

CHILD SEXUAL ASSAULT

Facts and Statistics



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About Bravehearts

Bravehearts has been actively contributing to the provision of child sexual assault services throughout Australia since 1997. As the first and largest registered charity specifically and holistically dedicated to addressing this issue in Australia, Bravehearts exists to protect Australian children against sexual harm.

Our Mission

To prevent child sexual assault in our society.

Our Vision

To make Australia the safest place in the world to raise a child.

Our Guiding Principles

To, at all times, tenaciously pursue our Mission without fear, favour or compromise and to continually ensure that the best interests, human rights and protection of the child are placed before all other considerations.

Our Guiding Values

To at all times, do all things to serve our Mission with uncompromising integrity, respect, energy and empathy ensuring fairness, justice, and hope for all children and those who protect them.

The 3 Piers to Prevention

The work of Bravehearts is based on *3 Piers to Prevention: Educate, Empower, Protect* - Solid Foundations to Make Australia the safest place in the world to raise a child. The 3 Piers are:

Educate Education for children and young people

Empower Specialist counselling and support

Training for adults, professionals, business and community

Risk Management 'ChildPlace Health & Safety' Services

Community engagement and awareness

Protect Lobbying & Legislative Reform

Research

Introduction

This document contains statistics and facts on child sexual assault, sourced from the most recent national and international research and compiled by Bravehearts. Every effort has been made to ensure complete references have been provided.

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Prevalence

“There were about 5.7 million children in Australia in 2016. It’s difficult to know for sure how many children are sexually abused, but best estimates put it at roughly 8 per cent of boys and 20 per cent of girls. Put all those numbers together, and you could fill the MCG eight times over with children living in Australia right now who have been or will be sexually abused. Of those instances of abuse, 90 to 95 per cent will be committed by men” (Gilmore, 2017).

Survey studies

According to the most recent Australian Bureau of Statistics Personal Safety Survey (ABS, 2017), 11% of women and 5% of men in Australia report having been sexually abused before the age of 15 years. In total, the ABS estimates that approximately 1,410,100 people living in Australia experienced sexual abuse before the age of 15. Greater than half of these respondents (58%) report being sexually abused for the first time before the age of 10 years.

An Australian birth cohort study found that at age 21 years, child sexual abuse was self-reported by 19.3% of males and 30.6% of females (Mills, Kisely, Alati, Strathearn & Najman, 2016).

A review of child sexual abuse studies in Nordic countries found prevalence rates for broadly defined child sexual abuse of between 3 - 23% for boys and 11 - 36% for girls. The prevalence rates for contact abuse, meanwhile, were 1 - 12% for boys and 6 - 30% for girls, while the prevalence rates for penetrating abuse were 0.3 - 6.8% for boys and 1.1 - 13.5% for girls (Kloppen, Haugland, Göran Svedin, Mæhle & Breivik, 2016).

A review of child sexual abuse studies in Japan found a range of contact abuse for females of 10.4 - 60.7%, while the prevalence of contact abuse for males (from just one study) was 4.1%. Further, the rate of penetrative sexual abuse for females was found to range from 1.3 - 8.3%, and for males from 0.5 - 1.3% (Tanaka, Suzuki, Aoyama, Takaoka, & MacMillan, 2017).

A nationwide survey study of youth in the US found that 14.3% of girls aged 14 - 17 years and 6% of boys this same age said they had experienced a sexual assault during their childhood. Completed rape occurred to 4.5% of girls. Sexual assault by a known adult occurred to 4.3% of girls and 1.1% of boys (Finkelhor, Turner, Shattuck, & Hamby, 2014).

High rates of sexual victimisation were found in research with children, young people and young adults in the UK: 7.2% of females aged 11 - 17 and 18.6% of females aged 18-24 years reported childhood experiences of sexual victimisation by any adult or peer that involved physical contact, from sexual touching to rape (Radford, Corral, Bradley and Fisher, 2013).

A 10 year cohort study of 1,745 adolescents in Victoria, Australia collected retrospective data on sexual abuse prior to the age of 16 years, and found rates of 17% for females and 7% for males (Moore, Romaniuk, Olsson, et al., 2010).

Price-Robertson, Bromfield and Vassallo’s (2010) summary of Australian prevalence studies estimates that 4 - 8% of males and 7 - 12% of females experience penetrative child sexual abuse and 12 - 16% of males and 23 - 36% of females experience non-penetrative child sexual abuse.

Research with a randomly selected sample of Australian women showed that 45% reported experiencing at least one unwanted sexual incident by 16 years of age, by family members (31%), friends (54%) or strangers (14%). The large majority (85%) of cases of abuse involved some contact, with intercourse occurring in 20% of cases (Watson & Halford, 2010).

In a review of 38 independent articles corresponding to 39 prevalence studies, Pereda and colleagues (2009) found that the most frequently reported prevalence rate of child sexual abuse for men is below 10%, while for women the most frequent rate is between 10 and 20%. In almost 30% of studies reviewed, however, the prevalence rate for females was approximately 30% (Pereda, Guilera, Forns, & Gómez-Benito, 2009).

Based on a review of population-based studies from developed countries (Australia, New Zealand, Canada, and USA), researchers estimate that between 5 and 10% of girls and up to 5% of boys are exposed to penetrative sexual abuse, and up to three times this number are exposed to any type of sexual abuse (Gilbert, Spatz-Widom, Browne, Fergusson, Webb & Janson, 2009).

A longitudinal cohort study of Queensland mothers and babies found that at age 21, 10.5% of males and 20.6% of females reported non-penetrative child sexual abuse before the age of 16 years and 7.5% of males and 7.9% of females reported penetrative child sexual abuse before the age of 16 years (Mamun, Lawlor, O'Callohan, Bor, Williams. & Najman, 2007).

A retrospective cohort study with 17,337 adults in the USA showed that 1 in 4 women and 1 in 6 men were sexually abused before the age of 18 years (Dube, Anda, Whitfield, et al., 2005).

Administrative data

Administrative data provides an indication of the number of child sexual assault cases that come to the attention of authorities. It does not provide a reliable estimate of the extent of child sexual assault in the community because: the majority of victims/survivors do not report their experiences to police and there are inconsistencies in whether and how data is recorded and counted (Tarczon & Quadara, 2012).

Using data from a meta-analysis of 217 studies published between 1980 and 2008, and from administrative sources including Canadian child protection services and police, Alaggia and colleagues (2017) report that rates of child sexual abuse are 30 times greater in studies relying on self-reports (127 in 1,000) than in those based on administrative data sources (4 in 1,000).

In 2016-17, there were almost 380,000 notifications to child protection involving around 233,800 children, a rate of 42.8 per 1,000 children in Australia. Of the notifications, 47% (approx. 177,000) were investigated, with almost 68,000 substantiations (after investigation) relating to around 49,300 children—a rate of 9.0 per 1,000 children. Sexual abuse was the reason for substantiation for 12% of children (Australian Institute of Health and Welfare, 2018).

Between 2012-13 and 2016-17, the numbers of child protection notifications, investigations and substantiations all rose (by 39% for notifications; by 45% for investigations; by 27% for substantiations). Between 2012-13 and 2016-17, the number of children with child protection notifications rose by 27% from 184,216 to 233,795, and the rate of children who were the subject of substantiations rose from 7.8 to 9.0 per 1,000 children (AIHW, 2018).

During 2016, the number of Australian victims aged 0 - 19 years for the following crime categories were as follows:

- Blackmail extortion = 60
- Kidnapping/abduction = 187
- Total Robbery = 1,881
- Sexual assault = 12,956 (Australian Bureau of Statistics, 2017).

During 2016 there were 23,052 victims of sexual assault recorded by police in Australia. Of these, 20.2% were aged 10 - 14 years, and a further 23.5% were aged 15 - 19 years (ABS, 2015). The majority of all sexual assault victims were female (81.8%). Female victims of sexual assault aged 15 - 19 had the highest victimisation rate of any age group, at a rate almost seven times the overall rate for sexual assault. The national victimisation rate for sexual assault for 2016 was 95.5 victims per 100,000 population, while the rate for females aged 15 - 19 years was 661.9 per 100,000 population (ABS, 2017).

A study of trends in reports of child sexual abuse over a 20 year period in Victoria, Australia, showed that there was a statistically significant increase in reporting rates, from 372.25 in 1993 to 692.15 per 100,000 in 2012. Also from 1993 - 2012, the rate of reporting among boys increased by 2.6-fold, whereas there was a 1.5-fold increase among girls. In 1993, the sex ratio for reporting of girls to boys was 2:1; by 2012 this ratio changed to 1.14:1, meaning that a boy in Victoria was almost as likely as a girl to be the subject of a report of suspected child sexual abuse (Mathews, Bromfield, Walsh, Cheng & Norman, 2017).

In 2014 in Australia, the rate of sexual assault victimisation was highest for females aged 10 - 14 years of age at 559 per 100,000 females in that age group (c.f. a rate for males in this age group at 114 per 100,000). For females aged 15 - 24 years, the rate of sexual assault victimisation was 419 per 100,000 female population compared with 48 per 100,000 for males (Australian Institute of Criminology, 2016).

Data from the Queensland Police Service Annual Statistical Review 2014-15 showed that females aged between 10 - 19 years were most likely to be victims of sexual offences. Females in this age group comprise 44% of total victims of sexual offences (Queensland Police Service, 2015).

Data from the Queensland Police Service Annual Statistical Review 2014-15 showed that of all sexual offence matters dealt with, 62% involved victims under the age of 18, 53% under the age of 16 and 42% between the ages of 0 - 14 years. This same data also showed that 79% of sexual offence victims under the age of 18 were female (QPS, 2015).

Rates of sexual assault among young people are increasing. Between 1999 and 2003 the increase among the 0 - 14 year age group was more than double that of people aged 15 years and over (37% compared with 17%). Rates of sexual assault increased for both males and females aged 0 - 14 years, but the increase was greater for females (27% compared with 19% for males) (Bricknell, 2008).

The US National Incidence Study of Child Abuse and Neglect (NIS) gathers data from both (1) child protective service agencies and (2) community professionals who encounter maltreated children during the course of their work in a variety of agencies, including schools, hospitals, law enforcement, day care, and shelters. The NIS integrates the cases obtained from the multiple sources, generating national estimates of the numbers of abused and neglected children. Nearly 3 million children (an

estimated 2,905,800) experienced Endangerment Standard maltreatment during the most recent NIS study year (2004-05). This corresponds to one child in every 25 in the United States. Of these children, 29% were abused (77% were neglected). Most abused children (57%, or 476,600 children) were physically abused, while 22% (or 180,500 children) were sexually abused. The most recent implementation of the NIS showed that the number of identified incidents of child sexual abuse had decreased 47% from 1993 to 2005-06 (Sedlack, et. al., 2010).

Meta-analyses and international comparisons

A meta-analytic study examining the prevalence of child sexual abuse in China found no significant difference in prevalence between males (9.1%) and females (8.9%). The prevalence of child sexual abuse was significantly higher in studies from mainland China than in those from Hong Kong/Taiwan (Ma, 2018).

A review of a series of meta-analyses designed to examine the prevalence of child maltreatment across the globe found that combined prevalence rates for child sexual abuse were higher in Australia and North America than in Asia and Europe (Stoltenborgh, Bakermans-Kranenburg, Alink & van IJzendoorn, 2014).

A meta-analysis of studies examining the prevalence of child sexual abuse in 24 countries found rates of contact abuse of 13% for girls and 6% for boys (Barth et al., 2013).

A review of rates of child sexual abuse across 55 studies from 24 countries found that there was much heterogeneity in rates reported, with rates for females ranging from 8 - 31% and for males ranging from 3 - 17% (Barth, Bernetz, Heim, Trelle & Tonia, 2012).

Stoltenborgh and colleagues (2011) report on a meta-analysis of child sexual abuse prevalence rates as reported in 217 published studies from between 1980-2008, including 331 independent samples with a total of 9,911,748 participants. The prevalence of child sexual abuse from self-report studies in this meta-analysis was 18% for girls and 7.6% for boys (Stoltenborgh, van IJzendoorn, Euser and Bakermans-Kranenburg, 2011).

Several meta-analyses have shown lower rates of childhood sexual abuse for Asia and China; for example:

- Stoltenborough et al. (2011) found rates for Asian women of 11.3% vs 18.0% for all other countries. For men, the comparison was 4.1% for Asia vs. 7.6% for all countries
- Ji, Finkelhor and Dunne (2013) found 27 Chinese prevalence studies of sexual abuse and confirmed that the pooled rates for women for contact and penetrative sexual abuse (9.5% and 1.0% respectively) were significantly lower than comparable international estimates.

In addition, reviews of sexual abuse and ethnicity in the US have consistently found rates among Asians to be lower (e.g., Zhai & Gao, 2009).

Indigenous Australians

In 2016–17, 13,749 (46.0 per 1,000) Aboriginal and Torres Strait Islander children were the subject of a child protection substantiation - almost 7 times the rate of non-Indigenous children (6.8 per 1,000). Indigenous children had a lower percentage of substantiations for sexual abuse than non-Indigenous children nationally (AIHW, 2018).

Between 2012-13 and 2016-17, child protection substantiation rates increased for Indigenous children, from 38.1 to 46.0 per 1,000 (AIHW, 2018).

A study of reporting rates in Australian Indigenous communities showed that the reporting rate for child sexual abuse of Indigenous children was between two and four times that of non-Indigenous children. Further, this study showed that reporting rates differed by jurisdiction, which may be caused by higher levels of under-reporting in particular communities rather than actual rates of child sexual abuse (Bailey, Powell & Brubacher, 2017).

In 2012, 593 Indigenous children and 3,681 non-Indigenous children aged 0 - 14 years were reported as victims of sexual assault in New South Wales, Queensland, South Australia and the Northern Territory combined. Rates among Indigenous children aged 0 - 9 were 2 to 4 times as high as rates for non-Indigenous children, depending on the jurisdiction, and rates among Indigenous children aged 10 - 14 were 2 to 3 times as high (AIHW, 2014).

In 2011, reports to police showed that there were 8,857 adult and child victims of sexual abuse in NSW, Australia. Data about these victims showed that:

- 651 (7.4%) were Aboriginal
- 4,859 (54.9%) were aged 15 years or younger
- There were 476 Aboriginal victims aged 15 years or younger – which represents 9.8% of all NSW sexual abuse victims aged 15 years or younger, or 73.1% of all Aboriginal sexual abuse victims. Aboriginal children make up 4% of children in NSW (NSW Ombudsman, 2012).

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Nature of CSA: Risk Factors and Dynamics

Risk factors

Research shows that children with a learning disability are 2.5 times more likely to be the subject of a sexual abuse allegation than children without a learning disability, regardless of other confounding factors (Helton, Gochez-Kerr & Gruber, 2018).

Adolescents in institutional care have a high lifetime prevalence of sexual victimisation when compared with nationwide samples – a German study with adolescents from residential care facilities and boarding schools showed lifetime rates of sexual victimisation of 46.7% for girls and 8% for boys. Offenders were mostly adolescents of the same age (Allroggen, Rau, Ohlert & Fegert, 2017).

Quadara and colleagues (2015) discuss Putman's (2003) review of the literature on risk factors for child sexual abuse, which indicated that the following factors are important:

- Gender – girls are at 2.5 - 3 times higher risk of child sexual abuse than boys (although this pattern does not hold for abuse in religious institutions, where victims are more often male than female)
- Age – risk for sexual abuse rises with age. Over a third of victims are aged 12 or older, a quarter between the ages of 8 - 11
- Disabilities – physical disability is associated with increased risk, particularly where the child's perceived credibility may be impaired. Increased vulnerability is associated with dependency, institutional care and communication difficulties
- Socioeconomic status – a higher number of cases reported to child protection services are from among those with low socioeconomic status
- Family – the absence of one or both parents, parental impairments (e.g. illness or alcoholism), and a family's social isolation increase the risk of child sexual abuse.

Children in residential care have an increased risk of child sexual abuse (Euser, Alink, Tharner, Van IJzendoorn, & Bakermans-Kranenburg, 2013). Further, children with a mild intellectual disability in out-of-home care have an even greater risk of child sexual abuse (Euser, Alink, Tharner, Van IJzendoorn, & Bakermans-Kranenburg, 2015).

Research with perpetrators has found that offenders target vulnerable children who exhibit certain traits, behaviours or characteristics that perpetrators feel they will be able to manipulate (Quadara, Nagy, Higgins & Siegel, 2015).

Family structure is among the most important risk factors for child sexual abuse. Children who live with two married biological parents are at low risk for abuse. The risk increases when children live with step-parents or a single parent. Children living without either parent (foster children) are 10 times more likely to be sexually abused than children that live with both biological parents. Children who live with a single parent that has a live-in partner are at the highest risk: they are 20 times more likely to be victims of child sexual abuse than children living with both biological parents (Sedlack et al., 2010).

Research involving young girls presenting to a forensic examination centre in the UK found that the following factors were associated with victimisation:

- Alcohol or drug use in the family or by the victim
- Physical and/or learning disability
- Being cared for by someone other than parents
- A history of sexual activity
- A history of psychiatric support (Davies & Jones, 2013).

Dynamics of child sexual assault

The majority of child sexual abuse occurs within familiar - and familial - relationships. As such, it tends to be characterised by prolonged or repeated victimisation, secrecy and delayed disclosure (Quadara et al., 2015).

A meta-analysis of child sexual abuse characteristics showed that intra-familial sexual abuse was more likely to be experienced at a young age. Additionally, this study showed that abuse was more frequent and/or committed over a longer period of time when it involved more contact or force, when a relative was the perpetrator, and when the abuse commenced at a younger age (Ventus, Antfolk, & Salo, 2017).

Research has shown that perpetrators use a range of grooming strategies to identify and build a connection with a potential victim, including:

- identifying children who are particularly vulnerable
- identifying vulnerable or receptive families (e.g. single mothers)
- isolating the child from other children or their guardian
- making a child feel that they hold a “special status”
- over time, desensitising the child to sexual touch
- ensuring they become “indispensable” to significant adults in the child’s life and putting themselves in a position of trust (Quadara et al., 2015).

Alongside the different strategies that perpetrators employ to create opportunities for offending, they also frequently employ various means such as bribes, threats, coercion, denial and blackmail to continue the offending and to ensure victims’ remains silent and compliant (Quadara et al., 2015).

A qualitative study of the grooming process from the perspective of male survivors of child sexual abuse showed common themes relating to grooming stages. The two key stages of grooming were (a) the initial stage of creating a relationship, which focused on inducements and environmental grooming; and (b) keeping the child compliant after the onset of abuse and avoiding disclosure, which involved inducements, relationship development and/or coercive behaviours. Only the second stage was relevant for survivors of intrafamilial abuse, whereas most survivors of extrafamilial abuse experienced both stages. Both survivors of intrafamilial and extrafamilial sexual abuse indicated that three factors served to facilitate the grooming process: (a) their own vulnerabilities and the abuser’s exploitation of these; (b) the abuser’s social position, which was usually one of trust and authority; and (c) the broader social context which often involved social avoidance of abuse (Plummer, 2018).

The strategies employed by offenders to gain the compliance of children more often involve giving gifts, lavishing attention and attempting to form emotional bonds than making threats or engaging in physical coercion. Many sexual encounters with children were preceded by some form of non-sexual physical contact (Smallbone & Wortley, 2000).

Research suggests that children who have experienced sexual abuse are also more likely to have experienced some other type of abuse. Experiences of abuse or neglect seldom occur in isolation; the majority of individuals with a history of maltreatment report exposure to two or more subtypes (Price-Robertson, Higgins, & Vassallo, 2013).

81% of child sexual abuse incidents for all ages occur in one-perpetrator/one-child circumstances. 6 - 11 year old children are most likely (23%) to be abused in multi-victim circumstances (Snyder, 2000).

Most sexual abuse of children occurs in a residence, typically that of the victim or perpetrator. 84% of sexual victimization of children under age 12 occurs in a residence. Even older children are most likely to be assaulted in a residence. 71% of sexual assaults on children aged 12 – 17 years occur in a residence (Snyder, 2000).

Sexual assaults on children are most likely to occur at 8 a.m., noon and 3 - 4 p.m. For older children, aged 12 – 17 years, there is also a peak in assaults in the late evening hours (Snyder, 2000).

1 in 7 incidents of sexual assault perpetrated by juveniles occur on school days in the after-school hours between 3 and 7 p.m., with a peak from 3 – 4 pm (Snyder, 2000).

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Disclosure

Disclosure rates

Disclosure rates vary as much as between 24% and 96% (London, Bruck, Wright & Ceci, 2008). These varying rates may be due to a number of factors, including use of differing sources of information (e.g. retrospective surveys; forensic evaluations) and differing definitions of both child sexual abuse and disclosure (Lahtinen, Laitila, Korkman & Ellonen, 2018).

A population-based survey study with a representative sample of Finnish youth showed that among those who reported experiencing child sexual abuse, 80% had disclosed to someone, usually a friend (48%). Only 26% had disclosed to adults, and just 12% had reported the experiences to authorities (Lahtinen et al., 2018).

Among survivors participating in private sessions for the Royal Commission into Institutional Responses to Child Sexual Abuse, 57% said they did not disclose about the abuse until they were an adult. Further, survivors took, on average, 23.9 years to disclose the abuse, with men taking longer to disclose than women (25.7 years for men and 20.6 years for women). Some survivors (10%), most of them male, reported that they were disclosing for the first time to the Royal Commission (Royal Commission, 2017).

McElvaney's (2015) review of disclosure studies showed that significant proportions of adults had never disclosed their experiences of child sexual abuse, either officially or informally.

A study of Swiss adolescents found that less than 10% of victims reported their experience of child sexual abuse to police. Victims were most likely to disclose to peers, followed by family (Mohler-Kuo et al., 2014).

U.S. data suggests that 95 - 97% of child sexual abuse occurrences are "below the surface" and that at least 95% are not reported to authorities (Martin & Silverstone, 2013).

A review of 13 studies with adult survivors of child sexual abuse showed that just 5 - 13% of cases were reported to police (London et al., 2008).

Child sexual abuse disclosure rates in retrospective surveys have been quite congruent, varying mostly between 31% and 45% (London et al., 2008).

The primary reason that the public is not sufficiently aware of child sexual abuse as a problem is that 73% of child victims do not tell anyone about the abuse for at least a year. 45% of victims do not tell anyone for at least 5 years. Some never disclose (Broman-Fulks, Ruggiero, Hanson et al., 2007).

Approximately 60 - 70% of adult survivors did not disclose their abuse as children (London, Bruck, Ceci & Shuman, 2005).

Estimates suggest that between 30 - 80% of child sexual abuse victims do not disclose before adulthood (Alaggia, 2005).

London and colleagues' (2005) review of 11 retrospective child sexual abuse studies showed that in many cases, survivors report never having disclosed their abuse prior to their participation in that research study.

Australian data has shown that as few as 28% of victims of sexual offences disclose to authorities, and that approximately 17% of offences that are reported to the police result in a conviction (Queensland Crime & Misconduct Commission, 2003).

Mathews (2003) notes survey results that found 12% of survivors took 5 - 9 years to disclose, 16% took 10-19 years, and just under a quarter (24%) took 20 years or more to disclose childhood sexual abuse.

One in five parents who were aware that their child had been sexually abused did not report the abuse (Smallbone & Wortley, 2000).

There are very few false allegations of sexual abuse – a review of all child sexual abuse reports to the Denver Department of Social Services over 12 months was conducted, showing that of 551 cases, just 2.5% were found to be erroneous (including several cases where innocent events were misinterpreted as sexual abuse, and just 1.5% of cases involving false allegations) (Oates, Jones, Denson, Sirotnak, Gary & Krugman, 2000).

Barriers to disclosure

Recent research reviewing studies relating to disclosure of child sexual abuse has shown that barriers to disclosure continue to outweigh facilitators. Barriers identified in this review included younger age, male gender and associated perceived stigma, familial relationship with the perpetrator, internal factors including shame, self-blame and fear, family dynamics including dysfunction and abuse, and environmental and cultural context factors including lack of involvement from neighbours and school, and stigma perpetuated by societal perceptions (Alaggia, Collin-Vézina & Lateef, 2017).

A recent systematic review of qualitative research with children exploring barriers to disclosure of sexual abuse revealed six primary barriers. These included a fear of the consequences of disclosure; a fear of others' reactions including disbelief; emotions including shame, embarrassment, guilt and responsibility; not having had an opportunity to tell; concern for their own or others' safety; and personal feelings toward the abuser (Morrison, Bruce & Wilson, 2018).

A further systematic review of the barriers and facilitators relating to child and adolescent disclosures of sexual abuse showed that barriers included limited support, perceived negative consequences, and feelings of self-blame, shame and guilt. A primary facilitator of disclosure was directly asking a child about their experiences while providing active listening and support, in order to minimise feelings of guilt and shame, and to reduce fear of negative consequences (Lemaigre, Taylor & Gittoes, 2017).

A study of the perceptions of therapists specialising in treatment of men with histories of child sexual abuse showed that barriers to men's disclosure of child sexual abuse fell into three categories: intrapersonal experience (difficult feelings such as fear, shame, embarrassment, guilt and self-blame; and lack of language to articulate the abuse and their feelings, and/or lack of self-engagement), social milieu (internalised social stigma including myths, misinformation and stereotypes; negative responses to previous disclosures; fear of social loss or judgement; and masculine identity dissonance) and the health care environment (structural barriers limiting successful therapeutic disclosure;

relational challenges with therapists; and unhelpful therapeutic strategies) (Gruenfeld, Willis & Easton, 2017).

In a population-based survey study with a representative sample of Finnish youth, the most common reason for non-disclosure of child sexual abuse (defined as having sexual experiences with a person at least five years older) was that the experience was not considered serious enough for reporting (41%). Just 14% indicated that they did not have the courage to tell anyone. Half of the youth who reported child sexual abuse did not self-label their experiences as abuse (Lahtinen et al., 2018).

Research by Tashjian and colleagues (2016) showed that having experienced emotional or physical abuse by a parental figure may delay disclosure of non-parental child sexual abuse.

Collin-Vézina and colleagues (2015) presented a model of barriers to disclosure of child sexual abuse through an ecological lens, with barriers identified as being ‘within’ (e.g. mechanisms to self-protect), in relation to ‘others’ (e.g. family violence and dysfunction), and in relation to the ‘social world’ (e.g. fears of being labelled).

Disclosure is less likely when the perceived disadvantages or risks to disclosure are considered greater than the perceived advantages or benefits (Cashmore & Shackel, 2014).

Research with young victims of child sexual abuse has shown that the most common reasons given for delaying disclosure include fear of not being believed and feelings of shame and self-blame. Other reasons include fear of upsetting family members, and wanting to protect the offender (McElvaney, Greene, & Hogan, 2014).

In the case of familial child sexual abuse, victims may delay disclosure due to the fear of family breakdown, and of disrupting relationships with those to whom a sense of loyalty and strong emotional ties may exist (Lyon & Ahern, 2011; Smallbone, Marshall, & Wortley, 2008).

Males are less likely than females to disclose and take longer to do so - 45% of men and 25% of women took more than 20 years to disclose about child sexual abuse (O’Leary & Barber, 2008). Such research has shown a particular sense of shame and stigma among male survivors that leads many to maintain the secret of their abuse well into adulthood (O’Leary & Barber, 2008). Gagnier and Collin-Vézina (2016) summarise the particular challenges that male survivors experience in relation to disclosure of child sexual abuse, including that the role of victim goes against gender norms and is perceived as a weakness, that the common experience of sexual abuse by a male perpetrator in the context of homophobia and an atmosphere of judgement reinforces feelings of shame, and that gender norms dictate that men do not express pain, vulnerability or helplessness, all of which contribute to concealment of sexual abuse experience.

Although there are many similarities between males and females in reasons for not disclosing experience of child sexual abuse, Alaggia (2005) found some differences in a qualitative study of disclosure. For women, confusion about guilt and responsibility, and fears of being blamed or not being believed were key factors. Men were more focused than women on issues relating to sex and gender; such as fear of being seen as homosexual, of becoming an abuser, and a belief that boys are rarely victims of sexual abuse (Alaggia, 2005).

Specifically for male victims of male perpetrators, the stereotypical assumptions that surround the concept of masculinity may lead to confusion over sexual identity and concerns with homosexuality, and associated feelings of guilt and shame (Dorahy & Clearwater, 2012; O'Leary & Barber, 2008).

Research has suggested that the closer the relationship between the child and perpetrator, the less likely the child will be to disclose the abuse (Goodman-Brown et al., 2003; Kogan 2004).

Disclosure outcomes

Survivors face both positive and negative reactions from others upon disclosure of child sexual assault. A qualitative study with male survivors showed that the majority of participants described at least one positive disclosure experience – positive experiences were associated with feelings of being listened to, of being safe, believed and not judged. Meanwhile, however, most participants also reported at least one negative disclosure experience – negative experiences were related to the emotions linked to disclosing, as well as not being believed (Gagnier & Collin-Vézina, 2016).

Easton's (2014) study of over 400 male survivors of child sexual abuse showed that the number of years until disclosure was negatively associated with mental health, but that the degree of helpfulness of their disclosure was positively associated with wellbeing.

The reaction of the person being told about the child sexual abuse is critically important, as positive, supportive responses can promote the recovery and future wellbeing of survivors though the reduction of feelings of shame, self-blame and isolation (Easton, 2014).

Some studies suggest that mothers are less likely to support their children when the perpetrator is a current partner or someone with whom they have an intimate or dependant relationship (Reitsema & Grietens, 2015).

The disclosure of child sexual abuse and the response of the individual being disclosed to have a stronger relationship to long-term effects of abuse than does the characteristics of the abuse itself. In particular, a positive reaction from a partner was found to be related to better outcomes (Jonzon & Lindblad, 2005).

A child's early disclosure of sexual abuse may be particularly beneficial, as it can lead to cessation of the abuse, and also potential prosecution of the perpetrator. Importantly however, disclosure at any stage, whether in childhood or adulthood, can also enable connection with mental health services and may enable treatment or early intervention (Sorsoli, Kia-Keating, & Grossman, 2008; Paine & Hansen, 2002).

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Offenders

Offender characteristics

From the most recent iteration of the Australian Bureau of Statistics' Personal Safety Survey, more than 1 million women (1,000,500, or 11%) were shown to have experienced sexual abuse before the age of 15. Of these, more than 90% of victims knew the perpetrator (including approx. 55% who were abused by a relative). Similarly, 411,800 (5%) males were shown to have experienced sexual abuse before the age of 15. Of these male victims, more than 80% knew the perpetrator (including approx. 23% who were abused by a relative) (ABS, 2017).

In a review of child sexual abuse in Australian institutional contexts, police data from New South Wales showed that 4% of all recent allegations were reported as occurring in an institutional context, involving an extra-familial offender/person in authority (Bromfield, Hirte, Octoman & Katz, 2017).

A study of the characteristics of child sex trafficking offenders revealed differences in offender characteristics according to whether the offender was a trafficker, a producer or consumer, or in possession of child sexual abuse images. The majority of offenders were male for all offence types. Trafficking was associated with being African American and unemployed. Unemployment was the only significant predictor of engaging in child sex trafficking as either a sex buyer or producer. Those in possession of child sexual abuse images were most likely to be employed, with no history of prior arrests, and older than other offenders. Meanwhile, offenders who engaged in travelling or enticement of victims were younger, unemployed, single and without a known history of contact offending (Carpinteri, Bang, Klimley, & Black, 2017).

According to an earlier version of the ABS Personal Safety Survey (ABS, 2006), of all those who reported having been victimised sexually before the age of 15 years:

- 11% were victimised by a stranger. More commonly, child sexual abuse was perpetrated by a male relative (other than the victim's father or stepfather; 30.2%), a family friend (16.3%), an acquaintance or neighbour (15.6%), another known person (15.3%), or the father or stepfather (13.5%)
- Small proportions of victims were sexually abused by a female relative (other than the mother or stepmother (0.9%), or by their mother or stepmother (0.8%)
- Female victims were most likely to have been abused by another male relative (35.1%), followed by their father or stepfather (16.5%), a family friend (also 16.5%), an acquaintance or neighbour (15.4%), another known person (11%) or a stranger (8.6%). Very small proportions were sexually abused by another female relative (1%) or their mother or stepmother (0.6%)
- Male victims were most likely to be sexually abused by another known person (27.3%), followed by a stranger (18.3%), another male relative (16.4%), an acquaintance or neighbour (16.2%), or a family friend (15.6%). Small proportions were sexually abused by their father or stepfather (5%) (ABS, 2017).

This earlier version of the Personal Safety Survey (ABS, 2006) also showed that both males and females reported experiencing sexual abuse as a child by someone known to them. However, this data

showed that during their life course women were more likely to have reported being sexually abused by family members:

- Fathers, step-fathers and other male relatives (including siblings) made up more than half (51.6%) of perpetrators for females, and approximately one-fifth (21.4%) of perpetrators against males
- Similar proportions of females and males were sexually abused by a family friend (16.5% and 15.6%, respectively) or an acquaintance/neighbour (15.4% and 16.2%, respectively)
- However, nearly 1 in 5 males under the age of 15 were sexually abused by a stranger (18.3%), compared to less than 1 in 10 females aged under 15 years (8.6%) (Tarczon & Quadara, 2012).

A review of studies into child sexual abuse in Nordic countries found that peers constituted 37 - 48% of the perpetrators for girls and 23 - 54% of the perpetrators for boys. Authority figures, meanwhile, represented between 0.8 - 12% of the perpetrators. Inconsistent findings were reported for intra-familial abuse: parents or other family members constituted 1.5 - 19% of the perpetrators in eight of the studies reviewed, while a further 3 studies reported rates of intra-familial abuse at 32 - 38%, and one study indicated that 90% of perpetrators were a family member (Kloppen, Haugland, Göran Svedin, Mæhle, & Breivik, 2016).

According to Dr Sarah Goode, whose research focuses on understanding adult sexual attraction to children, between 3 - 7% of men say they would have sex with a prepubescent child if they were guaranteed to go undetected. If that statistic is accurate, and proceeding studies indicate it is, at least 362,000 Australian men feel sexually attracted to children (Goode, 2011).

Not all child sex offenders are paedophiles and conversely, not all paedophiles are child sex offenders. Also, not all child sex offenders feel driven or compelled to sexually abuse children. Opportunity can play a key role in the commission of sexual offences against children (Richards, 2011).

Juvenile offenders

One-third of all child sexual offences are committed by teens, usually boys between the ages of 12 and 15. Offences by juveniles often involve close relationships and opportunity - perhaps a sibling or close family friend. On average, juvenile offenders are three or four years older than their victims. And there is a steep drop-off in incidents as children approach their later teen years and learn about boundaries and healthy sexual behaviour. Teen offenders do not often go on to become adult offenders: the likelihood that a child convicted of a sexual offence will ever be convicted of a second offence is just 2 - 3%. Additionally, less than 10% of adults who commit acts of child sexual abuse were offenders as juveniles (Der Bedrosian, 2018).

Juveniles account for more than one-third (36%) of those known to police to have committed sex offences against minors. As a proportion of the total, 38% are between the ages of 12 and 14, and 46% are between ages 15 and 17. The vast majority (93%) are male (Finkelhor, Ormrod & Chaffin, 2009).

Female offenders

A study of child sexual abuse cases that were heard in Canadian criminal courts between 1986 and 2012 showed that 1.7% of cases involved a female as the accused. A comparison of male and female

accused cases showed that female accused most often had family connections and were parents of the complainant; proportionally more male complainants were in female-accused cases than male-accused cases; female-accused offences were shorter in duration; and despite being similarly intrusive, female perpetrators received shorter sentences than male perpetrators (Weinsheimer, Woivod, Coburn, Chong & Connolly, 2017).

Although prevalence rates are variable, the general consensus is that around 5% of sexual offences are committed by women (Stathopoulos, 2014).

Cortoni and colleagues (2005; 2010) offer the most comprehensive prevalence statistics on female sexual offending, having analysed official reports in five countries, including Australia. When averaged across all countries, official records data show that 4.6% of offences were committed by a woman, and victimisation survey data show that 4.8% of offences were committed by a woman (cited in Stathopoulos, 2014).

Peter (2009) found that 10.7% of child sexual abuse matters were perpetrated by a female.

The myth of victims as offenders

A study examining associations between child sexual abuse and offending among an Australian birth cohort of 38,282 males found that proportionally few sexually abused boys who were the subject of a notification went on to become sexual offenders (3%), and that proportionally few sexual offenders had a confirmed history of sexual abuse (4%). No specific association was found between sexual abuse and sexual offending (Leach, Stewart & Smallbone, 2016).

A prospective study examining whether experiences of childhood sexual abuse predicted subsequent sexual offending involved the tracking of 908 substantiated cases of physical and sexual abuse and neglect (aged 0-11 years), along with 667 matched control individuals, into adulthood (mean age, 51 years). An examination of federal and state law enforcement agency records at 3 points in time showed that individuals with histories of physical abuse and neglect were at increased risk of being arrested for a sex crime compared with control individuals, while those with a history of child sexual abuse were not (Spatz Widom & Massey, 2015).

As Simons (2007) states, “not all victims of sexual or physical abuse become perpetrators, and not all sexual offenders have experienced abuse as children”. Indeed, research shows that the majority of victims of child sexual abuse do not become perpetrators of child sexual abuse later in life (cited in Richards, 2011).

In a study examining the relationship between child sexual abuse victimisation and subsequent criminal offending, Ogloff and colleagues (2012) found that while the majority (99%) of victims of child sexual abuse were not subsequently charged for a sexual offence, victims were 7.6 times more likely to be charged with sexual offences than were the general population. More male victims (5%) than female victims were subsequently convicted of a sexual offence.

A study by Simons (2007) found that 30% of offenders claimed to be sexually abused as children when asked, but when asked about different “experiences” the research suggested that around 58% had experienced an incident of child sexual abuse. Simons goes on to argue that many do not disclose because of shame – while of course others may falsify claims to justify their offending.

A range of factors has been found to interact with childhood experiences of sexual victimisation and to differentially impact a child's likelihood of later becoming a perpetrator. Factors that increase this likelihood include:

- experiencing emotional and physical abuse or neglect as a child (Salter, McMillan, Richards et al., 2003);
- being exposed to family violence (Salter et al., 2003); and
- early exposure to pornography (Simons, Wurtele & Durham, 2008).

Myths and misperceptions

Richards (2011), in a review of misperceptions about child sex offenders, concluded that:

- Not all child sex offenders are “paedophiles” – child sex offenders are a heterogeneous group with varying offender profiles;
- Children are usually abused by someone they know, although data suggest that strangers comprise nearly one in five perpetrators against males;
- Not all child sex offenders have been victims of sexual abuse themselves. There are complex relationships between being a victim of child sexual abuse and becoming a perpetrator;
- While not all child sex offenders have high rates of recidivism, a specific subset – those who target extra-familial male children – do frequently reoffend; and
- Although it is difficult to accurately determine the number of victims a child sex offender has offended against by the time he is detected, this number varies according to offending profiles and is unlikely to be as high as is commonly assumed. There is, however, a subset of extra-familial male offenders who abuse high numbers of victims.

Research on child sex offenders found:

- a late onset of offending behaviour (37% were aged 31 - 40 years);
- a low incidence of chronic sexual offending (less than one-quarter had previous convictions for sexual offences);
- a high incidence of previous non-sexual offending (approximately 60% had convictions for non-sexual offences);
- a low incidence of stranger abuse (94% abused their own child or a child they already knew);
- a low incidence of networking among offenders (only about 8% had talked to other offenders);
- a low incidence of child pornography use (approximately 10% had used child pornography); and
- a low incidence of paraphilic interests (very small proportions could have been diagnosed with other sexually deviant interests such as voyeurism or sexual sadism) (Smallbone and Wortley, 2000; Smallbone & Wortley, 2001).

Child sex offenders have low rates of recidivism compared with other types of offenders (e.g., McSherry & Keyzer, 2009). Within the broader category of child sex offenders, some subcategories of offenders are likely to be at greater risk of reoffending than others, for example, “extra-familial offenders with male victims who meet clinical criteria for paraphilias, such as paedophilia or exhibitionism” (Petrunik & Deutschmann, 2008, p500).

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Convicting, Treating and Managing Child Sex Offenders

The National Centre for Missing and Exploited Children (2017) reported that there are 874,725 registered sex offenders in the United States, with census figures revealing a national rate of 268 registered sex offenders per 100,000 citizens (ranging from 128 per 100,000 in Maryland to 686 for every 100,000 citizens in Oregon). Figures in Australia aren't regularly published, but in May 2017, it was reported that there are around 20,000 registered offenders across Australian jurisdictions (e.g., Biddington, 2017), which equates to roughly 82 registered sex offenders per 100,000 Australian citizens.

Conviction of child sex offenders

Data from the NSW Bureau of Crime Statistics and Research showed that during 2012-16, the average conviction rate for all offences was 89%. The conviction rate for child sexual assault offences was 60% over that same period, compared with 50% for adult sexual assault, 70% for assault, 73% for robbery and 94% for illicit drugs (Browne, 2017).

Data from the NSW District Court shows that conviction rates for child sexual assault cases are declining despite the number of cases doubling over a three-year period. In 2012-13, 73 child sexual assault matters were finalised at a defended hearing in the District Court with a conviction in 56% of cases. Meanwhile in 2015-16, 142 matters were finalised at a defended hearing with a conviction in 47% of cases (Browne, 2017).

Data from the NSW Bureau of Crime Statistics and Research show that in 2017, 7,218 sexual offence incidents involving a victim between the ages of ten and fifteen were reported to police. In 2017, 954 persons appeared in NSW Local and Higher Courts charged with at least one child sexual offence; of the 954 persons charged, 613 (64.3%) were found guilty of at least one child sexual offence. Of the 613 persons found guilty of at least one child sexual offence, 399 (65.1%) received a sentence of full time imprisonment and 30 received an intensive correction order (Bureau of Crime Statistics and Research, 2017).

An analysis of historic child sexual abuse complaints heard in Canadian courts during the period 1986 - 2012 showed that although guilty pleas, convictions and guilty verdicts decreased through the 1990s, each of these increased in the early 2000s (around the time when delayed reports began increasingly to be viewed as credible). Length of incarceration for those convicted was shown to increase over time throughout the period 1986 - 2012 (Connolly, Coburn & Chong, 2017).

The Bureau of Crime Statistics and Research (BOSCAR) in NSW found that criminal proceedings were initiated in only 15% of incidents of sexual assault reported to police involving child victims, and 19% of incidents involving adult victims (Fitzgerald, 2006, cited in Millsted & McDonald, 2017).

An analysis of reports of sexual assaults made to Victorian police during the period 2009-10 found that just 33.7% of the 7,066 offender incidents had a police progression outcome recorded (e.g. an arrest, summons or other outcome), and 23.3% of incidents were matched to a court case, indicating progression from prosecution to court. Cases were more likely to have a police progression outcome

recorded if they involved a child victim (41.6% of progressed incidents involved a victim aged 10 - 17 years, as opposed to 32.3% of incidents that did not progress) (Millstead & McDonald, 2017).

The Victorian Law Reform Commission found that during the period 1997-99 in Victoria, fewer than one in seven reports to police of incest or sexual penetration of a child proceeded to prosecution (VLRC, 2004, cited in Millstead & McDonald, 2017).

Sentencing of child sex offenders

A comparison of sentencing outcomes observed in New South Wales with those recorded in Queensland and Victoria found that median head sentences for the offence of sexual assault of a child under 10 years were: 84 months in NSW (2006-13), 72 months in Queensland (2007-13), and 48 months in Victoria (2007-12) (Brignell & Donnelly, 2015).

A report released by the Sentencing Advisory Council of Tasmania (2015) showed that the median sentences imposed for the offence of maintaining a sexual relationship with a young person were: 120 months in NSW (2007-13), 84 months in Queensland (2007-14), 72 months in Victoria (2009-14), and 32 months in Tasmania (2008-14).

Criminal court statistics published by the NSW Bureau of Crime Statistics and Research (2015) give an understanding of sentencing of child sex offences and other comparable crimes within NSW. In 2014, the average length of imprisonment term handed down in NSW for: homicide and related offences was 119.9 months; illicit drug offences was 32.4 months; sexual assault and related offences was 30.9 months; sexual offences against children was 29.3 months; acts intended to cause injury was 27 months; and robbery, extortion and related offences was 26.3 months.

Over the two year period 2009-10, 495 offenders were convicted of child sexual assault in NSW (97% of whom were male). The most common penalty imposed was a prison sentence: 75% of offenders convicted of aggravated child sexual assault received a prison penalty, with an average aggregate sentence of 68 months and an average minimum term of 39 months. Meanwhile, 52% of offenders convicted of indecent child assault received a prison penalty, with an average aggregate sentence of 25 months and an average minimum term of 14 months (Holmes, 2013).

A comparison of sentencing outcomes for serious violent offences as well as sexual offences in Queensland during the period 2006-06 to 2009-10 showed that the median sentence for: murder was life imprisonment; manslaughter was 8 years; rape was 6.5 years; maintaining a sexual relationship with a child was 6 years; incest was 5 years; robbery and grievous bodily harm was 3 years; indecent treatment of a child under 16 years was 1.5 years; carnal knowledge with or of children under 16 years was 1 year; and possession of child exploitation material was 1 year (Sentencing Advisory Council Qld, 2011).

During the period 2011-16 in Victoria: 79 offenders were convicted of the offence 'Sexual penetration with a child aged under 12'; 295 offenders were convicted of the offence 'Sexual penetration with a child aged 12 - 16 years'; 150 offenders were convicted of the offence 'Indecent act with a child aged under 16'; and 54 offenders were convicted of the offence 'Persistent sexual abuse of a child aged under 16'. The most common sentence for each of these offences was a prison term (ranging from 35.3% for 'Indecent act with a child aged under 16', to 92.6% for 'Persistent sexual abuse of a child aged under 16'). The median lengths of imprisonment (principal sentence) for each of these offences were: 4 years for 'Sexual penetration for a child aged under 12'; 2 years and 6 months for 'Sexual penetration with a child aged 12 - 16 years'; 1 year and 6 months for 'Indecent act with a child aged under 16'; and 7 years for 'Persistent sexual abuse of a child aged under 16' (Sentencing Advisory Council Vic, 2017a,b,c,d).

Treatment and management of offenders

Lasher and McGrath (2018) compared the characteristics of child sexual abuse offenders who persisted offending (i.e. committed a new serious sexual or other violent offence) versus those who desisted from re-offending over a 5-year period, following enrolment in a community cognitive-behavioural sex offender treatment program. Desisters were found to show change on a risk factor measure during the first year of treatment at a rate double that of persisters. The only practical change over the 2-year treatment period pertained to the social stability factor on the risk scale, comprising emotion management, problem solving, employment, residence and social influence items. This finding reflected positive outcomes relating to social integration and prosocial environments in the treatment of child sexual offenders (Lasher & McGrath, 2018).

Kim and colleagues (2016) reviewed and synthesised meta-analyses of sex offender treatments (including psychological treatment, institutional treatment and medical intervention approaches) designed to reduce recidivism, and found that each of the 11 included meta-analyses reported significant recidivism reduction outcomes (with the most recent 5 meta-analyses showing an overall 22% reduction in recidivism). The results of this study showed that sex offender treatment appears to be more successful with adolescent rather than adult offenders, and that community-based treatments compared to institutional treatments have a larger effect in reducing recidivism (Kim, Benekos & Merlo, 2016).

Various meta-analyses have shown some empirical support for the effectiveness of treatment programs for adult sexual offenders, including those who commit child sex offences. The majority of treatment programs evaluated incorporate cognitive behavioural techniques. For example, a recent meta-analysis of recidivism studies involving equivalent treatment and control groups (the majority of which involved CBT and many of which included child sex offenders in their sample) found a difference in recidivism between treated and control groups of 3.6 percentage points (10.1% in treated vs. 13.7% in untreated offenders) and a relative reduction in recidivism of 26.3% (Schmucker & Lösel, 2015). Additionally, an older but well-cited Canadian study examining over 9,000 sex offenders in four different countries found that 9.9% of treated sex offenders reoffended sexually, compared with 17.3% of non-treated sex offenders (Hanson, Gordon, Harris, et al., 2002).

MacGregor (2008) reviewed evaluation results from studies of eight treatment programs for adults and five treatment programs for adolescents who sexually offend across Australia and New Zealand. The reviewed evaluations showed that twelve out of the thirteen programs were effective in reducing sexual recidivism.

Australian research has indicated that evidence now suggests that “sex offender treatment is at least moderately effective in reducing reoffending. Not all programs are equally effective however, and a number of sex offenders will re-offend even after treatment — particularly those assessed as high risk” (Sheehan & Ware, 2012).

There is relatively little research conducted on female sexual offenders and appropriate treatment programs, despite increasing evidence that the motivating factors and behaviours of female offenders are distinct from those of male sexual offenders (Pflugradt, Bradley Allen, & Marshall, 2018).

There is a growing body of research on appropriate and effective treatment methods for juvenile offenders, or youth who present with harmful sexual behaviour. At present the evidence suggests that multi-systemic therapy (MST) programs, which are less commonly used for juvenile

offenders than CBT programmes, show more significant effects on recidivism (Radford, Richardson Foster, Barter & Stanley, 2017). For example, a randomised clinical trial of MST with juvenile offenders, using an 8.9-year follow-up of rearrest and incarceration data, showed that MST participants had lower recidivism rates than did participants of usual community services, for both sexual (8% vs. 46%, respectively) and nonsexual (29% vs. 58%, respectively) crimes (Bordin, Schaeffer & Heiblum, 2009).

Research evidence provides support for the effectiveness of community re-integration programs such as Circles of Support and Accountability (COSA), which uses volunteers to provide support and a level of accountability through regular meetings with sex offenders as they re-integrate into the community. Two rigorous evaluations of COSA have been conducted in Canada (Wilson, Cortoni & McWhinnie, 2009; Wilson, Picheca et al. 2005). The results of both of these studies showed significantly lower rates of recidivism among COSA than comparison group offenders, for sexual, violent and general recidivism. Wilson et al.'s (2005) original study found that COSA participants had 70% less sexual recidivism than offenders who did not participate in a COSA. In the more recent study, Wilson et al. (2009) found that COSA participants had 83% less sexual recidivism than non-participants.

Research into the effectiveness of sex offender registration and notification (SORN) laws, such as Megan's Law in the United States, generally show that these measures do not lead to significant reductions in recidivism (e.g., Zgoba, Veysey, & Dalessandro, 2010; Zgoba, Witt, Dalessandro, & Veysey, 2008; Tewksbury, Jennings & Zgoba, 2012). A recent, long-term evaluation of Megan's Law examined the sexual and general recidivism rates of 547 convicted sex offenders released before and after the enactment of the law in New Jersey. Offenders were followed up for an average period of 15 years. The results of this evaluation showed that SORN legislation has not had a significant impact on sexual or general reoffending rates for sex offenders overall in the past two decades. The evidence did show, however that the legislation may have slightly impacted on re-offenses generally for those "high risk" offenders – those who are most likely to reoffend, and at high rates, post-release (Zgoba, Jennings & Salerno, 2018).

Sandler and colleagues (2008) explored differences in sexual offense rates in New York State before and after the implementation of state-wide SORN laws. This study involved analysing more than 170,000 recorded sexual offence arrests for the years 1986-2006, and found that the large majority of sex offence arrests (95%) were of first-time sex offenders. The authors concluded that SORN laws have not reduced sexual offending by first-time offenders and have also not impacted significantly on recidivism rates of convicted offenders (Sanders et al., 2008).

Along with not being found to impact significantly on overall recidivism rates, SORN laws have been shown to have adverse impacts on offender re-integration factors, such as the ability to obtain housing, employment and prosocial supports, all of which have been shown to be significant risk factors for recidivism (Grossi, 2017).

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Religious Organisations

As of 31 May 2017, the Royal Commission into Institutional Responses to Child Sexual Abuse had heard from 6,875 survivors in private sessions, of whom 4,029 (58.6%) reported child sexual abuse in religious institutions. Of these, 2,489 survivors (61.8%) told of child sexual abuse in Catholic institutions, and 594 of abuse in Anglican institutions (14.7%). The majority of survivors were male and the average age at first time of abuse was 10.3 years. The most common religious contexts in which alleged abuse occurred were religious schools (39%), religious institutions such as orphanages, children's homes and missions (35.2%), and places of worship (24.8%). Survivors took, on average, 23.9 years to tell someone they had been sexually abused (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017a).

The Royal Commission into Institutional Responses to Child Sexual Abuse heard from survivors about many barriers to disclosure that are particular to abuse within religious organisations. These barriers included fears of disclosing to devoutly religious families or because of attitudes to sex and sexuality in their religious community, fears of being ostracised, and reluctance to “bring shame” on the religious organisation. Grooming and psychological manipulation on behalf of the perpetrator was common, as well as institutional barriers to disclosure including cultures of secrecy and abuse, inappropriate responses to children who did disclose, and inadequate avenues for disclosure. Additionally, the status and authority of people in religious ministry prevented many victims from disclosing about their experiences of sexual abuse (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017a).

A report analysing claims of sexual abuse made with respect to Catholic Church institutions in Australia was released by The Royal Commission into Institutional Responses to Child Sexual Abuse in 2017. This report identified 1,880 alleged perpetrators along with 4,444 victims who came forward to report an incident within the Catholic Church between 1980 and 2015. Ninety per cent of the alleged offenders were men — with the highest number acting as religious brothers, followed by priests and lay people associated with the Church. Victims were an average age of 10.5 for girls and 11.6 for boys, with an average 33 years between the alleged abuse and official complaint (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017b).

The analysis of sexual abuse claims relating to the Catholic Church compiled data from a survey of 75 Catholic Church authorities — with priest members — and 10 Catholic orders whose members are religious brothers and sisters. It classed 7% of priests over that period of time as alleged perpetrators of sexual abuse. The St John of God Brothers had the highest proportion of religious brothers who were classed as alleged perpetrators (40.4%) followed by Christian Brothers (22%), Salesians of Don Bosco (21.9%) and Marist Brothers (20.4%). The highest proportion of alleged perpetrators who were Catholic priests came from the Benedictine Community of New Norcia (21.5%) along with the Salesians of Don Bosco (17.2%) and Marist Fathers (13.9%) (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017b).

A report analysing claims of sexual abuse made with respect to Anglican Church institutions in Australia was also released by The Royal Commission into Institutional Responses to Child Sexual Abuse in 2017. This report identified 569 alleged perpetrators along with 1,085 victims who came forward to report an incident within the Anglican Church between 1980 and 2015. Of all alleged

perpetrators, 94% were male, 247 were ordained clergy (43% of all known alleged perpetrators), and 285 were lay people (50% of all known alleged perpetrators). Victims were an average age of approximately 11 years and this did not vary for the gender of the complainant. The average time between the first alleged incident date and the date the complaint was received was 29 years (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017c).

While the majority of research on child sexual abuse in religious organisations has focused on the Catholic Church, Denney and colleagues (2018) conducted a study examining characteristics of abuse cases occurring in Protestant church congregations across the United States. This study found that the majority of cases (98%) involved male perpetrators, and that the majority of offences were contact offences that occurred on church premises or at the offender's home. Additionally, most offenders were found to be white pastors or youth ministers who were approximately 40 years in age (Denney, Kerley & Gross, 2018).

A submission to the Victorian Parliament's Inquiry into the Handling of Child Abuse by Religious and Other Organisations gives some insight into the extent of offending in Australian Catholic churches (Cahill, 2012, cited in Parkinson, 2014). This submission identified 378 priests who graduated from a Melbourne seminary and who were ordained between 1940 and 1966. Of these 378 priests, 14 (3.7%) were convicted of sex offences against children and after their deaths, another four were acknowledged by church authorities to have abused children. In total therefore, 18 priests or 4.76% of the 378 ordained were identified as having sexually abused children. Among a later cohort, four (5.41%) of the 74 priests ordained between 1968 and 1971 from that same seminary had been convicted of sex offences against children (Cahill, 2012, cited in Parkinson, 2014).

The most comprehensive study of child sexual abuse in the US Catholic Church comes from an earlier study by the John Jay College of Criminal Justice, which found that 4% of all priests who had served from 1950 to 2002 were subject to allegations of child sexual abuse (John Jay College, 2004, Terry, 2008, cited in Parkinson, 2014).

While sex offenders are found in all denominations, there is little research evidence concerning child sexual abuse by priests or ministers in religious institutions other than the Catholic Church (Parkinson, 2014). One study of child sexual abuse in the Anglican church of Australia is the only substantial Australian study of sexual abuse in a Protestant denomination. This archival study of 23 dioceses found 191 cases of reported child sexual abuse made by 180 complainants since 1990, against 135 alleged perpetrators. Of these 135 alleged offenders, 78 (58%) were clergy; most other alleged offenders were youth workers. While this study was unable to indicate the exact proportion of Anglican clergy who had been accused of child sexual abuse, the authors estimated that the 78 represented a very small proportion of Anglican clergy (below 1%) (Parkinson, Oates & Jayakody, 2012).

Evidence given by Victoria Police to the Victorian Parliamentary Inquiry into the Handling of Child Abuse by Religious and Other Organisations suggested that there is a higher incidence of child sexual abuse in the Catholic Church compared with other denominations. The Victorian police recorded all child sexual abuse convictions in Victoria that involved religious organisations for the period 1956-2012 and found that of the victims, 370 were abused in the Catholic Church, 37 in the Anglican Church, 36 in the Salvation Army and 18 involving Judaism. That the number of victims in the Catholic Church was ten times higher than the number in the Anglican Church was only partly

explained by the greater size of the Catholic Church in Melbourne (Victoria Police, 2012, cited in Parkinson, 2014).

Most victims of child sexual abuse in religious organisations are male, which is the opposite of patterns seen in the general population (Parkinson, 2014). For example, the John Jay college study of child sexual abuse in the Catholic Church of the US found that 81% of victims were male, Victoria Police reported that 87% of the 370 victims of abuse in the Catholic Church during 1956 - 2012 were male, and 76% of complainants alleging sexual abuse in the Anglican Church since 1990 were male (John Jay College, 2004, Victoria Police, 2012, & Parkinson et al., 2012, cited in Parkinson, 2014).

In a review paper on clergy perpetrated child sexual abuse, Astbury (2013) describes that in his evidence to the Victorian Parliamentary Inquiry into the Handling of Child Abuse by Religious and Other Organisations, the Catholic Archbishop of Melbourne stated that church records revealed 3.375% (59/1,748) priests in Melbourne had offended, a rate which was similar to the perpetration rate reported in the John Jay College study in the US (Astbury, 2013).

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The Impact of Child Sexual Assault

In a review of the impacts of institutional child sexual abuse, Blakemore and colleagues (2017) likened institutional abuse to intra-familial sexual abuse, noting similarities in terms of its chronicity, severity and relational aspects, and described impacts as “pervasive, numerous and connected”. These authors noted negative impacts across psychological (e.g. post-traumatic stress symptomology, depression, anxiety), physical (e.g. self-reported quality of health, sleep problems), social (e.g. relationship, parenting and sexual difficulties), educational (e.g. school completion, engagement) and economic (e.g. obtaining and maintaining employment) domains.

Child sexual abuse is associated with a range of detrimental and often inter-related outcomes. While child sexual abuse has been shown to be associated with individually increased risks for public mental health service contacts, offending, subsequent victimisation and deaths by suicide or drug overdose, a study by Papalia and colleagues (2017) has shown that these adverse outcomes also tend to co-occur among survivors. For example, this research showed a three-way interaction between public mental health service contact, criminal history and subsequent victimisation – notably, the presence of a psychiatric history increased the likelihood of co-occurring offending and further victimisation among survivors of child sexual abuse (Papalia, Luebbers, Ogloff, Cutajar & Mullen, 2017).

Many reviews have described the various long term impacts of child sexual assault, while indicating that child sexual assault does not reliably predict any one condition or set of difficulties (Barnes & Josefowitz, 2014). In this way, the experience of child sexual abuse has been described as a non-specific risk factor for a multitude of adverse outcomes (Cashmore & Shackel, 2014).

Barnes and Josefowitz (2014) listed a number of outcomes that have been associated with experience of child sexual assault, include psychological difficulties such as depression, anxiety, sleep disorders, personality disorders and psychotic disorders, behavioural problems such as substance abuse, self-harm, eating disorders, conduct disorders and antisocial behaviour, as well as relationship difficulties, poorer physical health, and poorer educational and occupational achievement.

Research has identified several key factors that are predictive of increased negative impact into adulthood, including a child’s younger age at first experience, greater number of sexual assault episodes, longer duration of the abuse, the presence of coercion, force or threats, more invasive sexual contact, more than one perpetrator, parental mental illness, criminal activity and substance use, and perpetration by a father or father figure (Barnes & Josefowitz, 2014; Martin & Silverstone, 2013). Social support, meanwhile, has been shown to mediate the effect of trauma and reduce the likelihood of negative outcomes resulting from experiences of child sexual abuse (Charuvastra & Cloitre, 2008).

In addition to socio-emotional and mental health sequelae, numerous studies have highlighted that child sexual abuse victims are vulnerable to later sexual re-victimisation (Lalor & McElvaney, 2010).

Widom, Czaja and Dutton (2008) report the findings of a prospective study of children physically and sexually abused between 1967 and 1971, and a comparison group of non-abused children matched for sex, age race and socioeconomic status. Both groups were followed up and interviewed between 2000 and 2002 (at a mean age of 39.5 years). Those who experienced abuse/neglect in childhood had significantly higher rates of sexual assault/abuse in adulthood (47.7% vs. 28.6%).

The impacts of child sexual abuse are thought to occur across at least three stages, with the child's initial reaction to their victimisation, followed by their accommodation to ongoing abuse (if relevant), and the longer term impact on adolescent and adult functioning (Briere & Elliott, 1994).

Short term impacts

Children exposed to complex trauma may experience impacts and show impairment across seven primary domains – attachment (e.g. development of insecure attachment patterns), biology (e.g. failure to develop brain capacities necessary for modulating emotions), affect regulation (e.g. inability to discriminate among and label affective states), dissociation (e.g. detachment from awareness of emotions and self), behavioural regulation (e.g. under-controlled and over-controlled behaviour patterns), cognition (e.g. lower grades and poorer academic achievement), and self-concept (e.g. self-perception as defective, helpless, deficient) (Cook et al., 2005).

A study examining behavioural problems over childhood and adolescence in sexually abused versus maltreated, but non-sexually abused children, showed that those with a history of sexual abuse had significantly greater internalising and externalising behaviour problems over time when compared to those without sexual abuse histories (Lewis, McElroy, Harlaar, & Runyan, 2016).

In the short term, Kendall-Tackett and colleagues' (1993) review of 45 studies showed that children who have experienced child sexual abuse have more symptoms, including for example, behaviour problems, poor self-esteem, and sexualised behaviours, than those who have not experienced sexual abuse.

More than 80% of children who have experienced child sexual abuse are reported to have some post-traumatic stress symptoms (McLeer et al., 1992).

A variety of studies have shown that child sexual abuse is associated with emotional distress and a range of cognitive distortions in childhood, including hopelessness, impaired trust and self-blame (Briere & Elliott, 1994).

Links to mental health and suicide

Men's experience of child sexual abuse has been shown to be positively associated with depressive and somatic symptoms as well as hostility into middle and late adulthood (Easton & Kong, 2017).

A study of child sexual abuse, its co-occurrence with other forms of maltreatment, and mental health outcomes among males has shown that having a history of child sexual abuse only, and of child sexual abuse co-occurring with other types of maltreatment, was associated with higher odds for many mental disorders and suicide attempts compared to having a history of child maltreatment without sexual abuse (Turner, Taillieu, Cheung, & Afifi, 2017).

A New Zealand birth cohort study found that sexual abuse prior to age 16 was associated with a range of adverse outcomes at age 30, including depression, anxiety, PTSD symptoms, and reduced self-esteem and life satisfaction (Fergusson, McLeod & Horwood, 2013). These negative outcomes were also found to increase alongside the increasing severity of abuse experienced (Fergusson et al., 2013).

One study analysing seven meta-analyses on child sexual abuse and adult psychopathology found sexual abuse to be a nonspecific risk factor for a range of adverse mental health outcomes (Hillberg, Hamilton-Giachritsis & Dixon, 2011).

Rates of suicide are significantly higher among victims of child sexual abuse than comparison groups. One study found sexual abuse victims were 18 times more likely to commit suicide than those in the general population (male abuse victims 14 times more likely and female victims 40 times more likely) (Cutajar, Mullen, Ogloff, Thomas, Wells, & Spataro, 2010).

A school-based survey study with 2,485 South Australian early adolescents also showed that reported experience of sexual abuse was associated with suicidal ideation and suicidal behaviour (Martin, Bergen, Richardson, Roeger, & Allison, 2004).

Links to physical health

A survey study with a representative sample of Canadian adults showed that experience of all types of child abuse, including child sexual abuse, was associated with having a physical health condition in adulthood. Child sexual abuse was also associated with an increased risk of obesity in adulthood (Afifi, MacMillan, Boyle, et al., 2016).

Women with a history of sexual abuse were more likely to use mental health services, pharmacy services, primary care services and speciality care (Bonomi, 2008).

Compared to those with no history of abuse, annual health care costs were 16% higher for women who reported childhood sexual abuse (Bonomi, 2008).

A University of Queensland study found that women who experienced penetrative child sexual abuse had, on average, a significantly higher body mass index than those who had not (Mamun, Lawlor, O'Calloghan, Bor, Williams, & Najman, 2007).

Links to drug and alcohol misuse

Experience of child sexual abuse has been shown to be associated with heavy drinking, hazardous drinking, and the use of marijuana and other illicit drugs – these associations have also been shown to be only marginally attenuated when controlling for depression and self-reported emotional and mental health (Tonmyr & Shields, 2017).

A New Zealand birth cohort study found that sexual abuse prior to age 16 was associated with a range of adverse outcomes at age 30, including alcohol and drug dependence, as well as depression, anxiety, PTSD symptoms, and reduced self-esteem and life satisfaction (Fergusson, McLeod & Horwood, 2013).

Rates of accidental fatal overdoses are significantly higher for victims of child sexual abuse than comparison groups. Sexual abuse victims were 49 times more likely to die as a result of an accidental overdose than those in the general population (male abuse victims 38 times more likely and female victims 88 times more likely) (Cutajar et al., 2010).

Links to crime

A prospective study examining the effects of child sexual abuse on life-course offending found that victims of sexual abuse were more at risk of offending (non-sexual offences) than were controls, but that so too were their siblings. Only female victims were more likely to offend than their siblings. The authors concluded that family and environmental factors were most important in explaining life-

course offending among male sexual abuse victims, while these factors were not sufficient to explain the link between child sexual abuse and offending among females (de Jong & Dennison, 2017).

Smith and colleagues (2005) examined the consequences of child maltreatment into early adulthood. Controlling for socio-demographic characteristics and prior levels of problem behaviour, they found that any substantiated maltreatment during adolescence increased the odds of arrest, general and violent offending and illicit drug use in young adulthood (ages 20-22).

In a longitudinal study, being abused or neglected as a child increased the likelihood of being arrested as an adolescent by 59% (Widom & Maxfield, 2001).

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The Costs

A recent study of the cost of child sexual abuse in the United States considered health care costs, productivity losses, child welfare costs, violence/crime costs, special education costs and suicide death costs. This study estimated the lifetime economic burden of child sexual abuse at approximately \$9.3 billion (2015 dollars). The lifetime costs for victims of fatal child sexual abuse averaged \$1,128,334 per female and \$1,482,933 per male victim, and the average lifetime cost of nonfatal child sexual abuse was \$282,734 per female victim (insufficient information on productivity losses for males led to a lower average lifetime cost of \$74,691 per male victim) (Letourneau, Brown, Fang, Hassan & Mercy, 2018).

Most recent estimates of the cost of child maltreatment in the UK have shown that the average lifetime cost of non-fatal child maltreatment per victim is £89,930, with the greatest contributors to these costs being social care costs, short term health-related costs, and reduced employment costs. The estimate of lifetime cost per death from child maltreatment was £940,758, consisting of health care costs and lost productivity costs (Conti, Morris, Melnychuk & Pizzo, 2017).

A recent cost of illness study undertaken to examine the costs of child maltreatment in Australia found a best estimate total lifetime cost for incident cases of child maltreatment in 2012-13 of \$9.3 billion (\$176,437 per child maltreated), with a lower bound of \$5.8 billion (McCarthy et al., 2016).

Pegasus Economics has estimated that if the impacts of child sexual, emotional and physical abuse in Australia (on an estimated 3.7 million adults) are adequately addressed through timely and comprehensive intervention, the combined budget position of Federal, State and Territory Governments could be improved by a minimum of \$6.8 billion annually (Kezelman, Hossack, Stavropoulos & Burley, 2015).

A UK-based study that has explored the costs of child sexual abuse as distinct from other forms of child abuse was produced by the NSPCC in 2014. This study analysed data on the prevalence of child sexual abuse in the UK, the likelihood of adverse outcomes and service usage among victims and survivors of child sexual abuse, and the unit costs of various types of service provision. It was estimated that child sexual abuse costs the UK around £3 billion a year (2012/13 costs). Of this total estimated cost, the majority – around £2.7 billion – was linked to lost labour market productivity. The remainder – around £424 million – was primarily made up of costs resulting from the provision of healthcare, the criminal justice system and child social services (Saied-Tessier, 2014).

A study by Fang and colleagues (2012) estimated the economic burden from child maltreatment in the US. This study estimated a total lifetime economic burden from new cases of child maltreatment occurring in one year at \$124 billion (in 2010 dollars, including both fatal and non-fatal cases).

A report released by the Australian Child Foundation, along with Monash University and Access Economics in 2008, described two approaches to calculating costs associated with child abuse and neglect. The first, which estimated the cost incurred by the Australian community associated with children who were abused or neglected in 2007, showed that the best estimate of the actual cost of child abuse incurred in that year was \$10.7 billion, and as high as \$30.1 billion. The second, which estimated the future costs to the community which would be incurred over a lifetime for the children

abused or neglected for the first time in 2007, showed that the projected cost of child abuse and neglect was \$13.7 billion, and as high as \$38.7 billion (Taylor, Moore, Pezzullo, Tucci, Goddard, & De Bortoli, 2008).

An earlier study examining the costs associated with child abuse and neglect in the US estimated total annual costs at \$103.8 billion (in 2007 dollars), with the largest cost associated with lost productivity (32%), followed by adult criminality (27%) (Wang & Holton, 2007).

In 2004, a report released by Access Economics estimated the cost of domestic violence to the Australian community at \$8.1 billion each year. More than half of the annual \$8.1 billion costs were carried by the victims of domestic violence (\$4.1 billion), followed by the community (\$1.2 billion), Federal Government (\$848 million), children (\$769 million) and perpetrators of domestic violence (\$555 million). The study further identified the total health costs for victims at \$362 million, followed by \$17 million for children and \$9.1 million for perpetrators of domestic violence. Again, children were found to carry more of the health cost burden for domestic violence than the perpetrators (Access Economics, 2004).

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Prevention and Education

There are a number of prevention activities specifically aimed at preventing the sexual abuse of children. Quadara and colleagues (2015) noted that these efforts predominantly involve:

- Protective behaviours education for children, which may also involve parents and broader school personnel or systems;
- Situational crime prevention - applied to risky settings, organisations and institutions, situational prevention is the recommended model for reducing the incidence of child sexual abuse within organisations (Smallbone, Marshall, & Wortley, 2008). Situational crime prevention essentially involves increasing protection within particular settings through, for example, whole-of-organisation policies that clearly outline acceptable and unacceptable behaviour towards children, the installation of closed-circuit televisions (CCTVs) and other such strategies;
- Therapeutic interventions for problem sexual behaviours and sexually abusive behaviours, targeting young people who are at risk of offending;
- Therapeutic prevention of re-offending, targeting:
 - young people who have become involved with the criminal justice system for sexually abusive behaviours, and
 - convicted adult sex offenders;
- Criminal justice and other statutory responses, to identify and monitor sex offenders and their involvement with children and young people; and
- Therapeutic work with children and adolescents who have experienced sexual abuse, to reduce their vulnerability to re-victimisation.

A holistic approach to the prevention of child sexual abuse is recommended. A holistic approach includes prevention strategies at all levels, including primary, secondary and tertiary strategies (Holzer, Higgins, Bromfield, Richardson, & Higgins, 2006):

- Primary or universal interventions are strategies to reduce risk factors for abuse that are targeted at whole populations or communities;
- Secondary interventions target individuals who are at high risk for perpetration or victimisation; and
- Tertiary interventions seek to prevent recurrence of abuse that has occurred, and reduce the long-term consequences of abuse.

Primary prevention

Three types of primary prevention approaches have been developed: those that aim to raise awareness and change wider social attitudes and norms to child sexual abuse, those that aim to reduce the risks and vulnerabilities of children as potential victims, and those that address situational factors, for example, within organisational settings (Radford, Richardson Foster, Barter & Stanley, 2017).

Quadara and colleagues (2015) as part of their report on conceptualising the prevention of child sexual abuse, made several recommendations to strengthen current sexual abuse prevention efforts. One of these recommendations included the conduct of public education and social marketing

campaigns. They suggested that public education and social marketing campaigns about the nature of child sexual abuse and who are likely perpetrators should be considered, in order to address:

- silence surrounding child sexual abuse;
- how children’s vulnerability relative to adults can conceal child sexual abuse;
- misinformation about perpetrators, which inhibits appropriate help seeking and acknowledging wrong-doing;
- community capacity and willingness to respond to disclosures appropriately; and
- the sexualisation of children and young people in popular culture, consumer and other media settings.

School-based sexual abuse prevention programs teach children skills such as how to identify dangerous situations, refuse an abuser’s approach, break off an interaction, and summon help. Many of these programs also aim to promote disclosure and reduce self-blame among young victims. Considerable evaluation research exists about these programs, suggesting that they achieve certain of their goals. Research shows, for example, that young people can and do acquire the concepts that are taught in these programs. The programs may also promote disclosure and help children not to blame themselves (Finkelhor, 2009).

Walsh and colleagues (2015) conducted a recent systematic review of the effectiveness of school-based education programs for the prevention of child sexual abuse. The studies included in this review show evidence of improvements in protective behaviours and knowledge among children exposed to school-based programs, regardless of the type of program. There is evidence that children’s knowledge does not deteriorate over time. The results also show that program participation may increase the odds of disclosure.

Sanderson (2004) describes several specific features of school-based sexual abuse prevention programs that are associated with children’s acquisition and retention of concepts and skills:

- Active participation – active inclusion in program content e.g. through role plays is more effective than passive teaching methods;
- Explicit training – having children rehearse appropriate behaviours; opportunities to practice skills;
- Group training – as opposed to individual programs;
- Standardised materials – materials, consent and administration procedures are standardised and programs are taught by trained instructors;
- Integrated into school curriculum;
- Long rather than short programs – involving repeated presentations, with follow up “booster” sessions. Prevention education has a cumulative effect with knowledge and skills improving with further exposure;
- Parental involvement – children will benefit more from programs if parents are also included. Parents can play an important role in facilitating children’s learning by answering questions, reinforcing program concepts and testing prevention skills; and
- Teacher education – programs that also include teacher education to present a multi-systemic program targeting children, parents and teachers are most effective.

While the majority of primary prevention efforts targeting school-aged children have focused on protective behaviour to prevent victimisation, Letourneau and colleagues (2017) report on the development of a school-based universal prevention program focusing on the prevention of juvenile

offending. The program, Responsible Behavior with Younger Children, is designed to prevent the onset of child sexual abuse, and is currently under preliminary evaluation (Letourneau, Schaeffer, Bradshaw, & Feder, 2017).

Secondary intervention

Quadara and colleagues (2015) discuss two examples of secondary intervention programs: Prevention Project Dunkelfeld and the Stop it Now! UK and Ireland campaign:

- Prevention Project Dunkelfeld (PPD), a German prevention strategy, targets paedophiles and hebephiles who have not been arrested or convicted of any sex crimes against children but who are interested in accessing help and treatment. This program aims to control participants' thoughts and feelings towards children and incorporates cognitive behaviour therapy, group and individual therapy, sexological tools (e.g., finding ways to connect with adult sexual partners) and medical options (e.g., chemical castration).
- Stop it Now! Is based upon a telephone hotline service and was established about 10 years ago in the UK (based on the US program) to allow individuals who are worried about their thoughts and actions around children to anonymously speak about their concerns.

Tertiary intervention

Quadara and colleagues (2015) also discuss two examples of tertiary prevention programs, including Circles of Support and Accountability (COSA) and the Good Lives model.

- COSA, which was established in Canada 15 years ago, aims to support released child sexual offenders through group and individual meetings, help them find employment and housing, and reintegrate them back into society after their period of incarceration. Results indicate that offenders who have been part of COSA have between a 70% and 83% lower chance of sexual reoffending than those who did not partake in the group (Finkelhor, 2009; Wilson, Cortoni, & McWhinnie, 2009). The program is now available in the UK and the USA, and a trial is being conducted in South Australia (Worthington, 2015).
- The Good Lives framework, as proposed by Ward and Gannon (2006), aims to understand offending within a broader concept of unmet needs or frustrations with satisfying universal human needs. The treatment is focused on building the offender's self-esteem, self-confidence and sense of hope so they can work towards a better life that is free from child sexual abuse.

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Community Views

In 2009, the Australian Childhood Foundation conducted the latest in their series of national community attitude tracking studies about child abuse and child protection (previous surveys were conducted in 2003 and 2006). Key findings from the 2009 survey included:

- 1 in 3 Australians would not believe children if they disclosed they were being abused
- Greater than 1 in 4 Australians do not feel confident enough to recognise the signs of child abuse and neglect
- 1 in 5 lacked the confidence to know what to do if they suspected that a child was being abused or neglected
- Unless they come face to face with the issue, collectively Australians rate petrol prices, public transport and roads as issues of greater concern than child abuse
- 90% of adults surveyed believed that the community needs to be better informed about the problem of child abuse in Australia
- 86% of Australian believed that Commonwealth and State Governments should invest more money in protecting children from abuse and neglect (Tucci, Mitchell & Goddard, 2010).

The results of the 2009 study reflected earlier findings from the 2003 and 2006 surveys – there was little change in community attitudes to child abuse and child protection over the six years (Tucci et al., 2010).

1 in 4 adults had identified a case of child abuse or neglect in Australia in the past 5 years. Just under half of these cases involved physical abuse (26%) or sexual abuse (21%) of children. 60% of the cases identified involved children 8 years old and younger. Of those who had identified a case of child abuse or neglect, 44% were so worried about the child's safety that they had made a report to child protection authorities or the police. A further 21% had discussed their concerns with a professional. However, 1 in 6 (16%) had done nothing. Of those who took no action, 24% were unwilling to become involved and 53% were not certain about what to do or who to contact (Tucci et al., 2010).

Almost a third of respondents (32%) believed that children make up stories about being abused. A further 24% of respondents could not make up their minds whether or not to believe children's stories about being abused. Paradoxically, 88% of respondents believed that children would be negatively affected if adults did not believe them when they disclosed abuse (Tucci et al., 2010).

Australians ranked child abuse 13th on a list of community issues, behind rising petrol prices and problems with public transport (Tucci et al., 2010).

Almost 1 in 5 (17%) of Australians believed that children were unlikely to know the person who abused them (i.e. abuse is perpetrated by strangers) (Tucci et al., 2010).

1 in 6 (16%) of respondents were unclear about whether or not sex between a 14 year old and an adult would constitute sexual abuse (Tucci, Mitchell & Goddard, 2006).

80% of respondents believed prison sentences for convicted sex offenders were too lenient. Nearly 95% said treatment programs should be mandatory (Tucci et al., 2006).

One third of people surveyed felt they only had a minor role to play in protecting children (Department of Community Services, 2006).

78% of people surveyed had some hesitation about whether they would be able to identify abuse of neglect if they came across it (Department of Community Services, 2006).

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Online Risks, Exploitation and Grooming

Youth online: Activity and privacy

A 2017 Australian Child Health Poll published by the Royal Children's Hospital Melbourne found that:

- Almost all (94%) of teens aged 13-17 years, two-thirds (67%) of primary school children aged 6-12 years, and over a third (36%) of pre-schoolers aged 3-6 years have their own personal mobile screen device (e.g. smartphone or tablet).
- 71% of teens, 17% of primary school children and 13% of pre-schoolers report using a smartphone every day.
- Three in four (78%) teenagers and one in six (16%) primary school-aged children have their own social media accounts.
- Two-thirds (66%) of Australian children use screen-based devices without adult supervision at least once a week, with one-third doing so every day. Parents reported that 50% of children aged less than 6 years use screen-based devices without adult supervision (Rhodes, 2017).

The Australian Communications and Media Authority (ACMA) and the Office of the Children's eSafety Commissioner released a research snapshot which provided updated information on the online activity of Australian children and youth (eSafety.gov.au, 2018). This snapshot showed that:

- At June 2015, over 935,000 Australian teens had gone online in the previous four weeks. That equates to 82% of all teens, up from 74% four years earlier.
- Of teen internet users, 88% went online more than once per day.
- At June 2011, smartphones were used by less than a quarter of teens (aged 14 - 17 years). Four years later, at June 2015, 80% of all Australian teens used a smartphone.
- Tablets were used by 27% of teens in June 2014; this figure rose to 39% just twelve months later.
- At June 2011, 39% of teens (aged 14 - 17 years) used the internet for social networking. Four years later, at June 2015, 54% of teens used the internet for this purpose.

Between 2009 and 2012, the proportion of Australian youth saying that the internet was extremely important to them was found to increase significantly (Australian Communications and Media Authority, 2013).

In an Australian study, Green and colleagues (2011) found that:

- 46% of kids go online in their bedroom or other private room and over two thirds (70%) at a friend's house. More girls (56%) than boys (38%) can access the internet from their bedroom, while in Europe these numbers are equivalent
- Three in five children go online via a mobile device - 46% report handheld access to the internet (e.g. iPod Touch, iPhone or Blackberry) and an additional 14% access the internet via their mobile phone
- Two thirds (65%) of children who use the internet have their own SNS (social networking service) profile, a little more than the 25 nation average of 59%

- Only 29% of 9 - 10 year olds, but 59% of 11 - 12 year olds, have a SNS profile, suggesting that it is the start of secondary school, rather than the minimum age set by popular SNS providers, that triggers social networking activity
- 29% of 11 - 16 year olds (more boys than girls, more teens than younger children) say they are in communication with people they first met online, unconnected with their offline social networks
- In the past year fewer than one in four (24%) 9 - 16 year old internet users have looked for new friends on the internet, 21% have added contacts they don't know face to face, and 10% have sent an image of themselves to someone not met face to face
- One reason for using the internet to look for new friends might be that just under half (46%) of 11 - 16 year old internet users say they find it easier to be themselves online. Also, 47% talk about different things online than offline, and more than one in five (22%) talk about more private things online than when present with other people face to face
- 30% of children say they have been bothered or upset by something online in the past year: two and a half times the European average (12%) and more than any other of the 25 countries
- By implication, one in five 9 - 16 year olds (21%) do not see the internet as problematic for children of their age. Younger children are least likely to be concerned that what's on the internet might bother other children, but equally likely to have felt bothered themselves
- While 30% of 9 - 10 year olds say they've been bothered by something online, their parents are less likely to recognise this. 16% of these children's parents say 'something has bothered my child online'
- Among the next age group, 11 - 12 year olds, 30% also report that they have encountered something that bothered or upset them. 23% of their parents recognise this
- 34% of Australian children have had contact online with someone they have not met face to face (the 25 nation average is 30%).
- 5% of Australian children have gone to an offline meeting with someone they first met online
- Only two thirds of Australian parents talk to their children about what they do on the internet (67%).

A Survey of Children's Use of the Internet conducted with 863 youth aged 9 - 16 years across 38 schools in Ireland found that 23% reported meeting someone in real life after first meeting them on the internet. Of these, 6% indicated that the person who had introduced themselves as a child on the internet turned out to be an adult (Ipsos MORI, 2009).

Youth online: Exposure to pornography

Teens and young adults, both girls and boys have a cavalier attitude toward porn:

- When they talk about pornography with friends, 90% of teens, and 96% of young adults say they do so in a neutral, accepting, or encouraging way.
- Only 1 in 20 young adults and 1 in 10 teens say their friends think viewing pornography is a bad thing. (Enough is Enough, 2017)

Teens are watching more porn and seeking it out more than any other generation:

- Among those age 13 - 17 years: 8% daily; 18% weekly; 17% once or twice a month.
- Among those aged 18 - 24 years: 12% daily; 26% weekly; 19% once or twice a month.

- 83% of boys and 57% of girls have seen group sex online; 32% of boys and 18% of girls have viewed bestiality online.
- 8.2% of top-rated porn scenes contain physical aggression (spanking, gagging, slapping, etc.); 48.7% contain verbal aggression (name calling). Perpetrators were usually male, 94% of the targets were women. (Enough is Enough, 2017)

The results of the third Youth Internet Safety Survey (YISS), conducted with a representative sample of youth in the US aged 10 - 17 years in 2010, showed that 23% reported unwanted exposure to pornography online, which was a decrease from 34% found in the second YISS conducted in 2005 (Jones, Mitchell, & Finkelhor, 2012). Despite the decrease in unwanted exposure, the proportion reporting deliberate access to online pornography remained relatively stable over time, suggesting that factors such as increasing use and efficacy of spamware and filters, or better education or understanding among youth, may have contributed to the decline in unintentional exposure (Jones et al., 2012).

In an Australian study Green and colleagues (2011) found that:

- More than two in five (44%) 9 - 16 year olds say they have encountered sexual images in the past 12 months, whether online or offline
- 28% of 11 - 16 year olds have seen sexual images online. 24% say they have seen online sexual images including nudity, 17% have seen someone's genitals online, 16% (more teenagers than young children) have seen images of someone having sex, and 6% say they have seen violent sexual images
- Regarding children who have seen online sexual images, 49% of parents say their child has not seen this, while 38% recognise that they have, and 14% say they don't know
- As in other countries, 9 - 10 year olds are less likely to see sexual images online but are more likely to be bothered or upset by the experience if they do
- Overall, most children have not experienced sexual images online and, of those who have, most say they were not bothered or upset by the experience.

The EU Kids online study has also shown that 14% of youth aged 9 - 16 years across 25 European nations report exposure to online pornography within the 12 months prior to the survey, although this study does not distinguish between unwanted and intentional access (Livingstone, Haddon, Gorzig, & Olafsson, 2011).

Ybarra and Mitchell (2005) found that prevalence of intentional internet pornography exposure increased with age, from 8% among 10 - 13 year olds to 20% among 14 - 17 year olds, with younger children favouring more traditional media like magazines and videos.

A telephone survey of 200 young Australians aged 16 - 17 years found that 84% of males were exposed inadvertently to online pornography compared to 60% of females. 38% of males reported deliberate online exposure compared to 2% of females. (Flood & Hamilton, 2003).

Sexting

In a recent systematic review, Klettke, Hallford and Mellor (2014) defined "sexting" as "sending, receiving or forwarding sexually explicit messages, images, or photos to others through electronic means, primarily between cellular phones".

A meta-analysis of studies examining the prevalence of multiple forms of sexting behaviour among youth showed that the mean prevalence for sending and receiving sexts was 14.8% and 27.4% respectively. The prevalence of forwarding a sext without consent was 12%, and the prevalence of having a sext forwarded without consent was 8.4% (Madigan, Ly, Rash, Van Ouytsel & Temple, 2018).

A Swedish study which surveyed adolescents aged 12 - 16 years found that 20 - 32% reported having received sexts (“images or videos that contain nudity or are sexual in nature”), while 4 - 16% reported having sent them (Burén & Lunde, 2018).

Recent research with young people in Australia has shown that 38% of 13 - 15 year olds and 50% of 16 - 18 year olds report having sent a sexual picture or video of themselves to another person, and that 62% of 13 - 15 year olds and 70% of 16 - 18 year olds report having received a sexual image (Crofts et al., 2015).

In England, 38% of youth aged 14 - 17 years had sent sexual images to a partner during or after their relationship, and 49% had received them (Wood, Barter, Stanley, Aghtaie & Larkins, 2015).

Lifetime prevalence rates for sexting have been reported from as low as 2.5% - for appearing in or creating “nude or nearly nude” images among a representative sample of youth aged 10 - 17 years (with 7% indicating receipt of such images) (Mitchell, Finkelhor, Jones, & Wolak, 2012), to as high as 48% - for receipt of sexually suggestive written messages among an online panel sample of teens aged 13 - 19 years (National Campaign to Support Teen and Unplanned Pregnancy, 2008).

In an Australian study, Green and colleagues (2011) found that:

- 15% of 11 - 16 year old internet users have received sexual messages (‘sexts’). This is an average result across the study, and most recipients are 15 - 16 years old
- 4% of Australian children have sent sexts online
- 9% of 11 -16 year olds have been sent a sexual message, 6% have been asked to talk about sexual acts with someone online, and 5% have seen others perform sexual acts in a message. 3% have been asked for a photo or video of their ‘private parts’.

Online solicitation and grooming

Solicitation has been defined as “requests to engage in sexual activities or sexual talk or give personal sexual information” (Wolak, Mitchell, & Finkelhor, 2006), while grooming refers to a set of behaviours that occurs over an extended period of time, with the aim of developing a relationship with a young person, and which may eventually lead to the sexual solicitation of that youth (Dooley, Cross, Hearn & Treyvaud, 2009).

A German study of adolescents aged 14 - 17 years found that 22% reported online sexual interaction with an adult, with just 10% perceiving this interaction as a negative experience (Sklenarova, Schulz, Schuhmann, & Osterheider, 2018).

A study of transcripts of adults who sexually groomed decoy victims online found that the large majority of offenders (89%) introduced sexual content in the first conversation with the decoy victim. Results also showed that in 96% of cases, the offender and decoy victim arranged an in-person meeting – most commonly (89% of cases) the offender introduced the idea of this meeting. On average, the idea of meeting in person was introduced after 3.4 days (Winters, Kaylor & Jeglic, 2017).

In the 2010 Youth Internet Safety Survey, young people aged 10 - 17 years were asked whether, in the past year, anyone on the internet had asked “for sexual information about yourself”, “to talk online about sex”, or “to do something sexual”, when this was not wanted (Jones et al., 2012). The prevalence of online solicitation was found to range from 2% among 10 - 12 year olds, to 14% among 16 - 17 year olds, with an average prevalence rate of 9% across all ages (Jones et al., 2012).

Data from earlier versions of the Youth Internet Safety Survey have shown that the majority of online solicitations come from other youth (48% in YISS-1 and 43% in YISS-2) or from young adults aged 18 - 25 years (20% in YISS-1 and 30% in YISS-2), with few coming from adults aged older than 25 years (4% in YISS-1 and 9% in YISS-2) (Finkelhor, Mitchell, & Wolak, 2000; Wolak et al., 2006).

The Youth Internet Safety Survey, conducted every five years in the US, has provided some insight into changes in online risk exposure over the period 2000 to 2010. Survey results across three data collection periods has shown that the proportion of youth reporting online solicitation has decreased from 19% in 2000, to 13% in 2005 and just 9% in 2010 (Jones et al., 2012).

In the Growing Up with Media survey, 35% of the 1,588 young people aged between 10 - 15 years who were surveyed reported being the victim of either internet harassment or unwanted sexual solicitation (Ybarra, Espelage & Mitchell, 2007).

In the Growing Up with Media survey, 15% of 10 - 15 year olds reported being victims of unwanted sexual solicitation at least once in the past year and 3% reported at least once a month or more often (Ybarra et al., 2007).

In the Growing Up with Media survey, 3% of 10 - 15 year olds reported perpetrating unwanted sexual solicitation of others in the past year and 1% reported doing so monthly or more often (Ybarra et al., 2007).

In the US Youth Internet Safety Survey conducted in 2006, the 1,500 young people aged 10 - 17 years who were interviewed reported frequent exposure to unwanted sexual material, sexual solicitations and harassment online. This survey showed the following profiles of targeted youth and perpetrators:

- Youth targeted:
 - 70% female; 30% male
 - 81% were 14 years or older
 - 3% of 11 year olds were solicited
- Perpetrators:
 - 73% were male; 27% female
 - Youth met 86% of those committing solicitation online, but 14% were people youth knew in person before the solicitation (Wolak et al., 2006).

Online offenders

Krone and Smith (2017) report a study of 152 federal offenders investigated by the Australian Federal Police for online child sexual exploitation offences. All offenders were men, most were described as Caucasian, and most were aged between 46 - 55 years. Of the 152 offenders, 85 (66%) had no prior criminal history. Eleven offenders had previously been convicted of a child exploitation material (CEM) offence and 10 had been convicted of a contact child sexual exploitation offence. The study also found that characteristics related to having a record of contact offender included: low SES, a

conviction for producing CEM, undertaking a networking role in CEM offending, providing CEM, and having a criminal history of charges for producing CEM (Krone & Smith, 2017).

A review of the literature on online child pornography offenders shows that on average, offenders are almost exclusively male and Caucasian in ethnicity, tend to be in their late-30s to mid-40s, employed and well educated – in contrast to the profile of the general offending population, high proportions of whom are of ethnic minority status and have limited educational backgrounds. Additionally, studies have shown typically low rates of historical and prospective offending among child pornography offenders (Henshaw, Ogloff & Clough, 2017).

Statistics obtained from Project Auxin (the Australian component of the larger Falcon Operation conducted in the US, France, Spain and Belarus), which investigated suspects in connection with a variety of offences related to accessing child pornography, indicated that the dominant profile of offenders arrested were male and were over 30 years of age. Female offenders comprised 3.1% of offenders (Choo, 2009).

A significant percentage of online sexual offenders do not have prior criminal histories involving offences against minors, or even non-sexual offences (Choo, 2009).

A relatively high proportion of online sexual offenders are juvenile and this proportion appears to be increasing (Choo, 2009).

Wolak, Finkelhor and Mitchell (2005) found the following demographic characteristics of offenders arrested for possession of child exploitation materials:

- 100% male
- 11% aged 18 - 25; 41% aged 26 - 39; 45% aged 45 or older
- 41% single or never married; 38% married or living with a partner; 20% separated or divorced; 1% widowed
- 73% employed
- 42% had adult or minor biological children
- 34% were living with a minor child
- 46% had direct access to minors through job, youth activity or in home
- 5% had a diagnosed mental illness
- 3% had a diagnosed sexual disorder
- 12% had evidence of deviant sexual behaviour, not involving minors
- 11% had prior arrests for sexual offences against a minor.

US law enforcement data from 2001-02 shows that among internet-initiated cases (those in which juveniles became victims of sex crimes committed by people they met through the Internet) involving arrests, 47% of offenders were at least 20 years older than their victim, and 99% were male (Wolak, Finkelhor, & Mitchell, 2004).

In the US National Juvenile Online Victimization survey by Wolak, Mitchell and Finkelhor (2003), it was found that a majority of the offenders arrested for possession of child exploitation materials were men. Most of these offenders possessed images of children who had not yet reached puberty:

- 83% had images of children between the ages of 6 - 12 years
- 39% had images of 3 - 5 year old children

- 19% had images of toddlers or infants younger than 3.

Online child exploitation material: Impact on victims

Gewirtz-Meydan and colleagues (2018) conducted a survey study with survivors of child pornography production, and found that many participants reported they had a number of negative reactions “all of the time”: 74% felt ashamed, guilty, or humiliated all of the time, 54% always worried that people who saw the images would think they were a willing participant, 51% always felt it was their fault the images were created, 48% always worried about friends or other people they knew seeing the images, and 48% worried all the time that people who saw the images would recognize them.

Often, due to the permanence of online materials and lack of control over the audience viewing it, initial feelings of shame and anxiety can increase over time, negatively impacting a victim’s psychological state (Gerwartz-Meydan et al., 2018).

Often a single perpetrator is unable to be identified, due to online sharing of materials, and can create feelings of re-victimisation, preventing closure for the individual (Leonard, 2010). This permanence and public accessibility can be one of the most difficult aspects for survivors to overcome (Gerwartz-Meydan et al. 2018).

The concept of closure can be more difficult for victims of online abuse to achieve. It is important for the victim to identify their perpetrator as this allows them to focus their fears and enables confrontation as they attempt to achieve closure (Leonard, 2010). With online abuse however, the survivors are continually traumatised when considering how many people could potentially be looking at the material (Gerwartz-Meydan et al., 2018; Leonard, 2010). Often a single perpetrator cannot be identified which creates a sense of ongoing abuse leading to feelings of unsafeness, sexualisation and victimisation (Leonard, 2010).

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