

Protecting children from harm:

A critical assessment of child sexual abuse in the family network in England and priorities for action

Summary: November 2015

Introduction

In July 2014, the Children’s Commissioner launched an Inquiry into child sexual abuse in the family environment. This is a critical analysis of the scale and nature of this form of child sexual abuse. Based on data examined by the Commissioner, it is likely that only 1 in 8 victims of sexual abuse come to the attention of the police and children’s services. Up to two thirds of all sexual abuse happens in and around the family.

Our evidence shows that children are sexually abused from a very young age, but most victims do not come to the attention of the police or children’s services until they reach adolescence. Accessing help from the police and children’s services is largely dependent on a child telling someone that they have been abused, but evidence examined by the Commissioner clearly demonstrates that most victims of sexual abuse in the family do not report it until they have the knowledge to recognise abuse and the words to describe it. Many victims of sexual abuse in the family will never tell – they may be worried about the impact telling will have on other family members, they may be fearful that they won’t be believed, and they may also be worried about what will happen next if they ask for help.

Child sexual abuse is the subject of considerable public concern. In March of this year, the Prime Minister announced that child sexual abuse had been prioritised as a ‘national threat’, on a par with serious and organised crime¹. The commitment of Government to tackling child sexual abuse is commendable. Child sexual exploitation is now widely acknowledged as a priority for local and national agencies with child protection responsibilities as a result. Social work reforms aim to further tackle abuse. However, the focus of much of the activity has been child sexual abuse which occurs in institutions, and child sexual exploitation which occurs in communities. Child sexual abuse which occurs within families has been largely absent from the national conversation.

This is despite the fact that the majority of victims of sexual abuse are abused by someone within their trusted circle – a family member or someone already known to the child. Sexual abuse within a family has a particular impact on victims and the wider family. The violation of trust, the barriers to accessing help, and the impact on the entire family structure, pose particular challenges to policy-makers and practitioners.

This report of the Inquiry calls for the practice of professionals in identifying children who are being sexually abused to be strengthened, children and young people to be equipped with the knowledge to recognise abuse and access help when they are worried, and processes for the investigation of sexual abuse to be improved to minimise their impact on children and maximise their effectiveness. It urges urgent action to reduce the prevalence of child sexual abuse in this country to the lowest in Europe.

¹ <https://www.gov.uk/government/news/pm-unveils-tough-new-measures-to-tackle-child-sexual-exploitation>

The Inquiry

Our definitions: Child sexual abuse 'in the family environment'

The Commissioner's Inquiry focuses on child sexual abuse which occurs in and around the family. This includes all relationships between the victim and the perpetrator which are mediated by the family or the family home. Parents/carers, siblings, aunts/uncles and cousins fall within this definition. Some adults who play a less direct role in the family life of the child have also been included, such as neighbours and family friends, where the familial context of the relationship between the victim and perpetrator would exacerbate the impact of abuse on the victim and undermine their ability to access help and support.

Our data and evidence

The Inquiry has gathered the largest and most comprehensive body of evidence ever on child sexual abuse in and around the family in England. A number of strands of evidence have been brought together to enable the Commissioner to draw a number of conclusions about child sexual abuse in the family in England, and to make a series of recommendations to address the problems identified.

- The University of Middlesex were commissioned to undertake a Rapid Evidence Assessment (REA) on intra-familial child sexual abuse². In total, 57,226 relevant articles were identified, with 296 subject to detailed analysis. This assessment established the research context for the Inquiry findings and suggested priorities for further investigation.
- Data has been gathered from every Police force in England on all victims of child sexual abuse over a two year period, April 2012 – March 2014. Data held by the Department for Education on statutory child protection processes has also been examined. An open "Call for Evidence" enabled all organisations working on this issue to provide case studies and other forms of evidence to the Inquiry.
- A series of site visits enabled the Commissioner and the Inquiry Panel to understand issues on the frontline. These issues were also explored in depth with a number of expert practitioners working in the field. Oral evidence sessions and a series of focus groups with experts in the field enabled the Inquiry to obtain in-depth evidence on a range of particularly challenging issues.
- The Commissioner also administered the largest ever survey of adult survivors of child sexual abuse in the family, with 756 respondents in total. This survey enabled the Commissioner to listen directly to adult survivors of child sexual abuse.

The scale of child sexual abuse in the family environment in England

Data on the proportion of child sexual abuse which occurs within the family is not recorded consistently by police forces. Where the relationship between the victim and the perpetrator is recorded rigorously, approximately two thirds of cases of child sexual abuse are within the family.

The scale of child sexual abuse can be measured by its *prevalence rate* – the proportion of adults in the population who were sexually abused as a child, and by its *incidence* – the number of new cases of child sexual abuse occurring over a specified time period. A recent study of child maltreatment found that 11.3% of young adults aged 18 – 24 had experienced contact sexual abuse during childhood³.

According to census data, there are approximately 11.5 million children and young people living in England. Based on the rate of 11.3% of young adults aged 18-24 reporting that they were a victim of contact sexual abuse at some point during childhood, it can be extrapolated that approximately 1.3 million children currently living in England will have been a victim of contact sexual abuse by the time they turn 18. Data gathered for this Inquiry relates to the two year period 1 April 2012 – 31 March 2014. It is therefore necessary to estimate the likely incidence of child sexual abuse over this particular period, in order to compare it with the actual number of cases which have come to the attention of the relevant authorities during the same period of time.

A statistical model (Multiple Systems Estimation) can be used to estimate the number of unknown victims of child sexual abuse. This approach has previously been used to obtain a 'dark figure' for the prevalence of modern slavery⁴. Much like modern slavery, victims of child sexual abuse may not report to authorities. Collating a list of potential victims from multiple sources can present only a partial picture of the likely incidence, and there is a 'dark figure' of victims who have not come to the attention of any agencies. The model can be used to estimate the number of these unidentified victims. It is important to note that this is an estimation for the incidence of child sexual abuse over the period from April 2012 to March 2014.

The model estimates that over the two year period April 2012 – March 2014, there were 400,000 – 450,000 victims of child sexual abuse in England. This represents all forms of child sexual abuse, not only sexual abuse which occurs within the family. It must also be stressed that this confidence interval depends on a number of assumptions, which, while sensible, cannot be completely confirmed from the data, and so it may be that its accuracy is optimistic. Over the same time period, approximately 50,000 victims of child sexual abuse were known to statutory agencies.

2 Horvath, M et al. (2014) 'It's a Lonely Journey': a Rapid Evidence Assessment on Intrafamilial Child Sexual Abuse, Children's Commissioner

3 Radford, L et al. (2011) Child abuse and neglect in the UK today, NSPCC
4 Silverman, B (2014) Modern slavery: an application of Multiple Systems Estimation



Child sexual abuse / Child sexual abuse in the family environment

April 2012 - March 2014

The data request was issued to police forces in October 2014 and therefore reflects the status of investigations at the time of data collation by each individual force.

This diagram refers to the number of victims of child sexual abuse, rather than crimes. However, the conviction data refers to the number of child sexual abuse related crimes for which perpetrators have been charged and convicted. Many of these convictions will relate to crimes which were committed before the specific period under analysis.

The relationship between victim and perpetrator is recorded inconsistently by police forces. Data analysed for this report enabled a specific cohort of victims of child sexual abuse in the family environment to be identified (c. 18% of all child sexual abuse victims). Where this information is recorded rigorously, child sexual abuse in the family environment accounts for approximately two thirds of all child sexual abuse.

This suggests that approximately 1 in 8 victims of sexual abuse come to the attention of statutory agencies. This finding is consistent with various other pieces of research. For example, a recent survey of adult survivors of abuse found that 70% of respondents had not reported their abuse to the police⁵, and research by the Ministry of Justice and Home Office has demonstrated that 1 in 7 adults who had been the victim of a sexual offence had reported it to the police⁶.

The reasons for which children who are sexually abused do not come to the attention of authorities have been explored in detail.

⁵ Smith, N, Dogaru, C and Ellis, F. 2015. Hear Me. Believe Me. Respect Me. A survey of adult survivors of child sexual abuse and their experiences of support services. University Campus Suffolk and Survivors in Transition.

⁶ An Overview of Sexual Offending in England and Wales, 2013. Ministry of Justice, Home Office and the Office for National Statistics

Identifying signs and symptoms

It is important that professionals can spot the signs and symptoms of sexual abuse. However, this is not a straightforward task – the signs and symptoms are not always clear cut, and there are few signs which very clearly and conclusively point to sexual abuse. Throughout our Inquiry, professionals have consistently highlighted the importance of schools and teachers in the identification of victims of child sexual abuse. Schools were identified as the location where a child would most likely go to for help, and teachers and other school staff were identified as the professional in the best position to identify it.

Victims of sexual abuse may tell teachers or other professionals directly, though it is more likely that their suspicions will be raised by the behaviour or presentation of a child or young person. This is the ‘grey area’, and professionals are called upon to act upon their judgement in the best interests of the child. Participants in site visits and oral evidence sessions highlighted the difficulty of initiating safeguarding processes in the absence of a direct disclosure of sexual abuse from a young person.

Evidence demonstrates that children and young people are often identified as victims of sexual abuse following the provision of support for other presenting problems, such as domestic violence in the family, challenging behaviour, or issues with their mental health. Some of these are problems which may already have been present in the child or young person’s life or environment, however, most of the factors which bring the child or young person to the attention of professionals may also result from the impact of the sexual abuse.

One of the things that none of us are good at is locating sexual abuse within a continuum of violence that occurs, so we are often only ever dealing with presenting issues. We are not very good at probing, ourselves, other forms of violence that could be linked to the main presenting issue. BME charity

I would say the majority are probably identified through school and probably identified through things like non-attendance or behaviour, or bullying or being bullied or behaviour issues rather than disclosures, I would have thought, though there will be because, clearly, children spend a lot of their life with teachers and education staff, who build good relationships.

Statutory organisation

Overall, as with any type of abuse there is an overreliance on children to come to statutory services to disclose abuse happening to them, while the focus should be on professionals being attuned to changes in behaviour of children, their emotional responses and other indicators that things may not go well in their lives and trying to respond to children appropriately to enable them to talk about their experiences.

Children’s charity

It seems to me that all professionals working with vulnerable children and children at risk of any kind need to have clearer training input around what child sexual abuse can look like. It rarely looks like a clear disclosure. To be honest, most professionals can deal with a disclosure fairly easily. It is about how you deal with all those other things which are in the land of grey area, where there are lots of concerns about sexual abuse but no one is saying anything. Children’s charity

Telling someone

Given the importance of a disclosure for unlocking statutory processes for protecting children, professionals must be equipped to enable and manage the disclosure process in the best interests of the child. The absence of a direct disclosure can prevent concerns being taken forward and investigated by statutory services, where thresholds for intervention are not met. All forms of evidence underlined the significance of a disclosure for initiating statutory processes and enabling children to access help.

Evidence examined by the Commissioner points to the importance of proactive enquiry. Where professionals ask children questions to follow up on concerns and suspicions, it not only provides an opportunity for children to tell, but also sends a message that they are willing and able to listen to the disclosure.

Disclosure may come. The most important part of our work is, really, first of all, to make a safe relationship with the child, to create a trusting environment and then see what comes up, but also enable them to learn to become more strong inside themselves. Disabled children's charity

You will get this other dynamic where a child says something very specific at school and it is getting ready for interview, and the police say to the school, "You mustn't ask any questions". Then, understandably, the school freezes, so you have the whole of the teachers, the classroom assistants, are all like "Whoa". The child tries to say a word and then they are all in panic mode. Then you have got this child who has been silenced by all these anxious professionals who are so terrified of saying the wrong thing that they won't say anything at all and keep changing the subject every time the child tries to say anything at all. "Oh, shall we get the bricks out?" Criminal justice charity

It feels almost like social workers have lost their role in Achieving Best Evidence (ABE) interviews. It is very much police led. What happens to children after a decision has been made around whether something is going to be taken forward to prosecution or not almost defines whether children get services or not. There are a significant number of children who do not get services where prosecution is not pursued. Children's charity

Substantiating child sexual abuse

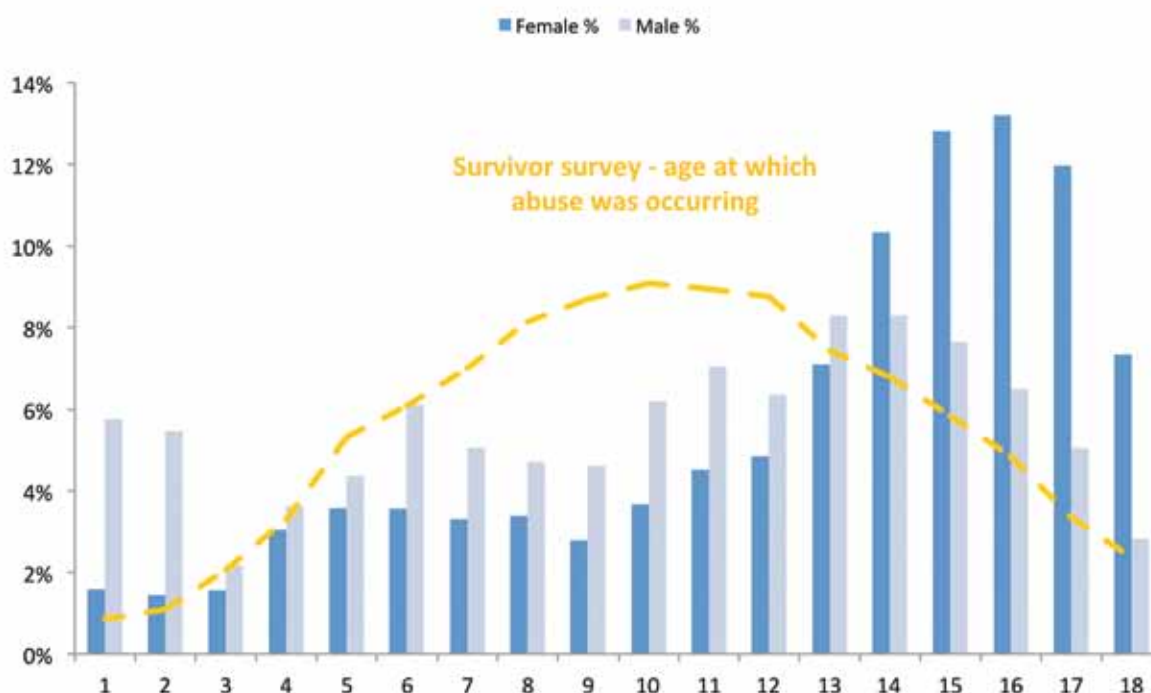
Professionals who engaged in this Inquiry regularly stated that Achieving Best Evidence interviews were frequently Police-led, with very limited input from social workers. During site visits, participants highlighted the perceived dominance of the criminal investigation, where the role of social workers in the interview process was sidelined; the practical challenge of bringing together the relevant police officers and social workers for an interview given the time constraints of a criminal investigation; a general lack of recent training on conducting Achieving Best Evidence interviews among police officers; a shortage of suitably trained social workers; and delays and shortages in skilled intermediaries to assist with interviews of younger children and children with physical/learning disabilities.

The age and gender of victims

Most victims of abuse report or come to the attention of the authorities from the age of 12. Younger children disclose abuse less frequently, as they are less likely to have the words to describe their experiences and may have fewer opportunities to tell someone. Abuse may have started much earlier. The increase in numbers from age 12 may in part reflect more children coming forward to report abuse as their knowledge of sex and relationships develops, and they recognise that their experiences are abusive. In general, responses to the survivor survey suggest that abuse is most likely to be happening at the age of nine.

The survivor's survey we carried out is limited in quantitative terms as it is self-selecting and historic. According to the survivor survey most victims of child sexual abuse within the family are female. The number of male and female victims of sexual abuse is relatively equal among younger children, with boys more prominent under the age of five. It is only towards adolescence that the difference in numbers of male and female victims widens. This trend may reflect patterns of abuse, though the evidence also suggests that the proportion of male victims is likely to be under-represented in the data gathered for the Inquiry. For example, boys and young men are less likely to tell someone that they have been sexually abused. Experts who participated in oral evidence sessions stated that there are additional pressures on boys not to tell, as male victims of sexual abuse may be stigmatised by the perceived impact of abuse on their masculinity.

Police data - child sexual abuse in the family environment - age at report/discovery



Children from Black and Minority Ethnic communities

Data held by statutory and non-statutory agencies relating to the ethnicity of victims is not recorded consistently. The proportion of victims in the data belonging to ethnic groups has been compared with the population of children in England, using census data⁷. Overall, it is evident that children from Asian/Asian British communities are particularly likely to be under-represented in the data held by statutory services. This issue has been explored in detail through a series of focus groups, each of which involved various Black and Minority Ethnic community activists and members, in addition to oral evidence sessions with experts on this specific issue.

It was found that, in some Black and Minority Ethnic communities, victims of child sexual abuse and members of their family are blamed, particularly if they are supportive of the victim and the innocence of the perpetrator is prioritised. In such cases, the 'honour' of the victim and/or family is brought into disrepute by the allegation and not that of the perpetrator. In some cases, participants highlighted that family members felt that they could manage the situation themselves, and in many cases decisions and interventions were based on maintaining 'honour', such as covering up the abuse, relocating the victim and/or family, and forced marriage.

In relation to the scale, what we are clear about is that there are major barriers for marginalised children and families from engaging with any agents of the state or statutory authorities. These barriers are well documented and include cultural expectations, fear of social workers and particularly the perceived risks for families whose status in the UK is uncertain. Children's charity

Children with learning/physical difficulties

It is not possible to draw conclusions regarding the number of children in the population of child sexual abuse victims known to statutory and non-statutory authorities with a physical/learning disability. However, it was identified in our Rapid Evidence Assessment that victims of child sexual abuse with a physical/learning disability may face particular barriers to reporting abuse, and as such, may be less likely to access help from statutory services, even though they are more vulnerable to abuse⁸. This issue has been explored in detail through focus groups and oral evidence sessions.

It is clear from the evidence received that children with a disability which impairs their communication skills are less able to report abuse directly. Furthermore, the signs and symptoms of abuse, when presenting in children with a learning disability, may not be evident to some practitioners. Children with a learning disability may exhibit behaviour which, although indicative of sexual abuse, may be attributed to the learning disability itself.

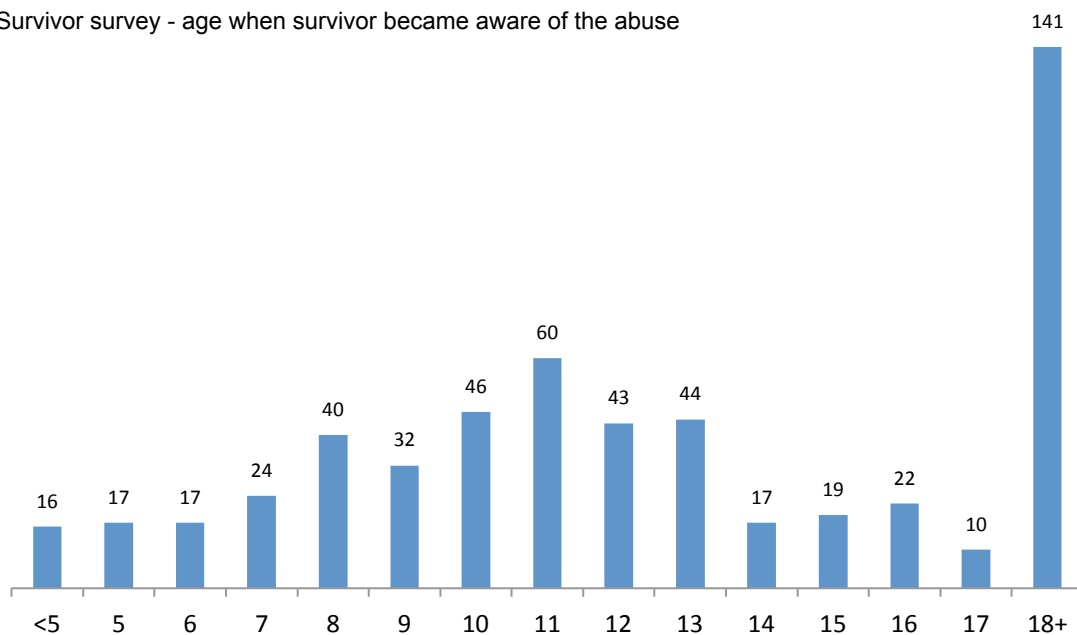
My concern is that they are often displaying very aggressive or self-harming behaviour and it gets put down to the syndrome, the learning disability or whatever it is that is going on for them. I think we need to explore a little bit more what the roots of that are. I do not think that, within the thinking about that, anybody is thinking, "Has there been abuse?" Disabled children's charity

7 <http://www.ons.gov.uk/ons/about-ons/business-transparency/freedom-of-information/what-can-i-request/previous-foi-requests/population/ethnicity-and-religion-by-age/dc2101ew--ethnic-group-by-sex-and-age.xls>

8 Horvath, M et al. (2014) 'It's a Lonely Journey': a Rapid Evidence Assessment on Intrafamilial Child Sexual Abuse, Children's Commissioner

Recognition and telling

Survivor survey - age when survivor became aware of the abuse



Previous research instigated by the Children's Commissioner into recognition, telling and getting help from a child's perspective has very clearly outlined the problems with approaches to child protection which place the onus on children to come forward to report abuse⁹.

Survivor survey respondents stated that, in general, they became aware of the abuse a considerable period of time after it has commenced or occurred. For 141 respondents (26% of respondents who answered this question), they themselves did not become aware that they had been sexually abused until they were an adult. Children might not realise that they have been sexually abused for a number of reasons. They may not have the words to describe what is happening to them. Some respondents pointed to sex education as a means of enabling recognition, in contrast to those who explicitly stated that not having had any sex education undermined their ability to understand that the abuse was wrong. The importance of sex and relationships education for enabling recognition of abuse was highlighted across all forms of evidence gathered by the Inquiry.

I became aware of abuse in my adult years, when I spoke to other adults who had not experienced the same brutality ...once I became aware I stopped talking about it through sheer embarrassment and feeling a dirty victim. I thought other people would see me as weak and take advantage of my weakness. So it is hid to this day. Hearing other people now saying child abuse in any form is not acceptable gives me the courage. Adult survivor

I remember learning something at school and telling my mother that was what my dad was doing to me. Adult survivor

⁹ Cossar, J., Brandon, M., Bailey, S., Belderson, P., Biggart, L. and Sharpe, D. (2013) 'It takes a lot to build trust'. Recognition and Telling: Developing Earlier Routes to Help for Children and Young People. London: Office of the Children's Commissioner

A consistent finding across all evidence gathered for the Commissioner's Inquiry is that it often takes years to disclose sexual abuse, particularly for younger victims and others who do not have the capacity to disclose their abuse directly. Issues around disclosure identified through evidence examined by the Inquiry echo findings from previous research¹⁰.

Telling was often indirect. For example, participants in focus groups raised examples of cases where children and young people have been chastised for expressing discomfort or unhappiness about spending time with a particular adult. These adults were subsequently found to be sexually abusing the children, though their disclosure was not understood. In these cases, a failure to listen to children and young people has resulted in a failure in identification of abuse. Many survivor survey respondents stated that they 'tried to tell' someone, but these attempts to get help were thwarted.

I told my mother when I was seven that my uncle was doing things to me that hurt, and I didn't like it; she said stop being so silly and he was just being friendly. Adult survivor

I told my parents, but they didn't believe me. Adult survivor

I almost spoke to a head teacher when she stopped me running away and I was upset - I almost told her there was - I wanted to but didn't because there was another child in the room with us - I'm sure I would have told her there was if we had been on our own. Adult survivor

Our evidence highlights the barriers to telling someone about sexual abuse – one of the major reasons for which so much sexual abuse remains hidden. Evidence gathered by the Commissioner has highlighted a number of barriers to telling, including self-blame and guilt, fear of the perpetrator, fear of the consequences and being judged, loyalty to other family members, a lack of opportunities to tell someone, and a distrust of professionals. Victims may fear the breakdown of the family, and take responsibility for preventing the shame which they perceive would be felt by other family members if the abuse was discovered. Shame may also act as a barrier to accessing services for help. Where the household income is solely or largely dependent on the perpetrator, victims may feel unable to tell anyone. A fear of being the subject of gossip or bullying at school or in the community was also cited as a barrier to initial telling.

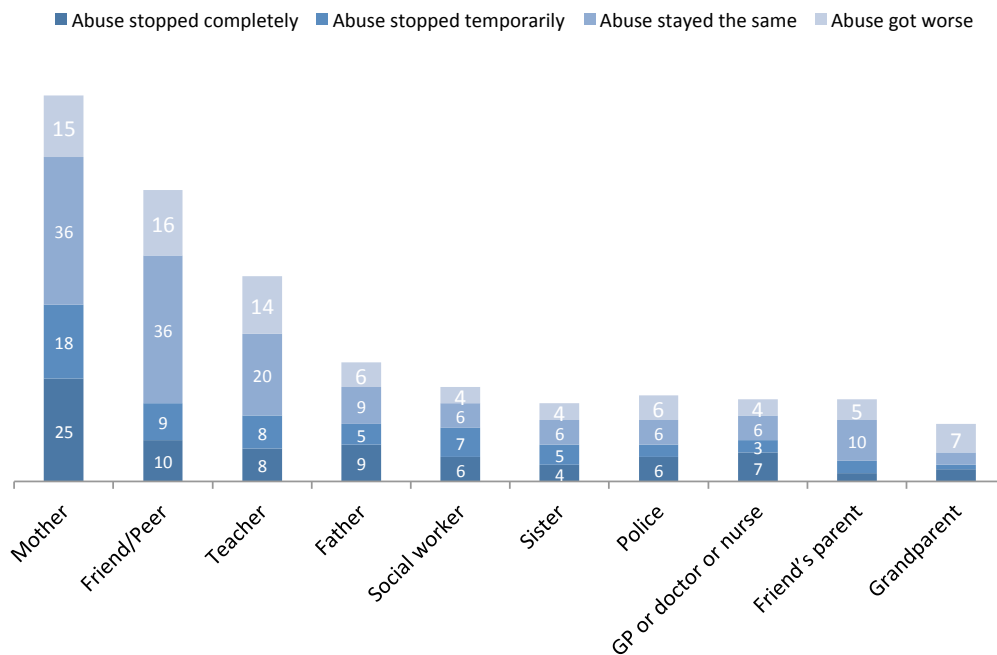
There are various inhibitors that stop them from disclosing, such as not wanting to upset their mother, who maybe did not know that they were being abused in the family environment. Then, even when they do so, they will not be believed because the family will turn against them, because they do not believe that it actually is true that this charming manipulative sex offender was actually interfering with all the children. So they will probably turn against them. They will probably make attempts to disclose at various stages in their life and probably will not be believed. Criminal justice charity

My parents were/are very well respected in the local community, very popular, no one would have believed me. All the signs were there at the time, and no one did anything to keep me or my sister safe. Adult survivor

I didn't realise it was abuse until he'd made me do too much, by then I was so ashamed I didn't have the words or the confidence in myself...I thought I would be in trouble and that I would hurt my family. I was just a little girl :'(Adult survivor

¹⁰ Allnock, D and Miller, P. (2013) No one noticed, no one heard: a study of disclosures of childhood abuse. NSPCC

Survivor survey - who did you tell / did the abuse stop?



The identity of the person the respondent tried to tell and the outcome of their disclosure are striking. The majority of respondents tried to tell their mother, a friend/peer, or a teacher. Our evidence suggests that children and young people will tell a particular person if they believe that they are prepared to listen to and believe their account, and provide some form of help or support. This finding reinforces previous research instigated by the Children's Commissioner.¹¹

The graph demonstrates a pattern whereby telling, regardless of the person to whom the child has told, does not always lead to the abuse stopping. This finding is reinforced by another recent survey of adult survivors of abuse, which found that in only 11% of cases did abuse stop at the same time as telling someone¹².

¹¹ Cossar, J., Brandon, M., Bailey, S., Belderson, P., Biggart, L. and Sharpe, D. (2013) 'It takes a lot to build trust'. Recognition and Telling: Developing Earlier Routes to Help for Children and Young People. London: Office of the Children's Commissioner

¹² Smith, N, Dogaru, C and Ellis, F (2015) Hear Me. Believe Me. Respect Me. A survey of adult survivors of child sexual abuse and their experiences of support services. University Campus Suffolk and Survivors in Transition.

Impact of abuse

Child sexual abuse has a significant impact on the lives of victims and survivors. Being abused by a member of the family, or in the family home or environment, in itself has a significant impact on victims. Evidence gathered for this Inquiry demonstrates that the impact of child sexual abuse linked to the family stems from three particular aspects of victim experience – the impact of the abuse, the impact of the family reaction to the abuse, and the impact of intervention by statutory and non-statutory services.



Professionals who engaged with the Inquiry stated that inappropriate sexual behaviour and harmful sexual behaviour may result from sexual abuse. This reinforces the findings of the REA, which also found that although most victims of child abuse do not display harmful sexual behaviours, it seems that being a victim of abuse or neglect can increase the likelihood of displaying harmful sexual behaviours as an adolescent. Although the biggest impacts reported in the survivor survey were on mental health and emotional wellbeing, in other forms of evidence capture, such as the site visits, family breakdown was emphasised. The process of family break up can be very distressing for victims of child sexual abuse within the family. Abuse by a family member or someone connected with the family is a major breach of trust, which is likely to have a considerable impact on victims and their ability to form relationships with others.

Victims of sexual abuse linked to the family may retain a loyalty to the perpetrator, particularly where the perpetrator is a close family member. This may be a source of tension with the protective parent/carer, as the victim may wish to retain some contact with the perpetrator.

In responses to the survivor survey and during focus groups, some survivors communicated the feelings of disappointment and distress which resulted from initial contact with statutory services. Survivors reported not being believed or feeling that they were in some way held responsible for their abuse, and even when they were believed, there was a common perception that adequate services had not been provided to meet their particular needs.

The impact on the entire family is enormous. There is separation and destruction of the family unit used as part of the offending modus operandi. The child is isolated emotionally, the child will often have to continue seeing the perpetrator and because the perpetrator is often a parent or parent figure, the child will want to see the perpetrator. This will be contrary to what the protective parent will want, which creates conflict in the family and further separation. Helpline provider

When it is revealed, the pressure on those women or children, particularly if they are going to go through the criminal justice route, is to withdraw their statements, to end the matter, to deal with it internally through internal structures – the kind of very structures that are often colluding in the whole process such as community elders, religious leaders, faith leaders, who are often part of the problem. There is a lot of pressure on women to withdraw and that pressure is enormous. It does not stop. You get the whole extended family having wide family meetings, trying to reconcile, trying to resolve. It starts from subtle coercions to even far more intimidating atmospheres in which women are trying to pursue justice of one kind or another. BME charity

Conclusions

1. Using data gathered for this Inquiry, it is estimated that 1 in 8 victims of sexual abuse come to the attention of statutory authorities. The scale of child sexual abuse is therefore much larger than is currently being dealt with by statutory and non-statutory services. The physical and emotional impact of child sexual abuse persists into adulthood for many victims. It is difficult to measure the scale of child sexual abuse in the family environment specifically, owing to serious deficiencies in data collection. Nonetheless, the Commissioner estimates, on the basis of evidence submitted to the Inquiry, that child sexual abuse in the family environment comprises around two thirds of all child sexual abuse. Victims are more likely to be female than male, though males are likely to be under-represented in the data examined.
2. Abuse by a family member or someone connected with the family is in itself a barrier to victims getting help. Child sexual abuse in the family circle encompasses a range of perpetrators, the majority of whom are male, with approximately one quarter of cases involving a perpetrator under the age of 18, such as a brother or cousin. Many survivors have told us that they were abused by several perpetrators, and in many cases, these perpetrators were known to each other. The disclosure or discovery of sexual abuse within a family is likely to have an enormous impact on the victim and their relationship with other family members. Fear, coercion, loyalty to the perpetrator and/or a desire to protect other family members may prevent a victim of child sexual abuse in the family environment from telling anyone. Moreover, many victims are unable to recognise until much later in life that they have been sexually abused. Their emotional response to the abuse is manifested in a number of ways and should be visible to professionals.
3. Evidence examined for this Inquiry demonstrates that sexual abuse in the family has been most likely to occur around the age of nine, though victims are most likely to come to the attention of authorities in adolescence. Younger children, particularly those under the age of five, are under-represented. They may not be able to recognise that they have been sexually abused, and perpetrators may normalise their behaviour. The competence to gather evidence from young children is variable. Children may not seek help for abuse, as they are worried about the consequences of service intervention for themselves and other family members, and they may have been threatened by the perpetrator.
4. There is a high level of commitment to tackling this issue among professionals working with children. However, statutory services are largely disclosure-led, with the burden of responsibility placed on the victim. It is unrealistic to expect victims of child sexual abuse linked to the family to disclose abuse. Disclosure-led approaches are demonstrably failing the majority of victims of child sexual abuse in the family environment, as many victims of child sexual abuse in the family environment are not identified and do not receive help.
5. Professionals will come into contact with children who are victims of sexual abuse linked to the family. Victims are likely to exhibit some sign or indicator, though in some instances this will not always be very obvious or conclusive. Proactive enquiry is therefore necessary to substantiate concerns and activate processes for the investigation of abuse and protection of the child. The identification of child sexual abuse is a considerable challenge to professionals. Evidence examined by the Commissioner suggests that child sexual abuse often comes to the attention of statutory and non-statutory agencies as a result of a secondary presenting factor, which becomes the focus of intervention. Child sexual abuse, the underlying issue, may not be identified.
6. Despite a high level of commitment to tackling this issue across all services, the evidence demonstrates that professionals are not always confident in their ability to identify child sexual abuse. Where there are concerns and suspicions, levels of knowledge and confidence among professionals in all sectors on how to progress concerns may vary. Some professionals are hesitant to seek information or clarification from a child for fear that such actions will be construed as 'leading the victim' and encouraging a false or inaccurate account, jeopardising the potential outcome of the criminal justice process.
7. Some groups of children and young people are under-represented in the criminal justice system as victims of child sexual abuse in and around the family. Victims from some Black and Minority Ethnic groups may face additional barriers to accessing help. In some Black and Minority Ethnic communities, victims of sexual abuse and their families are blamed, particularly if they are supportive of the victim and the 'honour' of the perpetrator is brought into disrepute by the allegation. Family members may also feel that they can manage allegations of child sexual abuse themselves, though these solutions generally involved silencing the victim. They were disinclined to involve statutory services, primarily as a result of distrust.

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8. Victims of child sexual abuse in the family with learning/ physical disabilities may be less likely to be identified as victims, as they face additional communication barriers to disclosure, and the signs of abuse may be misattributed to the disability. Children with a disability which impacts upon their communication skills are less able to report abuse directly. The signs and symptoms of abuse, when presenting in children with a learning disability, may not be evident to some practitioners as it can be masked by behavioural responses attributed to the disability. Children with learning/physical disabilities are particularly reliant on their parents/carers and personal care. Where the abuser is an immediate family member, victims may find it particularly difficult to access help.
 9. The substantiation of an allegation or suspicion of abuse requires different levels of proof in the family and criminal courts, though in practice, evidence put forward to this Inquiry suggests that the criminal burden of proof ('beyond reasonable doubt') is often given primacy in joint investigations. Achieving Best Evidence interviews are the tool used by the police to substantiate abuse and maximise the evidential value of the account given by the child for criminal courts. However, the quality of these interviews is inconsistent, and there are delays and shortages in skilled intermediaries to assist with interviews of younger children and children with learning/ physical disabilities. According to evidence examined by this Inquiry, the role of social workers in the interview process has diminished, leading to concerns that the substantiation of sexual abuse is often delegated to the police using the criminal burden of proof.
 10. There are three aspects to the impact of sexual abuse within a familial setting. First, the sexual abuse itself, the breach of trust between victim and perpetrator, and for many victims of child sexual abuse linked to the family, abuse leads to problems with mental and physical health, relationships and behaviour in general. Second, the reaction of the family – the disclosure or discovery of sexual abuse within a family is likely to have a significant impact on the family and the victim's relationship with other family members, and this reaction may mitigate or exacerbate the impact on the victim. Third, the intervention of statutory and non-statutory services, whereby being removed from the family, describing abuse to professionals or giving evidence may re-traumatise the victim. In each case, the impact of sexual abuse is likely to cast a long shadow over the life of the victim.

Recommendations

1. The Commissioner recommends that a strategy for the prevention of child sexual abuse, in all its forms, is developed and implemented by relevant Government departments, including the Department for Education, Department of Health and Home Office.
2. The Commissioner recommends that the Government explores how to strengthen the statutory responsibilities of organisations and professionals working with children, as part of their duty of care to children and young people, to ensure that all professionals work together more effectively to identify abuse.
3. The Commissioner recommends that the Government recognises the importance of and coordinates all sources of support for children and families where there is a particular risk of sexual abuse, including the Troubled Families programme, to ensure that victims are more effectively identified and helped.
4. The Commissioner recommends that all schools equip all children, through compulsory lessons for life, to understand healthy and safe relationships and to talk to an appropriate adult if they are worried about abuse.
5. The Commissioner recommends that all schools take the necessary steps to implement a whole-school approach to child protection, where all school staff can identify the signs and symptoms of abuse, and are equipped with the knowledge and support to respond effectively to disclosures of abuse. This should be supported by the Department for Education. In addition, a new role or embedded social worker should be considered.
6. The Commissioner recommends that all teachers in all schools are trained and supported to understand the signs and symptoms of child sexual abuse. This should be part of initial teacher training and ongoing professional development, with the latter requirement reflected in the statutory guidance on Keeping Children Safe in Education.
7. The Commissioner recommends that all Achieving Best Evidence interviews are undertaken in the presence of an intermediary or a suitably qualified child psychologist, and that appropriate provision for this is made by the Ministry of Justice and police forces.
8. The Commissioner recommends that, from the moment of initial disclosure, children receive a holistic package of support, tailored to their needs, including therapeutic support to help them recover from their experiences. The Barnahus model should be piloted in England, in order to determine its potential for improving victims' experiences of statutory interventions, including the criminal justice process
9. The Commissioner further recommends that Government reviews the process of inter-agency investigation of child sexual abuse, including the role of the police and children's social workers, to ensure that the process minimises the potential for re-traumatisation, whilst maximising the possibility of substantiating abuse and taking effective protective action and taking the views of the child into account.
10. The Commissioner recommends that the Home Office amend and update the Annual Data Requirement to ensure that all police forces record this aspect of child sexual abuse-related crimes, and ensure compliance among all police forces.
11. The Commissioner also recommends that children and young people with harmful sexual behaviour receive proportionate and timely intervention to reduce the risk of this behaviour continuing into adulthood.

Help and support

If you are a child or young person who is affected by sexual abuse you can call ChildLine for advice and support 24 hours a day for free on 0800 1111.

If you are an adult who is concerned that a child or young person may be being abused call the NSPCC helpline on 0808 800 5000 or in an emergency call the Police.

If you are an adult who experienced sexual abuse as a child and would like to talk to someone about it you can contact:

- National Association for People Abused in Childhood – 0808 801 0331
- Open 10am – 9pm Monday to Thursday, 10am – 6pm on Friday. NAPAC offer specialist support for people abused in childhood.
- Rape Crisis – 0808 802 9999
- The helpline is open 12am - 2.30pm and 7-9.30pm. Call the national Rape Crisis helpline to speak to a trained worker, who can also tell you where your nearest services are located if you would like face-to-face support or counselling.
- The Survivors Trust - 0808 801 0818
- Find help, support and advice in your area on The Survivors Trust website at www.thesurvivorstrust.org

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