

Part 2

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1. I went through something similar as a child and I'm fine, how come my child is struggling so badly_

Kia ora, my name is Sam McGibbon and I am a child psychologist. I work with children and adolescents who have experienced sexual harm. Kia ora, I'm Catherine Gallagher and I'm the clinical practice manager at START, where Sam works, and we support children, youth and adults who have experienced sexual harm. Kia ora, I'm Liz Riley and I work at Manaaki Mental Health and Wellbeing Support in primary schools. And Catherine and Sam, last time we met, we identified that there were a number of other questions that would be of interest to our audience, so this is our part two of sexual harm. Okay, so I dare say in your practice you often hear from parents, you know, I experienced something similar, so why is my child struggling?

Is that something that you come across? And how would you respond to a parent that thinks that? Yeah, a little bit. I guess, and we may have touched on this in our other discussions, Liz, but it's the idea of everyone's experience is unique. And so even though we may have had our own experience of sexual harm in our childhood or in our adulthood, that a lot of the circumstances could be quite different. So not only could the circumstances be... different, and that might be the age or the stage or the context or the background or who it was who did the harm. Also, it's not just about the context, but who you are as an individual and how you would typically manage stress if you were more of a kind of resilient type of person, as opposed to being really sensitive in nature.

Mm-hmm. And not being, you know, as robust, let's say. So we don't really want to judge our children's experiences based on our own, because we're really not then going to be tuning in to just exactly what they might be going through. Yeah. Okay. How did you know?

Yeah, I mean, I agree, and I think that individual difference is so important. And I think also... Yeah. Yeah. It can be really important to, I suppose, take a moment and think about that statement, because for a lot of us, we might not show symptoms, not because we don't have symptoms, but because there was no space for us to express those thoughts and fears and worries.

We might have got in trouble. We might have been too scared. The messaging might have been that we just don't talk about it, and so best to sort of shove it down and not to think about it. That doesn't mean that we weren't impacted. So I think for a lot of the parents that we see, and sexual harm is really common, scarily common. And so we have a lot of people coming through our organization who, you know, either one or both parents or extended family have experienced sexual harm. And so, again, that idea that I'm fine, I never talked about it, again, doesn't mean that that isn't the case. You might be fine.

But you might also not be. And the idea that I'm around my child's distress, which might activate things in me that I've never had the chance to truly kind of understand and work through, might make me really uncomfortable. So, in fact, I want my child to be fine, but kind of get on with it. Whereas if they're actually in a healthy way, having the feelings they need to have, being upset and messy because they need to be, then if I've got my tightly held kind of history, that might be making me uncomfortable. Yeah. It might be really activating for me. And so there can be those other motives that go in there as well.

And just picking up on, you know, you used that word resilience, and I think we've made references before, you know, it can sometimes be the strongest amongst us who get the messiest. So it doesn't always mean that if we're strong, we don't get messy. Sometimes it requires a lot of bravery to show our feelings. And so, you know, it's important that if people are showing lots of feeling, it doesn't always mean that we're strong. Again, the individual difference is so important to create space for that young person to be who they need to be.

2. Why didn't my child tell me what was happening_

What advice would you give to parents who say, why didn't my child tell me this was happening? Lots of reasons, aren't there? Lots of, yeah. And that's a really common statement, and I think, you know, this is a really hard thing to talk about, and so there are lots of reasons why young people, or people of all ages, don't talk about this. Some research has been done that shows, in New Zealand it says it's on average 16 years between something happening and people telling, and that means some people never tell, some people tell straight away, and some people, you know, varying degrees for lots of different reasons, you know, tell at different stages.

Often the person who's hurt them, as we talked about, will be someone they know, and so the fact that I spend time at grandmas or grandads or aunties or uncles or family friends, and mum and dad know I'm here, and the fact that this person does this harm to me, is it kind of known? Do mum and dad already know? And maybe it's okay? Now, of course, it's not known, but, you know, if I've got my hand in the cookie jar down the other end of the house, and mum yells out and says, oi, you know, wait for dinner, how does she not know that Uncle Johnny's got his hand out my pants? So there's that real mismatch for a little brain to go, you know, mum and dad or whoever the significant adults are seem to be all-seeing and all-knowing, how could they not know?

Sometimes also young people might think they're told, you know, they might not have said, you know, Aunt Mary's done this, but they might say, I don't really like Aunt Mary, and they think they're saying, I don't like her because, whereas, you know, we as the busy parent might go, oh, look, you know, we're all different, and don't be rude, you know, Aunt Mary's had a hard life, and, you know, we always go to kind of, you know, we're all different, and don't be rude. You know, Aunt Mary's had a hard life, and, you know, we always go to kind of, you know, because that's what families do. So in that moment, you might have a little person who thinks they're told, and you've got a parent who thinks, come on, you know, we're family, you know, you didn't tell me anything that isn't just about Aunt Mary being annoying.

Yeah, so there can be those breakdowns in communication. Kids cannot know it's wrong, you know, because in fact, they have had, maybe some of the experience was even nice. You know, or if I've grown up with this experience, and this person is telling me it's normal, and it's okay, it might not be till down the track that I work out that actually that was yucky, and I didn't like it happening, and I even knew what it was. Some kids don't want to hurt their parents' feelings, you know, that if I say this, then it's going to really upset, or mum might get angry, or dad might get upset, or I might be in trouble.

Because that's another thing, is if I was ever told by the person, you know, that I was the person who hurt me, or just my own belief, that this is such a yucky thing, and if I tell someone, then I might get in trouble, or blamed, or not believed. You know, so there's a lot of those reasons why, and it's probably more normal than not that kids might find someone else to tell, you know, or if they do tell, I might tell them bits. Would you add anything to that, Sam? Yeah. I'm thinking that sometimes. Yeah. Sometimes children can be threatened. That, you know, they're not allowed to tell. They could even be threatened with violence, or that, you know, your parents are going to be taken away from you, or your parents are going to go to jail because this has happened, or I'm going to go to jail.

So again, sort of using that special relationship, potentially, if that's been built up in a grooming process. I think they can be fearful of, you know, that then they're going to cause this huge thing to happen, and if it's within family, you know, it will be, oh, Dad could be sent to prison, or Mum. Or maybe, you know, Mum and Dad are, or Mum and Stepdad are having a lot of issues at the moment. Mum's actually not that well. I don't want to add burden here by sharing this. Maybe it's ended. I'm just not going to, you know, the sexual harm might have ended. I'm just not going to.

3. Helping children who blame themselves – “it was my fault”

And for children who blame themselves for it, what would you say? Well, I guess that's going to be part of the work. Hopefully they have been able to disclose and their parent has facilitated therapeutic support for them. That's a big part of the work that we would do to help them to understand that none of it was their fault and that the one person that we're going to lay the responsibility at their feet is the person who did the harm. And that is also a message I guess we want parents to know as well, is that if the child does disclose that straight away that they're believed and that they're praised for their bravery in coming forward and sharing that really sensitive piece of information, and also importantly that it's this person who's harmed them, it was their choice, it was their responsibility, it's always going to be their responsibility.

And one thing I'd add there is that often, as Sam's saying, it's so important for the young person to know it was not their fault. One of the risks is that in our desire to want to say, no, no, it was not your fault, that if a young person is brave, or actually any person who's experienced sexual harm, is brave enough to go, look, I feel like it's my fault, I feel guilty, why didn't I stop it, why didn't I, you know, all those sorts of things. That if we jump too quickly to the, it's not your fault, then the risk is we're actually saying to them that their thoughts or feelings aren't valid. And so, you know, really important for parents, even though you sit there and think, oh no, it's not their fault, to go, wow, it's a really big thing you're sitting with, hey, that you've been feeling responsible.

It makes so much sense that you might, I agree with you, hey, especially what was said or what was done, but you know, hey, that it was so-and-so's fault. So that we don't jump to the negating or the kind of telling them what it is. We take a moment to just slow down and just sit and hear the enormity, because if I'm sitting with shame, and if I'm sitting with guilt, then to have that ignored or told off for it almost, runs the risk of me not feeling seen. So we don't stay in that. We don't stay in that blaming place, but we acknowledge it because developmentally, little people tend to see the world as being, you know, themselves at the centre of the world.

And if good things happen, great. But if bad things happen, it's also probably my fault too. So it's actually pretty normal for them to feel a little bit of responsibility. That's the bit we want to challenge and help them understand differently. They didn't, as we'd said in the very first talk on trauma, we often don't do things to help keep us safe because our nervous system, doesn't need us, or it's got its own script. It's telling yourself to keep yourself safe by keeping this person who's hurting me sweet, or to stay still, or to keep it quiet. That's how your nervous system is telling you to keep safe.

But that's the bit that's a little less easy to understand afterwards to go, well, why didn't I talk? And I think that, yeah, that shame and guilt can be built up over quite a period of time, can't it? So it's not something that can be easily overcome. It's not something that can be easily, it can be some of the hardest feelings to work with, I think, when you're working with young people in adolescence, yeah. I bet it is, because just to add on to that, weirdly, well, not weirdly, beautifully weirdly, the way our brains work, is that we want to make sense of stuff. And so the idea that someone I love has hurt me, or a person I love has hurt me, I don't know.

Or a random person, certainly, which again, we see is very, very uncommon. It's almost more confusing and puzzling to a little person. Like, why would they pick me? You know, and why would this happen? So our little brains can go, well, it must be to do with me. And if I can find an explanation that says, well, it must be because of me, then even though that's a really negative explanation, it's a little bit safer, because then I can still love that person. Or I can still know that people in my world love me or are kind of okay people, because if I can blame me, then I'm the one that was at fault.

Does that kind of make sense? That, you know, so that our own way of making sense of the world can work against us in these situations and make guilt and shame more likely. Yeah. And just adding on to that too, because with younger children, if it is a caregiver who is harming them, and they've got to choose between making, they've got to choose for them, based on their very survival, they're always going to choose to think well of the parent and caregiver, because they can't survive without them. So it's better for them to rather think badly of this person who's harming them, who may be a caregiver, an attached, strong attachment figure.

They're going to find out a reason why there's something wrong with them, and that they are bad, and that there's something wrong with you because that kind of explains it yeah

4. I want to talk about the abuse and check in on how my child is doing, I don't want to upset

them_

So as a parent, I want to talk about the abuse and check in with my child. But am I going to cause more upset by doing that? Am I going to cause more damage? Well, I think let's separate those two things out, damage versus upset. You might cause some upset because, actually, this is an upsetting topic. But damage, that's a different thing. You know, we would actually say, or I would say that, you know, to let the young person know that this is a topic that we can talk about. We often talk about drop and run, you know, to sort of say, hey, look, you know, I'm just checking in, you know, just know you can say what you need to say to me, or model the fact that if they have tried a few things to say that you handle it well and you can hear it well, you know, that that's all money in the bank as far as that child's trust, that these are things that can be talked about.

That if you notice the child being out of sorts or distressed or, you know, to kind of check in and make sure they're okay, to say, hello, we haven't mentioned this for a while, just so you know, you know, I think about it too. So find some ins, you can bring it up. And it might cause upset, but that upset might be really necessary because, like any wound, you know, we need to kind of pay attention to it and think about it. We might even need to clean it out a little bit, and that might hurt because if we just cover it over, then, you know, that's confessed in. The damage bit might be if we pursue it for our own kind of anxiety and distress.

So if we're not reading the child's cues and if we sort of say, hey, look, let's talk about it, and the child goes, oh, you know, stop it. And we go, no, no, come on. We need to talk about it. Does that make, you know, so if we're being forceful about it because we're anxious or we're being, we're kind of, we get really upset about it or the way in which we talk about it is overriding the child's messages to us, then that can maybe cause a bit of harm because if we think about sexual harm, it's that someone invaded my boundaries. And we've got to be really careful when we kind of are unpacking the stuff that we're doing it carefully and respectfully and at the child's pace.

And it might be, again, if your child's in therapy, that your role as parent is less about the detail and more about just saying, hey, as mum or as dad or as auntie or uncle or whoever is their significant adult, I'm here to talk about whatever you want to talk about. And you can kind of rely on the fact that in therapy they can talk about the more nitty-gritty, if that's what they're comfortable doing, or you talk to the therapist about ways in which to bring it up or if it is. How do we talk about it safely for both of us? And you can get some clues from the therapist around that. Sounds like lots of empathy was required.

5. Do we tell other people about what has happened_

So what do we tell other people about what has happened, or do we tell other people about what's happened? I think that we actually covered this in our first talk about trauma, there was, we did cover this at length, and I think perhaps even more importantly with this topic with sexual abuse, we are needing to think about, you know, this is really sensitive information and be mindful of our child or our adolescent's voice and who they might want to share and what they might want to share, particularly with an adolescent, but then also thinking about what's in the best interest of the child and who might need to know so that the child can be receiving enough appropriate sort of support and empathy and understanding and compassion.

For example, with primary school age children in particular, I'd say that if they're struggling in the school environment, it would be really helpful to share just enough with the relevant teacher, perhaps a SENCO, somebody in a pastoral care role, so that some allowances or some extra supports can be put in place for the child. At school, when they're needing, you know, a little bit of time out or they're needing a little bit of extra kind of nurturance in those moments where they might be struggling with big feelings. Because it is a tough one to know, you know, who's, you know, we've certainly had situations where kids, for example, have told everybody, you know, this is what happened or, you know, some parents have wanted to get that support on board and as Sam was saying, we want to be careful.

We want to be careful and respectful, you know, about what that child might need as opposed to who wants to know. It's kind of who needs to know. But I'm not sure if we've discussed this before, but, you know, again, for those children to work out, well, who are safe people to tell? Because it might be that they want to tell their best friend or their group of friends. But again, you know, next week they might not be friends anymore or these kids might go, oh, too much information. So again, part of the work can be... I can see you want to tell your friends. Well, how can we tell them? Well, how can we tell them enough that they kind of know you've been through a really tough time, but we're not telling them too much that, in fact, that's your private information?

Because that line between what's your private information and what's shameful information, we want to be really careful to say, this isn't your shame. You know, and it's tough. I mean, even grown-ups find it hard to know, how much do I disclose versus how much do I hold back? And it's a hard thing for the only ones to traverse. Yeah. Yeah. And also cases of adolescents where, you know, they have genuinely been quite distressed by the fact that their parent might be telling all of their friends as a way, you know, to seek to gain support for themselves, when the adolescent's like, hey, you know, that's my private business and you're just telling everybody about it.

I think that can actually cause quite a bit of harm within the parent-child relationship too. So just remembering that. I think especially with adolescents, to seek their, you know, have a discussion about it, and who would it feel right for me as your mum or your dad to be able to talk, you know, to be able to share that with, if I, you know, if I really felt that I needed to. Yes. And it might be a, it might be a, you know, an auntie or an uncle or someone that they trust and they might say, oh yeah, that's okay, you can, you can. And I think in some cases.

Just, just adding on to that, if you're as the adult feeling like you need to talk to someone, it would be important not to give all of the control over to the child or the uncle or someone adolescent, because I think if you said, is it okay, and the adolescent quite rightly might say no, then you kind of show yourself, you know, whereas if you go, hey, I need to have some places to put this, because I want to be the best mum I can be to support you. So I need to be able to tell, you know, someone, so I'm thinking I could tell this person or this person, which one would you feel more comfortable with me telling, or I need to tell my best friend, because for me to be, you know, doing what I need to do for you.

So, so that makes sense. So, so sometimes that idea of if the child is resistant, the parent might have to go, look, actually, you know, this is about your wellbeing, because I need to be well. So, you know, there can be, but you are doing it transparently, you're letting the young person know.

6. What do I do if it's my other child who has hurt their sibling_

so what advice would you give if it is one of your siblings who has harmed another sibling that's a tough one hey it's really difficult you know um you know because i think that within families um you know and it's not uncommon um because if we're thinking about you know some of the things we talked about around access and around relationship and around all those sorts of things um you know sometimes those relationships can be um have all of those factors there um i suppose the biggest thing is that everybody gets support and you know and you most of all you know to be able to just sit alongside have people sit alongside you to go you know this is really tough and how do we make sure the one who did the harm is safe um and is getting the the resourcing and the intervention that they need but the person who has um been harmed is also given space and time because one of the challenges which i think we might have talked about in other contexts is that there can be this desire to go okay let's move on from it you know we're all good we've acknowledged it um let's get the family back together or let's you know um kind of you know smooth the way and if the person who's been harmed picks up on that message and says oh okay okay yep no i'm all good now they really haven't been given that space and time they haven't given that space and time they haven't given that space and time to really work out what they think and feel about this stuff so you know certainly start's position wouldn't be about um additional punishment for the person who's done the harm because actually they you know need support they need understanding and there's really good interventions um which i think the you know you've had stock come and talk on on the um listening to families so you know i think you know there's some really good ways to support safe behavior but i think that um you know we have a stance that while young people are in engaging those who've experienced harm are engaging in therapy that there needs to actually be no contact with the person that's hurt them and that's that's about just saying how do we slow it down how do we create space how do we get the adults taking responsibility for this so the young person who's been harmed just gets a chance to look at how they feel because there's a difference between physical safety they may not do that again and emotional safety which is they may not be harming me in that way but actually they're doing it for me and i think that's a really good point this is still someone who has harmed me and how do i learn to trust that i'm safe and i think this can be a really big challenge for parents when we're actually stipulating um that no contact rule while um the young person's engaged in therapy certainly at the you know in the first part of therapy and for as long as that might take for them to be able to feel safe again in the presence of their the person that harmed them um but that that is what we're asking is for is perhaps the the sibling that did the harm to be going in and and staying at grandma's or grandpa's for a while um to provide that time and space but it can be it can be really difficult certainly acc who are the main funders of support don't have that criteria other um clinicians might not have that same criteria so if you are in that situation where it is a sibling situation or a close family situation we would absolutely recommend that um it's not just your eyes on this families can kind of go oh let's keep it in-house there's so much shame and i get that but um this is about long-term well-being and long-term healthy relationships and so if it's if it's kind of driven under the carpet um then you know you might have short-term peace but actually there's harm and potentially since it's a long-term well-being situation it's like significant harm brewing um and so you know to be brave enough to tell and so that that people get to have a look at well why why what happened and there are agencies like stop and start which again might in the short term from really difficult and exposing and here's our family being laid there but hopefully the experience would be that it's done with respect and care so that that in the shortest time you get to come back together and be safe and i think that if you are you know in those situations um you know to come along and have a consult to talk through those options to find out what steps are ahead of you certainly there are other acc providers who as i said before may not have that same criteria um so you can still get help um but yeah our starts would be you know yeah safety has to be really key or good and exposing um you've got a bigger game here and this is just as an aside too but um just on the topic of siblings and thinking about um that you know where a sibling has been harmed and you're the non-abusing sibling but you get caught up in this situation where someone where your sibling has been harmed perhaps by someone in the family perhaps by an adult or perhaps by someone outside

of the family and um and there's been some really interesting very recent research come out about how siblings of those other children in the family who have been harmed can be impacted really significantly when when the situation happens in the family and they can in fact feel their own significant anger sadness confusion and depending on how it rolls in the family and how openly it's talked about or not they can also be feeling left feeling isolated and and kind of a sense that it's something they're not able to talk about or kind of get shut down and so it's really interesting to think about certainly I think at start we we really try to have all the fun approach and we with the ACC model of care we talked about this that ACC does provide funded sessions for whānau and if we're thinking about the whole of the family then I don't see any reason why siblings can't be involved in some way shape or form in that work too because we we're talking about another child who's who's hasn't been harmed themselves but is is part of what might be the fallout especially if it's another adult in the you know it's an adult in the family who's done harm and then that person is removed from the family so I think it's interesting to think about and not forget about non-abusing siblings

7. How do I cope with other people's strong reactions to what has happened _

So for parents, what advice would you give to them about coping with other people's strong reactions or views of sexual harm? That's a good one. Take a deep breath. Yeah. And I'm thinking maybe other people in the family or extended family. Yes, yes. And could be outside of the family as well. But I think, I imagine that the views and opinions and potential judgments that come from other members of extended family can be really tough to deal with and really painful and cause a lot of, it's kind of this layering effect, isn't it? There's the sexual harm and then there's the aftermath of the sexual harm that can just be more layers of trauma, potentially.

And so it is a really, really difficult thing for a lot of families. And I think that it's a time where you really, as a parent, have to seek out who you can actually get support from. And it's kind of like coming into that protective mode, isn't it, as the parent? Not only to protect your child from people who maybe just don't quite get it yet or they don't get it yet. Yeah. Or they have a different version of the truth or they're not ready, they're not kind of up to speed with where you're at or with what your child's just disclosed. And so first and foremost, being able to protect your child as much as possible from unhelpful and potentially harmful reactions from other members of the family or even from other people outside of the family.

And then, of course, to be able to protect yourself because, once again, as Catherine said before, what your child needs most is for you to be well and be well-resourced and to be in the best sort of headspace to be able to, you know, to be as resourced as possible because that's what you're going to need to be able to move forward and to keep going and, you know, to be moving into this journey of healing, I guess, together. As a family. Mm. And I think, you know, part of that supporting your child is to give an explanation. And, you know, it may not be, again, the degree to which you're explaining might be, oh, well, this person's got their history and that's why they're reacting this way.

But it might just be, whoa, you know, actually, you know, granddad had a really big reaction, hey, that must have been pretty scary. And, you know, that's not because he doesn't love you. You know, that's because maybe granddad doesn't understand. So we're working with granddad to help him understand, you know, so, and it's for ourselves as well. If we have a big reaction or overreact or underreact, you know, we can give that rupture and repair. We can do it kind of on behalf of other people so that we're kind of translating what the young person might see and experience in a way that feels a bit more palatable.

Because have no doubt, the child will be blaming themselves anyway. So if you can kind of get in there and go, hey, that wasn't about you, hey, you know, auntie just doesn't understand. And, you know. That's actually not your fault. And I'm pretty grumpy at auntie, actually, because she should have thought about what she said, because this is what I know to be true. You know, those kinds of things can give the child the experience of knowing who's got their back. And that some people might just take a little bit longer. But some people might not have their back. And that's actually probably quite an important lesson for them to learn too, is actually, this person can't be relied upon.

And that's sad, but it's probably true at the moment. So these are the people who are in your safe circle.

8. How can I teach my child to have the right amount of trust in people _

And another really tough role for parents after an incident like this would be teaching them to rebuild trust in adults. What would your advice be around that, that not all adults are unsafe? Yeah, I think we did talk about this a little bit last time too. I think there's, you know, it's that balancing act, isn't it? Because I think as parents too, we might go into that kind of overprotective drive of not wanting to actually... If you're working in a sexual violence space, you can sit there and think, how safe is the world? Yeah. Yeah. Because we know, as Catherine said, I don't think we've actually talked about the actual prevalence, but in New Zealand it's one in three females will be harmed by the time they're 18.

And is it one in six boys? That we know of? Yeah, that we know of. Yeah. Yeah. Yeah. Yeah. Yeah. Yeah. Yeah. And of course, well, I think they're the estimates, aren't they? Because again, we know that most children don't disclose. So it's really, really prevalent. Big numbers. And so, I mean, it's understandable, especially if this has happened to a child, that you would be thinking, well, hey, I'm just not, you know, I'm not happy for you to go for a sleepover or even a play date or, you know, actually out of my sight for a while. But I guess we have to... I guess we have to be careful that we're not kind of engendering that fear of the world when our child might already be sitting with quite a bit of that, as it is.

So I think how we role model that can be really important because they're watching our lead. And if mum thinks it's OK, if dad thinks it's OK, then maybe I'm OK. But also, I think there's a lot of lessons that, or learnings, teachings that we can do, incidentally, with our children. And to minimise risk of future harm, because we know that once a child has experienced sexual harm, they're actually at greater risk of experiencing it again. So being able to have, certainly in therapy, working on preventative psychoeducation and sharing that with parents, I think can help parents to feel a little bit more confident.

And then maybe that... Which is also a bit on children, to feel a little bit more confident. So I'm not sure if I'm actually answering your question. So you are. Is that how to build the trust? Well, I think those are the things, aren't they? Because I think if, you know, we don't want to go from, you know, everybody's trustworthy to everybody's not trustworthy. And that pendulum can feel like a very natural flow. And when we've had that, as you were saying, that scary experience of something horrible happening, right? Nobody's trustworthy. We don't want them to go back to everybody's trustworthy, does they not?

So, you know, what are the things that you would notice? What are the warning signs? What are the things that, as you as an individual, but also for your family around you, are picking up on in terms of how to keep yourself safe? And coming back to what you were saying before, Sam, it's never the fault of the young person or the child who has been hurt, but we can increase the likelihood of being safe. You know, we can do some things to... To have our wits about us a little bit more and notice things. And if someone gives us a funny feeling, then what is some language we can have around that? Who are some safe people we can check that out with?

You know, what are the ways in which we can, you know, increase the likelihood that they're... We might also do all those things and still have something happen to us, which doesn't make it our fault. We all want a sense of agency. And to simply be saying, OK, the world's not safe now, full stop. Then that's a really powerless position to be in, whereas to say, yeah, there's some unsafe people in this world, but actually how do you create some agency, some sense of self, some control over how do I be in the world as safe as possible? That can be a really important lesson to learn for everybody.

That's foolproof. No.

9. What if we as parents have different reactions to the situation_

So you must see both of you in therapy with children, with parents with very different reactions to sexual harm. Do you have or give advice around that to these parents? It would be good to see more dads, wouldn't it? The reality is I don't see a lot of dads. And it possibly is about their reactions to it. That could be, yes, and I think that supporting parents to kind of explore a bit their own context or their own background, because as Catherine mentioned, a lot of the parents that we work with have been sexually harmed themselves. And it can be a lot to do with their experience and how the adults react to it.

And their world responded to them, depending on their experience, how triggering it is and then how they respond to those triggers. So there could be a really big reaction from someone who's never experienced their own sexual harm. And then someone who has experienced their own sexual harm could just shut down because it's triggering them in a way that's making it overwhelming. And there go to. It's more of a shutdown response. So I think it's really worthwhile for parents to be supported or to have a think about yourselves. Why is it that I am perhaps having this reaction? And also we there are very, we would say with all parents, we've got a very different response to a child or a reaction about could be anything.

To be working together with them. To be working together with the other parent. To explore that together and then hopefully, for the sake of the child, to be able to reach some kind of middle ground or maybe some kind of consistent message, at least, to help the child get a sense that there's not such differing views. But then, of course, you still want to be authoritative. You still want to be authentic. You still want to be authentic. You still want to be authentic. You still want to be authentic. You still want to be authentic and not be shutting down your real reactions because you might have a whole lot of anger.

And I think that's natural and normal. And I think that would really be quite abnormal if your child didn't see some of that. And so, yeah, it's kind of finding that middle ground and checking in with a young person as well. As to, you know, if someone, if the other parent does have a big reaction or no reaction, kind of checking in with the young person as well. What did you think about that? You know, and just exploring it a bit, maybe all together. Yeah. If that's possible. And I'm just picking up on that, if it's possible, because I think

when you've got, you know, ideally, you have got that space of a middle ground and people in communication for the benefit of their child.

That's what we kind of all hope for. But, you know, we may well have a situation where there is acrimony and, you know, there's a lot of things that we don't want to do. And so, you know, I think it's really important to have that space of a middle ground and people in communication for the benefit of their child. That's what we kind of all hope for. But, you know, we may well have a situation where there is acrimony between parents and they're both trying their very best to be showing love and care for their child, but doing it in very different ways. And I think, you know, ideally, we're wanting to see what we can do to work together.

But if not, it doesn't mean as a parent then you can't. Yeah. And you're then hamstrung to do nothing. I think like with any other parenting issue, it's about recognising that once the child's in your care, you know, you can only have control over what you can have control over. And, you know, you might want to encourage things to be dealt with in a certain way. You might, you know, invite them to engage in the therapy process with the other parent or you might provide some information. But if they're not interested or they've got their own way of doing it, then your job might go, hey, little person, you know, you actually know how this person operates, in so many words.

And so how do we kind of help you make sense of that? Because remember, you know, mum might get angry just generally and so she's not angry at you. She's angry at the situation. And, you know, so when mum gets angry, what might you do? Yeah. But in our house, we might do it this way and what works for you. So it's kind of giving that child space. Yeah. And the ability to translate how they might be in each house. And if you can't do that as the parent, because you're like, you know, then that's what the therapist can help pay, is to go, how do you get to be as authentic as you can be a little person in each house?

And how do we help that parent? If they can't parent together, how do we help that parent be as kind of safe and trauma-informed as they can possibly be in their own spaces? And if it can't be the parent who's the safe person, is there someone in that person that 's extended family who might be your go-to when you're at dad's house or when you're at mum's house, they can help enhance safety.

10. Developing safety plans. What are they_

So our last question, Catherine and Sam, for this section is just, I've heard about developing safety plans. So can you tell us a little bit more about what they are and what their purpose is? So would this be in the case of where maybe there's been somebody in the home that has done the harm, do you think? Is it what we're thinking about, safety plan? Yes, potentially, yeah. Because sometimes that's not always the case that even though at start we would have that requirement, I mean, often the person who did the harm does stay in the home, depending on the severity of the harm. Or they might have contact with family functions or gatherings and things.

Yeah, they might still have contact. So I think what the safety plan that we're talking about is, that there would be supervised contact, that the contact would be supervised. And that, I mean, if they're still in the home, then there would be guidelines around any kind of not having any involvement in changing or bathing or anything that's that sort of type of care. I guess it depends on... ...what the level of contact is. What would you add to that, Catherine? I mean, it's a tough one, because as we were saying at the beginning, you know, we would be of the position that, in fact, you know, contact wouldn't be happening until both parties had got some support.

And so in our worlds, as much as possible, safety plans around this kind of contact would be with the support from the people who'd supported the person who'd done the harm, as well as the person who'd been harmed. And so there'd be some kind of restorative process where, you know, actually those parties would be put together and, you know, yeah, those conversations would be had and a plan would be put in place. And probably the biggest driver for that safety plan is not practicality. And it's probably not even the person who's done the harm, it's the person who's been harmed. Like, how do we enhance their sense of safety in the world?

And that might mean that... As Sam was saying, there's a lot of supervision. It might mean that things, you know, are more, you know, difficult and kind of frustrating for everybody else, because we're trying to enhance the situation, but that's actually what's necessary. And again, we're not just looking at practical physical safety, we're looking at emotional safety. And the idea of, go on, we might give all this thought to a safety plan and put it in place, and actually then we've got to check in that it's, because the assumption can be, we're all good now, but actually how do you give space and time for the idea that safety plans can be changed and updated and worked out whether they are actually effective or not.

And I think, I'm not sure if we've talked about this, but the reasoning behind that, you know, the idea of just not having contact for a while is a really important one. We're heads around, because we do have that stipulation for a reason, and that's because we know, if that therapy will be more effective, it'll have a better, the child will have a better chance of healing if they can have that time and space away from the person who harmed them. And that's because if you imagine, and this is, I'm taking this from you, Catherine, but if you imagine trying to do earthquake counselling, who was traumatised in a canopy earthquake, and while we're sitting here doing counselling, there's this massive great earthquake.

Yeah. It's not possible to do any kind of therapeutic work in that situation. So what then, if the child's still having contact with a person, they come into therapy, we're asking them to show vulnerability, to open themselves up, to possibly even talk, to be vulnerable. It's really difficult for them to be able to do that. And why would they, if they know that they're going to be leaving and going home? Because they're in the presence of the person who harmed them. It's just not a fair ask for a child. And it's, you know, I believe in some way unethical to expect a child to open up. It's not fair.

And it's kind of challenging their very survival, sort of coping, you know, their way just to kind of keep themselves safe. So we do kind of get more vulnerable before we get stronger. Yeah. Yeah. There's space you want to create. And that's what we're asking them to do. So it's really unfair for us to ask them to do that, be that, when they're not even safe. Not feeling safe emotionally, relationally. That kind of makes sense. Yeah, it does. It does.

11. How Start can help_

All right. Well, thank you both very much. Thank you for the time and thank you for this opportunity to be able to talk about this really important topic. And if people ever want to, I know we've already said this, but want to know more, then to ring start. We've got social workers who can answer questions or you can put your head together with them to resolve or talk through or come up with a plan for next steps, then that's a free service and you don't have to wait. And that resource is there. Just find that number through the website.