



Information sheet 17

Child Sexual Abuse: a process not an event

Almost all children who are sexually abused are abused in an ongoing and usually escalating process by someone known to them and with whom they have some sort of ongoing dependant relationship. This could be a parent, an older sibling, another relative, a neighbour, a family friend or other trusted adult etc. Although children can be sexually assaulted by a total stranger with whom they have no prior relationship this is very much the exception.

It is within the context of this dependant relationship that the perpetrator exploits the child's natural vulnerability; their lesser power and knowledge, their need to depend on adults for their continuing survival, their appropriate naivety about sexual matters, their natural desire to be liked and to be seen as special, their belief that the adult is always right, their fear that, as the child, they may have misunderstood or misconstrued the actions of the adult. This process works to ensure that the child becomes trapped by the perpetrator into an incremental violation of their bodily boundaries, as well as becoming a victim of the perpetrator's version of what is happening and why. Not only is the child tricked into being subjected to the sexually abusive acts but is also tricked into keeping the abuse a secret, believing the abuse was their fault, and often believing that they somehow wanted or invited the abuse; beliefs which are very effective barriers to disclosure. At **it's** core the process of child sexual abuse is a betrayal of trust; the trust that any child should rightfully be able to place in the older person who has a degree of authority and adult responsibility within that adult/child relationship; the closer the relationship the greater the betrayal and the greater the impact for the child.

The process of sexually abusing a child

Finkelhor's* Four Pre-Conditions Model

The 'want step'

The 'making it happen' steps



1

Motivated to be sexual with a child



2

Overcoming internal inhibitors



3

Overcoming external inhibitors



4

Overcoming a child's resistance

* Finkelhor, D (1984). Four Preconditions: A model. In Child sexual abuse: New theory and research

No one will sexually abuse a child unless they are sexually motivated to do so. The diagram above illustrates that there are several hurdles that anyone who wishes to be sexual with a child needs to overcome once they are on the starting block of desiring sexual contact with a child. Within this framework – based on knowledge of male perpetrators only - once a potential perpetrator has managed to overcome any internal beliefs or values he may hold and which are incompatible with the sexual abuse of children (usually through delusional self-talk and the highlighting of any messages which make ‘sex with children’ OK), he then has to overcome any external forces which could get between him and the child. These will most often be the child’s (other) parent(s) or other protective adults.

The final hurdle to overcome is that of the child’s resistance. Children’s ability to resist or avoid abuse is undercut because they are young, relatively naïve and lacking in information. It will be further undercut depending on the degree of dependence the child has on the adult. A child who manages to successfully resist a stranger’s suggestion to play a ‘sexual game’ may comply when that same game is proposed by the father or the teacher; someone whom the child trust.

The child’s response to the sexual abuse that they have been subjected to can result in thoughts, feelings and beliefs (and actions that stem from these) such as:

- I don’t matter.
- I am worthless, bad, different from others
- It was my fault; something about me invites abuse; I cause bad things to happen
- My body is dirty and dangerous and not to be trusted
- I mustn’t trust anyone
- I can’t trust myself
- I must always be on my guard
- I can’t do anything to change things

The legacy of being subjected to an ongoing process of child sexual abuse which inevitably involves feelings of powerlessness, betrayal, stigmatization, as well as traumatic sexualisation, can have lifelong impact; such feelings can continue to inform the child’s sense of themselves into adult life even when memories of the actual abuse may have been put out of mind.

How might this knowledge assist health professionals?

- Understanding child sexual abuse as a process and not a single event, or a series of separate events, has the potential to enable protective adults to enhance their capacity to notice and hopefully interrupt this process before it escalates into hands-on sexual abuse.
- Even when child sexual abuse is not prevented this process knowledge enables health workers – as well as other protective family members – to become more attuned to what might be the commencement of a disclosure process by a child.
- Helping a child to feel safe enough to begin to talk and let go of these feelings and beliefs so that they cease informing their developing sense of self can result in the long-term impact being lessened.
- It can assist supportive family members and any professionals working with the child to appreciate why the child might continue to hold themselves responsible for the abuse; for not avoiding it, for not stopping it, for not being able to disclose sooner, and so on. As such it can greatly assist in not blaming the child.
- It can assist in developing greater understanding in how a protective parent might well have remained unaware of, and therefore in no way responsible for, the perpetrator’s actions.
- It can be useful in helping workers notice and avoid the traps that perpetrators can set for workers in their attempts to deflect suspicion, to disbelieve the child, to blame the non-offending parent etc.