

Key messages from research on child sexual abuse in institutional contexts

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Key messages

The term ‘child sexual abuse in institutional contexts’ is used to distinguish it from abuse in the family or other settings. The term ‘institution’ includes not only bricks and mortar environments such as schools and hospitals, but also organisations working with children, young people and families in community settings, such as social care services, sports clubs and religious groups. Abuse may occur in any such context where adults are in positions of power and influence over children and young people; the Crime Survey for England and Wales 2019 found that, for one in 10 adults who had been sexually abused in childhood, the abuse had been carried out by a person in a position of trust or authority. Child sexual abuse in institutional contexts may also be carried out by young people.

Child sexual abuse in institutional contexts may be perpetrated by a single individual on a single victim, although those who commit abuse in an institutional setting frequently have multiple victims, and several people may commit abuse within the same institution.

To gain victims’ compliance and ensure their silence, those who abuse in institutional contexts may use threats and force, but they often use rewards, favouritism and alienation from friends and family, and/or take advantage of the normalisation of potentially abusive activities. Similar ‘grooming’ techniques may be used on families and colleagues to secure access to victims and prevent detection.

Many cases of child sexual abuse have been linked to institutions, with the abuse often not being disclosed for many years. Many institutions have compounded the abuse by hiding and denying it rather than believing and protecting victims. In addition to the impact of the abuse itself, being let down by an organisation can increase survivors’ sense of betrayal and reduce their trust in other organisations.

Both girls and boys are sexually abused in institutional contexts. Appropriate support to meets the needs of both female and male victims and survivors is therefore essential.

Factors that may expose children to risk within institutions – or help to keep them safe from abuse – include the quality of relationships with staff, staffing ratios, the size of establishments, the physical environment, staff training and the extent to which the institution is open to input from external agencies. Besides requiring rigorous recruitment and selection processes, organisations need to build open cultures in which safeguarding is seen as everyone’s business, children have positive protective relationships with several staff members, and opportunities for abuse are minimised.

Our ‘Key messages from research’ papers aim to provide succinct, relevant information for frontline practitioners and commissioners. They bring together the most up-to-date research into an accessible overview, supporting confident provision of the best possible responses to child sexual abuse.

What is meant by child sexual abuse in institutional contexts?

The term ‘child sexual abuse in institutional contexts’ is used to distinguish that which occurs in an institutional/organisational setting from abuse within families or other settings. We are using the term ‘institution’ to cover a wide range of contexts – not only bricks and mortar environments such as schools and hospitals, but also organisations working with children and families in community settings such as social care services, sports clubs or religious groups. While abuse may occur in any organisation where adults are in positions of power and influence over children and young people, most available research about child sexual abuse in institutional contexts relates to sports and youth justice settings, residential care, schools and religious institutions.

Child sexual abuse in institutional contexts has become a major concern in recent years, largely because of high-profile cases and the way organisations have responded (e.g. Lampard and Marsden, 2015; Smith, 2016). It has been a key focus of inquiries in the UK and Australia (Jay et al, 2022; Royal Commission into Institutional Responses to Child Sexual Abuse, 2017a).

Concerns about ‘institutional abuse’ date back to the 1970s (Gil, 1975) when cases emerged of abuse by staff in residential care settings (Wolfe et al, 2003). A broader understanding informed later definitions of institutional abuse:

‘The sexual, physical, or emotional abuse of a child (under 18 years of age) by an adult that works with him or her. The perpetrator may be employed in a paid or voluntary capacity; in the public, voluntary or private sector; in a residential or non-residential setting; and may work either directly with children or be in an ancillary role’ (Gallagher, 2000:797).

It is now recognised that abuse in institutional contexts can involve multiple perpetrators and multiple victims, and may also be carried out by other under-18s (Blakemore et al, 2017; Sullivan et al, 2011).

The ways in which people think and talk about child sexual abuse have changed over time, and this influences how offenders, victims and survivors are understood and responded to. While some discourses around child sexual abuse dismiss or minimise abusive behaviour, or deny the harm done, others recognise the abuse of power and the importance of believing survivors (Lovett et al, 2018).

All these discourses can be seen in responses to child sexual abuse in institutional contexts. As the final report from the Independent Inquiry into Child Sexual Abuse (IICSA) makes clear, a variety of institutions reacted to disclosures of child sexual abuse by ‘moving on’ perpetrators and not investigating or reporting allegations. They frequently placed the protection of personal and institutional reputations above the protection of children. Where safeguarding policies and procedures existed, they were often not followed – and when there were internal or external reviews, recommendations were often not implemented (Jay et al, 2022).

The extent of abuse in institutional contexts

Despite increased awareness, there is little accurate information on how much child sexual abuse occurs in institutional settings and how many victims there are. There is currently no routinely collected official data which separates reported abuse taking place within a family environment from that taking place in institutions.

In the 2019 Crime Survey for England and Wales, 9.7% of all contact sexual abuse described by survey participants had been perpetrated by a 'person in a position of trust or authority' such as a teacher, doctor, carer or youth worker (Office for National Statistics, 2019). Overall, 7.5% of all the adults surveyed had experienced some form of sexual abuse before the age of 16 (Office for National Statistics, 2019) – this is undoubtedly an underestimate, as surveys framed around 'crime' generally result in lower reporting rates than specialist surveys of violence and abuse or health (Karsna and Kelly, 2021).

The likelihood of victims and survivors talking about their experiences is low across all forms of child sexual abuse (Priebe and Svedin, 2008; Radford et al, 2011; Allnock and Miller, 2013; Allnock et al, 2019), and the culture and dynamics of power and abuse in institutional settings create further barriers (Leland Smith et al, 2008). When survivors of child sexual abuse in institutional contexts do share their experiences of abuse, they typically do so many years later (O'Leary and Barber, 2008; Parkinson et al, 2009).

Much available information about the experience of child sexual abuse in institutional contexts draws on the testimony of survivors of non-recent abuse; there has been relatively little research into contemporary abuse in such settings. An important exception is an IICSA study examining 43 recent case files of people referred to the Disclosure and Barring Service (DBS) by the institutions where they worked or volunteered, owing to concerns about their behaviour (Zammit et al, 2021). It found that grooming and abuse had frequently taken place online and via social media – and that informal social relationships between adults and children, and 'perceived romantic relationships' between adults and young people in their care, were often normalised within the institutions.

Some sexual abuse of children in institutional contexts is carried out by peers or older children. The testimonies shared on the *Everyone's Invited* website (www.everyonesinvited.uk) have prompted greater attention to be paid to harmful sexual behaviour in schools. Students have reported that sexual harassment by other children and young people has become commonplace, and that teachers and school leaders underestimate the scale of the problem – especially in relation to online abuse (Ofsted, 2021; Estyn, 2021). Other research has found that school staff often dismiss sexual harassment as 'harmless banter' or 'boys messing around' (Girlguiding, 2014; Coy et al, 2016). This topic is addressed in the CSA Centre's *Key Messages from Research on Children and Young People Who Display Harmful Sexual Behaviour* (McNeish and Scott, 2023).

Victims of abuse in institutional contexts

Existing research provides limited information on the gender of victims in different contexts. Although most victims of child sexual abuse in institutional contexts are female, the 2019 Crime Survey for England and Wales found that one in five male survivors of child sexual abuse had been abused in an education, healthcare, social care or criminal justice setting, compared with one in 10 female survivors (who were more likely than male survivors to have been abused at home) (Office for National Statistics, 2019).

One reason for this finding may be that institutional and other ‘extra-familial’ offenders are more likely to abuse male victims, or both male and female victims, than those who abuse in family settings (Moulden et al, 2007; Sullivan et al, 2011). Additionally, there are more boys than girls in custodial and some types of residential institutions (e.g. boarding schools), and more roles for boys in Christian churches (e.g. as choir or altar boys) (Heath and Thompson, 2006; John Jay College of Criminal Justice, 2004; Parkinson et al, 2009; Sayer et al, 2018); there is currently a lack of research on victims of institutional child sexual abuse within other religions.

Some studies suggest that girls are more likely than boys to be abused in the context of elite or organised sports (Leahy et al, 2002), in residential care (Timmerman and Schreuder, 2014) and in non-residential schools (Gallagher, 2000; Shakeshaft and Cohen, 1995). This may be due in part to boys having been less likely to tell anyone about their abuse (Arttime et al, 2014; Shakeshaft, 2004; O’Leary and Barber, 2008), although this is changing and there is a growing awareness of the abuse of boys in football, in particular (Taylor, 2017).

Very young children can be abused in institutional settings including nurseries (Finkelhor et al, 1988; Kelley et al, 1993; Wonnacott, 2010; Wonnacott, 2013), but known victims of child sexual abuse in institutional contexts are, on average, older than those abused in other settings (Fischer and McDonald, 1998; Gallagher, 2000; Parkinson et al, 2009).

Disabled children, who are at greater risk of abuse generally, are also more vulnerable to sexual abuse in institutional settings, in part because they are more likely to use residential and personal care services (Miller and Brown, 2014).

There is no specific research into whether factors such as ethnicity and sexual orientation affect children and young people’s vulnerability to sexual abuse in institutional contexts. However, IICSA’s reports highlight that some groups may be less likely to disclose abuse because they feel different, stigmatised and unlikely to be believed (e.g. Kaiser et al, 2021; Gibson et al, 2022).

Adults who perpetrate abuse in institutional contexts

There is no clear picture from research as to differences between those who sexually abuse children in institutional settings and other child sexual abuse offenders. One comparative study found that those convicted of child sexual abuse in institutional contexts were less likely to have previous sexual convictions than other extra-familial offenders, but they were otherwise similar in terms of mental health problems, substance abuse, their own experience of sexual or physical abuse, and their sexual preoccupation or emotional identification with children (Sullivan et al, 2011). Some research suggests that perpetrators in institutional contexts may generally be older and better educated, with higher IQs and fewer adverse childhood experiences (Kaufman et al, 2016; Darling and Antonopoulos, 2013).

A distinction has been made between *chronic and habitual offenders* and *opportunistic and situational offenders*; the latter abuse where there is a low likelihood of detection or where environments present an opportunity for abuse (Wortley and Smallbone, 2006). This is a useful reminder of the importance of considering situational features which may increase the risk of abuse occurring (Irenyi et al, 2006).

Survivors' reports to IICSA's Truth Project provide some information about people who abuse in institutional contexts. Of survivors who had been sexually abused by someone looking after them in a professional capacity, 93% were abused solely by males, 4% solely by females and 3% by both males and females (Truth Project, 2022).

The dynamics of abuse in institutional contexts

Institutions are not all the same, so child sexual abuse needs to be understood in the context of the dynamics between those who perpetrate abuse, their victims, and the particular institution in which it occurs (Blakemore et al, 2017).

Hierarchical organisations where information is passed down on a 'need to know' basis, as is most common in the armed forces or in custodial institutions, have low levels of reporting, disclosure and detection of sexual abuse (Palmer and Feldman, 2018). The 47 IICSA Truth Project participants who reported historical sexual abuse within custodial institutions described aggressive and violent environments where perpetrators wielded extensive power and control (Darling et al, 2020).

Historically, residential contexts – especially those encompassing all aspects of a child's life – have been particularly high-risk environments for sexual abuse. Inquiries in Jersey and Northern Ireland have described residential care settings characterised by 'harsh' regimes, excessive discipline, fear and threat (Oldham et al, 2017; Hart et al, 2017).

However, very different organisational cultures can equally facilitate abuse. A primary finding of the IICSA research was that cultures of overfamiliarity, and informal relationships between professionals and children, provide cover for sexual abuse (Zammit et al, 2021; Truth Project, 2022).

Institutional contexts can provide opportunities for abuse because of the interactions routinely involved. For example, some activities in sport or the performing arts require physical contact between adults and children to correct posture or technique (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017b; Lang and Hartill, 2015). In healthcare contexts, routine access to children's bodies, as well as the respect and trust shown to professionals, create opportunities for sexual abuse without fear of discovery. Truth Project participants abused in healthcare contexts made little mention of 'grooming', as health workers have no need to develop a relationship of trust or dependency in order to facilitate abuse (Zammit et al, 2020).

The sources of power exerted by abusers may be personal (related to their age, gender, size, personality, reputation or expertise) or associated with their role or position (Wurtele, 2012). Many survivors describe the ‘charisma’ their abusers possessed (Green, 2001; Mart, 2004; Smith and Freyd, 2013). This is often the case in relation to sport, drama or music, where the relationships between adult teachers/mentors and young apprentices/students can be intense and involve spending considerable amounts of individual time together.

The dynamics of abuse in some sporting contexts have been compared to the coercive control involved in domestic abuse, with coaches and trainers controlling elite young athletes’ diet, social activities and sexual behaviour, and young people being afraid to disclose sexual abuse for fear of jeopardising their careers (Brackenridge, 2001; Brackenridge and Fasting, 2002; Brackenridge et al, 2008; Brackenridge et al, 2010; Everley, 2020). Similar abusive cultures can also develop in grassroots sports organisations (Truth Project, 2022).

Truth Project participants who had been abused in religious institutions described such institutions and their representatives as having a more pronounced level of influence over communities, families and daily lives than is typical of other institutions (Hurcombe et al, 2019). In faith contexts, perpetrators can use a child’s beliefs and spirituality to manipulate them, and use doctrine and symbolism to legitimate abuse (Farrell and Taylor, 2000; Walker et al, 2009; Wurtele, 2012; Isely et al, 2008; Spröber et al, 2014; Hurcombe et al, 2019).

As in other contexts, child sexual abuse in institutional contexts commonly involves the use of tactics to build relationships of dependency – for example, through rewards, favouritism and alienation from friends and family (Gallagher, 2000; Van Dam, 2001). ‘Entrapment’ is one way to describe a process which may involve manipulating an adolescent’s romantic feelings so they believe themselves to be in a consensual sexual relationship (Brown et al, 2020), or a young person’s commitment and ambition to achieve success in their chosen field (Brackenridge and Fasting, 2005). Families and colleagues may be similarly ‘groomed’ in order to secure access to victims and prevent detection (McAlinden, 2006).

A key feature of the dynamics of abuse in institutional contexts is the behaviour of the institution itself. Disclosures from survivors have frequently been met with denial, concealment and victim-blaming by institutions seeking to protect themselves from litigation or loss of reputation (Jay et al, 2022; Jay et al, 2021; Spröber et al, 2014). Such responses deter whistleblowing and perpetuate ‘cultures of silence’ (Smith and Freyd, 2013).

The impact of abuse in institutional contexts

While child sexual abuse in any setting is strongly associated with adverse outcomes across the life-course (Fisher et al, 2017; Office for National Statistics, 2017; Scott and McManus, 2016), not all survivors experience the same outcomes. Risk and resilience factors will vary according to individual circumstances, other life experiences, the context and nature of the abuse, and the intersection between these (Hecht and Hansen, 2001; Blakemore et al, 2017; Truth Project, 2022). Survivors' self-esteem and self-efficacy, the development of positive coping strategies and the support they receive from other people in their lives will make a key difference (Allnock and Hynes, 2011). The poorest outcomes tend to be for those whose sexual abuse is combined with other adversities or maltreatment (Finkelhor et al, 2007), or is compounded by further abuse across the life-course (Scott et al, 2015).

Some survivors of sexual abuse in institutional contexts have witnessed the abuse of other children and/or been abused by a number of perpetrators over an extended period (Truth Project, 2022). Such experiences are liable to have lifelong consequences for mental health and well-being (Salter, 2013).

The impacts of abuse in institutional contexts can also be influenced by the following factors:

- ▶ **Social and historical contexts.** Survivors' experience of abuse, and their interpretation of and response to it, are shaped by the context in which it occurred – for example, the reasons they were in the institutional setting and the character of the institution (Blakemore et al, 2017).
- ▶ **Prior experience of abuse in other settings.** Some children (e.g. those in residential care or custody) may previously have been abused in other contexts, such as within the family (Sayer et al, 2018).

- ▶ **Sense of 'institutional betrayal'.** The victim may feel betrayed not only by the individual(s) who abused them but also by the institution itself. Institutional betrayal is associated with increased levels of anxiety, trauma symptoms and dissociation (Smith and Freyd, 2013). For those abused within a religious context, institutional betrayal may also have an impact on their identity and beliefs.
- ▶ **Impact on help-seeking.** Mistrust of institutions and authorities may make some survivors unwilling to seek support from other organisations (Breckenridge et al, 2008; Kantor et al, 2017).
- ▶ **Concepts of masculinity.** Dominant concepts of masculinity in particular institutional contexts portray men as 'naturally' strong, autonomous beings, so male survivors may feel extreme shame over their victimisation – making them reluctant to disclose and affecting their self-image, mental health and relationships (Fogler et al, 2008; Easton et al, 2014).
- ▶ **Impacts on people close to the victim.** Family members, friends, partners and children may experience 'vicarious impacts' both in the immediate aftermath of abuse and many years later (Roberts et al, 2004; Morrison et al, 2007). They may feel grief, guilt, shame and rage at not having recognised or prevented the abuse, or at having encouraged the victim's engagement in the organisational context where abuse occurred (Bennett et al, 2000).

Preventing abuse in institutional contexts

As awareness of child sexual abuse in institutional contexts has grown, so has interest in finding more effective ways of preventing it. Much of the focus has been on trying to prevent individuals who may abuse from obtaining paid or voluntary positions where they have access to children. However, while stringent staff recruitment and selection procedures are valuable, they can only be part of the solution: those who have the potential to abuse in institutional settings are difficult to identify, and most do not have previous offences (Erooga, 2009).

While some people join organisations with deliberate intent to sexually abuse children, others will abuse only in situations where there is little surveillance and few behavioural guidelines (Wortley and Smallbone, 2006; Colton et al, 2010; Sullivan and Beech, 2004; Terry and Freilich, 2012). The risk is particularly high in organisations where adult power and influence over children (and other adults) is unchecked and there is a culture of complicity, and those that are relatively ‘closed’ to external monitoring or influence. As IICSA has made clear, responsibility for abuse in institutional contexts also applies to those who know about abuse but do nothing, and those who actively cover it up or help perpetrators escape justice (Jay et al, 2022).

Charisma, status and popularity are often highly valued within institutions, but they may be used to ‘charm’ and to build an image and reputation that places individuals beyond question (Erooga et al, 2020). A perception of individuals or organisations as ‘prestigious’ is a risk factor for abuse and should be guarded against (Smith and Freyd, 2013).

In custodial and other residential institutions, situational factors that can help keep children safe include the physical environment, e.g. giving careful thought to how any ‘private spaces’ are used or having safety measures such as CCTV in place, and the population mix, e.g. ensuring an appropriate mix of genders and histories among the children in an institution. High staff-to-children ratios, continuity of staffing, smaller establishments, staff training, children having time and opportunities to raise concerns or problems with staff, staff being able to identify victimisation, and an openness to input from external agencies, have all been identified as significant in preventing abuse (Erooga et al, 2012; Sayer et al, 2018; Soares, Ablett et al, 2019; Soares, George et al, 2019).

Prevention of child sexual abuse in residential schools has been identified as requiring a combination of structural approaches, e.g. robust safeguarding policies and procedures including staff vetting, and situational approaches, alongside training and education for both staff and children, and the promotion of open, trusting relationships – including with parents (Roberts et al; 2020).

Participants in IICSA’s Truth Project described many incidents of sexual abuse as happening away from the institutional environment – for example, in the perpetrator’s home or public places (Truth Project, 2022). It is therefore crucial to monitor relationships and set clear boundaries for staff, volunteers’ and visitors’ interactions with children and young people, wherever they take place.

In Australia, the Royal Commission into Institutional Responses to Child Sexual Abuse (2016) identified a number of features of child-safe institutions. These included embedding child safety in institutional leadership, governance and culture; involving children in decisions affecting them and taking their views seriously; and continuously reviewing and improving child-safe standards.

And when abuse does occur, despite all efforts at prevention, how institutions respond is important. Helpful responses are ‘human’ and trauma-informed, reparative, and involve meaningful apology and action against perpetrators as well as counselling/support for the survivors (Blunden et al, 2021).

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