-%20ONLINE.pdf>

³⁹ AHEAD. Numbers of Students with Disabilities Studying in Higher Education in Ireland 2020/21 [Students with Disabilities Engaged with Support Services in Higher Education in Ireland 2020/21 \(ahead.ie\)](https://www.ahead.ie/userfiles/files/shop/free/Students%20with%20Disabilities%20Engaged%20with%20Support%20Services%20in%20Higher%20Education%20in%20Ireland%202020/21%20(ahead.ie).pdf)

⁴⁰ These figures are drawn from students with disabilities who have registered with disability support/access services in higher education and so are likely to be an underestimation of the true number of students with disabilities.

Recommendations for Higher Education Institutions

- The NDA recommends that all HEIs ensure consideration of disability is factored into all elements of their sexual harassment and violence awareness campaigns, on reporting mechanisms, in investigations of complaints, and in supports for people who have experienced harassment and/or violence.
- The NDA recommends that services provided by HEIs to support student disclosure, reporting and complaints of sexual harassment and/or sexual violence are universally designed accessible services.

Recommendations for future data collection

- The National Statistics Board recommends that the 2022 Census definition of disability be used for survey data collection.⁴¹ The National Disability Authority agree with this approach as it enables issues for people with disabilities to be identified and monitored in line with obligations under the UNCRPD.
- The NDA recommends that analysing the experiences of those with disabilities is a priority in future national surveys to ensure any subsequent recommendations are informed by and relevant to disabled people. This is particularly important for surveys such as this one, where it is widely assumed that disabled people will be more at risk for a negative outcome. The National Statistics Board also recommends that ‘disabled/non-disabled analyses of relevant statistics be made readily available’ when reporting on survey data.⁴²

Next steps

The findings of this report will be produced in a visually appealing and informative format, for example a graphic or infographic. This will be used to publicise this important data to relevant bodies, including HEIs; students with disabilities; student support services; Government Departments; the HEA and relevant disability organisations (e.g., AHEAD). This will allow the findings of this data analysis to be disseminated to a wide audience highlighting to relevant stakeholders that experiences of sexual harassment and sexual violence are a reality for disabled students. Opportunities to present the research findings will be pursued. Analysis on the National Survey of Staff Experiences of Sexual Violence and Harassment in Irish Higher Education Institutions will be explored at a future date.

⁴¹ National Statistics Board (2021) *National Statistics Board Strategic Priorities for Official Statistics 2021 – 2026* <https://nsb.ie/publications/>

⁴² Ibid p.27.

Appendix A – Sexual harassment experiences and disability (excluding mental health difficulty)

Table A.1 - Statistics from individual regressions on sexual harassment – Disability (excluding mental health difficulty)

	Sexual hostility stories B	Sexual hostility stories Wald	Discussion of sexual matters B	Discussion of sexual matters Wald	Offensive remarks B	Offensive remarks Wald
Disability: Has a disability (excluding mental health difficulties) (compared to no disability)	0.166	2.657	-0.046	.21	0.079	0.632
Sexual orientation (Heterosexual compared to minority sexuality)	0.363	29.315***	0.187	8.016**	0.2	9.217**
Gender identity: male (compared to female)	-1.385	395.251***	-0.901	197.455***	-0.894	191.306***
Gender identity: gender non-binary (compared to female)	-0.525	5.8*	-0.354	2.646	-0.324	2.207

* $p < .05$, ** $p < .01$, *** $p < .001$

Table A.2 - Statistics from individual regressions on sexual harassment – Disability (excluding mental health difficulty)

	Offensive gestures/ body language B	Offensive gestures/ body language Wald	Unwanted attempts to establish a romantic sexual relationship B	Unwanted attempts to establish a romantic sexual relationship Wald	Unwanted sexual attention B	Unwanted sexual attention Wald
Disability: Has a disability (excluding mental health difficulties) (compared to no disability)	0.141	1.966	0.012	0.015	0.169	2.758
Sexual orientation (Heterosexual compared to minority sexuality)	0.126	3.601	0.125	3.588	0.113	2.843
Gender identity: male (compared to female)	-1.454	391.09***	-1.166	304.653***	-1.572	394.118***
Gender identity: gender non-binary (compared to female)	-0.542	6.21*	-0.514	5.615*	-0.871	14.047***

Table A.3 - Statistics from individual regressions on sexual harassment – Disability (excluding mental health difficulty)

	Unwanted sexual attention: persistence dates, drinks, dinner B	Unwanted sexual attention: persistence dates, drinks, dinner Wald	Sexual coercion: bribery B	Sexual coercion: bribery Wald	Sexual coercion: Implied better treatment B	Sexual coercion: Implied better treatment Wald
Disability: Has a disability (excluding mental health difficulties) (compared to no disability)	0.169	2.758	0.21	3.817*	0.256	5.404*
Sexual orientation (Heterosexual compared to minority sexuality)	0.113	2.843	0.197	7.582**	0.021	0.08
Gender identity: male (compared to female)	-1.572	394.118***	-1.399	212.472***	-1.518	208.939***
Gender identity: gender non-binary (compared to female)	-0.871	14.047***	-0.553	4.831*	-0.220	0.800

Table A.4 - Statistics from individual regressions on sexual harassment – Disability (excluding mental health difficulty)

	Electronic unwanted comments B	Electronic unwanted comments Wald	Electronic unwelcome rumours B	Electronic unwelcome rumours Wald	Electronic materials B	Electronic materials Wald
Disability: Has a disability (excluding mental health difficulties) (compared to no disability)	0.114	1.279	0.369	11.583***	0.077	0.592
Sexual orientation (Heterosexual compared to minority sexuality)	0.315	22.865***	0.164	4.825*	0.35	28.772***
Gender identity: male (compared to female)	-1.189	248.923***	-0.673	61.801***	-0.999	212.465***
Gender identity: gender non-binary (compared to female)	-0.299	1.838	-0.656	5.536*	-0.094	0.182

Appendix B – Sexual harassment experiences and mental health difficulty

Table B.1 - Statistics from individual regressions on sexual harassment – Mental health difficulty

	Sexual hostility stories B	Sexual hostility stories Wald	Discussion of sexual matters B	Discussion of sexual matters Wald	Offensive remarks B	Offensive remarks Wald
Disability: Has a mental health difficulty (compared to no disability)	0.608	50.124***	0.416	24.46***	0.563	43.711***
Sexual orientation (Heterosexual compared to minority sexuality)	0.355	30.07***	0.183	8.307**	0.188	8.726**
Gender identity: male (compared to female)	-1.374	393.602***	-0.879	185.674***	-0.844	171.586***
Gender identity: gender non-binary (compared to female)	-0.453	4.345*	-0.16	0.526	-0.168	0.58

* $p < .05$, ** $p < .01$, *** $p < .001$

Table B.2 - Statistics from individual regressions on sexual harassment – Mental health difficulty

	Offensive gestures/ body language B	Offensive gestures/ body language Wald	Unwanted attempts to establish a romantic sexual relationship B	Unwanted attempts to establish a romantic sexual relationship Wald	Unwanted sexual attention: dates, drinks, dinner B	Unwanted sexual attention: dates, drinks, dinner Wald
Disability: Has a mental health difficulty (compared to no disability)	0.342	18.235***	0.413	24.695***	0.381	22.495***
Sexual orientation (Heterosexual compared to minority sexuality)	0.085	1.808	0.116	3.331***	0.054	0.721
Gender identity: male (compared to female)	-1.42	379.315***	-1.16	303.459***	-1.579	397.846***
Gender identity: gender non-binary (compared to female)	-0.154	0.541	-0.394	3.472	-0.634	8.753**

* $p < .05$, ** $p < .01$, *** $p < .001$

Table B.3 - Statistics from individual regressions on sexual harassment – Mental health difficulty

	Sexual coercion: bribery B	Sexual coercion: bribery Wald	Sexual coercion: Implied better treatment B	Sexual coercion: Implied better treatment Wald	Electronic posted unwanted comments B	Electronic posted unwanted comments Wald
Disability: Has a mental health difficulty (compared to no disability)	0.489	35.885***	0.541	42.632***	0.436	30.325***
Sexual orientation (Heterosexual compared to minority sexuality)	0.159	5.579**	0	0	0.273	18.878***
Gender identity: male (compared to female)	-1.361	207.543***	-1.507	209.545***	-1.15	238.638***
Gender identity: gender non-binary (compared to female)	-0.346	2.333	-0.103	0.208	-0.097	0.21

* $p < .05$, ** $p < .01$, *** $p < .001$

Table B.4 - Statistics from individual regressions on sexual harassment – Mental health difficulty

	Electronic unwelcome rumours B	Electronic unwelcome rumours Wald	Electronic visual /written materials B	Electronic visual/written materials Wald
Disability: Has a mental health difficulty (compared to no disability)	0.53	39.404***	0.458	32.228***
Sexual orientation (Heterosexual compared to minority sexuality)	0.04	0.308	0.284	20.702***
Gender identity: male (compared to female)	-0.656	59.263***	-1.001	214.99***
Gender identity: gender non-binary (compared to female)	-0.251	1.092	-0.126	0.347

* $p < .05$, ** $p < .01$, *** $p < .001$

Appendix C – Interaction analyses for three sexual harassment variables

Table C.1 - Statistics from individual regressions on sexual harassment experiences where there were significant interactions between a mental health difficulty and sexual orientation and/or gender identity

	Offensive gestures/ body language B	Offensive gestures/ body language Wald	Unwelcome sexual material electronically B	Unwelcome sexual material electronically Wald	Electronic unwelcome rumours B	Electronic unwelcome rumours Wald
Disability: Has a mental health difficulty (compared to no disability)	0.015	0.005	0.266	0.218	0.241	0.238
Sexual orientation (Heterosexual compared to minority sexuality)	0.123	3.094	0.345	0.07***	0.146	0.08
Gender identity: male (compared to female)	-1.453	376.61***	-1.179	0.077***	-0.703	0.088***
Gender identity: gender non-binary (compared to female)	-0.427	2.884	-0.316	0.254	-0.654	0.32*
Gender identity x Disability interaction	0.353	4.342*	0.297	0.17	0.437	0.188*
Sexual orientation x Disability interaction	-0.183	1.303	-0.369	0.159*	-0.467	0.169**

* $p < .05$, ** $p < .01$, *** $p < .001$

Table C.2 – Statistics showing relationship between sexual harassment variables and the gender identity and mental health difficulty interactions

	Never experienced offensive gestures/ body language	Yes, experienced offensive gestures/ body language	Cramer's V	Never experienced unwelcome electronic rumours	Yes, experienced unwelcome electronic rumours	Cramer's V
Females without a disability	46% (n=1,930)	54% (n=2,265)	0.06***	75% (n=3,124)	25% (n=1,022)	0.06***
Females with a mental health difficulty	38% (n=274)	62% (n=449)		65% (n=456)	35% (n=249)	
Males without a disability	78% (n=948)	22% (n=262)	0.08***	86% (n=1,037)	14% (n=171)	0.08**
Males with a mental health difficulty	65% (n=57)	35% (n=31)		73% (n=63)	27% (n=23)	
Gender non-binary without disability	55% (n=30)	46% (n=25)	0.23* Strongest association	86% (n=47)	15% (n=8)	0.23* Strongest association
Gender non-binary with a mental health difficulty	32% (n=14)	68% (n=30)		61% (n=27)	39% (n=17)	

*p<.05, **p<.01, ***p<.001

Table C.3 – Statistics showing relationship between sexual harassment variables and the sexual orientation and mental health difficulty interactions

	Never experienced unwelcome sexual material electronically	Yes, experienced unwelcome sexual material electronically	Cramer's V	Never experienced unwelcome electronic rumours	Yes, experienced unwelcome electronic rumours	Cramer's V
Heterosexual people without a disability	62% (n=2,592)	38% (n=1,586)	0.10*** Strongest association	78% (n=3,258)	22% (n=910)	0.11*** Strongest association
Heterosexual people with a mental health difficulty	45% (n=169)	55% (n=208)		62% (n=229)	38% (n=141)	
Minority sexuality without a disability	54% (n=633)	46% (n=538)	0.09***	76% (n=884)	24% (n=280)	0.08**
Minority sexuality with a mental health difficulty	44% (n=205)	56% (n=257)		68% (n=313)	32% (n=145)	

*p<.05, **p<.01, ***p<.001

Appendix D - Sexual harassment experienced (overall) - mental health difficulty and disability (excluding mental health difficulty)

Table D.1 Statistics from regressions on overall experiences of sexual harassment – mental health difficulty

	Sexual harassment B	Sexual harassment Wald
Disability: Has a mental health difficulty (compared to no disability)	0.62	27.038***
Sexual orientation (Heterosexual compared to minority sexuality)	0.36	19.511***
Gender identity: male (compared to female)	-0.93	173.619***
Gender identity: gender non-binary (compared to female)	-0.40	1.980

* $p < .05$, ** $p < .01$, *** $p < .001$

Table D.2 Statistics from regressions on overall experiences of sexual harassment – disability (excluding mental health difficulty)

	Sexual harassment B	Sexual harassment Wald
Disability: Has a mental health difficulty (compared to no disability)	0.133	1.14
Sexual orientation (Heterosexual compared to minority sexuality)	0.35	17.673***
Gender identity: male (compared to female)	-0.956	187.025***
Gender identity: gender non-binary (compared to female)	-0.351	1.562

* $p < .05$, ** $p < .01$, *** $p < .001$

Appendix E - Sexual violence experiences and disability (excluding mental health difficulty)

Table E.1 - Statistics from individual regressions on sexual violence – Disability (excluding mental health difficulty)

	Sexual touching B	Sexual touching Wald	Oral Sex B	Oral Sex Wald	Vaginal Penetration B	Vaginal Penetration Wald
Disability: Has a disability (excluding a mental health difficulty) (compared to no disability)	0.215	3.907*	0.298	5.617*	0.322	5.77*
Sexual orientation (Heterosexual compared to minority sexuality)	0.231	10.13**	0.09	1.057	0.105	1.281
Gender identity: male (compared to female)	-1.249	269.303***	-1.057	86.667***	n/a	n/a
Gender identity: gender non-binary (compared to female)	-0.774	10.952***	-0.507	2.738	n/a	n/a

* $p < .05$, ** $p < .01$, *** $p < .001$

Table E.2 - Statistics from individual regressions on sexual violence – Disability (excluding mental health difficulty)

	Anal penetration B	Anal penetration Wald	Being made to perform anal or vaginal sex B	Being made to perform anal or vaginal sex Wald	Attempted oral, anal, or vaginal sex B	Attempted oral, anal, or vaginal sex Wald
Disability: Has a disability (excluding a mental health difficulty) (compared to no disability)	0.334	4.03*	0.306	0.741	0.519	21.108***
Sexual orientation (Heterosexual compared to minority sexuality)	0.237	4.118*	0.216	0.666	0.253	10.403**
Gender identity: male (compared to female)	-0.89	31.96***	n/a	n/a	-1.361	166.425***
Gender identity: gender non-binary (compared to female)	-1.1	4.379*	n/a	n/a	-0.808	8.641**

* $p < .05$, ** $p < .01$, *** $p < .001$

Appendix F – Sexual violence experiences and a mental health difficulty

Table F.1 - Statistics from individual regressions on sexual violence – Mental health difficulty

	Sexual touching B	Sexual touching Wald	Oral Sex B	Oral Sex Wald	Vaginal Penetration B	Vaginal Penetration Wald
Disability: Has a mental health difficulty (compared to no disability)	0.561	39.062***	0.657	50.187***	0.686	44.864***
Sexual orientation (Heterosexual compared to minority sexuality)	0.26	13.923***	0.106	1.698	0.131	2.246
Gender identity: male (compared to female)	-1.216	259.652***	-0.985	80.395***	n/a	n/a
Gender identity: gender non-binary (compared to female)	-0.617	7.192**	-0.056	0.047	n/a	n/a

* $p < .05$, ** $p < .01$, *** $p < .001$

Table F.2 - Statistics from individual regressions on sexual violence – Mental health difficulty

	Anal penetration B	Anal penetration Wald	Being made to perform anal or vaginal sex B	Being made to perform anal or vaginal sex Wald	Attempted oral, anal, or vaginal sex B	Attempted oral, anal, or vaginal sex Wald
Disability: Has a disability (excluding a mental health difficulty) (compared to no disability)	0.856	57.023***	0.873	7.145**	0.574	42.689***
Sexual orientation (Heterosexual compared to minority sexuality)	0.214	4.143*	0.254	0.955	0.235	10.125**
Gender identity: male (compared to female)	-0.806	29.221***	n/a	n/a	-1.341	163.834***

Gender identity: gender non-binary (compared to female)	-0.255	0.571	n/a	n/a	-.339	1.924
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* $p < .05$, ** $p < .01$, *** $p < .001$

Appendix G - Sexual violence experienced (overall) – disability (excluding a mental health difficulty) and mental health difficulty

Table G.1 Statistics from regressions on overall experiences of sexual violence – mental health difficulty

	Sexual violence B	Sexual violence Wald
Disability: Has mental health difficulty (compared to no disability)	0.599	40.996***
Sexual orientation (Heterosexual compared to minority sexuality)	0.278	15.268***
Gender identity: male (compared to female)	-1.281	298.709***
Gender identity: gender non-binary (compared to female)	-0.603	6.685**

* $p < .05$, ** $p < .01$, *** $p < .001$

Table G.2 Statistics from regressions on overall experiences of sexual violence – disability (excluding mental health difficulty)

	Sexual violence B	Sexual violence Wald
Disability: Has disability excluding mental health difficulty (compared to no disability)	0.213	3.707*
Sexual orientation (Heterosexual compared to minority sexuality)	0.259	12.369***
Gender identity: male (compared to female)	-1.322	312.867***
Gender identity: gender non-binary (compared to female)	-0.856	13.446***

* $p < .05$, ** $p < .01$, *** $p < .001$

Appendix H - Sexual violence tactics experienced and disability (excluding a mental health difficulty)

Table H.1 - Statistics from individual regressions on sexual violence tactics – Disability (excluding mental health difficulty)

	Telling lies and threats B	Telling lies and threats Wald	Displeasure and angry B	Displeasure and angry Wald	Taking advantage while drunk B	Taking advantage while drunk Wald
Disability: Has a disability (excluding a mental health difficulty) (compared to no disability)	0.54	20.635***	0.358	9.771**	0.217	3.787*
Sexual orientation (Heterosexual compared to minority sexuality)	0.081	0.868	0.164	4.299**	0.096	1.633
Gender identity: male (compared to female)	-1.117	98.602***	-1.327	162***	-1.345	205.361***
Gender identity: gender non-binary (compared to female)	-0.433	2.281	-0.61	5.123*	-0.577	5.151**

* $p < .05$, ** $p < .01$, *** $p < .001$

Table H.2 - Statistics from individual regressions on sexual violence tactics – Disability (excluding a mental health difficulty)

	Threat-physical threat B	Threat-physical threat Wald	Using force B	Using force Wald	Unwelcome behaviour B	Unwelcome behaviour Wald
Disability: Has a disability (excluding a mental health difficulty) (compared to no disability)	0.974	30.07***	0.437	11.911***	0.303	7.645**
Sexual orientation (Heterosexual compared to minority sexuality)	0.501	11.675***	0.171	3.568	0.248	11.631***
Gender identity: male (compared to female)	-0.771	14.097***	-1.664	126.657***	-1.403	308.539***
Gender identity: gender non-binary (compared to female)	-0.443	0.973	-0.242	0.738	-0.783	11.054***

* $p < .05$, ** $p < .01$, *** $p < .001$

Appendix I - Sexual violence tactics experienced and a mental health difficulty

Table I.1 - Statistics from individual regressions on sexual violence tactics– Mental health difficulties only

	Telling lies and threats B	Telling lies and threats Wald	Displeasure and angry B	Displeasure and angry Wald	Taking advantage while drunk B	Taking advantage while drunk Wald
Disability: Has a mental health difficulty (compared to no disability)	0.801	77.967***	0.600	46.921***	0.508	49.686***
Sexual orientation (Heterosexual compared to minority sexuality)	0.063	0.621	0.170	5.266*	0.129	3.665
Gender identity: male (compared to female)	-1.049	92.184***	-1.278	156.996***	-1.366	235.793**
Gender identity: gender non-binary (compared to female)	-0.157	0.371*	-0.316	1.673	-0.497	6.08**

* $p < .05$, ** $p < .01$, *** $p < .001$

Table I.2 - Statistics from individual regressions on sexual violence tactics – Mental health difficulty only

	Threat-physical harm B	Threat-physical harm Wald	Using force B	Using force Wald	Unwelcome behaviour B	Unwelcome behaviour Wald
Disability: Has a mental health difficulty (compared to no disability)	0.842	33.281***	0.787	70.778***	0.552	38.534***
Sexual orientation (Heterosexual compared to minority sexuality)	0.55	16.259***	0.179	4.606*	0.286	16.846***
Gender identity: male (compared to female)	-0.731	12.805***	-1.595	126.58***	-1.366	298.833***
Gender identity: gender non-binary (compared to female)	0.295	0.737	-0.105	0.164	-0.439	3.626

* $p < .05$, ** $p < .01$, *** $p < .001$