



Child Sexual Abuse

Intra-familial sexual abuse, harmful sexual behaviour (HSB), child-on-child (formerly known as peer-on-peer abuse) and consent

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How to use this document

The aim of this document is to raise awareness of child sexual abuse and provides some general information and definitions and signposting to additional resources. Please share this resource widely.

This is a large document and you can look at it as a whole or dip in and out at your convenience.

There are also hyperlinks to external resources such as websites which can be accessed by either ctrl+click on the image/icon or hyperlink. Alternatively you can use your mouse to right click and select open link from the options. If you are unable to open a hyperlink please copy the information and paste into your usual internet search engine e.g. Google or Bing.

There is further information available about [reporting safeguarding concerns](#) .

You should also refer to the [local policies and procedures](#) available on the Swindon Safeguarding Partnership website and [South West Child Protection Procedures](#).

There is also a useful National Police Chiefs Council (NPCC) document 'When to call the Police' This guidance is primarily for schools and colleges but would be beneficial for all professionals. [Click here to access](#).

A snapshot of child sexual abuse



Disabled adults are **2x** as likely as non-disabled adults to say they had been abused in their childhood

1 in 4 of those who had lived in a care home reported experiences of child sexual abuse - almost 4x as many as those living with family / carers

92% of child sexual abuse images depicted girls only in 2019

92% of perpetrators of child sexual abuse are male

References: Department for Education; Characteristics of children in need: 2019 to 2020. Home Office Police Recorded Crime and Outcomes, year ending March 2020, updated 28 October 2020. Calculated using single-year prevalence estimates by age group (Radford et al, 2011, Childhood abuse and neglect in the UK today) and the Office for National Statistics 2019 population estimates. To read the full report - The scale and nature of child sexual abuse: Review of evidence 2021 - visit www.csacentre.org.uk

Definitions

Working Together 2018 – Child Sexual Abuse (CSA)

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.

The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse.

Sexual abuse can take place online, and technology can be used to facilitate offline abuse.

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Further information - [NSPCC Preventing Child Sexual Abuse & Keeping Children Safe](#)

Intra-familial child sexual abuse

- ✓ Refers to child sexual abuse that occurs within a family environment.
- ✓ Perpetrators may or may not be related to the child. The key consideration is whether the abuser feels like family from the child's point of view.
- ✓ Around two-thirds of all CSA reported to the police is perpetrated by a family member or someone close to the child.
- ✓ Where research has recorded the gender of perpetrators of intra-familial CSA, the vast majority have been found to be male, although abuse by women does occur. In around a quarter of cases, the perpetrator is under 18.
- ✓ CSA in the family is rarely an isolated occurrence and may go on for many years.
- ✓ Much abuse in the family remains undisclosed. Children may fear their abuser, not want their abuser to get into trouble, feel that the abuse was 'their fault', and feel responsible for what will happen to their family if they tell.

Continued

- ✓ Disabled children and some black, Asian and minority ethnic children face additional barriers.
- ✓ Abuse by a family member may be particularly traumatic because it involves high levels of betrayal, stigma and secrecy.
- ✓ CSA in the family is linked to a range of negative outcomes over the whole of the life course, including poorer physical and mental health, lower income, relationship difficulties and further violence and abuse. However, not all survivors experience long-term impacts. Much depends on the nature and duration of the abuse, the individual's coping mechanisms, and the support they receive. Supportive responses from non-abusing carers are particularly important.
- ✓ Effective support is critical to enable disclosure, and during investigation and legal proceedings.
- ✓ It is important to provide support to the whole family, and particularly to non-abusing parents, following abuse.

Working Together 2018 - Child Sexual Exploitation (CSE)

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.

Harmful Sexual Behaviour (HSB)

1. What is HSB? can be defined as: 'One or more children engaging in sexual discussions or acts that are inappropriate for their age or stage of development. These can range from using sexually explicit words and phrases to full penetrative sex with other children or adults'. HSB are sexual behaviours expressed by children/young people under 18 (CYP) that are developmentally inappropriate, may be harmful towards self/others, or be abusive towards another child, young person or adult. Technology assisted HSB (TA-HSB) is sexualised behaviour using the internet or mobile phones and includes viewing pornography or indecent images of children or sexting. (NSPCC). This includes both contact and non-contact behaviours (e.g. grooming, sexting, taking pictures) and/or the young person has displayed a harmful behavioural threat (verbal, physical or emotional) to coerce, threaten or intimidate a victim.



2. How common is harmful sexual behaviour? The true number of children/young people affected by HSB is not known. This term covers a wide range of behaviours, many of which do not come to the attention of authorities. [Some attempts to estimate the prevalence](#) indicate around a third of child sexual abuse is by other children and young people. Some cross-over between online/offline HSB and between child sexual exploitation and HSB. HSB is most commonly identified in adolescent boys, but girls/younger children can also exhibit HSB. A significant proportion of children who display HSB also have a learning disability. This could be because this group are overrepresented in the data (Barnardo's 2016). The majority of children who display HSB have themselves experienced trauma, including abuse or neglect.

3. Continued. Other indicators include attachment disorders, domestic abuse, previous sexual victimisation, social rejection and loneliness and poor empathy skills. Many of these factors exist alongside typical family environments where other forms of abuse are present. The majority of children/young people displaying HSB do not become sexual offenders as adults. Young people who display HSB often experience other emotional, behavioural and peer related difficulties. Existing indicators suggest HSB is a considerable social problem that is under-reported and may have serious negative impacts upon not only victims, but also the CYP who display the behaviours as well as their families / wider communities. Further information on [Statistics about harmful sexual behaviour | NSPCC Learning](#) (2021).

7. Consider: Do you use the Brook Traffic Light Tool to help you consider the continuum of sexual behaviour in CYP? Is non-judgemental, non-stigmatising information and advice available to CYP and their parents/carers? Is it accessible by a range of cultures/literacy levels? Do you intervene early and avoid drift and delay to undertake preventative work and increase the possibility of good outcomes? **Please note: You need to be trained to use this tool.**

Further information about:

Harmful Sexual Behaviour, support in Swindon and the AIM3 assessment [click here](#).

Brook Traffic Light Tool [Summary of Traffic Light Tool \(brook.org.uk\)](https://www.brook.org.uk/summary-of-traffic-light-tool)

6. What To Do: Early intervention is essential—identifying behaviours at the lower end of the continuum and/or responding to low-level HSB in early childhood can help stop more serious behaviour in adolescence. A referral to the [MASH](#) should be made where there are concerns about the welfare and safety of children including the victim, alleged perpetrator and any other children. Parental support is important in promoting engagement & successful outcomes. Both perpetrators and victims must be considered under safeguarding procedures.

5. Most CYP who display HSB don't go on to become adult offenders. Empowering parents to teach their children to be safe online rather than restricting online activity enables CYP to engage constructively online and build resilience. Non-stigmatising, non-judgemental information and advice for CYP and families must be easily accessible. Under or overreaction by agencies can happen when developmental and behavioural pathways of CYP are misunderstood.

4. Terminology. Imprecise and vague terminology can lead to inappropriately labelling of CYP so a shared and meaningful range of terms is important to enable clear communication and accurate assessment. A continuum model (Hackett 2010) is used to demonstrate the range of sexual behaviours from those that are normal to those that are highly deviant. The [Brook Traffic Light Tool](#) can help professionals distinguish between behaviours that are normal and those that are concerning. **(You need to be trained to use this tool)**



Child-on-Child Abuse (formerly known as peer on peer abuse)

1. What is Child (Peer) Sexual Abuse? It's normal for children to display a range of sexual behaviours as they grow up, but sometimes their behaviour can be harmful to themselves and others. Around a third of child sexual abuse is committed by other children and young people (Hackett, 2014). We call this child on child sexual abuse. This form of sexual abuse includes, but is not limited to:

- physical and sexual abuse
- sexual harassment and violence
- emotional harm
- on and offline bullying
- teenage relationship abuse.

2. What is the context? Child (peer) sexual abuse can happen in a range of settings, including: at school, at home, in public spaces, at parties, at a friend's house or online. It can take place in spaces which are supervised or unsupervised. Within a school context, for example, child-on-child sexual abuse might take place in spaces such as toilets, the playground and outdoor areas, corridors and when children are travelling to and from school (*Contextual Safeguarding Network, 2020*).

It should be recognised that the behaviour in question is harmful to both the perpetrator (who is a child) and the victim. Behaviour may be intimate or non-intimate.

3. Why is it important? Young people can be confused about whether or not they have experienced child sexual abuse. Reasons for this include:

Confusion about what constitutes 'normal' sexual activity, they don't know whether they gave consent* (N.B no-one can consent to being abused), they were using substances when the abuse took place, the abuse was carried out by a friend or partner, the abuse took place online; and/or they blame themselves for what happened. Parents & professionals don't always know the most appropriate way to respond to children who display harmful sexual behaviour and/or who have experienced child (peer) sexual abuse.

**To give consent to sex or a sexual act a person must be 16 years old or over, understand, and be able to make a choice or change their mind. If a young person is under the age of 13 years, under the Sexual Offences Act 2003 they cannot legally consent to any form of sexual activity.*



7. Further Reading

[Peer on peer abuse | Safeguarding Network - confidence in safeguarding](#)

[What is peer-on-peer abuse? - Ofsted: schools, early years, further education and skills \(blog.gov.uk\)](#)

NSPCC [Protecting children from harmful sexual behaviour | NSPCC Learning](#)

6. What should you do? It's important that adults who work/volunteer with children can identify if sexualised behaviour becomes harmful or abusive, and respond proportionally to keep all the children involved safe. **This also includes knowing how to proactively:**

- Respond to disclosure or a concern raised
- Initiate a discussion with your safeguarding lead
- Take immediate action
- Make a [referral when appropriate](#) (for the victim and also perpetrator who may be a child in need).
- Reporting a crime to police please refer to the document '[When to call the police](#)'. **Professionals should not make assumptions that other professionals have reported a potential crime.**

5. Spotting the signs and symptoms

- ✓ absence from school or disengagement from school activities
- ✓ physical injuries / mental or emotional health issues
- ✓ becoming withdrawn – lack of self esteem / lack of sleep / alcohol or substance misuse
- ✓ changes in behaviour / inappropriate behaviour for age / abusive towards others

As with all safeguarding issues, child-on-child abuse can impact on children and young people without these characteristics.

4. What is the impact?

Experiencing child (peer) sexual abuse can have a long-lasting negative impact on a child's wellbeing that can reach into adulthood. Effects can include:

- mental health issues – such as post-traumatic stress disorder (PTSD), anxiety, low self-esteem, depression, self-harming
- challenging behaviour – such as substance misuse, sexualised behaviour, offending
- relationship problems – for example intimacy issues, having unstable relationships, unable to form or sustain friendships



CONTINUUM OF SEXUAL BEHAVIOURS BY CHILDREN AND YOUNG PEOPLE (Hackett, 2010)

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

The above needs to be considered with the developmental age and other special educational needs of the child.

Source: Centre for expertise on child sexual abuse [Key Messages from Research Harmful Sexual Behaviour \(2018\)](#)

Risk Outside the Home (ROTH)

As well as threats to the welfare of children from within their families, children may be vulnerable to abuse or exploitation from outside their families. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online. These threats can take a variety of different forms and children can be vulnerable to multiple threats, including: exploitation by criminal gangs and organised crime groups such as county lines; trafficking; online abuse; teenage relationship abuse; sexual exploitation and the influences of extremism leading to radicalisation. Extremist groups make use of the internet to radicalise and recruit and to promote extremist materials. Any potential harmful effects to individuals identified as vulnerable to extremist ideologies or being drawn into terrorism should also be considered.

Assessments of children in such cases should consider whether wider environmental factors are present in a child's life and are a threat to their safety and/or welfare. Children who may be alleged perpetrators should also be assessed to understand the impact of contextual issues on their safety and welfare. Interventions should focus on addressing these wider environmental factors, which are likely to be a threat to the safety and welfare of a number of different children who may or may not be known to local authority children's social care. Assessments of children in such cases should consider the individual needs and vulnerabilities of each child. They should look at the parental capacity to support the child, including helping the parents and carers to understand any risks and support them to keep children safe and assess potential risk to the child.

Source: [Sections 40 and 41 Working Together to Safeguard Children \(2018\)](#)

Learning from Case Reviews

Learning from a local case review

A 12 year old female child disclosed to professionals that she had sex with an unknown male (later identified as a 15 year old boy). She has also been a victim of previous sexual assaults. She was subject of a child protection plan under the category of neglect. There were delays in the information being reported to Police and as a result forensic opportunities which may have assisted the criminal investigation were lost.

The following multi-agency learning themes were identified:

- Assumptions were made by professionals that the social worker had been notified of the disclosure and that police would be contacted. Mother was requested to report the rape to police but this was not followed up by professionals to ensure this had been done.
- Failure to recognise the age of the child and that she was unable to consent to sex and this was statutory rape. Section 'Children under the Age Of 13' of the SSP Underage Sexual Activity Guidance refers [click here to access](#).
- Police were not notified when the information was first reported which meant a delay in a forensic medical examination being conducted.
- Lack of professional curiosity/triangulation of information.
- Clear and detailed record keeping, for example the information shared, with whom, specific action taken by whom and the outcome/update.



Swindon
**Safeguarding
Partnership**

The full Wiltshire report can be found at: [cspr-long-term-sexual-abuse-of-children-in-care](https://www.cspr-long-term-sexual-abuse-of-children-in-care.org.uk/)

6. Further information and resources to support practice

Centre of Expertise on child sexual abuse:

www.csacentre.org.uk

[Template for identifying and recording concerns of sexual-abuse](#)

[Communicating with Children Guide - CSA Centre](#) (video and downloadable resource)

[12 part short film series for professionals](#)

<https://learning.nspcc.org.uk/child-abuse-and-neglect/child-sexual-abuse>

5. Grooming and perpetrator behaviour

In this case the abuser gave the siblings cash or downloadable computer games to reduce detection of these as 'gifts'. He also threatened the sibling to prevent them from disclosing the abuse. He told them that *they would have to leave the home; they would not be able to live with Foster Carer Mother; and that no one would believe them.*

1. Overview of Wiltshire case

In 2021 a 16-year-old girl made a disclosure of long-term sexual abuse by her Foster Carer Father (FCF) over a 8-9 year period. This was a stable, long term placement and she, along with her two sisters, had been living with Foster Carer Mother and FCF for over 9 years. Her younger sister, who has learning difficulties, made a further disclosure that she had also been sexually abuse. FCF confessed to the abuse and has been jailed. Foster Carer Mother was not aware of the abuse and following police investigations the siblings remain with her.

7 Minute Briefing

Child Safeguarding Practice Review, Wiltshire Supporting Vulnerable People Partnership: Long Term Sexual Abuse of Children in Care

4. Disclosing sexual abuse

NSPCC data suggests that seven years is the average time from the start of sexual abuse to disclosure for those that do disclose. Many children never disclose, only partly disclose, or disclose and then withdraw their allegations. The younger the child is when the sexual abuse starts, the longer it takes for them to disclose.

In this case the sibling who disclosed was worried about not being believed so she recorded the abuser on her phone. She also told us that she wanted to control when her disclosure was made and that she would not have disclosed even if asked directly

- she had to be *“ready to tell”* in order to have *“control”* over it
- She *“put on an act”* to hide the abuse
- She was worried that she would not be believed

LEARNING: A child who is being sexually abused may not show any obvious symptoms that suggest they are being abused

LEARNING: Children in care, in long term placements need significant relationships with professionals and/or their carers if they are to disclose sexual abuse, but even then, many children do not disclose their abuse.

2. Child sexual abuse

Working Together to Safeguard Children (2018) defines sexual abuse as, “forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. Activities may involve physical contact (assault by penetration, kissing, touching) as well as non-physical contact (production of indecent images, grooming).”

A study reported by the NSPCC (Radford et al, 2011) found that almost a quarter of young adults experience sexual abuse during childhood.

3. Findings from the CSPR

- There were no systemic practice issues
- There were few, if any, indicators that the children were being sexually abused prior to the disclosure
- There were no concerns about the placement: good quality of care; stable
- There were established good and trusting relationships between the siblings and professionals and the Foster Carers
- There were face to face visits by social care and schools professionals during lockdown
- No practitioner considered the possibility of sexual abuse – it was unthinkable.

LEARNING: All professionals need to be able to consider the ‘unthinkable’ about carers who they may know well and who they may work closely with and be alert to the possibility of sexual abuse.

What is Thinking the Unthinkable?

Children can be abused by carers.

“Safeguarding is thinking the unthinkable and then figuring out how to reduce the probability of the unthinkable happening” (Graham Fawcett)

Children rarely disclose abuse and neglect directly to practitioners which makes identifying abuse and neglect difficult for practitioners across agencies.

Practitioners need to develop relationships with children, away from carers, and practice ‘respectful uncertainty’ to any information they receive, keep an open mind and think objectively about the evidence presented, even if this may be challenging and difficult to imagine.

[Safeguarding - Not For the Fainthearted. - Thrive Worldwide \(thrive-worldwide.org\)](https://thrive-worldwide.org)

Thinking the Unthinkable continued...

When children are removed from their birth families and placed in a foster placement or adoptive placement, there is a natural assumption that the children are now safe from harm. Carers have been vetted and are monitored and reviewed. However, some foster carers and adoptive parents do abuse or cause harm to children; as professionals **we must think the unthinkable.**

Consider the following:

- ✓ Remember, children **can** be abused in foster care
- ✓ Always, **think the unthinkable** and be professionally curious
- ✓ Always seek to obtain the views and feelings of the child
- ✓ Be open-minded, don't take everything at face value
- ✓ Never assume and, be wary of assumptions already made

Learning from National Reviews

NSPCC Learning from case reviews (2020) highlights the importance of:

- professionals' ability to recognise and respond to child sexual abuse
- displaying professional curiosity and challenge with families, carers and other agencies
- keeping the child at the centre of practitioners' work

To access the brief [click here](#).

NSPCC Learning from case reviews (2017) noted professionals can find it difficult to respond to the safeguarding implications of HSB. There may be several children involved, each of whom will have different needs, and minimising the immediate effects of an incident can become a priority. Because of this, professionals can find themselves managing individual episodes rather than looking at the bigger picture.

Learning from these reviews highlights that children who display HSB need support and understanding. HSB should be recognised as a potential indicator of abuse and professionals should work together to look for the reasons behind a child's behaviour and consider appropriate safeguarding responses.

To access the brief [click here](#).

Consent

Outcome 21 states...

All incidents of youth produced sexual imagery should be recorded as a crime. However, in January 2016 the Home Office launched outcome 21. This allows police in England and Wales to record that a crime has happened but that it was not considered to be in the public interest to take formal criminal justice action.

Crimes recorded under this code are unlikely to be disclosed on a vetting check in the future although this cannot be guaranteed. Decisions about using outcome 21 should be taken by a senior and/or experienced officer.

The College of Policing guidance suggests that outcome 21 may be a good solution in cases where:

- a young person's sexting/sharing of nudes was not abusive or persistent.
- there is no evidence of exploitation, grooming, profit motive or malicious intent (College of Policing, 2016).

The Internet Watch Foundation (2020) states that about a third of all known child sexual abuse material the IWF finds on the internet has been posted by children themselves after they have been groomed and coerced into making and sharing explicit images and videos of themselves. For more information visit the [IWF website](#).

In the latest advice for schools and colleges (UKCCIS, 2016), sharing of nudes/semi-nudes is defined as “the production and/or sharing of sexual photos and videos of and by young people who are under the age of 18. It includes nude or nearly nude images and/or sexual acts. It is also referred to as ‘youth produced sexual imagery’.

Sharing nudes/semi nudes does not include the sharing of sexual photos and videos of under-18 year olds with or by adults. This is a form of child sexual abuse and must be referred to the police.” For more information visit https://www.thinkuknow.co.uk/14_plus/help/contact-social-sites/

The Domestic Abuse Act 2021 now extends the offence of disclosing private sexual photographs and films with intent to cause distress (known as the “revenge porn” offence) to cover threats to disclose such material.

Use of Language

Attending to Language



Watch this short video clip to understand the impact on young people of victim blaming language (clip lasts 1:46)

This means being aware of the power of language and for professionals to consider the words, phrases, discourses and jargon used when speaking to/about children/young people and adults. This includes language used verbally and written in files, referrals, assessments and reports.

It is imperative that appropriate terminology is used when discussing children and/or adults, such as those who have been exploited, or are at risk of exploitation. Language implying that the individual is complicit or responsible for the abuse or exploitation that has happened or may happen to them, must be avoided.

The language used should reflect the presence of coercion and the lack of control people have in abusive or exploitative situations and must recognise the severity of the impact exploitation has on the person.

Victim-blaming language may reinforce messages from perpetrators around shame and guilt and may in turn prevent the person from disclosing their abuse, through fear of being blamed by professionals. Further guidance on using appropriate language can be [found here](#). ([Appropriate-language-Child-sexual-and-or-criminal-exploitation-guidance-for-professionals - Swindon Safeguarding Partnership](#))

Source: National Working Group – [Making Words Matter – A practice knowledge briefing](#) (2021)



Making a referral

All practitioners have a responsibility to refer a child to Children's Social Care under section 11 of the Children Act 2004 if they believe or suspect the child:

- ✓ has suffered significant harm
- ✓ is likely to suffer significant harm
- ✓ has disability, developmental or welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent) under the Children Act 1989
- ✓ is a Child in Need whose development would be likely to be impaired without provision of services

The referrer must always have the opportunity to discuss their concerns with a qualified social worker.

New referrals and referrals on closed cases should be made to the Multi-agency Safeguarding Hub (MASH).

Referrals on open cases should be made to the allocated social worker for the case, or in their absence their manager or the duty social worker.

Further guidance and how to refer can be [found here](#).

([Referral guidelines and MASH contact information - Swindon Safeguarding Partnership](#))



Resources for Professionals

The following slides have a number of resources which may be helpful to professionals.

Some may be for those working in a particular setting and this has been indicated on the slides.

Resources for all professionals



[Online Sexual Harm Reduction Guide](#): This guide has been developed to address the challenges professionals face when working with issues of online harm and young people. It contains information about what online harm is, the specific issues facing young people, and ways professionals can effectively engage with young people and their families.

[Children and Young People with Harmful Sexual Behaviours](#): This is an executive summary of the full Research Review is concerned with children and young people who commit acts of sexual abuse or who harm others as a result of their sexual behaviours. (Research in Practice)

[Working Together to Safeguard Children](#): Statutory guidance on inter-agency working to safeguard and promote the welfare of children.

[Harmful Sexual Behaviour Among Children and Young People](#): This guideline covers children and young people who display harmful sexual behaviour, including those on remand or serving community or custodial sentences. It aims to ensure these problems don't escalate and possibly lead to them being charged with a sexual offence. It also aims to ensure no-one is unnecessarily referred to specialist services.

Contextual Safeguarding Network: [Spotify Podcasts](#) – Contextual Safeguarding and Young People sharing their views on different contexts such as schools, neighbourhoods and friendship and peer groups.

[Summary of Traffic Light Tool \(brook.org.uk\)](#) – **please note: you need training to access and use this tool for further information/guidance.**

Resources for all professionals identifying and responding to CSA



NSPCC

Believe in children
Barnardo's



[Centre of expertise on child sexual abuse](#) have a number of useful resources including key research and practice briefing documents on:

- [Sibling Sexual Abuse - CSA Centre](#)
- **Signs and indicators** – template for identifying and recording concerns of child sexual abuse. Short video clip (1.50 minutes) and to download the template [click here](#)
- [Template for identifying and recording concerns of sexual-abuse](#)
- [Communicating with Children Guide - CSA Centre](#) (video and downloadable resource)
- [12 part short film series for professionals](#)
- [Key messages from research on children and young people who display harmful sexual behaviour - CSA Centre](#)

NSPCC have a range of resources:

- <https://learning.nspcc.org.uk/child-abuse-and-neglect/child-sexual-abuse>
- [Statistics about harmful sexual behaviour | NSPCC Learning](#)
- [Preventing Child Sexual Abuse & Keeping Children Safe | NSPCC](#)
- [Protecting children from harmful sexual behaviour | NSPCC Learning](#)

Barnardo's: [Child sexual abuse | Barnardo's \(barnardos.org.uk\)](#)

Survivor Pathway: [Swindon](#)

Medical Examinations

- **Medical examinations:** This evidence-informed film will 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. The video clip is 9.46 minutes [click here to access](#).
- **Forensic Medical examinations** for children living in Swindon and Wiltshire are conducted in Bristol at The [Bridge Sexual Assault Referral Centre \(SARC\)](#). Further information for professionals including educational resources, timescales for immediate medical care/forensic medical examinations* and information booklets for children/young people, parents and carers - [Professionals – The Bridge \(thebridgecanhelp.org.uk\)](#).
- Information about [Swindon and Wiltshire Sexual Assault Referral Centre](#) this includes information about forensic medical examinations.
- In Swindon there is a local protocol, where depending on the type of examination and age of the child consideration will be given as to the most appropriate SARC for the medical examination to be conducted at. This is usually agreed by the paediatrician at The Bridge during strategy discussion/first meeting.

***Learning from a local case review has identified that professionals may not be aware of forensic timescales when responding to disclosures of child sexual abuse.**

Resources for professionals - Education



The resources listed below may be of benefit to professionals working in Education settings.

[Harmful Sexual Behaviour in Schools Training:](#) CPD certified online courses to help manage harmful sexual behaviour in primary or secondary schools in the UK.

[Beyond Referrals: School Self-Assessment Toolkit & Guidance:](#) This is a range of resources for schools, multi-agency partnerships and inspectorates for tackling harmful sexual behaviour in schools. This link provides all the resources for schools to assess their own response to HSB. This includes guidance to the traffic-light tool for self-assessment; an example completed self-assessment; a range of resources to help schools complete their self-assessment; and finally, an online scorecard where you can enter your scores and print tailored reports.

[Peer-on-Peer Abuse Toolkit: \(https://www.farrer.co.uk/globalassets/news-articles/downloads/peer-on-peer-abuse-toolkit-14.pdf\)](https://www.farrer.co.uk/globalassets/news-articles/downloads/peer-on-peer-abuse-toolkit-14.pdf) This tool kit provides a template child-on-child (peer-on-peer) abuse policy, which encapsulates a Contextual Safeguarding approach.

[NSPCC Podcasts](#) topics include HSB in schools, preventing HSB, technology assisted HSB.

[Ofsted's Sexual Abuse Review Podcast \(2021\)](#) **[Ofsted's Sexual Abuse Review \(podbean.com\)](#)**

[The SecEd Podcast: Everyone's Invited & Safeguarding in Schools \(sec-ed.co.uk\)](#) (2021)

NSPCC: Ofsted's review of sexual abuse in colleges and schools - summary of learning **[click here](#)**.

Spotify podcast: Contextual Safeguarding In this second episode, we explored what young people think about the role of social workers in keeping young people safe from harm outside of home. It's a challenging and insightful listen as many young people reflect on their own experiences with social services, and the lack of trust that exists in these relationships. Young people shared their experiences of working with professionals. They described being able to rely on, and relate to, youth workers.

Online Videos to Supplement RSE Lessons - Education

Please watch before showing young people, to assess suitability for the individuals with whom you will be working.

Relationships and Families

Different Kinds of Families (2:52) <https://www.youtube.com/watch?v=hpCyyNqzIE>

How Do you Know if you're in Love (2:57) <https://www.youtube.com/watch?v=KZV38ah3wc8>

Healthy /Unhealthy Relationships (2:16) <https://www.youtube.com/watch?v=Gn7ZQ2x0cOE>

What Makes a Relationship Healthy? (2:15) <https://www.youtube.com/watch?v=UB9anEZx9LU>

Consent

Consent (12:22) <https://truetube.co.uk/film/screwball>

Consent Ping Pong <https://vimeo.com/178529042>

Enthusiastic Consent <https://youtu.be/AqBQH1e7XwQ>

Consent for Kids (pre-adolescent) <https://www.youtube.com/watch?v=h3nhM9UIJjc>

Resources for parents/carers



Online Safety Advice: As your child becomes a teenager, they'll adapt quickly to new technology and use it to communicate, socialise and create. Most teenagers have access to the internet using a smartphone or tablet, and use a wide range of social networking sites as a vital part of their relationships with others. This site aims to empower parents and carers to keep children safe in the digital world. What you'll find in this section, Internet safety checklist, Why it matters: Facts and stats, Online issues that affect teens, Parent guides, Activities to do together, Age-specific apps.

CEOP: Child Exploitation and Online Protection (which is a command of the National Crime Agency) helps young people who are being sexually abused or are worried that they've met someone who is trying to abuse them. If they've met someone online or face-to-face who is putting them under pressure to have sex or making them feel uncomfortable, hopefully they will a parent/ carer/trusted adult and then you can report it to CEOP.

ThinkUKnow: ([Thinkuknow - home](https://www.thinkuknow.co.uk/)) Provides resources and information about sexting, sharing nude images, safety, and ways to encourage young people to think and talk about sex, relationships and the internet.

How Can I Help My Child: (https://www.mariecollinsfoundation.org.uk/assets/news_entry_featured_image/NWG-MCF-Parents-Leaflet.pdf) Provides information for parents about what online harm is and ways they can effectively help and support their children.

Healthy Sexual Development in Young People: This page of the NSPCC website provides information for parents/ carers if they are: worried about a child's sexual behaviour, wondering if their child's behaviour is inappropriate or unhealthy, wanting to learn how to support their child, trying to manage, if their child has been sexually abused by another child, interested in additional information on sexual abuse, sexting and online porn.

Resources for parents/carers



Are You an Askable Parent?

As a parent or caregiver, it is very important for you to be *askable*. What does that mean? How do adults become *askable*?

To be *askable* means that young people see you as approachable and open to questions. Being *askable* about sexuality is something that most parents and caregivers want but that many find very difficult. Adults may have received little or no information about sex when they were children. Sex may not have been discussed in their childhood home, whether from fear or out of embarrassment. Or, adults may worry about:

- Not knowing the *right words* or the *right answers*;
- Being *out of it* in the eyes of their young people;
- Giving information at the wrong time.

Being *askable* is important. Research shows that youth with the least accurate information about sexuality and sexual risk behaviors may experiment more and at earlier ages compared to youth who have more information.¹²⁻¹⁴ Research also shows that, when teens are able to talk with a parent or other significant adult about sex and about protection, they are less likely to engage in early and/or unprotected sexual intercourse than are teens who haven't talked with a trusted adult.^{15,16} Finally, youth often say that they want to discuss sex, relationships, and sexual health with their parents—parents are their preferred source of information on these subjects.^{14,17}

Because being *askable* is so important and because so many adults have difficulty initiating discussions about sex with their children, adults may need to learn new skills and become more confident about their ability to discuss sexuality. Here are some tips from experts in the field of sex education.

Talking with Young People about Sexuality

1. Acquire a broad foundation of factual information from reliable sources. Remember that sexuality is a much larger topic than sexual intercourse. It includes biology and gender, of course, but it also includes emotions, intimacy, caring, sharing, and loving attitudes, flirtation, and sexual orientation as well as reproduction and sexual intercourse.

2. Learn and use the correct terms for body parts and functions. If you have difficulty saying some words without embarrassment, practice saying these words, in private and with a mirror, until you are as comfortable with them as with non-sexual words. For example, you want to be able to say "penis" as easily as you say "elbow."

3. Think through your own feelings and values about love and sex. Include your childhood memories, your first infatuation, your values, and how you feel about current sex-related issues, such as contraceptives, reproductive rights, and equality with regard to sex, gender, and sexual orientation. You must be aware of how you feel before you can effectively talk with youth.

4. Talk with your child. Listen more than you speak. Make sure you and your child have open, two-way communication—as it forms the basis for a positive relationship between you and your child. Only by listening to each other can you understand one another, especially regarding love and sexuality, for adults and youth often perceive these things differently.

5. Don't worry about—

- Being "with it." Youth have that with their peers. From you, they want to know what you believe, who you are, and how you feel.
- Being embarrassed. Your kids will feel embarrassed, too. That's okay, because love and many aspects of sexuality, including sexual intercourse, are highly personal. Young people understand

From Research to Practice

Are you an Askable Parent? To download a leaflet [click here](#)

Advocates for Youth [website](#)

[The Law And Consenting To Sex: Just The Facts | Health For Teens](#)

Parent/carers guide to consent and HSB: [master document ages 1-19](#)

[ages 1-5](#)

[ages 5-12](#)

[ages 13-19](#)

([Harmful sexual behaviour - Swindon Safeguarding Partnership](#))

RESOURCES



Swindon Safeguarding Partnership (SSP) website access to [7 minute briefs and practice briefs](#) on a variety of themes including:

- [Safeguarding Adolescents Resource Pack](#)
- [Capturing the voice of the child in records](#)
- [Effective information sharing and consent](#)
- [Professional curiosity](#)
- [Neglect framework and practice guidance](#)
- [Graded Care Profile2 \(GCP2\) and Graded Care Profile2 Antenatal \(GCP2A\)](#)
- [Safeguarding Children Oral Health](#)
- [Working with Fathers](#)
- [Practitioner guide to strategy discussions](#)
- [Professional disagreement/escalation](#)

This list is not exhaustive and we are continually adding resources so please visit the webpage.

RESOURCES

- SSP Harmful sexual behaviour - information and resources for professionals including AIM3 [click here](#)
- SSP Child exploitation webpage includes information and resources including sexual exploitation [click here](#)
- SSP Underage Sexual Activity Guidance [click here](#)
- SSP Underage Sexual Activity Briefing [click here](#)
- SSP Local Policies and Procedures Child [click here](#)
- Neglect and GCP2 [webpage](#) – signposting to the SSP Neglect Framework and Practice Guidance, GCP2 FAQ's and guidance on use and the neglect screening tool
- Domestic Abuse Advice and Information Help Sheet [click here](#)
- [Sexual offences - Stop It Now](#) – a child protection charity working to prevent child sexual abuse by making sure adults know what they can do to keep children safe. A range of resources
- [Law on Sex Factsheet – FPA](#) (payment required)
- South West Child Protection Procedures - [Child Sexual Abuse in the Family Environment \(proceduresonline.com\)](#)
- National Police Chiefs Council (NPCC) document 'When to call the Police' This guidance is primarily for schools and colleges but would be beneficial for all professionals. [Click here to access](#)