



International Congress

CHILD SEXUAL ABUSE: PROTECTION MECHANISMS AND RESILIENCE

Final declaration

Pursuing its commitment to fight violence against children¹, especially against child sexual abuse, the International Catholic Child Bureau (BICE) held an international congress entitled "Child Sexual Abuse: Protection Mechanisms and Resilience" on May 20, 2015 in Paris. The congress was attended by the 29 partners² involved in BICE three-year programme (2015-2017) on the sexual abuse of children, which is implemented in 19 countries worldwide and by representatives of States, international and national experts and practitioners in the field of child rights and sexual abuse.

Defining sexual abuse, as the act of:

- engaging in sexual activities with a child³ who, according to the relevant provisions of national law, has not reached the legal age⁴ to have such relations;
- engaging in sexual activities with a child where:
 - o use is made of incitement, coercion, force or threats; or
 - o abuse is made of a recognised position of trust, authority or influence over the child, including within the family; or
 - o abuse is made of a particular vulnerable situation of the child, notably because of a mental or physical disability or a situation of dependence;
- exploiting a child in prostitution or other unlawful sexual practices;
- exploiting a child for the production and dissemination of images or pornographic material.

Considering that child sexual abuse:

¹Please, refer to the bibliography in Annex I.

²Please refer to the list of partner organizations in Annex II.

³ Article 1 of the UN Convention on the Rights of the Child defines a child as "every human being below the age of eighteen years."

⁴The age of consent should be set at a reasonable age, in any case not younger than 15 years old. It is desirable that States raise the age limit if it is set too low and that those which have set it higher than 15 years old do not lower it in order to ensure optimal protection to children against sexual abuse.

- is a global scourge that affects all States throughout the world, regardless of their level of political, social or economic development;
- is most common in circles of trust and perpetrated by people whom the victim trusts, or by people who have a certain power or authority over the victim, aggravating his/her inability to defend him/herself;
- causes profound long-lasting and concealed trauma, affects both the integrity and the physical, psychological and mental health of the victim, and requires specific and multidisciplinary interventions;
- has an insidious and hidden character and assumes varied and pernicious forms, thus limiting the availability of reliable quantitative and qualitative data structured according to age, sex and geographic areas;
- rarely leaves tangible or lasting evidence beyond the word of the child and possible witnesses, which has an impact on the victim's access to justice and his/her recovery in dignity and rights .

BICE recommends:

to States:

Legal framework

1. To recognise and **criminalise sexual abuse, attempted abuse, active or passive complicity of abuse against children** and effectively apply these legal provisions to acts or omissions committed in the country and abroad by people living under their jurisdiction;
2. To ensure that the definition of sexual abuse, including the components and the means used, is wide enough and exclude incriminating evidence such as the non-resistance of the victim⁵ to avoid the **risk of impunity** of certain acts or omissions which would evade the hold of positive law;
3. To consider that the **trust** inspired by the author, his/her position of authority or other means to **invalidate the consent** of the victim and to **weaken or destroy** his/her defences, are aggravating circumstances;
4. To provide **protective measures** to preserve the child by removing him/her from the risk and supposed risks of abuse and the possible aggravation of the inherent consequences;
5. To determine a **reasonable minimum age** below which any activity of a sexual nature between adults and children would be covered by the law, to ensure the protection of children beyond the foreseen minimum age, and apply dissuasive sanctions;
6. To extend the **limitation period** for sexual abuse from the age of **majority of the victim**, or when the victim overcomes denial or traumatic amnesia or when facts are revealed due to investigations, witnesses or other.

Prevention, protection and assistance

1. To follow a child rights-based approach complemented by a social welfare-based approach:
 - a. develop prevention public policies with a holistic perspective, taking into account the protective resources and capabilities of adults, families and communities as well as institutional mechanisms for promoting human rights, prevention and effective protection of victims;

⁵ The circumstances of sexual abuse, including tricks, ploys, coercion, authority, are likely to destroy the victim's defenses and to expose him/her to the perpetrator's actions. Therefore, resisting or not to abuse cannot reasonably constitute an element of evidence against the victim when the perpetrator's intention of abusing exists.

- b. provide these policies with adequate resources and articulate them around the fight against the silence, attitudes and practices which perpetuate sexual abuse, and around interventions oriented towards **detection** to identify risk factors and alarming signs, **reporting** to facilitate filing and the objective **investigation** of complaints;
2. To treat cases of sexual abuse with multidisciplinary **methods and approaches** to promote the physical and psychological recovery and social reintegration of the victim, and ensure **monitoring** to fully restore the child's dignity and his rights through judicial pathways.
3. To provide protection structures and caregivers⁶ with support and training on an **internal child protection policy**⁷ designed to promote or create a protective environment for child rights in circles of trust;
4. To build the capacity of state and non-state professionals on their **duty of care** towards the children they are responsible for, on prevention of abuse, on the outright **ban** of any sexual activity with these children, on the **detection** of signs and symptoms of sexual abuse, and on reporting and **referrals** to appropriate **support** services;
5. To establish or strengthen a **free, accessible and** permanently **operational helpline**, to **listen, assist and refer** children at risk, victims or witnesses to **psychological** and forensic care and support. Children should be able to speak with **confidence** and with the guarantee of **confidentiality**;
6. To develop a policy for assistance and protection for **families**. In particular, there should be policies to **raise awareness and train parents** in **positive parenting, detection** of symptoms and the use of support helplines services;
7. To create **coordination focal points** among state services for interventions in the area of **prevention, protection and assistance** to victims and families in order to facilitate liaison and collaboration between services providing complementary care;
8. To integrate working levers in the State support and practices, based on the **potential of resilience**⁸ of the child victim or at risk of abuse, which could inspire public policies for prevention and therapeutic measures, but without replacing them;
9. To institutionalize **cooperation** among States and between States, including the exchange and **sharing of data, cross-border investigations**, facilitating the **extradition** of

⁶According to the Committee of the Rights of the Child's interpretation of article 19. 1 of the UN Convention on the Rights of the Child, care providers are defined as parents or one of them, his/her or their legal representatives or any other person to whom the child is entrusted; they are the people who have a clear and recognised legal, professional, ethical and/or cultural responsibility, with regard to the safety, health, development and well-being of the child, namely primarily: parents, foster parents, adoptive parents, people welcoming a child as part of the *kafalah* of Islamic law, guardians, extended family and community members; educational and school staff and personnel responsible for early childhood; persons employed by parents to keep the child; team leaders and sports coaches - including youth group supervisors; employers or supervisors in the workplace; staff of institutions (governmental or nongovernmental) which are given responsibility for the child, such as for example staff in health care, juvenile justice or child care facilities. In the case of non-accompanied minors, the State has *de facto* custody. CRC/C/GC/13, § 33 General Comment n°13 (2011) on The right of the child to freedom from all forms of violence.

⁷"Developing and Implementing an Internal Child Protection Policy - A Guide for Organizations Working with Children", BICE, Paris 2014. In particular, please, refer to fact-sheet No 12.

⁸ Please, refer to the bibliography in Annex III.

(alleged) perpetrators of sexual abuse as well as **filing** sentenced or suspected perpetrators;

10. To integrate **training modules** in the **school curricula** for an informed, reasoned and respectful use of the internet and social networks as well as the opportunity for children themselves as victims or witnesses to report to referral services cases of sexual abuse, while raising their awareness on the negative effects of being silent on the victim and potential victims;
11. To set up measures adapted to the **active listening** of the child at risk, victim or witness, so that testimony collection be done using adapted methods and procedures with professionals specifically trained on this;
12. To promote the **access** of child victims or witnesses **to justice**, particularly through **legal assistance** and **evidence collection**, and by ensuring the **best interests of the child** as a determining factor in any final decision;
13. To implement the UN Guidelines for the Alternative Care of Children⁹ in order to curb the **risk factors** for children¹⁰ and favour the **identification of signs** for prompt and more adequate intervention and targeted preventive measures.

to civil society organisations:

1. To adopt a **multidisciplinary approach** including in the teams' composition and **methods inspired by the concept of resilience** and in the light of the principle of the **best interests of the child**.
2. To contribute to **breaking the silence** on the issue of sexual abuse through awareness-raising campaigns, **documented research** on the different manifestations of sexual abuse, and **action programmes** with different types of media;
3. To get involved at all levels in **advocacy**, particularly through **alternative reports** monitoring the relevant recommendations made by national, regional and international mechanisms for supervision of children's rights;
4. To develop **multiform partnerships** and organise **capacity building training modules** to be given in the professionals' workplace, such as protection centres, courts, police offices, schools, hospitals, counselling centres, and media offices¹¹;

⁹ Doc. ONU, A/RES/64/142(2009), These Guidelines are mainly intended for children deprived of parental care and protection.

¹⁰ The most vulnerable and therefore most exposed children are: unaccompanied children, children living in touristic areas where sex tourism is common, children accessing the Internet and social networks in an unprotected way, children with physical or mental disabilities, children affected by conflict, children living in fragile or vulnerable families or in families experiencing extreme poverty, children socially excluded or estranged from their families, children deprived of liberty, victim of debt bondage, of human trafficking and forced labor and other worst forms of child labor, institutionalised or isolated children lacking parental affection, orphaned children without alternative care, children victims of social exclusion and discrimination, children from minorities and indigenous peoples, and children from families with a strong dependence on alcohol and drug.

¹¹ By media, we mean print press, digital media (web sites, blogs, social networks), TV and radio, including when broadcasted on the internet.

5. To give priority to **awareness-raising** with the active **participation of children** as subjects and rights-holders in order to guarantee respect for their opinions and in decisions concerning them;
6. To implement **community activities** targeting **community intermediaries** (leaders of community centres , religious leaders, elders and traditional leaders, etc.), **families**, about their responsibility to protect, to monitor and their role as whistleblowers in cases of abuse, as well as their support, care and benevolence;
7. To use **information, training and awareness** raising to fight against sexual abuse through internet and social networks, places where connections between people and child-pornographic website, cyber-harassment, and the production, storage and dissemination of **child-pornographic** material and different types of enticement, feed **paedophiles**, **sexual tourists** and people who take advantage of children and adolescents' ingenuity.
8. To try to strengthen the **potential of resilience** and the **protective factors** of children at risk and victims by giving them supporting and caring attention and **positive guidance**, by working with their **inherent resources**, and by developing a social environment conducive to their **inner growth** in order to support their rehabilitation and socio-professional reintegration.

to medias:

1. To contribute, through the **dissemination of publications** on sexual abuse, TV and radio programmes and other spaces for **educational and pedagogical content**, to promoting awareness and **behaviour** change and to fighting against **practices** that are likely to encourage, by omission or action, acts of sexual abuse against children;
2. To ensure that cases of sexual abuse are treated with respect for the **dignity and the rights** of the child and in accordance with the principles of **confidentiality, non-discrimination and non-stigmatization, physical and moral integrity and the child privacy**;
3. To develop **self-regulatory guidelines** for the treatment and dissemination of information that promotes expression of opinions and children's expectations and which avoid erroneous and stereotypical content that would effectively re-victimize the child.

ANNEXES

Annex I. Non-exhaustive bibliography of BICE publications relating to child sexual abuse

BICE Position Paper on *Mobilization for the protection of children against sexual abuse and exploitation* in Preventing ill-treatment and sexual abuse against children – Best practices in prevention and recommendations », BICE, Paris 2013, pp. 93-113; and in « Developing and implementing an internal child protection policy – A Guide for organizations working with children », BICE, Paris 2014, pp.107-121. See also the following documents « L'exploitation sexuelle des enfants. Analyse du problème – Des solutions courageuses. » Florence BRUCE, BICE, Fayard, 1991 (English and French); « Explotación sexual. Reflexiones sobre la práctica. Aportes al desarrollo local y políticas públicas. Aportes metodológicos. » Cristina CROVARA, BICE, 1996; « Explotación sexual de niñas y jóvenes en America latina. Una reflexión en el camino. » BICE booklets; « Enfants et prostitution. Ne me laissez pas tomber », Florence BRUCE, BICE booklets, 1996 (English and French); « A right to Happiness. Approaches to the Prevention and Psycho-social Recovery of Child Victims of Commercial Sexual Exploitation » (dir. BICE) for the NGO Group on the Convention on the Rights of the Child, 1996.

Annex II - BICE partner organisations for the 2015-2017 programme on child sexual abuse

AFRICA: Dignité et Droits pour les Enfants en Côte d'Ivoire - DDE-CI (Abidjan, Côte d'Ivoire), Bureau National Catholique de l'Enfance du Mali, (Bamako, Mali), and Bureau National Catholique de l'Enfance du Togo, (Lomé, Togo).

LATIN AMERICA: Opción-por los derechos de niñas y niños (Santiago, Chile), Vicaría Pastoral y Social de los Trabajadores (Santiago, Chile), Paicabi-Corporación de Promoción y Apoyo a la Infancia (Viña del Mar, Chile), Mesa pro BICE – Chile (Santiago, Chile), Oficina de Derechos Humanos del Arzobispado de Guatemala (Ciudad de Guatemala, Guatemala), Base Educativa y Comunitaria de Apoyo (Asunción, Paraguay), Centro de Desarrollo y Asesoría Psicosocial (Lima, Peru), Centro de Estudios Sociales y Publicaciones (Lima, Peru), Centro Cultural Poveda (Santo Domingo, Dominican Republic), Red BICE Argentina (Buenos Aires, Argentina), et Juventud para Cristo (Montevideo, Uruguay).

ASIA: Opération Enfants du Cambodge (Sihanoukville, Cambodia).

EASTERN EUROPE - COMMUNITY OF INDEPENDENT STATES Arevamanuk (Gumri, Armenia), Public Health Foundation of Georgia (Tbilisi, Georgia), Social rehabilitation Center "Otradnoïe" (Moscow, Russia), Caritas SPB (Saint-Petersburg, Russia), Doctors to Children (Saint-Petersburg, Russia), Civic Initiative (Zlatooust, Russia), Children Support Centre (Vilnius, Lithuania), Nobody's Children Foundation (Warsaw, Poland), Save the Children (Bucharest, Romania), Women's Consortium of Ukraine (Kiev, Ukraine).

WESTERN EUROPE La Voix de l'Enfant (Paris, France), Centre des Buttes Chaumont (Paris, France), Accompagnement Lieu d'Accueil (Nice, France), Association Interprofessionnelle de Soins et de Prévention des Abus Sexuels (Saint-Etienne, France).

Annex III. Non-exhaustive bibliography of publications associated with BICE and relating to resilience

See Bice booklets on resilience « Construire la bientraitance pour un monde sans violence, Guide d'activités pour les enfants et adolescents », BICE, Paris 2014; VANISTENDAEL Stefan,

« Resilience and Spirituality », Geneva, 2nd edition. 2012; VANISTENDAEL Stefan, « The rights of the child and resilience – Two mutually enriching approaches », BICE, Brussels 2009. Refer to VANISTENDAEL Stefan, *Resiliencia: el reto del cambio de mirada* in « Nuevas miradas sobre la resiliencia, Ampliando ambitos y practicas », (Dir. José Maria Madariaga), Gedisa, Barcelona 2014, pp. 53-67; VANISTENDAEL Stefan, *Resilience and Spirituality* in « Resilience in Palliative Care, Achievement in Adversity », (Dir. Barbara Monroe et David Oliviere), Oxford University Press 2007, pp.115-135; VANISTENDAEL Stefan, « Growth in the muddle of life – Resilience: Building on people’s strengths », BICE, Geneva, 4th edition. 2006; VANISTENDAEL Stefan and LECOMTE Jacques, *Découvrir et créer du sens. Une composante essentielle du processus de résilience* in « Enfance Majuscule », September-December 2003, pp.14-17; VANISTENDAEL Stefan, *Humour et résilience: le sourire qui fait vivre* in « Impasses, ratages, échecs. Sources de créativité pour les pratiques systémiques et travail social », (Dir. Julier Claude Roger, Amiguet Olivier), IES, Geneva 2003, pp.75-99; VANISTENDAEL Stefan, *La résilience au quotidien* in « La résilience: résister et se construire », (Dir. Michel Manciaux), Médecine et Hygiène, Geneva 2001, pp. 179-187; VANISTENDAEL Stefan et LECOMTE Jacques, « Le bonheur est toujours possible, Construire la résilience », Bayard, Paris 2000; « Voces en acción, 4 Expériences de Bientraitance Promotion des Droits et Prévention de la Violence Sexuelle », BICE, Brussels 2008.