

Online Child Sexual Exploitation and Abuse (OCSEA)

An escalating problem that is alarmingly underreported


Online Child Sexual Exploitation and Abuse affects up to an estimated 20% of children worldwide.¹ 

However, for various reasons OCSEA cases are largely underreported to child helplines. For example, only 2-4% of all violence-related contacts made with child helplines worldwide between 2019 and 2021 were specific to OCSEA, a rate that does not reflect OCSEA's real prevalence.

In collaboration with our partner, Tech Matters, we launched a pilot survey of Child Helpline International's members to better understand the characteristics of victims of OCSEA and the barriers to reporting. 26 child helpline members completed the survey. 22 of these members reported an average of 59 OCSEA-related contacts each per year, or a total of 1,093 across all of them.



We found that, to a large degree, child helplines regularly train staff on topics related to OCSEA and engage in community awareness-raising activities around it.



Child helplines identified some common attributes of the victims of OCSEA that contact them. The most common form of OCSEA reported to the child helplines took the form of blackmail using intimate images that the victims had shared with the perpetrator. This is termed as sexual extortion of children. Members also suggested some key risk factors in the victims' background, such as their age (being younger than 17) or familial environment (living in dysfunctional households). Many of the child helplines mentioned the guilt and shame experienced by the survivors, and fear of their parents or caregivers finding out, as well as a lack of knowledge that a crime had been committed.

Child helplines estimate that the barriers to reporting are, first and foremost, feelings of shame and guilt that make the victims not want anyone to know. A limited understanding of OCSEA means that some children do not realise they are victims and that what has been done to them is wrong and illegal. Additionally, there is insufficient awareness of the existence and operation of child helplines, crucially, about their commitment to confidentiality. Another barrier mentioned is fear of reporting, sometimes due to threats made against the child and their family.



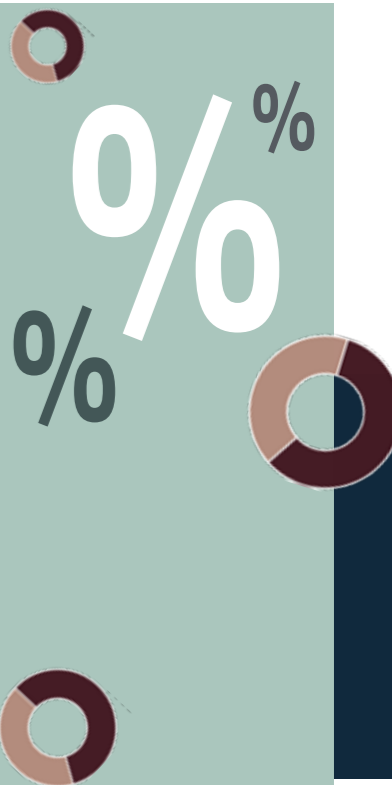
1 Week

A typical OCSEA-related contact is made with a child helpline within a week after the event, and the child helpline is often the first place the child or young person turns to, before disclosing to a friend, parent or anyone else. This highlights the tremendously important and potentially transformative power that child helplines have; their accessibility, confidentiality and professionalism mean they can respond to children when they are at their most desperate and set them on the path to healing.

Statistics from child helplines are low compared to the anticipated rate of OCSEA based on the Disrupting Harm research. While child helplines report high confidence in their counsellors' ability to detect and categorize OCSEA contacts, 75% of the child helplines who reported no cases assessed their counsellors' capabilities as either "Very Well" or "Moderately Well".

Our research confirmed that the majority of child helplines allow counsellors to select multiple reasons for categorizing a contact and also provide the ability to differentiate between online and offline-related cases within a category. For example, when a child or young person calls discussing suicidal thoughts after having been sexually abused online, the counsellor should be able to log both issues as reasons for the contact, including distinguishing the issue from offline sexual abuse.

Our research shows a potential area for intervention arises in recording cases that encompass both online and offline elements. Furthermore, the low level of consensus across child helplines in categorizing specific scenarios creates discrepancies and may distort compiled data. For those few child helplines whose data-logging systems neither accommodate the selection of multiple reasons for contact nor routinely differentiate between online and offline cases, the data they subsequently extract and share with partners, donors, research institutes and so forth is both skewed and incomplete.



1. <https://www.end-violence.org/disrupting-harm#findings>

Our recommendations

1

Child Helpline International should lead a network-wide initiative to align on the classification, taxonomy and logging of OCSEA-related cases.

Such capacity-building activities could flesh out any disagreements and discrepancies and delineate aspects of OCSEA as opposed to “Bullying” or “Sexuality”, for example. The ability to log cases across a number of categories, or at least the online nature of a case, is very important in relation to cases of OCSEA. The result would be a consistent and reliable form of OCSEA classification, providing a more accurate depiction of the magnitude of the issue as reported to child helplines. This, in turn, would strengthen the understanding of the scale of OCSEA and the role of child helplines in responding to it.

2

At the national level, awareness-raising activities are needed for all actors:

- Children, young people, their caregivers and communities should be made aware of the nature of OCSEA in order to reduce shame and stigma, and should be made aware of the existence of child helplines. This will make identifying cases easier and quicker and ultimately help prevent OCSEA altogether.
- Raising awareness about OCSEA will also reduce the stigma and shame which surround it – thus encouraging disclosure – and make a clear distinction between child helpline services and the CSAM reporting hotlines and portals.
- Children and young people affected or at risk of OCSEA need to know about the existence of child helplines. They need to know about their functions, their mode of operation and the confidentiality that they abide by. The data analysed here indicates that one in three victims contacts a child helpline within a week of an event of online child exploitation and abuse. This indicates the trust placed in child helplines and in the service being confidential, free of cost and accessible. These factors should be emphasized in any awareness raising.

3

Child helplines should continue to log data and contacts on cases of OCSEA.

For this data to be reliable, comparable and easily accessible to analysis, child helplines’ data logging and management systems must be convenient, efficient and dynamic. Child helplines around the world would benefit from adopting and integrating Asele or other equally powerful software into their operations. This transition often requires additional resources and support – financial or in the form of trainings – for the child helpline.

4

Child helplines and Child Helpline International should initiate and continue to partner with tech platforms

such as Meta, Google, Discord and others, to find ways to streamline safe and accessible reporting mechanisms and referrals to child helplines, both in-device and in-app.

5

Governments and other institutional funders should support and adequately resource national child helplines

so that they can continue to respond to cases of OCSEA and meaningfully take up their role as envisioned in the WePROTECT Model National Response (MNR). Governments should signpost child helpline services in their national strategies to respond to OCSEA.

