

## Sexual Abuse

Main points from Scottish Government Guidance, 2021

### [National guidance for child protection in Scotland 2021](#)

4.164 **Definition.** Child sexual abuse (CSA) is an act that involves a child under 16 years of age in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening.

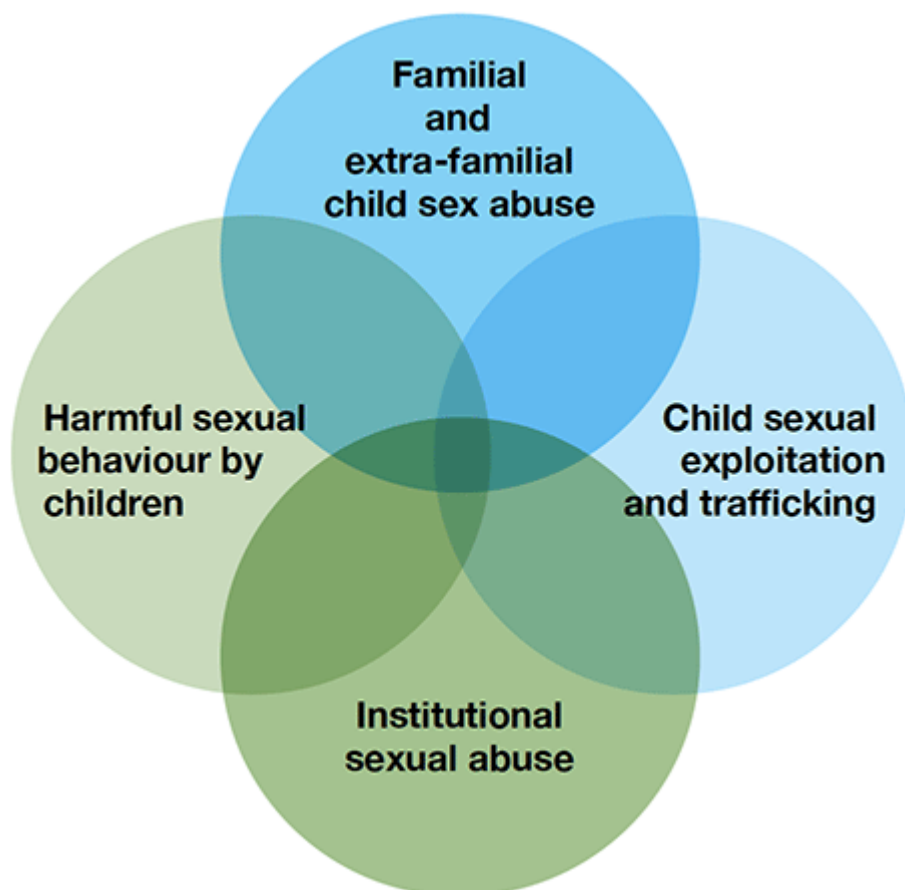
4.165 For those who may be victims of sexual offences aged 16-17 and who are at risk of significant harm, child protection procedures should be considered, and must be applied when there is concern about sexual exploitation or trafficking.

4.166 Article 19 of the UNCRC sets out requirements on public authorities to take appropriate protective measures. These include appropriate legislative, administrative, social and educational measures to protect the child from sexual abuse; support for the child and for those who have the care of the child; as well as forms of prevention, identification, reporting, referral, investigation, treatment and follow-up.

4.167 **Sexual abuse may involve** physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, indecent images, or in watching sexual activities, using sexual language towards a child, or encouraging children to behave in sexually inappropriate ways. Children who experience sexual abuse may experience multiple forms of abuse and neglect within and beyond the family.

4.168 **Overlapping categories of sexual abuse** are represented in the diagram below. All require a child protection response. A child may experience multiple forms of maltreatment from different persons. Exposure to other forms of harm, such as domestic abuse or parental alcohol and drug use, may increase vulnerability to sexual abuse.

Figure 4: Intersecting forms of sexual abuse (Barnardo's)



4.169 **Children rarely come forward to disclose sexual abuse**, especially when it occurs within the family network. Identification of sexually abused children by child protection systems in Scotland and the UK remains very low ([NSPCC](#), 2021). This makes it critical that professionals and the public are aware of potential signs of child sexual abuse. This includes recognising indications of abusive relationships between an adult and a child, or between two children. Sexual abuse in the family may be perpetrated by a family member (including a member of the extended family) or by a person close to, or known to, the family, such as a neighbour, family friend, partner of a parent, or another trusted adult. Children under the age of 18 may also sexually abuse others within the family (as indicated below).

4.170 **Abuse of power and trust**, secrecy, trauma, a realistic or an imagined fear of the consequences, may all paralyse the ability of many victims to speak out, or cause subsequent retraction. Some children may be unable to seek help because of their age, understanding or disabilities. There may be under-reporting in some communities if dynamics such as obedience to paternal authority, shame and family honour act as isolating factors. It is common for survivors not to talk about the process of abuse until adulthood and when a child or adult feels able to speak, this is rarely a single event. For some,

feelings of fear and shame are a permanent block to sharing, even if the abuse happened a long time ago.

**4.171 The person that may first hear, realise or suspect** that a child is being abused may be a non-abusing parent, sibling, friend, carer or keyworker. This could be at an unexpected moment, in a moment of high stress, or in a moment of sufficient safety. Third Sector organisations may be crucial intermediaries and sources of support. The response of those to whom a child signals alarm may determine what the child then shares. Sometimes children try to tell or signal their anxiety and this is not heard. Some 'telling' happens indirectly through presentation, and sometimes the telling happens gradually.

**4.172 What a child needs** when trying to share or signal an abusive experience for the first time is likely to depend on age, understanding and context. It may depend on whether the child is in a state of crisis or acute fear, or whether it has become possible at that moment because the intuitive or learned sense of safety with the other person provides enough containment to allow painful experience to be shared.

**4.173 Most children need to know they have been heard** and that how they feel has been recognised by someone who has remained quiet and calm and has not suggested details or judged actions. Sometimes this may include hearing confused feelings about the abuser. In most situations the child will need to know that the listener cares for them and will help to keep them safe, but cannot keep secrets that are harmful to the child (or to others), and will have to talk to someone else about how best to help. The person first hearing or recognising the abuse can help by keeping the door open for the child to talk further. The child may need support in getting through the rest of the day or night and then over time as feelings of fear and exposure can rise. They may need to feel they are not alone, that there are people who will listen and help, and that there are also people who do not need to know.

**4.174 Indicators of abuse** of a child may be physical, behavioural, social or psychosomatic. For example, they could include a combination of: concerning changes in behaviour at home or in school; avoidance of an adult; sexually inappropriate behaviour; health anxieties such as soreness in the genital and anal areas; sexually transmitted infections; pregnancy; and other indirect signals of anxiety. These may include feelings of isolation, stigma and difficulty in trusting others; sexualised behaviour, low self-esteem, withdrawal, aggression and disruptive behaviours; self-destructive behaviours and/or substance abuse. None of these examples are in themselves signs of sexual

abuse. All necessitate professional curiosity about what lies behind these symptoms.

4.175 **Contextual considerations.** Practitioners involved in assessment, planning and intervention should consider the dimensions of risk and safety/protection 'online', in the family, and in the community. There may be a concentration of risk in specific locations.

## [National guidance for child protection in Scotland 2021](#)