

Child Sexual Abuse Medical Examinations



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When child sexual abuse (CSA) is disclosed or suspected medical examinations can have many benefits. Professionals need to have the knowledge and confidence to share information and advice to children and families in advance. All cases of sexual abuse should be considered for CSA medical.

Medical examinations can identify many things including forensic and evidential findings. The examination also provides a holistic assessment of the health and wellbeing of children, and can also address unmet general, mental and sexual health needs; assess risk (including for self-harm and suicide) and providing feedback and reassurance from health professionals to children and carers.

7 Resources

This evidence-informed film is designed to help professionals from multi-agency backgrounds better understand the role and purpose of a medical examination in situations where child sexual abuse has been disclosed or suspected.

It is applicable to any setting in which children may be seen for a medical examination and is relevant to both recent and non-recent cases of child sexual abuse.

[Understanding medical examinations for child sexual abuse concerns \(The CSA Centre\) \(youtube.com\)](https://www.csacentre.org.uk/app/uploads/2023/09/Medical-examinations-scoping-review.pdf)

6 Dispelling Myths

Research indicates that medical examinations for CSA are a holistic process and can have **significant benefits** for children, as outlined here

<https://www.csacentre.org.uk/app/uploads/2023/09/Medical-examinations-scoping-review.pdf> p34-35.

The view that medical examinations for CSA are themselves harmful to children is **not** well supported. Existing evidence indicates that most children exhibit a level of fear in line with that felt about other types of medical examination, and this fear diminishes over the course of the examination.

This [Children's Nevill Hall leaflet](#) can be shared with children and young people to help explain the process and give them the opportunity to ask questions.

5

What next?

The child and their carer will be given advice and information about what will happen next and will have the opportunity to ask questions. A number of follow-up contacts may be arranged, depending on the child's needs. The referring professional will usually be given some feedback on the day in terms of findings and recommendations. This may have an impact on their investigations and safeguarding actions and may include suggestions for siblings or other children.

2

What happens at a medical examination?

The approach to the examination may vary according to the age of the child and how recent the last abusive episode was; if the disclosed CSA has taken place within the last week, this should be discussed with the Cardiff SARC to consider a forensic CSA medical. Before the child is seen, there is usually an exchange of information between the health professional and the referrer, detailing the nature of the concerns or allegation. This exchange often happens face to face if a social worker or police officer accompanies the child.

The examination is carried out by specially trained health professionals who will ensure that the child understands what will happen. The duration of a health consultation and examination varies but can be up to two hours. The child can stop the examination at any time or agree to some parts and not others.

3

What happens at a medical examination?

The examination usually starts with some basic health checks including height, weight, and having a look at the child's ears, throat, and skin. In most cases it is not necessary for the child to remove all their clothes or wear a gown. If they prefer, they can take one piece of clothing off at a time and put it back on before the next is taken off. The next stage is the anogenital examination. To make this easier, more comfortable and standardised, the child may be asked to lie in a certain position; very young children can be examined on someone's lap.

During the anogenital examination, nothing will be inserted or 'put inside' a young child. Swabs will be taken from the external area. Older girls, past puberty, may have a small swab or the tip of a small soft plastic catheter put just inside the opening of the vagina, if they are able to tolerate it and only if they consent.

4

What happens at a medical examination?

In older girls, in some acute cases, a speculum, which is a plastic medical tool that may be put inside the vagina to enable a closer look inside and to do some forensic sampling in cases of penetrative vaginal abuse, is considered. However, this is never used if they find it uncomfortable or do not want it used.

Boys never have any swabs put inside their penis. While it is uncommon for any swabs to be put inside the anus, this may be considered (but only if allowed and tolerated) when anal abuse is suspected or alleged.