FACT SHEET: Child sexual abuse

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**Child Sexual Abuse**

Child sexual abuse (CSA) occurs when someone 16 years or older involves a child in any sort of sexualised behavior. The abuser may use their physical, psychological or emotional power to exploit the child’s innocence, appropriate naivety about sexual things, and their dependence on the adult.

**How prevalent is child sexual abuse?**

It is estimated that one in four girls and one in six boys will be sexually abused as children. Any child is at risk of CSA, because all children are vulnerable, and it can be very hard to pick out a pedophile. Children of all ages, races, cultures and socio economic backgrounds can be sexually abused.

**Grooming**

In 85% of child sexual abuse cases, the child knows the offender, and the abuse occurs in the child’s home (NSW Commission for Children & Young People, 2009). Most perpetrators are trusted by the child, and they use this position of trust to manipulate the child into sexual activities. Rather than physical force, most perpetrators use threats, deception, dependence, affection, play, gifts, special activities, or anything that is of importance to the child to manipulate them. They want the child to become their most loyal ally. It’s this relationship of complete trust, and or dependence that will ensure the child will do as the perpetrator asks, and keep their secret. The act of being able to manipulate the child can be as satisfying to the pedophile as the act of sexual abuse itself.

**How can you tell if a child has been sexually abused?**

It can be very difficult to tell if a child has been sexually abused because they may not be able to understand what has happened, or be able to articulate it. Some reactions to CSA can also be like reactions to other types of trauma.

Pedophiles will often target children who are unsupported, unlikely to be believed, or have a history of lying. As adults, if a child tells us that they have been sexually abused, we have a responsibility to believe them, and report the abuse so that the appropriate support can be put in place to help that child.

**Possible Psychological/Behavioral Indicators of CSA:**

Sleeping difficulties such as nightmares

Withdrawn behavior

Hyperactive uncontrollable behaviors

Anger issues

Anxiety

Poor self-esteem/ Have difficulty in identifying and expressing their needs

Depression

Self-harm including suicidal ideation

Not wanting to be left alone with a certain people

Age-inappropriate sexual behavior or knowledge

Changes in eating patterns/Eating disorders/ body image problems

Trust issues

Clinginess/ indiscriminate affection

Changed school performance

Regression in behavior

Difficulty concentrating and completing tasks

Excessive daydreaming which may reflect disassociation

**Possible Physical Indicators of CSA:**

Stomach aches

Developmental regression

Soiling/ Loss of bowel and bladder control/ bedwetting

Urinary tract infections

Pain on urination

Itching, pain in anal/genital areas

Genital injuries/Vaginal or anal bleeding or discharge

Anal fissures

Sexually transmitted diseases

Pregnancy

**Common Symptoms of Adult Victims of CSA:**

Poor self-esteem/ Shame

Anxiety

Hypervigilance

Depression/ Negative thought patterns

Self-harm including suicidal behavior

Anger

Personality disorders

Eating disorders

Body dysmorphia

Post-traumatic stress

Intrusive recollections and flashbacks

Sleep problems including nightmares

Problems with memory/concentration

Dissociation

Relationship difficulties/Trust issues

Sexual difficulties such as painful intercourse, and or subsequent sexual victimization

Painful menstruation

**References and Resources**

NSW Commission for Children & Young People (<http://www.kids.new.gov.au>)

Brooke Woon (<http://www.brookewoon.com>)

Woon, B. (2016). *I Believe You: How to Heal from Child Sexual Abuse.* Inspired Book Publishing.