



Child sexual abuse: Improving our identification and response

Natasha Sabin

25 June 2025

The CSA Centre

We are the Centre of expertise on child sexual abuse (CSA Centre). We want children to be able to live **free from the threat and harm of sexual abuse**.

Our aim is to reduce the impact of child sexual abuse through improved prevention and better response.

We are a **multi-disciplinary team** that works closely with key partners from academic institutions, local authorities, health, education, police and the voluntary sector



Looking after yourself

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**.

It is 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

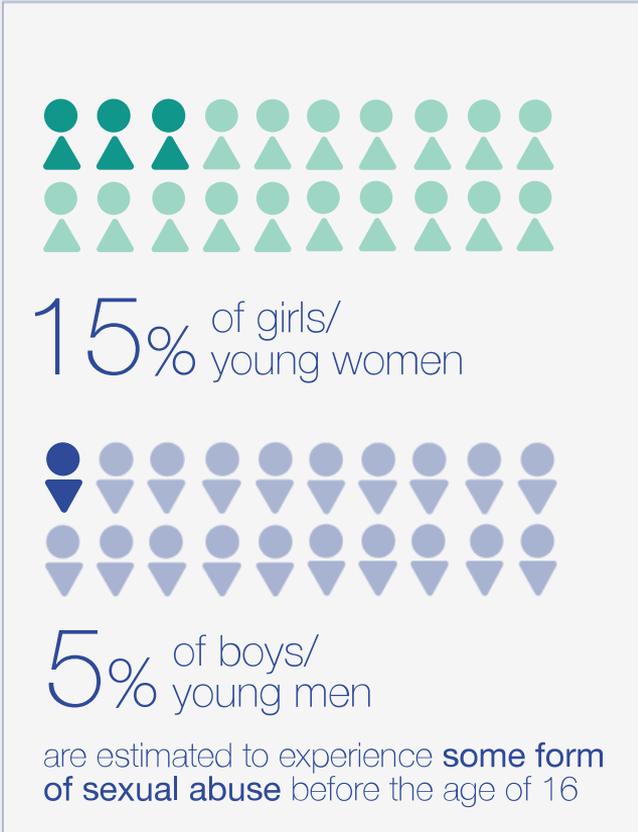
Setting the scene

“I don’t know why it started and I don’t know why it stopped...I still don’t know really, no one ever spoke with me about it”.

(Survivor, aged 41)

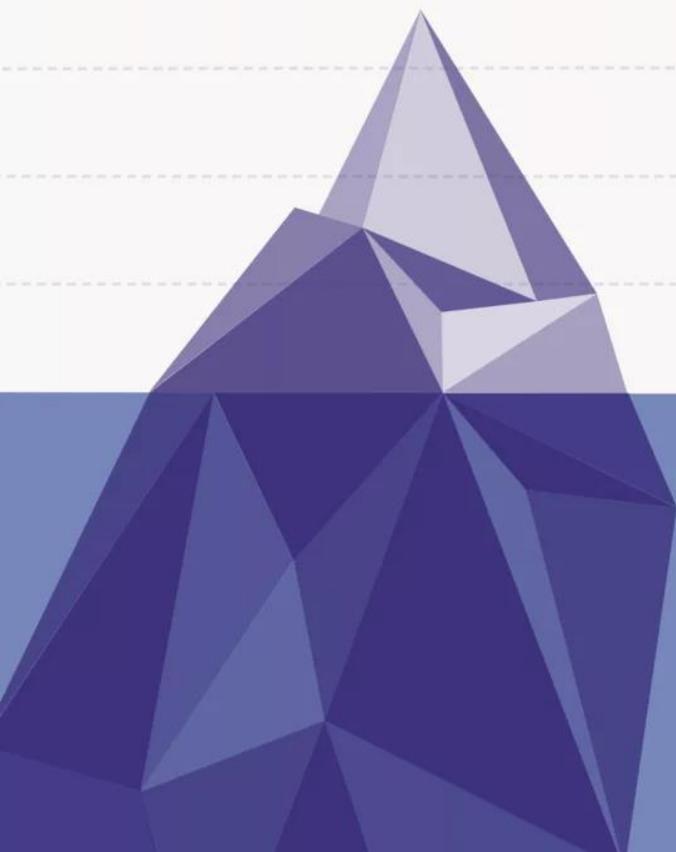


More than one in ten children ...has been sexually abused by the age of 16



Far more children are sexually abused than services identify

Child sexual abuse in 2023/24: Trends in official data
csacentre.org.uk

An iceberg graphic where the tip is above the water line and the much larger base is submerged. The water line is represented by a horizontal dashed line. The numbers and descriptions are placed to the right of the iceberg, with horizontal dashed lines extending from the water level to the text.

2,200 children on a child protection plan due to child sexual abuse (England)

10,500 children seen by sexual assault referral centres (England and Wales)

45,000 children assessed at risk of sexual abuse* (England)

101,000 child sexual abuse offences recorded by the police (England and Wales)

500,000

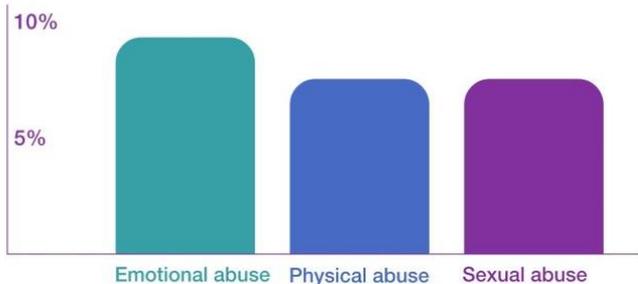
children are estimated to be sexually abused every year**

Sources: Home Office, Police recorded crime and outcomes, 2023/24; Department for Education, Characteristics of Children in Need, 2023/24; NHS England 2025. *Includes assessments recording concerns of child sexual abuse and exploitation. ** Estimate calculated using single-year prevalence estimated by age group (Radford et al. 2011, Childhood abuse and neglect in the UK today) and the Office for National Statistics mid-year population estimates, 2023. Please note: numbers are rounded to the nearest hundred/thousand.

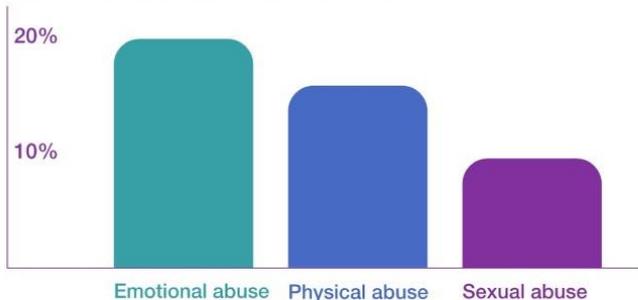
Sexual abuse is just as common as other forms of childhood abuse

But concerns of sexual abuse are far less likely to be identified and named

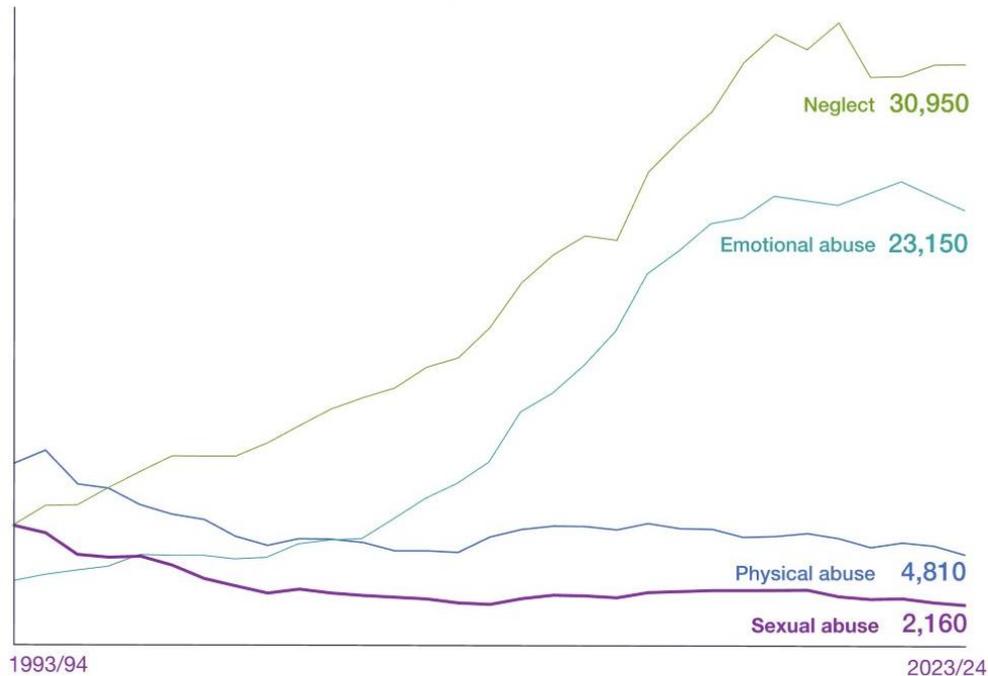
Similar levels of child abuse are identified in surveys



...but lower levels of child sexual abuse are identified in child in need assessments



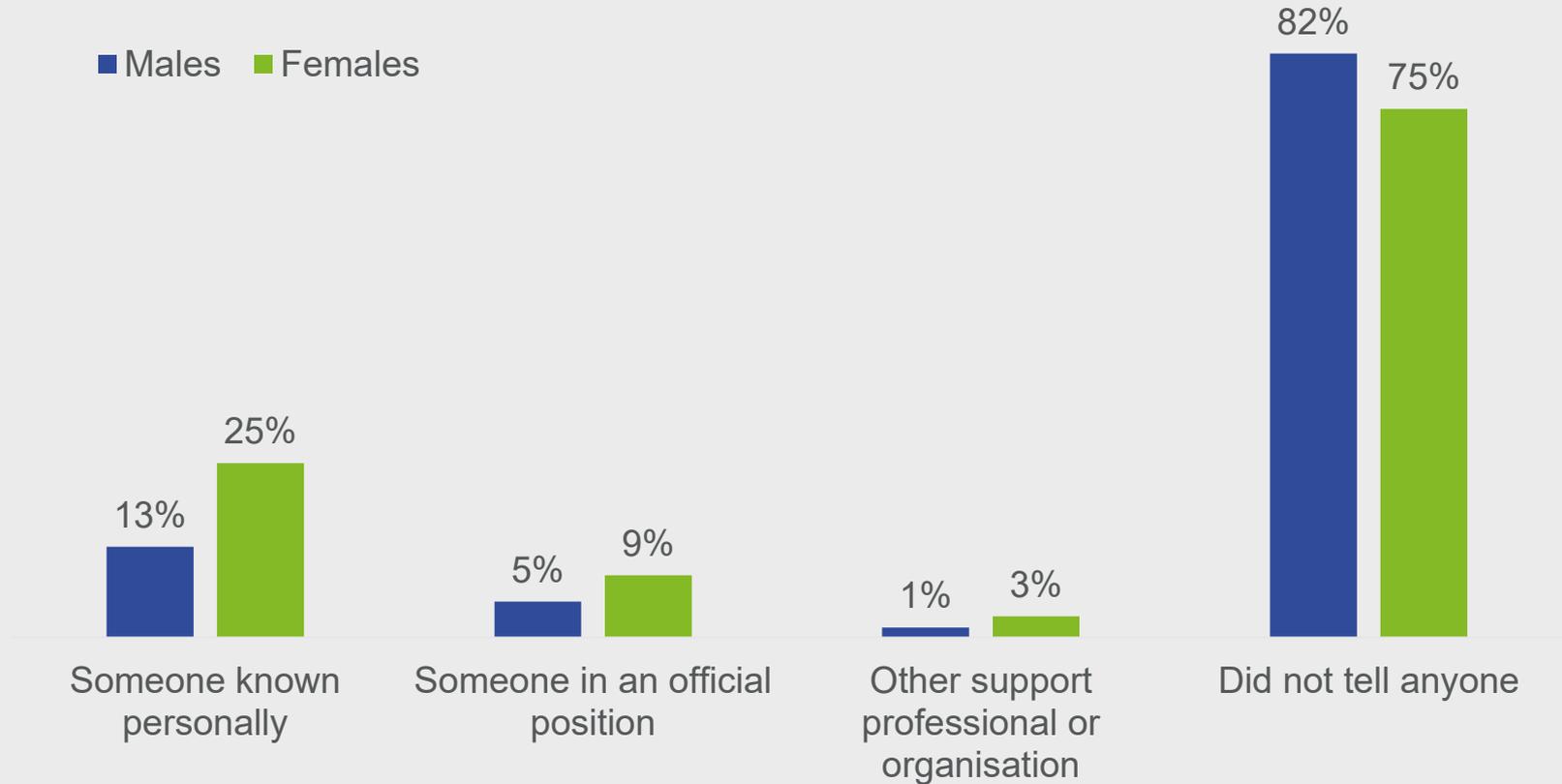
Number of child protection plans by form of abuse



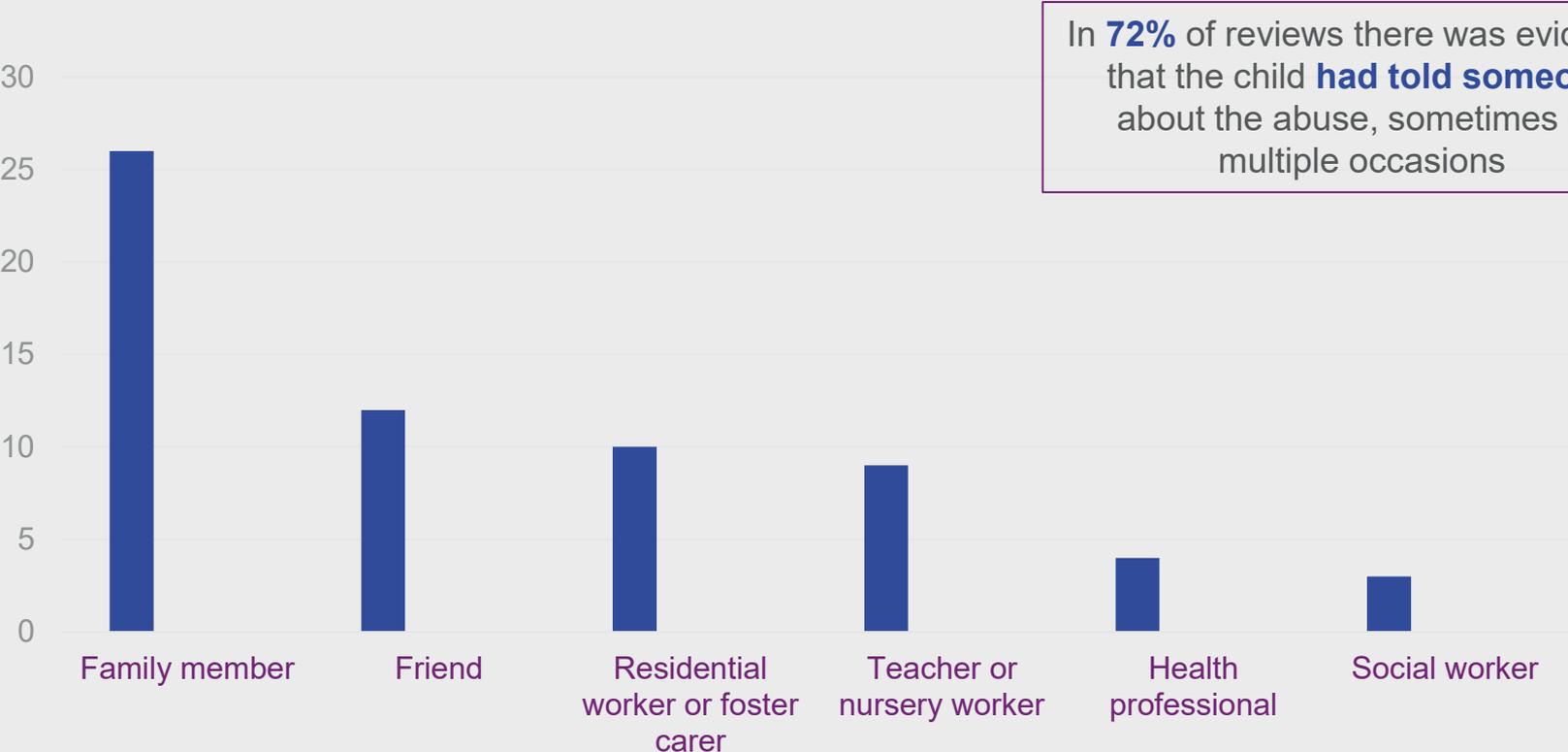
Who was told at the time

Rape or penetrative abuse

■ Males ■ Females



Who children told



In **72%** of reviews there was evidence that the child **had told someone** about the abuse, sometimes on multiple occasions

Vulnerabilities in the child's environment

Factors which increase the opportunities for abuse to occur. Including:

- Children who live in conditions of neglect are **five times more likely** to be sexually abused than those with no experience of neglect.
- Children who spend time in residential care are **four times more likely** to be (or have been) sexually abused than those who live only in a family home.
- Disabled children are **at least twice as likely** as non-disabled children to be targeted by abusers.



Vulnerabilities in the child's environment



Factors which increase the pressure on families and can undermine their ability to protect children. Including:

- Children who live in a household with someone misusing alcohol or drugs are **three times more likely** to be sexually abused than children not exposed to parental substance misuse.
- **Over a half of children** who are sexually abused also experience other forms of child abuse, most frequently emotional abuse or witnessing domestic abuse.

“Professionals rely too heavily on children to verbally disclose”

(Report into Child Sexual Abuse in the Family Environment, JTAI 2020)

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

“The current statutory child protection approach to responding to concerns that a child is being sexually abused puts **too much responsibility** on children and young people to recognise the abuse they are experiencing and then to seek a trusted adult to talk about what is happening to them”.

“This is a heavy, and frankly unrealistic responsibility. Children cannot and should not be the only witnesses to the harm they experience; it is the responsibility of the adults around the child to respond to help-seeking behaviour and to safeguard them”.



The impact of child sexual abuse

The traumatic impact

Betrayal

Traumatic sexualisation

Confusion

Stigmatisation

Powerlessness

Secrecy

How does the impact present in children?

Fear

- They may be scared of the person who has harmed them and be reluctant to see them
- Fear of others
- Lonely and isolated - wary that people will find out about the abuse and reject them

Anxiety

- May feel anxious about the abuse and been threatened by the abuser
- Can manifest as worries about going to school, friendships, being alone, difficulties sleeping

Low mood

- May become quiet and withdraw from friendships, appear sad or reluctant to talk
- Non-organic symptoms (e.g. tummy pain or headaches)
- Immune system may be affected

How does the impact present in children?

Difficulty regulating emotions

- Struggle to regulate
- Appearing more irritable, hostile, impatient or angry towards peers or adults

Confusion with roles

- May oscillate between appearing 'grown up' and wanting to look after others...and...
- Appearing more 'child like' in their inability to complete tasks

Sexual pre-occupation/discomfort or confusion about their body

- May display sexualised behaviour outside of their developmental stage, or unexpected sexual knowledge
- May be preoccupied with sexuality, engage in repetitive sexual behaviour, masturbating or being fascinated with body parts
- Puberty particularly challenging time

How does the impact present in children?

Grief

- If abuse by someone the child loves or likes, they may experience a grief reaction in relation to loss of trust
- Can also include anticipatory grief

Disrupted relationships with others

- May be less trusting of others
- Or, they may not want to separate from others and may appear dependent on adults around them

Becoming abusive to others

- May wish to have control over others in response to feeling a loss of control in their own lives
- May manifest as bullying

Signs and indicators

The evidence:

Sexual abuse is rarely 'clear cut'

How can we 'absolutely know' abuse has taken place?

- Clear disclosure...repeated at least twice
- Medical evidence of sexual harm
- Admission of guilt from perpetrator
- Witnessed by someone else
- Images/computer records of the abuse exist

Rarely will be reach a position of 'absolute knowing'



Building a picture of concerns





**Centre of
expertise**
on child
sexual abuse

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

Avoid assumptions

Especially those based upon:



Gender



Ethnicity



Religion



Disability



Sexuality

Our role in communicating with children when we have concerns

Key messages

- ✓ Child sexual abuse thrives in secrecy and silence. You can actively work to break the silence, by talking about sexual abuse – if you don't, you are colluding unintentionally with those who rely on it remaining secret.
- ✓ Anyone who works with children and families has the skills to communicate with children about sexual abuse – so have confidence that you can do so. If not you, then who?
- ✓ If you are worried about a child, there is far more that you can say to them than you should avoid saying, even when a criminal investigation is under way. Supporting the child's welfare is always the primary consideration.
- ✓ If you listen to children – however they are communicating – and you are authentic and honest in your responses, it is very unlikely that you will get it wrong.
- ✓ While you may worry about 'opening a can of worms', asking about what has happened and how you can help is very unlikely to make things worse.
- ✓ All children can communicate, and it is our job to support them to do this in whichever way works for them.
- ✓ To give a child the best opportunity to communicate with you, it's essential for you to find out about and adapt to their individual communication style, rather than expecting them to adapt to your style.

“I wanted them all to notice”

Recommendation 5: Talking to children

Government should ensure that practitioners understand that **they can and should talk directly to children**, and families, about concerns of sexual abuse.

What makes communicating about sexual abuse difficult for us?



What makes it difficult for children to tell?

Why is it hard for children to tell?



Lacking language



Don't recognise it as abuse



Shame or embarrassment



Threat or manipulation



Fear of the consequences



Feeling responsible

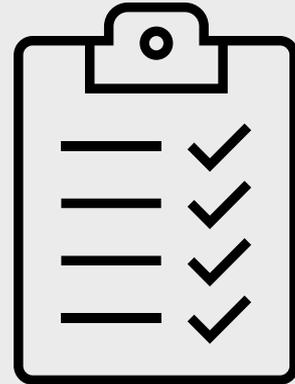
How do we respond and what can we do?

Child concern

- Lacking language - age and culture
- Don't recognise it as abuse
- Shame or embarrassment
- Threat or manipulation
- Fear of the consequences
- Feeling responsible
- Institutions and racism – expectations
- Feeling like you are letting your community down – but also afraid you will not be heard



Professional action



Understanding how children communicate about sexual abuse

“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’?”

Making Noise. Female, aged 18

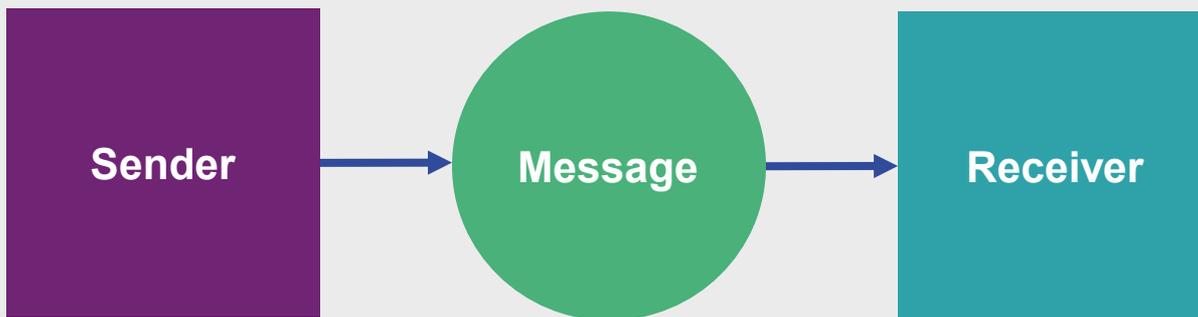
Giving children the confidence to talk to you

It is a very powerful motivator for young people to talk about their experiences of abuse if an adult takes notice of their struggles and asks them.

“When someone noticed the signs and impact of abuse and asked about it”

Children need help to tell

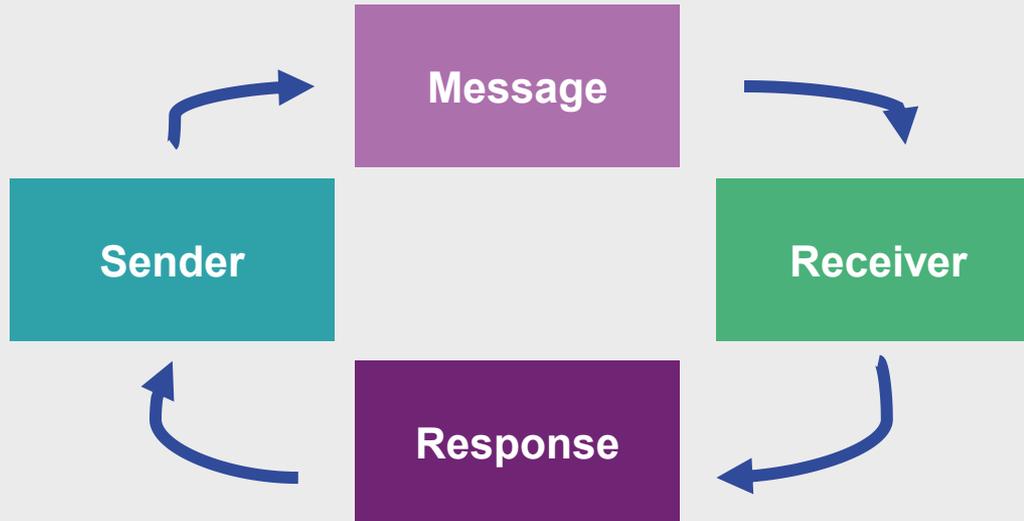
We think about disclosure as the act of a child telling someone (as a one-way process.)



This one directional view does not recognize the relational and social-interactive context of disclosures.

Dialogical nature of disclosure

Instead, disclosure develops through an interplay between children's signs and expressions and the reactions of the adults around them.



Children receive information on how adults respond to them, they process and evaluate this information, and they base their reactions on this.



Improving children's experiences of talking to us

Children say that their experience of talking to someone about sexual abuse was positive when:

- ✓ They were believed
- ✓ Action was taken to protect them
- ✓ Emotional support was provided



Giving the child the confidence, and opportunity, to communicate with you

Opening a door

- Comment rather than interpret – **“I notice you crying”**
- Open a door – **“I am here”**
- Be aware of your body language
- Give the child time **“I’m going to come and see you again next week and we can talk a bit more about this if you would like to”**
- Use resources - **“I’m going to show you an online resource so that if there is something that is worrying you, you can work out how to get some help”**
- Give them an alternative - Suggest a third person example and talk about that person. **E.g. If you had a friend who was experiencing something difficult, what do you think would stop them telling? Or help them tell?**

And.....

Let the child know what will happen if they tell

“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)



Taking a graduated approach

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

“I have noticed you crying”

“I notice you are very quiet at the moment”

“Help me understand”

“Can you tell me more about that”

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

‘Sometimes we worry about what may happen if we tell someone what is going on (e.g. that we’ll get into trouble/that we’ve been told to keep it a secret/that we’ll upset people) – can you tell me what you are worried may happen if you tell someone what is going on?’

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

Responding to children

“Tell me more about that...”

“Can you tell me...”

“I hear you telling me...”

“Talk to me about...”

“Help me understand”

Responding to children when they tell us about sexual abuse

Asking specific questions

To ensure the child's safety, you may need to ask them specific questions, particularly questions beginning with '**who**', '**what**', '**where**' and '**when**':

Typical questions might be

- "**Who** will be at home when you go home later?"
- "**What** else happened?"
- Can you tell me **where** they touched you?"
- "Tell me **when** that last happened."

If the child has told you they have been hurt by someone but hasn't given you enough detail to know who the person is, you may ask, "**Can you tell me who that is?**"

Continuum of question types

General invitations	Cued invitations	Open ended questions	Closed ended questions	Option posing questions	Suggestively worded questions
Open questions inviting the child to tell in their own words unprompted, encouraging longer answers	Open questions using a cue from the child or undisputed facts	Who', 'what', 'when', 'where', 'how' questions which invite a narrative	'Who', 'what', 'when', 'where', 'how' questions which can be answered in one word or a few words	Questions that can be answered "yes" or "no", or that prompt the child to select from given choices	Questions that force the response in a specific direction, or use false or unknown information

Avoiding the 'why' question



Questions beginning with 'why' should be avoided as they can sound blaming to the child and can be interpreted as accusatory

If you want to understand more about the reasons for a child's fear of going home, for example, ask instead: **"What is it you are afraid will happen if you go home?"**

Next steps

Ask the child what they hope, or fear will happen next: This will enable you to address these expectations.

You may not be able to fulfil the child's wishes, and you must be honest about that, but this should not stop you from asking. Some questions that may be useful are:

- “What is it like for us to talk about this?”
- “Is there anything else you are worried about?”
- “Is there anything making you feel unsafe at the moment?”
- “How can I help you feel safe?”
- “Is there anyone else you are worried about?”

It is important that you then tell the child what you are going to do next and explain the process to them as much as you are able.

“The stigma of sexual abuse and trauma of disclosure should never be underestimated and the damage caused to children when they are not believed is immeasurable.”

Taskforce (March 2010)

Checking in on the child's welfare

Whatever context the child is in, we should always maintain a focus on their wellbeing

“How are you?”

“How are you feeling?”

“How are you sleeping?”

“How are you eating?”

“Is there anything I can do to help?”

“Is there anything you need?”

“Would you like to talk to someone about how you are feeling?”

What about family relationships?

Friendships?

Guide in the child sexual abuse response pathway



Key messages on pre-trial therapy

- ✓ Therapists and victims are encouraged to jointly agree on what type of therapy is best and when is the right time for such therapy. Neither the police nor the CPS may decide this.
- ✓ If a victim decides therapy would be helpful for them, it should not be delayed for any reason connected with a criminal investigation or prosecution.
- ✓ The CPS guidance explores the benefits of therapy for victims engaging in the criminal justice process.
- ✓ Certain therapeutic approaches are not recommended due to the impact they may have on criminal proceedings.
- ✓ Therapy notes can be requested by the police or prosecution if justification is given that they form part of a reasonable line of enquiry and with the consent of the victim (or their parent/carer).
- ✓ Therapists, investigators and prosecutors must comply with data protection legislation when processing therapy notes.
- ✓ Only in exceptional circumstances can a court order the release of notes against the wishes of the victim (or their parent/carer).

Taken from the Bluestar project

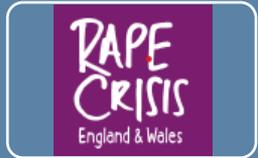
If you are affected by anything discussed today...



The Survivors Trust - Helpline: 08088 010 818

Find help, support and advice in your area:

<https://www.thesurvivorstrust.org/>



Rape Crisis helpline 0808 500 2222 (24 hours)

www.rapecrisis.org.uk



**National Association for People Abused in Childhood
0808 801 0331**

<https://napac.org.uk/>



SurvivorsUK

Online help for male survivors of sexual abuse and rape.

<https://www.survivorsuk.org/>

Centre of expertise
on child sexual abuse

Stop It Now Helpline

If you are worried about your own thoughts or behaviours or are worried about the behaviours of someone around you, you can contact the **Stop It Now Helpline** for **free, confidential advice:**

0808 1000 900

Thank you!

For more information please contact:

info@csacentre.org.uk



Centre of expertise
on child sexual abuse

Tanners Lane
Barkingside, Ilford
Essex IG6 1QG



@CSACentre

info@csacentre.org.uk

csacentre.org.uk

25 June 2025