

Quality Update No . 39

February 2015

Preventing & Responding to Child Sexual Abuse

What is the DEFINITION of Child Sexual Abuse?

Involvement of dependent, developmentally immature children and adolescents in sexual activities that they do not fully comprehend, to which they are unable to give informed consent, or that violate the social taboos of family roles.

TYPES of Child Abuse offences

Contact (physical), and non contact including exposure to pornography, grooming and sexual self-manipulation.

SIGNS of Child Sexual Abuse

Signs can vary but generally include withdrawn, unhappy, suicidal behaviour, aggressive or violent, bedwetting, sleep problems, nightmares, eating problems, mood swings, detachment, pains for no medical reasons, sexual behaviour.

What are some of the EFFECTS of Sexual Abuse?

Not all children exposed to similar experiences of abuse and neglect are affected in the same way. Some of the effects include depression, anxiety disorders, poor self esteem, aggressive behaviour, suicide attempts, eating disorders, use of illicit drugs, alcohol abuse, post-traumatic stress, dissociation, sexual difficulties, self-harming behaviours, personality disorders, long term impacts (the impact does not end when abuse ends).

The effects are dependent on the age of the child, severity, frequency and duration of the abuse, the child's relationship with perpetrator, the type(s) of abuse, whether there has been detection of the abuse and any action taken, and support provided.

Generally who are the child sex OFFENDERS?

Offenders may not be mentally ill, may be situational (opportunity presents itself), are usually someone the child knows rather than a stranger, are able to recognise vulnerable children (children with a poor relationship with parents, no friends, past victimisation). Offenders may gain insider status long before they start abusing a victim. They may also groom families, friends and organisations.

How may children disclose?

Often disclosure is tentative or accidental, and depends on the child's developmental stage. Children may tell a little and see what happens, deny at first then tell later, tell in a way that adults may not understand.

80% of victims do not disclose until they are adults, if ever

Reasons children may not disclose?

Children may not disclose due to the fear of the unknown (consequences, reactions from families/friends), no one to confide in / trust, feel embarrassed, ashamed or self-blame, may violate rules of family or culture, unable to communicate effectively or clearly, do not want to revisit event, pressure or threatened to keep secret, relationship to offender, fear of being labelled and/or lack of feeling safe.

What do I do if a child makes a disclosure?

1. Listen (allow them to talk)
2. Do not ask leading questions
3. Do not make assumptions about how the child feels / what they want to happen
4. Tell them that it's not their fault and provide reassurance
5. Acknowledge feelings
6. Consult with Team Leader / Manager to determine next step(s) and maintain detailed records

How do I decide if a child's sexual behaviour is not normal or concerning?

Refer to Guidelines for Children Sexual Behaviour – "Age Appropriate Sexual Behaviour in Children and Young People".

What do I do if a Sexual Behaviour is NOT 'normal'?

If the observed sexual behaviour is not age appropriate:

1. Remain calm,
2. Ask child to stop the behaviour,
3. Keep a record of the behaviour and
4. Seek professional consultation

DO NOT – appear shocked, react in a way that may shame or embarrass the child, ignore the behaviour, assume that sexual abuse has occurred, label the child a pervert or sex offender

What can I do to prevent Child Sexual Abuse?

Continue to develop and build strong engagement with the child and with the carer(s) in order to establish a quality relationship. Continue to seek knowledge about the child's family/history and child's development. Organisational support that values and encourages child focused and therapeutic approaches, supervision, reflective practices and training and ongoing training in relation to Child Sexual Abuse and Trauma.

What impacts may there be for me?

Vicarious trauma may occur. It's important to know your own capacity and limits, and at all times exercise self care, and discuss in supervision.

Refer also to [Quality Update No. 31 – Client abuse or assault during Service Delivery](#), and the procedures and Work Instructions referenced within this Update.