

## **The Non-Abusing Adult**

### **Assessing the information re sexual abuse and the ability to protect it**

1. What is the adult's view on the sexual abuse of children?
2. Does the non-abusing adult believe that the child has been abused by the abusing adult?
3. If not, why not?
4. Does the non-abusing adult have the ability to protect child (ren) generally from abuse and exploitation?
5. If not, why not?
6. Is the adult able to protect the child (ren) from sexual abuse by the abusing adult?
7. If not, why not?
8. Are there a range of services / support / interventions which will allow the non-abusing adult to protect the child(ren) from sexual abuse?
9. If not, why?
10. If yes, is there a timescale involved in developing appropriate skills to protect the child(ren)?
11. Are there any relationship issues to be resolved following the disclosure of the sexual abuse?
12. If the adult has care of the children, will he or she be able to manage any contact arrangements in ways which will safeguard and promote the welfare of the child(ren)?

## **The Non-Abusing Adult**

### **Assessment Checklist for Presentation and Behaviour**

1. How did the person present during the assessment?
2. Which sessions, if any, were difficult?
3. What was the level of co-operation?
4. Was the co-operation different from that seen in other assessments? If so, why?
5. Were any special arrangements needed for example interpreter, supporter, etc?
6. What level of competence does he or she have? Comments should be confined to known assessments by professionals, for example psychiatrists or psychologists.
7. How was account taken of levels of competence, for example the use of limited language in the case of a person with learning difficulty or the use of specific assessment material?
8. How was the adult's mood: good, poor, low, variable?
9. Was the person's mood consistent or did particular sessions have an impact on mood?
10. What was the person's overall presentation? Within what range of behaviour was the person usually seen? Was the person passive, submissive, assertive, dominant, hostile, aggressive and what does this mean in terms of:
  - Their general behaviour
  - Their relationship ability and capacity
  - Their child care abilities, including child protection?
11. Did the person respond with different behaviour in different situations, and what does this mean in terms of:
  - Their ability to manage
  - Their relationship ability and capacity
  - Their child care ability and capacity
12. Did the person respond with different behaviour when relating or responding to different people and what does this mean in terms of:
  - Their ability to manage
  - Their relationship ability and capacity
  - Their child care ability and capacity
13. Within the range of overall presentation, what other aspects of behaviour were evident and what is the effect of this?
14. Is anything known about the person's mental health?
15. Is anything known about the person through psychological assessment?
16. Is there any other expert opinion about the person?
17. Is there any significant medical information about the person which has an impact on the person's life?

18. Do drugs, alcohol or solvent abuse have a significant impact on the person's life?
19. If drugs, alcohol or solvents are an issue, how and under what circumstances are they used? For example are they a part of normal life or are they used in response to stress?
20. Do they act as a disinhibitor to behaviour?
21. Do drugs, alcohol or solvents lead to angry or violent behaviour?
22. Are there any significant issues of anger or violence?
23. At what level is the person's self-esteem?
24. What information comes from the checklists which have been completed?
25. How well does the person manage within the community? Are particular strategies used and how successful are these?
26. Describe the person's social network
27. Describe the person's network of personal, interpersonal, and social arrangements.
28. Does the person require external support systems to sustain them in the community?
29. Are the person's current social, personal and interpersonal arrangements likely to continue? If so, why?
30. What is the significant behaviour of the person and how does this impact on their ability to function?
31. Describe any negative or positive indicators which would impact on the ability to safeguard and promote the welfare of children.

## **The Non-Abusing Adult**

### **Assessment of the relationship between the abusing adult and the non-abusing adult and the relationship between the adult and other significant adults**

1. Describe the relationship?
2. What are the positive elements of the relationship?
3. What elements of the relationship present a risk to children?
4. What elements of the relationship present a sexual abuse risk to the children?
5. Which adult is dominant within the relationship?
6. If so, is that to an extent that safe care systems can be put in place?
7. If the abusing parent is dominant within the relationship, what is the extent of risk which that poses to the children?
8. Is the relationship capable of change?
9. What is the extent of relationship change which will be required in order to ensure the ongoing sexual health of the child(ren)?
10. If the adults are required to live part will the non-abusing adult be able to facilitate and appropriately supervise any contact which is envisaged?

## **The Non-Abusing Adult**

### **Assessment of the information re the concept of children**

1. What is the adult's general view of children?
2. Are particular children favoured?
3. Are particular children less well favoured?
4. Are particular children targeted?
5. Evaluate the relationship
6. Was any empathy towards the children evident?
7. Evaluate the relationship between the adult and the child(ren) who were sexually abused.
8. How does the adult manage the behaviour of the child(ren) of the "family" and the child who was sexually abused?
9. Are there any child protection concerns other than the sexual abuse?

## **The Non-Abusing Adult**

### **Checklist for Ability To Protect**

1. What would you do if you saw anyone sexually abusing a child?
2. What would you do if you thought someone was sexually abusing a child?
3. What would you do if one of your children disclosed sexual abuse to you?
4. Do you think you are able to protect your children from sexual abuse?
5. Do you know how adults target children for sexual abuse?
6. Do you know what "grooming" is?
7. Do your children know what to do if anyone behaves inappropriately with them?
8. Would you like to know more about how to protect your children?
9. Would you like any help to enable you to protect your children from sexual abuse?

## **The Non-Abusing Adult**

### **Checklist addressing issues for "the future"**

1. What would you like to happen now?
2. Do you believe that your partner presents a risk to children?
3. Do you believe anyone else presents a risk to children?
4. Do you think you understand those risks?
5. Do you think you can manage those risks?
6. If yes, how would you do that?
7. Do you feel you will need support or manage any risks?
8. If yes, what support do you think you will need?
9. Will you receive support from any family and / or friends?
10. If yes, what will that support be?
11. What will you do if professionals believe you should separate from your partner?
12. What will you do if professionals believe it is not safe to return the children to your care even if you say you will separate from your partner?
13. What would you like to be happening in your life in one, three, five and ten years' time?

## **The Non-Abusing Adult**

### **Assessment Checklist for Presentation and Behaviour**

1. Describe the overall arrangements of childhood care. For example was the person brought up exclusively by parents, were the arrangements varied, were there any episodes in care?
2. What was the person's perception of each parent?
3. What was the relationship with each parent?
4. What was the relationship with any significant others?
5. What are relationships like now?
6. What relationship did the person have with siblings?
7. What is that relationship like now?
8. What is the evidence of good care, love, appropriate affection, nurturing or other positive emotional experiences?
9. What is the evidence of rejection, isolation, loneliness, abandonment, or any other negative experiences?
10. What was the likely level of attachment?
11. Are there any childhood experiences which are likely to have caused significant harm or which indicated unsafe care?
12. Describe the relationship between his or her parents.
13. Were any parenting strategies abusive?
14. Were the behaviour management strategies positive or negative?
15. If the child was physically, emotionally, or sexually abused in childhood, how has that affected them?
16. If the child was abused has any form of help been offered?
17. If so, what is the consequence of that help?
18. Are the person's childhood experiences positive or negative?
19. How has the person internalised those experiences? For example, being hit as a child may lead to the use of similar systems or a determination not to hit children.
20. Do the person's childhood experiences have a significant impact on current behaviour?
21. Are there any unresolved issues from childhood which have an impact on the person's emotional wellbeing, ability to function or ability as a parent?
22. Are the person's perceptions of childhood realistic? If not, how does this impact on their view of parenting?
23. What have been the person's experiences in adult life?
24. Have any child protection concerns been raised in respect of their care of children?
25. If so does this influence the issue of child sexual abuse?
26. Describe their level of competence in adult life?



## **The Non-Abusing Adult**

### **Checklist for Assessing the risk presented by the abusing adult**

1. Are the adult's concepts and belief systems identified as those which promote the sexual abuse of children or do they have indicate "safe" thinking of belief systems?
2. Give examples as evidence of your opinion.
3. Has the adult created a family / environment / involvement which enables sexual abuse to occur or where safe care can take place?
4. Give examples as evidence of your opinion.
5. Are there any static factors which indicate risks are evident?
6. Are there any dynamic risk factors evident?
7. What positive steps has the abusing adult taken to minimise the risk they present?
8. Are these steps consolidated and will they stand the test of time?
9. What is your view about these steps?
10. Are they sufficient to develop a safe caring environment for the child(ren)?
11. To what extent is the adult denying or minimising the abuse.
12. Identify the type of denial and minimisation being used.
13. Are you able to identify the cycle of abuse?
14. If so, describe it.
15. Are you able to identify the grooming process?
16. If so, describe it.