

Working Together to stop Child Sexual Abuse

November 2014

Brighton & Hove Local Safeguarding Children Board's Business Plan 2013-16 identifies three key areas of concern to focus on: Neglect, Sexual Abuse and Sexual Exploitation, and we will be producing a feature on each of these throughout the year. This bulletin on **Child Sexual Abuse (CSA)**, aims to spread **awareness** of what CSA is, and help you **spot the signs**, let you know where & how to access **help** & services, and update you on the work that is being done in our city to **stop** this abuse and **support** victims.



1 in 20 children in the UK have been sexually abused

Source: Radford, L. et al (2011) **Child abuse and neglect in the UK today**. National statistics in this bulletin taken from the **NSPCC** website

Sexual Abuse is:

This is really something none of us needs to see in print, or really want to read, but to be honest it needs to be taken out of the corner dusted down, not hidden away. Sexual abuse of children thrives on secrecy and lies. There is nothing wrong with reading the truth but there is a lot wrong with the truth of the issues it presents. So please read on:

- Sexual abuse involves 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 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).
- Sexual Abuse is not solely perpetrated by adult males.
- Women can also commit acts of Sexual Abuse, as can other children.

We could go on to talk about the various forms of sexual assault with the codicils of the law but there is little point, we just need to be aware it is happening in your town, probably right now! And we could repeat that, like all headlines, it is there to grab attention: **It is happening in your town, probably right now!**

In law children under 16 years of age cannot consent to any sexual activity occurring, although in practice young people may be involved in sexual contact to which, as individuals, they may have agreed.

Children under 13 years cannot in law under any circumstances consent to sexual activity and specific offences, including rape, exist for child victims under this age.

**All girls and boys are at risk of sexual abuse:
it is seriously harmful to children both emotionally and physically.**

Signs of Sexual Abuse

It is not always the case that a child is going to complain about what is happening to them. So as responsible adults and citizens we need to be aware of some of the signs we should be looking out for.

The fact is, **boys** and **girls** of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about (and for a parent/carer to hear) and full account should be taken of the cultural sensitivities of any individual child / family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional and/or behavioural.

There are many **Behavioural Indicators**, and they will depend in part of a child or young person's age, but here are a few common signs to look out for:

- Inappropriate sexualised conduct / sexually harmful behaviours
- Sexually explicit behaviour, play or conversation, inappropriate to the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder), self-mutilation and suicide attempts
- Indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes for - e.g. sports events (but this may be related to cultural norms or physical difficulties)
- Running away

Physical Indicators:

- Pain or itching of genital area
- Recurrent redness that is unexplained
- Unusual vaginal discharge
- Sexually transmitted infections
- Blood on underclothes
- Pregnancy
- Physical symptoms e.g. injuries to genital or anal area, bruising to buttocks, abdomen and inner thighs, presence of semen on vagina, anus, external genitalia or clothing.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional or behavioural.

Child Sexual Exploitation (CSE) is also a form of Sexual Abuse, which both girls and boys are vulnerable to. Sexual exploitation involves exploitative situations, contexts & relationships where young people (or a third person or persons) receive 'something' as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. For more information on this please see our [LSCB CSE Bulletin](#) or the [Warning Signs & Vulnerabilities Checklist](#) from the Children's Commissioner's Inquiry into [Child Sexual Exploitation in Gangs and Groups](#)

1 in 3 children sexually abused by an adult did not tell anyone.

Source: Radford, L. et al (2011)
[Child abuse and neglect in the UK today.](#)



Over 90% of sexually abused children were abused by someone they knew.

Source: Radford, L. et al (2011)
[Child abuse and neglect in the UK today.](#)

What are the risk factors associated with Child Sexual Abuse?

Apart from the obvious issues relating to children themselves, one of the most important 'other risk consideration' issues has been the commonly held belief is that males who sexually abuse children were themselves victims of sexual abuse in childhood. This is known as the 'victim to offender cycle' (Irenyi et al, 2006). However some researchers see this theory as problematic. As Liz Kelly points out, if the 'cycle' explanation were true, women would commit the majority of sexual abuse, because girls are more likely to be sexually abused than boys (1996). In addition to this, the majority of male victims of sexual abuse do not go on to sexually abuse in later life. CSA is often, although not exclusively, included within neglect, other forms of abuse, substance misuse and domestic violence.

Characteristics of sexually abusive adults. While numerous research studies have tried to establish factors linked to adults sexually abusing children, where noted characteristics of child sexual abusers include:

- a lack of empathy for their victims
- low self-esteem
- poor social skills
- social isolation and a preference for the company of children
- prior experiences of abuse
- educational underachievement and/or learning disabilities
- problems relating to others (Findlater and Fyson, 2007).

It is important to acknowledge that doesn't mention Langevin and Watson's 1996 review, which found that 52% of abusers were heavy drinkers. We, all of us, know how alcohol reduces inhibition and remorse arising from actions committed while under the influence. It is therefore no coincidence that it also poses a greater risk when children are involved.

Nevertheless, despite these common features, there are no factors which can safely predict whether or not someone will sexually abuse children. Alcohol and the other issues listed above do not categorise us all as abusers and it comes down to understanding our own personal codes of conduct. In 1984, David Finkelhor (1984) described the barriers which a potential abuser will overcome in order to abuse a child. There are four stages:

- feelings of sexual attraction towards the child
- easing his own conscience by making excuses to himself to justify the abuse
- creating situations in which the abuse can take place and overcoming the disapproval of other adults by manipulating them into trusting him
- overcoming the child's resistance by using bribes, threats, and force

What is clear is that the potential abuser is not using these as gates to walk through. Research also suggests that sexual abusers are skilled at cultivating trusting relationships with both children and their families. We may be looking for the low self-esteem, poor socially skilled opportunists but they can also be charming and able to win the esteem and respect of those around them (Van Dam, 2001). By doing this they make it more difficult for the child to disclose abuse, or for adults to accept that the allegations may be true (Child Protection in Sport Unit, 2010). Thus, the practice known as grooming actually hides the potential for spotting the potential abuser.

How do we even spot the potential risk factors when the factors themselves, the groomers and abusers can also be both enigmatic and an enigma? It is an almost impossible but necessary ongoing task and asks for a constant vigilance. Which returns us to the very important idea that, there are no factors which can safely predict whether or not someone will sexually abuse children. Don't leave suspicion to chance, let the experts investigate.

Read more of the research into the characteristics of adults who abuse children in the NSPCC's briefing:

www.nspcc.org.uk/Inform/research/briefings/people-who-abuse-children_wda102856.html

What about Children who Abuse Other Children?

Child on Child abuse is not just a phrase or something we can disregard. New figures from the National Society for the Prevention of Cruelty to Children (NSPCC) suggest otherwise. The number of children being sexually abused by other young people is on the rise. This is a worrying trend and we need to be aware of what we are looking out for here. The issue of peer on peer sexual abuse and sexually harmful behaviours between children requires a sensitive multi-agency response and careful information gathering about the concerns and allegations. The behaviours need to be managed with specialist advice from social workers or health visitors and community paediatricians

More than 8000 under-18s were accused of sexually abusing children and other young people in the last two years. This makes up around two thirds of all reported cases of child sex abuse. The NSPCC's Peter Wanless expressed concern about this growing problem, saying "Prevention has to be the key —recognising warning signs early and taking swift action." Even without looking too hard we know this to be the case, "Easy access to hard core, degrading and often violent videos on the internet is warping young people's views of what is normal or acceptable."

The NSPCC is targeting the worrying trend with their [Turn the Page](#) service that teaches young people about appropriate sexual behaviour. But this cannot be targeted by the NSPCC alone. Alan Wood, president of the Association of Directors of Children's Services, has also noticed the effect exposure to an "increasingly digital world" has had on young people and their relationship with sexuality. He said, "Children may struggle to understand boundaries as a consequence of exposure to inappropriate material such as online pornography, violent films or computer games... Some young people who abuse others are themselves victims of abuse – and we must help break the cycle of victims becoming perpetrators in the future."

What we are talking about here is breaking the playground mentality of peer pressure. The idea that everyone is doing it only makes the problem more difficult to manage. Everyone in contact and able to prevent the spread needs to be aware. The current figures, obtained through Freedom of Information requests, only reveal a snapshot of the problem and that in itself is worrying because no one knows the actual extent of the problem. Matt Hopkinson at the NSPCC explained recently that, since data is recorded differently by different police forces year on year, the full scale of the problem is not known. Awareness of the problem is a good first step in stopping the trend from developing further.

Harmful Sexual Behaviour

'Harmful sexual behaviours' (HSB) is the umbrella term for those actions of a sexual nature that are either:

- Sexually abusive, where there is an element of manipulation, force or coercion or where the subject of the behaviour is unable to give informed consent, or
- Sexually problematic, where there is not an element of victimisation but where the behaviours interfere with the developmental progress of the child demonstrating the behaviour or which might provoke rejection, cause distress or increase the risk of victimisation of the child.

Young people who commit harmful sexual behaviour are recognised as causing significant harm, with responsibility for a high proportion of sexual offences committed. Up to one third of all HSB against children are thought to be perpetrated by young people under the age of 18 years. Additionally there is evidence that nearly half of all adult sex offenders show onset of deviant sexual interest in puberty and begin harming sexually in adolescence.

There is increasing awareness that the factors that lead to HSB are complex and broad. Children and young people who present with HSB have often experienced a range of adverse life experiences and traumatic events. Therefore the approach to working with them is required to be holistic and one that encompasses an individual-in-context perspective.

At the Clermont Family Assessment Centre the TACT (Training, Assessment, Consultation and Treatment) team assesses and provides therapy and treatment for children and young people with HSB. The team also provides consultations to professionals. The aim of our work with children and young people, families, carers and professionals is to contribute to the protection of children and young people from future abuse.

TACT utilises the AIM model of assessment and intervention to support children and young people. This model is evidence informed and recommended by the Youth Justice Board. It seeks to provide a holistic assessment of children and young people. The model helps to identify:

- Factors that can contribute to risk and how these can be managed safely
- Strengths and protective factors which could promote safety
- How the child or young person's needs can be best met.

Assessments are conducted in close collaboration with the child / young person, their parents/carers and professionals who are involved in the case. The conclusions of assessments will identify whether or not there are areas for ongoing work, indicate the child / young person's ability to engage with this work and suggest appropriate targets and timescales. The targets will also include recommendations about how any ongoing risk can be best managed by those around the young person.

Interventions that can be carried out by TACT include time limited and specific child therapy, treatment programmes and family therapy. For more information please contact Jim.Park@brighton-hove.gov.uk

Read more about Harmful Sexual Behaviour [here](#)

Police Safeguarding Investigations Unit

In May 2014, police in Brighton and Hove created a new Safeguarding Investigations Unit (SIU), seeking to problem-solve around troubled families in the city. This Unit is based at John Street Police Station. The new Unit has merged the Child Protection Team (CPT) and Domestic Abuse Investigation Unit (DAIU) into one team for better cooperation and management.

A founding principle of the SIU is that child neglect is the main cause of child abuse in the city and that children witnessing or suffering domestic abuse are the majority of cases for child neglect. The new Unit seeks to tackle these issues, protecting the vulnerable and building on our relationships with other agencies in doing so.

Child Sexual Abuse falls within the Unit's remit and the number of officers with expertise in this arena has increased. The Unit is therefore well-equipped to increase the "professional curiosity" required by all to discover such cases, and prosecute those responsible for the sexual abuse of children. Both current and historical cases are being investigated as it is an important message to culprits that they should never sleep easy if they have been responsible for debilitating a childhood through sexual abuse.

The SIU has a major role in the new Multi-agency Safeguarding Hub (now Front Door For Families, previously MASH) that opened in Woodingdean in September 2014 with a threefold purpose as follows:

- immediate and structured information sharing amongst partners,
- pro-active joint agency investigations, and
- increased intelligence sharing about children subject to risk of Child Sexual Exploitation.



Sussex Police
Serving Sussex

Sussex Police & Crime Commissioner Supporting Victims of Sexual Abuse

Katy Bourne, Sussex Police & Crime Commissioner told us about how the funding she recently secured from the Minister of Justice will be used to provide more support for victims of sexual abuse and why it is important that appropriate support is available for victims of sexual abuse.

"This funding will allow key partners to work together and shape a specialist service to support young people who are victims of sexual abuse. This work will be delivered across Sussex, providing equity of service to children and young people in the county, will provide much needed support. Evaluation of current service provision has identified the need for additional resources to target specific gaps in service.

The funding will help support children and young people from a range of ages who have experienced sexual abuse. It will build upon existing partnership working to help deliver a multi-agency response to children and young people who have experienced sexual abuse and assault, ensuring they receive information, advice, support and access to the follow-up services appropriate to their circumstances.

Children and young people are amongst the most vulnerable victims and witnesses of crime, disproportionately over-represented in crime statistics, particularly in the area of sexual abuse.

Addressing sexual violence is a responsibility for all, and is a high priority for me as the Police & Crime Commissioner."

Read more about how this money will be used on the PCC website: www.sussex-pcc.gov.uk and keep up to date with their work on twitter [@Sussexpcc](https://twitter.com/Sussexpcc) [@KatyBourne](https://twitter.com/KatyBourne)

I suffered sexual abuse as a child and now I feel I can report it, what can the police do?

Deciding as an adult whether to report abuse that you suffered as a child can be a very difficult process. You may have many questions and reservations about revisiting events which you would rather forget. However, taking the very brave and proactive approach of reporting the crime allows many to take control of the situation. And everyone should be assured that appropriate help is at hand.

If you decide to report a historic case of sex abuse to the police, they will treat the matter very seriously. As well as investigating the report thoroughly, they will give well trained support and help through the process. And it is very easy indeed, to make a report, contact the police by calling 101 or visit even visit a [local police station](#). Please see the last page of the bulletin for contact details of organisations that can support you through this process.

Once historical abuse has been reported, the accused party will be located (where possible) arrested and interviewed. The police will also make every effort to recover any available evidence which may remain, including revisiting earlier reports (if they exist), medical and social services records.

Once the suspect has been interviewed, in most cases the papers will be forwarded to the Crown Prosecution Service. Although a conviction in historic cases may seem less likely, it is important to take an active step towards dealing with the abuse. Taking decisive action could give you the chance to close a chapter of your life & gain support in moving forward.

Medical Investigation & Management of Child Sexual Abuse

Dr Jamie Carter, the Designated Doctor for Child Protection in Brighton & Hove, and our LSCB Board Lead on CSA, explains the important role Paediatricians can have in the assessments of children who have disclosed sexual abuse or are suspected to have experienced it. Many studies have shown that conclusive medical evidence of sexual abuse is found in only a minority of children who have been sexually abused, so while a primary concern is to identify any medical (forensic) evidence of genital injuries or infection they also look at children as a whole. Child sexual abuse may be hidden behind neglect or be associated with non-accidental injury. Physical signs of sexual abuse in the genitalia are commonly not present even when there has been penetration as this part of the body heals rapidly and well. Other evidence of sexual abuse we find may be a variety of unexplained emotional and behavioural symptoms, which are not necessarily sexualised, although may include these in a younger child, or inappropriate, highly sexualised activity in older children; unexplained medical symptoms such as recurrent abdominal pain, soiling and unexplained genital symptoms such as bleeding or recurrent discharge.

The Paediatrician will assist the investigation of possible Child Sexual Abuse by advising the social worker and police and conducting a health assessment (medical) if indicated to:

- Consider the overview of the child's medical and developmental history and assessment of unexplained symptoms and medical problems.
- Look for evidence of injury. Conclusive forensic evidence may be obtained in up to three days of incidents of sexual abuse and rarely up to seven days, so it is only likely to be present if an incident has happened within the last few days.
- Check for evidence of sexually transmitted infections including screening and appropriate treatment.
- Identify associated medical problems or neglect. Up to 30% of children referred locally for a CSA health assessment have health or education issues that require further intervention.
- Feedback to the child that they are physically well and address any fears that they may express about damage or implications, particularly for older children.
- Give advice to parents about what to do next, what to say to their child, what to expect and where to find sources of advice.
- Consideration of the child and the parent's needs for further emotional support or specialist referral.
- Provide a summary for the GP, and for the Health Visitor for younger children

We have been historically concerned about the emotional welfare and long term consequences for these children and recognise that a comprehensive and flexible therapeutic service is an important component, particularly for those children where the claims of sexual abuse have not been substantiated. Anecdotal and published evidence shows the link between sexual abuse in childhood and issues with mental health, health as well as education. Awareness and recognition of sexual abuse is crucial to enable support for these children, many of whom are suffering on many different levels, an issue recently highlighted by Sue Berelovitz the Deputy Children's Commissioner. Statistics about the prevalence of child sexual abuse vary but suggest a much high prevalence or incidence than is reflected in national and local safeguarding plans specifying child sexual abuse.

Disclosures of possible child sexual abuse require a co-ordinated multi-agency investigation and an understanding of the complexities children face in disclosure (particularly when abuse involves a familiar adults), the need to look actively for historical information including checking archived records and being aware that children may not be able to repeat allegations and that it may take a very long time for a child to feel "safe enough" to talk about this. In the management of concerns about possible child sexual abuse professionals and public should make no assumptions and listen carefully to the child and professionals should engage in multi-agency working and draw on historical concerns.

We are encouraged by recent changes in ways of multi-agency working but also recognise that there is still much to be done. We hope that the CSA support pack will raise awareness and that it will require sustained input from all agencies and organisations and multi-agency management of CSA remains a challenge."

The Underwear Rule

We are enthusiastic about the NSPCC's Underwear Rule and Talk Pants Campaign which encourages parents to talk to their children about staying safe and that privates are private.

The Underwear Rule teaches children that their body belongs to them, that they have a right to say no, and that they should tell an adult if they're upset or worried. The NSPCC website has lots of additional tips for parents to help them have these conversations and be prepared to answer their children's questions www.nspcc.org.uk/underwear

There is a guide for parents available to download, which is available in Welsh, Latvian, Lithuanian, Polish & Russian. There are also a guides for parents of children with learning difficulties, produced with MENCAP, and children with autism produced with the National Autistic Society.

TEACH YOUR CHILD THE UNDERWEAR RULE



NSPCC
Cruelty to children must stop. FULL STOP.

P RIVATES ARE PRIVATE

A LWAYS REMEMBER YOUR BODY BELONGS TO YOU

N O MEANS NO

T ALK ABOUT SECRETS THAT UPSET YOU

S PEAK UP, SOMEONE CAN HELP

Work with Schools

Brighton & Hove's PSHE (Personal, Social, Health & Economic) Education Programme of Study provides schools with a framework to support the delivery of an effective PSHE Education programme from age 5-16, and a key focus of this programme is to provide children and young people with the skills and information they need to keep themselves and others safe. The Standards and Achievement Team in the Council provides schools with planning tools, resources, consultancy and teacher training to ensure age appropriate effective teaching and learning related to areas such as labelling the body parts, safe touch, consent and saying no, healthy relationships and where to go to get help.

When delivered effectively, PSHE education supports the prevention and appropriate disclosure of a range of abuses including bullying, sexual abuse and violence, domestic abuse and sexual exploitation. The Brighton & Hove [PSHE Education Programme of Study](#) can be accessed from the LSCB website, and support for the development of school-based PSHE can be accessed by emailing pshe@brighton-hove.gov.uk, and you can follow the team on twitter [@PSHEEdBH](https://twitter.com/PSHEEdBH)

Safety Net are working on a whole school approach to keeping children safe. At their recent Safety Net Conference: Protective Behaviours as an early help intervention, they featured a number of innovative projects focussed on keeping children & young people safe. This included local Head teacher Sarah Clayton talking about the success of a whole school Protective Behaviours approach in increasing confidence among teaching and support staff, children and parents to talk about and address a range of safety issues including child abuse. You can watch the film of St Mary's Catholic Primary School staff and pupils talking about the work at this link <https://www.youtube.com/watch?v=mP-4u5oOoXA>

The whole school programme includes training for all school staff, information for parents and a set of lesson plans for all year groups. Since the conference Safety Net have had a number of enquiries from other schools keen to use the programme and over the coming year they will be working with the PSHE Lead Teacher from Brighton & Hove's Standards & Achievement Team to incorporate Protective Behaviours work more thoroughly into the PSHE curriculum and further develop the approach to ensure that the whole school community, including teachers, parents and support staff are working together to keep children safe

Survivors' Network



We spoke to Fabia Bates, the Director of Brighton based charity Survivors' Network to find out how they are helping survivors of childhood sexual abuse in Sussex.

“Survivors' Network was established in 1990 by a group of female survivors of childhood sexual abuse (CSA) to provide services that would support other CSA survivors. We've grown from those humble beginnings to an organisation that now offers a range of professional relevant services to all individuals aged 14 + who have experienced any form of sexual violence or abuse, helping them to grow stronger and heal from their experiences.

While each individual's experiences and reactions are unique, there are some responses to childhood sexual abuse that are common to many survivors:

- Anger
- Powerlessness
- Low self-esteem or self-hatred
- Depression
- Guilt, shame and blame

Many survivors adopt coping mechanisms (or survival strategies) to guard against feelings of terror and helplessness that they may have felt as a child. These past feelings can still have influence over the life and present behaviour of an adult survivor and survivors are often more vulnerable to repeat victimisation.

With this in mind, Survivors' Network works to help survivors:

- Feel more in control of their lives
- Have improved health and wellbeing
- Increase their ability to develop and maintain healthy relationships and
- Become more aware of the options and support available to them

We also work with supporters of survivors so that they are more able to provide that support. Survivors Network offers the following services:

Helpline: If you need to talk to someone who understands our helpline offers emotional support and signposting to self-identified women survivors (aged 14+) and supporters of any gender on Wednesday and Friday 7pm – 9pm Tel: 01273 720110 or text: 07717 999989 or email help@survivorsnetwork.org.uk

Drop-in: The Drop-in service is a safe, welcoming, informal space where self-identified women (age 16+) who have experienced sexual violence or abuse (no matter how or when it happened) can draw on strength and support from other survivors coming to terms with similar issues.

When: The drop-in is open every Monday and Thursday evening. Time: 7pm-9pm

Where: 6a Pavilion Buildings, BN1 1EE (above Al Duomo restaurant) Map: <http://goo.gl/maps/TiKNJ>

Advocacy: our holistic, independent advocacy service offers help and information on a range of issues; from employment and housing, to health and benefits and emotional support. We can provide information and support if you are thinking of reporting to the police, as well as acting as a single point of contact throughout the criminal justice system.

Training: In January 2015 Survivors Network will be running a training session to explore the definition, impact and barriers to disclosure of CSA. The session is for anyone who may support survivors of CSA and will increase their confidence in supporting and signposting them appropriately.”

For more information, please see their website www.survivorsnetwork.org.uk or follow on twitter [@SurvivorsnetBtm](https://twitter.com/SurvivorsnetBtm) [@FabiaBates](https://twitter.com/FabiaBates)

Over **18,600** children and young people talked to ChildLine last year about sexual abuse.

Source: [Can I tell you something? What's affecting children in 2013](#) - ChildLine review of 2012/13

Over **23,000** sexual offences against children were recorded in the UK last year.

Source: Jütte, S. et al (2014) [How safe are our children?](#) 2014. London: NSPCC. See Indicator 4

6.9% of children subject to a Child Protection Plan in Brighton & Hove as of 31st March 2014 had a concern of sexual abuse recorded

Source: [Brighton & Hove LSCB Annual Report 2013-14](#)



Inquiry's into Child Sexual Abuse

The Office of the Children's Commissioner launched a national Inquiry into Child Sexual Abuse in the Family Environment (Intrafamilial) on Thursday 3 July 2014. The Children's Commissioner for England promotes and protects children's rights in England. She does this by listening to what children and young people say about what matters to them and making sure adults in charge take their views and interests into account.

The Inquiry follows findings from their two-year Inquiry into **Child Sexual Exploitation in Gangs and Groups (CSEGG)** during which they spoke to many children who experienced sexual abuse in the family environment which had gone unaddressed.

The Inquiry will focus on abuse perpetrated by a family member, or which takes place in the family environment and has three aims:

- To assess the scale & nature of child sexual abuse in the family environment in England which is currently detected and undetected by statutory agencies, including within BME, LGBT and marginalised children and young people
- To assess inter-agency and individual practice for preventing and responding to child sexual abuse in the family environment, and its impact on children and young people
- To make recommendations for improving prevention, identification, child protection/law enforcement responses, and therapeutic intervention

You can read more about the inquiry at

www.childrenscommissioner.gov.uk/info/child_sexual_abuse_within_the_family_environment

In July 2014 Teresa May also announced a **Public Inquiry** which will look at historic claims of child sex abuse, investigating public bodies including Westminster, the BBC, children's homes and schools. This inquiry was launched in the wake of mounting public concern that "a variety of public bodies and other important institutions have failed to take seriously their duty of care towards children," says May.

Alongside the panel inquiry, a review of the Home Office's handling of allegations of child sex abuse will be led by NSPCC head Peter Wanless.

In her announcement to Parliament Teresa May said that she wants: "the work we are doing to reflect three principles. That our priority must be the prosecution of the people behind these disgusting crimes. That wherever possible – and consistent with the need to prosecute – we will adopt a presumption of maximum transparency. And that where there has been a failure to protect children from abuse, we will expose it and we will learn from it. I believe that the measures announced today do reflect those important principles."

Read her full speech at www.gov.uk/government/news/home-secretary-oral-statement-on-child-abuse or read Community Care's guide to the inquiry for further information:

www.communitycare.co.uk/2014/07/09/guide-theresa-may-inquiry-child-sex-abuse-need-know/

Child sexual abuse costs the UK
£3.2bn a year

Source: Saied-Tessier, A. (2014) *Estimating the costs of child sexual abuse in the UK*.

London: NSPCC.

Explanation: This is an estimated cost for 2012. It is difficult to calculate exact costs because child sexual abuse can take a number of different forms, and can affect victims in a number of different ways. This calculation is based on costs for health, criminal justice service, services for children and loss of productivity to society.

Nearly **30,000** registered sex offenders have
offended against children

Source: NSPCC (2012) FOI request

Explanation: This is based on data obtained by NSPCC from the National Police Improvement Agency under the Freedom of Information Act. There were 61,397 sex offenders in the UK required to register with the police as of 2012. Of these, 29,837 were required to register for committing sexual offences against children. 941 of these child sex offenders had re-offended since being on the register.

These figures only include people who have committed offences since the introduction of the Sex Offenders Act 1997.

Local & National Support

The organisations below help to provide advice and support to victims of sexual abuse and their friends and family.

NSPCC - The NSPCC give support to those who have experienced child abuse in the past, or for those who are concerned about a child in the present. www.nspcc.org.uk

Helpline: **0808 800 5000**
Email: help@nspcc.org.uk

Text: 88858
Make a report online



Life Centre - A Sussex based charity offering support and counselling to survivors of rape and sexual abuse. www.lifecentre.uk.com

Adults tel: **0844 847 7879**
Under 18s tel: **0808 802 0808**

Text: 07717 989 022
Email: [contact the charity online](http://www.lifecentre.uk.com)



NAPAC - NAPAC is the National Association for People Abused in Childhood, providing a helpline and support to people who experienced past abuse. www.napac.org.uk

Support line: **0808 801 0331**

Email: support@napac.org.uk



MOSAC - This charity aims to provide a unique and specialist service, offering practical and emotional support to non-abusing parents, carers and families. www.mosac.org.uk

Helpline: **0800 980 1958**

Email: enquiries@mosac.org.uk



Survivors Network – Offer's support and advice to anyone who has experienced any form of sexual violence. They also support friends, partners, and parents of those impacted by sexual violence. www.survivorsnetwork.org.uk

Contact: **01273 203380**

Text: 07717 999 989

Help Line: 01273 720110 (7pm to 9pm Wednesday & Friday)

Drop in: 7pm to 9pm on Monday & Thursday, 6a Pavilion Buildings, Brighton, BN1 1EE

Email: help@survivorsnetwork.org.uk



Independent Sexual Violence Advisors (ISVAs) provide support on a range of issues from employment and housing to health and benefits advice as well as acting as a single point of contact throughout any police reporting or legal proceedings. The ISVA team work with all genders from 14+

Contact: **01273 203380 ext 103**

Mankind – delivers specialist support services to men (18+) who have experienced childhood sexual abuse and/or adult sexual assault. www.mankindcounselling.org.uk

Telephone: **01273 911680**

Email: admin@mankindcounselling.org.uk



The Wise Project – offers advice and support to young people aged 13-25 who are victims of Child Sexual Exploitation.

Telephone: **07841 067 418**
07557 855 731

www.hoveymca.org.uk/information_advice_support/_wise_project

Email: wise.brightonandhove@ymcadlg.org



If you are concerned that a child has suffered or is at risk of sexual abuse call the front door for families on 01273 290400

Useful numbers:

Brighton & Hove LSCB office: 01273 292379 BHSCP@brighton-hove.gov.uk
Designated Doctor Safeguarding Children: 01273 265788
Designated Nurse Safeguarding Children: 01273 574680
Brighton & Hove Police Child Protection Team: 101
Local Authority Designated Officer: 01273 295643

