

The Scottish Parliament Cross Party Group on Adult Survivors of  
Childhood Sexual Abuse

Virtual Business Meeting

Wednesday 20<sup>th</sup> January 2021 1.00 pm

**In attendance**

Johann Lamont MSP, Convener, Fulton MacGregor MSP, Depute Convener  
Anne Macdonald, Co-Convener, Janine Rennie, Co Convener, Wellbeing Scotland

Stuart Allardyce, Stop It Now Scotland, Sandra Brown, Treasurer, Moira Anderson  
Foundation, Emma Bryson, SOS, Andrew Campbell, Student, Sheila Gaul, Dr Adam  
Mahoney, Napier University, Margaret Mitchell MSP, Sarah Nelson, University of  
Edinburgh, Dr Eric Swanepoel, Writer & Researcher, Carol Willson, Student

**Apologies**

Tammy Kirk, Health in Mind, Joy Patrick, KASP, Rukhsana Saleem, Moira Anderson  
Foundation

**Welcome and introductions**

**Minutes of last meeting 4<sup>th</sup> November 2020**

Approved: Janine Rennie  
Seconded: Dr Adam Mahoney

**Matters arising:** none

**Updates**

Letter to Deputy First Minister on COVID: sent and response from DFM sent to  
members.

Letter to Cabinet Secretary for Social Security & Older People on PIP and Tribunals:  
sent and response from CS sent to members.

Members have some issues they believe have not been fully addressed in both  
letters. It was agreed due to time constraints rather than write back, Johann and  
Fulton can raise if possible through parliamentary questions. **Action Johann and  
Fulton**

Letters to Scottish Football Association and Cabinet Secretary for Justice on delays  
to final Report: no response, Fulton will follow up. **Action Fulton**

## **Lady Dorrian Event**

An extremely interesting and helpful discussion with Lady Dorrian took place. She was very interested in the group and the issues we raised on how adult survivors experience the justice system and the courts. Some points discussed:

- Discussion on Vulnerable Witnesses (Scotland) Act
- Discussion on Sexual Offences Review and how a trauma informed approach can be implemented; myths on rape and sexual abuse, training of jurors and all of the Court staff, pre recording of evidence and its benefits to all concerned, awareness of the effects of giving evidence as adult survivors, pre-recording of evidence should be considered for them too, issues of memory not being linear, dissociation and hyper arousal resulting in difficulties in providing evidence, trauma factor on memory, re-traumatisation, adverse childhood experiences and research findings need to be taken into account, delays and postponements and how these impact on survivors, communication with survivors needs to improve, distressful when patchy or inconsistent

Lady Dorrian agreed to keep us informed of the Review

## **Application for membership**

Alexa Green, a student at University of Edinburgh has applied to become a member of the group. It was agreed for Alexa to join the CPG. Anne will let Alexa know and send her the group's Procedures and Terms of Reference. **Action Anne**

## **Stuart Allardyce, Director, Stop It Now Scotland Presentation: Preventing sexual offending involving children and young people**

### **Key findings**

- No single theory explains HSB. It is a complex area and many different influences can be relevant to the behaviour of a person at different times in their lives.
- It is a gendered issue – more than 90% perpetrators are male and majority of victims are girls – especially with peer on peer abuse.
- HSB in children can be a reaction to trauma or victimisation. Young people with sexually abusive behaviour are 5 times more likely than young people with non-sexual criminal behaviour to have been sexually abused.
- For some young people, learning disability and developmental delay may be significant factors that impact on aspects of social, relational and sexual development in adolescence

- Police Scotland and other statutory authorities have identified children and young people becoming involved in HSB by use of image viewing and sharing, who would not have previously come to the notice of statutory authorities.
- Studies estimate that where there are children and young people involved in HSB, between one third and one half of victims are siblings or close family members

## **Recommendations**

- A multi-agency Group should be established to oversee the implementation of the Expert Group proposals and to ensure continuous improvement across all statutory authorities
- Agreement should be reached between Scottish Government, Statutory Authorities and Third Sector organisations working with children and young people about the Data that should be collected and analysed to obtain insight into the numbers of incidents and the needs of those children and young people involved.
- There should be a 'Scottish Positive Sexual Behaviours Training Plan' (modelled on the Scottish Psychological Trauma and Adversity Training Plan), outlining core training needs at different levels for practitioners directly involved with children and young people, and covering how organisations audit their own learning needs.
- An intervention matrix should be developed for practitioners in Scotland.
- Regular surveys of young people should in relation to online and offline harm should be gathered to improve understanding of the issue and ensure prevention measure are co-constructed with young people

Following Stuart's excellent and thought provoking presentation the group had a wide ranging discussion on the key findings and recommendations by the expert group. Some points raised:

- Sexual abuse perpetrated by children and young people is as harmful than perpetrated by adults
- Former social workers on the group raised the issue that there is not a lot of support for workers having to deal with young sexual perpetrators
- The culture of sexualisation of children and its influence on young people, dress behaviours, social media, etc
- Need for parents and the general public to be aware of this issue to protect children (baby sitting)
- Issue of age of criminal responsibility and how that can be squared with sexual offences, do we need to reframe what we mean by justice in these instances

Johann and Fulton thanked Stuart. Anne will send his PPT to the membership.

**Action Anne**

**National Trauma Training Programme: Some Concerns**

**By Sarah Nelson, Sue Hampson and Janine Rennie**

The full paper was sent out the membership prior to the meeting. Here is the summary and Conclusion presented by Sarah.

SUMMARY: Problems about the current model include:

- 1) Every type of trauma has been subsumed into one, and childhood sexual abuse is now barely mentioned; To expand: Every type of traumatic experience has been subsumed under the general word 'trauma'. While there are some commonalities among different traumas, there can be many differences in impact, in response and thus in implications for workforce training.
- 2) A single profession, psychology, appears to be taking to itself all therapeutic trauma work. The range of other therapies is ignored, including the entire field of counselling;
- 3) Survivors of trauma are not genuine collaborators in the process of recovery;
- 4) A rigid phase- based model of therapy risks long delays in treatment, and failure to move beyond the stabilisation phase;
- 5) The four-level hierarchy of staff access to trauma training fails to reflect that survivors regularly disclose to people of every professional status, qualification and discipline.

CONCLUSION: We believe the current National Trauma training would benefit greatly from the following changes, amendments or additions:

- Simplification of the current four-level training system into two levels of routine and specialist training, giving all staff a broad- based understanding, particularly when dealing with disclosure. Giving them information and confidence-building on working with particular forms of trauma, including sexual trauma.
- Respect for, and consideration of a range of therapies and support, including counselling, psychotherapy, peer support and advocacy. Collaboration by psychologists with a range of skilled professionals working with trauma to ensure clients have genuine choice in their recovery. A re-focussing from considering only a few psychological approaches as suitable, towards examining the key ingredients of various approaches which have proved most helpful to recovery.
- Removal of near-total control from the professional, ensuring collaborative approaches with trauma survivors are genuine throughout.

That includes decisions on when they wish to disclose past trauma and start therapy; formulation of their own needs; when they feel ready to move to the next stage; which therapeutic supports best meet their needs; and when they wish to conclude therapy.

There was discussion and questions, some points raised:

- If you cannot scale or measure it doesn't count in the psychology sphere
- Statutory services means your anonymity is removed, whereas 3<sup>rd</sup> Sector provides confidentiality
- Survivors have had negative experiences in psychology in the past which is why the forming of non-statutory survivor agencies were established
- Survivors feel CP's attitude is it's their 'problem', reinforcing shame and treating their abuse as a medical problem
- A collective support approach is more positive. e.g., peer support
- To exclude the vast experience of survivor agencies is worrying

As time was running out it was agreed that any further questions can be send to Sarah.

#### **AOCB**

Dr Sandra Ferguson has resigned from the CPG. We have thanked her for her time and contributions over the years.

Emma would like to discuss if we can set up our own website to further advance the CPG. This will go on the next agenda.

How we renew the CPG following the May Election. We need to wait for results. Fulton (if re-elected) is happy to be Convener, Johann, Fulton and Margaret will put out feelers to MSPs to see if anyone interested in joining.

Sajid Javid has set up a Child Sexual Abuse & Exploitation Group under UK Centre for Social Justice Think Tank. We should contact them after the Election on 6<sup>th</sup> May.