

# Introduction

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This case concerns the sexual abuse of Olivia, who was 12 years old when the first incident of sexual abuse by her mother's male partner became known. The initial disclosure was for sexual touching. An initial child protection investigation proved to be inconclusive and there was no corroborative evidence to support the allegation made by Olivia.

Four months later Olivia made another disclosure to her grandmother that there had been further incidents of sexual abuse by mother's partner. These allegations included being asked to watch pornography, mutual sexual touching, and penetration.

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## Context

The case raises serious issues regarding the investigation of child sexual abuse, the assessment of risk, the management of risky adults within the community and how children are "heard" and protected when they make a disclosure.

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Multi-agency strategy meetings should be held in cases of suspected Child Sexual Abuse and chaired by an experienced children's Social Care team manager.

Any recording related to disclosure, case recording and reports should include verbatim report of what the child said, including any explicit and graphic language.

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## Good Practice

Mother and grandfather were able to reflect on what they felt was good practice. This included support by the Police throughout the whole criminal court proceedings including preparation for attending court, meeting the judge and on-going liaison during and after the trial itself. The family felt they were kept very well informed throughout and staff were sensitive to Olivia's needs

### Outcome

All proceedings have now been concluded and a criminal trial resulted in the perpetrator received a 13 years' custodial sentence.

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## 'Olivia' Serious Case Review

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## Learning

The provision of post-abuse support should be reviewed and a multi-agency pathway for referral agreed

## Additional Issues

Children's Social Care (CSC) should ensure that families are given the information required to understand any social work intervention.

All agencies must ensure that listening to, and hearing what children say is important, particularly when they have been in unsafe or uncertain situations or they have learning or other disability, where their ability to express themselves is often compromised.

## Medical examinations

5 Describing the results of medical examinations as "inconclusive" or "neutral" is technically correct; the literal meaning is that it is not possible to reach an exact diagnosis or an inability to confirm or deny what was being tested for. In the context of sexual abuse, (particularly when written in a report and not explained) there is a risk that the absence of a definite finding could be taken as 'evidence' that alleged abuse did not occur.

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## Key Lessons

Intra-familial child sexual abuse is still likely to be the most common form of sexual abuse that professionals will encounter

Verbal disclosure by the child is one aspect of the investigation of sexual abuse. The child may not disclose in an ABE interview, or have supporting forensic evidence. This may affect the action, which can be taken at that time, however, it should not negate the belief that the child may have been abused and still requires protection.

