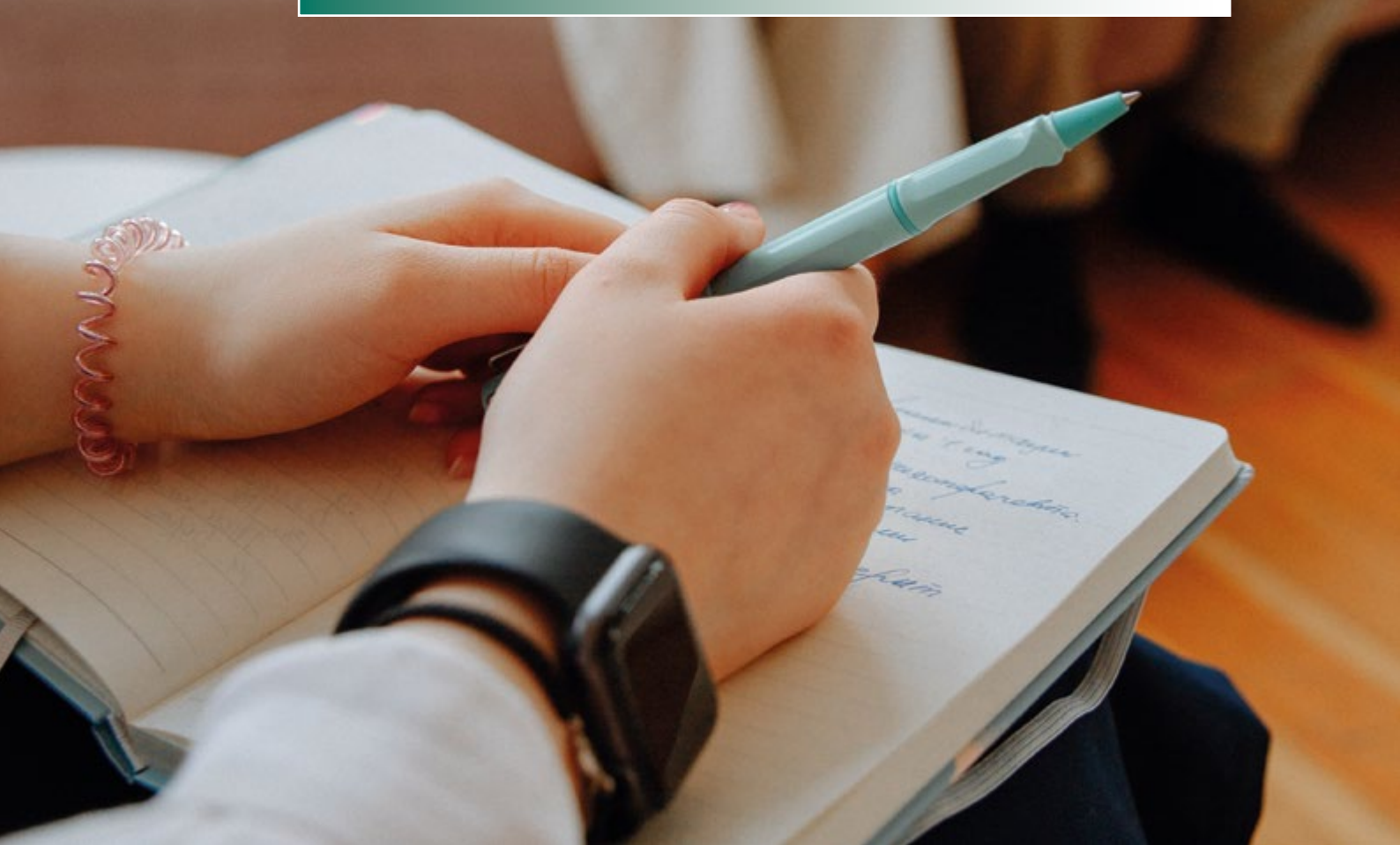


Learning from the Experts: Young people's views on their mental health and emotional wellbeing needs following sexual abuse in adolescence

Briefing paper, March 2021



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Photo by Tansy Trivitt
AYPH photography competition winner 16-19 category

“ Yeah, I was blaming myself and then people were coming up saying, ‘You wanted it, you did this, you did that’, so it was making me feel more, ‘Maybe it was my fault’. ”

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Why was this research needed?

There is a recognised gap in knowledge and understanding about how the mental health and emotional wellbeing of young people are affected by experiences of sexual abuse during adolescence. By sexual abuse we mean contact- and non-contact activities, online-facilitated abuse, abuse inside and outside the family, and abuse by adults and other young people.

The unique nature of adolescence means that young people experiencing sexual abuse in this phase of life may have different needs to younger children or adults. We need to know better – from them – about what these are and find ways of helping that are sensitive to the impacts of sexual abuse in this life stage and the demands of their everyday lives.

This briefing shares some of the key messages that young people who took part in our participatory research told us about their mental health and emotional wellbeing needs following sexual abuse in adolescence.

“ ...it was a big impact on my exams, I didn't get no GCSEs or anything, I was in the exam but because my mind was so full up on that I didn't have time to revise, I didn't have time to worry about GCSE's or a piece of paper. ”

How we did the research

The research was led by the University of Bedfordshire's Safer Young Lives Research Centre, in partnership with the Association for Young People's Health. Participation of young people with lived experience was at the heart of the research. This was supplemented by a [literature review](#), and contributions from professionals working in the field and a small number of parents.

In this briefing, we are focusing on the contributions of the 31 young people who took part in the research. Of these, 26 took part in workshops and eight took part in in-depth individual interviews (some doing both). Young people's participation was undertaken in partnership with ten child sexual abuse services across England, Wales and Northern Ireland.

The research adopted a collaborative approach to producing knowledge and recommendations with participants. It was underpinned by key principles including maximising participant choice and control, trauma informed practice, promoting inclusion, and accountability and transparency to stakeholders. Data were analysed using grounded theory and thematic analysis techniques. The research was supported by a professional advisory group and by the involvement of four young expert advisors – all members of the Young Researchers' Advisory Panel (YRAP) at the University of Bedfordshire.

Adolescence – a context and an opportunity

We know, from the child development field, that adolescence is a time of transition, change and possibility. Although it is often categorised as a challenging period, it is also a key time for developing identity, agency and purpose. It is a time of searching, creativity and energy. Most of all adolescence is a time of potential.

Our research highlights that an experience of sexual abuse can have particular repercussions for adolescents, such as on emerging sexual identity. Understanding the intersection of

adolescent development and sexual abuse trauma can help services and professionals to appreciate what young people are going through, and why they might respond the ways they do. It can also help us to develop more appropriate means of supporting them to navigate these impacts and challenges.

“...but teenagers, they cope on their own, they cope in different ways, they do things different ways.”

Headline findings

The young people in our research shared powerful messages about how they viewed their challenges, their experiences of services and support, and how they felt things could be improved. We outline some of these key messages below:

The language of mental health and wellbeing

In many cases young people were ambivalent about the term ‘mental health’, although there was no agreement on their preferred terminology. Many of the young people associated the term ‘mental health’ with stigma and judgement while also recognising it as a useful label that supported their access to resources and support. The term ‘emotional wellbeing’ was more readily understood by the young people as reflecting their day to day feelings.

“There's so many bullies and if you say mental health, you'll get the Mick taken out of you basically... or even talk about mental health, you get picked on for that, because they all know that's your weak spot.”

Coping after sexual abuse in adolescence

Although everyone is different, many of our participants reported that their experiences of abuse were characterised by feelings of confusion, shame, self-blame, fear and worry, withdrawal and isolation. The adolescent life stage colours this in distinctive ways. For

example, developing sexuality led to some uncertainty about what behaviours are normal or abusive. Young people also told us they felt blamed by others for the abuse. They shared the challenges of processing and coping with their experiences alongside changing self-identity and other social and learning pressures at school and in relationships with friends and families.

The young people who participated in our research processed and managed their experiences in a range of ways, developing strategies to protect themselves from further harm. They did not always feel ready to seek support straight away, and reported periods of coping alone before the identification or disclosure of abuse. Coping on their own was experienced as particularly isolating.

The coping strategies that participants shared may not always appear adaptive, and may look different to those of younger children or adults. Young people in our research acknowledged that self-harm, substance misuse and avoidance of certain people, places and activities may put them at risk, but these were seen to be valid trade-offs that prioritised their physical and emotional safety in the short term. Self-excluding from school and missing exams, for some of the young people, felt essential for preserving their mental health and wellbeing. Young people said, however, that having support helped them and that their coping processes changed over time.

Challenges posed by different contexts

“My friends started falling out with me and I didn’t tell my parents so it was just me on my own, nobody really knew my story, so nobody really helped me. I just wish someone had been, ‘Oh, are you okay?’ It’s awful.”³⁹

Young people operate in a number of different spheres – family, friends, school, other services and the broader community. As they age, the relationships they have with these different spheres and how the domains intersect can impact on their mental health and wellbeing in distinct ways, particularly if they are coping with experiences of sexual abuse:

- **Family matters:** Young people told us that families can be an important source of help and a gateway to services, but also that family relationships could affect their mental health and wellbeing. They suggested that family conflict could increase as they sought independence and spent time with their peers. Some described how parental responses to disclosure such as disbelief, minimisation and active silencing had negative impacts. Parent’s attempts to protect, although well meant, were experienced by some as punitive, contributing to their self-blame. Other young people described increased anxiety associated with worrying about how their experiences of abuse might impact on their parents and carers. As a result, some young people consciously and protectively withheld information. They also reported that family breakdown following identification or disclosure of abuse could compound their mental health and emotional wellbeing needs following their trauma.
- **Peers and friends are central:** Young people told us that friends can be a critical source of support for their mental health and wellbeing after sexual abuse. They talked about how friends can provide a safe space, distraction, ‘normality’, and positive emotional support, yet they felt that the professionals supporting them did not always recognise this. They emphasised that recognising the importance of their friends and peers should be an essential component of support. However, participants also told us that friends may pose a risk to their wellbeing by betraying confidence around the abuse or responding negatively. Young people also reflected on the ways in which sexual abuse in adolescence could raise particular concerns around romantic relationships, and highlighted their need for more support to help them navigate physical intimacy after abuse.
- **Schools are important contexts for support:** Young people told us about the significant impacts that sexual abuse could have on their school-life. Experiences of sexual abuse during the secondary school years was noted to affect their concentration, focus and motivation in school and attendance. Compounding this were the experiences some young people had of bullying and social isolation as a result of the abuse becoming known within the school community. These experiences meant that some young people stopped engaging in school-related activities and exams. The support young people received from schools in relation to their mental health and emotional wellbeing needs, particularly through school counselling, was acknowledged to be limited, and they recognised that schools could not holistically support them. They stressed that schools could support them better by identifying their mental health and emotional wellbeing needs, and in signposting to support beyond the school boundaries.
- **No one support service can meet all young people’s needs:** The young people’s accounts suggested that they need holistic support that cannot be provided comprehensively by one service alone. For example, while more serious mental health needs may be addressed by Child and Adolescent Mental Health Services (CAMHS), they felt that wider emotional wellbeing needs may need input from other specialist support services and more universal services such as schools. Young people told us about the importance of being able to seek support without always relying on their parents to access it. They particularly regarded specialist support services positively, as support was felt to

be bespoke and young-person centred, with recognition of their growing independence and agency.

- **Criminal justice processes are particularly difficult:** Although some positive experiences with the criminal justice system were shared by the young people, contact with the police and accounts of court proceedings following abuse were

overwhelmingly negative. Young people told us that these interactions could be particularly stressful in adolescence, occurring alongside wider developmental changes, and a busy school and social life. They also described their encounters as feeling judgemental and insensitive, contributing to their fear, anxiety, anger and self-blame.

Conclusions and next steps

Our focus was on the mental health and emotional wellbeing impacts and needs of young people who experience sexual abuse in adolescence, considering the many and complex ways in which these are impacted across the different spheres of their lives. Young people shared a rich and complex picture with us. Woven throughout participants' narratives was an emphasis on understanding how being an adolescent requires a particular lens. Without understanding the complexity of the life stage, the impacts, reactions and support needs

following abuse cannot be addressed properly. To get this right, and to help young people achieve the best possible outcomes, we need to see their experiences, needs and challenges through their eyes.

We hope that the findings of this research, and the outputs that will follow this initial briefing, will help us to do this. Forthcoming outputs include practical resources for young people, parents/carers and professionals being co-developed with young people, and a full research report.

With many thanks to the young people, parents and professionals who took part in and supported the research, to the NSPCC and ESRC for funding the work, and to the NSPCC for reviewing an earlier draft.

More information

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