

Child sexual abuse: introduction and key practice points

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Learning points

- Definitions of child sexual abuse and intrafamilial sexual abuse
- Key statistics on child sexual abuse and who is affected
- Top tips on working on this area and making a real difference, with links to different resources in the knowledge and practice hub so you can find the information and guidance most relevant to your work

Child sexual abuse (CSA) can take a wide variety of forms. The statutory guidance for use in England (*Working together to safeguard children*, DfE, 2018) defines it as:

“...forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).”

Is the definition for use in Wales any different?

The [child sexual abuse knowledge and practice hub](#) focuses on intrafamilial CSA, a term which describes abuse perpetrated within the family environment, although not necessarily inside the home (Office of the Children’s Commissioner, 2015). The perpetrator may not necessarily be related to the child, but may be living, or have close ties with, the family. For example, abuse by a babysitter, a step-relative or a family friend may be considered intrafamilial abuse (Horwath et al, 2014).

A key question for professionals to consider is ‘Did this perpetrator feel like family to the child?’

(from McNeish and Scott (2018), *Key messages from research on intra-familial child sexual abuse*, Centre for expertise on child sexual abuse)

Intrafamilial CSA typically starts at a younger age than extrafamilial CSA and may continue for many years. It may be particularly traumatic because it involves high levels of betrayal, stigma and secrecy (McNeish and Scott, 2018).

Where research has recorded the gender of perpetrators of intrafamilial CSA, the vast majority have been found to be male, although abuse by women does occur. In around a quarter of cases, the perpetrator is under 18 (McNeish and Scott 2018).

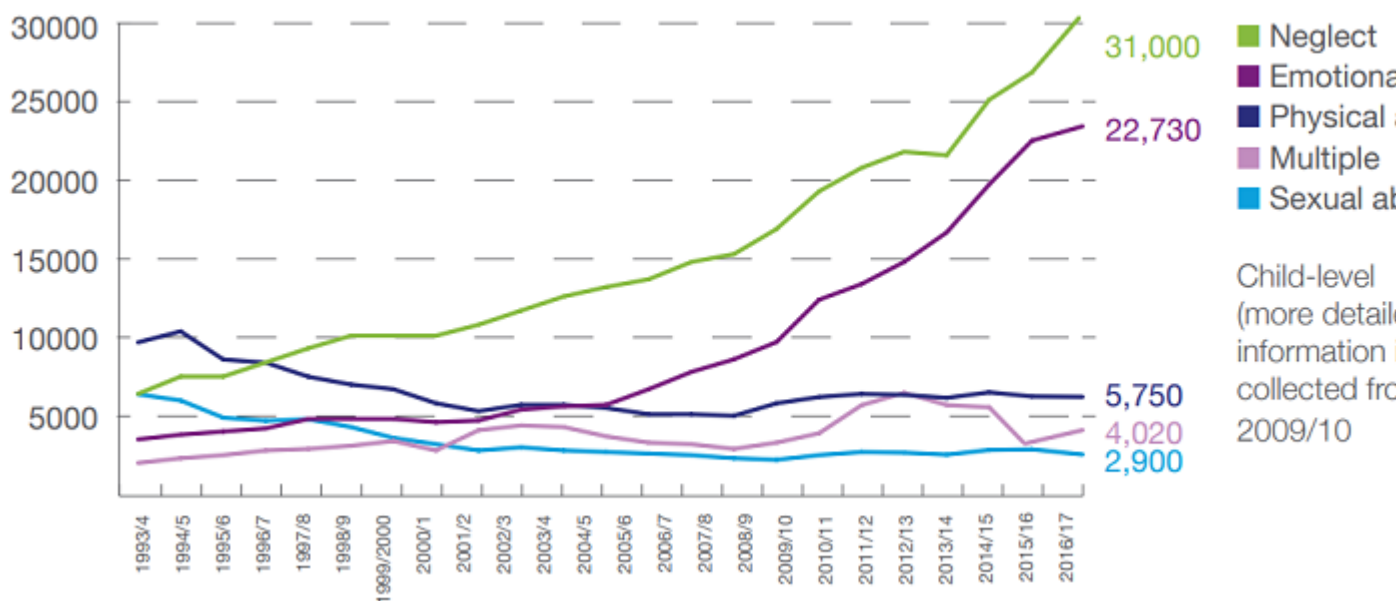
There is no clear estimate of the number of children and young people who experience sexual abuse of all types in England and Wales, but it is thought to be significantly higher than the level reported to statutory agencies – see [this scoping report](#) by the Centre of expertise on child sexual abuse (2018) which sets out what information different agencies do and don’t know and what’s

possible to say from the research. (Click the document button below to see at-a-glance summaries of the current picture.)

DOCUMENT
 CSA Centre: infographics on the scale and nature of CSA

Intrafamilial CSA is estimated to comprise up to two-thirds of all CSA reported to the police (Kelly and Karsna, 2017/updated 2018). Different large-scale studies have yielded different figures, ranging from one in four (Radford, 2011) to one in ten (Department of Health, 2010), depending on the particular questions they have asked, how they have defined CSA and the ways in which data was collected. A report by the Office of the Children’s Commissioner (2015) estimated that only one in eight children who are sexually abused come to the attention of statutory agencies, with the great majority of abuse remaining undetected by professionals.

The numbers of children on child protection plans in England and Wales varies considerably, with an overall picture of significant decline in numbers over the last 20 years (Kelly and Karsna, 2018). See the graph below which shows the total number of plans – and plans in the neglect and emotional abuse categories – rising, but plans for sexual abuse more than halving from 6,400 in 1993/4 to 2,900 in 2016/17.



Graph: from Kelly and Karsna (2018), Measuring the scale and changing nature of child sexual abuse and child sexual exploitation: Scoping report, Centre for expertise on child sexual abuse.

While not all children who experience sexual abuse will need to be made subject to a child protection plan, the figures still do not correlate with the extent of intrafamilial abuse reported retrospectively by adult survivors.

There are a number of reasons why children and young people do not feel able to disclose their abuse, and these are explored with practical tips on how to overcome them in [this guide](#). However, it is important for us to remember our responsibility as professionals in the disclosure process. Children, young people and adult survivors need help to talk about their experiences so it is important that we fulfil our role in supporting them to do this. The [guide to speaking to and supporting children in cases of suspected or disclosed CSA](#) offers some guidance about how we can do this.

Working with cases of CSA can be challenging for social workers, particularly when abuse is suspected but not 'proven'. A lack of confidence in what to say or do and the fear of getting it wrong can prevent social workers from talking effectively with children and their families about their concerns. While the work can feel highly emotional and complex, there are many things we can do as social workers to make a real difference to the short- and longer-term outcomes of children who experience sexual abuse. Children *can* be helped to recover from their experiences, and as social workers we are key to supporting them throughout this journey.

This knowledge and practice hub aims to support your work in this field – giving you the confidence to address sexual abuse, whether or not the police feel able to take allegations forward through the criminal justice system.

Top tips

1. **Recognise the value of your role:** No matter what role you currently hold as a social worker or type of service you work in, the need to identify, recognise and respond to concerns of sexual abuse is vital and can significantly improve the short- and longer-term outcomes of children who experience sexual abuse: We *can* make a difference.
2. **The earlier the better.** Intervening as early as possible when there are concerns about sexual abuse is key. We are often taught the signs and indicators of CSA in children and young people; while these are very important, by the time we are seeing signs in the child, the abuse has already begun. If we look instead for signs and indicators of abusive behaviour and contexts where

children may be more vulnerable to sexual abuse, we are more likely to prevent abuse before it happens. See the sections on [indicators of abusive behaviour and family vulnerability factors](#) for information on these.

3. **Sexual abuse is *never* the fault of the child or young person who has been abused:** Children and young people often feel responsible for their own abuse, as they have been 'groomed' into believing this. We must ensure we portray this understanding to children and young people in our language and in the actions we take. For example, rather than asking a child 'Why didn't you tell anyone?', ask instead, 'What stopped you telling anyone?' Or, when investigating concerns about sexual abuse, ask the alleged perpetrator to move out of the home, rather than moving the victim. See the guides to [supporting children who are disclosing abuse](#) and [after disclosure](#) for more guidance on how we can talk to children about it.
4. **It is not possible to 'tell by looking':** Media stereotypes and personal assumptions often dominate our thinking about sexual abuse. While there are some shared characteristics of people who abuse children, there are also many differences. Men and women, boys and girls, older and younger, disabled and non-disabled, and those from any cultural, ethnic, religious or socio-economic class can behave abusively towards others. See the information on the preconditions for perpetrator behaviour (coming soon), [female offenders](#) and [sibling abuse](#) for more guidance.
5. **There is no typical victim of sexual abuse:** While more girls are reported to experience sexual abuse, boys do also experience abuse. Abuse may be perpetrated against very young children, children from different religious, cultural and ethnic backgrounds, and those with disabilities.
6. **Take a 'whole family approach' when addressing CSA:** If CSA happens in the family context, we need to consider prevention, protection and support for recovery in the context of the family too. Teaching children 'protective behaviours' should not be all we do to support a family; we also need to build the capacity of non-abusing adults to protect children and reduce risk factors for abusive behaviour. See case study examples of working with the whole family in cases of abuse by a [grandparent](#) and [sibling](#).

7. **Think the unthinkable:** Sexual abuse can be very difficult for us to think about – perhaps more so when children are very young or are disabled, or when abuse is perpetrated by those who should be caring for them, such as mothers and fathers. It can be a human response to shut off from difficult thoughts and emotions, so encouraging reflection in ourselves and others about ‘unbearable’ events is essential. The aim of this knowledge and practice hub is to help social workers feel more confident in practising in this area. The Learn as a group and case study activities, which you can do with a team or group of peers may be particularly helpful in making conversations about difficult things more ‘normal’, see for example the [Learn as a group about sibling sexual abuse](#).
8. **Evidence is broader than verbal disclosure:** We tend to think of disclosure as the act of a child verbally telling us what is happening for them. In fact, children are more likely to show us than tell us that something is wrong. There may be evidence in children’s actions and behaviours, and in the past or current behaviour of their family members. [This guide](#) considers disclosure and evidence in the broader sense and helps us think about our role in the disclosure process.
9. **Remember our legal threshold:** The legal threshold for social work intervention is ‘the balance of probabilities’ while the criminal justice system’s threshold for conviction is ‘beyond reasonable doubt’. If the police are unable to take a case forward as they do not have the evidence for an arrest or conviction, that does not mean that we, as social workers, should end our involvement.
10. **Sexual abuse is rarely clear cut:** We will often work with families where we suspect abuse but there is no clear verbal disclosure. Rather than closing cases, we need to sit with the feelings of uncertainty that this produces and make sure we do something to reduce risks and vulnerabilities, and build strengths, whether or not we can ‘prove’ it has happened.
11. **Apply knowledge to practice:** While there is a lot that research doesn’t yet tell us about sexually abusive behaviour, there are some very helpful and well-established models of how abuse takes place which we can apply to our practice to make children safer. See the [section on perpetrator behaviour](#) for more on this.

12. **Look after yourself:** The emotions aroused by working with cases of sexual abuse can be overwhelming. Using peer and supervisory support is key to keeping healthy in our work and containing the distress of those with whom we work. See the box below for Community Care Inform resources that can help social workers and their managers look after social workers' wellbeing.