



Disclosure and Services for Child Victims of Online Sexual Victimization: A Bibliography

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Scope

This bibliography provides citations and abstracts to English language publications on child disclosure of online sexual victimization, and the provision of services to these victims. While not comprehensive, every attempt has been made to include the most relevant and timely information.

Organization

Publications on disclosure begin on page three. Publications on service provision to victims begin on page seven. Publications are listed in date descending order within each section. Links are provided to open access publications.

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Disclosure and Services for Child Victims of Online Sexual Victimization

A Bibliography

Disclosure

Hietamäki, J., Husso, M., Arponen, T., & Lahtinen, H. M. (2024). [Differences between girls and boys in the disclosure of sexual violence](#). *Journal of Interpersonal Violence*. Advance online publication. DOI:10.1177/08862605231221283

This article addresses the differences between girls and boys in the disclosure of sexual violence. The dataset combines data from the Finnish Child Victim Survey (FCVS) of 2008 (N = 13,459) and 2013 (N = 11,364), focusing on victims of sexual violence, ages 11 to 17 years, from the perspectives of disclosure and gender. Frequency and percentage analysis, cross tabulation, and a Chi-square test were used in the analysis. In the FCVS for both years, around 85% of the victims were girls. In almost two-thirds of the cases, the offender was a relative, friend, or some other known person, while in more than one-third of the cases, the offender was unknown to the victim. The second most common case was that the victim knew the offender, who was not, however, a friend. Sexual violence was found to be, in many ways, gendered. Most of the victims were girls, and most of the offenders were men. There was also a gender difference in the disclosure of experiences. Twenty-one percent of the girls and 45% of the boys reported that they had not told anyone about their experiences. Irrespective of the type of offender, the victims most often (63%) told a peer about their experiences, while 23% told parents, and only 10% told authorities. Moreover, victims reported shame and fear, distrust toward adults, and disbelief that disclosure would be helpful as reasons for not disclosing their experiences. To address this problem, raising awareness of the phenomenon, promoting an atmosphere that supports disclosing experiences of sexual violence, and improving readiness to address them are required.

Gemara, N., Mishna, F., & Katz, C. (2023). [‘If my parents find out, I will not see my phone anymore’: Who do children choose to disclose online sexual solicitation to?.](#) *Child & Family Social Work*. DOI:10.1111/cfs.13069

Child online sexual solicitation has become a significant form of child sexual abuse. Disclosure of online sexual solicitation is a multifaceted and complex process. The role of the disclosure

recipient is crucial in the disclosure process, with respect to the initiation of the disclosure, how much children disclose, recantations and the children's well-being. The current study aimed to explore children's experiences, perceptions, challenges and obstacles regarding disclosing online sexual solicitation as revealed in their forensic interviews. The sample, obtained from the Service of Forensic Interviews with Children in Israel, included 32 Israeli children who were sexually solicited online and participated in forensic interviews. A thematic qualitative methodology was used to analyse the children's narratives. The findings demonstrated that children tend to disclose online sexual solicitation to their peers and not to their parents. The children provided three main reasons for this tendency: sexuality, technology and the recipient's response. The current study's findings highlight the important role of peers in the disclosure process of online sexual solicitation. Moreover, the findings reveal children's difficulties disclosing online sexual solicitation to their parents. Practical implications of children's online sexual solicitation disclosure, future recommendations and study limitations are discussed.

Gemara, N., Cohen, N., & Katz, C. (2022). "I do not remember... You are reminding me now!": Children's difficult experiences during forensic interviews about online sexual solicitation. *Child Abuse & Neglect*, 134. DOI:10.1016/j.chiabu.2022.105913

Forensic interviews for children who have undergone online sexual solicitation (OSS) constitute a unique setting compared to other forms of child sexual abuse (CSA). In these cases, the interviewer holds concrete evidence of the abuse in the form of pictures or texts. During the interview, interviewers use these materials to advance the data collection regarding the abuse, a practice that may significantly influence the child's wellbeing. The current study aims to explore children's experiences during forensic interviews concerning OSS. The sample included 20 Jewish children in Israel who were referred to and participated in a forensic investigation. A thematic qualitative methodology was used to analyze the children's narratives. The findings demonstrate the children's difficulties when confronted with materials related to the abuse. The children detailed the different ways the interview challenged their wellbeing, including visualizing and verbalizing the abuse, new insights, and being videotaped. The findings in the current study emphasized the intrinsic challenges that children face in OSS forensic interviews resulting from the tension between the interviewer's need to collect details about the abuse and the child's desire to forget it. Practical

ramifications pertaining to these threats to the child's wellbeing, future recommendations, and limitations of the study will be discussed.

Katz, C., Piller, S., Glucklich, T., & Matty, D. E. (2021). “Stop waking the dead”: Internet child sexual abuse and perspectives on its disclosure. *Journal of Interpersonal Violence*, 36(9-10), NP5084-NP5104.

The phenomenon of Internet child sexual abuse (ICSA) has been receiving growing attention over the last decade, and studies have promoted knowledge with respect to the phenomenon's epidemiology, as well as to characteristics of the victims, perpetrators, and dynamics in these cases. The current retrospective study sought to delve into the disclosure component in cases of ICSA. The sample comprised 52 cases of adolescents who arrived at a child advocacy center (CAC) following ICSA. Analysis of these cases was targeted to capture the multifaceted nature of disclosure using those perspectives that could be documented by the CAC staff—of the practitioners, the adolescents, and their parents. Beyond the descriptive results regarding the victims and the nature of the abuse, the case analyses illustrate the disclosure process as experienced by the various parties involved, highlighting the challenging nature of this aspect of the phenomenon. For the parents, the disclosure experience can perhaps be best epitomized by the expression that was heard repeatedly—“Stop waking the dead”—an expression that indicated their wish to bring the subject to a close. The difficulty in disclosing such incidents was also illustrated by the fact that 20 children in the current sample were reluctant to collaborate during the CAC process. In fact, according to these data, most of the incidents were revealed following a police investigation rather than by a disclosure initiated by the children themselves. Focusing on this specific aspect of ICSA—that is, disclosure—enables a new perspective on it and stresses the need to further study it in such cases. A better understanding of the disclosure experience as it pertains to the individuals involved in cases of ICSA may improve and help modify future prevention and intervention efforts in the field.

Manrai, R., Alaeddine, R., Elorreaga, G., Garrett, L., & Guerra, C. (2021). What do the potential recipients of disclosure of OSA say? Perspectives from adolescent residents in Scotland and Chile. *Child Abuse & Neglect*, 117. DO:10.1016/j.chiabu.2021.105034

With the increase in internet use, new forms of child victimization like Online Sexual Abuse (OSA) have emerged. Children and adolescents rarely disclose these incidents and most disclosure happens around peers. This research addresses the perspective of adolescents (not victims of OSA), potential recipients of the disclosure, within the context of disclosure of OSA committed by either adult or peer perpetrators. The study was performed in two stages. We interviewed adolescents in Scotland and then conducted focus groups with adolescents from Chile. Participants were 51 adolescents (6 from Scotland and 45 from Chile) aged 15–20 years participated. Despite differences in age and cultural contexts, there were similarities in responses. Obstacles of disclosure included lack of clarity of OSA, prior levels of personal vulnerability, and gender factors (stereotypes and stigmatization). On the other hand, the disclosure process would be easier for adolescents with more personal resources (e.g. self-confidence) and when they have a supportive social environment, which includes parents, but especially peers. Disclosure of OSA is considered similar to the disclosure of offline sexual abuse. However, differences such as a lack of clarity regarding the boundaries of the relationships on the Internet, and presence of a generational gap between adolescents and their parents or tutors in the use of internet makes early disclosure of OSA highly challenging. Plans to facilitate disclosure should consider different components: behavioral (risky behaviors), emotional (feelings of fear and shame) and cognitive (lack of information, self-blame, stigma). This should be focused on adolescents, potential recipients of disclosure (parents, authorities and peers) and society, where the prejudices and practices that prevent disclosure begin.

Spencer-Hughes, V., Syred, J., Allison, A., Holdsworth, G., & Baraitser, P. (2017). [Screening for child sexual exploitation in online sexual health services: An exploratory study of expert views](#). *Journal of Medical Internet Research*, 19(2), e30. doi:10.2196/jmir.5911

Sexual health services routinely screen for child sexual exploitation (CSE). Although sexual health services are increasingly provided online, there has been no research on the translation of the safeguarding function to online services. We studied expert practitioner views on safeguarding in

this context. The aim was to document expert practitioner views on safeguarding in the context of an online sexual health service. We conducted semistructured interviews with lead professionals purposively sampled from local, regional, or national organizations with a direct influence over CSE protocols, child protection policies, and sexual health services. Interviews were analyzed by three researchers using a matrix-based analytic method. Our respondents described two different approaches to safeguarding. The “information-providing” approach considers that young people experiencing CSE will ask for help when they are ready from someone they trust. The primary function of the service is to provide information, provoke reflection, generate trust, and respond reliably to disclosure. The approach values online services as an anonymous space to test out disclosure without commitment. The “information-gathering” approach considers that young people may withhold information about exploitation. Therefore, services should seek out information to assess risk and initiate disclosure. This approach values face-to-face opportunities for individualized questioning and immediate referral. The information-providing approach is associated with confidential telephone support lines and the information-gathering approach with clinical services. The approach adopted online will depend on ethos and the range of services provided. Effective transition from online to clinic services after disclosure is an essential element of this process and further research is needed to understand and support this transition.

Services

Quayle, E., Larkin, A., Schwannauer, M., Varese, F., Cartwright, K., Chitsabesan, P., ... & Bucci, S. (2024). [Experiences of a digital health intervention for young people exposed to technology assisted sexual abuse: A qualitative study](#). *BMC psychiatry*, 24(1), 237. DOI:10.1186/s12888-024-05605-6

There is growing evidence that Technology Assisted Sexual Abuse (TASA) represents a serious problem for large numbers of children. To date, there are very few evidence-based interventions available to young people (YP) after they have been exposed to this form of abuse, and access to support services remains a challenge. Digital tools such as smartphones have the potential to increase access to mental health support and may provide an opportunity for YP to both manage their distress and reduce the possibility of further victimization. The current study explores the acceptability of a digital health intervention (DHI; the i-Minds app) which is a theory-driven, co-

produced, mentalization-based DHI designed for YP aged 12–18 who have experienced TASA. Semi-structured interviews were conducted with 15 YP recruited through Child and Adolescent Mental Health Services, a Sexual Assault Referral Centre and an e-therapy provider who had access to the i-Minds app as part of a feasibility clinical trial. Interviews focused on the acceptability and usability of i-Minds and were coded to themes based on the Acceptability of Healthcare Interventions framework. All participants found the i-Minds app acceptable. Many aspects of the app were seen as enjoyable and useful in helping YP understand their abuse, manage feelings, and change behavior. The app was seen as usable and easy to navigate, but for some participants the level of text was problematic and aspects of the content was, at times, emotionally distressing at times. The i-Minds app is useful in the management of TASA and helping change some risk-related vulnerabilities. The app was designed, developed and evaluated with YP who had experienced TASA and this may account for the high levels of acceptability seen.

Quayle, E., Schwannauer, M., Varese, F., Cartwright, K., Hewins, W., Chan, C., ... & Bucci, S. (2024). [What are practitioners' views of how digital health interventions may play a role in online child sexual abuse service delivery?](#) *Frontiers in Digital Health*, 6. DOI:10.3389/fdgth.2024.1325385

Online child sexual abuse (OCSA) affects considerable numbers of children globally and is associated with a variety of mental health problems. Existing practitioner studies suggest that young people are infrequently asked about online abuse and practitioners have a fragmented understanding of the problems experienced or how they might approach them. There are very few evidence-based interventions that guide clinical assessment or practice. Digital Health Interventions (DHIs) have the potential to be an effective option where children and young people's services are challenged, including accessibility and anonymity. The aim of this study was to explore mental health practitioners' views of how DHIs may play a role in supporting young people who have experienced OCSA, and the role they can play in healthcare delivery. In-depth qualitative interviews and one focus group were conducted with 25 child mental health professionals across two sites (Manchester and Edinburgh). Data was analyzed using reflexive thematic analysis. Three overarching themes and 9 sub-themes were identified: (1) feeling a little bit lost; (2) seeing potential problems; and (3) knowing what works. Practitioners expressed

interest in a DHI to support this client group and saw it as a way of managing waiting lists and complementing existing therapies. They felt that many young people would see this as a preferred medium to in-person therapy, would be empowering, and offers new ways of learning how to stay safe online. However, there were concerns about how much time would be needed by staff to deliver a DHI, anxieties about safety issues in relation to content and data protection, some of which may be unique to this population of young people, and concerns about the absence of a therapeutic relationship with vulnerable children. Our findings indicated that practitioners were uncertain about working with children subjected to OCSA but were receptive to the possibility of using a DHI to support their practice and to reduce waiting lists. Concerns were expressed about the time needed for staff training and support as well as concerns over patient safety and the lack of evidence about the effectiveness of an unsupported DHI.

Binford, W. (2023). [What frontline professionals need to combat child maltreatment online.](#) *International Journal on Child Maltreatment: Research, Policy and Practice*, 6(2), 333-339. DOI:10.1007/s42448-023-00172-x

Rapid technological advances in the late twentieth and early twenty-first centuries have changed the landscape of child maltreatment worldwide. Whereas historically a child was most likely to be maltreated within the family or community systems, now children can be abused by thousands of unknown and unidentified persons from anywhere on the planet. Trafficking in child sexual abuse material (CSAM), luring, grooming, and other predatory behaviors existed before the Internet. However, modern technologies have changed abusers' points of access to children and the number of abusers who can participate in the maltreatment of a victim. New types of child maltreatment are also being invented with new technologies, such as livestreamed child sexual exploitation. In addition, the volume of certain types of child abuse has exploded exponentially such as has been documented with the trafficking in CSAM, as well as the severity of the abuse being recorded on younger and younger victims, including infants and toddlers. These changes have created challenges at all points along the child maltreatment continuum—from prevention to effective treatment leading to the full physical and psychological recovery and social reintegration of victims and survivors as are mandated by international law for many survivors. Recent research into the experiences and perspectives of frontline professionals combatting technology-facilitated

child maltreatment makes clear that more training and supports are needed, such as technological resources, research into effective therapeutic treatments for survivors, consistent and accurate terminology and concepts, a modernization of the legal framework in which these crimes are investigated and prosecuted, and robust mental health supports for frontline providers. As the Kempe Center for the Prevention and Treatment of Child Abuse and Neglect provides education and training to thousands of frontline providers worldwide each year, Kempe is uniquely situated to provide leadership in preparing frontline providers to combat child abuse effectively in these new environments.

Colburn, D. A., Finkelhor, D., & Turner, H. A. (2023). [Help-seeking from websites and police in the aftermath of technology-facilitated victimization](#). *Journal of Interpersonal Violence*, 38(21-22), 11642-11665. DOI: 10.1177/08862605231186156

This study looked at experiences of help-seeking from websites and police following an episode of technology-facilitated abuse. It used data from a nationally representative online panel of adults aged 18 to 28, sampled from Ipsos Knowledge Panel. A total of 1,952 unique victimization episodes from childhood and adulthood were identified and used in analyses. Participants were asked about whether they experienced 11 different types of technology-facilitated abuse (TFA), whether the incident was reported to the website or police, barriers to reporting, and features of the website's or law enforcement's response. Other follow-up information included victim gender, age, relationship to the perpetrator, and negative emotional impact (NEI) associated with the incident. Results found very low rates of reporting to both websites (7.3%) and law enforcement (4.8%). Image-based offenses had higher rates of reporting. A greater NEI significantly increased the odds of reporting to each source. Participants were largely unsatisfied with response from websites and police. Only 42.2% said the website did something helpful and only 29.8% found police helpful. Our findings suggest a need for major improvements in how websites and law enforcement respond to victims of technology-facilitated offenses. They need to have more helpful information and more ways of offering support. Websites need more specifics about the types of violations that warrant reporting, clearer signposts, and encouragement about how to get help and a better publicized commitment to a rapid and serious review. Law enforcement needs more

education and training to avoid dismissive and judgmental reactions and to ensure sympathetic and respectful responses.

Quayle, E., Schwannauer, M., Varese, F., Cartwright, K., Hewins, W., Chan, C., ... & Bucci, S. (2023). [The experiences of practitioners working with young people exposed to online sexual abuse](#). *Frontiers in Psychiatry, 14*. DOI:10.3389/fpsyt.2023.1089888

This qualitative study explored healthcare professionals' current understanding of, and clinical practices related to, Online Child Sexual Abuse (OCSA). Data were collected across two UK sites (Manchester and Edinburgh). Interviews and one focus group were held with 25 practitioners working in services offering clinical support to young people who have experienced OCSA. Thematic analysis of the data identified three overarching themes and 10 subthemes related to the research questions: (1) the breadth of the problem; (2) working with OCSA; and (3) the emotionally charged nature of OCSA. While practitioners recognized OCSA as problematic, they differed in how they conceptualized it. There was a heightened awareness of the role that sexual images played in OCSA and concerns about first-person-produced imagery by Children and Young People (CYP). Practitioners described a generational gap related to their technology use and that of the young people they worked with. Practitioners also described a paucity of referral pathways and concerns that there was no training available to them. Organizational barriers meant that questions about technology use were not routinely included in assessments and often there was reliance on young people making disclosures. Novel findings from this study were the psychological impacts that such cases had on practitioners, which may indicate a need for organizational support for staff as well as further training needs. Existing frameworks that help conceptualize and assess the role of technology as part of the ecology of the child may have great utility for practitioners.

Schmidt, F., Bucci, S., & Varese, F. (2023). [Understanding healthcare services response to technology-assisted child sexual abuse: A freedom of information study](#). *Child Abuse & Neglect, 143*. DOI:10.1016/j.chiabu.2023.106323

The reported rates of technology-assisted child sexual abuse (TA-CSA) have increased in the last decade. It is unclear how services are currently responding to cases of child sexual abuse that involve an online element. The aim of this study is to understand the current framework of support

offered by National Health Service (NHS) UK Child and Adolescent Mental Health Services (CAMHS) and Sexual Assault Referral Centres (SARC) for cases involving TA-CSA. This includes understanding if a services' current assessment tools refer to TA-CSA, whether interventions address TA-CSA, and assessing what training for TA-CSA is offered to practitioners. Sixty-eight NHS Trusts with either an affiliated CAMHS or SARC. A Freedom of Information Act request was sent to NHS Trusts. Under this Act, the Trust had 20 working days to respond to the request, which included 6 questions. 86 % Trusts (42 CAMHS and 11 SARC) responded to the request. Of the responses, 54 % CAMHS and 55 % SARC offer relevant training to practitioners. 59 % CAMHS and 28 % SARC provide tools for their initial assessment that reference online life. No Trust provided a clear treatment approach for TA-CSA, with 35 % CAMHS and 36 % SARC responding that treatment would address the mental health needs of the young person. There is a need for a nationwide understanding of how to clearly define TA-CSA in policies and how to approach TA-CSA during an initial assessment. Further, a consistent approach on how to equip practitioners with tools to support individuals who have experienced TA-CSA is urgently needed.

Bucci, S., Varese, F., Quayle, E., Cartwright, K., Machin, M., Whelan, P., ... & Schwannauer, M. (2022). Minds: A digital intervention to improve mental health and interpersonal resilience for young people who have experienced online sexual abuse: Protocol for a non-randomised feasibility clinical trial and nested qualitative study. *JMIR research protocols*.

There is no evidence-based support offered to young people who have experienced online sexual abuse (YP-OSA). Interventions aimed at improving mentalisation (the ability to understand the mental states of oneself and others) are increasingly applied to treat young people with varied clinical issues. YP-OSA are reluctant to seek in-person support and are generally comfortable receiving support online. A digital intervention aimed at improving mentalisation in YP-OSA may reduce risk for re-victimisation and future harm and make young people more resilient and able to manage distress that might result from OSA experiences. In this paper, we describe the protocol to determine the feasibility of the i-Minds trial, the acceptability, safety and usability of the digital intervention (the “i-Minds” app) and explore how to best integrate i-Minds into existing routine care pathways. This is a mixed-methods non-randomised study to determine the feasibility, acceptability, safety and usability of the intervention. Participants aged between 12 and 18 years

who report distress associated with online sexual abuse exposure will be recruited in the UK from NHS Trust Child and Adolescent Mental Health Services, Sexual Assault Referrals Centres, and an online e-therapy provider. All participants will receive the i-Minds app for 6 weeks. Co-produced with young people and a range of stakeholders, the i-Minds app focuses on four main topic areas: mentalisation, online sexual abuse and its impact, emotional and mental health, and trauma. A daily prompt will encourage young people to use the app, which is designed to be used in a stand-alone manner alongside routine care. We will follow participants up post-intervention and conduct interviews with stakeholders to explore acceptability of the app and trial procedures, and identify areas for improvement. Informed by Normalisation Process Theory (NPT), we will examine barriers and enablers relevant to the future integration of the intervention into existing care pathways, including traditional clinic-based NHS services and NHS e-therapy providers. This study received funding from the National Institute for Health and Care Research Health Services and Delivery Research programme. This study was approved by the Research Ethics Board West of Scotland. We expect data to be collected for up to 60 young people. We expect to conduct around 20 qualitative interviews with participants and 20 healthcare professionals who referred young people to the study. The results of the study will be submitted for publication. This is the first trial examining a digital health intervention targeting mentalisation processes in YP-OSA. This study will provide preliminary evidence on the feasibility of recruiting young people to a trial of this nature, and on the acceptability, safety and usability of the i-Minds app, including how to best integrate it into existing routine care. Findings will inform the decision for proceeding to a powered efficacy trial. Clinical Trial: ISRCTN Registry ISRCTN43130832; <https://www.isrctn.com/ISRCTN43130832>

Dimitropoulos, G., Lindenbach, D., providers, D. J., Gunn, E., Cullen, O., Bhattarai, A., ... & Arnold, P. D. (2022). Experiences of Canadian mental health providers in identifying and responding to online and in-person sexual abuse and exploitation of their child and adolescent clients. *Child Abuse & Neglect*, 124. DOI:10.1016/j.chiabu.2021.105448

Sex offenders often use the internet to communicate with children to facilitate in-person sexual abuse or to create and distribute sexual images of children. Mental healthcare providers are a major source of referrals to child welfare authorities and are well-positioned to identify sexual

exploitation. This study investigated the perceived ability of mental healthcare workers to recognize and respond to concerns about online and in-person sexual exploitation of their pediatric clients. The authors administered a cross-sectional survey to 209 mental healthcare providers within the public health system of Alberta, Canada. The survey contained four sections related to sexual exploitation: two of which can take place online or in-person (grooming and sexual abuse) and two of which require the internet or a digital device (luring and sexual image distribution). Each section asked whether the mental healthcare provider had experience working with clients affected by these concerns, what barriers they encounter, how confident they are in their abilities and whether they have formal training in a topic. The vast majority of participants (83%) worked with a client impacted by grooming, luring, sexual abuse or sexual image distribution in the last year. Participants reported more training, more confidence and fewer barriers when identifying and responding to sexual abuse as compared to grooming, luring or sexual image distribution. There is a need to improve mental health providers understanding of how technology is being utilized to exploit children, so that they can respond effectively to protect their clients.

Kim, B. K. E., Dierkhising, C. B., De Leon, J., Sandoval, J., Brissett, A., & Bounds, D. (2022). Evaluation of services for the commercial sexual exploitation of children and youth: A scoping review. *Trauma, Violence, & Abuse*. DOI:10.1177/15248380221126185

Commercial sexual exploitation (CSE) of youth is a public health issue with multiple negative consequences. Despite the complexities and comprehensiveness of service needs for youth experiencing CSE, the evidence base of effective services and programs lags far behind. This scoping review seeks to identify the most up-to-date evidence on programs for youth experiencing CSE that have been evaluated and found to be effective. We conducted a scoping review of current literature, including peer-reviewed articles as well as gray literature using a scientific approach to identify programs and service provisions specifically focused on youth experiencing CSE and examine empirical evidence for their effectiveness. A comprehensive search of five databases was completed in September 2020 then updated in April 2021 to identify relevant publications from January 1, 2000 to present. Additional program mining was conducted on evaluations of programs mentioned in the search results. A total of 3,597 citations from the database searches were screened for title and abstract and 190 citations were included for full-text review. The search process

yielded 11 eligible articles with one additional report found through program mining. Identified programs targeted youth, providers, and consumers of CSE. While scientific rigor was not high, all included studies reported positive outcomes. Evidence base for effective services and programs is sparse. While more programs and services are being developed, studies should use rigorous research designs to test the effectiveness of these programs and services. Implications for practice and policy are discussed.

Lindenbach, D., Dimitropoulos, G., Bhattarai, A., Cullen, O., Perry, R., Arnold, P. D., & Patten, S. B. (2022). Confidence, training and challenges for Canadian child advocacy center staff when working with cases of online and in-person child sexual exploitation. *Journal of Child Sexual Abuse*, 31(3), 297-315. DOI:10.1080/10538712.2022.2037803

Child Advocacy Centers are interdisciplinary hubs that play a vital role in responding to child maltreatment, especially sexual abuse. Sexual abuse cases increasingly involve an online component, but no studies have examined the experience of Child Advocacy Center staff in dealing with online sexual exploitation. This study surveyed 37 staff at five Child Advocacy Centers in Alberta, Canada to understand their ability to recognize and respond to concerns about online and in-person sexual exploitation of their clients. The majority of respondents (54%) dealt with cases that involved grooming, luring, sexual abuse and child sexual abuse imagery (also known as child pornography) in the last year. Staff were equally confident in their ability to recognize and respond to grooming, luring, sexual abuse and child sexual abuse imagery. However, staff were more likely to have formal training in identifying sexual abuse and less likely to encounter difficulties in responding to sexual abuse relative to grooming, luring or child sexual abuse imagery. Clinicians used similar therapies when working with youth impacted by sexual abuse versus child sexual abuse imagery. Given that most Child Advocacy Center staff in our sample dealt with online child sexual exploitation, additional training in this area may be warranted.

National Center for Missing & Exploited Children. (2020). [Be the solution: Helping victims of child sexual abuse material: A guide for law enforcement](#). Author.

This guide offers opportunities for law enforcement investigators to consider how survivors experience their interventions through the lens of the victim and nonoffending family members. In addition, this document aims to balance the investigative and prosecutorial goals of law

enforcement actions with the mental health, well-being, resiliency, and victim's rights goals of survivors and affected families. It's not always an easy balance to strike – but it is an essential one.

Hamilton-Giachritsis, C., Hanson, E., Helen, W., & Beech, A. R. (2017). [Impact of online and offline child sexual abuse: "Everyone deserves to be happy and safe": How young people are affected by sexual abuse and how professionals respond to it.](#) Department of Psychology, University of Birmingham.

This study sought to develop an understanding of:

- How young people who have experienced online or offline sexual abuse are impacted by it – with a focus on their voices and perspectives
- Any specific effects of technology-assisted sexual abuse and related support needs
- Professional responses to young people affected by sexual abuse and professional perceptions of technology-assisted abuse and its impact
- Young people's views on how prevention and intervention around sexual abuse, particularly technology-assisted, could be improved

This mixed methods exploratory study (for methods and participant numbers see Table 1) was approved by three ethics committees (the NSPCC, University of Birmingham, University of Bath). Carrying out this research required careful balancing of young people's rights of 'protection' and 'participation'. While the research represents an important step in identifying the impact of and responses to child sexual abuse in the UK today, especially that which is technology-assisted, its limitations must be borne in mind. In addition to the small samples sizes and the cross-sectional nature of the sample, it is important to keep in mind the potential biases related to the sample recruitment. The young people interviewed and who answered the questionnaires were recruited from NSPCC services, Childline and the National Crime Agency.

Martin, J. (2016). [Child sexual abuse images online: Implications for social work training and practice.](#) *The British Journal of Social Work*, 46(2), 372-388. DOI:10.1093/bjsw/bcu116

The phenomenon of child sexual abuse images online (CSAIO) presents new and daunting challenges for social workers who work in the field of child sexual abuse (CSA), particularly in relation to assessment and treatment approaches. This paper reports on a grounded theory study that examined the views of CSA practitioners about online abuse images. In-depth qualitative interviews were conducted with fourteen social work practitioners and other helping professionals

in child protection and CSA treatment services from Ontario, Canada, to explore their perspectives about effective assessment and treatment for the children in the online images. All participants felt inadequately prepared in terms of their training and experience to effectively respond to these children, particularly regarding the perceived permanence of the abuse images distributed online and their global accessibility. Implications for social work training and practice are provided and the paper concludes with a call for the recognition of CSAIO as a new area in social work practice requiring additional research and specialised training.

Von Weiler, J., Haardt-Becker, A., & Schulte, S. (2010). Care and treatment of child victims of child pornographic exploitation (CPE) in Germany. *Journal of Sexual Aggression, 16*(2), 211-222. DOI:10.1080/13552601003759990

The online distribution of abusive images has risen dramatically over recent years and this raises many questions concerning the children within the images, particularly in relation to identification and provision of services. From October 2004 until September 2007, Innocence in Danger e.V. conducted an empirical study concerning the care and treatment of victims of child pornographic exploitation (CPE) in Germany by contacting all specialized institutions nationwide dealing with sexually abused children. This was achieved through questionnaires and interviews. A total of 245 cases of child pornographic exploitation (197 girls, 48 boys) and 280 suspected cases of child pornographic exploitation were identified. It was reported that cases of CPE were of a higher complexity than offline abuse, more demanding for professionals and raised many questions about professional involvement. Identified challenges included the issue of permanence once abusive images have been distributed online, and the coping strategies of children which might foster resilience. The study concludes that even though child pornographic exploitation is much talked about, there is still a lack of knowledge in how to identify, approach and help such children.

Implementing the Barnahus Quality Standards throughout Europe

PROMISE is supporting Europe to adopt the Barnahus model as a standard practice for providing child victims and witnesses of violence rapid access to justice and care. We undertake this work to fulfil the PROMISE vision: a Europe where all children enjoy their right to be protected from violence.

A Barnahus provides multi-disciplinary and interagency collaboration to ensure that child victims and witnesses of violence benefit from a child-friendly, professional and effective response in a safe environment which prevents (re)traumatisation. With the formal support from national authorities, PROMISE provides opportunities to translate national commitment into action and engage internationally in the process. In addition, regular networking and strategic communications continually activate our growing network of professionals and stakeholders who are committed to introducing and expanding Barnahus services nationally.

The first PROMISE project (2015-2017) set European standards and engaged a broad network of professionals. The second PROMISE project (2017-2019) promoted national level progress towards meeting the standards and formalised the PROMISE Barnahus Network. The third project (2020-2022) expanded these activities to include University training, case management tools, with a view to establishing a European Competence Centre for Barnahus and laying the groundwork for an accreditation system for Barnahus. The current Project: PROMISE ELPIS (2023-2025) is managed by Charité-University Medicine, Berlin, and promotes multidisciplinary and interagency models for child victims and witnesses of sexual violence, with a specific focus on specialised interventions and excellence in practice in cases where there is a presumed online element of the sexual violence.

Access the PROMISE tools and learn more at www.barnahus.eu



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