



# FACT SHEET ACCOMPANYING THE Sexual Violence against Children Victims Monitoring Report 2017-2018

Children who experienced sexual violence often have to endure the severe and longterm consequences. The Netherlands has an obligation to do everything in its power to combat sexual violence. This is laid down in international conventions. The Sexual Violence against Children Victims Monitoring Report 2017–2018 provides details of its approach. It also contains figures on the various steps in the process towards obtaining help or support, from the very beginning that sexual violence occurred to the number of victims who end up receiving support.

## THE INVESTIGATION

This report attempts to provide insight into the number of victims of sexual violence against children in the period 2017–2018. It is based on research into self-reported occurrences of sexual violence against children and data held by bodies

involved in tackling it, such as Veilig Thuis (Safe At Home) and the Dutch Child Care and Protection Board (CCPB). The figure below is a schematic representation of the process that victims can go through on their way to professional support.

Victims do not have to go through all the steps in order to qualify for professional support. Another factor to take into consideration is that not all victims are looking for this type of support. The figure distinguishes between the following five steps:

1. Occurred
2. Identified
3. Reported
4. Investigated
5. Supported

## THE OUTCOMES

### 1. OCCURRED

The most recent figures available are from 2016. In that year, the number of children aged 12–16 who indicated that they had been the victim of a serious form of physical sexual violence was 20,800. The questionnaire was not administered to children under the age of 12. Furthermore, the number of instances of online sexual violence is not known.

### 2. IDENTIFIED

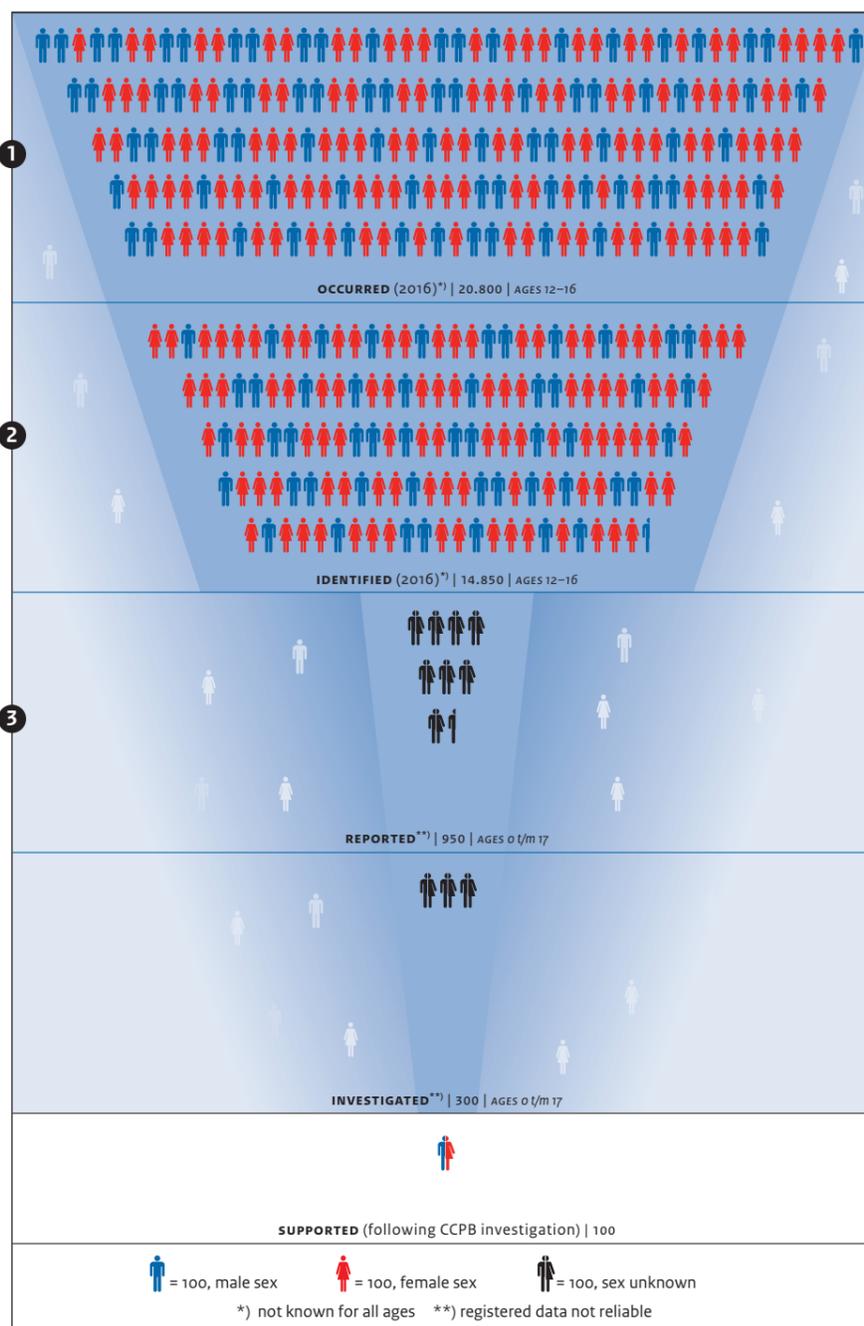
A majority of children indicated that they had told someone about their experience with sexual violence. In most cases, they reached out to another child. However, about one in three children did not discuss the abuse with anybody, for example out of fear or shame. It is important that children who have been subjected to sexual violence feel safe to talk about it.

### 3. REPORTED

Victims, people surrounding them, or professionals can report (suspicions of) sexual violence to Safe At Home. The figures show that this happened less frequently in both the years 2017 and 2018 than in 2016. This comes with the proviso that the figures for the latter two years are as yet unreliable. It is therefore impossible to state with certainty that there has been a decline. In addition, the Coordination Centre against Human Trafficking (CoMensha) registered a lower number of minor victims of sexual exploitation. The number of instances of online sexual violence recorded by the reporting centre Helpwanted.nl also fell. By contrast, the Sexual Assault Center did experience an increase in the number of reports. In 2018, it received more reports of sexual violence against children than Safe At Home.

#### Average number of reports per year

960	Safe At Home
910	Sexual Assault Center
1.660	helpwanted.nl
30	CoMensha (2018)
360	Education Inspectorate
140	Inspectorate Health and Youth Care



### 4. INVESTIGATED

There was a decline in the number of investigations initiated by Safe At Home following (suspicions of) sexual violence. Relatively speaking, it also appears that reports are being followed up less frequently. However no firm conclusion can be drawn on the basis of the registered data alone. On the other hand, the number of sexual violence cases investigated by the CCPB remained stable. It is noticeable in this regard that there were suspicions of other types of abuse in 75% of these cases, and that they were usually characterised by the presence of other problems. It is also known that the CCPB and other organisations that support and shelter vulnerable children are struggling with lengthy waiting lists. Given the seriousness and urgency of the problems that these children encounter, these lists are a matter of great concern.

#### Characteristics of families investigated by the CCPB

30%	Mental impairment
41%	Psychiatric problems
24%	Addiction

### 5. SUPPORTED

At present, there are no records of the reasons why children receive youth support. Therefore it's impossible to chart the extent to which victims of sexual violence actually receive this support. In an attempt to find a way around this problem, the Rapporteur linked CCPB data (which were known to be the subject of an investigation following suspicions of sexual violence) to youth support data. This led to an insight into the youth support received by this specific and relatively severely affected group of victims. In most cases, these children were already known to youth support services before the start of the investigation by the CCPB. Remarkably, 15% of children were not offered youth support within six months of the court issuing a family supervision order. Where this support was offered, this usually took the form of multiple trajectories within a short amount of time. This raises the question of whether child protection measures imposed as a result of sexual violence are being implemented effectively. A previous investigation carried out by the Rapporteur revealed that, in 2016, the number of young people who received youth support for being a victim of sexual violence was 12,500.

## THE RECOMMENDATIONS

### 1. Map out a coordinated approach to combat sexual violence against children

While a range of programmes and measures to combat sexual violence against children are ongoing, there is a lack of coherence between these initiatives, as well as a lack of coordination. As a result, some victims, including victims of online sexual violence, receive too little attention. The National Rapporteur therefore advises the Minister of Health, Welfare and Sport and the Minister of Justice and Security to take steps to map out a coordinated approach.

### 2. Set up a coordinated regional approach to combat sexual violence

Combating sexual violence against children has largely been delegated to the municipalities, for instance as part of the *Violence does not have a place in the home: Tackling domestic violence and child abuse* programme. However, half of all regions indicate that they currently do not pay attention to sexual violence specifically. The National Rapporteur therefore advises the instigators of the *Violence does not have a place in the home* programme and the municipalities to organise and monitor a coordinated and sustainable approach at the regional level.

### 3. Increase the visibility of young victims

No data is available on the number of children under the age of 12 who fall victim to sexual violence. There is a lack of focus on sexual violence among this group of young children. Furthermore, signs of sexual violence among this group are even harder to identify than among older children, despite the serious need for data on the number of victims to determine the effectiveness of policies and reduce the number of children affected. The National Rapporteur therefore advises the Minister of Health, Welfare and Sport and the Minister of Justice and Security to explore opportunities to chart the prevalence of sexual violence among children under the age of 12.

### 4. Investigate the effectiveness of child protection measures as a result of sexual violence

Some of the victims of sexual violence against children suffer from multiple problems. In the past, this often prompted the Child Care and Protection Board to request child protection measures. The fact that children were not offered timely support in 15% of cases where the court issued a family supervision order is therefore a cause for concern. Moreover, when this support was offered, this usually took the form of multiple trajectories within a short amount of time. This raises the question of whether child protection measures are being carried out effectively. The National Rapporteur therefore advises the Minister for Legal Protection and the Minister of Health, Welfare and Sport to investigate this effectiveness and to assess whether suitable support is being offered within an acceptable time frame.