

Understanding sibling sexual behaviour and abuse: A form of harmful sexual behaviour in children and young people

Kieran McCartan, Sophie King-Hill, Amy Adams and David Russell

HM Inspectorate of Probation

Academic Insights 2025/10

Contents

Foreword	3
I. Introduction	5
2. Understanding and responding to sibling sexual behaviour and abuse	7
2.1 The added dimension of sibling sexual behaviour and abuse	7
2.2 Research evidence from the UK	8
2.3 The Sibling Sexual Behaviour Mapping Tool (SSB-MT)	10
2.4 Recommendations for policy and practice	12
3. Conclusion	16
References	17

Foreword

HM Inspectorate of Probation is committed to reviewing, developing and promoting the evidence base for high-quality probation and youth justice services. *Academic Insights* are aimed at all those with an interest in the evidence base. We commission leading academics to present their views on specific topics, assisting with informed debate and aiding understanding of what helps and what hinders probation and youth justice services.

This report was kindly produced by Kieran McCartan, Sophie King-Hill, Amy Adams and David Russell, highlighting the importance of recognising sibling sexual behaviour and abuse (SSB-A) as a distinct and complex form of harmful sexual behaviour between children and young people. While SSB-A has gained prominence in both research and policy discourse over recent years, its complexity poses challenges in terms of understanding, engagement and intervention development, and current professional responses are often inconsistent and fragmented. Moving forward, a more integrated and cross-sectoral approach is required to ensure that responses are child centred, developmentally appropriate, trauma informed and inclusive of the whole family, recognising the interconnectedness of familial relationships and their influence on outcomes for children and young people.

Building upon the evidence and to support structured, holistic and reflexive professional thinking and planning, a mapping tool (SSB-MT) and outcomes framework have now been developed. Aligned to Epidemiological Criminology (EpiCrim) approaches, the tool and framework underscore the systemic nature of SSB-A, recognising that family dynamics, housing conditions, educational engagement, health needs and social influences all contribute to the emergence and impact of SSB-A. Multi-agency collaboration and provision is thus critical, supported by specialised staff training, targeted public messaging and education, and a focus upon the continuing development of the evidence base.

Dr Robin Moore

St I wen

Head of Research & Data Analysis

Author profiles

Professor Kieran McCartan is a Professor of Criminology and Health at the University of the West of England. Kieran has advised (including the Council of Europe and the Australian National Office of Child Safety) and continues to advise (including the European Union, ECPAT International, and NSPCC) many national and international governments and organisations, as well as sitting on several boards (including the Confederation of European Probation and Circles Southwest). He is currently the Vice-Chair for the National Organisation for the Treatment of Abuse (NOTA).

Dr Sophie King-Hill is an Associate Professor at the Health Services Management Centre, University of Birmingham. Her research focusses on the sexual behaviours and assessment of children and young people, sexual health, sibling sexual behaviour-abuse, misogyny, relationships, sex and health education (RSHE), young men and masculinities, and youth voice. She has written extensively about sibling sexual behaviour and abuse, and developed the Sibling Sexual Behaviour Mapping Tool (SSB-MT). Her work is cross-sector and cross-disciplinary, with a strong emphasis on participatory and co-design methodologies involving young people.

Amy Adams is an ESRC-funded Doctoral Researcher at the University of Birmingham. Her research is focused on sibling relationships in the context of abusive sibling sexual behaviours. Amy has worked on several research projects focusing on abuse and complex families, and she has previously worked as a project officer on the Home Office-funded National Sibling Sexual Abuse Research Project (2020- 2022).

David Russell has extensive experience specialising in work with children and young people with harmful sexual behaviour and/or who have experienced sexual abuse or exploitation. He currently sits on the NOTA Scotland Executive Committee, supporting professionals responding to sexual harm.

The views expressed in this publication do not necessarily reflect the policy position of HM Inspectorate of Probation

1. Introduction

Sexual abuse remains a pervasive issue both locally and globally (McCartan and King-Hill, 2025). It is defined as engaging in sexual activity with someone who cannot provide informed and freely given consent (McCartan and King-Hill, 2025). However, it also represents a complex and multifaceted phenomenon, encompassing diverse behaviours, definitions, individuals and underlying causes (McCartan and King-Hill, 2025). Effective understanding and response to sexual abuse requires nuanced consideration of the context, the nature of the sexual activity, and the people involved.

In recent years, sibling sexual behaviour and abuse (SSB-A) has gained prominence in both research and policy discourse (King-Hill et al., 2023; McCartan, King-Hill and Allardyce, 2024). Notably, two special issues dedicated to SSB-A were published in *Child Abuse & Neglect* and the *Journal of Sexual Aggression* in 2024 and 2023. While academic interest in SSB-A is growing, it has long been a concern within professional practice. Yet, its complexity often poses challenges for practitioners in terms of understanding, engagement, and intervention development (King-Hill, Gilsenan and McCartan, 2023).

These challenges are further exacerbated by a limited research evidence base and insufficient policy attention (Adams and McCartan, 2025). Until recently, UK professionals working with children and young people (CYP) who display SSB-A as a form of harmful sexual behaviour (HSB) had few evidence-based interventions to draw upon. However, the introduction of the Sibling Sexual Behaviour — Mapping Tool (SSB-MT) (King-Hill and Gilsenan, 2023) and the development of the SSB-A Practice Outcomes Framework (Adams and McCartan, 2025) now offer structured, evidence-informed support for professionals working with affected CYP and their families.

It is pertinent, before exploring SSB-A, to understand the terminology surrounding it. There is growing recognition that, when working with and discussing CYP, the use of the term SSB-A rather than 'sibling sexual abuse' may be more appropriate. This shift in terminology helps align understanding of complex sexualised behaviours between siblings with Hackett's (2010) continuum of harmful sexual behaviour (HSB) (see Figure 1). However, it must be noted that there are no sexually-motivated behaviours between siblings that can be deemed normal or developmentally appropriate. The term SSB-A captures the spectrum of escalating sexual behaviours that can occur between siblings, reinforcing that some behaviours are better understood as inappropriate or problematic rather than inherently abusive (King-Hill et al., 2023; King-Hill, 2025). Broadening the language from 'sibling sexual abuse' to 'sibling sexual behaviour and abuse', and conceptualising these behaviours as existing on a continuum, enhances professional capacity to conduct nuanced assessments, make informed decisions, and improve planning and practice in this complex area (King-Hill and McCartan, 2024; McCartan, King-Hill and Allardyce, 2024). Concerns have been raised that framing all sexualised behaviour between siblings as abuse risks leading to inaccurate, harmful and potentially unjust outcomes for some CYP and their families (McCartan, King-Hill and Allardyce, 2024).

Figure 1: The Hackett continuum of harmful sexual behaviour (Hackett, 2010)

Normal	Inappropriate	Problematic	Abusive	Violent
Developmentally expected	Single instances of inappropriate sexual behaviour	Problematic and concerning behaviours	Victimising intent or outcome	Physically violent sexual abuse
Socially acceptable	Socially acceptable behaviour within peer group	Developmentally unusual and socially unexpected	Includes misuse of power	Highly intrusive
Consensual, mutual, reciprocal	Context for behaviour may be inappropriate	No overt elements of victimisation	Coercion and force to ensure victim compliance	Instrumental violence which is physiologically and/or sexually arousing to the perpetrator
Shared decision- making	Generally consensual and reciprocal	Consent issues may be unclear	Intrusive	Sadism
		May lack reciprocity or equal power	Informed consent lacking or not able to be freely given by victim	
		May include levels of compulsivity	May include elements of expressive violence	

SSB-A is complex from the outset. The concept of a sibling is hard to define; it is shaped not just by biology, but by emotional bonds, duration in which siblings live together, shared experiences, and cultural understandings of family. While evidence of the etiological determinants of SSB-A remain incomplete, recent reviews have identified a set of common factors consistently associated with its development (see Yates et al., 2024; Hanson, 2024; Adams, 2024; McCartan, Allardyce and King-Hill, 2024). Families affected by SSB-A often experience elevated levels of stress, though not universally, that may include marital conflict, inconsistent or overly rigid sexual boundaries within the household, parental histories of abuse, substance misuse, and exposure to domestic violence (Adams, 2024; McCartan, Gilsenan and King-Hill, 2023). The following factors can also be attributed to the occurrence of SSB-A:

- exposure to harmful online content (e.g., pornography) (King-Hill et al., 2023)
- anger and jealously within the sibling relationship (Yates et al., 2024)
- physical and emotional parental absence (McCartan, Gilsenan and King-Hill, 2023).

It is essential therefore to understood SSB-A within the context of the whole family system and understand the socio-ecological factors encompassing the sexualised behaviour. This means directing prevention strategies and responses towards understanding familial dynamics, histories, characteristics, and relationships (McCartan, King-Hill and Gilsenan, 2023). Additionally, thinking holistically about how SSB-A fits within current Epidemiological Criminology (EpiCrim) approaches is conducive to prevention and involves recognising the intersection of public health and criminal justice frameworks; where behavioural patterns are understood not only through individual pathology but also through broader social, environmental and systemic determinants (McCartan and King-Hill, 2024, 2025).

2. Understanding and responding to sibling sexual behaviour and abuse

2.1 The added dimension of sibling sexual behaviour and abuse

Research consistently demonstrates that a significant proportion of sexual abuse and harm affecting CYP is carried out by individuals under the age of 18 (King-Hill, 2025). As with HSB displayed by non-related CYP, SSB-A typically emerges during childhood, involving one or more children engaging in sexually harmful behaviour towards another sibling (Yates, Mullins, Kewley and Adams, 2024). This means that it is important to tailor responses to SSB-A to the context in which it is reported and the family dynamics that exist at the time in childhood.

SSB-A can persist or evolve into adulthood as a form of sexual, emotional, or psychological abuse (King-Hill et al., 2023) and it is essential that adult victim-survivors are supported when disclosing or seeking help for non-recent experiences. However, it is equally important to recognise that SSB-A is a form of HSB and, because it involves two or more CYP under the age of 18 years, it requires a child-centred and developmentally-informed response. A child-centred approach is the notion that CYP's pathways in and out of engaging in sexual harm are complex and underpinned by factors and determinants which are not necessarily pertinent to adults (Hackett et al., 2024). Further adopting a child-centred approach means recognising that CYP who display sexual harm should be viewed first and foremost as 'whole children' who are going through a rapid period of development and change, particularly in terms of cognitive maturation and social, physical and sexual development (Allardyce and Yates, 2018; Hackett et al., 2024). A child-centred approach not only relates to how CYP are perceived but also how they are responded to, and CYP who engage in HSB require holistic interventions and treatments which focus on health, wellbeing and development and less so on punishment and criminality (Hackett et al., 2024).

Moreover, while it is helpful to frame and understand SSB-A as a form of HSB, it is important to recognise that HSB enacted by non-related CYP differs (in some respects) to sexualised behaviour between child siblings in terms of its determinants and professional responses. SSB-A requires a whole family approach as the occurrence of SSB-A co-exists within complex contexts such as familial dynamics, characteristics and relationships (Adams, 2024), and all family members are affected by the SSB-A and the professional consequences and actions that are taken. Crucially, the family system plays a central role in both the emergence and response to SSB-A. The family (i.e., parents, other siblings and in some cases extended family members) represent a third dimension in the dynamic, alongside the child who has harmed and the child who has been harmed and must be considered in all interventions and professional conversations (King-Hill and Gilsenan, 2023; McCartan and King-Hill, 2024). The family environment can either exacerbate or mitigate the impact of SSB-A, influencing how sexual behaviour is managed and understood (McCartan, King-Hill and Gilsenan, 2023; see Figure 2). Therefore, effective prevention and response strategies must adopt a whole-family approach, recognising the interconnectedness of familial relationships and their influence on outcomes for CYP.

Impacted by Lower likelihood of sibling family system sexua ahuse Individual Family beliefs, Turning individual and interpersonal risk Treatment beliefs, factors into protective ones through attitudes attitudes contextual family therapy that can reinforce protective community and Prevention societal factors Higher likelihood of Dysfunctional sibling sexual

Figure 2: Context mapping of SSB-A in the family system (taken from McCartan, King-Hill and Gilsenan, 2023)

An additional issue to consider is how the timing of disclosure or discovery of SSB-A influences how the behaviour is understood and responded to, as demonstrated by the following distinction:

- In the UK, if SSB-A is identified and reported during childhood, the child who has
 displayed the behaviour towards another sibling is typically approached within the
 context of a HSB pathway and it is likely that a therapeutic and welfare approach will be
 taken (Archer and Windle, 2016). However, depending on the severity of the
 behaviours, this may also involve the youth justice system.
- In contrast, if the behaviour is disclosed retrospectively by the victim-survivor in adulthood and a criminal justice pathway is warranted, the individual who carried out the behaviour during childhood will be processed through the adult criminal justice system, and the behaviour is categorised as non-recent child sexual abuse.

This distinction highlights that identical behaviours can lead to markedly different outcomes depending on the timing of disclosure and reporting.

2.2 Research evidence from the UK

Research evidence on SSB-A has increased in the UK over the last five years (see Figure 3 for an overview); this is largely due to the Home Office funding the first ever national research project on SSB-A, for which King-Hill and McCartan were lead investigators. The recent research shows that SSB-A is a prevalent issue that affects children and families across all

socio-economic backgrounds and family structures, including married, stepparent and single-parent households (Adams, 2024; Yates et al., 2024). However, accurately determining its prevalence remains challenging due to poorly constructed definitions, broad understandings of what a sibling relationship is, and ongoing difficulties in establishing appropriate and consistent terminology (McCartan, King-Hill and Allardyce, 2024; Yates et al., 2024).

Figure 3: Overview of key research findings since 2020 (from Adams and McCartan, 2025)

Key Point	Reference
SSB-A is a common form of child sexual abuse.	Yates, Mullins, Adams and Kewley, 2024
There is no single clear definition of what constitutes SSB-A and challenges persist around appropriate and correct language usage.	McCartan, King-Hill and Allardyce, 2024; Yates et al., 2024
There is a lack of research focused on the child responsible for harm and understanding the socio-ecological determinates regarding preventing and treating SSB-A.	McCartan and King-Hill, 2024; Yates et al., 2024
SSB-A often occurs where there is family stress and adversity, but not always and there is a need to understand how SSB-A affects all family types.	Adams, 2024; McCartan, King- Hill and Gilsenan, 2023; Yates et al., 2024
SSB-A has an impact into adulthood and affects adults' psychosexuality and relationships, and can lead to anxiety, depression and unhealthy coping methods such as substance use.	King-Hill, McCartan, Gilsenan, Beavis and Adams, 2023
SSB-A can take place within families across the socio- economic spectrum and is not limited to one family type.	Adams, 2024; Yates et al., 2024
Professional responses to SSB-A can be contradictory and confusing, often reflecting deficits in service-wide training, knowledge and guidance.	King-Hill, McCartan and Gilsenan, 2023
The impact of SSB-A is not individualised and often all family members are negatively affected; it should be understood as a 'whole family issue'.	Adams, 2024; King-Hill et al., 2023a
Accessing services for SSB-A is subject to a postcode lottery, with few services solely dedicated to supporting affected individuals and families.	McCartan, King-Hill and Allardyce, 2024
Most disclosures of SSB-A are made in adulthood, and disclosure is subject to a myriad of barriers.	Yates et al., 2024
There is a need for professional recognition and understanding of the wider determinants underpinning SSB-A.	King-Hill and Gilsenan, 2024; McCartan and King-Hill, 2024
Socio-ecological approaches are required to understand SSB-A in its entirety.	McCartan and King-Hill, 2024

SSB-A can and does occur between siblings of all gender pairings and involves children of all ages (Yates et al., 2024), albeit female children are most frequently represented within the victim-survivor group, suggesting the need for a gender-sensitive approach. The sexual behaviour and abuse can be sustained over long periods and while possible is unlikely to be a one-time event (Yates et al., 2024). The nature of the sexually abusive behaviours can range from non-contact behaviours such as exposure to pornography to sexual behaviours involving physical contact such as penetration (Yates et al., 2024; King-Hill et al., 2023).

As previously discussed, family dynamics and relationships are central to understanding SSB-A as there are often social and familial taboos surrounding sibling sexual behaviour. These can inhibit disclosure/reporting by both victim-survivors and caregivers and open discussion, particularly within family systems where loyalty, shame and fear of consequences are present (King-Hill et al., 2023). Responses to SSB-A by family members (most commonly parents) are often embedded in strategies of minimisation such as denying and diminishing the SSB-A (Adams, 2024), responses which are most often reflective of shame, fear and lack of understanding rather than a lack of responsibility to act. SSB-A can have enduring effects into adulthood, influencing individuals' affected psychosexual development, interpersonal relationships, and can contribute to maladaptive coping strategies such as substance misuse (Yates et al., 2024; King-Hill et al., 2023).

Further, recent research has identified that professional consideration of appropriate responses is essential to ensure effective support and recovery (King-Hill and Gilsenan, 2024). However, in the UK, current professional responses are often inconsistent and fragmented, reflecting significant gaps in service-wide training, practitioner knowledge and the availability of clear guidance (King-Hill, McCartan and Gilsenan, 2023). These challenges are further exacerbated by limited access to dedicated services for SSB-A across the UK, resulting in geographical disparities in service provision in which support varies considerably depending on geographic location (McCartan, King-Hill and Allardyce, 2024). Moreover, social and familial stigma surrounding SSB-A frequently inhibits open discussion, disclosure and help-seeking, contributing to under-recognition and under-resourcing. As such, there is an urgent need for professional recognition of the broader social, psychological, and systemic determinants underpinning SSB-A, alongside the development of consistent, evidence-informed pathways for intervention and support (King-Hill and Gilsenan, 2024; McCartan and King-Hill, 2024).

2.3 The Sibling Sexual Behaviour Mapping Tool (SSB-MT)

The SSB-MT was developed to support professional thinking and planning in cases involving SSB-A. The tool is designed for use by social workers and frontline practitioners, not with children or families directly, and aims to facilitate holistic, reflexive and multi-agency responses to SSB-A. As set out in Figure 4, the SSB-MT is organised into six key domains: (i) sibling sexual behaviours, (ii) family dynamics and parenting, (iii) home circumstances and housing, (iv) education, (v) health and development, and (vi) social context.

Figure 4: Sibling Sexual Abuse - Mapping Tool (King-Hill and Gilsenan, 2024)

Domain 1: Sibling sexual behaviours

- Explore what behaviour/s have occurred and how this was discovered and/or reported.
- Use thinking prompts and further guidance on assessing the nature of sibling sexual behaviour.

Domain 2: Family dynamics and parenting

- Consider the wider family using thinking prompts and information available to you (i.e. if there has been prior family involvement, details from referring agency).
- Explore family relationships, patterns, parenting, capacity, parental responses and how this may affect children.

Domain 3: Home circumstances and housing

- Explore the physical environment of the home and living circumstances of the family using information available to you. Consider how this might be a risk or safety factor.
- Use thinking prompts to direct your inquiry.

Domain 4: Education

- Think about the children's engagement in education and the role of the school. Explore risk and safety factors within the context of school.
- Consider the thinking prompts alongside information from referral or any other details available to you.

Domain 5: Health and development

- Explore the role of any health or developmental issues in shaping the behaviour.
- Think about each member of the family and consider if there are any existing concerns or prevalent needs in this area. Consider how this might influence or impact behaviour.
- Use thinking prompts to assist.

Domain 6: Social context

- This domain seeks to explore the 'pathway' to SSB by looking at the wider social context around the child and what might influence them. This includes social media, their local community, their peers, the family's support networks and the kinds of behaviours they have been exposed to.
- Use the thinking prompts and existing information about the family to direct you.

Domain 7: Summary of actions and outcomes

- Based on your thinking in the prior sections, use this domain to record and summarise the actions necessary to ensure all concerns relating to the children and family are addressed.
- Include details of other organisations that might need to be contacted, key next steps within your own organisation, and when these outcomes need to be completed. This could include dates for actions to be reviewed.

Each domain prompts practitioners to record concerns, strengths, impacts, required interventions and action points (see Figure 5). This structure draws on the Signs of Safety framework and is tailored to the complexities of sibling sexual behaviour. Practitioners are encouraged to consider the whole family system – including the child who has harmed, the child who has been harmed, other siblings, and extended family members – when mapping information. The tool supports the identification of risk and protective factors, and facilitates planning that is sensitive to the relational and environmental contexts in which SSB-A occurs.

The mapping tool addresses a critical gap in professional practice by offering structured guidance in a field often marked by anxiety, inconsistent responses, and limited-service provision. It highlights the need for reflexivity, locality-specific service awareness, and whole-family approaches to intervention. The tool complements rather than replaces statutory assessments by enhancing practitioner confidence and clarity in complex cases. Importantly, it

underscores the systemic nature of SSB-A, recognising that family dynamics, housing conditions, educational engagement, health needs, and social influences all contribute to the emergence and impact of SSB-A. By embedding this tool into practice, professionals can move towards more consistent, informed and compassionate responses to children and families affected by SSB-A.

Figure 5: What to cover in practice (King-Hill and Gilsenan, 2024)

Theme Guidance example What concern was presented in the referral? Provide as much detail as possible from the information given. Be as specific as possible when describing what occurred and the context in which it Concerns occurred. Reflect on your initial response and feelings about the information provided. Rember service users can request access to their case records. What is currently working well in this area? Strengths and What other agencies are already involved (if any)? current support What supportive networks are available - to the child and/or the family? What has been the impact of this concern been? **Impact** If there is no current apparent impact, consider what the likely impact of this concern might be on the young person and their family members - physical or emotional? What needs to change? Support/ How can this change be supported? intervention Are you/your agency able to provide this internally? required Who/what agency can provide this support in the local area? Consider scope for engagement with family, availability and access. What needs to happen now to ensure support is actioned? Who needs to be contacted? Action points What can you do now to ensure necessary interventions happen? When should this action plan be reviewed?

Building upon the development of the SSB-MT, the SSB-A Practice Outcomes Framework (Adams and McCartan, 2025) was produced to help practitioners develop robust research and evaluation practice. The implementation and use of the tool and the framework together provide a clear evidence base for supporting CYP and families affected by SSB-A and for evaluating the effectiveness of interventions and support provisions.

2.4 Recommendations for policy and practice

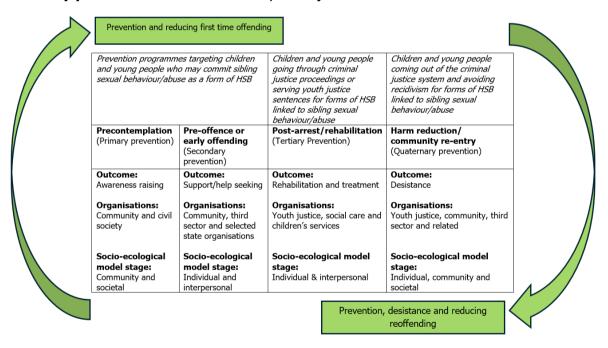
SSB-A occupies a distinct position within the broader landscape of sexual abuse, as it does not represent a newly emerging form of HSB, nor a novel area of practice. Rather, it reflects

longstanding patterns of intra-familial sexualised behaviour that has historically been under-recognised and under-addressed within professional discourse and service provision. Nevertheless, it is an emerging form of HSB research, policy and intervention development (both first-time and relapse prevention). This indicates that there are key factors, issues and concerns that need to be considered (King-Hill et al., 2022; King-Hill and McCartan, 2023; Adams and McCartan, 2025):

Clear commissioning and (co) ownership of SSB/A services: SSB-A is a multi-agency issue. There needs to be shared, co-founded and co-commissioned SSB-A service provisions where different organisations and agencies work in partnership on the issue. This reworking of service provision and delivery is crucial and essential for successful engagement with service users and increased pro-social outcomes for CYP and families affected by SSB-A.

Frame SSB-A with an EpiCrim framework: In alignment with current research and practice guidance for sexual abuse, SSB-A should be framed within a public health approach. This means that interventions and services for SSB-A should be considered across all prevention levels (i.e., primary, secondary, tertiary, and quaternary) and the full scope of the socio-ecological model (i.e., individual, interpersonal, community, and social) so that a holistic, grounded and fit-for-purpose approach from frontline services can be developed.

Figure 6: SSB-A mapped onto the EpiCrim model (adapted from McCartan, 2022, initially published in Di-Gioia et al., 2022)



Clearer definition, criteria and recording of SSB-A cases as a distinct form of harm:

SSB-A between CYP needs to be clearly defined as a form of HSB, recognising that behaviours range in severity and therefore responses and interventions need to be appropriate to the scale, nature and context of the abuse. This distinction is particularly important in cases where individuals disclose experiences of childhood SSB-A in adulthood; such disclosures should be recognised as non-recent instances of HSB and responded to within appropriate adult safeguarding and justice frameworks.

SSB-A as a family issue: With a clear definition and understanding of SSB-A comes the recognition that SSB-A is a family issue. Professionals, policymakers, and wider community support systems must recognise that SSB-A is deeply embedded within familial systems,

dynamics, and relational patterns and professional action has consequences and impacts to immediate and non-immediate family members. As such, effective responses to and prevention of SSB-A require a whole-family approach, one that considers not only the child or adult involved, depending on the point of disclosure/discovery, but also the broader family context in which the behaviour has occurred.

Use the SSB-MT as a framework for professional practice: The development of the SSB-MT was driven by the need to equip frontline professionals with a structured framework for understanding the complex socio-ecological environments surrounding CYP involved in SSB-A. Designed as a professional practice tool, the SSB-MT enables practitioners to assess the needs of CYP within the context of their family systems and plan appropriate interventions aligned with their organisational remit. It also facilitates effective multi-agency collaboration by promoting consistent language, shared understanding, and coordinated responses. Informed by empirical research and aligned with established frameworks such as Signs of Safety, the tool encourages a holistic, reflexive approach to safeguarding. It prompts practitioners to consider not only the behaviours in question but also the broader familial, developmental and social contexts that may influence or exacerbate SSB-A.

By mapping concerns, strengths, impacts and required interventions across six key domains, the tool supports comprehensive case planning and enhances professional confidence in navigating this sensitive area of practice. Furthermore, the SSB-MT contributes to the development of coherent, evidence-informed responses to SSB-A. By encouraging structured documentation and critical reflection, it strengthens the quality of professional decision-making and supports the generation of robust evidence for intervention planning. In doing so, it addresses a critical gap in service provision and professional guidance, offering a practical resource that aligns with emerging definitions and evaluation frameworks in the field of HSB.

Increased research and evaluation, and the development of a robust evidence base in professional practice: There is a need to develop more robust performance indicators and evaluations in terms of how CYP are responded to and supported by professionals. The evidence for SSB-A professional interventions is sparse; there is thus a need to develop a more substantial research evidence base, so that the effect of interventions and impact on the CYP involved (in the short, medium and long term) can be adequately assessed. In addition, it is essential to note that, as HSB is a multidisciplinary issue, the data collected and analysed must come from across health, social work, education, public health, psychology and social care, which will require linking different and novel datasets.

Staff training across the multi-disciplinary team on SSB-A: A whole-family approach, supported by frameworks such as Epidemiological Criminology and practical tools like the SSB-MT, will enable more coherent, evidence-informed responses to SSB-A. Embedding these developments would support and encourage the importance of equipping professionals with the knowledge and skills necessary to navigate the socio-ecological contexts in which SSB-A occurs. Currently, frontline practitioners often lack specialised training in SSB-A, leading to the adaptation of child sexual abuse or general HSB frameworks that may not adequately address the unique dynamics of sibling-involved cases. This can result in inappropriate, inconsistent, or even harmful decision-making. Without targeted, fit-for-purpose training, professionals may struggle to distinguish between problematic, inappropriate, abusive and violent behaviours within sibling relationships and may overlook the influence of family systems and disclosure timing.

To build a confident and competent workforce capable of supporting all parties affected by SSB-A, there is an urgent need for robust, evidence-based professional development. Training

must be grounded in current research, reflect the nuances of intra-familial sexual behaviour, and promote multi-agency collaboration. By investing in such training, services can ensure that practitioners are equipped to respond appropriately, safeguard effectively, and contribute to meaningful recovery and prevention efforts.

Increase and promote public understandings of SSB-A: There is a clear need for improved, fit-for-purpose public communication and knowledge exchange around SSB-A, led by professionals, policymakers and frontline services. With more transparent, accessible, and intentional messaging that engages individuals and communities, there is greater potential to foster understanding, encourage appropriate responses, and support prevention efforts. This should involve coordinated national level messaging from government and statutory bodies, alongside locally-driven communication efforts by organisations and practitioners embedded within communities. Together, these approaches can help reduce stigma, promote informed dialogue and build a more responsive and supportive environment for those affected by SSB-A.

Placing SSB-A on the Relationships, Sex and Health Education (RSHE) curriculum: As SSB-A is a form of HSB involving CYP, there must be greater emphasis on open conversations and education about it within school settings. SSB-A should be explicitly included in the RSHE curriculum to ensure CYP understand that sexual abuse and harm can occur within sibling relationships. With broader public messaging and targeted education delivered through schools and trusted professionals, CYP are more likely to recognise harmful behaviours, feel empowered to disclose, and seek help. This also enables adults to intervene earlier and more effectively, and minimise long-term effects relating to SSB-A.

Situate SSB-A in community, cultural and societal frameworks: Understanding context is essential to preventing and responding to all forms of sexual abuse. It is important to explore how SSB-A is represented across different cultural settings, including portrayals in media, television, social platforms, literature and gaming, and how this portrayal may create harmful sexual scripts and normalise sexualised behaviours between siblings. For example, the widespread availability and normalisation of family and stepsibling pornography on streaming sites sends problematic messages to consumers. Cultural narratives, personal beliefs, and social norms reinforce one another; therefore, to effectively prevent and respond to SSB-A, examination of the socio-ecological model in its entirety should take place, alongside ensuring CYP have the language and space to recognise and disclose abuse when it occurs.

3. Conclusion

SSB-A is not a new phenomenon within professional settings; however, it remains an emerging area in terms of research, policy, practice development, and intervention design. It is essential to recognise SSB-A as a distinct and complex form of HSB between CYP, one that is deeply embedded in family systems and relational dynamics. While some cases may intersect with youth justice processes, framing SSB-A solely within that lens risks overlooking its broader implications for safeguarding, education, health and therapeutic services.

Whether disclosed in childhood or retrospectively in adulthood, SSB-A requires tailored interventions, specialised staff training, and targeted public messaging that reflect its unique characteristics and challenges. A more integrated and cross-sectoral approach is needed to ensure that responses are developmentally appropriate, trauma informed, and inclusive of the whole family system. The development of such an approach is promoted through the mapping tool (SSB-MT) set out in this paper, while the accompanying outcomes framework supports the use and continuing development of the evidence base and evaluation practices.

References

Adams, A. (2024). 'Family responses, characteristics and dynamics associated with sibling sexual abuse: A scoping review', Child Abuse & Neglect, 162(3):106795.

Adams, A. and McCartan, K.F. (2025). *The Sibling Sexual Behaviour-Abuse Practice Outcomes Framework for services and organisations supporting and responding to sibling sexual behaviour and abuse.* UWE Bristol.

Allardyce, S., and Yates, P. (2018). *Working with children and young people who have displayed harmful sexual behaviour*. Liverpool University Press.

Archer, R. and Windle, M. (2016). *An evaluation of the RESTORE pilot project—Year one (2015–2016)*. The Green House.

Di-Gioia, R., Beslay, L., Cassar, A. and Pawula, A. (2022). *Classification criteria for child sexual abuse and exploitation Prevention programmes*. JRC Technical Report. European Commission.

Hackett, S. (2010). 'Children, young people and sexual violence', in Barter, C. and Berridge, D. (eds.) *Children behaving badly? exploring peer violence between children and young people.* London: Blackwell Wiley.

Hackett, S., Darling, A.J., Balfe, M., Masson, H. and Phillips, J. (2024). 'Life course outcomes and developmental pathways for children and young people with harmful sexual behaviour', *Journal of Sexual Aggression*, 30(2), pp. 145-165.

Hanson, E. (2024). Understanding and responding to sibling sexual harm and abuse. NSPCC.

King-Hill, S. (2025). *Reframing Masculinity for Young Men and Boys: We're in this Together*. Palgrave Macmillan.

King-Hill, S. and Gilsenan, A. (2023). *The Sibling Sexual Behaviour Mapping Tool (SSBMT):* Supporting practitioner confidence, planning and competency when responding to sexual behaviours between siblings. University of Birmingham.

King-Hill, S., McCartan, K.F., Gilsenan, A., Beavis, J. and Adams, A. (2023). *Understanding and Responding to Sibling Sexual Abuse*. Palgrave MacMillan.

King-Hill, S., Gilsenan A. and McCartan, K.F. (2023). 'Professional responses to sibling sexual abuse, Journal of Sexual Aggression', 29:3, pp. 359-373.

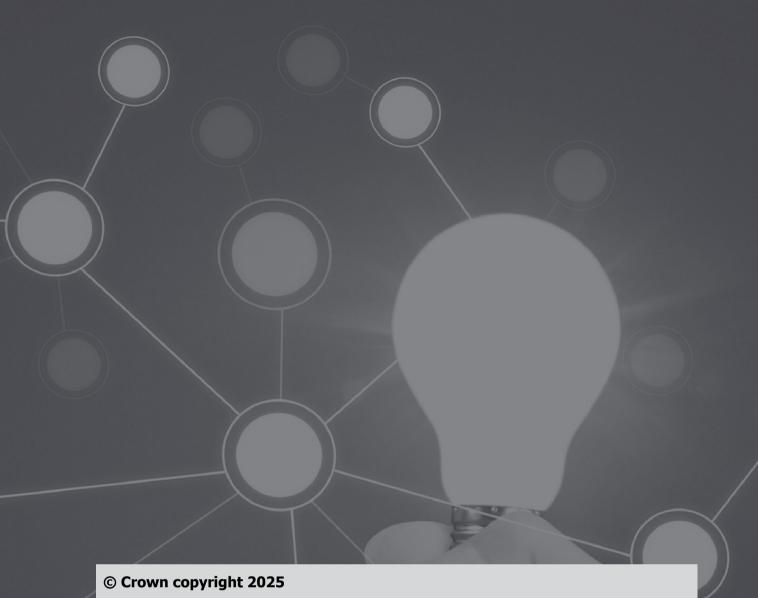
McCartan, K.F. and King-Hill, S. (2025). 'Understating an Epi Crim approach and how it relates to preventing sexual abuse', in K.F. McCartan, A. Eason, S. Senker, N. Adiss and C. Porter, (eds.). *Developing an epicrim approach in working with people convicted of a sexual offence: prevention, treatment and integration*. Palgrave MacMillan. Chapter 2

McCartan, K.F. and King-Hill, S. (2024). 'Developing a Framework for the Prevention of Sibling Sexual Behaviour', *Child Abuse & Neglect*, 162(3): 106849.

McCartan, K.F., King-Hill, S. and Allardyce, S. (2024). 'Reviewing the Evidence on Sibling Sexual Behaviour: Impact on Research, Policy and Practice', *Curr Psychiatry Rep*, 6(3), pp. 37-44.

McCartan, K., King-Hill, S. and Gilsenan, A. (2023). 'Sibling sexual abuse: A form of family dysfunction as opposed to individualised behaviour', *Journal of Sexual Aggression*, 29(3), pp. 427-439.

Yates, P., Mullins, E., Adams, A. and Kewley, S. (2024). 'Sibling sexual abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping review', *Child Abuse & Neglect*, 107076.



You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit www.nationalarchives.gov.uk/doc/open-government-licence or email psi@nationalarchives.gsi.gov.uk.

Where we have identified any third-party copyright information, you will need to obtain permission from the copyright holders concerned.

This publication is available for download at: www.justiceinspectorates.gov.uk/hmiprobation

Published by:

HM Inspectorate of Probation 1st Floor Civil Justice Centre 1 Bridge Street West Manchester M3 3FX

The HM Inspectorate of Probation Research & Data Analysis Team can be contacted via HMIProbationResearch@hmiprobation.gov.uk

ISBN: 978-1-917531-03-0