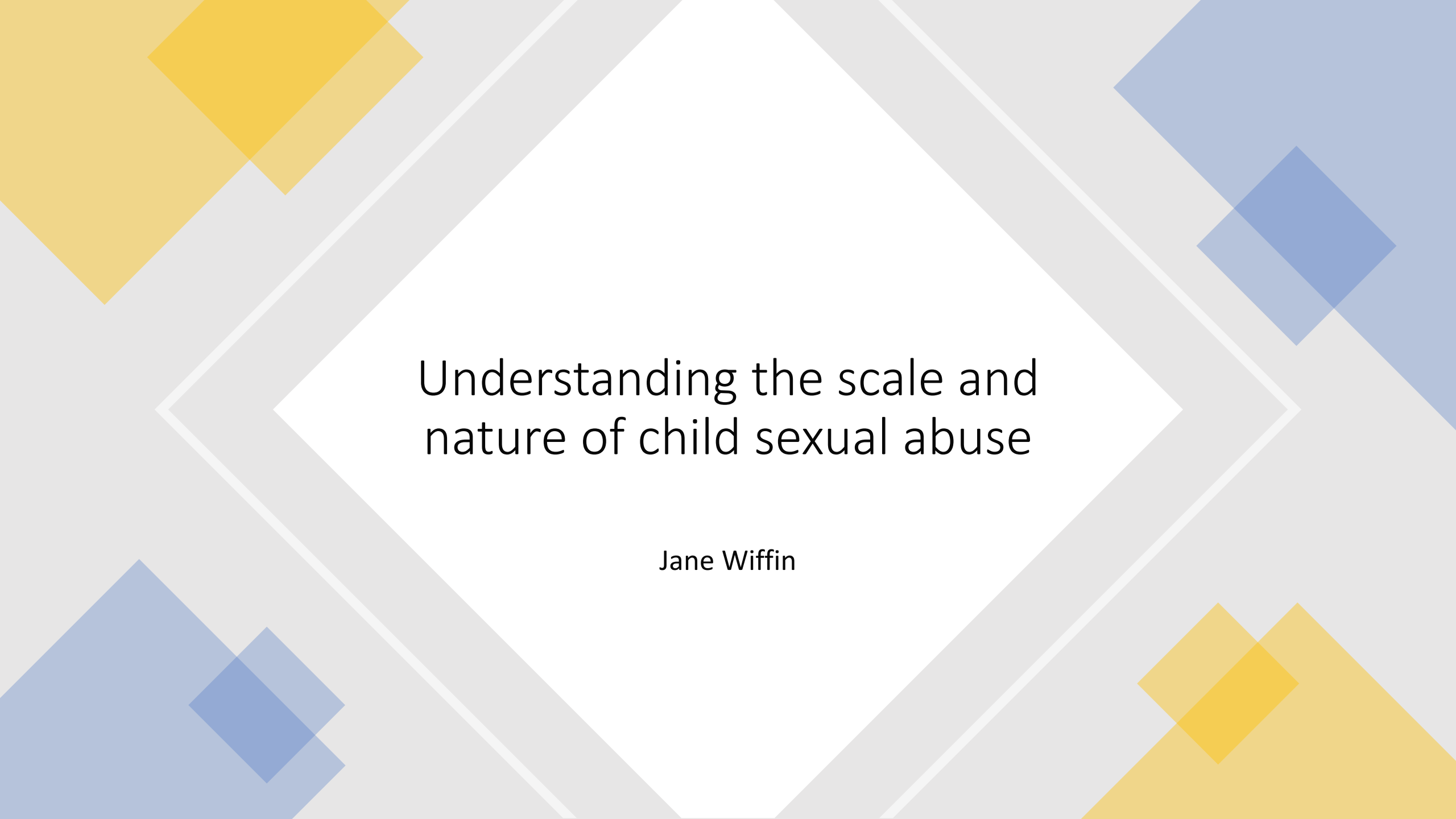




Understanding the scale and nature of child sexual abuse

Jane Wiffin

Looking after yourself – health warning

- Sexual abuse can be difficult to think about and talk about. Thinking about it and talking about it will affect us all in different ways, at different times.
- We know that a high number of people experience child sexual abuse and that many of them have never told anyone about it.
- We can therefore assume that there will be people in this room today who have either experienced sexual abuse themselves, or who have a family member or friend who has been sexually abused – this may be their own child, a partner, a parent.
- It is therefore important that we...
- Be aware of the feelings and experiences of other delegates
- Be kind to ourselves (personally and professionally)
- Respect each other's learning journey

What am going to cover?

- Scale and nature
- Whole family approach
- Talking to children and focus on “disclosure”
- Impact
- Signs and indicators
- Behaviour of perpetrators
- Support and assessment of non abusing parents
- Cross over with CSE



A snapshot of child sexual abuse

Centre of expertise on child sexual abuse



15% of girls/
young women



5% of boys/
young men

are estimated to experience **some form of sexual abuse** before the age of 16

Age when abuse started



The likelihood of experiencing child sexual abuse **does not vary significantly with ethnic group** in England, but people from some minority ethnic communities **face barriers to reporting abuse**



1 in 8 victims come to the attention of the authorities at the time

The most serious and repeated offences are more likely to be committed by **known persons**



For boys, abuse by authority figures is more common



For girls, abuse by family members is more common

Disabled adults are

2x

As likely as non-disabled adults to say they had been abused in their childhood



of those who had lived in a care home reported experiences of child sexual abuse - almost **4x as many as those living with family / carers**



of child sexual abuse **images depicted girls** only in 2019

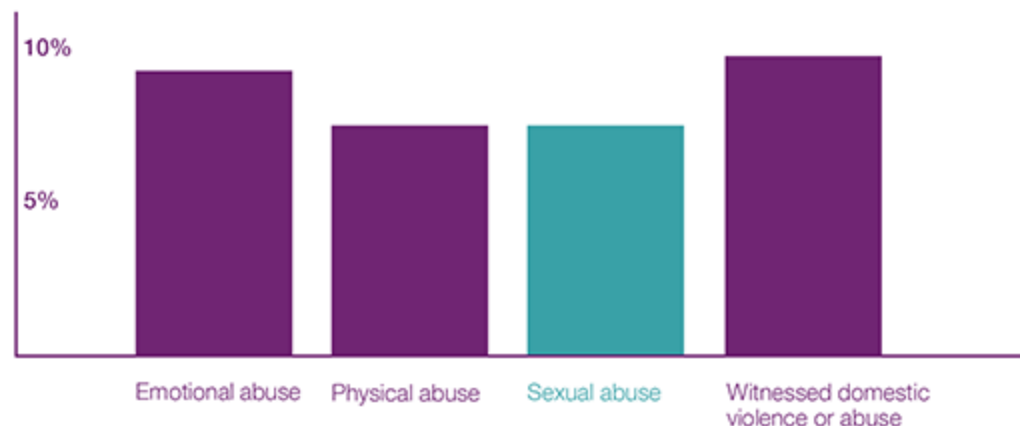


of **perpetrators** of child sexual abuse are **male**

Children's services response to sexual abuse

Centre of expertise on child sexual abuse

Surveys find sexual abuse just as common as other kinds of abuse...

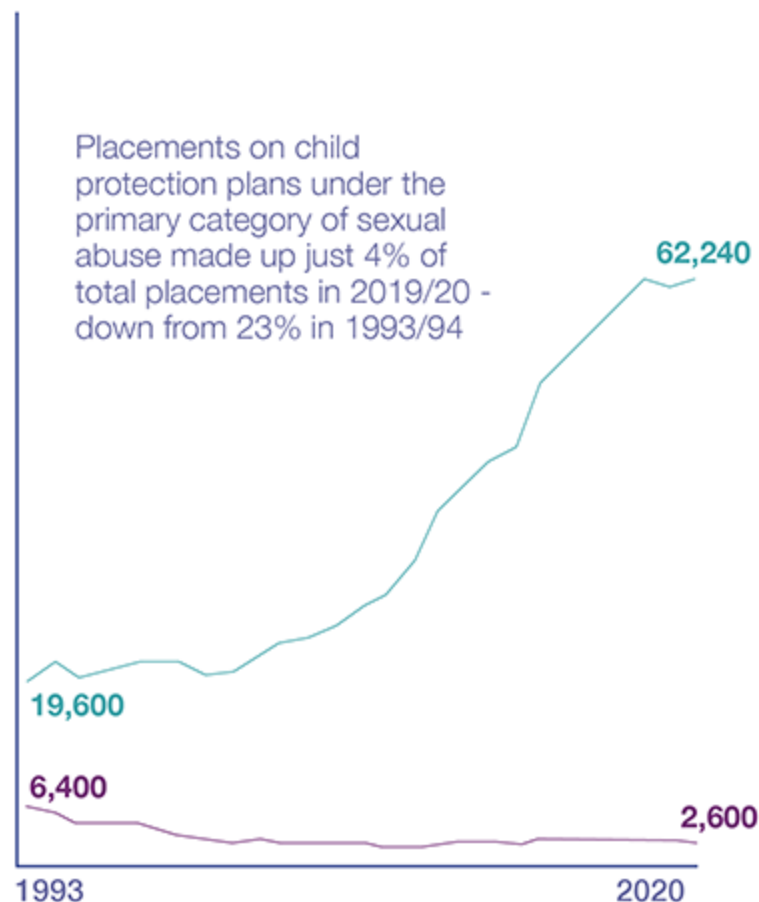


Far more children are thought to **experience child sexual abuse** than are identified by child protection services



Confidence in **naming and recording concerns** of child sexual abuse by professionals is pivotal and needs to be supported

but children are far less likely to be on a child protection plan for it.



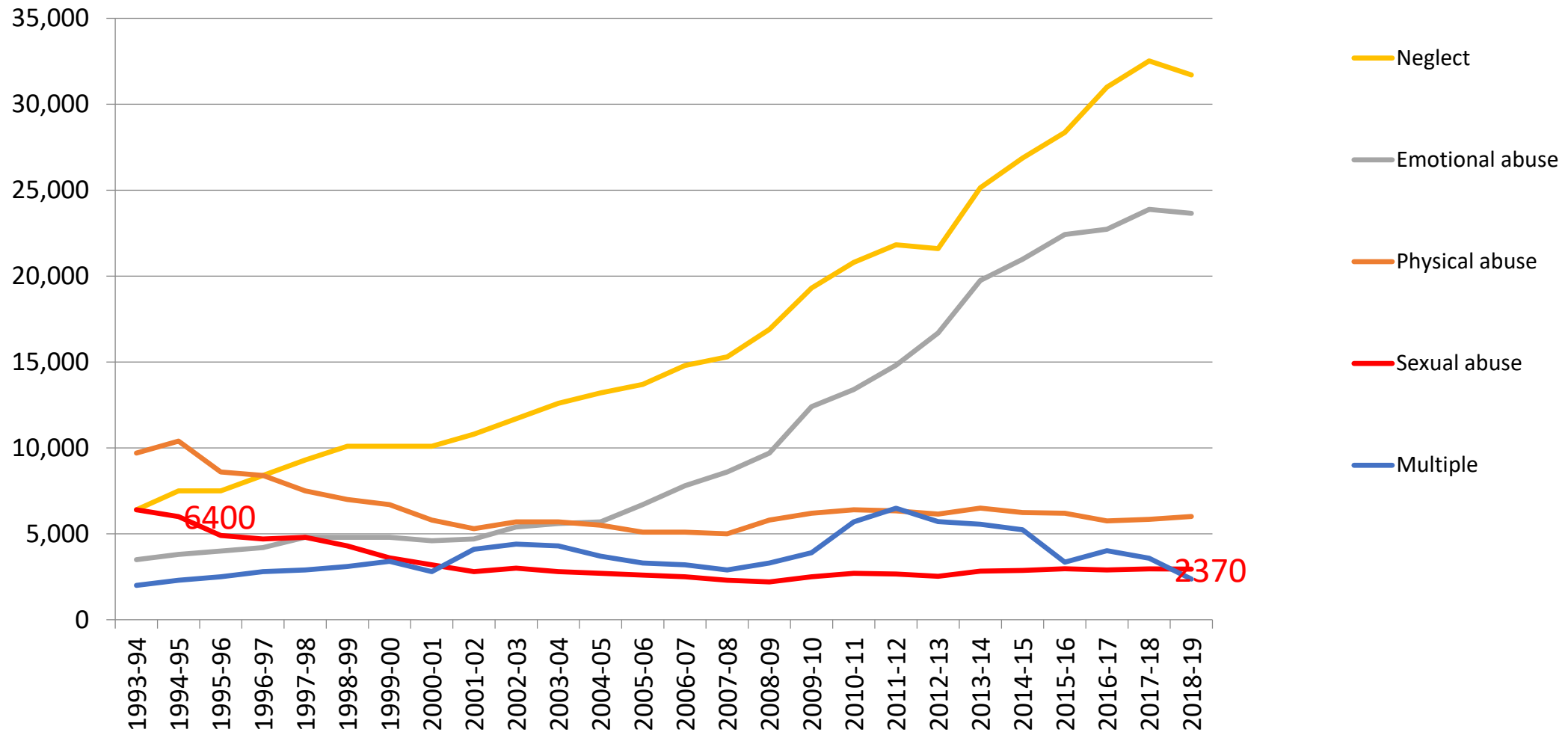
>200%

rise in children placed on protection plans for other forms of abuse

60%

fall in children placed on protection plans because of sexual abuse

Children on child protection plan by category of abuse in England, 1993/4-2018/9

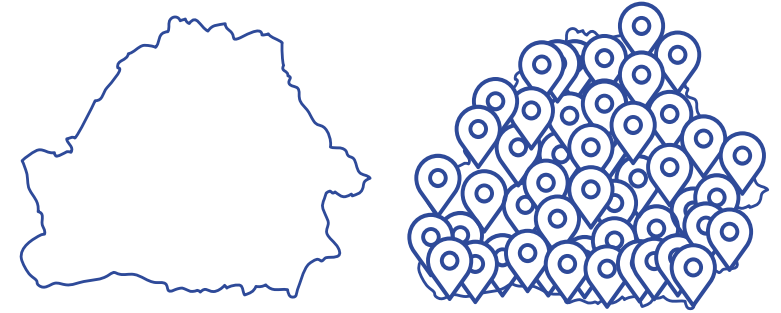


Where children live impacts the response they receive

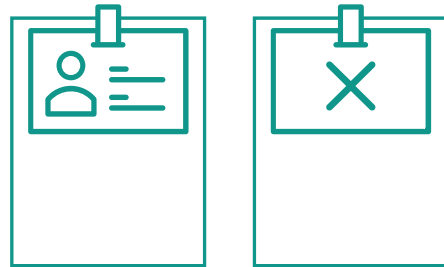
The number of **child sexual abuse offences** recorded per 1,000 children ranged from **three to 13** in different police force areas across England and Wales



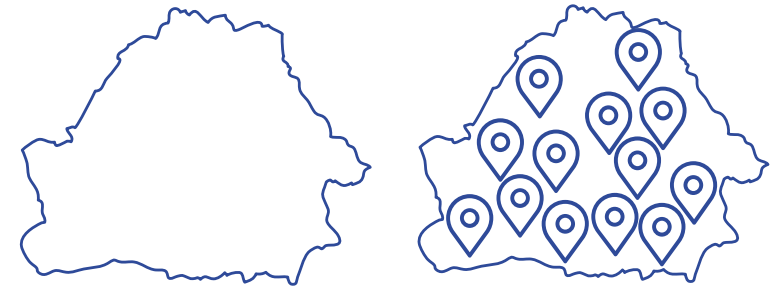
Some local authority assessments in England identified no **children at risk of child sexual abuse** while others identified up to **115** for every 10,000 children living in the local area.



Outcomes of criminal justice investigations into child sexual abuse vary, with the proportion of investigations resulting in charge ranges from **5% to 20%** in different police force areas.



Some local authorities in England and Wales placed no **children on a protection plan because of sexual abuse**, while others placed as many as **13** for every 10,000 children in the area.



Who is under-represented?

Young children

Disabled children and young people

Black and minoritized communities

Children and young people from religious communities

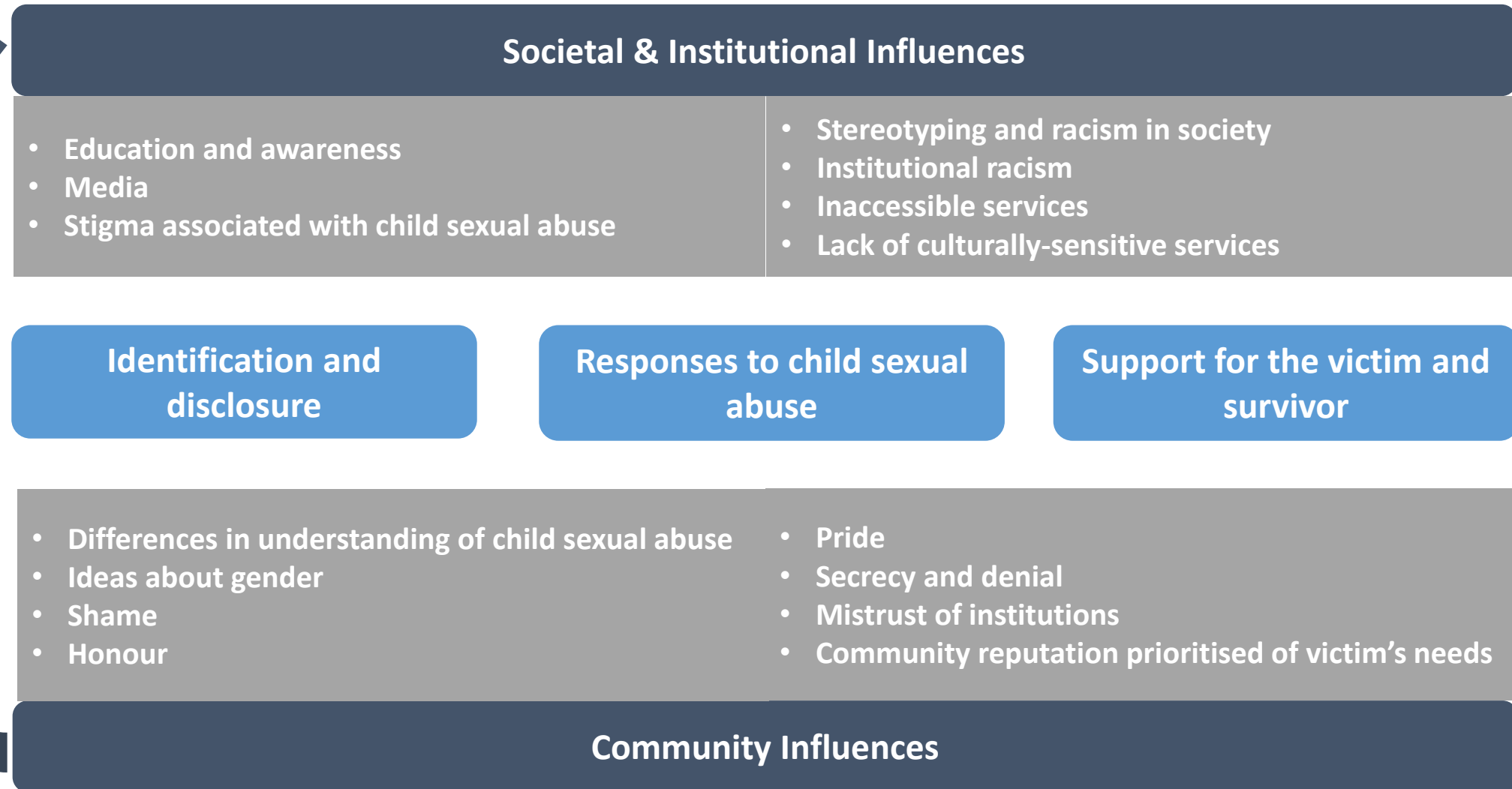
Disabled children

- Disabled children **3 x more likely** to experience abuse (Jones et al, 2012)
- Vulnerability of disabled children is **not reflected** in level of child protection plans
- Attempts to 'tell' were **sometimes seen as symptomatic** of a diagnosed condition (Taskforce, 2010)
- Need to ensure disabled children have the **means** to disclose

friend 	boy 	girl 	mother 	father 	brother 	sister 	head 	hand 	foot 	feet 
I 	me 	what 	where 	now 	later 	today 	same 	diff'rnt 	big 	little 
my/mine 	is / am are 	to 	first 	next 	last 	all gone 	ready 	busy 	happy 	sad 
it 	can 	have 	come 	feel 	know 	give 	angry-mad 	messy 	good 	bad 
you 	do 	eat 	drink 	finish 	get 	sing 	that 	a the 	and 	more 
your 	don't-not 	go 	help 	open 	put 	see 	again 	in 	away 	on 
here 	there 	like 	play 	read 	stop 	walk 	show 	out 	up 	off 
yes 	no 	want 	take 	tell 	turn 	watch 	write 	front 	down 	with 

“People don’t talk about it”

Child sexual abuse in ethnic minority communities, IICSA, June 2020



Criminal Justice System response to child sexual abuse

Police recording of child sexual abuse has increased in recent years, but the numbers are **levelling off**



Reporting of sexual abuse remains very high, prosecutions and convictions have fallen, but conviction rates are up.

67,172 offences reported

7,196 individuals prosecuted

5,389 convicted

2016-17

87,992 offences reported

4,226 individuals prosecuted

3,500 convicted

2019-20

Despite a significant **increase** in the number of **people reporting abuse**, **fewer offenders are being prosecuted and convicted**

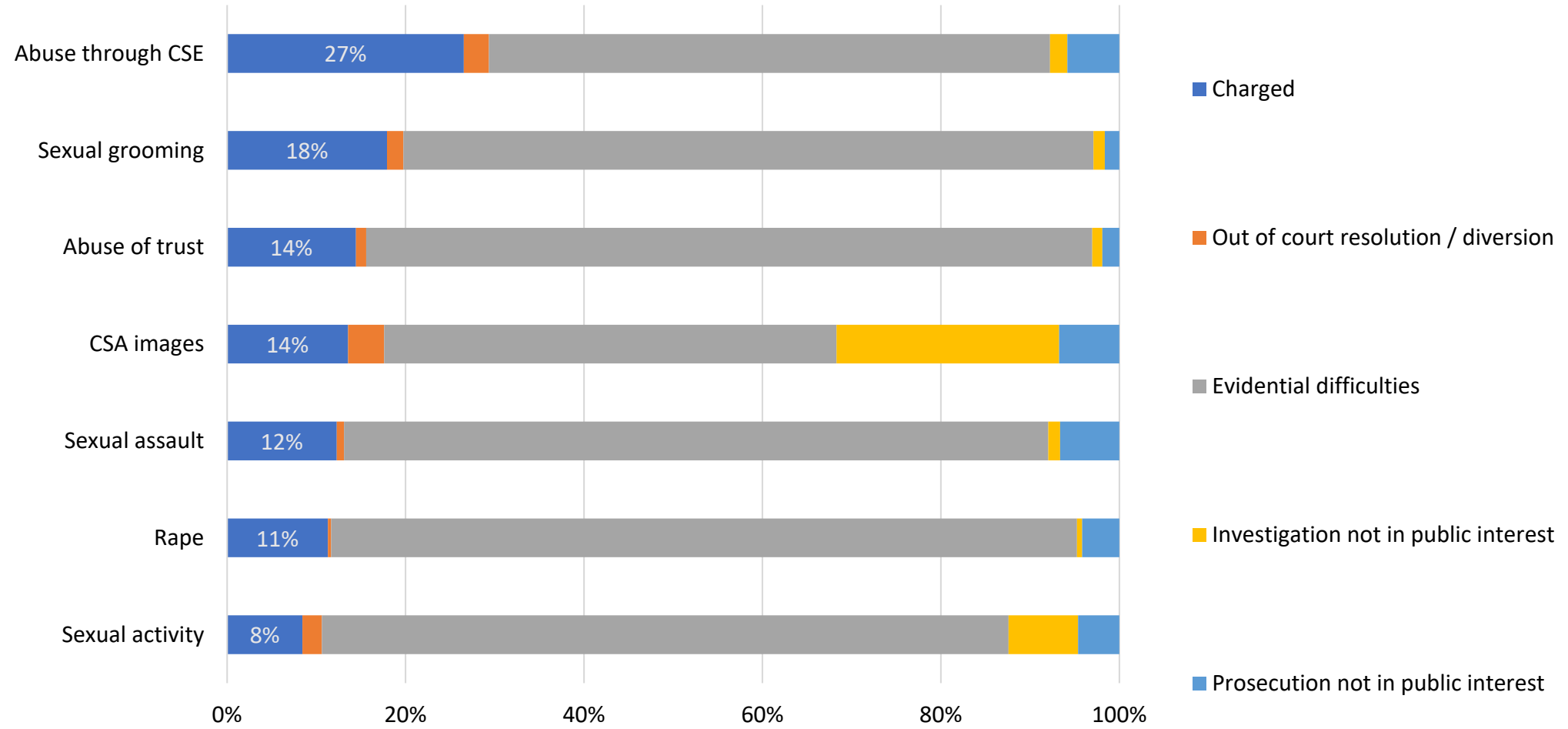


1 in 8

police investigations ended in a charge or summons, or an out-of-court resolution in the latest year, a drop from 1 in 3 in 2016.

Police investigation outcomes by CSA offence type

(Home Office, 2020/21)



No Further Action: What does it mean?

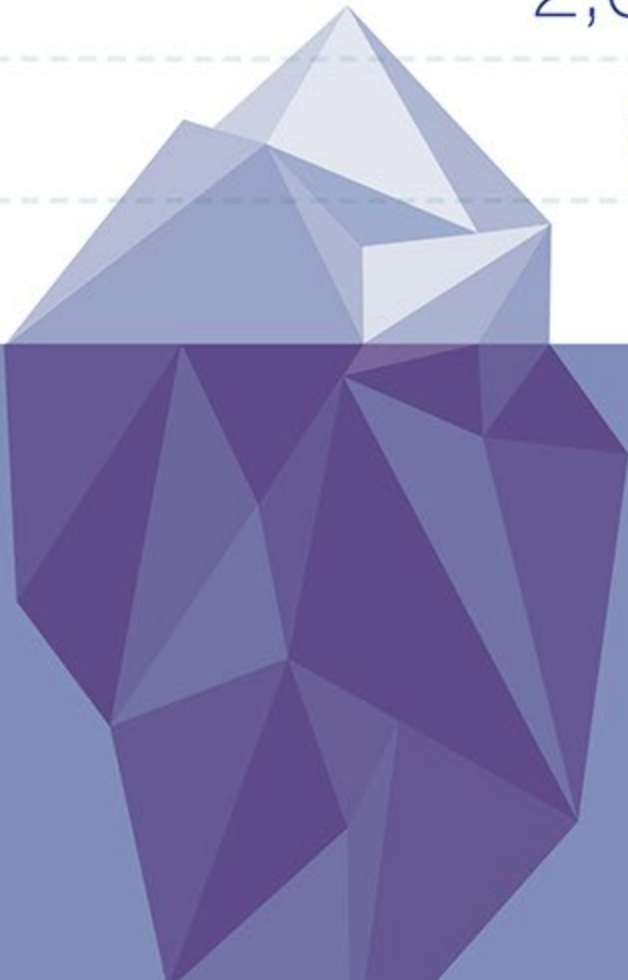
- **No further action** is when the **Police/CPS make** a decision not to charge someone with an offence. This may be because there is not enough evidence or it is not in the public interest.
- It does **not** mean the child has not been believed or listened to
- It does **not** mean that agencies walk away because there is nothing that can be done
- It is **not** the time to decide what support can be given. That should already be happening.
- It does not mean support should stop
- Really IMPORTANT we think about how this is communicated to child/YP
- It does **not** mean that an investigation cannot be restarted should further evidence come to light

A word about **Criminal injuries
compensation
scheme**

More children experience abuse than services are currently aware of

Centre of expertise on child sexual abuse

Child sexual abuse is prevalent in all communities in England and Wales (2019-20)



2,600 children on a **child protection plan** in England under the primary category of sexual abuse

30,460 children assessed **at risk** of sexual abuse in England

87,992 identifiable child sexual abuse **offences recorded** by the police in England and Wales

500,000 children estimated to have **experienced** some form of sexual abuse in 2019*

References: Department for Education: Characteristics of children in need: 2019 to 2020. Home Office Police Recorded Crime and Outcomes, year ending March 2020, updated 28 October 2020. Calculated using single-year prevalence estimates by age group (Radford et al, 2011, Childhood abuse and neglect in the UK today) and the Office for National Statistics 2019 population estimates. To read the full report - The scale and nature of child sexual abuse: Review of evidence 2021 - visit www.csacentre.org.uk

15% of girls/
young women 5% of boys/
young men
are estimated to experience
some form of sexual abuse
before the age of 16



So.....The Gap

Far more children are being sexually abused than we are currently identifying or safeguarding.

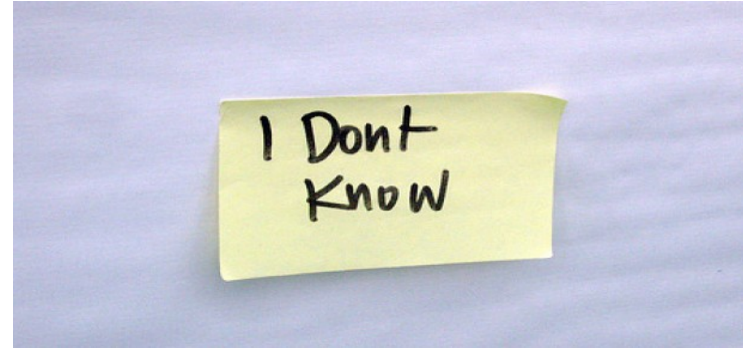
Why we need to improve overall the professionals and community response

Small group work: A virtue cup of tea/coffee

Talk to colleagues about the barriers to
Identifying and
Responding to child sexual abuse in your
Practice/organisation
What gets in the way?



The Obstacle of Fear



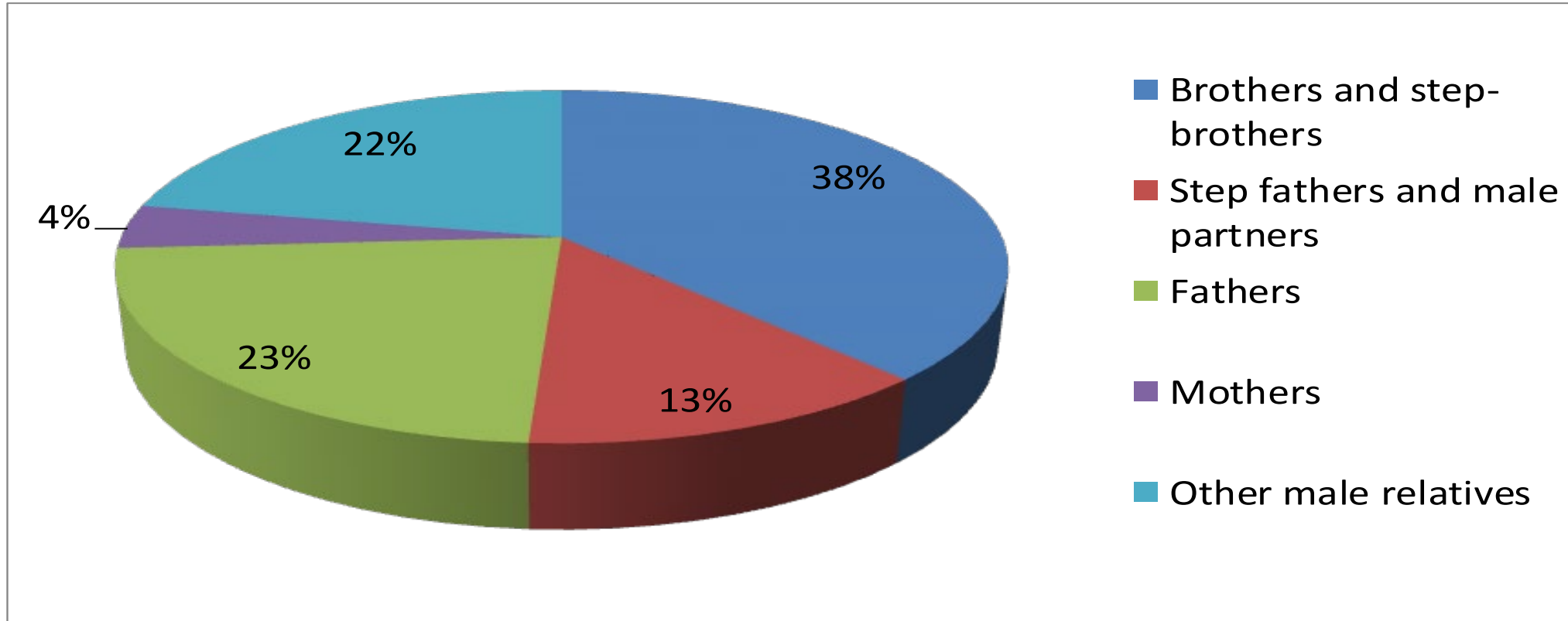
WRONG!



A question

- Think about what percentage of sexual abuse is committed by
 - Brothers and stepbrothers
 - Stepfathers and male partners
 - Fathers
 - Mothers
 - Other male relatives
- Write highest to lowest and what percentage out of 100 relates to each
- Will add up to 100%

People we know: Those abused within the family (Cawson, 2000)



A note on language...

The child who
has harmed

The child who
has been
harmed

- NOT young perpetrators
- They do not grow up to be sex offenders if offered the right support
- Important to ask why?
- Co-exists with other form of harm, sexual abuse, physical abuse, neglect and witnessing domestic abuse

Sibling Sexual Abuse

- normative sexual interactions between siblings – behaviour between young siblings that exists within expected developmental norms
 - inappropriate or problematic sexual behaviour involving siblings – behaviour between siblings that falls outside developmental norms and which may cause developmental harm to the children involved
 - sibling sexual abuse – behaviour that causes sexual, physical and emotional harm, including sexually abusive behaviour which involves violence.
-
- Sibling sexual abuse: A knowledge and practice overview
 - <https://www.csacentre.org.uk/csa-centre-prodv2/assets/File/Sibling%20sexual%20abuse%20report%20-%20for%20publication.pdf>

HSB between peers



Sexual abuse that happens between children of a similar age or stage of development. It can happen between any number of children, and can affect any age group (Department for Education (DfE), 2021a).

Developmentally typical		Problematic		Harmful	
Hackett Continuum					
Normal		Inappropriate	Problematic	Abusive	Violent
• Developmentally expected and socially acceptable behaviour • Consensual, mutual and reciprocal • Decision making is shared		• Single instances of developmentally inappropriate sexual behaviour • Behaviour that may be socially acceptable within a peer group but not in wider society • May involve an inappropriate context for behaviour that would otherwise be considered normal	• Developmentally unusual and socially unexpected behaviour • May be compulsive • Consent may be unclear and the behaviour may not be reciprocal • May involve an imbalance of power • Doesn't have an overt element of victimisation	• Intrusive behaviour • May involve a misuse of power • May have an element of victimisation • May use coercion and force • May include elements of expressive violence • Informed consent has not been given (or the victim was not able to consent freely)	• Physically violent sexual abuse • Highly intrusive • May involve instrumental violence which is physiologically and/or sexually arousing to the perpetrator • May involve sadism
How to respond • Although green behaviours are not concerning, they still require a response • Listen to what children and young people have to say and respond calmly and non-judgementally • Talk to parents about developmentally typical sexualised behaviours • Explain how parents can positively reinforce messages about appropriate sexual behaviour and act to keep their children safe from abuse • Signpost helpful resources like our 'Talk PANTS' activity pack: nspcc.org.uk/pants • Make sure young people know how to behave responsibly and safely		How to respond • Amber behaviours should not be ignored • Listen to what children and young people have to say and respond calmly and non-judgementally • Consider the child's developmental age as well as their chronological age, alongside wider holistic needs and safeguarding concerns about the problematic sexualised behaviour • Follow your organisation's child protection procedures and make a report to the person responsible for child protection • Your policy or procedure should guide you towards a nominated child protection lead who can be notified and will provide support • Consider whether the child or young person needs therapeutic support and make referrals as appropriate		How to respond • Red behaviours indicate a need for immediate intervention and action • If a child is in immediate danger, call the police on 999 • Follow your organisation's child protection procedures and make a report to the person responsible for child protection • Your policy or procedure should guide you towards a nominated child protection lead who should be notified and will provide support • Typically referrals to children's social care and the police would be required. Referrals to therapeutic services should only be made once statutory services have been informed and followed due procedures	

Talking to children about sexual abuse

“Professionals reply too heavily on
children to disclose”

(Joint Targeted Area Inspection, 2020)

Issues with the current system

- **Reliance on verbal disclosure (not in line with research):**

- more likely to show us than tell us
- need to ask questions to help children tell
- what about disabled children?

Current system (not child focussed):

- legal system not taking account of recall or trauma
- **investigation confirms perpetrators' threats**



Exercise...

- ▶ Open up your note book
- ▶ Write a couple of sentences about a sexual experience you have had
- ▶ Now write your name at the top of it
- ▶ I am going to **randomly select people** to share their screen

- ▶ How are you feeling?
- ▶ What are you thinking?



**Lets Talk
about sex!
This is not
comfortable**

- As professionals we have to be comfortable talking about sex
- Where did your information/ideas/attitudes about sex came from:
 - Your parents
 - Your extended family
 - Your peers
 - Your cultural context/religious institutions
- What influence did this have on you?



**Do you
know the
answer to
these?**

- For any child or young person for whom you have concerns they are being sexually abused
- Know their parents attitude towards sex education and consider what they have told them/what they plan to tell them/how open is sex and keeping yourself safe in family life. Talk to parents/parent figures
- What do you know about extended family beliefs/ How will this influence your thinking?
- What do you know about cultural/religious attitudes and their influences?

“The only grown-up that spoke to me about what would happen if I spoke about my abuse was the person who was abusing me.”

May Baxter-Thornton adult survivor)

Making Noise (2017): IV29, Female 18 years:

"There were so many times when I thought about telling someone but it was just like, how do you bring it up? How do you just walk into a room and go to someone, 'oh by the way this happened'?"

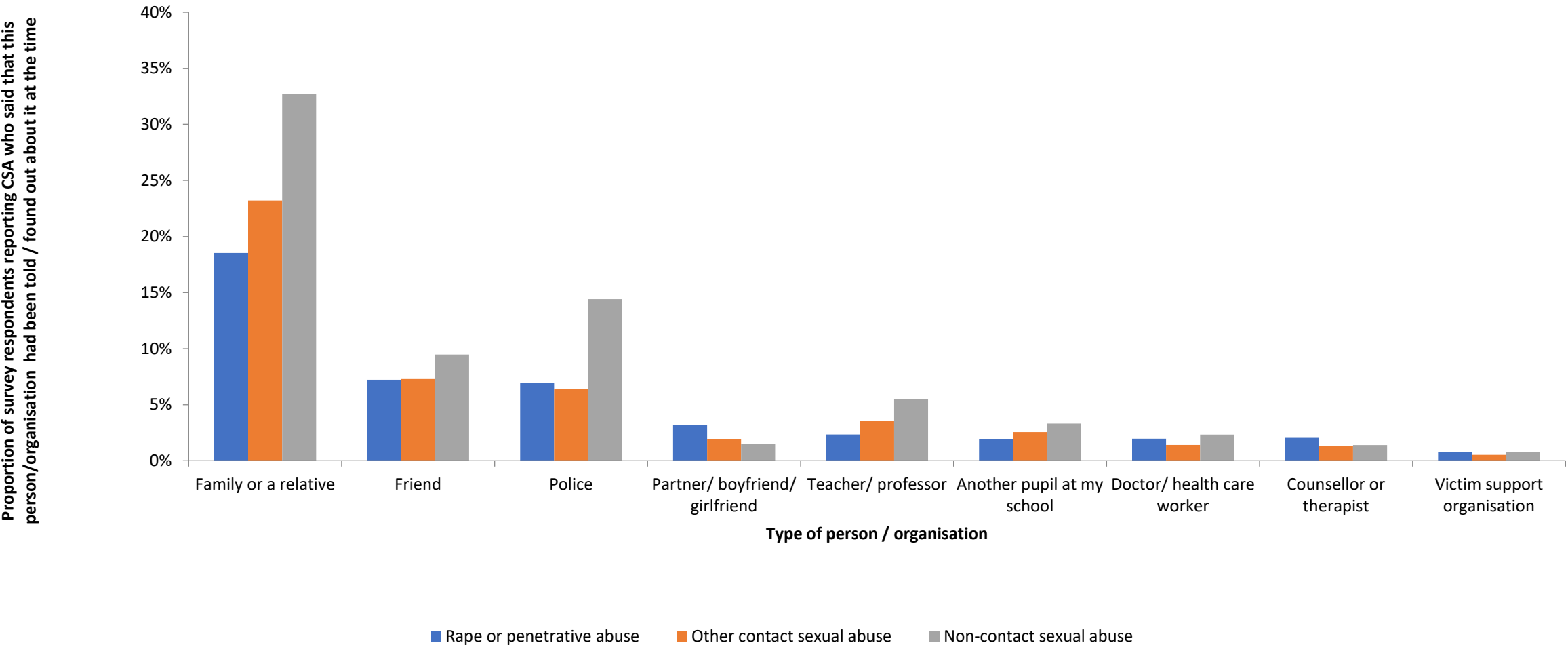
What the Research Tells Us

NSPCC (2013) 'No one noticed, No one heard':

- Over 80% tried to tell someone
- On average it took 7 years for the young people to disclose
- The younger the child was when the sexual abuse started, the longer it took for them to disclose
- Many disclosures were either not recognised or understood, or they were dismissed, played down or ignored
- 90% of the young people had had negative experiences at some point

Most children do not tell anyone about their abuse at the time

...
and if they do, they tell friends or family



Reasons why not to tell...

- not having the language or the capacity to communicate verbally, or not knowing how to tell
- not recognising the experience as abusive
- feeling shame or embarrassment
- being threatened or manipulated by the abuser
- feeling that the implications of telling are worse than the implications of keeping it secret
- Worry about bringing authority figures into family life
- fearing the consequences of speaking out, such as:
 - the impact on their non-abusing parent or wider family
 - being removed from the family, having to move home or school
 - the abuser getting into trouble, harming themselves or leaving the family
- feeling responsible for the abuse

What prompts disclosures?

Allnock and Miller, 2013

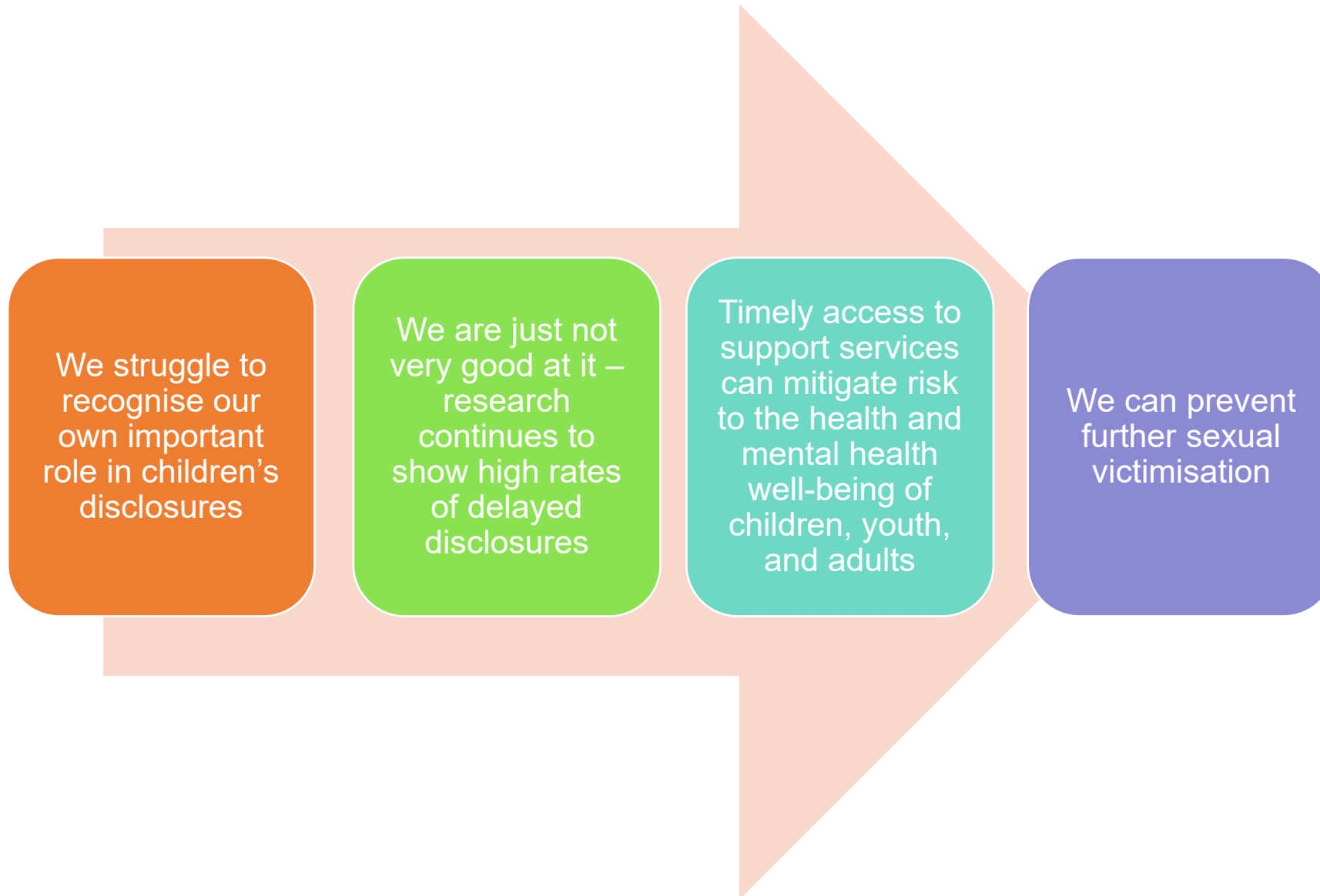
- *When someone noticed the signs and impact of abuse and asked about it*
- *(For some it was when asked a direct question, for others through building trust by providing a safe place to talk)*



Professionals: Recognise
signs and indicators of
sexual abuse

Professionals: Support
children to tell us what is
happening to them

Professionals: take action
to safeguard children



Talking with children about sex, sexual abuse or sexually harmful behaviour

- Take a deep breath...
- Ask yourself 3 questions:
- **How do I feel?** Scared, awkward, embarrassed, fearful, uncomfortable?
- **What does the child need or want?** To be heard, believed, reassured, to be safe, to have information and to understand, to be listened to, protected, to be praised for being brave.
- **How can I best respond?** If you don't know what to say, tell them that you need to think it through and that you don't have the answer now, but you will get it for them.
- It is really important to use your **authentic self** when discussing sexual abuse.

Noticing the child

Help seeking behaviour

- Help seeking behaviour – asking others to help is of sharing our worries is a normal developmental task that we learn from our family, our community and from the institution we attend.
- Some children who have been abused or neglected have their “help seeking behaviour” interrupted
- They can learn it is not always safe or they do not always know what the response will be
- Those children test out adult responses
- So every encounter with a child and young person who speaks about worries or harm is a test ground for whether seeking help works
- ASK – what does this child want from this- and will not be linked to the threshold document!
- So
- ACTION – tell what you can and will do not what you cannot
- CONSEQUENCES- acknowledge feelings and recognise when harm has occurred and it is wrong
- REPAIR – someone needs to say sorry for the harm that has occurred

Example: How can you ask?

“I have noticed you don’t seem yourself at the moment”

“I have noticed you crying”

“Help me understand”

“Can you tell me more about that”

“I have noticed X and I wonder what might be happening for you at the moment”

“I have noticed X and would like to understand more about that”

“I notice you are very quiet at the moment”

‘Sometimes things happen that children find really difficult to talk about’

Say something – NSPCC

- <https://www.youtube.com/watch?v=VrAwP79Dmn8>

What messages do we want and need to give to children about what has happened?

- **That sexual abuse is never the child's fault**
- Children often blame themselves for the abuse they suffered.
- They may have been told that they caused it by the person who abused them.
- We need to remind them that they are never to blame.



Communicating with children

A guide for those working with
children who have or may have been
sexually abused



November 2021

Impact, Signs and indicators

The Impact of Child Sexual Abuse

Sexual abuse can affect every aspect of a child's development

Individuals are affected differently and to varying degrees

10 – 53% show no psychological ill-effects into adulthood (Domhart et al, 2015)

The Impact of Child Sexual Abuse

- Sexual abuse can affect every aspect of a child's development
- Individuals are affected differently and to varying degrees for example 10 – 53% show no psychological ill-effects into adulthood (Domhart et al, 2015)

Some key indicators of level of impact are:

- *The nature of the abuse*
- *Whether the abuse is chronic*
- *The relationship between child and perpetrator*
- *The nature of the child's previous life experiences*
- *The support within the family and wider support networks*
- *The child's inherent resilience*
- **REMEMBER: ABUSE IS NOT DESTINY**

How impact differs...

The nature of the abuse

Whether the abuse is chronic

The relationship between the child who has been harmed and the person who has harmed them

The nature of the child's previous life experiences

The support within the family and wider support networks

The child's inherent resilience

The Impact of Child Sexual Abuse

Key Messages from Research, Centre of Expertise (2018)

- Child sexual abuse is strongly associated with the following adverse outcomes across the life-course (Fisher et al, 2017):
- **Poor mental health and wellbeing** (One in Four, 2015; Chen et al, 2010)
- **Physical health problems** including immediate impacts and long term illness and disability (Heger et al, 2002; Allnock et al, 2015)
- **Externalising behaviours** such as substance misuse, 'risky' sexual behaviours, and offending (One in Four, 2015)
- **Difficulties in interpersonal relationships** (Kia-Keating et al, 2010; Sabmann et al, 2012)
- **Parenting** (Fitzgerald et al, 2010; Kim et al, 2010)
- **Socio-economic impacts** including lower levels of education and income (Booden et al, 2007; Pereira and Power, 2017)
- **Vulnerability to re-victimisation** both as children and adults (Filipas, 2006; Finkelhor et al, 2007)



I joined in



I encouraged
it



I should have
told
someone



It was
something
about me

Sense of responsibility



I should
have
stopped it



I enjoyed it



I could have
protected my
siblings

And this leads to...

Guilt

Shame

Self-hatred

Self-punishing
feelings, thoughts
and behaviours

Deserving of
abuse

Trauma Symptoms

- Most children are unaware of the link between the symptoms and the abuse they have experienced
- Instead the symptoms are often viewed, by the child, as further proof and punishment for their inherent 'badness'
- Children often fear they are going mad, that something is damaged in them or permanently wrong with them
- Letting them know what they are going through is a normal reaction to abuse can be very reassuring
- Worker needs to let the child know that the symptoms and painful feelings will take some time to go away, but they will lessen and eventually get better

The Impact of
child sexual
abuse and
neglect CAN
become the child
or adolescent
problem to be
solved

Thinking about how children are described

Damaged

Difficult

Badly behaved

Problematic

Attention seeking

Manipulative

Concerning behaviour

Out of control

Impact on family

Blame

Torn
loyalties

Guilt



Distress

Anger

Jealousy

CSA Centre new resources



The Signs and Indicators template

- Designed to create a **common language** among professionals to discuss, record and share concerns that a child is being, or has been sexually abused.
- **It aims to help professionals:**
 - Consider, identify and clearly record signs which indicate that sexual abuse is or has been taking place
 - Discuss and explore concerns that a child is being or has been sexually abused, and communicate these concerns to other organisations and agencies
- **Do note**, it is not a diagnostic tool, nor is it intended for use as a “risk assessment” or a “box-ticking exercise”

Behaviour of the child/young person

Sexual abuse is a hidden crime and many of those who experience it do not report their experience for a number of years. Professionals must remember that all behaviour is communication

Physical signs

There may be physical signs in a child which may indicate sexual abuse

Signs & Indicators of Potential Concern

Behaviour of those around the child

When building a picture of concerns it is important to note the signs and indicators of abusive behaviour (including grooming behaviour) in **the people around the child**

Environmental signs

It is useful to understand the family or environmental context within which the child is living, as some factors increased vulnerability to sexual harm

Thinking about
perpetrators of
child sexual abuse

A word about language

Paedophilia is a psychiatric disorder where an adult or older adolescent is exclusively sexually attracted to pre-pubescent children. Not all paedophiles go on to abuse as they know it is wrong.

Hebephilia is the strong, persistent sexual interest by adults in pubescent children (normally in early adolescence 11-14yrs) then ephebophilia is the primary interest in later adolescents (15+)

“Sex offenders” may sexually abuse children and adults and very few sex offenders are paedophiles.

So, it would be useful to use the term ‘those adults who have or thought to have sexually abused’ – although we recognize this doesn’t necessarily come easily.

Thought to Action...

Activity – thought to action

Piece of paper – 3 columns

- I want you to all think of something you do, that you enjoy doing but probably isn't that good for you
- In the first column of your worksheet, I want you to write down all the reasons why you do this thing...
- You've decided to give up this thing you do, and you've been doing really well not doing it...BUT... you really, really want to do this thing...
- In the second column of your worksheet, I want you to write down all the things you may tell yourself to allow yourself to do it...
- So, you've persuaded yourself you are going to do this thing, but everyone in your life is really invested in you not doing it, they are proud of you for not doing it...
- In the third column of your worksheet, I want you to write down how you manage to get past them in order to do this thing...

How your worksheets may look...

Why do I do it?		
Boredom Feeling down Tiredness To relax To calm down I enjoy it Loneliness Excitement Rebellion Control Comfort Stress relief		

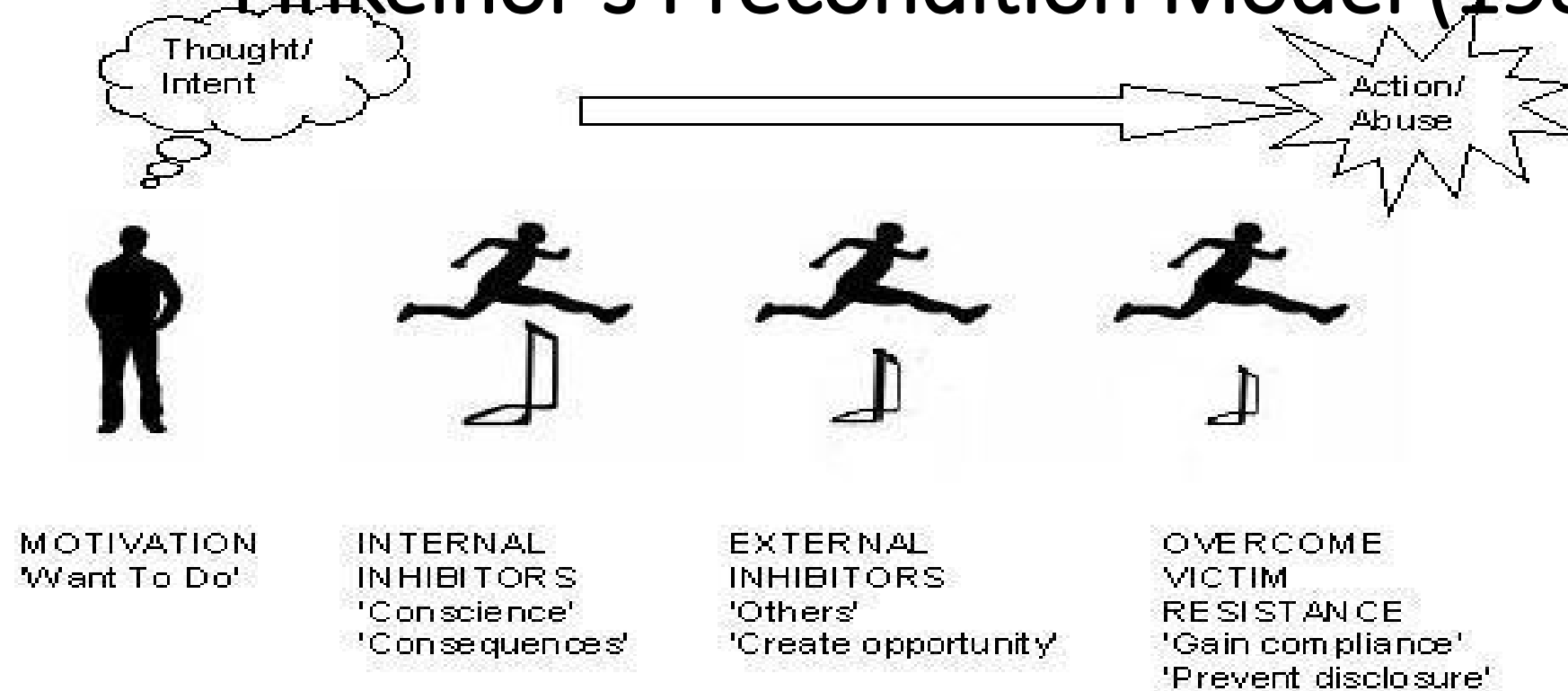
How your worksheets may look...

Why do I do it?	How do I persuade myself to do it?	
Boredom	Just this once	
Feeling down	No one will know	
Tiredness	I deserve it	
To relax	...I've had a hard day	
To calm down	...I've had a good day	
I enjoy it	It's my life...	
Loneliness	It's my right	
Excitement	Will stop again tomorrow	
Rebellion	There are worse things	
Control	Other people do it	
Comfort	I've been so good in other ways	
Stress relief		

How your worksheets may look...

Why do I do it?	How do I persuade myself to do it?	How do I get past others?
Boredom	Just this once	Do it when they're not there
Feeling down	No one will know	Lie
Tiredness	I deserve it	Deny
To relax	...I've had a hard day	Minimise
To calm down	...I've had a good day	Justify
I enjoy it	It's my life...	Distract
Loneliness	It's my right	Hide the evidence
Excitement	Will stop again tomorrow	Blame others
Rebellion	There are worse things	
Control	Other people do it	
Comfort	I've been so good in other ways	
Stress relief		

Finkelhor's Precondition Model (1984)



Assessment Tool: Finkelhor's 4 pre-conditions model

Motivation – why did he do it?	Overcoming internal inhibitors – what did he tell himself to make it ok?	Overcoming external barriers – how did he get past the protective parent?	Overcoming the victim's resistance – how did he overcome the victim?

Motivations in adult abusers

- Sexual arousal to children/abusive sexual activity
- Emotional loneliness
- Intimacy problems
- Perceived inadequacy in adult relationships
- Entitlement beliefs – men vs. women & children
- Hostility/anger towards women
- Desire for power, control or revenge
- Poor impulse control/self-regulation
- Sexual pre-occupation/sex as a coping mechanism

LOOK FOR FACTORS IN COMBINATION

Working with adults about whom we have concerns

- Role in meetings and decision making about children and young people?
- The privileging?
- Grooming professionals?

Thinking about the needs
of non abusing parents

What do you think it feels like to get this phone call

“Dear Ms Cradan. It is the police here. We have found that your partner Darshan has downloaded some indecent images of children (IIOC)”. We may need to think about you and the children”*

1. What are your immediate thoughts?
2. Who would you tell?
3. How does it impact on your sense of self?
4. What are the implications of this information for you?

The importance of effective non-abusing partner work

Why is this important?

- The importance for the child of being believed by the main carer
- Their role in protecting their children
- Their role in supporting children who have been abused
- Their role in managing the risk
- To aid assessment of the abuser

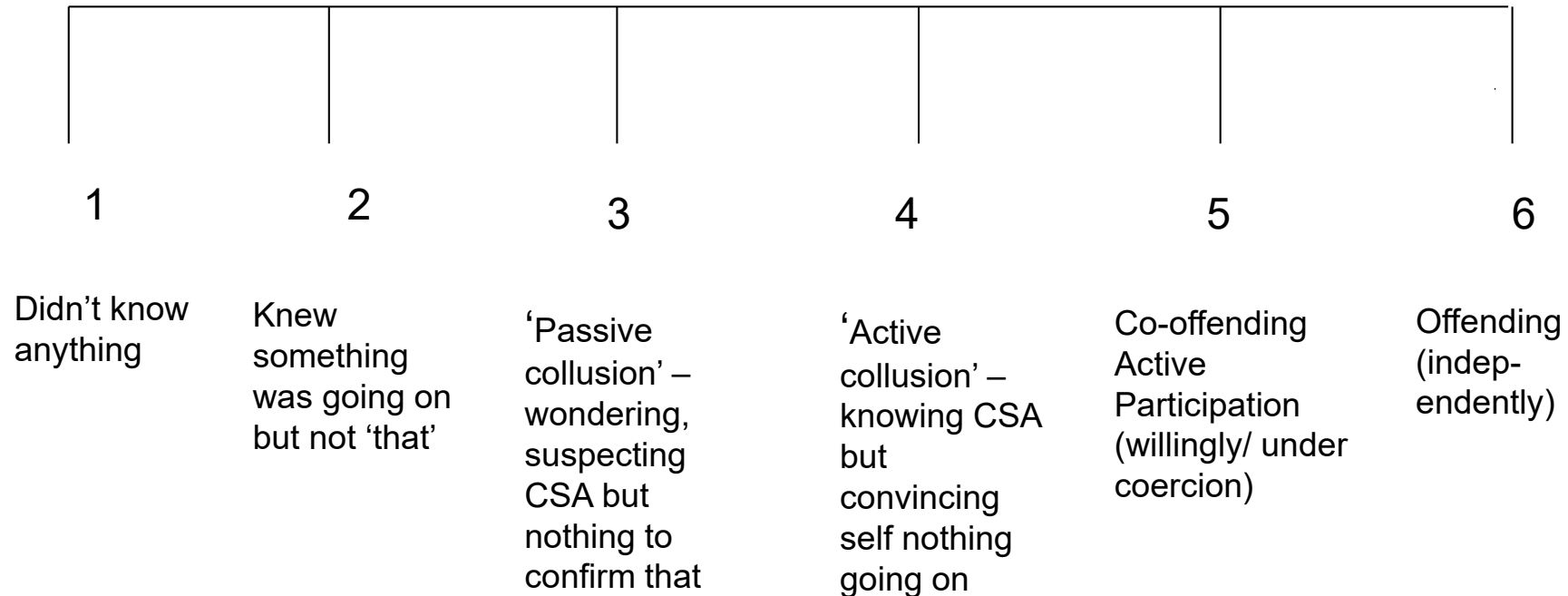
Working Assumptions

- Not all partners of sexual abusers are collusive and deceitful
- Often non abusing partners experience a discrepancy between their intellectual appreciation of risk and their emotional appreciation of risk
- Some non abusing partners may be over confident as to their ability to protect
- There is a distinction between a non-abusing partner's capacity to protect, their ability to protect and their likelihood of protecting

Do Mothers/Partners know?

The Spectrum of Knowing (Jenny Still, LFF)

How situations may present post disclosure..



...which must be considered within the context of the offender grooming her out of a position to protect.

Children's views

- *Twelve-year-old Naomi was asked if she thought her mother knew her father was sexually assaulting her Naomi replied that she thought her mother did know but did nothing about it.*
- *When asked why, Naomi looked as if this was a ridiculous question and replied: 'She's mum and married to dad'.*
- *This assumption that everything was shared between parents was a perfectly reasonable response from an adolescent perspective, albeit incorrect because it failed to take into account the power of the offender in manipulating the situation to ensure mother did not know.*

Impact of co-existing vulnerabilities

Domestic abuse

- Power and control at heart
- Attitudes of professionals
- Victim blaming and focus on mothers

Parental mental ill health

Parental substance misuse

Adult learning disabilities

- Communication
- Vulnerability and exploitation

How might these impact on a non abusing parent? How might an adult who is sexually abusing a child exploit these vulnerabilities?

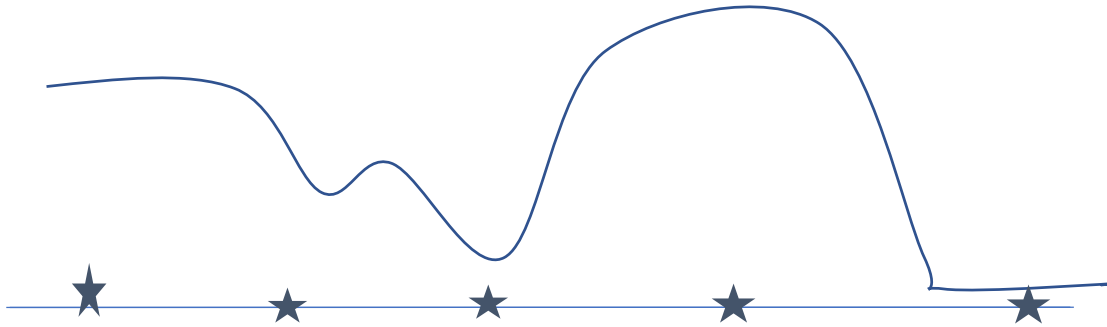
Financial, practical and emotional dependence critical to understand

The Timeline

- On a piece of paper (large is good) plot with the non-abusing parent (and person of concern) any major events since they met their partner.
- This could include – births, deaths, marriages, affairs, miscarriages, job gains and losses, mental health episodes, substance or alcohol misuse episodes and so on.



- Then plot by way of a curvy line how their relationship was over time (including sexual activity)



- Then plot when there were concerns about the child (in a different colour pen) – changes in behaviour or mood, reports of harm etc.
- This is useful for our assessment, but also sows the seed for the non-abusing parent to think about how her and her child/ren may have been groomed and her child/ren abused.



Do Mothers/Partners know? The Spectrum of Knowing (Jenny Still, LFF) to the spectrum at the end of assessment

- Believes and does not need support to protect
- Believes but needs support to protect
- Remains in position of not believing but accepts concerns of others and will
- Ambivalent , takes little action, but will allow child to have intervention and support
- Does not accept, cannot protect, will not accept help and will not allow child to have help
- BUT not absolute- task to move people along the continuum

Why the Supporting Parents & Carers resource



Parents of children and young people who are being or have been sexually abused don't always get the practitioner responses they need



There is a lack of guidance for practitioners in responding to the needs of parents of children and young people who are being or have been sexually abused



Practitioners are often unaware of the impact of the abuse on parents, and of the importance of their own responses to parents

Building the picture; including understanding child

Step 1

- Potential signs and indicators of sexual abuse
- And sexually abusive behaviour

Step 2

- **How might abuse have happened in this family?**
 - **Timeline of family events**
 - **Finkelhor Pre-conditions model**

Step 3

- Considerations for assessment
- What do you need to ask, of who?
- Which sources of information?

Step 4

- What interventions do we need to reduce the risk?
 - With each member of the family
 - With each relationship within the family

Link with child sexual exploitation

- Well – CSE is child abuse and often history
- The issue of “exchange” has caused confusion
- Drift into victim blaming language
 - She met him
 - She engaged with him
 - He went to the Hotel
 - Despite keep safe work she still engages with inappropriate men
 - Putting himself at risk
- Grooming and constrained choices
- <https://www.youtube.com/watch?v=2dLsPGuBDRk&feature=youtu.be>
- Lets try and find a way to engage with the complexity

If you are affected by anything that has been discussed today...



The Survivors Trust Find help, support and advice in your area: [Survivors Trust directory of services.](#)



Rape Crisis helpline – [0808 802 9999](tel:08088029999)
www.rapecrisis.org.uk



National Association for People Abused in Childhood – [0808 801 0331](tel:08088010331)
<https://napac.org.uk/>



SurvivorsUK Online help for male survivors of sexual abuse and rape.

<https://www.survivorsuk.org/ways-we-can-help/online-helpline/>