AUGUST 2022 | EXECUTIVE SUMMARY

The Role of Caregivers: Safeguarding & Enhancing Youth Resilience Against Harmful Sexual Encounters Online

Findings from qualitative and quantitative SG-CSAM research among parents and guardians in 2021

Research conducted by Thorn in partnership with Benenson Strategy Group





Overview

Caregivers play a central role in preparing kids to navigate risky online encounters and in fostering the development of their child's digital resilience. However, their success is heavily influenced by the age at which the conversations on the subject begin and the nature of the guidance they provide. Conversations that happen too late or communicate blame and shame fail to safeguard and can, at times, unintentionally isolate kids who are at risk.

This research¹ focuses on understanding the attitudes, perceptions, and behaviors of caregivers as they relate to how they talk with their children about the sharing and nonconsensual re-sharing of SG-CSAM,² including an exploration of barriers and motivators that influence how, when, and if those conversations occur. In surveying 2,000 caregivers, four key findings emerged:

- Caregivers generalize talks about online safety with their kids.
- 2 Gender plays a pervasive role in how caregivers approach SG-CSAM with their child.
- Caregivers perceive that their children would never engage with SG-CSAM or are too young.
- Not all kids have equal access to engaged or informed caregivers who can help safeguard them from the risks associated with SG-CSAM.

Methodology & Research Design

This research focused on caregivers of children aged 7 to 17. Both qualitative and quantitative tools were used to collect data related to caregiver attitudes and behaviors about the role of technology in their child's life and its intersection with sexual exploration and exploitation.

PHASE 1 - EXPLORATORY RESEARCH

In 2019, alongside an online survey administered to 996 minors on the topic of SG-CSAM, Thorn also administered a survey on the same topic to 402 caregivers. Results from this phase provided foundational insights that formed the basis for the subsequent phases.³

PHASE 2 - IN-PERSON FOCUS GROUPS

Four focus groups were conducted in Denver, Colorado on March 4-5, 2020. The focus groups included two caregiver groups and two youth groups).

PHASE 3 - QUANTITATIVE ONLINE SURVEYS

In 2021, 2,000 caregivers from across the United States participated in one of two 18-minute online surveys. To ensure a representative sample nationwide, data was weighted to age, gender, race, and geography, based on U.S. Census data.

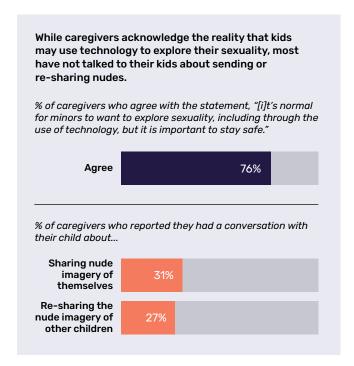
¹ Thorn. (2022). The Role of Caregivers: Safeguarding & Enhancing Youth Resilience Against Harmful Sexual Encounters Online. Available at: https://info.thorn.org/hubfs/Research/Thorn-RoleOfCaregivers-2022-FullReport.pdf

² Self-generated child sexual abuse material (SG-CSAM) is explicit imagery of a child that appears to have been taken by the child in the image. This imagery can result from both consensual or coercive experiences.

³ Thorn. (2019). Self-Generated Child Sexual Abuse Material: Attitudes and Experiences. Available at: https://www.thorn.org/self-generated-child-sexual-abuse-material-attitudes-and-experiences/

Key Findings

For the vast majority of kids growing up today, online exploration is a pivotal part of adolescence and, at a basic level, caregivers understand that adolescents today use technology to explore their sexual development. Tellingly, 3 in 4 (76%) caregivers reported some level of agreement with the statement, "[i]t's normal for minors to want to explore sexuality, including through the use of technology, but it is important to stay safe."

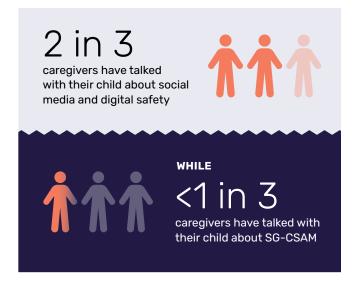


However, while acknowledging that reality, most caregivers have not had a conversation with their child about nudes. Overall, slightly more than one-third of (37%) caregivers had talked with their child about an SG-CSAM topic: 1 in 3 (31%) caregivers reported they had had a conversation with their child about sharing nude imagery of themselves and 1 in 4 (27%) reported they had a conversation with their child about re-sharing the nude imagery of other children.

Among a list of 13 different coming-of-age topics that caregivers were asked if they had discussed with their child, talking with their child about sharing SG-CSAM

registered tenth and re-sharing SG-CSAM registered twelfth in likelihood for caregivers to have discussed the topic with their child. Comparatively, caregivers were most likely to indicate they had talked with their child about social media and digital safety, bullying, and smoking; they were least likely to indicate they had talked with their child about pornography, resharing SG-CSAM, and sexual assault.

Where conversations are occurring, caregivers generalize talks about online safety with their kids. This often comes at the expense of explicit discussions that can help kids recognize and navigate the distinct risks and pathways of grooming and sharing nudes. While 2 in 3 caregivers have talked with their child about social media and digital safety, fewer than 1 in 3 caregivers have talked with their child about SG-CSAM. Although SG-CSAM is predominately a digital issue it may not typically be included in more general online safety discussions caregivers are having with their child.



Caregivers who generalize talks about online safety not only risk presenting a false dichotomy of online risk to their child, but they also establish a false sense of confidence in their child's ability to navigate digital spaces safely - after all, they've "talked with them about it." Alternatively, specific conversations

as part of an ongoing dialogue equip both caregiver and child with a vocabulary to discuss the topic and models how both adults and kids can navigate an uncomfortable topic together.

Caregivers perceive that their children would never engage with SG-CSAM or are too young.

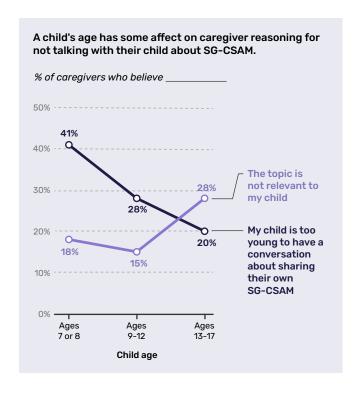
This, combined with a lack of confidence in speaking with their child about this topic or the tech they use, inhibits critical conversations between caregivers and their kids.

Unsurprisingly, caregivers who indicated they had not had a conversation with their child about SG-CSAM reported greater feelings of discomfort at the idea of having such conversations than caregivers who had already had them. Among caregivers who had not had a conversation with their child, 4 in 5 indicated the following factors would make them more likely to have that conversation: Knowing other parents at their child's school were discussing the issue with their children (82%), having a better understanding of the tech platforms used by their child to share nude imagery (81%), and hearing news that SG-CSAM behavior was occurring more frequently (80%).

Among caregivers who had not yet had a conversation with their child about sharing nudes of themselves and/or re-sharing the nudes of other children, 1 in 4 thought their child was too young to discuss the topics with and 1 in 5 believed the topics were not relevant to their child. Given current research shows kids have shared nudes as young as age 9 and that in 2020, 1 in 7 kids aged 9-12 self-reported they had shared nudes of themselves4 these conversational inhibitors are at odds with the self-reported experiences of when young people require safeguarding on the topic.

While the perception that their child was too young to have a conversation about sharing their own SG-CSAM lessened as the child got older, caregivers' belief that the topic was not relevant to their child

increased as the child aged. Among those who had not had the conversation with their child, caregivers of older children (aged 13-17) were about twice as likely to indicate the topic was not relevant compared to caregivers of younger children (aged 9-12).



When caregivers were asked to identify what they thought was the most appropriate age for a child to start having conversations about SG-CSAM, a clear disconnect between expectation and reality emerged. For instance, a majority of caregivers indicated that the most appropriate age to have a conversation with a child about sharing (55%) or re-sharing (54%) SG-CSAM is before a child turns 13. However, only 1 in 5 caregivers of children aged 7-12 reported they had had a conversation about sharing (21%) or re-sharing (20%) SG-CSAM with their child.

Decoupling caregiver perceptions that only "certain types" of kids have exposure to or experiences with SG-CSAM, or that this is only a topic for teenagers, is essential for interventions that focus on activating more caregivers to have open and ongoing dialogues with their children about the topic and its inherent risks. Luckily, many caregivers are open to learning

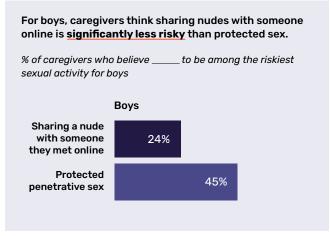
⁴ Thorn. (2021). Self-Generated Child Sexual Abuse Material: Youth Attitudes and Experiences in 2020. Available at: https://info.thorn.org/hubfs/Research/ SGCSAM_Attitudes&Experiences_YouthMonitoring_FullReport_2021.pdf

about this issue and are interested in resources that facilitate conversations with their kids.

Gender was found to play a pervasive role in how caregivers approach SG-CSAM with their

child. Specifically, much of the gender-based findings revealed that caregivers see more risk and responsibility in SG-CSAM activities for girls than they do for boys.





For instance, caregivers lean into approaching the issue for girls from a perceived sexual predator perspective. While 73% of caregivers asked about daughters identified they should talk to their child about online sexual predators between the ages of 7-12, only 64% of caregivers asked about sons reported the same. In contrast, when asked about sharing SG-CSAM, 60% of caregivers asked about sons identified the most appropriate age as between 7-12, compared to 50% of those asked about

daughters. Moreover, caregivers perceived protected sex as equally risky to sharing nudes with someone online for girls while sharing nudes with someone online as significantly less risky than protected sex for boys.

Caregivers who have talked with their child about SG-CSAM displayed a greater likelihood to blame a girl if her nudes were leaked than if the child featured in the leaked imagery was a boy. In fact, caregivers who had had the conversation were 12 points more likely to associate ultimate blame with a girl victim (51%) than they were with a boy victim (39%).

Caregivers who talked with their child about SG-CSAM were 12% more likely to associate ultimate blame with a girl victim than they were with a boy victim.



Such biases underservice and create barriers for both girls and boys. Girls are presented with unique barriers for seeking help. They are shamed for their victimization and taught to shoulder personal responsibility in circumstances of potential abuse and exploitation. Boys are presented with unique barriers for receiving protection. They are not appropriately factored into risk considerations or included in subsequent attempts at safeguarding. Recognition of these gender-influenced gaps is a particularly acute need given recent research suggests boys, especially younger boys (aged 9-12), have similar (and at times increased) risk levels related to SG-CSAM compared to airls.5

Among all coming-of-age topics covered, when caregivers were asked where others could play a role in helping to educate their child, more than 4 in 5 caregivers indicated they were comfortable with someone else talking to their child about each issue. Approximately 1 in 3 (32%) caregivers identified they would feel comfortable with their child learning about sharing SG-CSAM from school, while 2 in 5 (39%) indicated the same about re-sharing SG-CSAM. Caregivers identified that the most important lesson for a school program to cover is that minors should always turn to their caregiver if they are in a situation involving SG-CSAM, followed by teaching kids to use platform-based reporting tools to address incidents of non-consensual re-sharing.

While many are open to learning more about SG-CSAM and receiving support in talking to their children about the topic, not all kids have equal access to engaged or informed caregivers who can help safeguard them from the risks associated with SG-CSAM — and sadly, some caregivers hold extreme perspectives that could worsen outcomes for a child confronting a risky online experience. Half (53%) of all caregivers indicated they would place the ultimate blame on the victim whose image had been non-consensually re-shared.6 Additionally, when presented with a hypothetical situation in which their child was caught at school re-sharing the nude imagery of another student, 1 in 2 (51%) caregivers indicated their child should be suspended from school, 1 in 3 (34%) indicated their child should be expelled from school, and 1 in 5 indicated an alternatively severe consequence such as, being convicted of a crime (20%), losing the opportunity to attend college (20%) or future employment opportunities (19%), and being required to register as a sex offender (18%). Additionally, caregivers of younger children (aged 7 or 8) were the most likely to indicate they believe their child should be expelled from school (44%).

In a hypothetical situation in which their child was caught at school re-sharing the nude imagery of another student...

1 in 2

caregivers indicated their child should be suspended from school



1 in 3

caregivers indicated their child should be expelled from school



1 in 5

caregivers indicated an alternatively severe consequence



Currently, too many children feel they do not have a caregiver to turn to — because the conversation isn't happening, is toxic or threatening, or for many, because they simply do not have a steady caregiver physically present in their lives. This underscores the critical truth that safeguarding kids online requires strong networks of support, inclusive of caregivers, but not exclusive to them. Extended families, educators, medical professionals, law enforcement, policy makers, and tech companies all have a role in protecting young people online and supporting them if they encounter abuse.

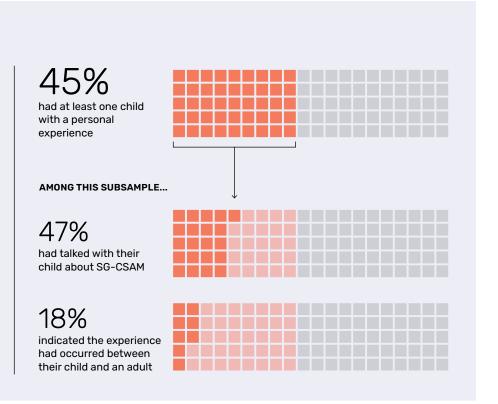
⁵ Thorn. (2021). Self-Generated Child Sexual Abuse Material: Youth Attitudes and Experiences in 2020. Available at: https://info.thorn.org/hubfs/Research/SGCSAM_Attitudes&Experiences_YouthMonitoring_FullReport_2021.pdf

⁶ Caregiver perceptions of blame stand in contrast to youth perceptions where 40% of surveyed youth placed the ultimate blame on the victim. Thorn. (2021). Self-Generated Child Sexual Abuse Material: Youth Attitudes and Experiences in 2020. Available at: https://info.thorn.org/hubfs/Research/SGCSAM_Attitudes&Experiences_YouthMonitoring_FullReport_2021.pdf

Lived Experiences

Caregivers were asked if any of their children had a personal experience related to SG-CSAM, including things like if they had...

- Been asked for nude imagery of themselves
- Shared nude imagery of themselves
- Nude imagery of themselves non-consensually re-shared
- Non-consensually re-shared the nude imagery of another child



"I [would] be really hurt and sad for my child...I [would] talk to the school first then talk to my child to know [to] whom the picture was sen[t] to and try to reduce the spread of th[e] picture. I [would] try and be strong [and] tell my child that it was a mistake and that it happens that there are a lot of nude pictures on the cyber network, it could happen to anyone and that it is okay [in] the end...

The most important thing for me is to keep my child strong and not feeling bad and [to] support him or her."

CIS MALE, 35, WHITE, NORTHEAST

Now more than ever, it's essential for caregivers to have direct and frequent conversations with their kids about their safety online, including conversations about SG-CSAM. This is particularly so given the unique risks that are present when sexual exploration and internet access mix and the different pathways that can ultimately result in similar harms to the child involved.

Safeguarding kids online is not a simple binary focused on whether or not an adult in their life has spoken to them about a given topic or online threat. Rather, it is the substance and quality of those conversations that makes safeguarding possible and is what reinforces their child's confidence in turning to a trusted adult when they experience online harms. Failure to talk to kids about these topics or conversations that inappropriately blame a child for the actions of others leave them isolated and vulnerable.

As a result, there is an acute and resounding need for caregiver support and resources that are capable of meeting them where they are and helping them get to where they need to be — to having open and discrete conversations with their child about the risks of SG-CSAM based on harm reduction messaging.

At the same time, it's also vital to acknowledge that not all kids have access to caregivers who create and nurture safe environments for their child's development. While engaged and informed caregivers can make all the difference, the reality is that not all kids have access to them. In their absence, kids need access to other support resources, both online and offline, including the activation of other trusted adults within their ecosystems as well as robust prevention and reporting mechanisms within platforms.

Understanding the complex intersection of technology and child sexual abuse empowers us to safeguard kids from the ever-evolving threats they face online. Without direct insights from caregivers who are the first line of support for kids as they navigate their online experiences, we risk missing the mark in the development of valuable resources that can effectively protect them and foster their resilience.

THANK YOU

We are grateful to the parents and caregivers who took the time to participate in our research. Without their gracious participation, we would not be able to share these key insights about the role of caregivers in safeguarding kids online.



thorn.org | info@thorn.org