

Blackburn with Darwen Childrens Services

Child Sexual Exploitation (CSE) Toolkit

Definition:

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/ or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

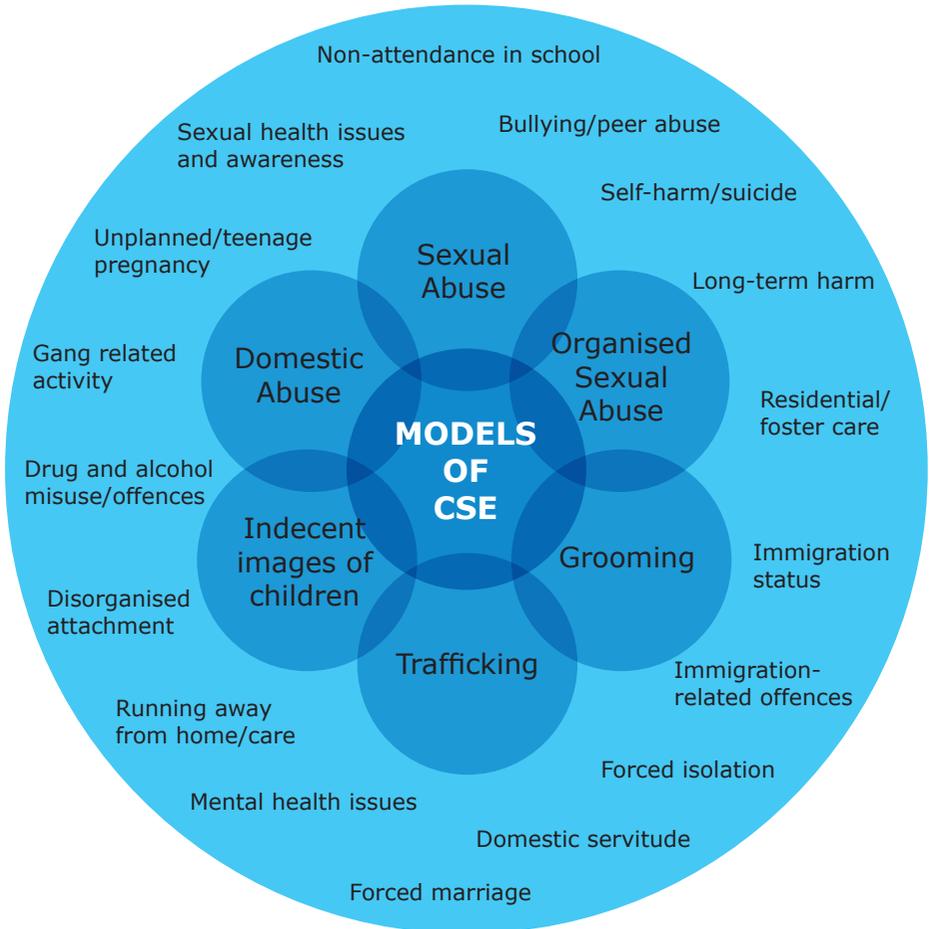
(DfE CSE Guidance 2017)



Child Sexual Exploitation (CSE)

Factors contributing to vulnerability and risk of CSE

CSE, like most child protection concerns, is not a solitary issue; there are a range of inter-related factors and complexities that can increase vulnerability and a young person's risk for CSE. These may include other forms of sexual violence or abuse, domestic violence, trafficking, anti-social behaviour or involvement in gangs (where victims' criminal behaviour can further obscure the abuse experienced – see Berelowitz et al, 2012), and going missing from home or care (Beckett, 2011). These factors do not operate in a neat linear fashion, however, but can combine in a range of complex ways:



High Risk Indicators

The following high risk indicators and underlying risk factors have been developed and include the vulnerabilities and indicators highlighted in the Department for Education CSE Guidance 2017 and recent SCR's.

(Those factors which by their presence constitute a risk, and/or likelihood of CSE).

- » A child or young person being a victim of CSE
- » Direct disclosure of victimisation by a child or young person
- » Peer group relationship with other young people known or strongly suspected to be involved with CSE
- » Associating with adults known or strongly suspected of CSE perpetration
- » Family members or other connections involved in adult sex work
- » Being found in places where CSE or sex work is known or strongly suspected to occur
- » Gang-association and/or isolation from peers/social networks
- » Repeat sexually transmitted infections, pregnancy and terminations
- » Change in physical appearance or dressing in a more sexualised way
- » Acquisition of money, clothes, mobile phones etc. without plausible explanation/ Child has funds for drugs, alcohol, clothing, gifts and unexpected items
- » Child has two or more mobile phones that cannot be accounted for
- » Recruiting others into exploitative situations

High Risk Indicators continued...

- » Child or young person feeling forced, possibly through threats, to engage in sexting/online chat/sending receiving images / performing sexual acts online
- » Leaving home/care without explanation and persistently going missing or returning late
- » On return from missing, regularly refuses to complete or provide info for Return from Home Interviews
- » On return from missing, regularly refuses to complete or provide information for return home interviews
- » Evidence of/suspicious of physical or sexual assault; injuries/bruising that are not accounted for or explanation given is not consistent across different professionals
- » Relationships with controlling or significantly older individuals or groups.

Underlying Risk Factors

(Those factors often associated with CSE but which in themselves do not constitute a risk of CSE).

- » Lack of a safe/stable home environment, now or in the past (domestic violence or parental substance misuse, mental health issues or criminality, for example)
- » Regularly coming home late / going missing
- » History of abuse (particularly familial child sexual abuse, but including risk of forced marriage, risk of honour-based violence, physical and emotional abuse and neglect)
- » Bereavement or loss
- » Unsure about their sexual orientation or unable to disclose sexual orientation to their families
- » Abandoned/estranged from family and/or homeless, living in hostel, bed and breakfast accommodation
- » Child associates with older friends who engage in risk taking behaviours and appears easily influenced
- » Low self-esteem / negative sense of self
- » Emotional and/or mental health difficulties; Self-harm or significant changes in emotional well-being
- » Truancy or more regular non-school attendance/ Exclusion or unexplained absences from school, college or work
- » Secretive use of mobile phones / internet / sexting; and/or Excessive receipt of texts/phone calls
- » Sexual activity at an early age

Underlying Risk Factors continued...

- » Change in behaviour – could be positive or negative
- » Diversity needs unmet; (disability, learning difficulty, race, religion, gender reassignment, sexual orientation)
- » Child engaging in sexting/online chat/sending receiving images / performing sexual acts on line
- » Social isolation or social difficulties
- » Economic vulnerability
- » Having a physical or learning disability
- » Being in care (particularly those in residential care and those with interrupted care histories)
- » Returning home under the influence of drugs/alcohol
- » Returning home with injuries
- » Returning home having been suspected to have be involved in crime
- » Multiple callers (unknown adults or peers)
- » Increasing secretiveness around behaviours.

N.B. While one underlying risk factor does not, in itself, constitute a risk, the greater the number of such factors that are present (particularly the more sexual ones), the greater the likelihood that the child / young person is a victim of CSE.

Potential pathways increasing risk of CSE

The diagram is not intended to demonstrate pathways that are always present in CSE; rather, it illustrates some evidenced pathways and risk factors (by drawing on literature related to sexual victimisation, psychological dynamics in abusive relationships, etc).

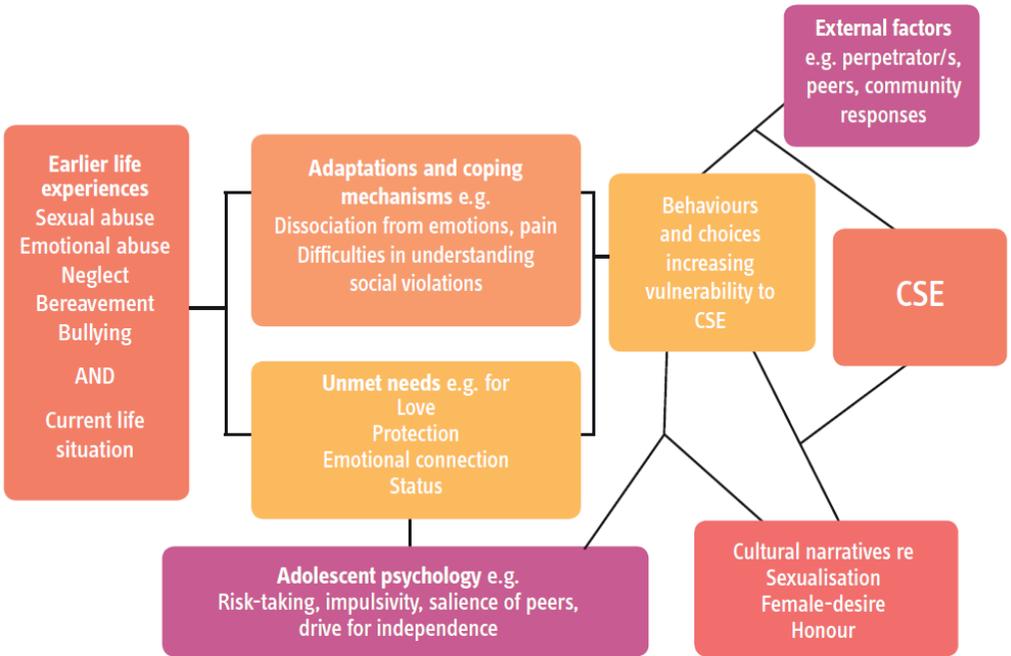


Diagram 1: Potential pathways increasing risk of CSE (from Hanson and Holmes, 2014, drawing on eg Reid, 2011; DePrince, 2005; Kaestle, 2012)

Supporting Young People at Risk of CSE

- » Indicators are not evidence that sexual exploitation has taken place. All they tell you is that you need to **use your professional curiosity and judgement** to explore what is going on for the young person. Information sharing/triangulation between parent/carers & agencies is a first step; the next has to be sensitive but inquisitive conversations with young people. **CSE is mostly discovered, not always disclosed.**
- » Enabling young people to find a way out of CSE can be similar to supporting victims of domestic violence; focusing on strengths, assessing risk and widening space for action – a process called **‘sustained safeguarding’**. Support needs to be a counterbalance to the ‘pull’ of exploiters. This includes being proactive and consistent even where this support is initially, or repeatedly, rejected.
- » The CSE advice and associated annex document (DfE, February 2017) discuss how effective local responses to CSE require support for staff to **‘work with risk’** so that a young person becomes an active partner in their **‘recovery and reintegration’** to achieve long-term meaningful change rather than temporary ‘enforced compliance’.
- » **‘Sustained Safeguarding’** is achieved through **‘relationship based practice’** where the barriers to disclose and discuss CSE are explored to three basic levels:
 - **Anxiety** (reprisals/fear; loyalty to exploiters; fear of being disbelieved).
 - **Shame** (understanding the multiple breaches of trust in family, professional and peer relationships).
 - **Guilt** (disbelieved and blamed).

To develop ‘relationship based practice’, the follow steps are helpful

1. Develop an open/honest relationship.
2. Consider with the young person - why CSE?
3. Consider with the young person the positive and negative impacts of CSE.
4. Consider with the young person their own and other people’s responsibilities.
5. Explore with the young person their future.
6. Consider with the young person how they can make decisions about their life and CSE.
7. Act on decisions, including agreeing how to deal with setbacks.

Asking and answering the questions that matter

(Research in practice - Adapted from OCC, 2013a).

Questions from young people	Questions for practitioners	Practice messages
<p>Question 1 <i>“What if I don’t see it as abuse?”</i></p>	<ul style="list-style-type: none"> • What is this young person telling me about risk, harm and need – through signs and symptoms and not just words? • What does this young person need? • What does this young person need me to think about? • What does this young person need me to do? • What support do I need? 	<p>Don’t make assumptions about the young person and their needs.</p> <p>Don’t rely on what you are told – observe, interpret, check out, analyse.</p>
<p>Question 2 <i>“How do I know that what you have planned will keep me safe?”</i></p>	<ul style="list-style-type: none"> • Are my decisions right for this young person? • Who else do I need to work with to keep them safe? • What does this young person need? • What does this young person need me to think about? • What does this young person need me to do? • How will I know risks are reducing? • What support do I need? 	<p>Establish (in partnership wherever possible) a clear plan to keep the young person safe and stop the abuse happening. Make sure the young person understands their plan and has had space to question it.</p>
<p>Question 3 <i>“Have you checked who else may be at risk?”</i></p>	<ul style="list-style-type: none"> • Have I considered the other children or young people who may be affected or involved? • What does this young person need? • What does this young person need me to think about? • What does this young person need me to do? • How will I know risks are reducing? • What support do I need? 	<p>Consider the safety of other children and young people, including bystanders and young people identified as perpetrators.</p>

Questions from young people	Questions for practitioners	Practice messages
<p>Question 4 <i>“How will you support me if this goes to Court?”</i></p>	<ul style="list-style-type: none"> • Do I have everything in place to enable this young person to make a complaint and support them through the Court process? • What does this young person need? • What does this young person need me to think about? • What does this young person need me to do? • How will I know risks are reducing? • What support do I need? 	<p>Ensure that the support offered through the Court process challenges any inference of blame towards the young person.</p>
<p>Question 5 <i>“Do I have hope for the future?”</i></p>	<ul style="list-style-type: none"> • Have I put in place support and scaffolding to respond to all the needs of this young person now... and in the future? • Have I helped this young person to construct an idea of their future self, which is not defined by their exploitation? • What does this young person need? • What does this young person need me to think about? • What does this young person need me to do? • What support do I need? 	<p>Don't think there is a quick fix.</p> <p>Recognise that the issues for this young person can re-emerge – and this does not equate to failure on your part or theirs.</p>

It is vital that assessment practice is analytical in its approach and that critical thinking is applied when making sense of information. For information and training tools focused on this, see Research in Practice's Handbook Analysis and Critical Thinking in Assessment.

Pleas now refer to the BwD risk management toolkit framework for analysis section.



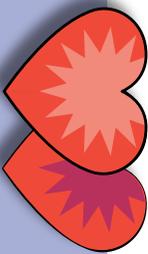
Targeting stage

- Observing the child/ young person
- Selection of child/ young person
- Befriending – being nice, giving gifts, caring, taking an interest, giving compliments, etc
- Gaining and developing trust
- Sharing information about young people between other abusive adults



Friendship forming stage

- Making young people feel special
- Giving gifts and rewards
- Spending time together
- Listening and remembering
- Keeping secrets
- Being there for them
- 'No-one understands you like I do'; being their best friend
- Testing out physical contact – accidental touching
- Offering protection



Loving relationship stage

- Being their boyfriend/girlfriend
- Establishing a sexual relationship
- Lowering their inhibitions – eg showing them pornography
- Engaging them in forbidden activities – eg going to clubs, drinking, taking drugs
- Being inconsistent – building up hope and then punishing them



Abusive relationship stage

- Becomes an 'unloving' sexual relationship
- Withdrawal of love and friendship
- Reinforcing dependency on them – stating young person is 'damaged goods'
- Isolation from family and friends
- 'Tricky and manipulation – 'you owe me'
- Threatening behaviour
- Physical violence
- Sexual assaults
- Making them have sex with other people
- Giving them drugs
- Playing on the young person's feeling of guilt, shame and fear

Guidance/procedures

- » Tri-x guidance details Children's Social Care procedures, guidance and role of Engage Team and the Police; Sharepoint has links to resources and guidance on where to find important documents on protocol.
- » If you're concerned about a case already open to you: Discuss the case with your manager. They will determine if a referral to The Engage Team is appropriate and discuss with The Engage Team Manager. If agreed the case will be allocated and an assessment will be undertaken within 10 working days. The co-working protocol between Children's Social Care and Engage is held within Tri-X;
- » The Feb 2017 definition and associated guidance can be found at the following address:

www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners

- » Research and Practice analysis and critical thinking in assessment
- » CSE training is available via the LSCB. www.lscb.org.uk
- » Specific CSE AP support sessions and CSE/Engage workshops are available

**The Engage Team is located within Greenbank Police Station:
Whitebirk Drive,
Blackburn
BB1 3HP**

Tel: (01254) 353667