



Mandatory reporting information sheet 3: impacts of child sexual abuse

Each of the impacts of child sexual abuse are explained in more detail below.

Emotional/psychological impacts

Children affected by child sexual abuse often experience heightened feelings of fear, shame, humiliation, guilt and low self-esteem and self-worth, and have increased vulnerability to a range of psychological disorders, such as anxiety, depression and post-traumatic stress disorder. They may also experience intrusive experiences such as flashbacks and nightmares, as well as sleep disruption. Difficulty calming their emotions is also common, often coinciding with unpredictable and extreme emotional responses. Children and young people affected by sexual abuse may also develop a range of distorted beliefs about themselves other people and the world such as:

- 'I am bad'
- 'It's my fault'
- 'The world is a dangerous place'
- 'I deserved it'.

The psychological and emotional impacts for the children affected by sexual abuse are highly influenced by the reactions of adults and others when the abuse is identified or when they disclose.

Cognitive impacts

Abuse and trauma can impact cognitive development, leaving some children with attention and concentration difficulties and learning difficulties. Cognitive impacts often lead to academic difficulties and falling behind at school.

Social impacts

Young people can seek to isolate themselves from their family, friends, and peers, or develop difficulty forming and maintaining appropriate social connections. Younger children may experience disruptions in their attachments with their caregivers and other people, avoiding or refusing to engage or accept comfort, demonstrating distress within these interactions and experiencing extreme emotional reactions. Collectively these issues are underlined by reduced trust within interpersonal relationships because of the abuse

they have experienced. The child may or may not be consciously aware of their difficulties trusting others and so can have difficulty communicating this. If they are aware, they may not feel safe enough to do so or believe anyone will listen or care.

Children and young people can also experience change to their personal boundaries, demonstrating a lack of personal boundaries with others. When this occurs, it makes the child more vulnerable to further abuse and sexual exploitation, teasing, bullying, and negative psychological and emotional consequences. Children who have experienced sexual abuse can also experience rejection by their community and a loss of connection to culture.

Behavioural impacts

Sexual abuse can derail normal developmental pathways or trigger regression to previous developmental stages. For example, a child who was toilet trained may regress to soiling and wetting themselves. For children who experience developmental disruption, using chronological age as a marker of developmental stage is not an accurate representation of the child's development. Being affected by sexual abuse can also lead to a range of problematic internalising and externalising behaviours.

Internalising behaviours are negative behaviours that focus inward on ourselves and can include social withdrawal, somatic complaints (headaches, tummy aches, general pains), obsessive behaviours, self-harm and suicide ideation.

Externalising behaviours are directed outward and include aggression, antisocial behaviour, impulsive behaviour, bullying of others, low or non-attendance and school refusal, and alcohol and substance use and abuse. Closely linked with social impacts, these difficulties can lead to other negative educational, employment, health, and legal outcomes.

Sexual difficulties may also occur, including difficulties with arousal, fear of sexual experiences; experiencing negative emotions such as anger, disgust, guilt or shame with sexual contact; feeling emotionally distant or disassociated during sexual experiences; and confusion around sexual identity.

Physical impacts

Sexual abuse can have a range of medical impacts for the child who experiences these behaviours. Physical injury, pain and infection may occur because of the specific behaviours and may be minor (bruising, abrasions) or severe (broken bones, internal bleeding, sexually transmitted disease). Sustained sexual abuse leads to significant neurobiological impacts, changing the structure and usual development of the brain. This impact can lead to a host of other medium- to long-term consequences for the child or young person, including attentional difficulties, learning problems, delayed speech and language development, and emotional regulation difficulties. Child sexual abuse can also compromise long-term health outcomes such as immunological dysfunction and dysregulated hormones and can increase vulnerability to chronic health issues.