



KIKO AND THE HAND

Training for Trainers Manual

**Protective Teachers,
Protected Children:
Preschool Training to Prevent
Child Sexual Abuse**

Republic of Moldova

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Building a Europe
for and with children



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**Protective Teachers, Protected
Children: Preschool Training
to Prevent Child Sexual Abuse**

Republic of Moldova

Authors:

F. Javier Romeo-Biedma
and Pepa Horno
(Espirales Consultoría de Infancia)

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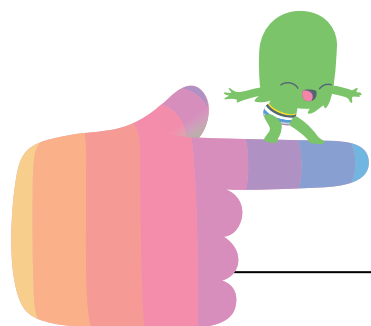
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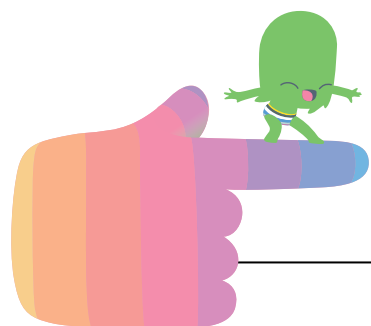
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Preface

The Council of Europe protects and promotes the human rights of all people in its member states, including 150 million children, and is actively engaged in the eradication of all forms of violence against children. Our work at a pan-European level supports the landmark commitment by world leaders to end the abuse, exploitation and trafficking of, and all forms of violence against, children by 2030, as part of the United Nations' Sustainable Development Goals.¹ "A life free from violence" is one of the key priorities of the Council of Europe Strategy for the Rights of the Child (2016–21).²

The Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (the Lanzarote Convention) is the most ambitious and comprehensive legal instrument on the protection of children against sexual abuse and sexual exploitation to date. It requires state parties to ensure a holistic response to sexual violence against children through the "4 Ps" of prevention, protection, prosecution of perpetrators and promotion of national and international co-operation in the field.

To achieve its aim, the Council of Europe provides support through its monitoring bodies and intergovernmental work, as well as targeted support, guidance and supporting tools, to help states put in place effective measures to prevent sexual violence against children, to protect children from such violence and to ensure the timely reporting of and response to instances of suspected child sexual abuse. Raising awareness and building the capacities of children themselves, their families and front-line professionals who work for and with children are essential elements in eradicating these crimes.

It is estimated that around one in five children in Europe falls victim to some form of sexual violence during their childhood. The Council of Europe's One in Five Campaign (2010–15) sought to break the silence and taboo surrounding sexual violence against children and to promote the ratification of the Lanzarote Convention. Part of the campaign involved products that had been developed to teach children the "Underwear Rule", using the story of *Kiko and the Hand*, as told in a children's book and in a TV spots, with guidelines for parents.³ Today, 46 member states of the Council of Europe have ratified the Convention⁴ and 18 November is celebrated each year as the European Day on the Protection of Children against Sexual Abuse and Sexual Exploitation.⁵ In many countries across Europe, Kiko and the Hand products have inspired professionals as well as thousands of children.

This manual for training trainers builds on the work of the Council of Europe and its partners across Europe. It was developed within the framework of the Council of Europe project, Protecting Children from Sexual Exploitation and Sexual Abuse in the Republic of Moldova⁶, as an attempt by the Republic of Moldova to put into practice the provisions of the Lanzarote Convention, that is to translate it into practical guidance and resources for kindergarten and preschool teachers and other early childhood professionals working with children between the ages of 3 and 6.

1 www.un.org/sustainabledevelopment/sustainable-development-goals.

2 www.coe.int/en/web/children/children-s-strategy.

3 www.coe.int/en/web/children/kiko.

4 The full list of ratifications by country can be found at www.coe.int/en/web/conventions/full-list/-/conventions/treaty/201/signatures.

5 For more information, see www.coe.int/en/web/children/end-child-sex-abuse-day.

6 www.coe.int/en/web/chisinau/protecting-children#%7B%2244733798%22%3A%5B%5D%7D.

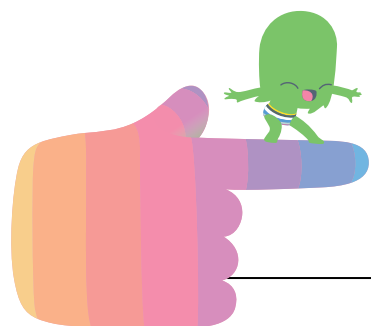
The manual sets out to equip professionals with tools for more effective prevention and the early detection and reporting of suspected cases in a child-friendly manner. Using the Kiko and the Hand Underwear Rule as a starting point, it brings together good practices and includes practical exercises on how to address sexual violence when working with young children and interacting with parents and other relevant actors, such as kindergarten and preschool management. It provides guidance, but it is up to each teacher and educator to use the tools provided in the ways they think best.

The manual is an invaluable contribution to supporting children and upholding children's human rights across Europe. It can be adapted to different national settings and used across Council of Europe member states and beyond.

A handwritten signature in black ink, appearing to read 'RJ' or 'RJR', with a stylized flourish extending from the end.

Regina Jensdottir

*Head of the Children's Rights Division
and CoE Coordinator for the Rights of the Child*



Acknowledgements

The Kiko and the Hand training for trainers manual for kindergarten, preschool teachers and educators has been prepared under the auspices of the Council of Europe Children's Rights Division within the framework of the Council of Europe project on Protecting Children from Sexual Exploitation and Sexual Abuse in the Republic of Moldova (2018–20).

Many individuals and professionals in various Council of Europe member states have collaborated with the Children's Rights Division in the development of this manual. The aim was to identify, collect and harmonise good practices at a European level, and to test the manual and its methodology in the Moldovan context, where kindergarten teachers had received training in this area in the past.⁷

The Council of Europe would like to extend its gratitude to all kindergarten teachers who participated in the first test training sessions held in October 2019 and January 2020 in Chişinău in the Republic of Moldova for their contributions to designing the concept.

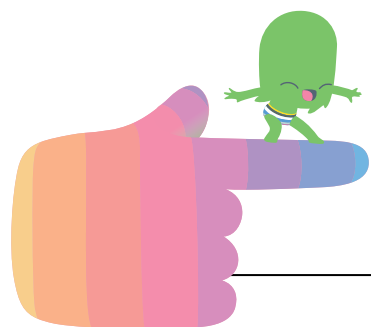
Our special thanks go to the experts, **F. Javier Romeo-Biedma** and **Pepa Horno**, who co-authored the manual using their extensive expertise in and devotion to the development of children's rights across the Council of Europe member states and beyond. F. Javier Romeo-Biedma is a psychologist and consultant in child protection. With more than twenty years of experience in the social sector and cooperation, he has worked as an international aid worker and educator in Morocco and Mauritania, as an intercultural mediator with adolescents at social risk and as a consultant for public and private institutions in Spain, Latin America, Europe and the Maghreb.

Pepa Horno is a psychologist and consultant in childhood, affectivity and protection. For more than twenty years she has coordinated national and international campaigns to prevent and eradicate violence against children, mainly physical and psychological punishment and sexual abuse and exploitation of children. She has given trainings and provided professional assessment to intervention programs in more than twenty countries in Latin America, South and South-East Asia, Europe and the Maghreb.

Since 2009 they have been working in Espirales Consultoria de Infancia, an international child protection consultancy firm based in Spain, which they co-founded. They have conducted several national and international research processes, and they provide training in, and assessment and supervision of, child protection using a children's rights approach. Both authors collaborated in the launch of the Council of Europe *Kiko and the Hand* campaign globally (2010) and in Spain (2010–11), Italy (Pepa Horno) and Tunisia (F. Javier Romeo-Biedma).

The Council of Europe would also like to thank our Moldovan counterparts, **Daniela Simboreanu** and **Parascovia Topada**. Daniela Simboreanu, President of the National Centre of Child Abuse Prevention of the Republic of Moldova, is a psychologist with more than 20 years of cumulative experience in social protection, children's rights and domestic violence. She has engaged in the field of children's rights as a policy maker, drafted and implemented strategies to standardise the quality of social services and teaches in the Psychology Department of the State Pedagogical University in the Republic of Moldova. Parascovia Topada is a psychologist-psychotherapist with wide-ranging experience in helping child victims of sexual abuse, and a co-ordinator of child abuse prevention programmes within the National Centre for Child Abuse Prevention in the Republic of Moldova. She also carries out research on the psycho-emotional aspects of the identities of children who have been subjected to sexual abuse within their circle of trust.

7 The National Center for Child Abuse Prevention in the Republic of Moldova implemented a series of training sessions for kindergarten teachers based on a methodological guide/programme to prevent sexual abuse against preschool children.



1. Introduction: why a manual for training professionals in the prevention of child sexual abuse?

1.1. ABOUT THE GUIDELINES

The goal of this manual is to provide teachers, educators and professionals who work with children aged 3–6 with the necessary knowledge, skills and ideas to run sessions for the prevention of child sexual abuse. To do this, they need to have a deep understanding of child sexual abuse and its consequences.

These concepts are hard to comprehend. We would all like to believe that children remain innocent throughout their childhood and that nothing harmful ever happens to them, but that is not the reality. Child sexual abuse occurs more often than we might expect, and it remains a hidden problem, unseen, undetected, unnamed and unattended. So the exercises that build awareness in both adults and children must be incorporated into experiential activities. The guidelines in this manual aim to give those who work with young children the necessary tools to develop, through practice and theory, a basic understanding of child sexual abuse, the different forms it takes, and its consequences and indicators, so that they have a clear concept of it and can protect the children in their care.

1.2. CHILD SEXUAL ABUSE: A HIDDEN PROBLEM

According to Council of Europe estimates, child sexual abuse affects one in five children in Europe. However, it is a sensitive topic in most societies and one that is difficult to discuss. Myths and taboos around sexuality⁸ abound in every culture, especially in relation to children, and child sexual abuse remains a hidden problem: people feel uncomfortable speaking about the issue and avoid thinking about it because it distresses them. They cannot understand how anyone could abuse a child. And yet it happens – more often than we think, see or detect.

In early childhood, when children do not yet have the vocabulary to describe their range of experiences, and when they are seldom taught about sexual matters, child sexual abuse is often unnamed. Sexual abuse usually takes place in environments that are regarded as safe for children: their homes, their schools, their spaces of leisure activity and their communities. It takes place mainly in relations of trust (with adults who care for them such as family members, teachers, trainers or educators, or with other children of the same or a different age), where affection and power are used against the children themselves, through manipulation and the keeping of unhealthy secrets, so that the children may often be aware that something is wrong but do not have the words to express it until many years later. Therefore, children need to know what sexual abuse is (even if they do not use the precise terminology), how to identify it (through their feelings and sensations) and how to ask for help when something like this happens to them. It is the responsibility of the adults who care for them to tackle the issue, and to develop the necessary skills to prevent, detect and take action when faced with child sexual abuse.

In 2007 the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (the Lanzarote Convention) set international standards for countries that include not only the prosecution of these crimes but also the legal obligation to provide children of all ages with prevention and sexual education.

8 See Human Rights Commissioner's official comment on Comprehensive sexuality education here: <https://www.coe.int/en/web/commissioner/-/comprehensive-sexuality-education-protects-children-and-helps-build-a-safer-inclusive-society>

In 2010 the Council of Europe launched the One in Five Campaign, which has been an international benchmark for child protection, especially against child sexual abuse. With its colourful characters, Kiko and the Hand, and its short but powerful message, the campaign has been translated into dozens of languages and used worldwide at local, regional and national levels. Targeted especially at children aged 3–6, the campaign provides a way of working with children that is effective against sexual abuse and emotionally safe. Within the framework of the campaign, several other publications were made available to specialists and to the general public.⁹

Many countries have made changes in their legislation to comply with the provisions of the Lanzarote Convention, and valuable programmes have been put in place for the protection of children. However, child sexual abuse usually takes place outside public awareness, apart from the occasional news story, which gives only a partial view of this widespread problem.

Child sexual abuse can affect the development of a person at every level – physical, psychological, sexual and social – and it can cause severe harm, from physical to psychological, some of which may be irreversible or lead even to death. Furthermore, child sexual abuse is a clear violation of a child's human rights. It is therefore an ethical imperative – in addition to being a legal obligation for countries that have ratified the Lanzarote Convention – to implement programmes that help to prevent, detect and intervene in this problem, so that children can be safe and develop their full potential.

1.3. PREVENTION OF CHILD SEXUAL ABUSE: A PROFESSIONAL RESPONSIBILITY

Most national legislations include the legal obligation of all adults to denounce any form of violence against children and to provide support for children in any context where they face violence. The reporting of child sexual abuse is mandated by law in many countries. Professionals who work directly with children have the added responsibility of providing a safe and protective environment in which the children's rights are respected and their optimal development is ensured. Such safe and protective environments include systems for the prevention and detection of, and intervention in, any violence against children, including sexual abuse.

Schools, kindergartens and preschools need to be safe environments if children are to learn. A child who lives with fear, guilt or worry will not be in a position to learn. Thus, teachers and other educators must ensure that their students know how to talk about sexual abuse in case it happens to them, and that they have safe adult referents who can support and protect them. Schools need to teach children how to detect situations where they may be in danger and how to ask for help. However, universities and other higher education institutions seldom include full training in the prevention and detection of child sexual abuse, despite its prevalence.

Kindergartens are entry points for children to a social life outside of their families, where they meet other children and adults, who conduct themselves in different ways from their siblings and parents, and who have different relationships with them as classmates, teachers, educators and so on. Kindergarten is an experience that will affect how children view education (as an opportunity or as a burden) and school (as something to enjoy or as something to suffer, fear or even avoid). Kindergarten teachers can inspire their students with the idea that learning can be pleasurable or lead them to reject anything related to school. It is a professional obligation for teachers to ensure that their students feel safe (at school, but also at home and everywhere else), especially at such a key point in their development.

This manual aims to provide teachers of children aged 3–6 with practical tools to develop sessions with their students that are powerful yet gentle, clear yet moderate and deep yet easy to process. More experienced teachers will be able to draw on their experience for these sessions, while newly

⁹ Council of Europe (2010), *Protecting children from sexual violence: a comprehensive approach*, Strasbourg: Council of Europe, available at www.coe.int/t/dg3/children/1in5/WhatWeKnow/Publication_en.asp.

qualified teachers will put into practice some of the techniques they have learned in their training, to comply with their professional responsibility for the safety and protection of their pupils.

1.4. EXPERIENTIAL TRAINING: TOWARDS DEEP AWARENESS

The idea of child sexual abuse is so disturbing for most adults that they prefer not to think about it. However, not thinking or talking about sexual abuse does not eradicate it but rather encourages the secrecy of such harmful relationships. To stop child sexual abuse, adults should be able to engage positively and constructively in affective and sexual education. But most adults have not received that education themselves. It is crucial that adults approach the prevention of child sexual abuse from an experiential perspective,¹⁰ for only then will they be able to provide a safe environment for affective and sexual education.

The training presented in this manual is organised around reflection on one's own experiences (of violence or of the abuse of power), followed by the conceptual framework. Therefore each professional begins by understanding their own issues and, with that awareness, navigates the difficult subject of violence and child sexual abuse. They should then be able to integrate the concepts, ideas and exercises into their own approach, which will be based on real experience and be technically sound.

That the training is experiential does not mean that it is therapeutic. Some of the participants may become aware of episodes of violence in their own lives, which they will need to work through in their own therapeutic processes – but not in the training. The training is a space for education that is safe and protective, but it is not for therapy. The facilitators will need to be aware of this and to ensure that the necessary measures are in place.

An experiential approach also includes learning by doing, so the training must take a very practical approach and include diverse exercises. Participants should be able to explore and develop ways of communicating the contents of the training to their own students that come naturally to them.

1.5. HOW TO USE THIS MANUAL

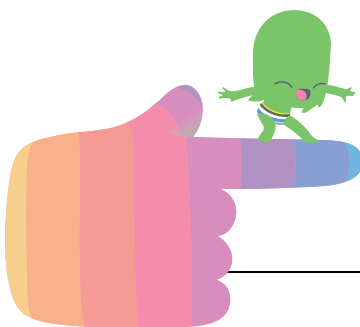
This manual is intended for teachers, educators and professionals who work with children aged 3–6 in educational settings. It provides different kinds of content, in line with the different goals.

Chapters 2 and 3 provide the theoretical framework for understanding child sexual abuse and for detecting it. These chapters are to be used for reference when in doubt, especially after the training. Chapter 2 addresses the concept of child sexual abuse, together with issues such as abuse of power, harm and legal provisions, and types of abuse. It also gives an overview of the legal and policy background, including the obligations of countries and professionals who work with children. Chapter 3 provides some guidance about the consequences of child sexual abuse and how to detect it.

The next three chapters cover practical approaches, at different levels. Chapter 4 gives step-by-step guidance to trainee teachers on talking to children about sexual abuse, as well as to other relevant adults (e.g. parents, school administration). It is a model for training trainers, and includes workshops to help professionals develop the skills and knowledge to engage in sessions with children. Chapter 5 offers activities for training trainers, together with objectives, methodology, key concepts and materials. Chapter 6 provides activities for teachers, educators and other professionals to use with children, together with objectives, methodology, key concepts and materials for sessions in kindergartens and other educational settings.

The manual concludes with an afterword in Chapter 7, which is followed by references.

10 Horno, P. (2011), "Training professionals – An essential strategy for eradicating child sexual abuse", in Council of Europe, *Protecting children from sexual violence: a comprehensive approach* (pp. 143–51), Strasbourg: Council of Europe, available at www.coe.int/t/dg3/children/1in5/Source/PublicationSexualViolence/Horno.pdf.



2. What do we mean by child sexual abuse?

THE SCOPE OF THIS CHAPTER

This chapter outlines the basic concepts that need to be understood in carrying out training for the prevention and detection of child sexual abuse with teachers and other education professionals. Readers who would like further detail on the subject should refer to the Council of Europe's publication "Protecting children from sexual violence - A comprehensive approach"¹¹, which includes references and research for the data presented in this chapter.

2.1. DEFINING CHILD SEXUAL ABUSE

2.1.1. The Lanzarote Convention: an international tool for defining child sexual abuse

The Lanzarote Convention¹² is a Council of Europe treaty that addresses different forms of sexual violence against children in all domains, including home, family and school. The Lanzarote Convention defines sexual abuse as:

- "Engaging in sexual activities with a child who, according to the provisions of national law, has not reached the legal age for sexual activities" (Article 18.1.a), except when these are "consensual activities between minors" (Article 18.3).
- "Engaging in consensual sexual activities with a child where:
 - ▶ use is made of coercion, force or threats; or
 - ▶ abuse is made of a recognised position of trust, authority or influence over the child, including within the family; or
 - ▶ abuse is made of a particularly vulnerable situation of the child, notably because of a mental or physical disability or a situation of dependence" (Article 18.1.b).

These definitions cover all sexual activities with children, with the exception of "consensual activities between minors", and stress the aggravating factors of coercion and manipulation through positions of authority or influence, as most cases of child sexual abuse take place within the child's circle of trust.

According to the Lanzarote Convention, emphasis should be placed on taking "the necessary legislative or other measures to prevent all forms of sexual exploitation and sexual abuse of children and to protect children" (Article 4), including taking "the necessary legislative or other measures to encourage awareness of the protection and rights of children among persons who have regular contacts with children in the education, health, social protection, judicial and law-enforcement sectors and

11 Council of Europe (2010), "Protecting children from sexual violence - A comprehensive approach", Strasbourg: Council of Europe, available at www.coe.int/t/dg3/children/1in5/WhatWeKnow/Publication_en.asp.

12 Council of Europe (2007), *Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (Lanzarote Convention)*, ETS No. 201, Council of Europe, Strasbourg, available at www.coe.int/en/web/children/convention.

in areas relating to sport, culture and leisure activities” (Article 5.1). It also specifies that each state shall “ensure that children, during primary and secondary education, receive information on the risks of sexual exploitation and sexual abuse, as well as on the means to protect themselves, adapted to their evolving capacity. This information, provided in collaboration with parents, where appropriate, shall be given within a more general context of information on sexuality and shall pay special attention to situations of risk, especially those involving the use of new information and communication technologies” (Article 6). The training outlined here, with its activities for kindergarten teachers and its sessions with children, has been designed with these goals in mind.

The Council of Europe has been producing materials for the prevention of child sexual abuse since its campaign One in Five¹³ was launched in 2010. The illustrated book *Kiko and the Hand*, which presents the Underwear Rule, is the starting point for the sessions with kindergarten teachers described in Chapter 6.

LEGAL PROVISIONS RELATING TO CHILD SEXUAL ABUSE IN THE REPUBLIC OF MOLDOVA

Law on the special protection of children at risk and of children separated from their parents¹⁴ defines “violence against the child” as forms of ill-treatment by parents, legal representatives, a person who takes care of the child or any other person who cause real or potential harm to the child’s health and endanger the child’s life, development, dignity or morality. In addition, Law on preventing and combating family violence¹⁵ provides a comprehensive definition of sexual violence. Sexual violence is defined as any sexual violence or any unlawful sexual conduct within the family or in other interpersonal relationships, such as spousal rape, prohibition of contraception or sexual harassment; any unwanted, forced sexual conduct; forced prostitution; any unlawful sexual activity with a minor family member, including through caressing, kissing, posing the child and other unwanted sexual touching; and other activities with similar effects.

According to Article 174(1) of the Criminal Code of the Republic of Moldova¹⁶, sexual intercourse with a person “certainly known to be under the age of 16” is a crime, regardless of consent or coercion.

The national legal framework defines and provides for criminal liability for several types of child sexual abuse:

- Rape: sexual intercourse committed through physical or mental coercion of the child or by taking advantage of the child’s inability to defend themselves or to express their will.
- Violent sexual actions: the satisfaction of sexual desire through perverse practices, by physical or mental coercion of the person or by taking advantage of their inability to defend or express their will.
- Sexual intercourse with a person who has not attained the age of 16: sexual intercourse other than rape, acts of vaginal, anal or buccal penetration, and others, committed with a person known for certain to be under the age of 16.
- Sexual harassment: the manifestation of a physical, verbal or nonverbal behaviour that harms the dignity of the person or creates an unpleasant, hostile, degrading, humiliating

13 The main website of the campaign is at www.coe.int/t/dg3/children/1in5/WhatWeKnow/Publication_en.asp.

14 Law no. 140 of 14.06.2013 on the special protection of children at risk and of children separated from their parents, published in the “Monitorul Oficial” Gazette of the Republic of Moldova no. 167-172/534 of 02.08.2013. The Romanian version available at: https://www.legis.md/cautare/getResults?doc_id=110518&lang=ro

15 Law no. 45 of 1.03.2007 on preventing and combating family violence, published in the “Monitorul Oficial” Gazette of the Republic of Moldova no. 55-56/178 of 18.03.2008. The Romanian version available at: https://www.legis.md/cautare/getResults?doc_id=110200&lang=ro

16 Criminal Code of the Republic of Moldova no. 985-XV of 18 April 2002 published in the “Monitorul Oficial” Gazette of the Republic of Moldova no. 128-129 / 1012 of 13.09.2002 and republished in the same Gazette no. 72-74 / 195 of 14.04.2009. The Romanian version available at: https://www.legis.md/cautare/getResults?doc_id=118807&lang=ro

or insulting atmosphere to induce a person to engage in sexual intercourse or other unwanted sexual activity through the use of threat, constraint or blackmail.

- Child pornography: involving a child in the production, distribution, dissemination, import, export, offer, sale, exchange, use or possession of (1) images or other representations of one or more children involved in explicit, real or simulated sexual activities; and (2) images or other representations of the child's sexual organs, represented in a lascivious or obscene manner. Electronic images and representations are included in this definition.
- Perverse actions: actions committed against a person known for certain to be under the age of 16, consisting of exhibition, indecent touching, or obscene or cynical discussions with the victim about sexual intercourse, coercing the victim to participate in or to attend pornographic shows, providing the victim with pornographic material, and other sexual actions.
- Solicitation of children for sexual purposes: proposing, persuading, manipulating, threatening or promising to provide benefits in any form, including through information and communication technologies, a meeting with a child in order to abuse them sexually, if the proposal is followed by material facts that lead to such a meeting.
- Child prostitution: the benefit, against any material advantages, of the sexual services provided by a person known for certain to be under the age of 18.

The Lanzarote Convention was ratified on 19 December 2011 and entered into force on 27 January 2012¹⁷.

2.1.2 Child sexual abuse as a form of violence against children

According to the definition used in the *United Nations study on violence against children*,¹⁸ violence is the intentional use of physical force or power, threatened or actual, against a child, by an individual or group, that either results in or has a high likelihood of resulting in actual or potential harm to the child's health, survival, development or dignity.

Accordingly, violence has three main components, as explored in Activity 2, "What our awareness tells us about our history":

1. Harm: The action results in actual or potential harm to the child.
2. Abuse of power: The action is not an accident or a natural disaster, but is caused by a person who has power over the child (because that person has the child's affection, because they have some kind of authority over the child or because they have physical or social force that they can use against the child) and who uses it to cause harm to the child.
3. Mode: The harm can take many forms – physical, psychological or sexual – but harm can also occur through inaction, such as when a person responsible for a child's protection does not perform their duties; this is called negligence.

Because child sexual abuse is any action (1) that causes harm to the child (2) by means of the abuse of power (3) through sexuality, it is a form of violence. However, some clarifications are crucial:

- Child sexual abuse is based on the abuse of power to manipulate, coerce and force children into certain activities, but physical force is not necessarily the main point.
- Child sexual abuse tends to be perpetrated by people who have easy access to children, by

17 Law on the ratification of the Council of Europe Convention for the protection of children against sexual exploitation and sexual abuse no. 263 of 19.12.2011 published in the "Monitorul Oficial" Gazette of the Republic of Moldova no. 21-24/56 din 27.01.2012. The Romanian version available at: https://www.legis.md/cautare/getResults?doc_id=13045&lang=ro

18 Pinheiro, P. S. (2006), *Rights of the child: note by the Secretary-General. Report of the independent expert for the United Nations study on violence against children*, Geneva: United Nations, p. 6, available at <https://digitallibrary.un.org/record/584299>.

individuals who are known, respected and even loved by children and who use their influence over the children to force upon them actions that cause them harm. Most cases of child sexual abuse (70%–85%) happen in the circle of trust, which includes family, teachers, educators, coaches and friends.

- In child sexual abuse manipulation can be direct and harsh, with the use of threats or physical force, but it can also work by making the child feel “special”, “chosen” or even “in love” and “in a romantic relationship”. A child who is given presents and treats becomes entangled in a toxic relationship.
- The key that maintains child sexual abuse is secrecy, the commitment to silence that the perpetrator obtains from the child. The perpetrator makes sure that the child believes that, if they were to speak about the abuse, either nobody will believe them or people will hold the child responsible for the abuse – for not avoiding it or not stopping it earlier. The child’s guilt and shame ensure that the abuse is kept secret.
- If secrecy is the key to maintaining abuse, the social taboo about sexual education for children supports the perpetrators, not the victims. The idea that not talking to children about child sexual abuse protects them from it is wrong and harmful, because the opposite is true: talking to children about affective and sexual education can help prevent sexual abuse by giving children the tools to recognise it and to ask for help, or at least to make it easier to detect and to enable earlier and more effective intervention. If adults do not understand about child sexual abuse, many indicators go undetected and children will stay trapped in the abuse.

2.1.3 Who can be a victim of child sexual abuse?

All children can be victims of sexual abuse just because they are children. There are some characteristics of the child or in their social environment that may become either risk factors or protective factors. The main goal of prevention activities is to increase the protective factors so that children are less at risk of sexual abuse.

WHO CAN BE A VICTIM OF CHILD SEXUAL ABUSE?

- Gender: Sexual abuse happens to children of both sexes, although it is more frequent with girls. When good prevention plans are implemented, they reveal a higher number of boys identified as victims.
- Age: Child sexual abuse happens to children of all ages, from birth to the age of 18. It is more frequent at certain ages, but a child can become a victim at any age.
- Relationship with the perpetrator: In most cases (70%–85%) children suffer sexual abuse by people they know, respect and trust. This means that they become victims of people in their circle of trust, who use their power over children to abuse them.
- Social class: Children who suffer sexual abuse come from all social classes and not just those with social difficulties. In fact, the risk of the abuse being undetected is much higher with a child from middle- or upper-class family, as the indicators may be misattributed to the child’s personality (e.g. aggressive, depressive or isolated) instead of being interpreted as signs for alarm.
- Social skills: Although sexual abuse happens to children with a range of social skills, those who are more introverted or who have lower social skills may be targeted by perpetrators, as they offer less resistance. Again, it is not the responsibility of the child to defend themselves; it is always the perpetrator who is at fault.
- The children who are at higher risk of sexual abuse include:
 - ▶ children who need help with basic functions, as abuse can take place during care activities or be inflicted upon them as a result of their limitations, especially children under the age of 6 and children with disabilities;

- ▶ children who belong to minorities of any kind (e.g. social, ethnic), as these differences can be used by perpetrators to justify the abuse;
- ▶ lonely and isolated children who may be new in town, out of contact with their extended family, or just shy or introverted, as there will be fewer adults who would be able to prevent, detect and stop the abuse;
- ▶ children who have previously suffered sexual abuse, because the harm caused by the abuse is detected by other perpetrators, who identify them as potential targets. However, when previously abused children are given support to overcome its consequences, they become less at risk than other children because they have the skills to detect and to avoid potential situations of abuse.

2.1.4 Who can be a perpetrator of child sexual abuse?

Societies tend to have an image of perpetrators as strangers, men not previously known to the children, who have certain physical characteristics such as wearing dirty clothes and being under the influence of drugs or alcohol. While perpetrators like this exist, they are a minority. Perpetrators vary widely and come from all social conditions. Abuse may happen to a child from a person they respect and love, which is why children need to learn the tools for prevention.

WHO CAN BE A PERPETRATOR OF CHILD SEXUAL ABUSE?

- **SEX:** Perpetrators are usually male, but there are also female perpetrators, who disguise the abuse as caretaking or as kindness. When good prevention plans are in place, more women and girls are identified as perpetrators.
- **AGE:** Perpetrators of abuse can be adults of all ages, but in around 30% of cases they are other children, sometimes older (adolescents), sometimes the same age (peers) and in a few cases younger than the victim.
- **RELATIONSHIP WITH THE VICTIM:** Most abusers seek to achieve a position of trust or of authority in relation to the child, so they can manipulate or coerce them into the abuse, and afterwards silence them. Most adult perpetrators will try to gain a social position that facilitates access to children, as teachers, educators, sports coaches or leisure activities professionals, or they may direct their abuse to child members of their family.
- **SOCIAL CLASS:** Perpetrators can belong to all social classes. Rich perpetrators may have better means to conceal and control the abuse.
- **SOCIAL SKILLS:** The majority of perpetrators have very high social skills, are intelligent and have a very good social image, especially among adults. They may be attractive, have many friends and lead an apparently “normal” life with a spouse and children. Many perpetrators start very slowly by testing the protection of the child. If the child knows how to say “No!” and who to ask for help, the perpetrator will avoid them and look for other victims.
- The vast majority of perpetrators are fully aware of the gravity of the abuse, and so they hide it. The main exception is children who may have suffered abuse themselves and who see abuse as being normal. Even in such cases, children know that they are doing something that makes other children feel bad.

2.2. TYPES OF CHILD SEXUAL VIOLENCE

Sexual violence against children can take many forms, and there are different terms for each of these. For the sake of clarity, and to be more useful to teachers and other professionals in educational settings, this manual groups the diverse forms of sexual violence against children into three main categories: child sexual abuse, child sexual exploitation and online sexual violence (both online sexual abuse and online sexual exploitation).

2.2.1. Forms of child sexual abuse

Child sexual abuse is any action that causes harm to a child through the abuse of power in the domain of sexuality. Hence, child sexual abuse can take many forms, for example:

- inappropriate comments of a sexual nature, such as teasing or humiliating a child about their physical appearance, their genitals or their development, or sexual proposals (even as jokes);
- voyeurism – watching a child wearing few or no clothes for one's own pleasure, for example while they shower, get dressed or are in the bathroom;
- exhibitionism – showing one's genitals to a child for one's own pleasure;
- kisses or caresses with sexual connotations;¹⁹
- showing pornography to a child – pornography can disrupt healthy sexual development, especially in early childhood, as it provides dangerous models for and shows harmful practices in interpersonal relationships;
- taking pictures of or filming children in their underwear, naked or in positions suggesting sexual activity (including images taken by other children or by adolescents);
- rubbing against a child (on public transport, in groups such as before class but also at parties or at home), touching their genitals or having them touch another person's genitals;
- masturbation in its different forms – making the child masturbate in front of another person, masturbating them or making the child masturbate another person;
- having (oral, vaginal or anal) sexual intercourse with a child.

As can be seen, child sexual abuse can happen with or without physical contact. The gravity of the abuse is determined by the severity of the harm it causes. A young child exposed to extreme pornography (without contact) can suffer more harm than an adolescent who receives an unwanted kiss (with contact) at a party and can respond to it with the support of their friends.

2.2.2. Child sexual exploitation²⁰

While child sexual abuse is common among kindergarten children, child sexual exploitation happens much less frequently. However, as its effects can be so severe, kindergarten teachers must have a basic knowledge of it.

Child sexual exploitation is child sexual abuse that involves benefits for another person, economic or otherwise (e.g. goods, favourable treatment or debt cancellation). Child sexual exploitation requires some kind of network, from informal ones to highly organised criminal organisations.

While there are usually only two roles in child sexual abuse – the perpetrator and the victim – there are three main roles in child sexual exploitation:

19 Children need healthy physical contact for their full development. If they are used to receiving healthy kisses, caresses, hugs and tickles, they will easily detect when contact has sexual connotations and is harmful. But, if they are not used to receiving affection, any caress will feel good, even a sexual one.

20 The Lanzarote Convention criminalises the various forms of child sexual exploitation. See Articles 19-23 of the Convention.

- **VICTIMS:** They can be children of all ages. Adolescents can be induced to accept sexual exploitation by adults, but also by peers who already belong to sexual exploitation networks. Victims suffer all the consequences of child sexual abuse and many other effects from the exploitation, such as losing control of their lives, being objectified, a higher risk of health problems due to being exposed to several perpetrators.
- **ENABLERS:** These are the people who enable the child's abuse and who receive the benefit of it. There may be few enablers (especially in informal networks) or many differentiated enablers (e.g. those who find children, those who control them, those who contact the perpetrators, those who receive the money and those who create the structure for the organisation). It is important to remember that many children are sexually exploited by their own families (e.g. by parents or relatives), or are introduced to criminal networks by people in their circle of trust (e.g. boyfriends, teachers, educators and coaches). Some enablers also abuse children during the exploitation, but others do not, and some do not even know the children they are exploiting (especially in large criminal organisations). While most perpetrators are male, enablers can be both men and women (women tend to have easier access to children in their own families from a position of trust).
- **PERPETRATORS:** They are people (mostly adult men but also adult women and adolescents) who pay for sexually abusing a child. They are usually aware of the crime (some adolescents may be forced to say that they are adults, and most perpetrators do not verify it), which is why they hide it. Without their economic support, criminal networks would not dedicate their resources to the sexual exploitation of children.

PRECISION IN THE USE OF LANGUAGE

Language configures the way we think about issues. In child sexual exploitation the use of terms that can be misleading may exonerate those who commit violence. This is why it is important to use appropriate language for the different aspects of child sexual exploitation. Many terms need to be considered more carefully (and there are some general guidelines already elaborated²¹), but the main ones are the following:

- "Child sexual exploitation" is a better term than "child prostitution", as only adults can consent to their own prostitution. Even if the child or adolescent were offering themselves up to be abused, they do not have the legal capacity or the psychological maturity to do so, so those who promote the abuse are fully responsible for it.
- "Materials (images, recordings) of child sexual abuse" is a better term than "child pornography" because, as with child sexual exploitation, children cannot give their consent to figure in pornographic materials. This expression also stresses that viewing pictures of naked children or of children forced into sexual interaction is a way of collaborating with the abuse these children suffer.

While some cases of sexual exploitation of children take place in their close environment (at home, at a relative's house or in neighbourhood cafés in their city), many criminal networks operate with travel between countries.

- "Sexual exploitation in the context of travel and tourism" is preferred to "sex tourism" as a term. In these cases the perpetrator travels to the victim, usually from a rich country to a less developed region, where the laws against child sexual exploitation are less severe.
- Human trafficking for the purposes of sexual exploitation: The victim is transported to the perpetrator (usually with false documentation), usually from a less developed region to a richer country. Human trafficking can happen within a country (e.g. where children are taken

21 Interagency Working Group on Sexual Exploitation of Children and ECPAT (2016), *Terminology guidelines for the protection of children from sexual exploitation and sexual Abuse*, Bangkok, available at <http://luxembourgguidelines.org>.

from the countryside to a city). There are other forms of human trafficking that do not necessarily involve sexual exploitation such as forced labour, forced begging, illegal adoptions or organ trafficking.

- **Sexual exploitation in the context of human movements:** People on the move often come from vulnerable populations, especially refugees and asylum seekers. During their travels refugees and asylum seekers may encounter criminal networks that seek to exploit children, and children often disappear. Also, when parents migrate to another region or to a different country, children can be at risk of being exploited by their relatives as a way of getting “compensation” for taking care of them.

2.2.3. Online child sexual abuse and exploitation

Young children should be supervised by an adult at all times when they are accessing online content: kindergarten children should not surf the internet on their own. This limits their exposure to situations of sexual abuse and exploitation. With the advent of smartphones, however, children can become victims of online sexual abuse and exploitation at the hands of adults, adolescents and even slightly older children who have enough knowledge to use the technology.

Offline child sexual abuse and child sexual exploitation, while related, are different phenomena, but in the online world the boundaries between them are blurred. Online child sexual abuse is abuse that is facilitated by means of information and communications technology. In online child sexual exploitation, the component of exploitation is added to online child sexual abuse. In some cases of online abuse the materials of child sexual abuse continue to be used to exploit the child, who is forced to provide more materials so that the perpetrator can profit from selling those materials afterwards to other abusers.

Online child sexual abuse and exploitation have specific characteristics, which must be known by safe adults who want to protect children in their environment:

- **ANONYMITY:** While most offline sexual offenders are people who are well known by their victims (e.g. parents, relatives, neighbours and educators), who use the power they have over children to perpetrate the abuse, in online environments children are exposed to many strangers, people who hide behind aliases and whose real identity may remain unknown. This means that people from the child’s environment (whether adults or peers) can use their knowledge of the child in real life to abuse or exploit them online, and it will be difficult to identify them, much less hold them accountable for their actions.
- **DISTANCE:** While child sexual abuse and exploitation require that the child and the perpetrator be in the same space for the abuse to take place, online sexual abuse and exploitation can take place across long distances in space (even between different continents) and time (materials of child sexual abuse can be stored and shared for years, even decades).
- **PERMANENCE OF THE ABUSE:** Online abuse is usually recorded, stored and shared, which increases the psychological harm to the child, who knows that the materials can keep circulating online to other perpetrators for years after the abuse has ended.
- **EXTORTION:** Once the perpetrator obtains the first material from the child, they can start to pressure them for more extreme materials in return for not sharing the images they already have with the child’s family, school, sports team and so on. Things very quickly escalate out of control for the child, while the abuser’s threats and the child’s sense of guilt maintain the secrecy of the abuse.
- **CROSSOVER ONLINE AND OFFLINE CHILD SEXUAL ABUSE AND EXPLOITATION:** Some perpetrators of online child sexual abuse manipulate or coerce children into physical sexual abuse and facilitate offline encounters that can end badly for their victims. With the widespread ownership and use of smartphones and computers, perpetrators can easily record and share their acts of abuse (after eliminating anything that may identify them).

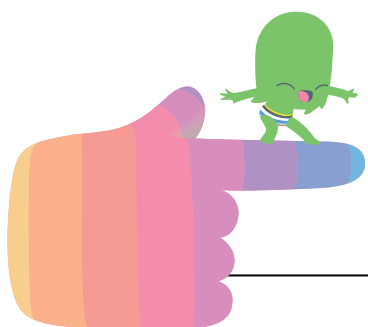
There are different types of online sexual exploitation and abuse of children and adolescents.²² Some of the most relevant are the following:

- Grooming for sexual purposes: Adults or adolescents may create and establish supposed “love relationships” with children and adolescents, usually manipulating them into offline (in-person) meetings where they can perpetrate sexual abuse.
- Sex chatting: Adults mainly, but also adolescents and older children, may systematically look for children online (in multiplayer games or on social media), with whom to initiate conversations. These conversations include inappropriate sexual content (e.g. proposals and sexual practices) and even images of explicit sexual content, which can be very alarming for a child.
- Sexting and the use of private images or recordings for extortion and revenge: Sexting consists of the exchange of pictures showing a person with few or no clothes on, or in sexualised positions, usually between consenting peers. However, peers can use such materials to exploit children and adolescents, demanding money or sex in exchange for not publishing them. These images can also be used by peers as a tool for revenge.
- Live online child sexual abuse and exploitation: With the development of the internet, online offenders can watch live online instances of sexual abuse and exploitation. The adult who is broadcasting the abuse may force a child to comply with the requests of their online abusers, such as taking off a specific piece of clothing or touching themselves in a particular part of the body.

Parents, educators, teachers and professionals who work with children need to have some clear ideas about online risks and prevention:

- Child sexual abuse happens at all ages, but online child sexual abuse requires that the child be of an age to use the technology involved, unless an adult, adolescent or older child abuser is part of the abuse and is documenting it.
- Prevention should start at as early an age as possible, even before children are of an age to be using smartphones or tablets on their own. When they are older and able to surf the internet they should then have enough skills to detect harmful situations and to ask for help.

22 Milovidov, E. (2016), *Parenting in the digital age: parental guidance for the online protection of children from sexual exploitation and sexual abuse*, Strasbourg: Council of Europe, available at <https://rm.coe.int/digital-parenting-/16807670e8>.



3. Signs that go unseen: what are the consequences of child sexual abuse and how to detect it?

3.1. KEYS TO THE DETECTION OF CHILD SEXUAL ABUSE

3.1.1. Adults' inner connection as a precondition for detection

Sometimes, as adults, we know that something is happening to a child but we cannot identify what it is. This is why it is so important for professionals to be properly trained: without the necessary knowledge and skills, they will not detect that children are being abused.

Child sexual abuse can be recognised by the harm it causes. Sometimes professionals see the harm – a child behaving in an unhealthy way – but do not know its origins. The first step, therefore, is learning to look for specific indicators. Adults need to understand that looking at the harm will cause them unease and even anguish. Only when they acknowledge these unpleasant feelings and use them to search for the cause can they be fully able to offer help and support to the child. An adult who is connected to their own inner feelings and perceptions is a precondition for successful and protective detection of child sexual abuse. Such an adult, who can manage their own inner world, will become a model for the child, so the better their inner connection the better the intervention and support they can offer the child and the better the outcome.

In their work of inner connection, adults need to identify and to examine their own stereotypes about violence in general and about child sexual abuse in particular. As these will be addressed in Activities 2 and 3, professionals must have accurate knowledge about violence and child sexual abuse, be able to recognise common social stereotypes and to address them in all circumstances. Only professionals who know the real extent of these phenomena can fully connect to the signs that indicate potential cases of abuse.

3.1.2. Main sources for the detection of child sexual abuse

Child sexual abuse usually happens in private. Perpetrators (whether adults, adolescents or other children) are almost always fully aware of how inappropriate their behaviour is, and victims are usually overwhelmed by the perpetrator's manipulation and by their own feelings of guilt and impotence. Each means of detecting child sexual abuse has its own specificities in relation to other forms of violence.

- **DISCLOSURE:** Usually children do not know how to speak about sexual abuse, and in most cases they only have the feeling that something is bad but they do not know why. In some cases they may speak about situations in which they have been sexually abused without being aware of the gravity of what they are recounting. Handling the situation appropriately is the key to supporting the child in their process and to putting in place all the protection mechanisms. Some basic orientations can be found in Section 3.1.3, "Disclosure: appropriate and inappropriate responses".

- **WITNESSES:** Child sexual abuse is usually well hidden, but sometimes there is somebody (e.g. another child or an adult who was unexpectedly there) who saw or heard something that may trigger the alarm. Witnesses should be treated with respect, and the case must be referred to a specialist child protection service for an appropriate intervention.
- **INDICATORS:** In most cases, children will keep quiet about the abuse, but their bodies, behaviours and social relationships will speak about it in one way or another. Section 3.2, “Indicators of child sexual abuse: developmental consequences of violence”, examines some of the main signs of child sexual abuse.

BASIC RESPONSE TO SUSPECTED CHILD SEXUAL ABUSE IN THE REPUBLIC OF MOLDOVA

According to the *Interagency cooperation mechanism for the identification, evaluation, referral, assistance and monitoring of child victims or potential victims of violence, neglect, exploitation and trafficking* (Interagency VNET Mechanism)²³, all suspected cases of violence, neglect, exploitation and trafficking (VNET) must be immediately registered by professionals with competences in child protection (teachers, educators, social assistants, medical staff and police) and further reported to local child protection authorities.

Identification and registration of the case includes detection by the specialist of the child victim or the child at risk of violence, neglect, exploitation and trafficking (VNET), either through direct interaction with the child or through parents, caregivers or community members. If VNET is suspected, the child protection authority from the relevant area must be notified immediately by telephone and the standard referral form sent there within 24 hours. The child protection authority is responsible for convening a meeting of the multidisciplinary team, which will develop and implement an intervention plan based on a complex evaluation of the case, which will provide the child with a protective environment and access to rehabilitation services.

The first discussion with the child, conducted by the specialist who first identified the abuse or by the specialist to whom the child first disclosed the case, is defined in the Interagency VNET Mechanism as a “protection interview”. It represents the very first discussion with the child in which the specialist establishes the immediate needs of the child and sets out the actions to be performed immediately.

In the Republic of Moldova, the protection interview may be performed by any specialist to whom the child has disclosed the case (e.g. educator, social assistant, medical worker or police representative). The specialist conducting the interview has to follow a recommended procedure to avoid turning it into a forensic interview.



The primary goal of the protection interview is to establish the level of the child’s security. It is not the forensic interview, nor does it replace it. It is very important for this first interview to be carried out by a specialist who is able to establish a rapport with the child. Within the framework of the protection interview, the child must be informed in accessible language about their rights, the available services to help them and the protective measures to which they are entitled. The task of the specialist in the interview is to establish, together with the child, who the person of trust for that child is: this is a person who is close to the child (e.g. member of their biological or extended family, teacher, social assistant, psychologist, doctor, priest), whom the child trusts, whom the child can talk to about a threat or danger, and who is capable of providing support to the child in a difficult situation.

23 Decision on the approval of the Instructions on the interagency cooperation mechanism for the identification, assessment, referral, assistance and monitoring of child victims and potential victims of violence, neglect, exploitation and trafficking no. 270 from 08.04.2014 published in “Monitorul Oficial” Gazette of the Republic of Moldova no.92-98/297 of 18.04.2014. The Romanian version available at: https://www.legis.md/cautare/getResults?doc_id=18619&lang=ro

It is crucial that the specialist distinguishes the protection interview from the forensic interview (the child hearing in special conditions). If the specialist confirms the suspicion of sexual abuse, domestic violence or human trafficking in the protection interview, which is carried out as part of the initial evaluation, members of the multidisciplinary team will implement the urgent protection measures, initiate a criminal investigation (by notifying the criminal investigation authority) and organise the child hearing in special conditions.

3.1.3. Disclosure: appropriate and inappropriate responses

It is very difficult for a child to disclose abuse. The perpetrator has repeatedly told them that the abuse must be kept secret, and that if the child were to speak about it bad things will happen to them. Very often children do not know how to talk about sexual abuse. The activities for children proposed in Chapter 6, *"Kiko and the Hand in the classroom"*, provide a starting point for many children to begin to talk about sexual abuse and to ask for help. Adults need to be aware of the appropriate and inappropriate responses in these cases as children muster all their courage to speak up: they deserve to be acknowledged and supported. The main messages are listed in the following table.²⁴

 APPROPRIATE RESPONSES	 INAPPROPRIATE RESPONSES
<p>1. Believe the child or adolescent and make sure they know that you believe them</p> <p>Perpetrators manipulate their victims into thinking that nobody is going to believe them if they tell about the abuse, so you must make it clear from the beginning that you take what they are saying seriously.</p> <p>For example, "I believe you. Thank you for trusting me and telling me the truth. You're being very brave and you're doing the right thing. I am sorry this has happened to you."</p>	<p>Doubt the abuse or deny it</p> <p>Avoid "Are you sure it was like that? Maybe it was a misunderstanding" or "What you are telling me can't be possible – you are making it up."</p>
<p>2. Insist on the responsibility of the perpetrator</p> <p>Victims of child sexual abuse experience a lot of guilt and shame. Therefore we must insist that they are in no way to be blamed for the abuse.</p> <p>For example, "It's not your fault. If somebody does something to you that makes you feel bad, you are not to blame. No one makes other people treat them badly or hurt them. That person knew they were doing something harmful or wrong. You have nothing to be ashamed of."</p>	<p>Blame the child or adolescent for the abuse</p> <p>Avoid "Why did you let them do that to you? Why didn't you leave? Why didn't you say no? Why haven't you talked about this earlier?"</p>

24 The table is reproduced from Romeo, F. J., & Horno, P. (2018), *Materials for the campaign "El abuso sexual infantil queda fuera de juego" ("Child Sexual Abuse Stays Offside") for the prevention and detection of child sexual abuse in sports*, Madrid: Consejo Superior de Deportes, English version by V. Kennedy & F. J. Romeo, available at www.espiralesci.es/materials-for-the-campaign-child-sexual-abuse-stays-offside-prevention-and-detection-of-child-sexual-abuse-in-sports.



APPROPRIATE RESPONSES

3. Keep calm

The child or adolescent may break down emotionally when disclosing sexual abuse, and they need the trusted adult to stay calm and to reassure them.

For example, "Of course, it has been very tough and I am here listening to you and supporting you. You can talk to me if you like. Is there anything else you want to tell me?"

4. Direct attention to a possible solution, a way out

The child or adolescent who is disclosing a situation of abuse needs emotional containment during the first few minutes, but also a positive and realistic response to the situation. Each intervention will be different depending on the case, but it should be explained to the child or adolescent what they are going to do next and what the trusted adult will do so that they can regain control over their life and be safe.

For example, "You have been very brave to tell me and we are going to work to make sure this does not happen again. I think we now need to talk to A and to B [family members or support people]. You have a rest, and then we can try X or Z [immediate protection measures to stop the abuse from occurring again, and intervention measures, i.e. putting the protection system into place]. What do you think?"



INAPPROPRIATE RESPONSES

React with alarm and express distress

A situation of disclosure is very complex for a child or adolescent, and for them to have to reassure the trusted adult as well is out of place. Adults should find their own space and people with whom to come to terms with their own feelings, but they should not do so with the child or adolescent.

Focus only on the child's or adolescent's new status as a victim

The child or adolescent is a whole person to whom something terrible has happened, but there are many other things in their lives that balance the negative experience of the abuse, including playing sports. Having suffered sexual abuse, they have been subjected to very unpleasant body experiences, which is why physical contact should not be avoided but rather they should be given caresses, hugs and kisses as needed, on their own terms.

Overprotection of the child or adolescent and limitation of their usual activities

It is normal to be cautious at first, but the child or adolescent needs to recover their confidence in their own abilities and in others. They should not be exposed to new dangers, but their normal life should not be restricted either.

Promise something that cannot be done

Before a disclosure, be properly prepared so that you do not commit yourself to something that cannot be done. The child or adolescent has already suffered greatly in their ability to trust others, so you must not create false expectations. You should avoid sentences such as "We are going to fix this" or "Everything is going to be okay", because these things are beyond the actual control of the adult (sometimes things are not fixed or they do not end up okay). Commitments must be clear and realistic, for example, "I'm going to stay with you until we talk to your family" or "A, B and I will be available whenever you want to talk some more, okay?"

3.2. DEVELOPMENTAL CONSEQUENCES OF VIOLENCE: INDICATORS OF CHILD SEXUAL ABUSE

Sexual abuse happens to individual children in very diverse ways, and it can affect them very differently. There are multiple factors that influence how specific acts of sexual abuse affect the child: age of the child, type of abuse, duration of abuse, relationship with the perpetrator, environmental support and so on. Children may reveal emotional suffering, which can have other causes: sadness can be caused by a loss such as the death of their grandmother; anger may arise from a tense situation at home related to their parents' divorce; and aggressiveness can be related to the social situation in one's neighbourhood. However, when a child presents several indicators in different domains, it should sound the alarm for evaluating if sexual abuse is taking place. However, the effects of the sexual abuse, especially in very young children, can remain latent until they reach puberty, when they understand its implications and once they can talk about their sexuality.

Where there is any cause for suspicion, adults have the responsibility to communicate the indicators that worry them to specialised child protection services, who will take measures to investigate the situation. It is not the adult's responsibility to investigate or to prove that the child has suffered sexual abuse. The less an adult (e.g. teacher, educator or trainer) asks, the better it will be for the child and for the process put in place by specialised child protection services. Adults can listen to children speak about their abuse, but they should refrain from further questioning, except for "How are you feeling today?" and "Is there anything I can do for you?"

3.2.1. Physical indicators

Child sexual abuse often does not have physical consequences that may serve as indicators. It can consist of inappropriate and harmful touching (by the aggressor of the child, or by the child who is forced to touch the aggressor), which does not leave physical traces. There are also types of abuse that do not involve contact at all. Despite this, child sexual abuse causes harm at many other levels. Teachers are not technically or legally qualified to examine children's bodies. However, some physical indicators can be related to sexual abuse, such as:

- Scars and external lesions: In cases of aggression, sexual violence is committed with the use of physical violence that can leave marks such as bruises, bleeding and other visible indicators on the skin;
- Difficulties in walking or sitting in some cases: Penetration may hurt the genitals or the anus, or infections around the sex organs may be painful.

There are other indicators that only health-care professionals can identify. However, if teachers and school administrators are informed about them, they can alert the authorities to suspicions of child sexual abuse and report them.

- Irritation or internal lesions in sex organs and the region around them: Before puberty the sex organs are not prepared for full sexual intercourse, so child sexual abuse can leave some irritation or internal lesions in or around them. Forced sex can also cause lesions at any age.
- Infections in the sex organs and the region around them: There can be many reasons for infections and other diseases (from bad hygiene to contagion from a public toilet), but there should always be awareness about them, especially when they do not disappear after treatment.
- Sexually transmitted diseases (STDs): Although they can be transmitted in other ways, despite their name (e.g. during pregnancy, at birth or as a result of poor hygiene or shared clothes), STDs in children are a strong indicator of possible child sexual abuse.
- Pregnancy in adolescence: In adolescence girls are able to become pregnant, even when they have not yet reached full development, and this can mean high risks for the mother and the

baby. Pregnancy in adolescence should be considered as an important indicator for possible child sexual abuse even when the girl says that she wants to be the mother of her boyfriend's baby, for this may be a result of his manipulation or of pressure from their environment.

3.2.2. Psychosomatic indicators

Psychosomatic symptoms are physiological in their effect but have a non-physiological cause (i.e. are not due to an illness or an injury). The pain and consequences are real, however, so children should not be considered to be "faking" or "lying". They may be expressing psychological suffering through the body, usually at the extremes of health parameters.

- Chronic pain or other psychosomatic disorders: Although children may occasionally try to avoid situations with a faked malaise, it is important to take each situation seriously. If the pain is made up, the child should be taught not to lie about medical conditions. But, if the child has seen a health professional, and no concrete cause for the complaint can be found for the real pain, psychosomatic symptoms should be considered as a possible explanation. Typical indicators of child sexual abuse are stomach ache and nausea (the stomach expressing disgust at the situation) and inexplicable headaches (the pain conveying the mental suffering of the abuse).
- Sleep problems: Sleep is crucial in childhood and adolescence as this is when the brain consolidates learning, regulates emotional states and the body continues growing. Good sleep is essential for healthy development, and child sexual abuse can affect sleep in different ways. Nightmares disrupt sleep, and can adversely affect the sense of safety when they involve reliving the situations of abuse. Another key indicator is the loss of sleep time when children have difficulty dropping off to sleep (insomnia), which may be linked to a fear of nightmares or real concerns about being abused during the night (when abuse in the home usually takes place). The other extreme is excessive sleep, when the brain switches to a protective mode that considers it too dangerous to be awake.
- Eating disorders: Healthy eating habits are also indispensable for development in childhood and adolescence. When the appetite is affected, it can indicate that something serious is happening at the emotional level. Again, eating disorders are about extremes: not eating enough (anorexia) or eating too much (especially bulimia, but also obesity). Although eating disorders can have multiple origins, in many cases there is an unconscious mechanism in children (or adolescents, in whom such disorders are more common) that tries to avoid the abuse by making the child's body "undesirable" – "too thin" (or, especially in girls, "too immature") or "too obese" – for abusers.
- Elimination disorders: Early childhood is the usual period when elimination control (urination and defecation) manifests itself, and it has a relevant emotional dimension. When personal safety is at risk, that control can be lost (in childhood, but also at any age). Therefore, urine incontinence (enuresis) and faecal soiling (encopresis) require some intervention to exclude other causes, especially when children have been able to control elimination for some time and seem to have reverted to a previous stage (in some cases it can be considered as a regressive behaviour: see Section 3.2.5, "Behavioural indicators"). At other ages sustained diarrhoea or constipation can be related to the anxiety provoked by sexual abuse; in such cases any possible physiological causes need to be ruled out.

3.2.3. Emotional indicators

Sexual abuse is a very painful experience for a child, and their manipulation by the person who abuses them can give rise to many different feelings. Sustained unbearable emotions can be emotional indicators of sexual abuse.

- **Guilt and shame:** In most cases, the perpetrator ensures that the child keeps the secret by blaming the child for the abuse (although the responsibility always lies with the abuser, who knows that they are doing wrong and are trying to hide it), or by other forms of manipulation (e.g. the child may feel bad about being treated in a special way in return for doing things that they do not understand). Children who blame themselves frequently may be displaying guilt and shame related to sexual abuse.
- **Anxiety, fear and excessive worrying:** The child can become worried about possible future episodes of abuse, or just seeing the abuser again, or of the consequences either of keeping the secret and continuing to suffer abuse or of revealing the secret and not being believed. This emotional distress can permeate other activities and situations that are unrelated to the abuse (e.g. exams, going out, engaging in sports).
- **Avoidance of certain places, people or situations:** After suffering sexual abuse, children's brains can develop a fear of the stimuli that surround the abuse or that remind them of it. These stimuli can be places (similar to where they suffered the abuse, e.g. closed rooms), people (evidently, the aggressors themselves can elicit avoidance, but also unrelated people who remind the child of the abuser or who have personal traits that in the child's mind make them dangerous) or situations (especially being alone). In some cases, these avoidance efforts can become phobias (e.g. intense fear of situations that are not in themselves dangerous).
- **Depression and low self-esteem:** When children suffer sexual abuse, it is logical that they feel bad about themselves and that they have low expectations of life and of their own abilities. However, it is important to differentiate between sadness and depression. Sadness is a healthy, although unpleasant, emotion that helps one to process a loss or a setback, and it slows down one's pace of life so that a new and undesired situation can be incorporated into one's emotions. Depression, however, especially in children, involves losing interest in pleasurable activities like playing or relating to one's peers.
- **Anger, rage and aggression:** Children may also display their frustration at the abuse through anger and aggressive outbursts, with reactions that are disproportionate to the situation (but that can be understood as a way of expressing their rage in any setting, as they have not been able to do during the abuse). In children and adolescents, increased irritability is considered an indicator of depression (see previous point).
- **Submission:** As a result of the manipulation of the perpetrator and in relation to depression, children can become submissive, unable to defend themselves or to ask for help. This is a symptom for which children should never be blamed or held responsible for because of the abuse they have suffered. Passivity is a wound that seeks to heal and repair, not a defect to be criticised.
- **Problems with emotional control:** Sexual abuse implies that the child loses control of their body as a result of the violence committed against them by the perpetrator. One of the consequences may be developing problems around emotional control. One extreme is excessive control (children who need to be sure about every aspect of their environment in order to feel safe; and, as that goal is impossible, who live in constant fear, in a continual effort to control as many aspects of their environment as they can) and the other extreme is a lack of control (children who cannot calm themselves or who are unable to manage their emotions).

3.2.4. Cognitive indicators

As a consequence of the distress of the brain in trying to manage the emotions caused by the abuse, the child's cognitive functions can be seriously affected. While they can have multiple origins, cognitive affectation can be an indicator of child sexual abuse.

- **Delay in cognitive development:** Every person has different abilities, and every one of them has the right to achieve their highest potential. However, if the brain is dedicated to dealing

with the emotional turmoil caused by sexual abuse, fewer resources will be oriented towards its cognitive development. This means that victims of child sexual abuse very often display a delay in their cognitive development, which can be permanent. It does not mean that every child who shows symptoms of cognitive challenges has been abused. Moreover, not every child who has been abused will have low cognitive function, but in many cases their cognitive development will be slower than it might have been without the abuse.

- **Attention deficit:** The child who has suffered abuse can have problems concentrating on specific tasks. In some cases the brain may just be trying to escape a reality that has been too hard and difficult to process but, in others the brain may be paying attention to many different events that it considers relevant to survival: the expression of the teacher ("Is she angry? Will she be able to protect me?"), the movement of a classmate ("Will somebody attack me here? Why did that child look at me? Are they going to see my secret?") or even sounds from outside ("Did a car pass too close to the school? Is there a suspicious noise somewhere?"). The effect is the same: the child is not paying attention to the things that are considered relevant by adults (the class, instructions, exercises), which can affect their performance in class, in the playground and in other activities.
- **Low performance or even academic failure:** Children who have suffered sexual abuse tend to have serious problems with their performance at school as a result of cognitive delay and attention deficit in the brain, as well as emotional difficulties in the form of depression, anxiety or outbursts of rage. If the sexual abuse happens during early childhood in kindergarten, these children's integration in school and their academic progress may be compromised.
- **Lack of curiosity:** Healthy children are by nature curious. They may be curious about unexpected domains, so if they are not interested in writing or in school it does not mean that they cannot have a passion for other interests such as sports, games or animals. However, when children lack curiosity altogether, it may mean that their brain is focusing on functions such as anxiety, irritability or despair.

3.2.5. Behavioural indicators

Sexual abuse can cause so much harm at every level, especially in relation to the emotions and to brain regulation that one of its consequences is the way in which it affects behaviour. In most cases children act out their pain in negative and destructive behaviour. However, these behaviours need to be addressed not only as something to be corrected, but also as a cry for help, often from children who are not aware about the level of their suffering. Therefore, it is important to understand those behaviours as symptoms and not as a personal challenge to adults.

- **Regressive behaviour:** Especially in the early on in the abuse, the child's brain may try to go back to a happier time before the abuse, and this can lead to a regression in behaviour such talking as a baby, losing control of elimination or being unable to carry out activities that had previously been mastered.
- **Difficulties in self-soothing and self-regulation:** Children of kindergarten age are very young and have difficulties self-regulating; they require the presence of a strong and compassionate adult to set limits in their lives and to show them warmth to calm them. Sexual abuse can cause many emotional problems that make self-regulation more difficult.
- **Problems with impulse control and difficulties with norms:** The lack of self-regulation can also involve difficulties in being consistent in their actions, which means that children can have problems controlling their impulses. This can make it difficult for them to follow rules, which creates new problems for them as they challenge the norms. High conflict with the norms suggests that the child is in a deep state of suffering. Such ways of acting should be addressed at their core, to reduce the child's anguish rather than just to try to modify their behaviour.

- **Aggressive behaviour:** The emotions of anger and rage can lead to aggressive behaviour against other people. Sometimes it manifests itself as a general aggressiveness towards every person, child or adult. In situations of sexual abuse, children may unconsciously choose to direct their aggression against “safe adults”, because they feel they can show their feelings without receiving aggression in return, whereas directing that aggression against the perpetrator could cause them more problems.
- **Drug and alcohol use and abuse:** While substance use and abuse is rare in kindergarten children, it is a very common way to regulate painful emotions in adolescence. Substance use and abuse must be understood as a means of “self-medication”, a technique of drowning one’s pain in chemicals (or any addictive behaviour).
- **Self-harming and suicidal behaviours:** Of all aggressive behaviour, the most worrying is self-harming. While aggression against other people is worrying, at least the child is externalising their pain. When aggression is internalised, directed against themselves, the child has lost any hope of receiving external support and is trying to reduce their pain by inflicting upon themselves a pain that they can modulate, as a way of gaining control of their emotional world.
- **Lack of problems at all – the “invisible” child or adolescent:** As children grow and develop, they have to make many mistakes before they become responsible adults. Healthy children have age-appropriate problems, and create various kinds of problems as they grow up. A child or adolescent who never causes any problems, who does not draw attention to their actions and who remains “invisible” to adults may be a cause for concern, as children who have suffered sexual abuse very often try to deflect any attention from themselves, because adults (such as the perpetrator) can be a source of violence or a risk for more unpleasant situations (if they detect the abuse, and the perpetrator carries out the threats they have used during the abuse). Therefore, teachers need to ensure that they know each of their pupils to some extent, and that they can identify those who have problems (and act to help them) and those who hide them.

3.2.6. Sexual indicators

During the kindergarten years children test different aspects of sexuality that are appropriate to their age, usually publicly in a game: “kissing on the lips”, having “boyfriends” and “girlfriends”, and even “weddings” in the playground. At these ages they usually ask about reproduction and the sexual organs; they should be given simple but accurate information in response to their questions. However, sexual abuse can disrupt normal affective and sexual development, giving rise to indicators that may be a clue to adults who know how to look for them. Again, it is important to identify these indicators as symptoms, and to provide the necessary care and attention to the child who displays them, while at the same time protecting other children from possible abuse.

- **Inappropriate sexual behaviour:** Children who have suffered sexual abuse are confused by their own painful experiences and are often unaware of healthy sexual behaviours. They may behave in ways that cause concern among adults such as engaging in compulsive or public masturbation or oral-genital caresses or regarding other children and people in general as sexual objects. These are behaviours that they cannot have discovered by themselves, which means that they have learned it from an older child or an adult.



NORMAL SEXUAL BEHAVIOUR IN CHILDREN AGED 3–6

Children are complete human beings, even though they still have to grow and develop all their dimensions. They also have a sexual dimension that they need to explore in healthy and protected ways. Some aspects of normal sexual behaviour include:

- asking for the names of the sexual organs;
- asking about the differences between boys and girls, and men and women;
- showing an interest in where babies come from (pregnancy, birth);
- having “boyfriends” or “girlfriends” of their age, and kissing as public and normalised behaviour;
- exploring their own genitals alone or with other children their age (e.g. playing doctors and nurses), as long as it is playful and every child enjoys it;
- masturbating as a means of physical pleasure, as long as it is done in private and without causing themselves any harm.



INAPPROPRIATE SEXUAL BEHAVIOUR IN CHILDREN AGED 3–6

Children who have suffered sexual abuse can show some behaviours that are problematic. The appropriate response of adults to inappropriate sexual behaviour in children is to approach the child with respect and to try to give them a basic education about sexual matters, and, if needed, to refer them to a specialist for further intervention. Some worrying indicators are:

- using inappropriate words to name sexual organs or sexual activities;
- displaying inappropriate knowledge of sexual behaviours (at their age they should not be able to know how intercourse takes place, and they should not have seen pornographic materials);
- talking about having “boyfriends” or “girlfriends” of very different ages or even adults, and kissing with an open mouth;
- forcing the exploration of genitals with other children, especially when it causes them unrest and discomfort;
- masturbating compulsively, without control or in public, and giving themselves bruises or causing irritation.

Sexual aggressions against other children or adolescents: Children who have experienced sexual abuse may try to abuse other children, sometimes out of rage at what they have suffered, and sometimes because the limits of their sexuality have been broken. This is a very serious indicator, and there must be a thorough investigation by specialists in child sexual abuse to ensure that all the children involved are safe now and in the future. Some of these symptoms may appear much later, for example on entering adolescence, when the young person may also experiment with aggression against younger children or their peers.

- Age-inappropriate sexual knowledge: When children are sexually abused, they learn about aspects of the human body and of sexuality that they could not have known in any other way. Thus it is important that children learn the correct names of the genitals and of all parts of the body, as, while talking about them, they may reveal knowledge that they should not have, which must be investigated.
- Risky sexual behaviour: When children have lost their inner boundaries in relation to sexuality, they may display risky sexual behaviour, offering themselves as victims or not being careful about their own safety and well-being. These actions can never be an excuse for abusing them, or for considering that they are just provoking sexual encounters. On the contrary, such behaviours must be taken very seriously and the child must be given protection.

3.2.7. Social and relational indicators

The ability to create and maintain healthy social relationships is seriously compromised by sexual abuse, as it involves a violation of personal limits. As children most often suffer sexual abuse at the

hands of people within their circle of trust, the manipulation of them by a trusted person also undermines their ability to trust safe adults, and may lead to extreme behaviour such as distrust of all people or compliance with strangers. These indicators can be overlooked, and the child considered “weird”, where in many cases they should convey an alarming message.

- Difficulties with personal boundaries: Human beings have different levels of contact with others depending on the level of intimacy between them. We have little physical and emotional contact with an unknown person in the street; we may shake hands with a colleague and ask polite questions about their family; we may hug a close friend and share personal issues; we kiss our partner and usually share our most personal revelations with them. Children who suffer sexual abuse, however, lose the ability to manage these personal boundaries: they may be too intimate and open with people they cannot trust, too cold and distant from those who might become their friends, or invade others’ personal space (for which they are seen as aggressive or disrespectful). All these behaviours can be detrimental to their social life.
- Difficulties in attachment and intimate relationships: As a result of the lack of social skills, which have been damaged or blocked by manipulation during the abuse, children who have suffered abuse can have serious difficulty in establishing healthy intimate relationships, including with their attachment figures (either because they participated in the abuse or because they were not able to see it earlier).
- Social isolation: Social isolation, which is related to all the previous social indicators, is a logical consequence of a lack of trust in people and inadequate social skills. However, there is another aspect of this indicator: perpetrators usually try to isolate their victims, to make sure that nobody will believe them and that they remain captive to their abuse. In many situations perpetrators present themselves as the only person who cares for the child, creating a damaging confusion in the child’s mind between “care” and “abuse”. Kindergarten teachers must be especially attentive to isolated children (e.g. those who are new to a school, those who are not socially active, those who lack confidence in themselves), as they can very easily become victims of different types of abuse (including sexual abuse), if they are not already suffering from abuse.
- Repetition of violence patterns, including re-victimisation: Children who grow up in situations of abuse can internalise patterns of violence and assume that this is the way of relating to others, as they have no other models. However, the idea is often understood in terms of children (especially boys) who have been abused becoming perpetrators themselves, whereas that happens in only a small proportion of cases. Many children will repeat their role of the victim, becoming victims in other domains of their lives. However, children who have suffered abuse and who talk about it can free themselves of its effects, growing up into adults who are very safe for children. When children cannot speak about the abuse, they are at risk of suffering further from its effects. This is why it is critical to focus the prevention of child sexual abuse on affective and sexual education to ensure that every child can find the words to talk about it and a person whom they can ask for help.
- Anti-social behaviours: Emotional distress and the lack of positive social relationships can lead children who have been abused to infringe social norms and to express their conflict through anti-social behaviours such as destroying public property or looking for a fight. These are symptoms of extreme pain, and they should be addressed as such and not regarded as mere misbehaviours.

3.3. FORGETTING IN ORDER TO SURVIVE: DISSOCIATION IN CHILD SEXUAL ABUSE

The human brain has different ways to cope with stressful situations. Sexual abuse can trigger some of the strongest responses. The first physiological reaction to the invasion of privacy is to fight. However, children do not normally understand the abuse: disoriented by it and by the manipulation of the perpetrator, and out of fear they do not oppose the abuse. The second possible reaction is to flee, to avoid the situation, but the perpetrator has usually created a context for the abuse, which the child cannot escape. The third and most primitive response is to freeze, to shut down the nervous system so as to block the consciousness from the abuse – but the body still suffers it and keeps the score in the unconscious. Dissociation is the mechanism used to manage an overload of emotions so painful that the nervous system cannot deal with it, and the consciousness becomes fragmented. Part of it will keep functioning, taking care of “normal” life, while the other parts carry the pain in secret, giving rise to symptoms that the child themselves cannot understand. Dissociation is better understood in terms of examples.

A girl needs to trust her father, who takes her to school every morning and plays with her in the afternoon. But her father also abuses her during the night. Then her nervous system splits into two: one part goes with her father to school and the other part – hidden and unconscious – fears her father and the secret she is forced to keep. The conscious part is unaware of the abuse; it does not “remember” it. But the dissociated part appears as aggressiveness and defiance of the norms at school. The girl becomes more isolated as she continues to suffer the abuse.

The mother who cooks for the whole family is the same mother who gets drunk when the father travels because of work, and who takes the boy into her bed to abuse him. The boy’s brain feels so overwhelmed that it dissociates the experience. This means that the boy apparently “forgets” the abuse, but he feels sad all the time, does not concentrate at school and develops a fear of night-time.

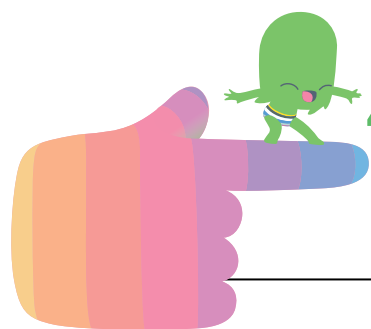
Dissociation does not happen always, however, as it is the last resource of an overwhelmed nervous system. When children can identify situations that make them feel bad and ask for help immediately, dissociation will not be necessary. But, when a child undergoes sexual abuse repeatedly, and does not know how to react or how to ask for help, they may dissociate as a coping mechanism. This is why it is so important to engage in prevention activities with children, to enable them to ask for help as soon as possible, so that they do not have to deal with these severe consequences.

At a more technical level, there are three types of dissociative symptoms:

- **Amnesia:** The conscious brain does not remember events, whether it be the stressful events of the abuse or other unrelated events.
- **Depersonalisation/derealisation:** The person has a sense of not being themselves, as if they were floating or out of reality. These symptoms can also include the impression that it is the world that becomes unreal and vague.
- **Fragmentation of consciousness:** The mind becomes fragmented, with disconnected inner parts, usually one that helps the child to function in everyday life and others that remain unconscious but that affect normal functioning with unexpected behaviours.

Dissociation is a common phenomenon in children who have suffered sexual abuse, but it is difficult to identify, and it requires specially trained professionals to establish a solid diagnosis. However, some indicators of dissociation should arouse suspicions.

- The blank look: There is the daydreaming of a child who is happily thinking about things they like, usually with a smile in their face, and this is healthy. Then there is the blank look that reveals no thoughtful activity, as if the child were disconnected not only from the external world, but also from their inner life. This may be a sign of dissociation.
- Not remembering having done things: Teachers and parents are quick to identify when children are lying, as what they are saying is clearly inconsistent with the reality. However, when children honestly do not remember having done things, especially actions that have no undesired consequences, dissociation may be taking place. For example, lying about breaking their sibling's toy is logical to a degree, but not being able to remember who has drawn a picture when it is clear that the child has done it themselves, and it is worthy of praise, can be an indicator of dissociation.
- Extreme changes in mood, behaviour or taste: Children can change their mood quite quickly, and develop new behaviours or tastes in a short time. But, when children do not remember such changes – when they deny that they were sad a few minutes ago while they still have tears in their face, or when they alternate vigorously between liking one toy and rejecting it – it can be a case of dissociation.
- Insufficient progress, even in safe conditions: When children are safe, especially after difficult experiences, they usually blossom after some time. However, if they do not show progress, it may be that only the conscious part is receiving the care, while the dissociated parts are not receiving the attention they need, so they block the overall advance.
- Multiple previous diagnoses, without success in the interventions: If diagnoses and interventions address only the conscious part, it may be that the dissociated parts are not being cared for, and they can undermine any attempt to heal because the root causes are not being addressed.



4. *Kiko and the hand in action:* step-by-step training for kindergarten teachers

4.1. KEYS TO FACILITATING TRAINING FOR KINDERGARTEN TEACHERS

4.1.1. Clarifying the training objectives

Facilitators and organisers need to be clear about the objectives and the scope of the training. Depending on the time and structure, training can vary significantly. However, at least the following objectives should be considered in basic training for kindergarten teachers:

- Developing a full understanding of child sexual abuse as a form of violence (and a crime): This involves comprehending that the key to child sexual abuse is power (and not only sex), and reviewing the concept of violence in a way that works effectively.
- Cultivating appropriate awareness of and emotional responses to the issue: Child sexual abuse is a taboo subject in most social and professional cultures. The participants may therefore have learned social responses that are ineffective or even dangerous for the well-being of the children with whom they work, including denial, paralysis and avoidance. The training aims to help elicit emotional responses that are safer for the participants and for the children with whom they are in contact.
- Incorporating keys to detection: Child sexual abuse is usually hidden by both perpetrators and victims, which makes it very difficult to detect. However, there are basic indicators that every professional working with children should be aware of. These indicators can lead to the detection of cases of child sexual abuse – and to the protective intervention required.
- Integrating basic responses when cases are detected or revealed: Participants need to leave the training with clear basic guidelines for intervention from a kindergarten level, from responding to a child who discloses abuse to taking steps to refer a case if indications of child sexual abuse are present.
- Exploring effective ways of facilitating prevention activities at all levels: Participants will be interested in facilitating sessions with children in their classes and programmes, and they need activities that are clear and that convey protective messages. As some awareness raising will be needed involving other adults, these conversations should be rehearsed in advance, to improve the reception of prevention activities with children by the relevant professionals (e.g. educators, school managers, social services, NGOs) and parents.
- Initiating networking among the participants: Child sexual abuse is a difficult topic, and there are social limitations on discussing it openly. Creating a network of professionals who can speak about it among themselves, share materials and ideas, and offer technical and emotional support in the process is a core element in ensuring the sustainability of the protection system and the replication of the training.

Keeping all these objectives in mind will help in the organisation of the details of each training, so that each activity contributes its specific objectives to the general goal. If activities are eliminated,

substituted or introduced, there should be a careful evaluation of their pertinence to the general objectives.

4.1.2. Methodological framework: an experiential approach

To achieve its objectives, the training needs to be facilitated with the guidance of the following methodological principles.

- The facilitator must have training and experience in training adults. The issue of child sexual abuse is complex, and can elicit difficult and unexpected responses in the participants. Therefore the facilitator needs to feel comfortable with groups of adults, and to be aware of the possible group dynamics and the need to adjust the training. This aspect of the training is not covered in this manual.
- Participants in the training must be well versed in their profession, especially in working with children. The training can be adapted to different participant profiles, but it is not an introductory module for working with children in educational settings. Participants need to be able to deal confidently with issues that commonly arise in individual children and in groups of them, as facilitating sessions for the prevention of child sexual abuse may give rise to unexpected reactions.
- The facilitator and the setting should model the competencies expected in participants with their own students. Children usually find it difficult to talk about child sexual abuse and may not choose the best moment to do so. If the adult is not responsive enough, the child may decide not to speak about it any more. This is why it is crucial to respond well to a child on their first approach. During the training of trainers, the facilitator should model the attitudes that adult participants are expected to display in their role as teachers or educators. Some of the competencies required of facilitators are facilitating participation, responsivity (the ability to address a person's needs at a specific moment, which may be different from what they actually request), empathy (the ability to appreciate what another person may be feeling, without losing the professional perspective) and emotional safety (including safe limits). The place for the training should inspire a sense of safety, as the training will be intense: comfortable chairs and the physical arrangement of the chairs, adequate temperature and light, and clean bathrooms. The facilitator will then be able to show participants how to create safe and comfortable environments for their students before starting the activities with them.
- The training should be experiential. A technical presentation of the contents alone will not be effective in developing the knowledge and attitudes needed to prevent, detect and intervene in cases of child sexual abuse. Violence is so pervasive that it may be normalised, so participants need to become aware of their own personal stories, which may include situations of violence, so as to be able to understand the dynamics of power and abuse and to see them in the lives of their students.
- The training should remain an educational setting and not become a therapeutic space. Becoming aware of violence in general, and of child sexual abuse in particular, can be overwhelming at times, which is why the facilitator has to maintain a safe space throughout the sessions, to modulate emotional reactions and to refer to appropriate spaces if necessary. However, as stated in Section 1.4, "Experiential training: towards deep awareness", experiential training involves working towards deep awareness, but the training should not become a therapeutic space. If participants feel overwhelmed by cases they have known, or become aware of their own episodes of abuse, they should be calmed as far as possible and offered some rest time, preferably in the company of a trusted person (e.g. a friend at the training or a member of the organising team).
- Participants need to leave the training with clear concepts and safe activities to take into their professional practice. The facilitator should verify that each idea is well understood, posing

questions and proposing cases for the participants to show what they have learned. The practical exercises can also be used to provide feedback about their performance in different tasks (especially during the disclosure, which is the most difficult part of all).

- The technical requirements are minimal. The whole training can be carried out in an adequate room, with writing materials and a support (e.g. marker pens in different colours and a whiteboard or flip chart) and copies of selected materials. This is the way the training should take place in schools and other education facilities to show the efficiency of the activities. In some situations, a presentation using a computer and a projector may be helpful to explain something in more detail. This is optional.

4.2. STEP-BY-STEP TRAINING IN TWO DAYS

Training can take diverse formats. It is recommended that it be programmed in blocks of at least 3–4 hours because of the experiential approach. In that time the participants can reach a deep level of introspection and need to be able to process the relevant aspects of each activity. Each activity builds on the previous ones, and the training will work better if the order is followed. However, the programme can be adapted to different situations. For teachers who attend the training after work, shorter sessions will be more useful (e.g. four to six weekly sessions); for professionals who have free days for training, two to three full days will be more appropriate. The main structure of a two-day training is outlined as follows,²⁵ but each facilitator will need to adapt it to their own style and to the context of the training. Each core activity is given here with its pedagogical objectives, to help understand the flow of the training (full details are given in Chapter 5). Some basic activities that are common to all trainings (institutional introductions, presentation of the practical aspects of the workshop, etc.) are described here, as they are important for the flow of the training.

Day 1	
09:00–09:15	Arrival of the participants
09:15–09:30	Welcome remarks (details of organisations involved and other authorities) and formal introduction of the facilitator (titles, post and experience)
09:30–10:10	Activity 1: An experiential introduction Objectives: <ul style="list-style-type: none"> ▶ The participants get to know each other. ▶ A climate is created in the workshop that facilitates participation. ▶ The participants prepare for the internal reflection needed for the experiential exercises.
10:10–10:15	Presentation of the practical aspects of the workshop Objectives: <ul style="list-style-type: none"> ▶ Providing clarity about the objectives and the methodology of the workshop. ▶ Presenting the practical aspects of the workshop and its logistics. • The facilitator and the hosts explain the practical aspects of the workshop: times, pauses, spaces (bathrooms), contents and so on. • The facilitator explains the practical aspects of the participation such as posing questions whenever they arise, asking for clarification and the importance of participating in the activities.

²⁵ This was more or less the structure of the pilot training organised by the Council of Europe in Chişinău on 10–11 October and 2019 and 23–24 January 2020, with some adjustments to improve the flow of contents.



METHODOLOGICAL TIPS

- It would be useful to state that the training tackles a difficult issue, and that some participants may feel overwhelmed at any point. They should feel able to ask for emotional support from either the facilitator or other members of staff.

10:15–11:45	Activity 2: What our awareness tells us about our history: an experiential dynamic about the concepts of violence, maltreatment and sexual abuse Objectives: <ul style="list-style-type: none"> Getting an operational definition of violence. Identifying the link between violence, power and affect. Understanding sexual abuse as a form of violence.
11:45–12:00	Coffee break
12:00–13:00	Activity 3: Myths and reality about child sexual abuse Objectives: <ul style="list-style-type: none"> The participants learn the facts about child sexual abuse. The participants learn to identify myths about child sexual abuse and are able to refute them.
13:00–14:00	Lunch
14:00–15:00	Activity 4: Detection (I): consequences and indicators of child sexual abuse Objective: <ul style="list-style-type: none"> The participants are able to understand and identify the consequences and indicators of child sexual abuse.
15:00–15:30	Activity 5: Detection (II): communication of indicators of child sexual abuse in the Republic of Moldova Objective: <ul style="list-style-type: none"> Clarifying the steps for the communication of indicators of child sexual abuse in the Republic of Moldova.
15:30–15:45	Coffee break
15:45–16:45	Activity 6: Detection (III): appropriate and inappropriate responses Objective: <ul style="list-style-type: none"> Practising the appropriate responses when faced with a disclosure.
16:45–17:00	Close for the day Objectives: <ul style="list-style-type: none"> Receiving initial feedback about the workshop. Clarifying objectives for the second day. The participants are asked to share the things they have found most useful on the first day of the workshop and what they would have done differently. The facilitator replies to each of them, explaining things that might have been unclear.



METHODOLOGICAL TIPS

- In general, it is useful to keep this part short, and to restrict it to very pressing doubts that might surface.
- It would be helpful to remind the participants that the training can be intense, and that they should take care of themselves and rest during the evening.
- Participants should be informed that, in case personal issues have arisen (about sexual abuse or other forms of maltreatment suffered by themselves or their loved ones), the facilitator will stay behind for a while after the training to talk to participants.

17:00

End of Day 1

Day 2	
09:00–09:30	Arrival of the participants
09:30–09:50	<p>Questions about concepts and experiences from Day 1</p> <p>Objective:</p> <ul style="list-style-type: none"> ▶ Clarifying ideas from Day 1. • The facilitator opens up the space to receive questions and comments about the concepts and experiences explored during Day 1. If there are not enough comments, the facilitator poses questions to verify that the content and ideas covered on Day 1 have been understood correctly.



METHODOLOGICAL TIPS

- Having spent some time thinking about it on their own, or in conversation with their partners or friends, some participants may be worried about their own children or about students in their class. Because of that, it is important to respond sensitively to the participants, taking their emotions into consideration and modelling the appropriate response that would be expected from them if they were to be approached by children who wish to disclose abuse. If the facilitator replies calmly and empathically, validating the participant's feelings and giving them advice on how to manage them, participants can learn how they should respond to children who come to them with difficult issues such as child sexual abuse.

09:50–10:45	<p>Activity 7(A): How to facilitate sessions with children (I): Session 1 – Introducing Kiko and the Underwear Rule; Session 2 – “Good love” and “bad love”</p> <p>Objectives:</p> <ul style="list-style-type: none"> ▶ Making clear the objectives and methodology of the sessions with children. ▶ The participants are able to conduct sessions with different activities about Kiko and the Underwear Rule. ▶ The participants are able to conduct sessions with different activities about “good love/affection” and “bad love/affection”. • Methodology – Session 1: Introducing <i>Kiko and the Hand</i> • Methodology – Session 2: “Good love” and “bad love”
10:45–11:30	<p>Activity 7(B): How to facilitate sessions with children (II): Session 3 – Trust and secrets</p> <p>Objective:</p> <ul style="list-style-type: none"> ▶ The participants are able to conduct sessions with different activities about trust, intimacy and secrets. • Methodology – Session 3: Trust and secrets.
11:30–11:45	Coffee break

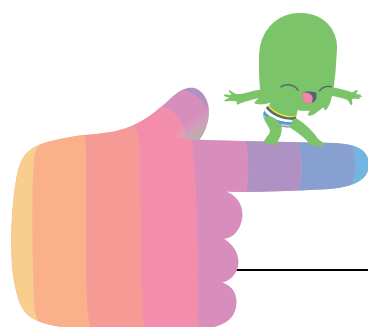
11:45–13:00	Activity 7(C): How to facilitate sessions with children (III): Sessions 4 and 5 – Asking for help and the session with parents Objective: <ul style="list-style-type: none"> ▶ The participants are able to conduct sessions with different activities about asking for help. ▶ The participants are able to conduct sessions with parents and to involve them in safe conversations with their children. • Methodology – Session 4: Asking for help. • Methodology – Session 5: “This is what we learned from <i>Kiko and the Hand</i>” – Joint session with parents
13:00–14:00	Lunch
14:00–15:15	Activity 8: Schools as allies – Preparing to introduce the sessions Objective: <ul style="list-style-type: none"> ▶ Identifying the potential difficulties of introducing the sessions into schools from school managers and staff, and knowing how to respond to these.
15:15–15:30	Coffee break
15:30–16:30	Activity 9: Parents and families as allies – Preparing to introduce the sessions Objective: <ul style="list-style-type: none"> ▶ Identifying the potential difficulties of introducing the sessions into schools from parents and families, and knowing how to respond to these.
16:30–16:45	Evaluation of the training by the participants <ul style="list-style-type: none"> • The facilitator conducts a session for the evaluation of the session by the participants.



METHODOLOGICAL TIPS

- Different forms of evaluation are possible, depending on the format of the training. The facilitator should choose one that is appropriate for the context, and that uses a methodology they feel comfortable with, from evaluation questionnaires to more participatory approaches.
- If the evaluation is done in writing, a good way to close the session can be to ask for five to eight people to say a few words about what they will take from the training into their work. The facilitator can validate each comment and thank each participant for their opinion (and take mental notes for future training).

16:45–17:00	Close the training (by representatives of the organisations involved and other authorities)
17:00	End of Day 2



5. Raising awareness in professionals: activities with teachers

This chapter gives full details of all the activities to be carried out with the participants of the training to achieve the general objectives. Each activity is described with four main points:

- **OBJECTIVES:** These describe the specific objectives of each activity – the main goal.
- **METHODOLOGY:** This provides the general structure of the activity, with a step-by-step guide to the process, and includes some methodological tips.
- **KEY CONCEPTS:** When the activity ends, each participant must have understood the key concepts listed. Most of these refer to Chapters 2 and 3, so the facilitator must ensure that they have understood and processed all the key concepts before the activity.
- **MATERIALS:** This is a list of the things that the facilitator and organisers need to prepare before proceeding with the activity.

5.1. ACTIVITY 1: AN EXPERIENTIAL INTRODUCTION

5.1.1. Objectives

- The participants get to know each other.
- A climate is created in the workshop that facilitates participation.
- The participants prepare for the internal reflection needed for the experiential exercises.

5.1.2. Methodology

- **DURATION:** 30–50 minutes, depending on the number of participants (10–15 minutes for the work in pairs and the rest for the round of introductions).
- The facilitator asks the participants to pair up with a person whom they do not know, or whom they do not know very well. The facilitator then gives the following instruction: “You are now going to introduce yourself to the other person, telling them your name, who gave it to you and why. Remember the name and story of the other person, as you may have to present him or her.” The participants have 2–3 minutes for this exchange.
- The facilitator asks the participants to find a second person to pair up with. Then the facilitator gives the following instruction: “Now you are going to introduce yourself to the other person, telling them your name and the last time you got angry at someone, who it was and why. Remember the name and story of the other person, as you may have to present him or her.” The participants have 2–3 minutes for this exchange.
- The facilitator asks the participants to find a third and final person to pair up with. Then the facilitator gives the following instruction: “Now you are going to introduce yourself to the

other person, telling them your name and the last time someone made you smile, who it was and why. Remember the name and story of the other person, as you may have to present him or her.” The participants have 2–3 minutes for this exchange.

- The facilitator asks the participants to go back to their seats, and proceeds to ask each person in order who they want to introduce them to the group – their first, second or third partner. The partner then tells the group the person’s name and shares the story the person has told them. This is done in order around the circle until the round is closed.
- The facilitator reflects with the group on how the most important things in our lives (who we are, what makes us angry or happy) usually come from the people who are most important to us (our affective references).



METHODOLOGICAL TIPS

- To create a warm and welcoming climate, the facilitator can share their own story, especially about the origin of their name. This is not the moment for an official introduction, with titles and experience, which should have been done earlier during the formal welcome.
- Some people may be chosen several times (to present more than one of the stories), so not every participant will be presenting somebody, and that is fine.
- If a participant asks to be addressed in a particular way, the facilitator should try to use the preferred name or nickname when addressing them.

5.1.3. Key concepts

- The training is experiential, which means that active participation is required to develop the necessary awareness to tackle the difficult subject of child sexual abuse.
- The most important things in our lives (who we are, what makes us angry or happy) usually come from the most important people (our affective references – our partner, our family, our friends).

5.1.4. Materials

- A room big enough for participants to move around in and to talk in pairs, and then to return to their seats and to be able to sit in a circle where they can see each other.

5.2. ACTIVITY 2: WHAT OUR AWARENESS TELLS US ABOUT OUR HISTORY

5.2.1. Objectives

- Getting an operational definition of violence.
- Identifying the link between violence, power and affect.
- Understanding sexual abuse as a form of violence.

5.2.2. Methodology

- **DURATION:** 75–90 minutes.
- The facilitator poses the next question to the participants: “In your childhood, what did your family do when you did something they did not like?” Then they will write on the board what each participant says, placing each answer in one of two columns.

COLUMN 1	COLUMN 2
<ul style="list-style-type: none"> • Hitting • Yelling • Having to go to one's room • Humiliating • Insulting • Comparing with others • Cold look • Silence • Not allowed to play with friends • No lunch, dinner or dessert 	<ul style="list-style-type: none"> • Understanding and acknowledging the harm caused • Repairing the damage (e.g. cleaning what has become dirty, giving money to buy a replacement for what was broken) • Restoring the relationship (e.g. asking for pardon, doing something for the other person)



METHODOLOGICAL TIPS

- It is important to respect the formulation “In your childhood, what did your family do when you did something they did not like?” because the objective of the question is to make the participants aware of the specific actions of their families. In many cases they will remember punishments, and the facilitator will have to ask about other responses that are not punishments, such as the restorative practices in the second column. There will be inappropriate responses to the healthy actions of the child, such as being forbidden to play with cars because she was a girl or being punished for singing or dancing.
- The focus should be on short sentences, and the facilitator should intervene if a participant starts to tell a long story, which is not the goal of the exercise. It is good to verify with each person who speaks that their idea has been reflected correctly, so that everyone feels they have been understood.

- The facilitator asks about the differences between the two columns. Some of the common differences, which should be pointed out by the facilitator if they do not appear, are the following.

COLUMN 1	COLUMN 2
Focus on the person who receives the impact of the adult's action. For example, it is not possible to hit or to scold the fact of getting the floor dirty after a child has been playing in the mud – the whole person is affected.	Focus on the action that needs to be corrected. For example, cleaning the floor (with the supervision of the adult, if necessary) is related to getting the floor dirty after playing in the mud.
The adult's reaction time is very short (impulsiveness).	The adult's reaction time is long: it requires thinking and planning, and getting alongside the child.
These actions educate but not in desirable values: the child learns to lie or to hit when no adults are present from a fear of the consequences. Especially serious is the message that can be internalised that whoever loves you or takes care of you has the right to cause you harm.	These actions educate children by modelling the desired values – dialogue, restoration, respect, well-being for all – and by showing that, even when you do harmful things, you deserve respect and you can repair your mistake.

Harm is caused to the person receiving the action – it leaves a scar. If it did not, why do we remember those episodes with pain?	These actions are not pleasant, but they do not cause harm.
There is no logical connection between the action and the punishment. For example, there is no logical connection between spilling a glass of water and being hit.	The actions are logically connected. For example, after spilling a glass of water it is logical to be asked to clean the table.
The participation of the child is not taken into account.	The child has opportunities to give their opinion and to propose ways in which to remedy the situation as far as they understand it.
This column is about violence .	This column is about positive discipline .

- The facilitator points out that any action in the second column can be carried out in a way that moves it into the first column. For example, if a child is forced to engage in the restorative action as a humiliation, it goes into the first column.
- The facilitator starts to describe the three core elements of violence, the first one being that **(1) harm is caused to the person**.
- To introduce the concept of power, the facilitator provides an operational definition of power as “the ability to influence our lives, for better or for worse”, and asks the participants “Who has power over you? What people can make your lives better or worse?” The facilitator notes the importance of identifying actual groups of people (i.e. “bankers” rather than “banks”, “journalists” rather than “the press”), and then writes them down in order.
- Once the participants have finished offering ideas, the facilitator groups the ideas into three columns according to the type of power.

LOVE AND AFFECTION	AUTHORITY	FORCE (PHYSICAL OR SOCIAL)
Parents	Bosses	People who are physically stronger than us
Spouses or partners	Politicians	People with weapons
Children	Journalists	Differences transformed into inequality, for example, gender inequality, racism, social inequality, disabilities
Family	Influencers	
Friends	Physicians	
	Teachers	
	Public servants	

- Discussion is encouraged by the facilitator, so that the participants can understand fully how every means of power can be used either constructively or destructively, and that these uses are always proportional (very little power means that very little good or harm can be done; much power means that it can cause much good or much harm). And **(2) violence is that it is caused by the bad use (abuse) of power**.
- The last aspect of violence is **(3) the mode – physical, psychological, sexual and negligence**, which is understood as the harm caused by the bad use of power through not using the power to protect.

- The facilitator poses a question about the difference between violence and maltreatment and points out that maltreatment is a specific form of violence that causes especial harm due to its intensity or its duration (when violence defines the relationship). As a final reflection, the facilitator observes that, while many of our parents used violence in our education, in most cases they did not maltreat us. But, unless we as adults process what we have lived through as violence, we will not be able to correctly identify all kinds of violence.



METHODOLOGICAL TIPS

- Some participants may not agree with some of the ideas. The facilitator should try to address their concerns, but if they do not regard something as violence it is better not to insist, as there may be personal memories that they need to deal with in a particular way for their own psychological well-being.

5.2.3. Key concepts

- The concept of violence and its three components: harm, abuse of power and mode (Chapter 2).
- How power works in interpersonal relationships, with its capacity to have a positive or a negative impact on the life of a person.
- The difference between violence and maltreatment.

5.2.4. Materials

Whiteboard or flip chart and marker pens.

5.3. ACTIVITY 3: MYTHS AND REALITY ABOUT CHILD SEXUAL ABUSE

5.3.1. Objectives

- The participants learn the facts about child sexual abuse.
- The participants learn to identify myths about child sexual abuse and are able to refute them.

5.3.2. Methodology

- **DURATION:** 60–75 minutes.
- The participants are given a list of statements about child sexual abuse, and they have to decide if each of them is true, false or they do not know (3–5 minutes).
- When all the participants have finished the individual task, they are asked to work in small groups of six to eight to refine their replies (10 minutes).
- When the participants return to the main group, the facilitator asks them to respond to each sentence, giving them ideas and facts to support their positions.



METHODOLOGICAL TIPS

- At this point it is useful to let the participants discuss the statements and to wait to provide the correct response, as the facilitator may identify other myths that have not been covered by the list.
- A good knowledge of the concepts presented in Chapter 2 and in Chapter 3 is needed before engaging in this activity, and the facilitator should be comfortable with the concepts discussed.

- The facilitator provides a structured definition of child sexual abuse that integrates all the concepts seen above, in discussion with the participants.
 - ▶ The main definition will come from the Lanzarote Convention, which has been ratified by the Republic of Moldova, and specifies that sexual abuse is considered as “engaging in sexual activities with a child who, according to the relevant provisions of national law, has not reached the legal age for sexual activities” (Article 18.1.a), except when these are “consensual activities between minors” (Article 18.3), or “engaging in sexual activities with a child where: use is made of coercion, force or threats; or abuse is made of a recognised position of trust, authority or influence over the child, including within the family; or abuse is made of a particularly vulnerable situation of the child, notably because of a mental or physical disability or a situation of dependence” (Article 18.1.b).



METHODOLOGICAL TIPS

- Depending on the group and on the duration of the training, this part can be expanded by adding other concepts presented in Chapter 2.

5.3.3. Key concepts

- The list of statements should include the following ideas (see Chapter 2 for more detail):
 - ▶ “Child sexual abuse takes place infrequently – it happens only in the cases that appear in the news.” FALSE. The name of the Council of Europe’s campaign, One in Five, shows that the prevalence of child sexual abuse is much higher than is usually assumed.
 - ▶ “Sexual abuse involves only adult men who abuse young girls.” FALSE. Sexual abuse can happen to both boys and girls (although girls are more frequently victims), and perpetrators can be both men and women (although the majority are men) and also other children and adolescents (around 30% of perpetrators are under the age of 18).
 - ▶ “Those who sexually abuse children and adolescents are strange, weird people who inspire distrust and who abuse by force.” FALSE. Between 70% and 85 % of perpetrators are people who are known, respected and even loved by the children. The stereotype is valid in very few cases.
 - ▶ “Sexual abuse occurs in all social classes.” TRUE. In fact, it is a risk factor for a child to belong to a middle- or upper-class family, because such a child displaying indicators of sexual abuse is usually dismissed as having child problems, and the family and environment are not investigated.
 - ▶ “Child sexual abuse happens more often nowadays than in the past.” UNKNOWN. Child sexual abuse has been and continues to be a social taboo, and it has not been properly researched in the past, so we have no data to support or refute this statement.
 - ▶ “Sexual abuse is not always accompanied by physical violence.” TRUE. In most cases child sexual abuse is a slow process, where the perpetrator gradually manipulates the child into more harmful situations, and so the use of physical force is unnecessary.
 - ▶ “Child sexual abuse leaves such evident signs that any person can quickly identify them.” FALSE. Most cases remain hidden and unnoticed for decades. If one out of five children has suffered sexual abuse, it means that in a school of 100 students around 20 children will be undetected victims.
 - ▶ “If no physical violence is used, there can be no sexual abuse because the child or adolescent is consenting.” FALSE. Sexual abuse is about power and manipulation. Even if the child or adolescent says they consent, that consent is not valid because they have not reached the age of consent and they have been coerced through manipulation. It is

important to underline here that the legal age of consent (usually in adolescence) does not mean that that consent is healthy or real.

- ▶ “Sexual abuse is such a traumatic event that it is always remembered with precision.” FALSE. One of the effects of trauma, as will be explained in Activity 4, is dissociation, a phenomenon of the brain that involves relegating traumatic memories to the unconscious so that the individual can survive.
- ▶ “Children and adolescents make up false sexual abuse allegations to attract attention, or out of envy or spite.” FALSE. Sexual abuse is a very dark issue with a stigma attached to it, which is not usually mentioned in the media or in conversations, so why would a child lie about it? This is especially relevant with kindergarten students, who sometimes describe acts and situations that they cannot have discovered by themselves.
- ▶ “The effects of child sexual abuse are always very serious.” FALSE. The consequences of child sexual abuse depend on many factors. Good prevention and early intervention, including the emotional and practical support of the whole school, can minimise the impact of the abuse. This is why prevention programmes are needed.
- ▶ “The effects of child sexual abuse will disappear over time by themselves once abuse has stopped. There is no need to keep harping on about it.” FALSE. Just as a deep wound needs to be cleaned and cared for, sexual abuse requires adequate intervention. In a kindergarten child the effects may not be visible, but they may appear later, when the child approaches puberty. The child must be given attention by professionals specialising in child sexual abuse detection and intervention.
- ▶ “Children who have suffered sexual abuse, especially boys, will become perpetrators themselves.” FALSE. This condemns the victim, and is unfair and false. If the sexual abuse has been detected and the intervention has been appropriate, victims will usually recover and will not become perpetrators but rather aware and protective adults. However, if victims do not receive the support they need, some of them may become perpetrators themselves (though many others will not, even without the necessary support).
- ▶ “If a child I know well were to suffer sexual abuse, I would be able to detect it quickly and easily.” FALSE. Child sexual abuse is very well hidden by both victims and perpetrators. In most cases, the abuse remains unnoticed, even when there are indicators. This is why it is important to be aware of the indicators (Chapter 3 and Activity 4).
- ▶ “Children are not responsible for their sexual abuse.” TRUE. While this idea is very clear in the session, Activity 6 will reveal that it is very difficult for adults not to blame the child somehow for not escaping the abuse, defending themselves or asking for help earlier.
- ▶ “Children can sometimes avoid sexual abuse.” TRUE. Although in many situations children cannot do anything, in some circumstances they can ask for help or do something to avoid the abuse. This is why it is so important to engage in prevention activities with children, as it will better prepare them to respond in a way that is safer for them, especially to ask for help when they feel that things are wrong.
- The concept of child sexual abuse in full, as described in Chapter 2.
- In a more extensive training, further details about child sexual abuse can be provided.

5.3.4. Materials

- A copy of the list of statements for each participant. Not all the sentences need to be used in training. The facilitator can select those they find more relevant – around 10 of them.

SENTENCE	TRUE	FALSE
"Child sexual abuse takes place infrequently – it happens only in the cases that appear in the news."		
"Sexual abuse involves only adult men who abuse young girls."		
"Those who sexually abuse children and adolescents are strange, weird people who inspire distrust and who abuse by force."		
"Sexual abuse occurs in all social classes."		
"Child sexual abuse happens more often nowadays than in the past."		
"Sexual abuse is not always accompanied by physical violence."		
"Child sexual abuse leaves such evident signs that any person can quickly identify them."		
"If no physical violence is used, there can be no sexual abuse, because the child or adolescent is consenting."		
"Sexual abuse is such a traumatic event that it is always remembered with precision."		
"Children and adolescents make up false sexual abuse allegations to attract attention, or out of envy or spite."		
"The effects of child sexual abuse are always very serious."		
"The effects of child sexual abuse will disappear over time by themselves once abuse has stopped. There is no need to keep harping on about it."		
"Children who have suffered sexual abuse, especially boys, will become perpetrators themselves."		
"If a child that I know well were to suffer sexual abuse, I would be able to detect it quickly and easily."		
"Children are not responsible for their sexual abuse."		
"Children can sometimes avoid sexual abuse."		

5.4. ACTIVITY 4: DETECTION (I): CONSEQUENCES AND INDICATORS OF CHILD SEXUAL ABUSE

5.4.1. Objective

- The participants are able to understand and identify the consequences and indicators of child sexual abuse.

5.4.2. Methodology

- **DURATION:** 60–120 minutes.
- For most groups, the most efficient way of transmitting the core information about the consequences and indicators of child sexual abuse is a participatory exposition: a presentation of the contents, with frequent questions to and from the participants. A handout with a summary of the basic indicators can be given out following the exposition.
- In groups composed mainly of specialists and professionals with some training on child sexual abuse, participants can be asked to create a list with indicators in each of the eight categories in small groups, and these indicators can be discussed in the main group, with a handout given out afterwards.



METHODOLOGICAL TIPS

- Keep in mind the professional profile and cultural peculiarities of the participants in the training, and adapt the contents to their previous knowledge and their needs. Too much information can be overwhelming, while too superficial ideas may not be useful. Checking with the group and answering their questions can help to ensure that the content is at the appropriate level.

5.4.3. Key concepts

- The main types of consequences of child sexual abuse and how they can serve as indicators (Chapter 3).

5.4.4. Materials

- A copy of the handout for each participant. The full materials will be online, but participants will find it useful to have the list of indicators on a sheet of paper in front of them.

PHYSICAL INDICATORS	PSYCHOSOMATIC INDICATORS
<ul style="list-style-type: none">• Scars and external lesions <p>Only health-care professionals can identify:</p> <ul style="list-style-type: none">• Irritation or internal lesions of sex organs and the region around them• Infections in the sex organs and the region around them• Sexually Transmitted Diseases• Pregnancy (adolescents)	<p>Psychological suffering expressed through the body, usually at the extremes of health parameters:</p> <ul style="list-style-type: none">• Chronic pain or psychosomatic disorders• Sleep problems (nightmares, insomnia, excessive sleep)• Eating disorders (especially anorexia and bulimia)• Elimination disorders: enuresis, encopresis and sustained diarrhoea or constipation

EMOTIONAL INDICATORS <ul style="list-style-type: none"> • Guilt and shame • Anxiety, fear and excessive worrying • Avoiding certain places, people or situations (including phobias) • Depression and low self-esteem • Anger, rage and aggressiveness • Submission • Problems with emotional control: excessive control or lack of it 	COGNITIVE INDICATORS <ul style="list-style-type: none"> • Delay in cognitive development • Attention deficit • Low performance or even academic failure • Lack of curiosity
BEHAVIOURAL INDICATORS <ul style="list-style-type: none"> • Regressive behaviour • Difficulty in self-soothing and self-regulation • Problems with impulse control: difficulties with the norms • Aggressive behaviour • Drug and alcohol use and abuse • Self-harming and suicidal behaviours • Lack of problems at all: the “invisible” child or adolescent 	SEXUAL INDICATORS <ul style="list-style-type: none"> • Inappropriate sexual behaviour: compulsive masturbation, oral-genital caresses, objectification • Sexual aggressions against other children or adolescents • Age-inappropriate sexual knowledge • Risky sexual behaviour
SOCIAL AND RELATIONAL INDICATORS <ul style="list-style-type: none"> • Difficulties with personal boundaries • Difficulties in attachments and intimate relationships • Social isolation • Repetition of violence patterns, including re-victimisation • Anti-social behaviours 	TYPES OF DISSOCIATIVE SYMPTOMS <ul style="list-style-type: none"> • Amnesia • Depersonalisation/derealisation • Fragmentation of consciousness: disconnected inner parts INDICATORS OF DISSOCIATION <ul style="list-style-type: none"> • These are very difficult to identify: • Blank look • Honestly not remembering having done things • Extreme changes in mood, behaviour or taste • Insufficient progress, even in safe conditions • Multiple previous diagnoses, without success in the interventions

5.5. ACTIVITY 5: DETECTION (II): COMMUNICATION OF INDICATORS OF CHILD SEXUAL ABUSE IN THE REPUBLIC OF MOLDOVA

5.5.1. Objective

- Clarifying the steps for the communication of indicators of child sexual abuse in the Republic of Moldova.

5.5.2. Methodology

- **DURATION:** 20–30 minutes.
- The most efficient way to convey the content of this activity is a participatory explanation, in which the facilitator explains the steps to follow where there is a disclosure or suspicion of child sexual abuse.



METHODOLOGICAL TIPS

- This part must be very short, very practical and very realistic. While knowledge about the protection system and of the legislation can be useful, in general it is more important to provide clear guidelines that the participants can use in their professional lives.
- Participants in the training may not detect a case for a long time, and when they encounter one they may not have the documentation for the training to hand. It is crucial to provide them with one or two general references that will remain valid for a long time (e.g. a child helpline, a public service that will usually have competences in the detection of and intervention in child sexual abuse, an organisation specialising in child protection).

5.5.3. Key concepts

- The legal obligation to refer a disclosure or suspected case to the authorities.
- The specific steps to follow according to current legislation and procedures.

5.5.4. Materials

- Specific contacts (public services, organisations, websites and telephones) to be used for the referral of cases.

5.6. ACTIVITY 6: DETECTION (III): APPROPRIATE AND INAPPROPRIATE RESPONSES

5.6.1. Objectives

- Practising the appropriate responses when faced with a disclosure.

5.6.2. Methodology

- **DURATION:** 60–90 minutes.
- The facilitator explains the appropriate and inappropriate responses when faced with a disclosure, giving advice for managing the emotional reactions that can be triggered in adults, so as not to interfere with the process in the child.

- The facilitator can invite two or three volunteers to help with the demonstration. The facilitator should start by playing the role of the child, using a different example from those provided for the exercise. One of the volunteers will play their professional role, and the facilitator will ask about the role to make it explicit, because a child will speak in a different way to a teacher than to a manager or a specialist. The other two volunteers will be invited to observe and check if the adult gives appropriate responses. The facilitator starts the role playing and they all go on for 3–4 minutes. Then the facilitator talks about how they felt. Afterwards, the facilitator asks the volunteer “professional” to share how they felt and what they might have done differently. And, finally, the volunteer “observers” are invited to comment on the process.
- The facilitator asks the participants to form groups of three to four people. Then they give a case for role playing to one participant in each group. In each case one participant takes the role of the child, another acts as the professional and the remaining participants act as observers. Each role play takes 4–5 minutes, and is followed by a 4-minute discussion in the small group. The facilitator indicates the times and gives a new case to another member of the group when a case is finished. Four different cases will have been prepared, but not all groups will be working on the same case at the same time.
- When all the cases have been role played in the small groups, the facilitator asks the participants to return to the main group, where questions and problems may be discussed.



METHODOLOGICAL TIPS

- Many participants will feel intimidated about playing the role of an abused child in front of other professionals, or acting as a safe adult who follows the appropriate responses. It is therefore very useful to have the facilitator do the first role play. If there is a time constraint, rather than eliminating the example presented by the facilitator, it is better to do only two rounds of practice.
- To give every participant a better view of the process, the example should take place in the middle of the group rather than up front.
- If the first role play went too well (e.g. there were few comments for improving it) or too badly (e.g. the volunteer “professional” made too many mistakes), the facilitator can offer a second example with volunteers (the same or other participants), this time playing the “professional”. In this case they will want to act as a safe adult in most respects but at the same time make some mistakes so that the observers can pick them up.
- Even after the facilitator models the activity, some participants may still be reluctant to play the role of the child or of the professional. Each person’s preference should be respected and they should not be forced to do it.

5.6.3. Key concepts

- The appropriate responses that should be practised and incorporated into the participants’ way of being with children. See Section 3.1.3, “Disclosure: appropriate and inappropriate responses”.
- The inappropriate responses that should be replaced by the appropriate responses. See Section 3.1.3, “Disclosure: appropriate and inappropriate responses”.

5.6.4. Materials

- Whiteboard or flip chart and marker pens.
- Handouts of appropriate and inappropriate responses (table from Section 3.1.3) for all participants.
- Copies of the cases to share only with the correspondent participant in each group.

CASE 1: *Tatiana (3 years old)*

Your teacher has been giving you some sessions about Kiko and the Hand and you have a strange feeling. Your cousin Ion, who is 14 years old, is starting to play with you in a way that you do not like. You like him very much because he is funny and he makes you laugh and plays with you as no other person does, making you feel special. During the family meals he takes you outside, and after playing with you he asks you to show him your genitals and sometimes he asks to touch them, and you are uncomfortable about it. Afterwards, he changes suddenly and says that it was just a joke. Now you wonder if that is like Kiko and the Hand and you want to ask your teacher about it.

CASE 2: *Petru (4 years old)*

There are two boys at the school, Dumitru and Dan, who are making it hard for you to go to the toilet. Whenever you want to go, they also go, and they want to see you urinating and they laugh at you. Last week they told you that your penis is too small, and they tried to pull it, and it hurt. Then they said you that you have to lick their penises or they will hit you. You ran and escaped, and your teacher saw that something had happened. Dumitru and Dan are the sons of very good friends of your parents, and you are afraid that if you say anything there will be a conflict between the families. You prefer to try and talk to your teacher, to see if they can give you any advice about this.

CASE 3: *Cristina (5 years old)*

You have been playing Kiko and the Hand in the classroom and you start to realise that your father is doing something that disgusts you. When he comes to say good night, he caresses you in a strange way and kisses you in your mouth, opening his lips. You are very scared because he always tells you that it is your secret, and that it makes you very special. You have tried to tell your mother, but whenever you mention something about your father she says “Oh, he loves you so much – you should be grateful. Now, what do you want to tell me?” and then you feel bad and tell her something else, like that he makes too many jokes about expressing his love in unpleasant and disrespectful ways (which is true and happens in front of your mother), and she says that you should not take it seriously. So you are going to ask your teacher about this.

CASE 4: *Sergiu (6 years old)*

Your father left home a year ago, after a big discussion with your mother. Your mother has been very sad since then, and sometimes, especially at the weekends, she drinks too much. When she drinks she gets very upset and says that she wants you, “her little man”, to sleep in the bed with her. At the beginning you were very happy, because you saw how she became calm and you enjoyed being there with her. But lately it has been getting strange, because she tickles you in your genitals and it is really unpleasant. You tell her to stop, but every time she laughs and says that you should be enjoying it, that it is something nice she is doing for you. Now that you have learned about Kiko and the Hand in class, you want to tell your teacher that you love your mother but she is doing that weird thing.

5.7. ACTIVITY 7: HOW TO FACILITATE SESSIONS WITH CHILDREN

5.7.1. Objectives

- Making clear the objectives and methodology of the sessions with children.
- Practising some of the activities, so the participants can feel comfortable about facilitating them.

5.7.2. Methodology

- **DURATION:** 60–210 minutes.
- Depending on the time available, this part of the training can take diverse forms:
 - ▶ The technical approach: Each activity with children is explained through its key concepts and its methodology, with questions from the participants. This approach is more efficient when there is less time and participants are confident that they can manage the sessions by themselves without much exploration.
 - ▶ The experiential approach: Participants try each of the activities with children from the point of view of themselves as children at those ages. This gives them a deeper understanding of their own reactions and responses to issues relating to protection and safety, but it requires deeper involvement from the participants.
 - ▶ The practical approach: Participants try to facilitate activities in small groups through role playing. This approach can develop the skills needed to run the whole activity with children, but it requires more time.
- The facilitator organises this part of the training according to the group, the time available and the interests of the participants. Activities can be explored with the same approach or in different ways according to the sessions with children. For example, Activity 1 can use the technical approach, Activity 2 the experiential approach, Activity 3 the practical approach and so on.
- The methodology for sessions with children is explained in Chapter 6, “*Kiko and the Hand in the classroom: sessions with children*”, where participants can find the objectives and methodology for each activity to help them facilitate the activity with their students.



METHODOLOGICAL TIPS

- This is the most flexible part of the training. Participants will be teachers or professionals who have had some experience with children and will therefore be able to work out how to facilitate most activities. As participants spend more time on this activity, their understanding will grow.

5.7.3. Key concepts

- Activities with children are simple (they do not have a lot of content) but they require preparation (especially for creative and unexpected questions from children).
- Following the steps indicated is strongly recommended to begin with, as this allows the teacher to gain more experience of and knowledge about the protection and prevention of child sexual abuse before they become more creative.
- Practising each activity with peer adults (other teachers) is strongly recommended, as teachers will discover aspects of it that they need to improve before trying it in class.

5.7.4. Materials

- If possible, participants should have a copy of the activities as they are explained, as some aspects may appear clear during the presentation but their nuances will be forgotten if they have not seen them in written form.
- If there is going to be role playing or practice of the activities, the materials required for that practice should be available during this activity in the training (e.g. paper, drawing materials, sticky notes).

5.8. ACTIVITY 8: SCHOOLS AS ALLIES – PREPARING TO INTRODUCE THE SESSIONS

5.8.1. Objectives

- Identifying the potential difficulties of introducing the sessions into schools from school managers and staff, and knowing how to respond to these.

5.8.2. Methodology

- **DURATION:** 50–60 minutes.
- The facilitator asks each participant to take three sticky notes and to write down on each a difficulty that might arise among school staff and managers in response to the proposal to hold sessions with children for the prevention of child sexual abuse.
- All the notes are collected and arranged into groups by the facilitator, who then asks the group to come up with possible responses to each of the difficulties. The best solutions are selected.



METHODOLOGICAL TIPS

- Not all groups raise the same problems, and that is fine. Each teacher – and each school – faces problems that are common, but also ones that are specific to the community or the area. The key of this exercise is to address the specific concerns that appear in the group of participants with responses that they can use in their schools.

5.8.3. Key concepts

- Some possible difficulties and how to address them:

POSSIBLE DIFFICULTY	HOW TO ADDRESS IT
"In this school/community we do not have a problem of child sexual abuse."	Point out the statistics of child sexual abuse: schools do have cases which simply have not been identified.
"Child sexual abuse is an inappropriate issue for children at these ages."	Child sexual abuse happens at all ages, even to kindergarten children, so it is important to protect them too. The prevention of child sexual abuse can be done in a playful and safe way. The language used will be age appropriate, as well as the issues raised. It is like teaching children how to cross the street. We do not tell them that, if they do not look both ways or wait for an adult, the car will crash into

POSSIBLE DIFFICULTY	HOW TO ADDRESS IT
	them, their brains will be smeared on the pavement and they will die. We explain to them that if they do not cross safely they can get hurt, and we do not give them the gruesome details.
“Teachers do not have enough knowledge to facilitate sessions about child sexual abuse.”	Teachers who have followed this training and read the materials to facilitate sessions with children have enough knowledge and expertise to prevent and detect many situations of child sexual abuse. It is better to start protecting children now than to allow more cases to happen and to go undetected.
“We do not have time. We already have too many activities.”	The child abuse prevention activities can be done in 1-hour sessions, totalling 4–5 hours over several weeks. They can be included in other programmed activities, such as story-telling for Activity 1, or drawing for Activity 4.
“These activities are not included in the pedagogical programme of the Ministry of Education.”	Most educational structures and pedagogical programmes include “health education”, “emotional intelligence development” or even “child protection”. The activities can be included within these curricula. It can be very useful to establish ways of collaborating with the relevant authorities, such as the Ministry of Education, the authority responsible for early years education, and local and regional administrations.
“If we detect a case, we would not know how to deal with it.”	It is important for a school to be prepared to deal with cases of child sexual abuse, because it has a responsibility to ensure the protection of all children, even out of school. The referral procedures need to be clear, and they are usually technically very simple, such as calling child protection services. What is difficult is knowing how to provide an adequate emotional response to the child, the family and other professionals. All teachers need to be updated about child sexual abuse referral so as to comply with their professional obligation of protecting their students.
“Parents will not agree to these sessions for their children.”	Keeping children unaware of manipulation and violence makes them more vulnerable, and most parents want the best for their children.

Materials

- Sticky notes.
- Whiteboard or flip chart and marker pens.

5.9. ACTIVITY 9: PARENTS AND FAMILIES AS ALLIES – PREPARING TO INTRODUCE THE SESSIONS

5.9.1. Objectives

- Identifying the potential difficulties of introducing the sessions into schools from parents and families, and knowing how to respond to these.

5.9.2. Methodology

- **DURATION:** 30–60 minutes.
- The facilitator asks the participants to form groups of six to eight people. In each group half of the participants should take the position of parents who do not like the idea of sessions on the prevention of child sexual abuse, while the other half, representing school staff, have to come up with suitable responses. The groups discuss these for 15 minutes.
- Back in the main group, the facilitator asks for the best ideas from each group and notes them on the board, commenting on each of them.
- Finally the facilitator asks for the objections that the groups have not been able to counter, and the participants are invited to come up with ideas, with the support of the facilitator.



METHODOLOGICAL TIPS

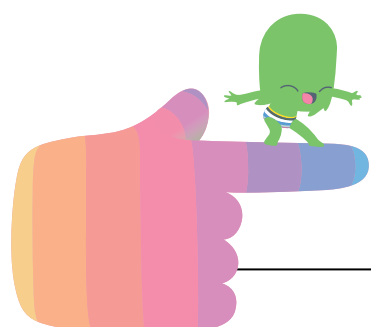
- This activity works better when it is run with a degree of playfulness, as teachers usually enjoy playing the role of difficult parents. If there is enough time, it may be useful to have a short demonstration with volunteers (three representing parents and three representing school staff). The facilitator can make the demonstration more dynamic by formulating remarks that may remind participants of common situations in meetings with parents.
- If there is enough time, this activity can be proposed as a “first meeting with parents”, a session that should take place before starting the activities with children. The session can be useful in ensuring that parents understand the core protection messages and that they can address them at home if asked by their children.
- It is almost certain that some parents will have suffered child sexual abuse themselves. It is important to speak with respect about the issue and to show that there is always a way out, even in adult life, for those who were abused in the past to heal their wounds (although it will require special spaces, not the sessions).
- It is possible that in some groups there will be some parents who have abused children themselves. Caution about the issue is imperative so as not to worsen the situation for children.

5.9.3. Key concepts

- Possible difficulties of introducing the sessions into schools and how to address them (see table from Activity 8 in Section 5.8.3, “Key concepts”).
- There are two types of difficulties voiced by parents, who will need to be reassured:
 - ▶ “What will the sessions cover?” Parents are usually more interested in the specific contents of the sessions, so they can be sure that the messages their children receive are adequate. It is important to give parents a clear structure of the sessions and their basic contents, so that they fully understand that the sessions will be age appropriate.
 - ▶ “How can I talk about this issue with my child?” Explaining that there will be a final session in which children present what they have learned to their parents will usually reassure them. Parents have heard about child sexual abuse in the news, and it is a relief for many of them to know that there is a safe and protective way to talk to their children about it.

5.9.4. Materials

- Chairs that can be moved around to enable work in small groups.



6. *Kiko and the hand in the classroom: sessions with children*

GENERAL METHODOLOGICAL TIPS FOR SESSIONS WITH CHILDREN

- These activities are intended to be carried out by teachers who are already referents for the children, as the children need time to process the messages and deeply trusted adults whom they can ask for help. While in some circumstances it is also possible to have external facilitators, at least one adult affective referent must be present for the whole session, so that they can identify relevant reactions in children they know well.
- The brains of children aged 3 to 6 are continuously changing and developing. This is why they usually need repeated experiences to acquire new attitudes and behaviours. Key messages are better absorbed by frequent exposure in diverse situations. Therefore, while there must be a time for each prevention activity, the best way to ensure their understanding is by addressing the key concepts in other situations: in the playground, during other activities, before saying goodbye and so on.
- Each activity builds on the previous ones. It is important to start each session by verifying the ideas that children have retained and those they have not, and to review them in an appropriate way.
- Professionals are concerned that children may be overwhelmed during the activities or disclosing in front of their peers. Experience shows that this seldom happens, however: children usually take their time before going to their teacher for support. When they approach their teacher to tell them something related to the sessions, teachers must be very receptive and make the time to listen to them.
- The timing of the sessions is very important. The teacher should choose appropriate times for the activities, especially when children are rested and attentive, avoiding moments of the day when they are tired, hungry or nervous. It is also good to be flexible about the duration of the sessions. Teachers should shorten or postpone a particular session if children are not receptive.
- Each activity is outlined, together with its core elements. An experienced teacher can enrich activities with their own ideas over time to adapt them to specific groups of children.

6.1. SESSION 1: INTRODUCING KIKO AND THE HAND

6.1.1. Objectives

- Introducing the series of activities.
- Introducing the characters Kiko and the Hand.
- Making clear the different roles of adults (protecting children) and children (if they can, asking for help when they need protection).
- Conveying the key concepts: bad things happen to children; they have right to ask for help; physical contact should be pleasant, and if it is not children have the right to say "No!" to it.

6.1.2. Methodology

- **DURATION:** 30–50 minutes.
- The teacher presents the the Underwear Rule from the Council of Europe's campaign. The wording may follow along the lines of: "There are a group of grown-ups who have decided to take one more step to protect children and they have developed some materials. In our school we want each one of you to feel safe, so we are going to learn about some things. We are going to do some activities in the coming weeks, because this is important."
- The teacher presents the characters Kiko and the Hand through the story in the book or in the video.
- The teacher facilitates discussion about the story, asking questions such as "What did the Hand do?" "What did Kiko do?" "Why did Kiko say 'No'?" or "What would you have done?" The key message is that physical contact can be a very good thing, but it has its limits, and every person must respect them.
- The teacher invites the children to draw on a sheet of paper an example of physical contact that they do not like (e.g. kissing an acquaintance of their parents, or caresses they do not enjoy). Afterwards the teacher invites them to draw on another sheet of paper an example of physical contact that they like (e.g. a kiss from their mother, a hug from their father or tickles from their siblings). Then some children may comment aloud on one or both of their drawings, with the teacher moderating to validate their inner experiences.
- To end the activity, the teacher facilitates a round of saying "No!" to unpleasant or inappropriate physical contact, by giving examples such as "Kissing an unknown person", "Tickles when they hurt", "A hug that is too long" and "When somebody who is not your parent or your doctor or nurse asks to touch your genitals", and children have to reply by shouting "No!"



METHODOLOGICAL TIPS

- It is important to be precise about the Underwear Rule, which states: "Nobody can touch you under your underwear – unless it is your parent, your doctor or your nurse and they have a reason to do so, like cleaning you or curing you." Young children can be very literal minded, and may not allow for safe contact unless they have been explicitly told that it is permitted.

6.1.3. Key concepts

- Strange and unpleasant things happen to everybody at some point. To be safe, every person needs to know how to identify when they feel bad (and to ask for help).
- When bad things happen to children, it is the responsibility of the adults to respond appropriately and to protect them. Children can help adults to protect them by telling them when they feel bad and by asking for help.

- Physical contact and expressions of affection (e.g. kisses, hugs, tickles) are good as long as children enjoy them. These gestures should never be forced.
- When children do not like some kind of contact, they have the right to say “No!” and to ask for help.

6.1.4. Materials

- The book *Kiko and the Hand* (original or printed in colour).
- The video *Kiko and the Hand* and a means to show it (e.g. computer, projector, screen, television) (optional).
- Parenting in the digital age brochure.
- Paper and drawing materials (e.g. crayons).

6.2. SESSION 2: “GOOD LOVE” AND “BAD LOVE”

6.2.1. Objectives

- Introducing the concept of “good love/affection” and “bad love/affection”.
- Making a connection between “love” and “care”, including responsibility for relationships.

6.2.2. Methodology

- **DURATION:** 30–50 minutes.
- The teacher starts by asking the children what ideas they remember from the previous session, and ensures that all the previous key messages have been covered.
- The teacher asks the children: “Think of somebody who you think loves you. How do you know they love you?” Then the teacher facilitates the conversation, trying to make evident the elements described as “good love” (see the Section 6.2.3, “Key concepts”).
- The teacher tells some short stories, and the children have to identify of what kind of love / affection the stories are about and, in a case of “good love/affection”, to show the green card or green sticker or, in a case of “bad love/affection”, to use the red ones.

“A girl tells her friend that she is sad, and her friend hugs her and asks her to tell her about it.”	Good love – it is pleasant and it offers support.
“A boy hides his little brother’s favourite toy so he can play with it later.”	Bad love – the boy uses knowledge about his brother to cause him pain.
“A girl gets angry at her sister and insults her.”	Bad love – when we love somebody, we respect them even when we are angry with them.
“A boy is tired and his friend offers to carry his bag for him.”	Good love – it makes things easier and shows support.

"A girl will not let her friend go to the toilet yet because they are still playing and they have not finished the game."	Bad love – if the friend needs to go to the toilet, it is important to respect that because it involves physical well-being. The girl should wait for her friend to return.
"A boy tells his friend that if she does not share her dessert with him, he will no longer be her friend."	Bad love – it is conditional on compliance.
"A girl sees her friend falling and hurting herself, so she goes to call for help from the teacher."	Good love – it looks to protect and help.
"A boy confronts two children who are laughing at his friend and, while standing beside them, tells the children to stop."	Good love – it involves protection and care.

- The teacher can invite children to provide their own stories and to submit them to the group for discussion. This will reveal if the key concepts are being understood; they can be explained further if necessary.
- The teacher asks the children: "What would you do for somebody you love?" The children can draw or write small examples (e.g. "I hug them if they are sad", "I help my mother to set the table", "I help my father to do errands", "I play with my younger brother to make him happy"). The papers are displayed together, and children can comment on them and, with the teacher's help, discover all the key concepts in them.



METHODOLOGICAL TIPS

- The activity with stories works better with cards or stickers in two colours, as it incorporates a visual element (colour) and movement (raising a hand or moving to place a sticker). When children believe that a story is an example of "good love/affection", they raise the green card or place the green sticker on the board. When they consider that the story is about "bad love/affection", they use the red card or the red sticker.
- The teacher can create other stories to try to verify if the concepts are clear for the children.

6.2.3. Key concepts

- Not all kinds of love and affection are good. Some forms of love and affection are bad and harm one or more people.
- Good love and affection is love combined with care for the person, who grows and blossoms as a consequence of it. Some examples of good love include:
 - ▶ respect for the person – not humiliating them;
 - ▶ caring for the person and protecting them;
 - ▶ pleasant physical contact (e.g. kisses, hugs, tickles);
 - ▶ telling the person nice things (e.g. "I love you", "I am happy to see you", "I like how you sing/play/dance");

- ▶ listening to the person, giving them counsel;
- ▶ spending time together (e.g. playing, eating, talking);
- ▶ helping the person when they have problems.
- Bad love and affection is love that does not involve care, that does not allow for the other person's full development or that is used to harm the person. It includes:
 - ▶ making the other person do something that harms themselves or somebody else;
 - ▶ allowing the other person to suffer situations that harm them.
- When somebody loves us "well", we must at least respect them, even if we do not feel like loving them back.
- When somebody loves us with a "bad love", we need to distance ourselves from them and to ask for help from safe adults.

6.2.4. Materials

- Small green and red cards or stickers.
- (Preferably) green paper and drawing materials (e.g. crayons).
- Tape to display the drawings on the wall or on a board.

6.3. SESSION 3: TRUST AND SECRETS

6.3.1. Objectives

- Reflecting on trust, intimacy and secrets.
- Introducing the concept of "good secrets" and "bad secrets".
- Developing criteria to differentiate between "good secrets" and "bad secrets".

6.3.2. Methodology

- **DURATION:** 30–50 minutes.
- The teacher starts by asking the children what ideas they remember from the previous sessions, and ensures that all the previous key messages have been covered.
- The teacher introduces the concept of trust and intimacy.
- The teacher explains the concept of "good secrets" and "bad secrets", giving some examples and answering the children's questions.
- The teacher tells some short stories, and the children have to identify examples of a "good secret" and a "bad secret", giving their reasons, which helps them to process the different elements of the key concepts. Stories can be taken from the following table.

"Your mother tells you that you are going to buy a present for your father, but you should not tell him because it is a surprise."	Good secret – the mother knows about the secret and the father will discover it soon, and it is pleasant.
"Your friend tells you she is worried because there are fights at home, but she does not want you to tell anybody."	Bad secret – the friend is suffering, and keeping her secret will make both children feel bad (and perhaps suffer some harm). The child should tell their teacher or a person of trust.

"Your grandmother buys you some sweets when you are coming back from school, but she says that you should not tell your parents because they might get upset."	Bad secret – children should not keep information from their parents, especially when it involves somebody they trust. If the grandmother wants to buy sweets, she should be able to justify it to the parents, and not do it behind their back.
"Your parents explain to you that you are going to have a baby brother or sister, but that you cannot tell anybody, especially your aunt who is coming to visit this afternoon, because they want to tell the whole family at the same time at the weekend."	Good secret – it is good news, and keeping it secret means caring for all the family.
"Your friend tells you he likes a girl in your class, but that you should not tell anybody."	Good secret – the friend is sharing intimate knowledge about something important that does not cause any harm. Telling other children about it will make the friend uncomfortable.
"You see two children in your class hiding the favourite pencil of another boy, and they tell you to keep quiet because it is a joke, but you believe that he will cry when he cannot find it."	Bad secret – those children may laugh, but what they have done is causing pain to the boy, so you should tell your teacher.
"Your cousin asks you to show her your underwear and what is under it. When you remember the Underwear Rule of Kiko and the Hand, she tells you this is a secret because you are her favourite cousin and other people would not understand."	Bad secret – it involves breaking the Underwear Rule and it makes you feel bad.
"Your elder brother tells you that he has got bad marks in the exams, but that you should not tell your father when he picks both of you up from school because he wants to tell both your parents together when they are at home."	Good secret – it involves care (giving the elder brother a good place and time to tell the news).

- The teacher can ask children to give their own examples of secrets, and the rest of the class has to decide if they are "good secrets" or "bad secrets", with the guidance of the teacher.



METHODOLOGICAL TIPS

- To link this to the exercise of the previous session, children can evaluate the stories using the same cards: green for “good secrets” and red for “bad secrets”.
- When preparing additional stories, it would be useful to run a test beforehand with a child or two, as some examples may be too difficult for children of these ages to grasp.
- This session relies more on words than the others. If it is appropriate, the teacher can propose writing a list of “good secrets” and “bad secrets” for the class to keep a record of the session.

6.3.3. Key concepts

- Trust is important for everybody, because we all need to rely on other people. However, trust should never be used to harm another person.
- There are things in life that people do not tell others: we call them “secrets”. Some are “good secrets” and some are “bad secrets”, and it is important to identify which is which.
- “Good secrets” are those that children can tell their parents (except if it is a surprise for them, in which case parents will find out the surprise soon), that we keep because we care about people or that do not involve new harm to anybody.
- “Bad secrets” are those that children are told not to reveal to their parents (or teachers or families), that are secret because of shame or guilt, or that involve new harm to a person. They feel heavy, harmful and even disgusting.
- “Bad secrets” must be told as soon as possible to an adult who can be trusted. If that person does not respond by protecting us, we need to tell somebody else.
- If somebody loves us with “good love/affection”, they will not tell us to keep a “bad secret”. If somebody tells us to keep a “bad secret”, they are not loving us with “good love/affection”.

6.3.4. Materials

Small green and red cards or stickers.

6.4. SESSION 4: ASKING FOR HELP

6.4.1. Objectives

- Helping children to identify specific people whom they can ask for help.
- Teaching children to realise that they can help each other.
- Developing ways of asking for help.
- Identifying children who have very few protective people in their networks.

6.4.2. Methodology

- **DURATION:** 30–50 minutes.
- The teacher starts by asking the children what ideas they remember from the previous session, and ensures that all the previous key messages have been covered.
- The teacher asks: “What does Kiko do when the Hand asks to touch under his underwear?” Children will remember that saying “No!” is a key message from Activity 1. The teacher invites them

to suggest other possible actions, ensuring that these include avoiding the situation (running or getting away from the place) and asking for help. It is important to insist that asking for help is brave and not weak, because that helps towards a long-term solution of the problem.

- The teacher asks the children, “Whom do you ask for help? How do you ask for help?” Children can draw each helping person on a sticky note and the teacher invites each of them to stick their note on the big piece of paper or cardboard to create a map: some of these people belong to the school (e.g. teachers, educators, janitors, other children), others belong to children’s homes (e.g. families – parents, siblings, grandparents) and others are people they can find in public spaces (e.g. a policeman, a shop assistant, a trainer).
- The teacher uses the examples as a reminder of previous sessions by asking “What do all these people share?” The teacher helps the children to identify the core characteristics developed in the key concepts.
- The teacher should try to keep in mind the children who have few or no people of trust, and may want to encourage them to find some of these people in the school (especially if the family does not seem protective enough).



METHODOLOGICAL TIPS

- The goal of this exercise is not to evaluate how each child perceives people in their environment, but to help them identify relevant protection agents, whether adults or other children. However, it is important to emphasise that if children cannot find a way to ask for help it is not their fault, and that the responsibility for protecting them rests with adults.

6.4.3. Key concepts

- The main responses that children must remember when somebody wants to harm them are:
 - ▶ saying “No!”;
 - ▶ avoiding the situation by running or getting away from the place;
 - ▶ asking for help.
- Being brave does not mean solving problems on one’s own – sometimes it is braver to ask for help to end harmful situations once and for all.
- People whom children can ask for help can be members of their family, members of their school (both adults and other children they trust) and professionals who can protect children (e.g. the police, authorities).
- People whom children can trust must have the following characteristics:
 - ▶ They respect the child (Activity 1).
 - ▶ They love the child with “good love/affection” (Activity 2).
 - ▶ The child can talk to them, and there is trust (Activities 2 and 3).
 - ▶ They have never forced the child to do anything bad (Activity 3).
- Other children can be a person of trust for children, especially their friends.

6.4.4. Materials

- Sticky notes.
- Drawing materials (e.g. crayons).
- Big piece of paper or cardboard, or several of these to create a large surface.

6.5. SESSION 5: “THIS IS WHAT WE LEARNED FROM KIKO AND THE HAND” – JOINT SESSION WITH PARENTS

6.5.1. Objectives

- Helping children to present what they have learned to their parents and families.
- Consolidating the key messages, as children need to have a clear sense of them to make their presentation.
- Creating a flow of communication between children and their parents about emotions, safety and asking for help.
- Establishing a community of trust that children can turn to in case of need.

6.5.2. Methodology

- **DURATION:** 40–60 minutes for the preparation and 15–30 minutes for the activity with families.
- In the preparation, the teacher helps the children to organise the materials and contents that they want to share with their parents. There can be a distribution of roles (e.g. which children will explain each key concept, who will present the drawings and the map of protection) and short rehearsals in the days leading up to the session with parents.
- As explained in Activity 9, “Parents and families as allies”, parents should have received some information about the scope of the activities carried out with their children. The joint session with parents should not take place until parents have some idea of how to respond to the messages presented.
- The teacher introduces the session and facilitates the participation of each child in their role (e.g. introducing the story of *Kiko and the Hand*, telling their story, explaining a key concept, showing a drawing that says “No!”).
- The teacher opens a round of questions from parents to the group of children. Parents try to clarify the concepts, or rephrase key messages to verify their understanding of them.
- The teacher may also invite parents to provide their own examples of “good love” and “bad love”, “good secrets” and “bad secrets”, people whom they ask for help, or figures they want to add to the map of trust and help. Parents can write one or two words, or make a little drawing of the situation, using sticky notes, and put them on the board or the big piece of paper or cardboard.
- To end the activity, the teacher can invite everyone, children and adults, to reply to the question “What did you enjoy the most?” which can serve as an evaluation of the whole process.
- To continue the conversation after the activities, the teacher can invite everyone, children and adults to “Tell us something you would like to know that we have not spoken about”. This can provide ideas for further activities in the classroom and for further conversation in the family. This part can be carried out with the help of sticky notes that can be posted on the board.



METHODOLOGICAL TIPS

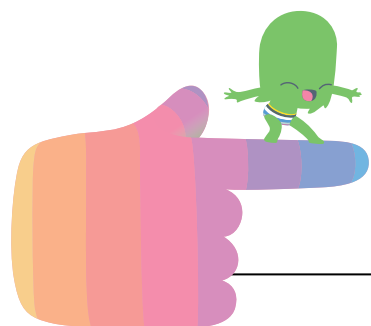
- The participation and prominence of children in this session can enhance their learning, as explaining things to families will make them consider how well they have understood the core messages. The teacher must make sure that each child knows their role and that they are comfortable with it. If some children prefer to be silent they can assist other children as they present material, pointing to drawings or helping in another way. If a child does not want to participate in the session, this is also fine, and the teacher needs to ensure that parents do not force their children to participate if they do not want to.
- Parents may have questions after this session. The teacher should allow some time to listen to parents outside the session and, preferably, out of their children's hearing range, for the sake of privacy.
- Some parents may want to know more about affective and sexual education and how to address such issues with their children. The teacher can offer suggestions about how to proceed, both at home and in the classroom.

6.5.3. Key concepts

- Children will have learned several valuable key messages, and both parents and children can benefit from sharing that knowledge.
- The objective of these activities is to open up a way of speaking in the family and in the classroom that fosters the protection, safety and well-being of children, but it is not the end. Conversations about respect, "good love" and "bad love", "good secrets" and "bad secrets", and asking for help need to take place frequently to ensure that the messages become more deeply engrained as children grow.
- When parents share their own stories and examples (adapted to age and understanding), with their children, the children connect with better with their parents and feel more able to trust them with unpleasant and harmful situations.

6.5.4. Materials

- Sticky notes.
- Drawing materials (e.g. crayons).
- Big piece of paper or cardboard, or several of these to create a large surface.



7. Afterword: creating safety

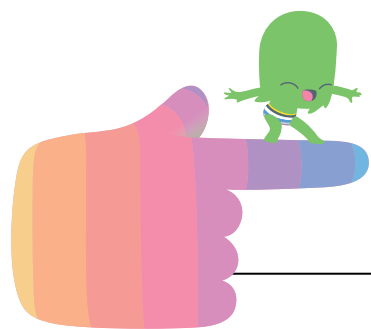
Childhood is seen as an age of innocence, of not yet knowing. This can make it a carefree time of hope and joy – or of dwelling in pain when child suffers abuse that remains unnamed and unstopped. When children realise that they can speak about their pain and their unpleasant experiences, they become empowered: they know better what values to follow, what behaviours to accept and what actions to reject and denounce, and it is clear to them whom they should ask for help. In many cases, this will be enough to prevent the abuse. In other situations, however, children will suffer sexual abuse, but if they know how to identify and how to respond to it, they may be able to find help and support to end the abuse sooner.

Children learn much better when they feel cared for and safe. This is why schools need to be safe and protective environments²⁶ if they want to fulfil their goal. The education of children during their kindergarten years includes addressing all the affective elements in their lives, especially those that can pose risks. Therefore, prevention programmes should be a core element in ensuring that schools are safe and protective environments, where children can learn and develop their full potential.

The prevention of child sexual abuse, as presented in these guidelines, involves creating safety at all levels. First, prevention enhances safety in children's experiences relating to their own bodies and feelings, helping them to identify unpleasant feelings and frightening situations. Second, it creates a climate of communication in the classroom where it is natural to speak about power and love, and of safety in the family where they can talk about sexuality and interpersonal relationships. And, finally, prevention activities give children and adults clear strategies for asking for help when it is needed.

A final reflection on the role of teachers and educators: adults do not educate only with their knowledge or their techniques but with the whole person. This is why the training process described in these pages is basically experiential. Only when we are aware of the levels of violence in our own lives can we see the violence in children's lives. Only when we become conscious of the use of power (to protect or to attack, to care or to harm) in our interactions can we adequately tackle the abuse of power that can happen with any child. Only when we set our commitment to loving with "good love" and to avoiding or reducing the effects of "bad love" can we deal with conflicts in the classroom and in the playground in a way that provides children with healthy models. And this effort is not limited to the workshop and the training – it is an attitude that needs to be cultivated every day. And it will be worth it, because our behaviour and example will not only protect but also inspire the children in our environment.

26 Horno, P. (2018), *Promotion of safe and protective environments at SOS Children's Villages in Latin America and the Caribbean*, [San José de Costa Rica]: SOS Children's Villages International, available at www.espiralesci.es/promotion-of-safe-and-protective-environments-and-conscious-affectivity-as-professional-competence; Romeo, F. J., & Horno, P. (2018), *Materials for the campaign "Child Sexual Abuse Stays Offside" for the prevention and detection of child sexual abuse in sports*, Madrid: Consejo Superior de Deportes, available at www.espiralesci.es/materials-for-the-campaign-child-sexual-abuse-stays-offside-prevention-and-detection-of-child-sexual-abuse-in-sports.



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 - ▶ Three Activity guides for the prevention of child sexual abuse for coaches and physical education teachers – for ages 3 to 6, 7 to 12, and 13 to 17;
 - ▶ Guide for the detection of child sexual abuse in sports for professionals;
 - ▶ Quality Standards to create safe and protective spaces for children and adolescents in sports.

8.2 INTERNET RESOURCES: WEBSITES AND VIDEOS

- The Council of Europe’s main website on children’s rights: www.coe.int/en/web/children/home.
- The Council of Europe’s main website for the One in Five Campaign (created in 2010) against child sexual abuse: www.coe.int/oneinfive.
- The Council of Europe’s website for materials for children aged 3 to 7 relating to *Kiko and the Hand*, in several languages, including videos (created in 2011): www.underwearrule.net.
- The Council of Europe’s website for the Start to Talk campaign against child sexual abuse in sports, including videos (created in 2018): www.coe.int/en/web/sport/start-to-talk.
- The Council of Europe’s website for the European Union and Council of Europe joint project Pro Safe Sport + (PSS+) (developed in 2017), which focuses on sexual violence against children in sport: <https://pjp-eu.coe.int/en/web/pss>.
- The Council of Europe’s website of the Lanzarote Convention: <https://www.coe.int/en/web/children/lanzarote-convention>
- The Council of Europe’s website of the European Day on the Protection of Children against Sexual Exploitation and Sexual Abuse: <https://www.coe.int/en/web/children/end-child-sex-abuse-day>
- The Council of Europe’s website on materials for children, parents, authorities and parliaments, and professionals working with children: <https://www.coe.int/en/web/children/our-material>
- The Council of Europe Human Rights Commissioner’s website: <https://www.coe.int/en/web/commissioner>.



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The Council of Europe is the continent's leading human rights organisation. It comprises 47 member states, including all members of the European Union. All Council of Europe member states have signed up to the European Convention on Human Rights, a treaty designed to protect human rights, democracy and the rule of law. The European Court of Human Rights oversees the implementation of the Convention in the member states.