

## Disability, misbehavior, and child-blaming in abusive and neglectful homeschool families

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*Published by the Coalition for Responsible Home Education*

**May 26th, 2026**

*Content warning: Brief descriptions of severe child abuse and neglect*

When we do data analysis, we sometimes go to the data with an existing question we want to answer (for example, "[do abusive families who homeschool only some children single those children out for greater abuse?](#)"). Other times we see a pattern within the data while working on something else, realize the pattern represents something important, and investigate further.

In this case, while coding a set of cases for whether the children were disabled, we noticed that when disability was brought up in a news article it was often brought up by a perpetrator seeking to frame their abuse as in some way justified or excusable. When perpetrators used disability in this way, they also often described it in behavioral terms. At the same time, we noticed that perpetrators in cases *not* involving disability often framed the cases in similar behavioral terms, just without a disability.

Given that [disability and chronic medical conditions are known risk factors for children being abused](#), we closely examined cases to understand how this particular form of ableism took shape in our cases. Consequently, we decided to extend our analysis across our entire [database of over 500 homeschooling abuse and fatality cases](#). The broad phenomenon we found is that when perpetrators or their supporters are quoted or paraphrased in articles, over half the time they attempt to frame

something about the children as a cause of the abuse or its effects. About three-quarters of that time, they invoke misbehavior or bad character. When they invoke misbehavior or bad character, about a third of the time they reference a diagnosis or medical condition.

Before continuing, we would like to note that neither a child's disability nor their behavior can excuse or justify child abuse or neglect. Abuse and neglect come from the actions and choices of the perpetrator of the abuse or neglect. Abused disabled children are at heightened risk for bearing the impact of these choices, and we take care in telling their stories in ways that center their rights to safety and dignity.

## **OUR ANALYSIS**

We began by coding all cases for whether the perpetrators' framing of the situation attributed the abuse, or the consequences of the abuse (like bruises or running away), to something about the children. In a third of our 522 cases, the perpetrators and people representing them were not quoted or paraphrased in the sources for that case (n=173, 33%). We excluded these cases from our analysis, leaving 349 cases (67%) where at least one perpetrator or supporter was quoted or paraphrased.

In over half of these 349 cases (n=200; 57.3%), the perpetrator(s) or a supporter attempted to frame something about the child as a full or partial cause, or at least a mitigating factor, in the perpetrators' abuse/neglect. These statements were primarily made by the perpetrators themselves, but occasionally by their attorney or a community member. The statements were often made to authorities, the courtroom, or the press; sometimes the statement was made to a victim, family member, or other third party and relayed later. The framing as causal/mitigating was not necessarily the full framing of the situation, and it was not always explicit, but it often was.

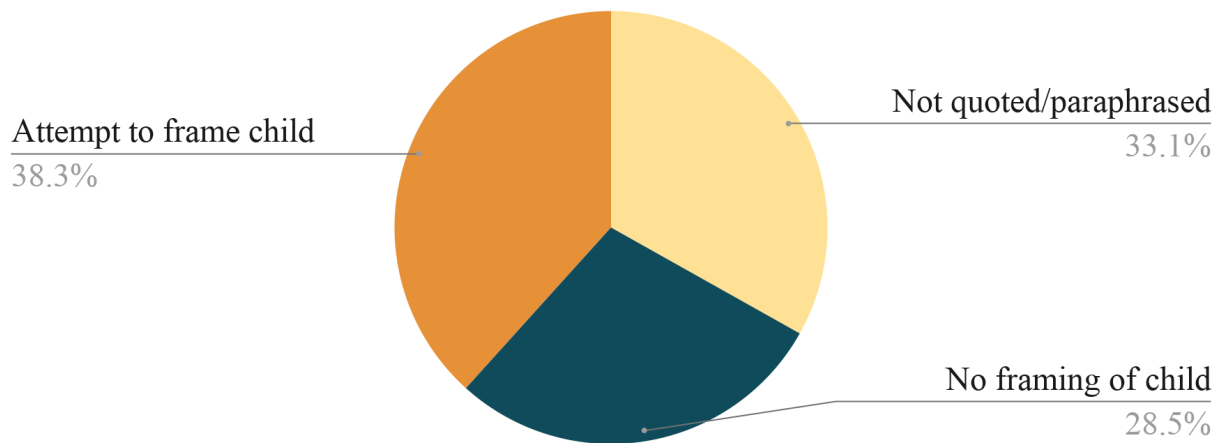


Figure 1. Perpetrators' attempts to frame child for the abuse/neglect or its consequences

When reading these framings, we encourage readers to remember that they are based on perpetrator self-report. It is not automatically true that a child engaged in the behaviors the perpetrator claims. Even in cases where children do engage in chronic misbehavior, it is *never* true that beatings, food deprivation, imprisonment, or other forms of abuse are an appropriate or constructive response.

## FRAMING CATEGORIES

We qualitatively analyzed these framings and found they fell into four major categories.

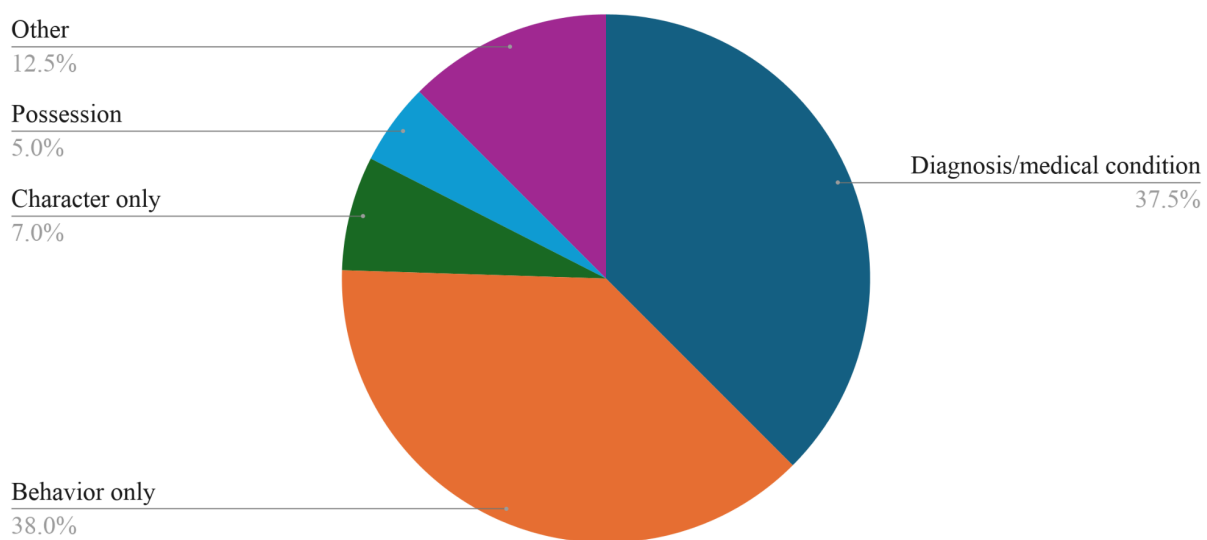


Figure 2. Framing categories used by perpetrators

### Perpetrators reference diagnoses or medical conditions >1/3 of the time

In over a third of the 200 cases, the framing referenced a diagnosis or medical condition (75 cases; 37.5%). This included both formal diagnosis and parental claims. In 54 of these 75 cases (72%), the diagnosis or condition involved a significant behavioral component, or the associated issues were described in behavioral or characterological terms: with reference to forms of misbehavior often popularly associated with poor character, such as lying, “stealing food” (or other disordered or unwanted behavior

around food and eating), and deliberate self injury; general statements of behavioral issues or emotional disturbance were also used.

In the remaining 21 cases (28%), no behavioral framing was used. These cases included 13 cases where the effects of abuse or neglect were directly attributed to a medical condition (e.g., salt poisoning to hypernatremia, a beating death to cardiac arrest); 4 cases of medical abuse, where children were subjected to needless medical treatment; and 4 cases that were complicated to code for various reasons.

### **Perpetrators reference behavior alone >1/3 of the time**

In a similar number of cases (n=76, 38%), the child's behavior was invoked without reference to an underlying diagnosis or medical condition. Typically the behavior was described as chronic and severe, often covering the same ground as the diagnosis/medical condition framing, predominantly involving lying, disordered or unwanted behavior around food and eating, and deliberate self injury.

### **Perpetrators sometimes reference character alone**

In a smaller number of cases (n=14, 7%), the framing described the child in characterological terms that imply chronic bad behavior—for example calling the child disobedient, defiant, or a bad influence—but without reference to a diagnosis or medical condition and without naming specific behaviors.

### **Perpetrators reference demon possession in a significant minority of cases**

The final major category involved claims that a child was possessed (9 cases described as demonic, Satanic, or evil spirits, plus 1 case where the children were claimed to be "zombies", which we grouped with these cases; 5%). In half these cases misbehavior was specifically mentioned.

### Perpetrators sometimes use miscellaneous other framings

The remaining 25 cases (12.5%) included a wide variety of framings that were neither characterological nor behavioral, such as illness blamed on the child’s fears; a beating death called in as a suicide; being a redhead; brainwashing by a different adult; wanting to die, as inferred by the perpetrator; and adoptive status.

### Behavioral and characterological framing

Overall, across all four of these framing categories, the framing included a behavioral or characterological component almost 3/4 of the time (n=146, 73%).

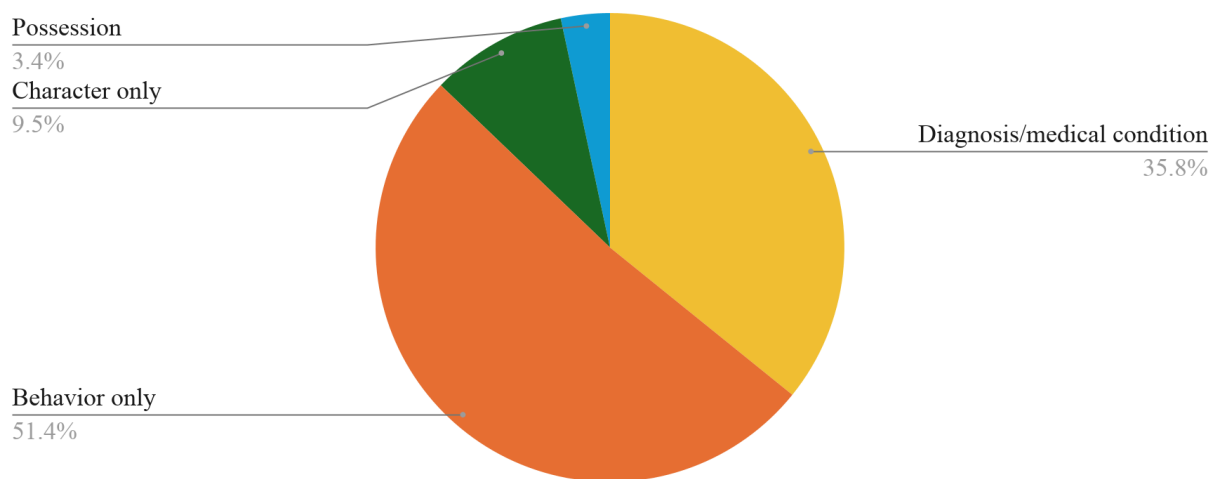


Figure 3. Breakdown of behavioral and characterological framings by specific framing category.

In 53 of those 146 cases (36.3%), the behavior was attributed to a diagnosis or medical condition; in 75 cases (51%), specific behaviors were described without reference to an underlying diagnosis or condition; in 13 cases (8.9%), the framing was

characterological without reference to specific behaviors; and in 5 cases (3.4%), the behaviors were described as a result of possession.

When the framing included no behavioral or characterological component (n=46, 23%), just under half the time a diagnosis or medical condition was evoked (n=21, 45.7%); the remaining 25 cases (54.%) used a variety of miscellaneous framings.

In short, the phenomenon we initially found when investigating disability is part of a larger set of cases involving a common phenomenon where the perpetrators attempted to offshift blame to victims through behavioral or characterological framing. While diagnoses and medical conditions were frequently evoked in support of this frame when present, the frame was often applied even in their absence. However, diagnoses and medical conditions also made up the largest single framing category for non-behavioral, non-characterological framings, suggesting that disability has appeal to perpetrators as a framing device for abuse/neglect even in the absence of behavioral or characterological framings.