



child sexual assault





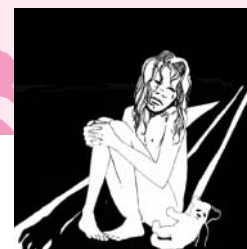
child sexual assault

what is **child sexual assault**?

Child sexual assault is a form of child abuse that occurs when any person – adult, adolescent, or older child – uses their power and authority over a child to involve them in any sexual activity. Such contact and non-contact activities can include:

- Voyeurism, where the offender:
 - perverts on children
 - makes children undress or performs sexual acts on other children while they watch
- Exhibitionism/Exposure, where the offender:
 - exposes their naked body, genitals or anus to the child
 - masturbates or perform sexual acts on other children or adults in view of children
- Verbal or obscene comments/remarks, where the offender:
 - uses verbal comments to trick, threaten or sexualise the child, eg, 'If you tell anyone I will kill you'; 'You know you really enjoy this'; 'I am doing this to you because I love you'.
 - uses sexually intrusive questions or comments, obscene calls/remarks, notes, and use of computer or messaging systems
- Physical acts, where offenders may involve children in a range of acts:
 - kissing or holding in a sexual manner
 - fondling (genitals of child or getting the child to fondle the offender's genitals)
 - masturbation (with child as either observer or participant)
 - penetration of the anus and/or vagina with penis or finger
 - oral sex (fellatio or cunnilingus)
- Pornography and Prostitution, where the offender:
 - exposes child to pornography
 - uses the child for pornography or prostitution
 - photographs the child for sexual activity
- Use of objects and animals, where the offender:
 - may penetrate the vagina or anus with object(s)
 - involves the child in acts of bestiality.

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Other terms for child sexual assault include child sexual abuse, child sexual victimisation, child exploitation, child sexual misuse, child molestation, child sexual maltreatment, and child rape.

Adults or adolescents who perpetrate child sexual assault exploit the trust, dependency and immaturity of children. The offender abuses the power they have over the child to coerce them into sexual activity for their own sexual gratification. Coercion, which may be physical, psychological or both, is intrinsic in child sexual assault and differentiates it from consenting in activity.

Children always have less power than adults. The closer the relationship between the child and the adult, the greater the dependency and therefore the greater the power.

ALONE YOU FEEL

Alone you feel in all your pain
Well alone no more
That pain's been a visitor at my door
Once this could happen to me
After too many times a guilt travelled with thee
It's not something that goes away in a hurry
And the confusion don't stop just with your sorry

To all of you who have been where I've been
Who have suffered in silence and in our dreams
Take light, love and understanding
And be proud of where you have walked
And that you are here, you are here still left standing

If you take that hate
It will take you six feet under the ground
If you take that hate it will take you six feet under the ground

Alone you feel in all your pain,
Well alone no more
That pain's been a visitor at my door
Cause we have walked to hell and back
And the comfort comes
When we can smile at our own tracks

Lyrics (and Music) by Jacinta Tobin





child sexual assault

important facts about child sexual assault

- Child sexual assault is a crime.
- Child sexual assault happens in all cultures and occurs in all types of families, regardless of education or income or level.
- Children of all ages — from babies to adolescents — may be sexually assaulted.
- Children may be sexually assaulted by a family member (incest), by acquaintances or by strangers. However, children are most likely to be sexually abused by someone who is known to them, such as a father, stepfather, uncle, older sibling, grandparent, friend of the family or neighbour.
- Child sexual assault is an abuse of the child's trust.
- Sexual abuse happens to girls and boys. 1 in 4 girls and 1 in 9 boys will be sexually abused before they reach the age of 18.
- Sexual assault is never the child's or young person's fault. The perpetrator is always responsible for the abuse.
- Children lack the necessary information and maturity to make an informed decision about sexual activities with an older person. They do not have adult knowledge of sex and sexual relationships, or a grasp of the social meaning of sexuality and its potential consequences.
- Sexual activity between a child and an older person is inappropriate because children are never in a position to give informed consent to such activities.
- Child sex offenders come from all walks of life. They are everyday people who have families, jobs and may be respected members of our community. Rarely is there anything noticeably 'odd' or different about them.
- Over 90% of child sexual offenders are male.
- Most perpetrators commit their first child sex offence during adolescence and continue until they are caught. While it is true that most sex offenders are men, it is inaccurate to characterise them as 'old'.
- Child sexual assault may occur once, or many times over a period of months or years.
- Because the offender is usually someone the child knows, the contact with the child may be frequent. For this reason it is more common for sexual assault to be repeated.
- ECPAT reports, it is rare for a sexual offence to be a one-off occurrence. Generally sex offenders who are caught are prosecuted for fewer abuses than they have committed.

child sexual assault



- Without assessment and appropriate intervention, adolescent males who sexually abuse younger children are likely to continue to do so into adulthood.
- Although the majority of child sexual assault offenders are male, women are also known to sexually abuse children.
- Children don't usually lie about sexual abuse
- Offenders use all sorts of ways and means to make the children do what they want and to also to remain silent about it. Not to talk to anyone
- According to ECPAT "... most stories about child sexual assault never becomes public. As many as 95% of child sex offenders do not have criminal convictions for their crimes. On best estimates, only about 10% of offenders are prosecuted and only half of that 10% are convicted.
- Every child reacts differently to sexual assault.
- Child sexual assault is difficult to do anything about because of the secrecy that surrounds the crime but only by the offender and the child/ren but bt others around who also may be aware of it and does not say anything fearing the consequences. This makes it very difficult to accurately measure the extent of child sexual abuse
- There has been growing concern about the evidence linking child sexual assault and higher rates of suicide in Aboriginal and Torres Strait Islander communities. The research is still in process
- When you believe children, support them and protect them from further sexual abuse they can recover from the impact of the abuse on them and their lives
- To be aware of the extent and nature of child sexual assault will assist those working with children to identify and help those who have been sexually abused



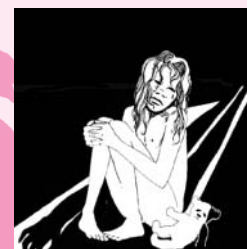
how does **child sexual assault** happen?

Child sexual assault is different to other forms of child abuse in that it is usually a premeditated act that often involves careful thinking and planning. Child sexual assault and rape often called “incest”, “child molesting”, “child abuse” or “child sexual assault”. “Child rape” includes all of the above terms and runs the full range from forced masturbation, the fondling of genitals, to anal, oral and vaginal rape.

Understanding how perpetrators work and the tactics they employ to abuse kids can help us to better understand why children (and other adults and family members) may appear to go along with the abuse and keep it a secret. It can also help to explain why offenders are often able to mobilise a lot of support in attempting to refute allegations against them. Forget the myth that offenders are ‘strange dirty old men’. There is no stereotypical offender in this form of abuse. Offenders work hard to control other’s knowledge of the offence, can be infrequent offenders, can be paedophiles who are fixated on children as sexual objects and are prone to rationalise and minimise their abusive behaviour

- **MYTH** very few children are ever sexually assaulted
- **FACT** up to 30% of Australian female children are sexually assaulted sometime before the age of 15
- **MYTH** most children are sexually assaulted by strangers
- **FACT** less than 10% of children are sexually assaulted by strangers. About 70% are sexually assaulted by their fathers, uncles, grandfathers, or other relatives. The remaining 20% are sexually assaulted by men that they “know” such as neighbours, family, friends etc.
- **MYTH** most children are sexually assaulted in playgrounds, parks, toilets and out of way places
- **FACT** over 80% are sexually assaulted in either their own home, the offender’s home, or their mutual home
- **MYTH** men who sexually assault are psychopaths, low life’s and from lower dysfunctional circumstances
- **FACT** men who sexually assault children are “normal” men – most are married with children of their own, hold respectable jobs and are from all classes and backgrounds
- **MYTH** there is a social “taboo” against child sexual assault
- **FACT** the “taboo” seems to be on talking about child sexual assault. In fact the continued silence makes it easier for the child sexual assault to continue.

child sexual assault



“Child sex offenders begin young. A review of a child protection program in Australia has revealed that teenagers are responsible for a third of all sex offences against children. Among the 200 offenders referred to the Children’s Protection Society between 1994 and 1998, the average age at which they started to inflict sexual abuse was 12 years. The 5-year review of the Children’s Protection Society’s sexual abuse program, which treats victims and their offenders also showed that half of the perpetrators had been victims of sexual exploitation.”

The report also indicated that:

- 82 per cent of the sexual abuse victims were aged under 10 years
- the abuse continued for more than 2 years in 22 percent of the cases
- 60 per cent of the victims were female
- 99 per cent of the offenders were known to the victims

The Children’s Protection Society advise that it is crucial for offenders to begin treatment programs in their adolescent years to break the cycle of abuse.

“By 40 years of age, they may have more than 100 victims”. [ECPAT, 2001]

People’s opinions vary in terms of the best strategies to respond to perpetrators of sexual abuse. More will be learnt about why offenders sexually abuse children as more offenders are identified and treated.

The grooming process

The use of deliberate tactics by offenders to select child victims, to engage them in sexual activities and maintain the secrecy surrounding these acts is commonly referred to as the grooming process. This process involves the:

- identification/targeting of children
- the recruitment of children through the development and/or exploitation of a relationship of trust in order to engage the child in the abuse; and
- the maintenance of a secretive, increasingly abusive relationship.

Identification/targeting:

Research indicates that child sex offenders tend to target vulnerable or dependent children. Characteristics of children who may be at greater risk of victimisation include those who are:

- lonely, distressed
- unhappy, needy

AN EXPERIENCE

In one case, a child was abused at least every week in her bedroom for five years. She had her genitals fondled, was obliged to perform fellatio on her father and experience vaginal intercourse from the onset of abuse when she was seven years old.

This child was raped an estimated 200 times before she was thirteen years old. Her history of incest is not atypical.

“When I was seven it happened every day. He would touch me all over and kiss me passionately on my mouth and body. He was real nice and friendly. I felt rotten and dirty.

I was passive when he started doing it but tried to keep out of his way as much as possible. He would come into my bedroom every night and make me touch him. Occasionally he would threaten me not to tell anyone.

By the time I was thirteen, he was having intercourse with me every second night and morning. I was terrified that someone would find out. I felt so guilty.”



“There are many ways offenders persuade themselves that what they do is okay. They might persuade themselves that they are a teacher of sex. They might persuade themselves, as network paedophiles do, that they have a philosophical position that says that children should be allowed to have sex with adults. They persuade themselves that some children are different from others and it’s okay to do it to this child and not to another. There are all sorts of ways they kid themselves. But with all the adults and all the adolescents I’ve ever worked with, somewhere, on some level, they knew what they were doing and who they were doing it to.”

Tindmarsh, P. in ECPAT, 2001

child sexual assault

- trusting, innocent
- lacking in confidence, low self-esteem
- in care, who have disabilities and/or personal carers.
- small, weak

Or those who have:

- a physical disability
- a disadvantaged background
- poor language skills, communication difficulties
- a previous experience of abuse

Recruitment

There are a number of strategies sex offenders may use to engage a child including:

- **Trust**

The abuser establishes, develops and exploits a relationship of trust by spending time with the child, listening to them, building rapport, using flattery, relating to their needs, and appearing to be caring, supportive and understanding.

- **Favouritism**

The offender may treat the child as ‘special’, pay them special attention, give them privileges, compliments, gifts and money.

- **Isolation/alienation**

From friends, parent(s)/carer, siblings (eg, using notion of special privileges), peers. The offender may: constantly be around, control family interactions, undermine the confidence and authority of parent(s)/carer(s).

- **Secrecy**

At this stage the offender creates a foundation of secrecy that is intended to prepare and later maintain ‘safe’ circumstances for the offender to act out abuse. The approach may be subtle, eg, “Grownups wouldn’t understand our special love so we mustn’t tell, okay?” or the unsubtle use of threatening looks or body language to control what information is shared by the child with others.

- **Desensitisation/boundary violations**

The offender may progressively invade the privacy of the child and take advantage of being around at times when a child is bathing, dressing or

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changing clothes. Alternatively, the offender may undress, appear naked or go to the toilet in front of the child. Sex may be 'normalised' by open sexual talk and behaviour in front of the child, use of sexually explicit stories or jokes, leaving or using pornographic material in view of the child or holding up sex and rock stars as role models. The level of touching, kissing, hugging, snuggling or contact is increased.

- Evaluation

The offender evaluates if it is safe to progress the nature of abuse. Has the child been 'groomed' to a stage where they would respond favourably to more intimate sexual acts? They may use touching games to test the child's resistance, level of interest or weaknesses and simultaneously test the child's ability and willingness to keep the abusive behaviour secret.

Maintenance

The child sex offender relies on the child keeping the abuse secret. By now they have a better sense of the child's weaknesses and vulnerabilities. They have been careful to observe and study the child's behaviour and reactions in response to their own. They will make all sorts of gestures, statements, threats, promises and lies to the child to maintain the silence and prevent the victim from disclosing the acts. For example, to a very young child, the abuser may convey what is happening as their own very special secret. In the case of older children, the abuser may convince the child that they will be taken away or placed in a home, or that their mother will disown them or die if anyone found out. To a teenager the message may be that they are preparing them for marriage or teaching them about sex.

Over time there is a progression of measures, such as checking of risks and compliance of the victim, silencing protests, assuring the child of the 'rightness' of what is happening, convincing children they won't be hurt, conveying negative consequences of disclosure, conveying the illusion that he/she is free to choose, that the child has consented and they are in a 'relationship', and issuing bribes, threats, punishments and rewards.

Child abuse, including bullying, thrives on secrecy. Communicating openly and honestly with children will assist them to speak up when something is worrying them.

ECPAT, 2001



A FOURTEEN YEAR OLD SAYS ...

My stepfather has been having oral sex with me for three years.

It started when I was eleven years old. I am now fourteen.

I kept running away because I couldn't tell my family. I feared they wouldn't believe me.

When my mother went out he would make me have oral sex with him. I ran away and went to my Aunty's place and reported it from there. I spoke to the police and the Department for Community Welfare who arranged it for me to go and stay with my father who I had very little to do with before.

My mother went to court for custody and I am back home again, where no one believes me.

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Why don't children tell?

We have outlined previously how child-sex offenders manipulate their victims into a confused and false sense of reality. The grooming process, the abuse and the secrecy surrounding it all creates a number of barriers that prevent children from speaking out about what is happening to them. Victims of child sexual assault often don't disclose because they:

- are scared and/or ashamed
- think that it's their fault
- believe they are strange in some way
- are afraid of getting the abuser and/or themselves into trouble
- feel embarrassed, guilty, alone
- have problems communicating and expressing themselves
- have emotional and learning difficulties
- are afraid they won't be believed or taken seriously or will be blamed for the abuse
- don't want to hurt or upset other people or family members
- don't want other people or friends to find out



what are the effects of child sexual assault?

In whatever form child abuse is harmful to everyone, especially the victim, the child. The sooner a case of child abuse is recognised and addressed the better the outcome for the child.

As in other forms of abuse, child sexual assault damages children physically, emotionally and behaviourally. Both its short-term and long-term consequences impact on the individual, on their family and on the community.

The initial effects of child sexual assault may include:

- medical conditions, eg, sexually transmitted infections, pregnancy and physical injury.
- emotional problems, eg, guilt, shame, anger, anxiety, fear, depression and low self-esteem.
- behavioural problems, eg, aggression, delinquency, nightmares, phobias (eg, fear of men), eating and sleeping disorders.
- learning difficulties, eg, poor concentration at school and/or truancy.

Longer-term effects may include:

- repressed anger and hostility, eg, feeling bottled up with anger due to secrecy
- sexual dysfunction, eg, flashbacks, difficulty in arousal, avoidance of or phobic reactions to, sexual intimacy
- promiscuity
- prostitution
- blurred role boundaries and/or role confusion in families
- discomfort or difficulty in intimate relationships
- isolation
- relationship/marital problems
- low self-esteem
- depression
- mental health problems
- substance abuse
- suicidal or self-mutilating behaviour
- eating disorders

Research indicates that different children will respond to and be affected by sexual assault in varying ways depending on a number of factors and variables. The full impact of sexual abuse on some victims may not be obvious when they are children but may develop when they get older.

“Early identification and effective intervention can help to lessen the initial effects and long-term consequences of child sexual abuse and promote the recovery of victims.”

DHS Victoria, 2000



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The effects of sexual assault may vary from child to child and often depend on such factors as:

- the type of abuse
- the period of time over which the abuse happened
- the use of threats, violence or force and degree of manipulation
- the child's age and maturity
- the relationship between offender and victim
- the reaction of others (particularly parents/carers) to the abuse
- the level of ongoing support from the family and others close to the child
- feelings of being believed

Further research on the impact of child sexual assault found that the following effects were more likely to occur in these age groups of victims:

0 – 6 years

Anxiety, nightmares, Post Traumatic Stress Disorder, depression, inappropriate sexual behaviour, eg, sexualised play with dolls, non-age appropriate sexual knowledge, requesting sexual stimulation from adults or children.

7–12 years

Fear, aggression, nightmares, school problems, hyperactivity, regressive behaviour.

Adolescents

Depression, withdrawal, suicide thoughts, self injury, illegal acts, running away and substance abuse.

Other findings have suggested that the following factors may lead to a greater number of symptoms for victims of child sexual assault:

- a close perpetrator
- high frequency of sexual contact
- long duration of abuse
- the use of force
- sexual acts that include oral, anal or vaginal penetration
- lack of maternal support at the time of disclosure (due to the interaction of perpetrator with mother before and after disclosure; and the associated tactics of blaming the child)



how might we recognise **child sexual assault**?

The secrecy surrounding child sexual assault can make it very difficult to detect. Earlier in this section we discuss how children are often threatened or coerced by perpetrators into secrecy and may reach a point where they are too frightened of the consequences of disclosing the abuse. Adults are often reluctant to openly discuss sexual matters with children or to get involved in what they view as private family business. These factors all contribute to a climate of secrecy, which too often prevents children from understanding what's happening to them and disclosing the abuse directly. However children may indirectly disclose that they have been sexually abused through behavioural signs and indicators. These may be the sole sign that a child is being sexually abused.

Indicators of child sexual assault may be physical, behavioural or both. Often, a combination of indicators can signal the possibility of sexual abuse and the need for further investigation. They are not always evidence that abuse is actually happening, as some of these indicators could be associated with others factors in a child's life.

An awareness of the indicators of child sexual assault can help us to identify children who are being abused in this way and provide them with a sensitive and effective response.

Physical Indicators

Genital and anal areas

- bruises, scratches or other injuries not consistent with accidental injury
- itching, soreness, discharge or unexplained bleeding
- painful and frequent urination
- signs of sexually transmitted infections
- semen in the vagina, anus or external genitalia or on clothing

General

- bruises, bite marks or other injuries to breasts, buttocks, lower abdomen
- difficulty in walking or sitting
- torn, stained or bloodied underwear
- pregnancy in adolescence, particularly where identity of the father is vague or secret

A THIRTY - FIVE YEAR OLD WOMAN SAYS

I was sexually abused by my foster father when I was eight years old. The abuse was only happening once in a while for the first three years and it was just tickling, touching, kissing. But as soon as I turned eleven years old, it started happening once a week, whenever I was left alone with him.

I talked to my foster mother about what was happening, but she said I was just making trouble. I used to have visits from a welfare woman from the Department of Aboriginal Affairs, so I told her but she did not do anything.

When I turned thirteen, I was being abused by my foster brother as well.

The only thing I could do was fight back. They said I was too violent so they sent me to an institution. I know now that I was just really confused about what was happening to me and no one believing me.



child sexual assault

- recurrent urinary tract infections
- persistent headaches or recurrent abdominal pain
- unexplained pain or irritation in the genital area

Behavioural Indicators

A child's age and level of maturity and development must be considered when interpreting possible behavioural indicators of sexual assault.

Sexual

- greater attention than usual to adults of a particular sex
- displaying unusual interest in the genitals of others
- acting out adult sexual behaviour
- open displays of sexuality, eg, repeated public masturbation
- prematurely developed knowledge of sexual matters
- promiscuity, age-inappropriate sexual behaviour

General

- sudden changes in mood or behaviour
- direct or indirect disclosure
- describe sexual acts, eg, 'Uncle hurts my wee-wee'
- difficulty sleeping and nightmares
- wanting to go to bed fully clothed
- regressed behaviour, eg, bed-wetting, separation anxiety, insecurity
- change in eating patterns including preoccupation or 'playing' with food
- lack of trust in familiar adults, fear of strangers, fear of men
- lack of appropriate role boundaries in family – child fulfils parent/carer's role
- acting out behaviours – aggression, lying, stealing, unexplained running away
- self-destructive behaviours – drug and other substance abuse, suicidal behaviours
- self-harm
- withdrawn behaviour such as passivity, excessive compliance, mood swings or depression
- learning problems at school, loss of concentration, unexplained drop in school performance
- poor peer relationships; family and/or child appear socially isolated
- excessive bathing
- inappropriate displays of attention between child and parent/caregiver

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- unexplained accumulation of money or gifts
- child being in contact with a known or suspected perpetrator of child sexual assault

Indicators in parents, care-givers, siblings, relatives, acquaintances or strangers

- exposing the child to prostitution or pornography or using a child for pornographic purposes
- intentional exposure of child to sexual behaviour of others
- previously committed or suspected of child sexual assault
- trying to prevent or being jealous of age-appropriate development of independence from the family
- coercing the child to engage in sexual behaviour with other children
- verbal threats of sexual abuse
- denial of adolescent's pregnancy by one or more family members
- perpetration of family violence or child (especially physical) abuse
- neglect of child

There are various ways a known or suspected case of child sexual assault may come to your attention:

1. The child discloses by telling you or someone else that he/she has been sexually assaulted. This may happen in a roundabout way, such as ... "My friend's daddy plays with his/her ..."
2. The child behaves in a way which may indicate that he/she is a victim of sexual abuse. Behaviour may be the only way a child can express their distress about what is happening because they are under pressure not to tell.
3. The child complains of, or shows physical signs of sexual assault.
4. The offender is discovered committing a sexual act with a child (this rarely happens).

"The risk to the child is high once the secret of child sexual assault has been revealed, and there may be people who would pressure the child to change the story."

NSW Child Protection Service



Child sexual abuse will not stop unless adults take effective action on behalf of the child and report their concerns to the appropriate authorities

VIC DFCS 2000

how should we respond to a suspected or known case of child sexual assault?

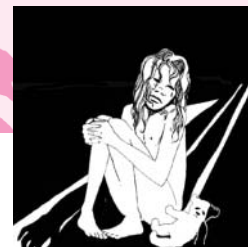
Finding out or suspecting that a child is being or has been sexually abused can be a very stressful and fearful experience, particularly if you are a parent, caregiver or family to the child. Your first feeling may be shock or you may have even felt somewhere deep down something wasn't right. You may not want to believe it, you may feel disgust, anger, sadness, don't know what to do, want to get your brothers and take him to task, shame and guilt. Want to pretend that it hasn't happened. How you react to the child is critical as to how they feel about themselves. If the child senses horror or anger this might reinforce their fear of talking about it and also reinforce their feelings of guilt and shame. This will prevent them from feeling safe and may close them off. It is important to be calm even though it may not be how you are feeling and to reassure the child.

- It is very important to believe the child even if you suspect the child may be making a false claim. Those who are being accused will not worry should it be false

If you suspect a case of child sexual assault, remember:

- Who is responsible for making sure our kids are safe from abuse. It is our families, our community and even the governments. This includes people who do things with our children such as teachers, childcare workers and support workers who work with families.
- It is good to catch abuse early, to stop further abuse happening but also hopefully to stop the kids having problems for a long time even ever.
- Child protection workers first try to keep the families together wherever it is possible. They aim to assist the children and families without judging them.
- Most of the child abuse is stopped before it starts, when it has started by nurses, teachers, doctors, social workers, neighbours, family and volunteer workers
- When you interfere and how you interfere is very important for the needs of the children and the families. You could follow these guidelines if you think something is going on.
 1. Write down things that make you think that abuse is happening
 2. Look up the indicators of child abuse (page 37) and check that some are the same as what you see or think
 3. Then decide if what you think is right
 4. If you need help with finally making the decision because you want to make the right decision then seek help from someone working in child protection (page 89)

child sexual assault



- People who do make a formal complaint don't have to prove the abuse they are simply worried about a child/ren and want the child/ren to be safe. Your identity is protected. Remember people may get a shock if a complaint comes their way but after the shock if they have nothing to hide then they should be happy to help.

Calling up the department responsible for child protection or telling someone like a school principal or doctor or policeperson even though it is the last thing you want to do is important deep down you know this. And it may now mean safety from now on for the child/ren whereas not doing it may mean more of the same for the child/ren.

If you suspect a case of child sexual assault:

- you may not want to get involved – resist this temptation for the sake of the child
- it is not your role to undertake an investigation. Your role is to listen to and comfort the child. Do not push the child into giving you details of the sexual assault. It is important to keep to a minimum the number of times a child has to repeat the details of the assault
- you should notify and consult your state child protection authority (see Directory for list of contacts). You may also want to make sure your nearest Aboriginal & Islander Child Care Agency is also aware. For the details of reporting child sexual assault refer to Section D of this handbook
- do not confront, contact or discuss the disclosure with the alleged offender
- if the alleged offender is a co-worker, you should discuss the disclosure with a senior staff member
- you should keep a record of the events surrounding the disclosure

The best way to help a child who discloses they have been sexually assaulted is to:

- listen actively to what the child is saying and be non judgmental
- try to remain calm
- reassure the child you believe them and that it was the right thing to tell
- make it clear that it is not their fault and that some adults do wrong things
- explain they are not the only one in this situation and that it has also happened to other children
- say you will try to stop the abuse happening and that there is help available
- not make any promises to the child you cannot keep – especially about keeping information secret
- do everything possible to comfort and reassure the child. Explain what action you will take next and ensure they are in a safe and comfortable environment while you are organising things
- be clear about your role. If you have reasonable suspicion of child sexual assault, report your concern to the child protection authorities. It is not your



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role to investigate and prove the case. Do not ask leading questions, eg, “Did he touch your vagina?”

- be aware of the possibility of the child taking back or changing their story. This can happen for many different reasons and you should be prepared to believe the first disclosure

Principles for Intervention:

You may be worried about bringing the government into our children’s and families lives, and this may be fair given experiences to date. It is always useful to also deal through your state or territory AICCA. You may fear children being taken or that police and courts don’t do anything and everyone especially the child has to go through so much for nothing. But do not make a reason for your not doing anything about the abuse to the child/ren. If adults don’t do something about it then it will keep on happening to the child/ren. Start being part of something to make the institutions more responsive to what is happening to the children so that more perpetrators can be stopped – even before they begin. Those of us working with children and families must ensure that the best possible systems are developed to assist victims of child sexual assault.

Sexually abused children and their families may need the help and support of a range of agencies and services. No one group can be expected to meet the needs of a child who has been sexually assaulted. Effective intervention must be child-centred, involve multi-disciplinary teamwork and be guided by the following principles:

- Child sexual assault is a legal crime and a cultural crime
- Child sexual assault is unacceptable.
- All children have a right to be safe and protected from sexual assault.
- A child should always be taken seriously if they allege sexual assault.
- Intervention should aim to promote the relationship between the child and non-abusing parent(s)/carer(s).
- Children who have been sexually assaulted have the right and need to be in a safe, supportive environment. They also have the right to legal and protective intervention and to counselling and treatment services.
- The first priority of intervention should always be to protect the child and to promote their recovery.

[VIC DHS, 2000]

In summary in relation to child sexual assault always remember that:

- It happens all over and in all types of families
- It happens with all ages, from babies to teenagers
- Sometimes children are sexually assaulted by family, sometimes by friends of the family, and sometimes by a stranger, but usually it is someone that they know. A father, stepfather, uncle, brother, grandfather, friend of the family or neighbour.

child sexual assault



- Child sexual assault shatters a child's trust
- It happens to both boys and girls but twice as often to girls
- Child sexual assault is never the child's fault it is always the perpetrator of the assault's fault
- Children lack true knowledge and understanding of sex and do not understand about giving informed consent even if they did an older person has no right to ask it of a child. Children do not have adult knowledge about sex and sexual relations even though they may have witnessed it let alone understand the social meaning of sexuality and it's potential consequences.
- Sexual activities between a child and an older person are totally inappropriate because children can never give "informed consent"
- People who sexually abuse children come from all over. They have families, job's and may be very respected members of the community. You don't usually notice anything strange and odd about them.
- More than 90% of child sex offenders are male
- Most commit their first child sex offence during adolescence and usually continue until they are caught. Whilst it is true that most sex offenders are male, it is inaccurate to say that they are old men. A few may be but the greater majority are not.
- Child sexual assault may occur once, or many times over a period of months and even years. Because the offender is usually someone the child knows, the contact may be frequent and hence the sexual assault may be repeated.
- A child/ren, may be sexually assaulted by more than one person. At the same time or over a period of time
- ECPAT reports, it is rare for sexual offence to be a one-off occurrence. Generally sex offenders who are caught do not get charged for all the offences that they commit.
- Without assessment and proper intervention, adolescent males who sexually abuse children are likely to continue to do it as adults
- Although the majority of child sexual assault offenders are male, women are also known to sexually abuse children.

The Child Protection Authority you should notify in your State/Territory is:

The Aboriginal & Islander Child Care Agency (AICCA) in your region is:



A TWENTY SEVEN YEAR OLD WOMAN SAYS ...

I was abused by my cousin's de facto husband when I was thirteen.

They asked me not to report it because I would only make trouble for them.

I still have some very bad feelings about what he did. The only way I find myself dealing with it is by drinking, drugs or pills.

I have two sons of my own now and I find myself watching anybody who touches them, even my own brothers, who I know would not do anything to them. But I am still afraid for them.

This has made trouble with my family because I can only talk to them when I am drunk.

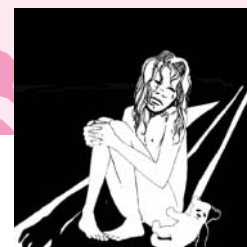
how can we help to **prevent child sexual assault?**

It is impossible for parents or carers to be available to protect their children 24 hours a day, 7 days a week. It is, however, possible to greatly reduce the risk of children being victims of sexual assault by teaching them ways that help to increase their personal safety. Children are taught rules about traffic, fire, water and safety from an early age. In a similar way children can be taught ways and rules to keep themselves safe from sexual abuse. Kindergartens and schools may offer some sort of protective behaviours program but this responsibility should not be left entirely to them.

Why is prevention important?

- Many children experience some form of sexual abuse. 1 out of 4 girls and 1 out of 9 boys are likely to be sexually assaulted before they reach the age of 18.
- Boys and girls of all ages may be sexually assaulted.
- Over 85% of abused children are harmed by someone they know and trust – by a parent, step-parent, relative, family friend or babysitter.
- Child sexual assault occurs in all kinds of families, cultures and communities.
- Child sexual abuse is often achieved through tricks, bribes, coercion or threats by a person in a care providing role. When sexual abuse occurs within a family, it is likely to continue for a period of time, even years, until it is discovered and stopped.
- All child sexual abuse experiences should be regarded as harmful to the child.
- Many children do report sexual abuse out of fear that they will not be believed or that they will be punished. Some children simply do not know how to tell about it.

child sexual assault



How can children learn to protect themselves?

To help children protect themselves from sexual assault, they need to know and understand the principals of personal safety. Many of us find it difficult to talk to children openly about how to protect themselves from sexual assault. This can be eased by including the topic in a general discussion about safety, eg, roads, fire, strangers.

Four basic elements of personal safety programs for children are:

- body ownership/body knowledge
- building self-esteem
- training for assertiveness
- teaching self-protective skills and behaviours

The National Association for Prevention of Child Abuse & Neglect (NAPCAN) recommend the following basic personal safety principles:

- Teach children about touch. Most sexual assault involves inappropriate touching or fondling of the child by the adult. Children need to know how to identify when and how people can touch them and when and how they can touch others.
- Teach children to trust their feelings and instincts. Children have a good natural sense when something is wrong. They should be encouraged to learn to trust all their feelings, whether good, bad or confusing.
- Teach children when to say no to adults. Children are taught to be polite and obey and respect adults, especially elders. They must also be taught that there are times they should say no to an adult if they need to protect themselves from danger or an unpleasant situation.





child sexual assault

ANOTHER FOURTEEN YEAR OLD SAYS ...

**My mother's
boyfriend has been
sexually abusing me
for seven years. I
am now fourteen.**

**It was happening at
least once a week,
and as I got older
sometimes twice a
week. My mother
would not go out
and leave me and
my older sister and
brother at home
with him.**

**He did not seem to
worry them, only
me.**

**It started off
with touching
and kissing and
finally when I was
eleven, he got into
bed with me and
had intercourse
with me. This
went on for three
years until I was
fourteen. I ran
away from home.**

**I have tried to
speak to my
mother about what
was happening
but she seemed
to think I was just
trying to make
trouble for her.**

**So I have never
spoken to anyone
until now.**

- Teach children that they own their bodies. It doesn't take children long to learn the meaning of "mine" as it applies to possessions such as toys or food. It is from this time they should also learn to make the same claim about their bodies and to decide when they want to be touched and by whom. They need to know they have the right to privacy in dressing, bathing and sleeping.
- Teach children to leave an uncomfortable situation. Children have the right and need to feel safe and therefore should be taught to remove themselves as quickly as possible from any person who makes them feel uncomfortable or threatened.
- Teach children about inappropriate secrets. Sexual assaults depends largely on the child being persuaded, threatened or coerced into not telling about the abuse. Children need to learn that secrets which frighten or hurt them should not or do not have to be kept.
- Teach children about people who can support them. Children should be helped to identify a number of people to whom they can turn to if they are touched or treated in an inappropriate way. They should be taught to expect that adults will protect them and be encouraged to keep telling of their experience until they find someone who does.

What other ways can parents/carers protect their children?

- It is important to know where your child is and with whom she/he is associating.
- It is similarly important to be aware of people who may be staying with you. Be careful with baby-sitters and be cautious about where your child stays overnight.
- Listen to your child. Listen to what she or he is not saying. Simple statements like "I don't want to visit Grandpa or Uncle", should be discussed further.
- Define family rules or boundaries, such as all family members must respect individual rights to privacy in dressing, bathing and sleeping.
- Teach proper names of body parts from the earliest years on. This gives your child language for understanding and telling and helps them to feel comfortable about their body.
- Periodically review personal safety as a total family. Remind the children they have your permission to tell if abuse happens to them. Also reinforce that it is important for them to keep telling other people if initial attempts fail.
- Check to see if your children understand your teaching by asking "what if" questions. Listen closely to their answers.
- Remember, what children don't know can hurt them.