Hear me. Believe me. Respect me.

#Focusonsurvivors

A survey of adult survivors of child sexual abuse and their experiences of support services - Executive summary

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The Focus on Survivors study was devised and conducted by University Campus Suffolk and Survivors in Transition, with support from the Survivors Trust.

Acknowledgements
The authors would like to acknowledge the important contribution made by Dr Emma Bond, UCS, to the initial design of the questionnaire. We thank Emma and Bernadette Mooney, UCS, for their generous support for the project generally.

Gratitude is due to Fay Maxsted and the Survivors Trust for helping with the development of the questionnaire design and the promotion of the survey to the Trust’s members.

The service-user group of Survivors in Transition played a vital role in the design of the research and interpretation of results. The group’s support, insight and expertise is greatly appreciated.

Above all, we are indebted to the hundreds of survivors of child sexual abuse who took the time and care to complete the survey. Without this the research would not have been possible.

About Survivors in Transition (SiT)
SiT was established in Suffolk in 2009 to provide an informal platform for survivors to come together and support each other.

Demand on the organisation for support and therapeutic intervention led to the SiT becoming a registered charity in 2011 staffed completely by volunteers.

SiT currently supports over 800 male and female survivors from across Suffolk and East Anglia per year.

This report is sponsored by Gotelee Solicitors, which is a Suffolk based firm of solicitors with their head office located in Ipswich. It has a specialist team of lawyers dealing in the difficult and often traumatic area of claiming abuse compensation on behalf of people who have suffered sexual abuse.

Survivors in Transition and Gotelee Solicitors have come together in partnership to help survivors who may wish to pursue a legal claim for compensation in respect of the abuse they suffered.

If you or someone you know is the victim of sexual abuse and wish to make a claim for compensation then it is important you contact a solicitor and seek legal advice as soon as possible. Survivors in Transition can put you in touch with the specialist lawyers at Gotelee Solicitors who will happily have a free no obligation, confidential discussion with you about your options.

Gotelee Solicitors are members of Association of Child Abuse Lawyers (ACAL) and the Association of Personal Injury Lawyers (APIL) and have a team of experts, including doctors, counsellors, psychiatrists and specialist barristers to ensure that your sexual abuse compensation claim has the very best support.

Victims of sexual abuse often believe that they are not entitled to compensation if the abuse happened many years ago. It is important to understand that this is not correct and it is indeed possible to be successful in obtaining justice and compensation for survivors of historic sex abuse.

Designs, layouts and info-graphics are designed by the Information Team at Healthwatch Suffolk. Call 01449 703949 (www.healthwatchsuffolk.co.uk).

Local Healthwatch have the role to find out what people think about health and social care services in their area. They have powers to shape, influence and improve services now and for the future.

Visit the Healthwatch England website (www.healthwatch.co.uk) to find out how you can help to improve services in your area.
Support for Survivors

The research is about support available to people who have survived child sexual abuse. Whatever your circumstances, if you feel that you need advice or support please contact one of the following organisations:

**Survivors in Transition (SiT)**
A support centre for adult survivors of childhood sexual abuse based in Suffolk.

84, Fore Street
Ipswich
Suffolk
IP4 1LB

Registered charity number 1144655

Website: [http://www.survivorsintransition.co.uk](http://www.survivorsintransition.co.uk)
Tel: 07765 052282.
Email: info@survivorsintransition.co.uk
Tweet: @survivorsuffolk

**The Survivors Trust (TST)**
A national umbrella agency for 130 specialist rape, sexual violence and childhood sexual abuse support organisations throughout the UK.

Unit 2, Eastlands Court Business Centre
St Peter’s Road
Rugby
Warwickshire
CV21 3QP

Registered Charity Number: 1109305
Website: [www.thesurvivorstrust.org](http://www.thesurvivorstrust.org)
Tel: 01788 550554
Email: info@thesurvivorstrust.org
Tweet: @survivorstrust

**Being listened to, believed and respected**
The service-user reference group of Survivors in Transition specifically advised the research team that the survey should include questions about being listened to, believed and respected.

From the group’s perspective these questions reflected essential basic qualities that services needed to have in order to help adult survivors of child sexual abuse.

As the group explained, being **listened** to is essential for survivors who as children lacked a voice or were ignored. Being **believed** is essential for survivors who as children would often be warned by their abusers that if they told anyone of the abuse they would not be believed. Being **respected** is essential for those who felt degraded by their abuse.

For more information about the research please contact Professor Noel Smith at noel.smith@ucs.ac.uk.
#Focus on Survivors

A survey of adult survivors of child sexual abuse and their experiences with support services

Less than 1 in 5 disclosed because someone asked.

70% of abuse was not reported.

64% of reported abusers not prosecuted.

90% have not seen their abuser face to face.

51% of survivors

20 years

Average duration of support accessing help.
Executive Summary

Focus on Survivors Survey
The research was undertaken in the context of a severe lack of evidence about the support needs of adult survivors of childhood sexual abuse (CSA) in the UK. It is based on an on-line, national survey of nearly 400 survivors, making this one of the largest surveys ever undertaken with this population.

The survey looked at experiences of abuse, satisfaction with different types of service and the availability of information about services.

CSA in the UK
In media coverage CSA tends to be portrayed as assaults on children by adults outside of the family, often as isolated or short term episodes, and often as involving children on an opportunistic or random basis.

The survey suggests that this portrayal does not reflect typical experiences of abuse:

• Abuse by adults outside family networks is not typical. Almost 70 per cent of respondents reported that they were abused within the family or extended family and over 20 per cent reported that abuse happened in somebody else's home.

• CSA is not typically experienced as isolated or short term episodes. The average duration of abuse was 7 years.

• Rather than being random, opportunistic assaults, the risks of CSA are better understood as being concentrated among certain children. Over half of respondents reported being abused by more than one person.

• In most cases (70 per cent) the abuse was not reported to the police. Almost 90 per cent of survivors have not seen their abusers brought to justice.

• It might expected that abuse is usually stopped as and when children make disclosures but this is not the case. Only 11 per cent of survivors said that abuse stopped about the same time as they made their disclosures. For most people (69 per cent) the abuse had stopped well before they told anyone about it. Alarmingly, 20 per cent of respondents continued to be abused at least one year or more after making disclosures. For this group, abuse continued for an average of almost 6 years after the first disclosure. Over 30 per cent of those who had continued to be abused after making disclosures had disclosed to a statutory service such as GP, social worker, doctor or teacher.

• Less than 20 per cent of survivors disclosed because they were asked directly if they had been sexually abused. Statutory services were no more likely to proactively discover abuse by asking direct questions than, say, survivors’ friends and family. The onus falls on survivors to speak out about their abuse and many can find this in itself traumatic.

• Some survivors (34 per cent) first accessed support services around the same time as they made disclosures. However, many (42 per cent) did not receive such support until long after disclosure – on average 12 years later, with more than half of respondents waiting at least 9 years. Many services will be working with people who have never disclosed being sexually abused as children: 25 per cent of respondents said that they had used services specifically because of their abuse before ever disclosing.

Support for survivors
Survivors use a range of support services. Counselling, mental health and GP services were most commonly used, with a half or more of survivors using these services as a result of CSA.

The next most commonly used services were voluntary sector sexual abuse and rape support services and psychotherapy services, followed by the police, the Samaritans, and Accident and Emergency and secondary health services. Less than a fifth of survivors used social services. Survivors used a range of services over a long period of time - on average between four and five services over a 10 year span between the first service accessed and the most recent service use.

Satisfaction with services was closely related to some basic qualities in the way services treated survivors – that is, whether they made survivors feel listened to, believed and respected:

• Nearly all of those who used Sexual Assault Referral Centre, Independent Sexual Violence Advisors, voluntary psychotherapy and counselling services and rape support services felt that they had been listened to, believed and respected by services.

• Less than half of those who used social services or A&E and hospital services felt that they had been listened to, believed and respected.

• Taking into account use of all services, survivors were more satisfied than dissatisfied with the support they received.

• However, there was a sharp contrast between
• satisfaction with statutory sector and voluntary and independent sector organisations. Among survivors who had used both sectors, over 70 per cent were more satisfied with voluntary sector services than with statutory services, while less than 20 per cent rated statutory services over the voluntary sector.

• Poor service experience can represent a barrier to further service use. Survivors who are dissatisfied with services at one point in time take longer to go on to access new services. Survivors who fail to find a satisfying service go on to more services over a longer period of time than those who receive a helpful service response at the outset.

• Counselling and psychotherapy services are often provided through sexual abuse and rape support services, and this cluster of services represents the provision which respondents found most satisfying. When asked what, overall, had been the most helpful support they had received, 48 per cent of respondents referred to counselling and psychotherapy, 21 per cent cited sexual abuse and rape support services and 12 per cent specified group support with other survivors.

• However, 57 per cent of survivors said that they wanted more counselling and psychotherapy services. A number of problems were identified with the availability and adequacy of provision: insufficient free-at-point-of-use provision, long waiting lists for too brief counselling programmes, and limited options in terms of therapeutic techniques.

• A key barrier to getting help was the challenge for survivors of overcoming the difficulty of talking about their experiences of being sexually abused as children.

“Sometimes the fear and the shame is too great to be able to say anything no matter how long ago it happened.” - Adult CSA survivors Focus on Survivors survey respondent

Survivors taking part in the survey had used services over a broad timespan, from 1975 to 2015. Given growing awareness about CSA during this period it might be expected that services would have developed over this period. However, the research suggests that satisfaction with services has not generally increased over time.

Learning from survivors
Conclusions from the research include:

• Misinformation about CSA in the UK risks skewing and undermining targeted strategies to tackle typical forms of childhood sexual abuse.

• Greater professional vigilance in asking service users if they had experienced CSA – rather than relying on people to self-disclose – would be important for bringing forward processes of support and recovery for survivors. This would be a vital and cost-neutral step towards more proactive help for survivors and a more efficient service response.

• The impact of poor service experiences is more than the absence of effective help at one point-in-time. Instead, poor service experience is associated with a delay in survivors accessing future services and with survivors using more services over a longer duration. As such a poor service can have a long term impact and represent a barrier to support for survivors. In contrast, a good service response can result in survivors coming to a point of recovery or resolution sooner in their lives while at the same time making more efficient use of service resources.

In order to build on strengths, the voluntary and independent sector (rather than statutory bodies) is best placed to lead any national strategy to develop support for CSA survivors in the UK.

Information
Less than a third of respondents agreed that professionals and services provided the information they needed, and well over half said that they found the information they needed on-line. Most respondents – over three-quarters – did not find it easy to find the information they needed. Problems with information related to both the volume and relevance of what is available.