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Sexual Violence against children

**from stigma, shame and blame to healing
and accountability**

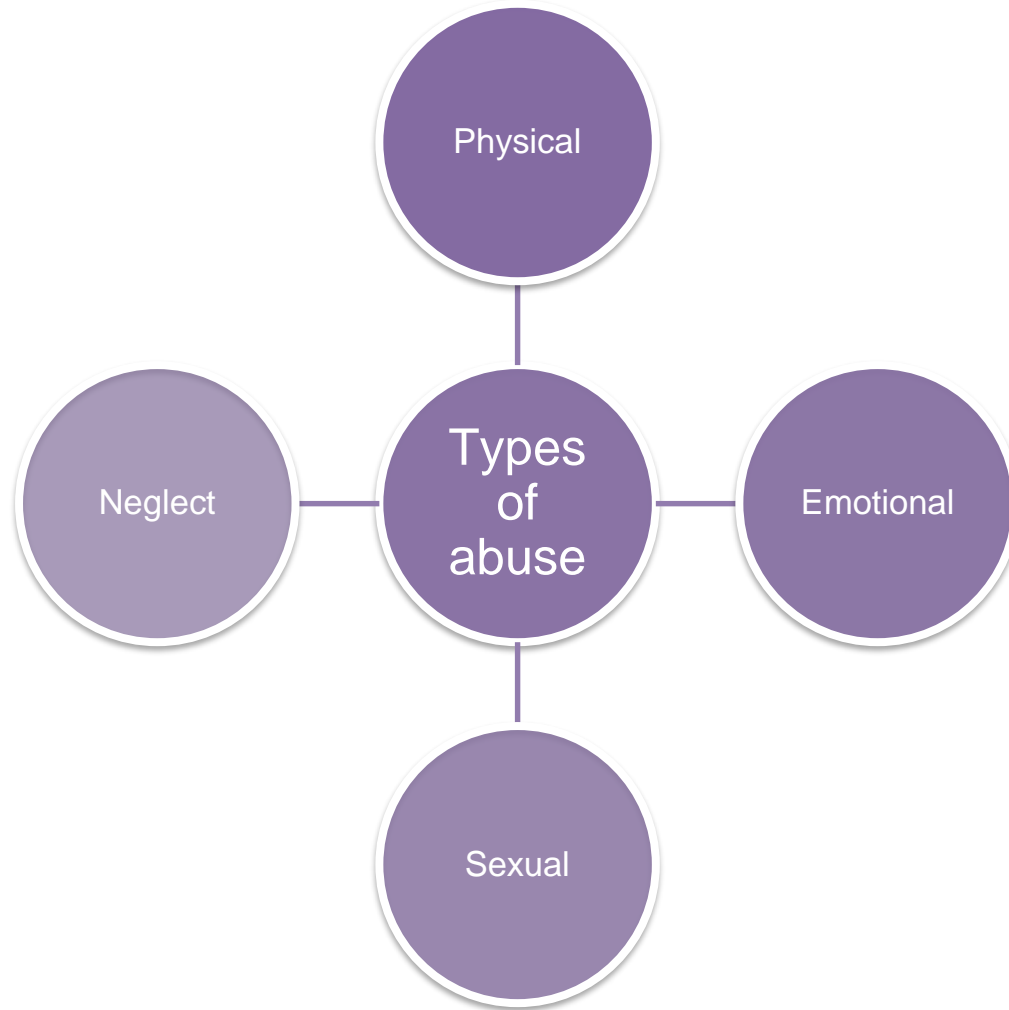


Establish class values

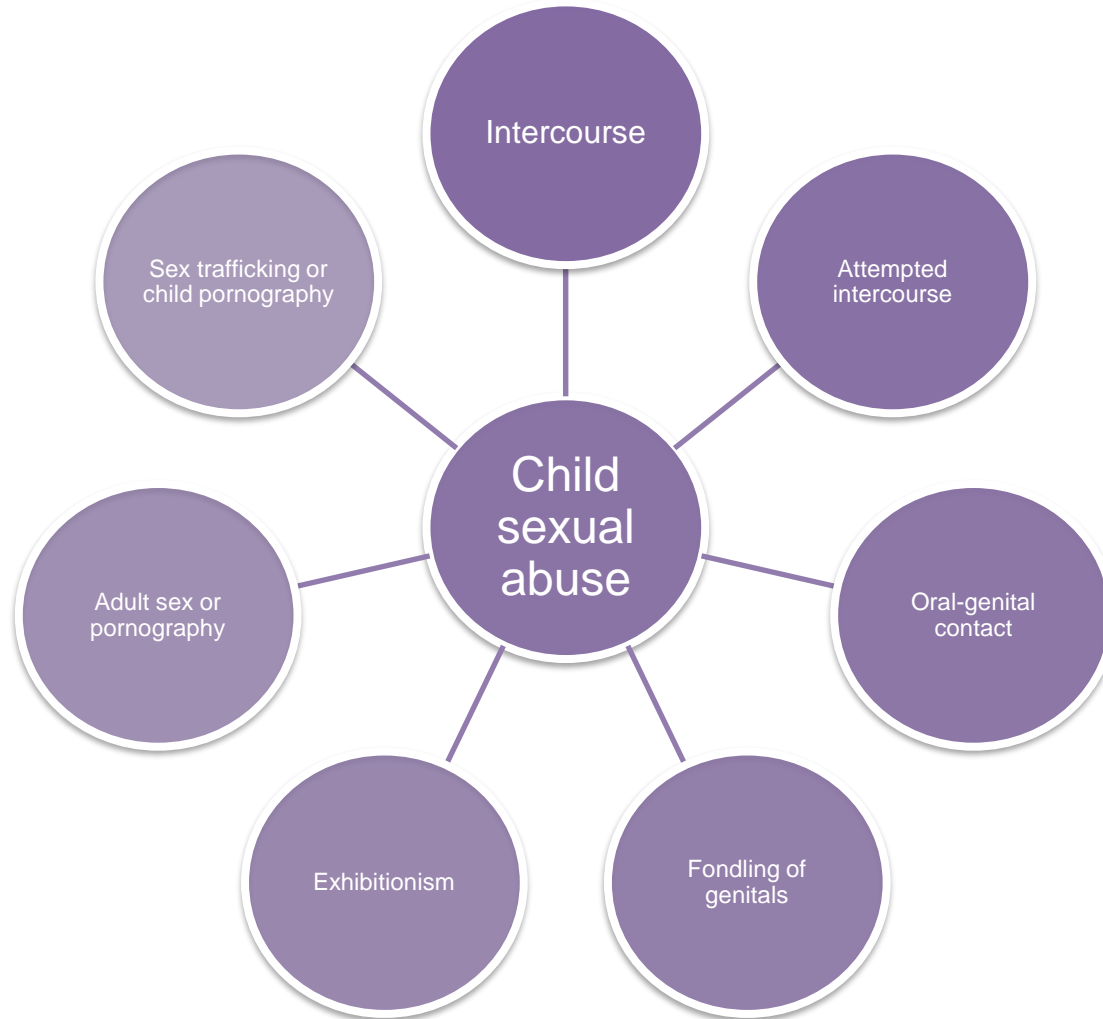


- We will be talking about sexuality, gender, pleasure, abuse and safety in these sessions. What will make this class a safe space for everyone to share, express their views and discuss freely?
- How do we want others to behave?
- How will we behave?

Types of Abuse



Child sexual abuse



Effects of CSA



Short term:

Behavioural changes

- Anger
- Self harm
- Excessive fearfulness, insecurity
- Change in personal grooming
- Drop in academics
- Sleep disturbances
- Change in eating habits
- Somatic symptoms

Long term:

- Inability to trust close family and friends
- Difficulty in maintaining relationships
- Poor body image
- Substance abuse
- Harmful sexual behaviour
- Marital issues
- Dysfunctional family formation/Poor parenting
- Intergenerational trauma
- Anti social behaviour

For long term effects of child abuse refer to - The CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study is one of the largest investigations of childhood abuse and neglect and household challenges and later-life health and well-being. <https://www.cdc.gov/violenceprevention/aces/about.html>

The original ACE Study was conducted at Kaiser Permanente from 1995 to 1997 with two waves of data collection. Over 17,000 Health Maintenance Organization members from Southern California receiving physical exams completed confidential surveys regarding their childhood experiences and current health status and behaviors.

Long-term consequences and manifestation of child sexual



abuse

- Some of the consequences include “depression, anxiety, guilt, fear, sexual dysfunction, withdrawal and acting out.”
- Parental child-rearing practices play a role in the severity of the impact
- Behavioral symptoms may or may not exist
- Emotional reactions might include: fear, shame or guilt, aggression, moody, problems concentrating, nightmares, bedwetting, etc.
- Physical symptoms may include: chronic pain in abdominal area, soreness in genital and anal areas, STI’s, pregnancy, eating disorders, etc.

Child Sexual Abuse - Yes or No



- Child sexual abuse is committed by strangers - NO
- Child sexual abuse does not happen in religious, cultured and orthodox families - NO
- If 50% of children report abuse, it means 50% of adults are abusers - NO
- 24-hour surveillance will prevent child sexual abuse - NO
- Explaining about personal safety to the child will unnecessarily frighten the child – NO
- Not naming the private parts of the body makes it difficult for children to report abuse - YES
- Silence around sexual parts keeps children from talking about sexual abuse - YES

Child Sexual Abuse - Yes or No

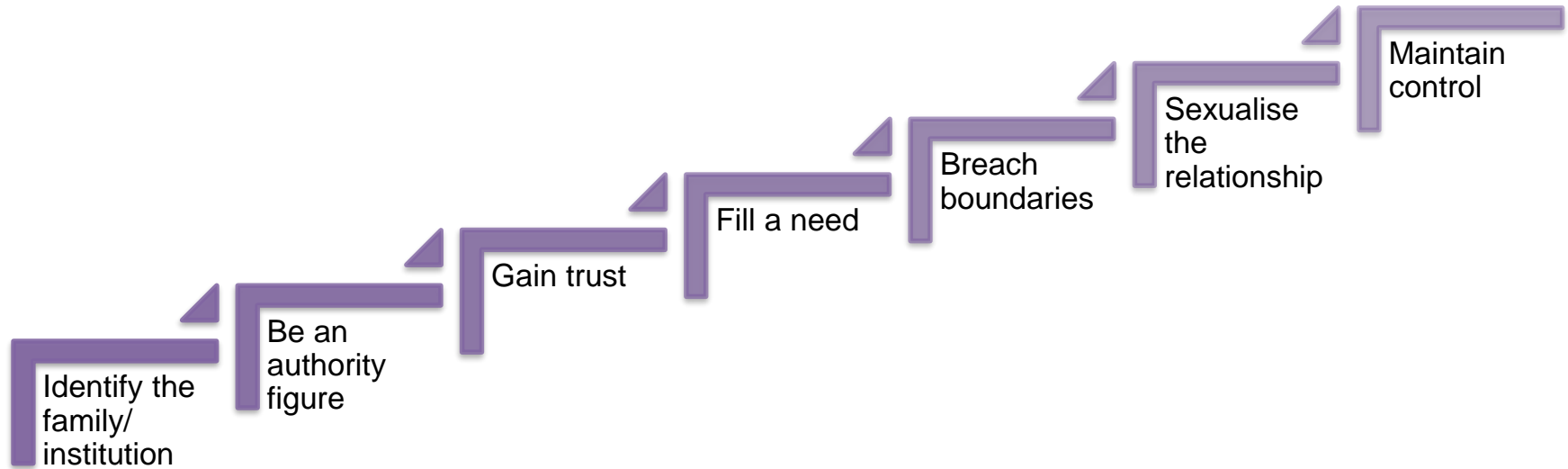


- Attaching shame to sexual and reproductive organs keeps children from talking about sexual abuse - YES
- If parents ignore the sexual abuse, the child will also learn to ignore it and move on – NO
- Children often lie about CSA - NO
- Children generally don't report abuse because they feel they won't be believed or that they will be blamed for it or because they don't want the family to break up - YES
- If the abuser is a close relative/family member, then nothing can be done about it - NO

The Grooming Process



1. Identify the family/ caregiver/ institution to gain access to the child
2. Be an authority figure, helpful, financial help
3. Gain Trust
4. Fill a Need (taking care of the child)
5. Breach Boundaries of the Child - publicly and in private
6. Sexualize the Relationship - sexually abuse the child
7. Maintain Control



Pedophilia and child sexual abuse



All perpetrators of child sexual abuse are *not* pedophilic.

Many pedophilic persons *do not* sexually abuse children. They manage their sexual urges towards children in other ways.

Pedophilia vs child sexual abuse



Pedophilia

- Research is tilting towards considering pedophilia as an orientation - it describes the sexual interest in children and/ or adolescents
- Many have feelings of guilt about their sexual urges and fantasies.
- Distress often extends to and affects their personal, social and occupational life and relationships
- many persons with paedophilia **never act out on their impulses** and abstain from abusing a child
- Defined by body maturity (for instance, Tanner's stages of pubertal changes), and not the age of the sexual partner. Sexual activity with a person in late adolescence may not concern a person with pedophilic disorder

Child sexual abuse

- child sexual abuse is a **behaviour**
- It is illegal and harmful -involves physical or psychological coercion or at least one individual who cannot reasonably consent to the act.
- the perpetrator **usually does not feel guilt/ distress**,
- The perpetrator maintains personal, social, occupational relationships
- perpetrators groom children
- includes actions performed by people with pedophilic disorder
- Defined by age of the child, not body maturity.

Paedophilia, paedophilic disorder



According to DSM V (APA 2013)

Pedophilia is (criteria A only)

A. An adult, for at least 6 months has recurrent, intense sexual urges or fantasies about sexual activity with a pre-pubescent (less than 14 years old) child(ren). (acting on these desires is not necessary for the diagnosis)

Paedophilic disorder is where (criteria A and B are met)

B. The individual has acted on the sexual urges or the fantasies or urges cause marked distress or interpersonal difficulties

Pedophilia may be:

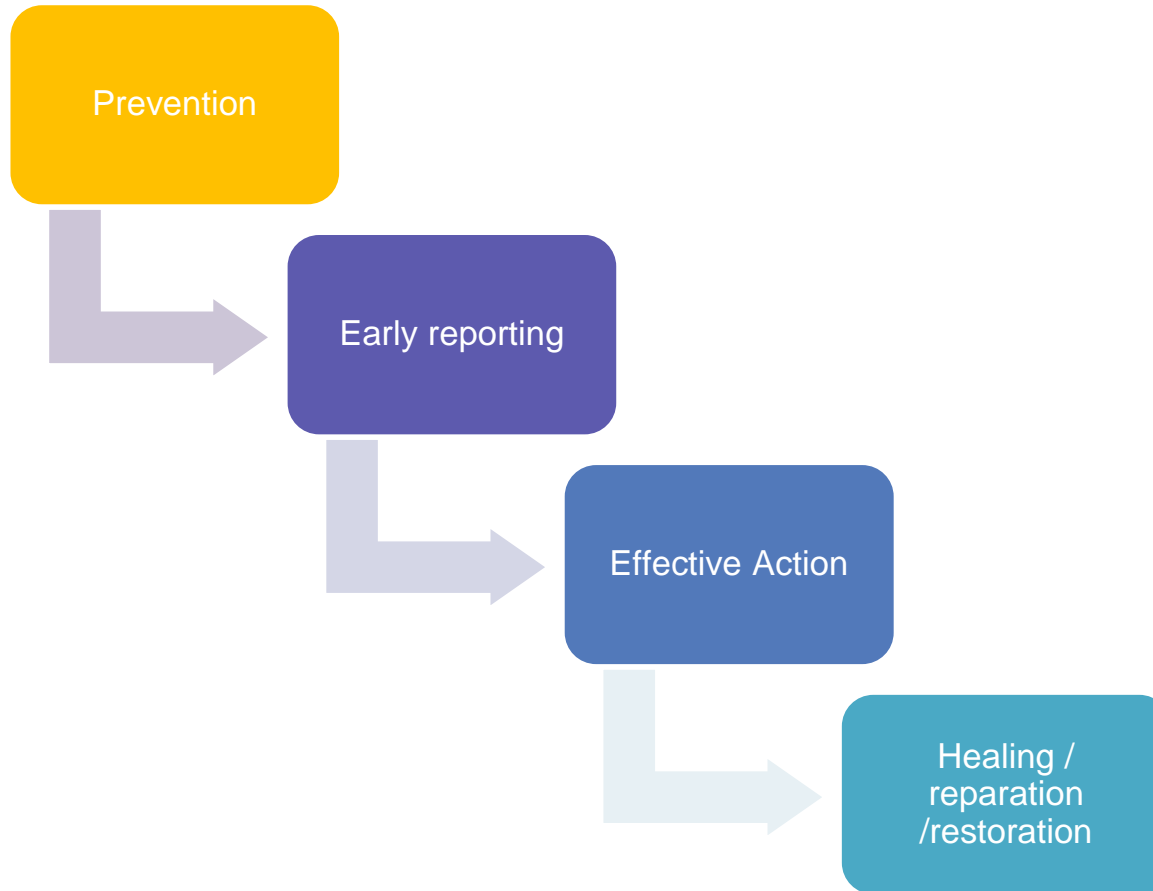
- **exclusive** (attracted to children alone) or **non exclusive** (attracted to children and adults)
- **attracted to females, or males or both**



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Responding to Child Sexual Abuse

What can we do?



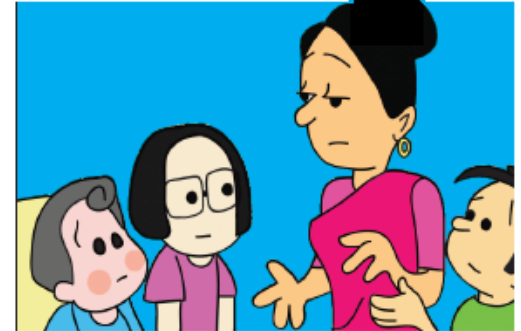
Prevention and early reporting of abuse

Family level:

Naming the body parts (1.5 to 2 yrs)

No shame or guilt attached to body parts (from birth)

Respecting children (from birth)



School Level:

Naming body parts (2-3 years)

Personal safety education (3yrs- 10 yrs)

Sexuality education (11-18 yrs)

Teacher training to detect abuse

Parent awareness classes

Prevention and early reporting of abuse

- Give a vocabulary to pre-school child.
- Name all body parts find words you are comfortable with, clear, unambiguous.
- Encourage children to report discomfort.



first wash your face,
then your tummy and back.
then the places you pass
urine and stool from.
and then your
hands and feet.

Personal safety rules - Clothing



- We don't
 - Undress and show our own body in a way that makes others feel uncomfortable/ sad/ confused/ scared
 - Show our chest, genitals, anus/buttocks in front of others
 - Take off the clothes from anybody's body in a way that makes them feel uncomfortable/sad/confused/scared
- No one should
 - Undress and show us their body in a way that makes us feel uncomfortable/ sad/ confused/ scared
 - Show us their chest, genitals, anus/ buttocks
 - Take off our clothes in a way that makes us feel uncomfortable/ sad/ confused/ scared

Personal safety rules - Touching



- We don't touch
 - anyone's body in a way that makes them feel uncomfortable or sad or scared or confused.
 - anybody on their mouth, chest, genitals or anus/buttocks
 - ourselves in our chest, genitals or anus/buttocks in front of others.
- No one should touch
 - Our body in a way that makes us feel uncomfortable or sad or scared or confused.
 - Us on our mouth, chest, genitals or anus/buttocks
 - Themselves on their chest, genitals or anus/buttocks in front of others.

Personal safety rules - Talking



- We don't
 - Speak about others' or our own bodies in a way that makes others feel uncomfortable/ sad/ confused/ scared
 - Talk or joke about genitals casually with others
- Nobody should
 - Speak about our bodies, in a way that makes us feel uncomfortable/ sad/ confused/ scared.
 - Talk or joke about genitals casually with us

Teach Agency: No- Go - Tell



- You are the boss of the body
- You can say “**No!**” for your safety
- You can **Go** and ask for help.
- **Tell** - People can help you if they know you are being troubled.
- **If you could not say No, could not go away, could not tell, it is still not your fault!**





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CSA - Interventions

Goals



1. To help them express their emotions, their pain and trauma if any, their anxieties and their current beliefs that might have been shaped by that experience
2. To enable them to move on from a sense of victimhood and feel positive about themselves



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When abuse is suspected

Inappropriate leading questions



- Is x troubling you and touching you in your private parts? *(implicating x without proof and suggesting that the child should be careful of x)*
- You look scared of x - what have they done to you? *(suggesting that x is a scary person)*
- I know that you will not lie. Tell me exactly what happened and why you didn't do anything about it? *(pressurizing the child to be exact in info they share + hinting that child may also have contributed to the situation)*
- Why did you stay friendly with x if you were uncomfortable with them? *(hinting that child may also have contributed to the situation)*

Helpful conversation



- About child's feelings and emotional state
- About relationships with family and friends
- About the places the child frequents
- About uncomfortable other situations

To make the child feel comfortable and reassured



- I am asking you this because if this happens, you can always come and tell me about it.
- Things that trouble you, need not be kept bottled up inside you.
- The person may tell you that it's alright, that this is how people express love, no need to tell anyone, to keep it secret, may try to bribe or even threaten you. But for your safety, it will be best to tell an adult you trust about it.
- When an adult or older person (older child) troubles or abuses a child, it is never the child's fault. The adult or older person is responsible.



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When child has faced sexual abuse

Responding to a child facing sexual abuse



- Listen and reassure
- Do not blame the child
- Listen without commentary
- Explain the child that you are required by law to report
- Involve support persons
- Explain legal process to child and family
- Encourage medical and mental health care
- Do not make tall promises

Reporting vs Confidentiality



- You can report the matter to the School Child Protection Office/ Head of the School/ Institution/ Parent and Police. POCSO Act 2012 requires that any adult who learns about or suspects sexual abuse of a child, reports it to the local police station.
- We can share information about the abuse only with those individuals who will be directly involved with supporting the child in recovery and in processes of the criminal justice system.

Providing support to a survivor of sexual violence



- Believe and support the victim's description of the assault.
- Respect the victim as a whole person
- Don't expect a victim to express one specific anticipated emotion like crying or outbursts of anger to trauma
- Make eye contact with the patient in a non-judgemental, kind manner that does not convey curiosity, fatigue or any form of accusation.
- Establish trust and rapport
- Maintain confidentiality , dignity and privacy.
- Use active, empathetic and reflective listening without rushing the patient. Use non judgemental language.
- Ask questions out of concern, and not curiosity.

Providing support to a survivor of sexual violence



- Display non judgemental mannerisms, gestures and facial expressions
- Be aware that people of any sex and gender identity and sexual orientation can be violated sexually. This understanding is very important in preventing re-traumatization
- Normalise the emotions regarding the event
- Provide information about emergency contraception and STI testing
- Be aware of the long term consequences of sexual violence without alarming the survivor
- Establish a follow up plan
- Refer to a sensitive mental health professional, preferably experienced in counselling in sexual trauma to be suggested to the patient.

Supporting victims of sexual violence to deal with their emotions



Feeling	Some ways to respond
Hopelessness	Say, "You are a valuable person. What you have experienced does not change any of that. I am sure you will be able to put this behind you and focus on things that are important for you."
Despair	Explore what is the key cause for the despair. Focus on putting the experience in perspective - in terms of intensity/ timelines/ impact/ facts and data - to convey that tough times don't last forever, that time heals, that there are multiple ways in which to attend to whatever is important to the person.
Powerlessness and loss of control	Say "You are smart, intelligent, resourceful and you have choices and options today in how to proceed. You have chosen to talk about it / report the abuser / take action and that is appreciable."
Flashbacks/disturbed sleep	Recommend to professionals who can guide with calming processes, visualization techniques, intrapsychic processes, body/ movement therapy, that help reframe painful memories



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Feeling	Some ways to respond
Denial	Say, “You look shaken and upset/ sad/ fearful <reflect emotion>. It is ok to feel that way. I do wish that you feel better about things and if you would like to talk about it anytime later, let me know.”
Guilt and self-blame	Say, “You are not to blame for what happened to you. It may seem like you had a part to play because the abuser took advantage of the situation and manipulated you.”
Mood swings	Say, “It is normal to feel anger, anxiety, fear, sadness and any distressing emotions with varying degrees of intensity because of what you had to go through.”
Fear	Emphasize, “You are safe now” (if the situation has improved)
Shame	Say, “There is no loss of honour in being sexually assaulted. The person who did this crime is wrong and has to face the consequences. Honour does not rest in our bodies or our private parts that we should be ashamed when someone abuses us”

What to say to an abuser



Report to School's Child Protection Committee.

Discuss with someone who works with issues like this.

Prepare yourself and speak with the abuser

1. What you have done is totally unacceptable.
2. You do not respect children or the values that this institution stands for.
3. You are not to leave the premises until the police arrives (if in an institution).
4. You are not to go near the child. You are not to contact the child.
5. Do whatever you need to do to change your behaviour.



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How to answer children's questions on reproduction

Answering questions about reproduction



1. Why is Aunty so fat? (when referring to female who is pregnant)

She is not fat (and if person is obese or overweight as well, it is useful to help the child be sensitive to people with diverse body shapes and sizes). She is carrying a baby.

1. How does the baby come out?

Mummy's body has a baby house. The baby grows in it. When it is big enough, it comes out of the 'baby passage' that is attached to the baby house.

1. Where is this?

There is a food pipe for food to go in, a wind pipe for breathing. In the same way, there is a baby birth passage near the susu place in mummy's body. That's how mummy's body is different from daddy's body.

Answering questions about reproduction



4. How did the baby get inside Mummy?

Our bodies are made of cells, like a house is made of bricks. A baby is made when daddy's baby cell joins mummy's baby cell. When mummy and daddy want to make a baby, they come very close to each other. This way when daddy's cell enters mummy's body, a baby begins to grow.

5. What is menses/ a sanitary pad?

When females grow up, their body begins to make baby cells. Every month discharge comes out of the baby house (womb) for 5-6 days. This discharge is called menses. Since it can feel uncomfortable and stain one's clothes, females use sanitary pads during that time.



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How to discuss personal safety with children, adolescents and young adults

1. Why do we need personal safety rules?

Rules help us keep safe and maintain some discipline and decorum so we can carry out our work peacefully and effectively. Personal safety rules similarly help keep us safe and let us go about our work and to pursue our goals

1. The person who harassed me is so popular among the community members/ school/ group. I am afraid no one will believe me if I told them about what he/ she does and they might blame me instead

No one has the right to break your body safety rules. If you feel your immediate circle of adults won't believe you, identify other safe adults - who care for you, who watch out for you - maybe at school/ extended family/ friends' homes or even the child helpline 1098 - who might listen to you objectively and help stop the harassment/ abuse

3. I did not do much/ I was not able to stop the trouble maker from breaking my body safety rules. I am feeling guilty about it

It is never your fault if someone breaks your body safety rules. An adult should show great responsibility and not do anything to break your body safety rules. It is their fault if they broke these rules

4. I would like to dress the way I wish and not have to worry about trouble makers who may intend to break my body safety rules. Why should I restrict myself?

One needs to be aware and alert to their surroundings and mindful of the place and occasion where they may be at different times. This does not mean one should always cover themselves up 'modestly'. As long as one feels confident of their safety, they can choose to wear the clothes they are comfortable in (and that is

legally permissible)

1. Isn't it awkward to keep asking one's partner for their consent for different sexual acts like kissing, fondling and such?

Taking consent is a way of respecting one's partner and ensuring that one is not harassing/ abusing another person (by assuming consent). It could be an established way in the relationship, where one is mindful of the other's reactions, checks on their consent, encourages the other to speak their mind and backs off when consent seems ambiguous. Consent does not need to be verbal all the time - it may be conveyed through gestures, tone, sounds, expressions and other non verbal ways. One needs to be cognizant of what is being conveyed in all these ways. This builds the foundation for a healthy relationship

2. Isn't it unfair for someone to withdraw consent after having given it at the beginning of the act/ relationship?

It is not. Humans go through an array of emotions which may cause them to change their mind at any time. Instead of feeling rejected or hurt, it may be a good idea to explore what made them feel differently and if there is anything one can do to help them feel better

3. I feel obliged to go ahead with a sexual act once I have agreed to it (verbally or non verbally) - otherwise I feel I have led my partner on (or may be accused of doing so) or worry that they will feel rejected and may lose interest in the relationship/ or even retaliate!

One's safety and sense of okayness is of primary importance. If one feels differently about sex/ sexual acts after agreeing to it, it is ok to withdraw consent. It may also offer opportunities to discuss one's preferences and concerns with one's partner, to ask for what one needs instead, or to just take care of oneself. While the partner may feel upset, they also have to understand that the same care applies to them and their needs too

This PowerPoint is part of a project to prevent gender based violence. This project is supported by Ford Foundation.



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Thank You!

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SURAKSHITH APP

Information, stories on personal safety for children.



BAL SURAKSHA APP

Information on answering children's questions, managing child sexual abuse.



STRI SURAKSHA APP

On crimes against women, laws, interventions and healing techniques.

All Apps in 10 languages, free on android Developed with UNICEF and MeitY (CDAC Hyderabad)