

Now I know it was wrong:

Report of the parliamentary
inquiry into support and
sanctions for children who
display harmful sexual behaviour

Chaired by Nusrat Ghani MP

Supported by Barnardo's

1. Foreword by Nusrat Ghani MP (Con, Wealden) and Javed Khan, CEO, Barnardo's

This report addresses a subject which is both deeply serious and yet little understood. Harmful sexual behaviour in children is not a new phenomenon. But it's easy to see how it has stayed under the radar.

It's only recently that as a society we've started to address the horrific crime of child sexual exploitation head on. No-one wants to think about children being sexually abused. Too often adults have turned a blind eye, and children have been silenced by fear and shame.

Abuse by adults is taboo, but abuse by children is doubly taboo.

What do we call a child who sexually abuses their sibling, or school friend? Are they a mini sex-offender or a child in desperate need of help?


For 150 years, Barnardo's motto has been "believe in children". All children, whatever their circumstances, deserve the chance to forge a positive future. For children displaying harmful sexual behaviour, this must start with access to high quality, specialist support.

Writing children off is never the right decision. It doesn't help the child. It doesn't work for society. We know that children who sexual abuse others are more likely to go on to commit sexual and non-sexual crimes as adults, and are less likely to get good qualifications and become financially independent. But we also know that with the right support, children can address the causes of their harmful behaviour and go on to thrive. So if we are serious about preventing sexual offences and helping all children achieve the best possible outcomes as adults, we must urgently improve how we support children with harmful sexual behaviour.

Harmful sexual behaviour covers a wide spectrum, and whilst at the extreme end only a small number of children will be at risk, we now live in an age where children sharing sexual images online and through 'sexting' has become ubiquitous. Technology also means that children are being exposed to ever more extreme pornography at an ever earlier age, which can distort the way they come to understand relationships. It is hardly surprising that more children are at risk not only of becoming a victim of sexual abuse, but also inadvertently finding themselves labelled a 'perpetrator'.

For all these reasons, We believe that this is the time for action. National Government must take the lead, but to tackle this issue effectively everyone involved in children's welfare must work together, and extra emphasis must be placed on the role of parental responsibility (including corporate parents), particularly where the law is broken and when harm is caused.

We would also like to thank everyone who contributed to this inquiry: the MPs and Peers who sat on the panel, the experts who gave evidence, especially the young people, and the secretariat at Barnardo's - Ditte Heede, Debbie Moss and Jonathan Rallings.



2. Terms of reference

1. To determine whether current definitions of harmful sexual behaviour (HSB) are fit for purpose in light of changing social and cultural norms.
2. To determine how far harmful sexual behaviour (HSB) is becoming more prevalent and/or more visible.
3. To determine whether current legislation, policy and practice in relation to harmful sexual behaviour (HSB) are fit for purpose.
4. To explore which groups of children are particularly at risk of displaying harmful sexual behaviour (HSB).
5. To understand the links between harmful sexual behaviour (HSB) and child sexual exploitation (CSE), and how responding appropriately to HSB can help prevent young people becoming victims and/or perpetrators of CSE.
6. To explore how effectively the police and the criminal justice system respond to harmful sexual behaviour (HSB), and whether changes in policy or practice are needed.
7. To explore how effectively schools, health services and local authority services respond to harmful sexual behaviour (HSB), and whether changes in policy or practice are needed.
8. To explore the impact of technology and the internet on how we understand, prevent and respond to harmful sexual behaviour (HSB).

About the Inquiry

On 23 February 2016, Nusrat Ghani MP convened an Inquiry into the support and sanctions currently in place for children who display harmful sexual behaviour. The aim of the Inquiry is to provide Parliament, Government and other local and national decision makers with a better understanding of this important, but often hidden, issue.

Membership

The members of the panel were

- Baroness Benjamin (Liberal Democrat)
- Peter Dowd MP (Labour, Bootle)
- David Hanson MP (Labour, Delyn)
- George Howarth MP (Labour, Knowsley)
- Kelly Tolhurst MP (Conservative, Rochester and Strood)
- Kit Malthouse MP (Conservative, North West Hampshire)
- Stephen McPartland MP (Conservative, Stevenage)
- Virendra Sharma MP (Labour, Ealing, Southall)

Secretariat

The panel's secretariat was provided by Barnardo's staff: Ditte Heede, Debbie Moss and Jonathan Rallings.

Contacts

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Format of the Inquiry

This report is based on the analysis of the evidence received, which represented a wide range of views on a number of complex issues.

The Inquiry convened three oral evidence sessions:

Session 1: Understanding harmful sexual behaviour and the children and young people who display it

- Stuart Allardyce, Children's Service Manager, Barnardo's
- Jon Brown, Head of Development and Impact, NSPCC
- Donald Findlater, Director, Stop it Now!, Director of Research and Development, Lucy Faithfull Foundation
- Professor Simon Hackett, Durham University
- Dr Eileen Vizard CBE, Child and Adolescent Psychiatrist, Senior Lecturer, University College London, Visiting Professor, New York University in London

Session 2: Responses to harmful sexual behaviour and prevention of further harm

- Chief Constable Simon Bailey, National Police Chiefs' Council Lead for Child Protection Abuse Investigation
- Gareth Edwards, Principal Policy and Performance Adviser, National Police Chiefs' Council
- Sarah Hannafin, Policy Advisor, National Association of Head Teachers

Session 3: Hearing directly from young people

- Peter Clarke, Director of Friends Therapeutic Community Trust, Glebe House
- Three young people from Glebe House

In February 2016 the Inquiry issued a call for written evidence. Submissions were received from the following organisations and individuals:

- Assessment Intervention Moving on (AIM) Project
- Dr Anne-Marie McAlinden, Reader in Law, Director of Research, School of Law, Queen's University Belfast
- Coventry Rape and Sexual Abuse Centre
- Dr Carlene Firmin MBE, Senior Research Fellow and Head of MsUnderstood Partnership, University of Bedfordshire
- Dr Sam Warner, Consultant Clinical Psychologist
- Dr Elizabeth Ashurst, Forensic Psychologist, Ashurst Associates
- Focus CAMHS Team, South West Yorkshire Partnership NHS Foundation Trust
- Jonny Matthew, Msc; BA(Hons); DipSW; DipCrimCJ; RSW
- Lucy Faithfull Foundation
- National Association of Head Teachers
- NSPCC
- Paradigm Research
- PSHE Association
- Safer London
- The Children's Society
- Youth Justice Board

Barnardo's work to safeguard children

Keeping children safe is at the heart of Barnardo's work. We run a range of safeguarding services around the country, including providing specialist support to victims and children at risk of domestic abuse, sexual abuse and sexual exploitation.

As the largest provider of child sexual exploitation services in the UK, with more than 20 years' experience, in 2015-16 over 5,000 young people and family members were supported by our services that work with those at risk of, or victims of, CSE. Additionally, we supported over 470 children, young people and families through our specialist harmful sexual behaviour services¹.

¹ <http://www.barnardos.org.uk/impact-report-2015.pdf>

3. Introduction: Why should decision makers focus on harmful sexual behaviour?

In recent times, the UK has woken up to the scale of child sexual exploitation, and the urgent need to keep our children safe from this horrific crime. Back in 2014, Barnardo's supported a Parliamentary Inquiry chaired by Sarah Champion MP (Labour, Rotherham), which made a number of key recommendations,² and the Government has since provided welcome leadership in this area, including through the Child Sexual Exploitation Summit on 3 March 2015, chaired by the Prime Minister.

However, despite significant progress, far more needs to be done. Victims must be supported, perpetrators must be brought to justice, and crucially, there is a growing consensus that attention and resource must be directed towards prevention as well as response. Chief Constable Simon Bailey – the police chief with key national responsibility for this area – has confirmed that, in 2015, police forces in England and Wales spent £1bn investigating allegations of child abuse.³ This clearly underlines the economic case for prevention, but it also supports the moral case – by the time the police are involved, abuse has already occurred.

We know that there is a strong link between children displaying harmful sexual behaviour at a young age going on to become perpetrators of abuse in adulthood, including child sexual exploitation. Equally, children who sexually abuse other children have often already suffered abuse and trauma themselves. In other cases, children make mistakes as they start to understand their sexuality and experiment with it. These children are unlikely to pose further risk to the public, given appropriate support, but unnecessarily criminalising or stigmatising them as a 'sex offender' at such a young age makes it more likely that they will struggle to regain a normal life, and increases their propensity to reoffend.

Whilst in the most serious cases a criminal justice response is inevitable, all children in this situation must receive the high-quality therapeutic support they need to address the underlying causes of their behaviour, prevent them from causing further harm to themselves or others, and enable them to achieve positive outcomes in adulthood.

Whilst harmful sexual behaviour includes very serious abuse, which can constitute a sexual offence, it also includes much more mainstream behaviours. 'Sexting', or sharing sexual images online, has become ubiquitous for the social media generation, and while it is not always harmful, it can carry significant risks for young people: once shared images can end up in the hands (or on the smartphones) of a whole school or adults seeking to groom children online. Significantly too, it is illegal, potentially resulting in criminal sanctions and a criminal record, which could severely undermine a child's life chances.

² http://www.barnardos.org.uk/cse_parliamentary_inquiry_report.pdf

³ <http://www.thetimes.co.uk/tto/news/uk/crime/article4718736.ece>

More generally, technology and the internet have transformed the way young people communicate, but also how they learn about the world. Easy access to pornography and pervasive sexualised content has created new challenges for keeping children safe.

The Inquiry heard that harmful sexual behaviour has become much more prominent in recent years, with specialist services reporting increasing numbers of referrals. One of the outstanding questions is whether harmful sexual behaviour is not just more visible, but also more prevalent?

The aim of the Inquiry, and this report, is to probe whether legislation, policy and practice are fit to protect our children in the society they are growing up in today, and to pre-empt the risks that may arise in the future.

4. Legislative and policy context

This section provides some background to the current legislative and policy framework regarding harmful sexual behaviour (HSB) covered by the Westminster Government.

The Sexual Offences Act 2003

The main piece of legislation governing sexual offences, including those committed by children, is the Sexual Offences Act 2003.⁴

S. 9 Sexual Activity with a child

S. 10 Causing or inciting a child to engage in sexual activity

S. 11 Engaging in sexual activity in the presence of a child

S. 12 Causing a child to watch a sexual act

S.25 Sexual activity with a child family member

S.26 Inciting a child family member to engage in sexual activity

Under S. 13, the offences above can apply to young people under 18 (and over 10 - the age of criminal responsibility). Young offenders can face a term of up to five years' imprisonment.⁵

Sentencing

Under relevant sentencing guidelines the court must have regard to the principle aim of the youth justice – to prevent offending by children and young people – and to the welfare of the young offender.⁶

The court must have regard to the welfare, maturity, sexual development and intelligence of the young person. Police and prosecutors should further ensure that a Youth Conditional Caution is considered in any case for which it is permitted and provides an appropriate outcome for the victim, community and offender.⁷

'Sexting'

For the purposes of this report 'Sexting' involves sharing indecent images via text message, or on other channels.⁸ Although not always "harmful", this can amount to a criminal offence. Under the Protection of Children Act 1978 and Section 160 of the Criminal Justice Act 1988 it is an offence to be in possession of an indecent image of

4 <http://www.legislation.gov.uk/ukpga/2003/42/contents>

5 http://www.legislation.gov.uk/ukpga/2003/42/pdfs/ukpga_20030042_en.pdf

6 https://www.sentencingcouncil.org.uk/wp-content/uploads/Final_Sexual_Offences_Definitive_Guideline_content_web1.pdf

7 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/243443/9780108512179.pdf

8 The term sexting is used in different ways by different people. In this report, the term refers to the sending and receiving of sexual images.

a child (subject to exceptions).⁹ These laws apply to children over the age of criminal responsibility (10), as well as adults.

If an incident of sexting is reported to the police, the names of those involved can be kept on record for at least 10 years in the Police National Database (PND),¹⁰ even if no criminal charges are brought against them.

The National Police Chiefs' Council (NPCC) is in the process of developing new guidance for the police on how to respond to sexting by under 18s in England and Wales. It is expected that police officers will be able to avoid criminalising young people unnecessarily, by applying a new crime outcome code that states that "*further investigation is not in the public interest*".¹¹ This will help formalise the discretion available to the police and facilitate referrals to appropriate local agencies, rather than progressing a criminal justice response where for example there is not exploitative behaviours present. As a result, incidences of sexting will not necessarily be passed on to the Disclosure and Barring Service, meaning it will not appear in future criminal records checks or affect young people's employment prospects where appropriate.

The Child Exploitation and Online Protection Centre (CEOP) has commissioned Charlotte Aynsley to develop complementary guidance for schools, which will support proportionate responses to sexting. This will be disseminated under the auspices of the education sub group of the UK Council for Child Internet Safety (UKCCIS).¹²

9 The offence under the Protection of Children Act 1978 was amended by Section 45 of the Sexual Offences Act 2003 to cover images of 16 and 17 year olds <http://www.legislation.gov.uk/ukpga/2003/42/part/1/crossheading/indecent-photographs-of-children>

10 <http://www.bbc.co.uk/news/technology-35577506>

11 <http://www.telegraph.co.uk/education/educationnews/12156666/Sexting-children-should-not-be-prosecuted-guidelines-say.html>

12 <http://www.parentsprotect.co.uk/files/Sexting%20in%20Schools%20eBooklet%20FINAL%2030APR13.pdf>

5. Findings of the Inquiry

What is harmful sexual behaviour

Definitions

Different organisations use various definitions for the term ‘harmful sexual behaviour’ (herein referred to as HSB), and some of the most prominent can be found in Appendix A. In the absence of any agreed definition of HSB at national or professional level this Inquiry used the following description:

Harmful sexual behaviour is when children and young people (under 18) engage in sexual discussions or activities that are inappropriate for their age or stage of development, often with other individuals who they have power over by virtue of age, emotional maturity, gender, physical strength, or intellect and where the victim in this relationship has suffered a betrayal of trust. These activities can range from using sexually explicit words and phrases to full penetrative sex with other children or adults.

This definition is based on the definition used by the National Society for the Prevention of Cruelty to Children (NSPCC)¹³ and The National Institute for Clinical Excellence (NICE)¹⁴. We have, however, added Calder’s (1999)¹⁵ observation that power differences play a role in HSB. It is a broad definition which makes clear that, whilst a wide range of behaviours could amount to HSB, the exact labelling will often depend on the particular circumstances of each case and the characteristics of the individual child involved. Importantly, alongside more obvious incidents of one child sexually abusing another child, it can also involve behaviours which may be harmful to the perpetrator, but not necessarily to others.

“Perhaps a useful way of thinking about it is in terms of a continuum, where on the one side of the scale you’ll find sexually abusive behaviour because there is very clearly a victim. Usually in these situations there will be a power difference between the victim and the perpetrator. The other side of the continuum is problematic behaviour, which is self-directed – harmful to the perpetrator, but not necessarily harmful for others. An example could be a 10 year-old boy who exposes himself to his foster carers.”

Stuart Allardyce, Barnardo’s

It follows that a wide spectrum of behaviours can be classified as HSB, but the key unifying factor is the notion that, with the right support, the children involved can overcome the causes underlying their behaviour and be prevented from causing further, potentially more serious, harm as they move towards adulthood.

¹³ <https://www.nspcc.org.uk/globalassets/documents/evaluation-of-services/turn-page-report-large-text.pdf>

¹⁴ <https://www.nice.org.uk/guidance/gid-phg66/documents/sexually-harmful-behaviour-among-young-people-final-scope2>

¹⁵ Calder, M. C. (ed.) (1999), Working with young people who sexually abuse: new pieces of the jigsaw puzzle, Dorset: Russell House Publishing

From the evidence received, it is clear that an effective definition of this subject requires the balance of a number of elements:

- Incorporating abusive and problematic/concerning behaviours

As mentioned above, the term ‘harmful sexual behaviour’ encompasses both sexually abusive behaviour – i.e. where one child manipulates or coerces another; and sexually problematic or concerning behaviour – where there is no victimisation, but where the behaviour negatively interferes with the child’s development.¹⁶ It is important to think of this as an overarching term that can include both of these types of behaviours.

It should be noted that the term ‘sexually harmful behaviour’ is often used almost interchangeably with HSB despite the subtle shift in emphasis the term has in stressing the impact of behaviour on an external victim rather than covering both victim and/or perpetrator of such behaviour.

“The reason that I like the term ‘harmful sexual behaviour’ is because it indicates that we are talking about things that are either harmful to another person or people, who are victimised as a consequence of the behaviour, and/or that harm the child or young person who is expressing the behaviour. The notion of ‘Harmful Sexual Behaviour’ has that dual concept of harm to others and harm to self.”

Professor Simon Hackett

- Avoiding stigmatisation

Choosing the right term is important to avoid stigmatisation of children and young people. Professor Simon Hackett elaborated that the phrase ‘harmful sexual behaviour’ has been adopted over the last two decades because specialists working in this area feel the previously accepted term – ‘adolescent sex offenders’ – no longer accurately describes the cohort services were working with.

“I helped set up a programme in the 1980s for adolescent sex offenders, one of the first of its kind in the UK. What we found was that many of the young people, who were referred, were not referred through the criminal justice system as they weren’t effectively offenders. And increasingly they were being referred earlier than adolescence. So the term ‘adolescent sex offenders’ appeared to be problematic to describe children that cause concern because of their sexual behaviours.”

Professor Simon Hackett

- Inappropriate for age or stage of development

Any definition needs to take into consideration that some behaviours might be normal and healthy in one context and harmful in another. Whether a particular sexual behaviour is harmful depends on the age of the child/children involved and also their stage of maturity and sexual development.

“...we know that children and young people as a group do engage in sexual behaviours. We are not really concerned about the normal, appropriate and healthy sexual behaviours, but those whose behaviour appears to sit outside of what you’d expect to be normal.”

Professor Simon Hackett

16 Hackett, S. (2011). Children and Young People with Harmful Sexual Behaviours. In C. Barter, & D. Berridge, Children Behaving Badly? Peer Violence Between Children and Young People (pp. 121-136). West Sussex: John Wiley & Sons Ltd.

It is therefore important that descriptions of HSB are situated in the context of our expectations of age-appropriate healthy sexual behaviour among children and young people – the charity Brook produces a sexual behaviours traffic light tool, which can be used to distinguish between different types of sexual behaviours at different age levels, and is included in Appendix B. It is also important to indicate what constitutes HSB when it is displayed by children and young people with a learning difficulty or developmental disorder which may have inhibited their sexual maturity.

In some cases it is helpful to refer to ‘concerning sexual behaviour’ as a means to describe some of the age-inappropriate behaviours listed in Brook’s traffic light tool. Brook describes these types of behaviour as having the potential to be outside of what might be seen as safe and healthy. They may be unusual or out of character for a particular child or young person; of potential concern due to age or developmental differences; or worrying because of the type of activity and the frequency, duration, and context in which it occurs.

This report occasionally uses the term ‘concerning sexual behaviour’, particularly when considering scenarios where it is felt early intervention work with younger children may prevent them going on to display more harmful sexual behaviours later in their development.

■ Importance of power

Power plays a role in most instances of HSB where a victim is involved. The power difference will usually manifest itself through difference in age, emotional maturity, gender, physical strength or intellect. Again, this might not be outwardly straightforward when taking into account learning difficulties or developmental needs.

Moving away from legal definitions

There are circumstances in which sexual behaviour amounts to a criminal offence, but is not necessarily harmful. For example if two 15 year-olds in a consensual relationship send sexually explicit images to each other, this constitutes an offence under the law¹⁷ but is not necessarily inappropriate to their age and development. This calls into question whether definitions (legal and otherwise) have kept pace with societal change when considering HSB.

Links with ‘peer-on-peer’ abuse, child sexual abuse (CSA) and child sexual exploitation (CSE)

The spectrum of behaviours described as HSB includes what is known as ‘peer-on-peer’ abuse. However, using these terms interchangeably can be problematic. ‘Peer-on-peer’ abuse can relate to various forms of abuse (not just sexual abuse and exploitation)¹⁸, and crucially it does not capture the fact that the behaviour in question is harmful to the child perpetrator as well as the victim. This is not to say the term ‘peer-on-peer abuse’ is unhelpful or should not be used in correct circumstances. But it does highlight the importance of definitions of HSB to enhance the understanding of this taboo issue.

¹⁷ see Legislative and policy context on page 4

¹⁸ Firman and Curtis (2015) Practitioner Briefing #1: What is Peer-On-Peer Abuse?

<http://msunderstood.org.uk/assets/templates/msunderstood/style/documents/MSUPB01.pdf>

A consistent message to the Inquiry was that the majority of young people displaying HSB were highly likely to have been abused themselves, often sexually, but also through experiencing some other form of physical or emotional abuse or neglect. Domestic abuse, either experienced directly or witnessed in the family, appeared to have a particularly strong correlation according to the evidence.

“Witnessing or experiencing domestic violence is an independent risk-factor for children who sexually abuse. The issue of domestic violence has come out clearly from research the last 15 years or so.”

Dr Eileen Vizard CBE

The case studies below illustrate the links between children who have experienced abuse and who display harmful sexual behaviour.

Examples of links between HSB and CSA

Case study: Office of the Children’s Commissioner’s report into child sexual abuse in the family network¹⁹

This case study shows suspected sexual abuse in the family environment, occurring across several generations:

“During a site visit, the Inquiry heard details of a case that had recently come to light where it was suspected that child sexual abuse in the family environment had occurred across several generations of the same family. All members of the family live in the same household. It was suspected that the grandfather had sexually abused his children and grandchildren. The perpetrator’s grandson has started demonstrating harmful sexual behaviour, and one of his granddaughters is considered to be at high risk of child sexual exploitation. The range of interventions required to address the needs of children in the household and keep them all safe from sexual abuse are significant and challenging.”²⁰

Case Study: Young Person from Glebe House

Some young people clearly display HSB as a consequence of suffering abuse. One young person from Glebe House told of the personal abuse he had suffered as a child before going on to commit a sexual offence in his teens:

“I am a 20 year-old man who was arrested at 15 for a serious sexual assault of two girls under 8 years old. They lived near me. When I was young I was heavily beaten and sexually abused. When I was 9 months-old I was admitted to hospital with broken ribs, a broken arm and a broken leg. My sexual abuse lasted 9½ years and was fucking horrible to live with for that long – as you can probably imagine.”

One of the most compelling reasons for addressing this issue now is that understanding and responding to HSB effectively can be an essential strand in the prevention of CSE.

¹⁹ Children’s Commissioner for England

²⁰ <http://www.childrenscommissioner.gov.uk/sites/default/files/publications/Protecting%20children%20from%20harm%20-%20full%20report.pdf>

“Children who sexually exploit their peers also engage in HSB. It is however, important to note that children can be sexually exploited by adults and therefore in ways that do not intersect with HSB. Likewise children can display HSB in ways that aren’t sexually exploitative. But the point of intersection between the two, by virtue of their definitions and the required response warrants attention.”²¹

Dr Carlene Firmin MBE

“Over the last five years, there has been increased media attention around issues of child sexual exploitation. We recognise that a lot of the perpetrators of CSE are actually under the age of 18 themselves. We recognise that peer-on-peer sexual exploitation is an issue within the topic of CSE.”

Stuart Allardyce, Barnardo’s

“When you break down the profile of investigations and where abuse is taking place ...we can say that around 30 per cent is peer-on-peer abuse... The most prolific [form of CSE] is peer-on-peer abuse being conducted by people younger than 18 years of age. When you look at core statistics you can see that 20 per cent of offenders charged with CSE offences are under the age of 18.”

Chief Constable Simon Bailey

The Office of the Children’s Commissioner for England (OCCE) held an Inquiry into CSE in gangs and groups²² which found evidence that adolescent boys were being used to groom and sexually exploit girls and young women before passing them on to older men. These boys were, in other words, themselves groomed by older men in order to exploit the girls.

This is also highlighted by a case study from the Inquiry into CSE in Rotherham outlined below.

Example of links between HSB and CSE

Case Study: Rotherham CSE Inquiry

“Child E (2004) became a looked after child when she was aged 12. She had an abusive family background and her parents had mental health problems. She became a victim of child sexual exploitation while she was looked after in a local children’s unit. Her ‘looked after’ file could not be traced, although minutes from looked after reviews were accessed on the ‘risky business’ file. Child E was described as very naïve, and desperate for affection. She was very vulnerable to coercion and was sexually exploited when a looked after child by adult males she thought were her boyfriends. Notes from the children’s unit files at the time suggest there was a level of chaos surrounding the care of Child E and other children in the unit, with staff powerless as older children in the residential units introduced younger and more vulnerable children like Child E to predatory adult males who were targeting children’s homes.”²³

21 Written evidence from Dr Firmin

22 http://dera.ioe.ac.uk/16067/1/FINAL_REPORT_FOR_WEBSITE_Child_Sexual_Exploitation_in_Gangs_and_Groups_Inquiry_Interim_Report_21_11_12.pdf

23 http://www.rotherham.gov.uk/downloads/file/1407/independent_inquiry_cse_in_rotherham

Given all these areas of overlap between CSE, CSA and HSB it is unsurprising that the children involved often exhibit similar risk factors. Practitioners at Barnardo's services report that young people who display HSB are often identified as victims of CSE or at risk.

The identifiable links between HSB, CSE and CSA are still being researched and further evidence is required to be able fully untangle the complex interactions between the three phenomena.

How prevalent is HSB?

Data

There is no definitive data on the prevalence of HSB. Where data is held it will most often sit across a range of agencies – including health, education and criminal justice.

Figures from police forces in England and Wales show that 4,209 children and young people under 18 were recorded as perpetrators of sexual offences against other children and young people in 2013-14.²⁴ Older figures from the Home Office indicate that 20 per cent of those found guilty or cautioned for a sexual offence in England and Wales were under 18.²⁵ It is important to note that since the age of criminal responsibility in England and Wales is 10, HSB displayed by children under 10 cannot be an 'offence' and is therefore not recorded in the same way. Figures on offences committed by children will not therefore reflect the total extent of HSB. The Inquiry heard that research has generally indicated that around a third of incidents of sexual abuse involve children or adolescents as perpetrators.²⁶ Some UK studies (including the biggest conducted into victimisation in this country so far²⁷) have suggested that the proportion may be significantly higher with one study estimating that up to 65 per cent of sexual abuse experienced by children under 18 is perpetrated by someone under the age of 18. The Office of the Children's Commissioner's report into child sexual abuse in the family environment²⁸ found that 25 per cent of all cases of child abuse in the family environment involved a perpetrator under the age of 18.²⁹

Under-reporting

When making any assessment of prevalence it is also important to factor in significant under-reporting.

“Only one in eight child abuse victims are known to the system. We know that the children that come to our attention for HSB are a small proportion of the children who display HSB.”

Donald Findlater, Lucy Faithfull Foundation

24 <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/harmful-sexual-behaviour/harmful-sexual-behaviour-facts-statistics/>

25 Home Office (2002): Criminal Statistics England and Wales. HMSO, London.

26 Hackett, S. (2004) What Works for Children and Young People with Harmful Sexual Behaviours. Essex: Barnardo's

27 Radford et al (2012) Child abuse and neglect in the UK today. London: NSPCC.

28 <https://www.childrenscommissioner.gov.uk/sites/default/files/publications/Protecting%20children%20from%20harm%20-%20full%20report.pdf>

29 <http://www.childrenscommissioner.gov.uk/sites/default/files/publications/Protecting%20children%20from%20harm%20-%20full%20report.pdf>

Society has traditionally treated sexual abuse as taboo, and sexual abuse committed by children as doubly taboo, leading to under-recording and underestimation of prevalence.³⁰ Related to this, many children and young people who have experienced sexual abuse do not come forward. One study found that 82.7 per cent of children aged 11-17 who experienced sexual abuse by a peer did not tell anyone else about it.³¹

Despite this, the recent focus on child sexual exploitation (CSE) has helped to improve understanding and awareness of the vulnerability of children and young people who are abused and sexually exploited in the public and among professionals.³²

Is HSB increasing?

The Inquiry heard that, whilst awareness of HSB was certainly growing, it is far from clear whether this reflects an overall increase in prevalence. Although the experts giving evidence seemed almost unanimously to agree that the volume of reported incidences of HSB and the degree of offences committed were both rising, the reasons for this were not certain.

Firstly, it is highly improbable that HSB is a new phenomenon, peculiar to recent generations, but more likely to be behaviour that has occurred through human history. What has changed is modern society's greater willingness to discuss such behaviour more openly alongside a growing scientific understanding of the impact sexual abuse, HSB, and sexual development more generally, has on children's emotional wellbeing and future outcomes. As such it is not clear whether increasing numbers of reported incidents simply reflect a gradual uncovering of the scale of the issue by professionals and the public, corresponding to the increasing awareness of child sexual abuse in general over the past two decades.

Another explanation may be that the nature of online culture, in particular sexting has made the issue of HSB far more visible than it has ever been in the past, making it easier to both identify and prosecute HSB, given the increasing amount of documentary proof in the form of explicit photographs or text messages. Technology has also enabled children to display types of HSB that were not possible before, including sexting and non-contact sexual abuse.

“I’m just not sure we understand the scale from the reports that we’re getting. One of my requests would be that we need more work to understand the scale of HSB, it might be quite a significant indicator in terms of the impact that the behaviour within the family home and access to pornography is having upon the way in which young people are behaving.”

Chief Constable Simon Bailey

A third potential cause could be that an increasingly risk-averse culture within public services is leading to an over-reaction by some professionals towards certain incidents, particularly among those who are not specifically trained in the area of HSB.

³⁰ Masson and Hackett (2003): A decade on from the NCH Report (1992): adolescent sexual aggression policy, practice and service delivery across the UK and Republic of Ireland. *Journal of Sexual Aggression* 9(2): 109-124.

³¹ Radford et al. (2012) *Child abuse and neglect in the UK today*. London: NSPCC.

³² https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/386598/The_20sexual_20exploitation_20of_20children_20it_20couldn't_20happen_20here_20could_20it.pdf

“The problem we’ve got at the moment is that there is a culture of fear that exists when children express any degree of sexual problems. It means that schools and professionals are likely to respond to that behaviour too strongly.”

Professor Simon Hackett

Sensationalist headlines of four year-olds being investigated by police for sex abuse, such as those recently published in *The Mirror*³³, reinforce Professor Simon Hackett’s description of a culture of fear. Similarly, the recent increase in reporting of historical abuse and sex offences generally following the Savile scandal and the launch of Operation Yewtree are likely to have added to creating this climate.

Any or all of these factors may be contributing to a rise in recorded incidences of HSB, but the general feeling from professionals contributing to the Inquiry was that there is now in fact a greater proliferation of HSB than in the past.

Which children display HSB?

The Inquiry heard that there is considerable diversity amongst children and young people who display HSB. They include boys and girls of all ages from all socio-economic, cultural, ethnic and religious backgrounds and all sexual orientations. There are however, some common characteristics or risk factors:

■ Victims of abuse and neglect

As described earlier in this report, children who display HSB are more likely to have experienced abuse and neglect, including sexual, physical and emotional abuse themselves.³⁴ This does not mean however, that all children who have been abused will go on to become perpetrators themselves, but in some cases the child’s behaviour may be a direct consequence of their own experience of being sexualised through abuse.

A recent report by the OCCE stated:

“Most victims of child abuse do not display harmful sexual behaviours; it seems that being a victim of abuse or neglect can increase the likelihood of displaying harmful sexual behaviours as an adolescent. In particular, the evidence gathered emphasises that children who engage in harmful sexual behaviour may have been sexually abused themselves or exposed to domestic violence.”³⁵

The Inquiry heard from Professor Simon Hackett that in 2014 he completed research examining 700 cases of young people up to 18 years of age who had been referred to different parts of the country for displaying HSB – believed to be the largest UK study

³³ <http://www.mirror.co.uk/news/uk-news/rapist-aged-four-among-800-5081613>

³⁴ Hawkes (2009) Sexually harmful behaviour in young children and the link to maltreatment in early childhood. London: NSPCC; Vizard, Eileen (2006) Sexually abusive behaviour by children and adolescents. *Child and Adolescent Mental Health* 11(1): 2-8; McCartan et al (2011) Child and adolescent females who present with sexually abusive behaviours: a 10-year UK prevalence study. *Journal of Sexual Aggression* 17(1): 4-14; Burton et al (2002): A social learning theory comparison of the sexual victimization of adolescent sexual offenders and nonsexual offending male delinquents. *Child Abuse & Neglect*, 26(9): 893-907; Kenny et al (2001) Predictors of Recidivism in Australian Juvenile Sex Offenders: Implications for Treatment. *Sexual Abuse: Journal of Research and Treatment* 13:131-148; Dent and Jowitt (2003) Homicide and Serious Sexual Offences Committed by Children and Young People: Findings from the Literature and a Serious Case Review. *Journal of Sexual Aggression* 9:85-96; Hackett, S. (2004) *What Works for Children and Young People with Harmful Sexual Behaviours*. Essex: Barnardo’s.

³⁵ <http://www.childrenscommissioner.gov.uk/sites/default/files/publications/Its%20a%20lonely%20journey%20REA%20on%20Intrafamilial%20child%20sexual%20abuse.pdf>

so far on the issue. This found that around 50 per cent of the sample had themselves been abused, either sexually or in other forms (violence, neglect etc.). Other studies estimate that between 23 and 40 per cent of children and young people who sexually harm others have suffered abuse and neglect themselves.³⁶ Young people who display HSB often have symptoms relating to trauma caused by earlier abuse and neglect.³⁷

■ Poor social competences and learning difficulties or disabilities

Children and young people who display HSB can exhibit high levels of general behavioural problems. They often have low social skills, lack of sexual knowledge and high levels of social anxiety.³⁸ For some young people this combination of poor social ability, low self-esteem and emotional difficulties can lead to problems in establishing intimate relationships and they attempt to solve this through abusive relations with children.

A significant proportion of these children and young people have learning difficulties or disabilities (LDD) and can be on the autistic spectrum (ASD).³⁹ However, research cautions against concluding that children and young people with LDD and ASD are more likely to sexually abuse than their peers. This group may be overrepresented in the data due to factors relating to their conditions – such as repeating the same patterns of offending, habitual selection of victims⁴⁰, impulsiveness in their offending, inability to read social situations, and naivety when challenged.⁴¹

■ Age

The peak time for the development of HSB appears to be early adolescence or the onset of puberty. Service providers report that the average age of a child referred to specialist services is falling. Barnardo's Taith HSB service in Wales has, for instance, seen an increase in younger children being referred. In 2013/2014, 33 per cent of their referrals were for children aged less than 11 years old. The service has had to expand its work to be able to include children from the age of five years. The type of behaviour these younger children were referred for includes sexual touching or assault, exposure, rape or attempted rape.

36 <https://www.nice.org.uk/guidance/gid-phg66/documents/sexually-harmful-behaviour-among-young-people-final-scope2>

37 Hunter et al (2003) *Juvenile Sex Offenders: Toward the Development of Typology*, *Sexual Abuse: A Journal of Research & Treatment* 15:27–48; Wilcox et al (2004) *Resilience and Risk Factors Associated with Experiencing Childhood Sexual Abuse*, *Child Abuse Review* 13:338–352; Veneziano and Veneziano (2002) *Adolescent Sex Offenders: A Review of the Literature*, *Trauma, Violence, & Abuse* 3:247–260.

38 Righthand and Welch (2001) *Juveniles who have Sexually Offended: A Review of the Professional Literature*. USA: US Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention; Rutter et al (1998) *Antisocial Behaviour by Young People*. Cambridge: Cambridge University Press; Righthand et al (2005) *Factor Structure and Validation of the Juvenile Sex Offender Assessment Protocol (J-SOAP)*, *Sexual Abuse: Journal of Research and Treatment* 17:13–30.

39 Manocha and Mezey (1998) *British adolescents who sexually abuse: a descriptive study*, *Journal of Forensic Psychiatry* 9:588–608; Hickey et al (2006) *Links Between Juvenile Sexually Abusive Behaviour and Emerging Severe Personality Disorder Traits in Childhood*. DSPD Programme: Dangerous People and Severe Personality Disorder, Department for Health, Home Office and National Offender Management Service; Timms and Goreczny (2002) *Adolescent Sex Offenders with Mental Retardation: Literature Review and Assessment Considerations*, *Aggression and Violent Behavior* 7:1–19.

40 Hackett, et al (2003) *Mapping and Exploring Services for Young People who have Sexually Abused Other*. University of Durham, University of Huddersfield: Centre for Applied Social and Community Studies.

41 Hackett, et al (2003) *Mapping and Exploring Services for Young People who have Sexually Abused Other*. University of Durham, University of Huddersfield: Centre for Applied Social and Community Studies.

“We don’t really know whether perpetrators are becoming younger and younger or whether it’s about recognition. Professionals involved in this area across the UK constantly report that the frequency by which they receive reports about pre-adolescent children is increasing.”

Professor Simon Hackett

That younger children are being referred for HSB could be an indication that the age at which children display HSB is also falling, or alternatively that identification of HSB at younger ages is improving.⁴²

■ Gender

Around 90 per cent of young people who are formally identified as sexually abusing others are male.⁴³ Even when underreporting is taken into account, this still represents a vast majority and HSB is predominantly a problem affecting boys and young men.

However, it is important to be aware that young women can display HSB too. There is, though, a general lack of societal understanding and acceptance that young females sexually abuse, which has had an impact on reporting practices and acts as a barrier to effective identification and response.⁴⁴ Society is more readily amenable to seeing young females who sexually abuse as victims of abuse themselves than young males, who are more likely to be seen solely as perpetrators, even when there may be similar childhood histories.

The Inquiry heard from Dr Eileen Vizard CBE that it is believed that young females may on average begin offending slightly earlier than males, potentially as they are more likely to be trusted with younger children at an earlier age. If so, this may also mean that girls displaying HSB might be identified earlier and preventative measures applied more successfully.

■ Children who display concerning sexual behaviour

Research on risk factors has generally focused on sexual behaviour that is abusive, typically associated with adolescents. Less attention has been given to younger children displaying problematic or concerning sexual behaviour. One study found that the average age for children beginning to demonstrate concerning sexual behaviours is 8½ years-old.⁴⁵ 65 per cent of such children were found to be boys and 35 per cent girls. A majority of them live at home with their biological parents and more than half directed their concerning behaviour towards a sibling. Notably they were found to have similar histories of abuse and neglect as children displaying more serious forms of HSB.

42 <http://www.nice.org.uk/guidance/gid-phg66/documents/sexually-harmful-behaviour-among-young-people-final-scope2>

43 Kubik et al (2002) Adolescent Females Who Have Sexually Offended: Comparisons with Delinquent Adolescent Female Offenders and Adolescent Males Who Sexually Offend. *Journal of Child Sexual Abuse* 11:63–83; Hunter et al (2006) The Female Juvenile Sex Offender' in Barbaree, H. and Marshall, W. (eds.) *The Juvenile Sexual Offender*. Second edition. London: The Guilford Press.

44 Bunting (2005) Females Who Sexually Offend Against Children: Responses of the child protection and criminal justice systems. London: NSPCC; Denov (2003) The Myth of Innocence: Sexual Scripts and the Recognition of Child Sexual Abuse by Female Perpetrators. *Journal of Sex Research* 40:303–314.

45 Gray et al (1999): Developmental and ethnological characteristics of children with sexual behaviour problems: treatment implications. *Child Abuse and Neglect* 23: 601-621.

■ Other harmful behaviours

Children and young people found to display HSB are likely to exhibit other delinquent tendencies too, especially those engaged in high level behaviour. As Professor Simon Hackett put it to the Panel:

“The particular group of young people who are highly worrying and dangerous tend to not just have problems with their sexual behaviour, but have other types of criminal behaviour too.”

Professor Simon Hackett

Alongside these traits, though, the Inquiry was also told categorically that there were also some characteristics which potentially might be thought of as risk factors which professionals were keen to dispel as misconceptions:

■ Ethnicity

There is no evidence to suggest that any ethnic or cultural group has a greater propensity to display HSB, with statistics suggesting the profile of offenders generally conforms to the proportions of the wider demographics. The Inquiry did consider, however, whether certain communities – be they religious or otherwise – may be less inclined to involve the authorities in dealing with offending of all natures, and particularly when involving taboos such as sex offending. Such communities may be an important target for information and awareness raising activities on this subject.

“Sexual abuse thrives where there is secrecy and it is not talked about. The best disinfectant of abusive behaviour is awareness and being able to speak about it.”

Jon Brown, NSPCC

■ Class and socio-economic status

The Inquiry heard that HSB does not occur more frequently in any particular social-economic group. However, children from lower-economic background are over-represented in clinical samples of children who display HSB. This may partly be because the other risk factors were more likely to be present in lower socio-economic groups and because families from these backgrounds are more often in contact with social services. This means that any HSB taking place in these families is more likely to be reported on than in middle-class families.

“..the reason that lower socio-economic children may be over-represented in samples that come to clinics or local authorities, is probably because those who are perpetrators or victims of abuse in middle classes are better able to evade attention. It's not that there is much less going on in those families.”

Dr Eileen Vizard CBE

Impact of technology and the internet

It is almost clichéd now to point out that technology, and particularly the internet, have dramatically transformed the way that children and young people communicate over the past two decades.⁴⁶ This has brought great opportunities for many, but also presented some significant new challenges.

⁴⁶ A more in-depth look at this subject can be found in Barnardo's 2015 report Youth and the Internet. http://www.barnardos.org.uk/youth_and_the_internet_report.pdf

Sexting

One of the principal triggers for an increased focus on HSB and this Inquiry has been the normalisation of sexting (sharing indecent images by text message, but also online), and the attention it has received in the media and elsewhere over the recent past. However, it is important to emphasise that whilst sexting can constitute a criminal offence,⁴⁷ it is not necessarily ‘harmful sexual behaviour’, in terms of being inappropriate to a child’s age and development – for example such when two teenagers of similar age in a consensual relationship exchange images of themselves.

A recent report *Fixers investigates: the trouble with sex in schools* for the Women and Equalities Select Committee by the organisation Fixers found that sexting is commonplace among young people and it is seen as a normal part of safe, healthy relationships.⁴⁸ Sexting can however, in other contexts, be harmful – particularly when coercion is involved. Whether sexting is harmful is dependent on the context. The case studies below, which we have received from Rebecca Avery, Education Safeguarding Adviser (Online Protection) at Kent County Council, illustrate how sexting can amount to HSB.

Case studies of sexting (Kent County Council)

1 A 15 year-old girl was interacting online with an 18 year-old male. They did not know each other offline and all communication took place via instant messenger/webcam and an online gaming site. Over a period of several months he coerced and persuaded her to eventually send him a topless image of herself. He then threatened to share this image online if she did not send him further indecent images. The girl was very distressed; she blocked the male from her online communication channels and also disclosed the situation to her school. The school were concerned that she was at risk of significant harm due to the emotional impact on her wellbeing. Initially the police response was not very positive; however after escalation the child received appropriate support from external agencies.

2 Two year 6 children (aged 11 and 10) were in a “relationship” and topless photos were shared between them. The boy shared the image of the girl via his social media account and also sent them to another year 6 child and asked her to share images with him. A social services referral was made on due to the risk of significant harm to both the boy and also the potential impact of his behaviour on other children.

However, it is not clear how far authorities and institutions are making such contextual distinctions when faced with the rapidly growing trend of sexting. For example a Freedom of Information request by *The Sun* in 2015 revealed that 1,000 under-18s had been investigated by police for sexting between 2012 and 2014⁴⁹ whilst earlier this year *The Telegraph* claimed as many as 44,000 secondary school pupils

⁴⁷ Under the Protection of Children Act 1978 and Section 160 of the Criminal Justice Act 1988 it is an offence to be in possession of an indecent image of a child (subject to exceptions). These laws apply to children over the age of criminal responsibility (10), as well as adults.

⁴⁸ <http://www.parliament.uk/documents/commons-committees/women-and-equalities/FixersSS.pdf>

⁴⁹ <http://www.bbc.co.uk/news/technology-35577506>

have been caught sending explicit messages or images.⁵⁰ Other recent cases in the media have shown how children and young people have been prosecuted for sexting and added to the Police National Database⁵¹ even though this Inquiry was told by Chief Constable Simon Bailey that forces are supposed to try and minimise the risk of criminalising children with regard to sexting given the changing nature of social norms. The National Police Chiefs' Council (NPCC) is in the process of developing new guidance for the police on how to respond to sexting by under 18s in England and Wales, which seek to address this issue (see above).

Pornography

A consistent theme of the Inquiry concerned the impact that the emergence of the internet may have had in fostering an increase HSB – particularly through the ready access to pornography it has facilitated for young people. The committee heard that this does appear to be contributing to the development of HSB in some young people:

“It is unsurprising that the internet is now serving as a means to problematically sexualize children and influence their behaviour. That is one of the worrying things that we’ve seen over the last years – an increase in the number of referrals for whom the stimulus appears to be the materials they’ve been exposed to online.”

Professor Simon Hackett

The apparent impact of the internet in driving harmful behaviour is exemplified by the recent case of two teenage girls in Newcastle accused of kidnapping a toddler. The police have said the teenagers were searching for “rape” on their tablet computer, prompting Barnardo’s and other children’s charities to reiterate warnings about the potential impact of explicit online content.⁵²

However, the Inquiry also heard it was not easy to make a direct causal link between exposure to inappropriate media on the internet and the propensity to become an offender. There are some studies that link frequent exposure to pornography to sexually aggressive or coercive behaviour and sexual offending in young people.⁵³ But a lot more research is needed in this area to fully understand the complex links between the two. The role of the internet in incubating negative behaviours, including HSB, is complex and dependent on a number of determining factors.

The life experiences, social circumstances, support mechanisms and psyche of the individual are all factors in the ability of a child to build resilience. Just as in the debates of previous generations about the impact of ‘video nasties’ or violent video games, the Inquiry was told that at present research suggests that many children are not significantly affected by inappropriate sexual material on the internet, yet some are very significantly affected by what they are exposed to.

“There is a continuum of things from very abusive, violent pornography involving very serious abuses of the law and child abuse through to imagery contained

50 <http://www.telegraph.co.uk/education/educationnews/12191946/Wave-of-sexting-by-school-children-raises-fears-of-grooming.html>

51 <http://www.bbc.co.uk/news/uk-34136388>; <http://www.dailymail.co.uk/news/article-2702157/Sexting-leave-criminal-record-teenagers-told-Sharing-explicit-pictures-18s-illegal-taken-themselves.html>; <http://www.telegraph.co.uk/news/uknews/crime/12118848/Top-public-school-at-centre-of-sexting-scam.html>

52 <http://www.chroniclelive.co.uk/news/north-east-news/childrens-charities-give-internet-warning-11454193>

53 http://www.mdx.ac.uk/data/assets/pdf_file/0026/48545/BasicallyporniseverywhereReport.pdf

within music videos on the other hand. The damage depends on the rate of exposure and where it is on that continuum. Protective factors around the child that might cushion the impact on the child also matters. Not all children who are exposed to this type of imagery are affected in the same way.”

Professor Simon Hackett

This is backed by evidence from research into building children’s online resilience the Oxford Internet Institute at the University of Oxford and The Parent Zone. The study found that good parenting plays a key role in determining young people’s online resilience. It further found that parenting strategies of restriction and monitoring can be useful in shielding young people from potential harm, but these can potentially undermine children’s resilience and constructive engagement online. On the other hand, children who felt their parents showed them unconditional support and respected their choices and opinions were more likely to be resilient online.

However, even without definitive evidence the Inquiry heard from several parties who were concerned about the internet potentially acting as a causal factor for HSB:

“I do have a lot of concern about the effect on children’s psycho-social development of being able to have free access to images, which many of us would consider to be quite undesirable. I’m concerned that these will distort their view of what is normal and healthy sexual behaviour.”

Dr Eileen Vizard CBE

This concern is again echoed by the recent report for the Women and Equality Select Committee’s inquiry sexual harassment and sexual violence in schools⁵⁴, *Fixers investigates: the trouble with sex in schools*⁵⁵, which found that young people are under pressure to behave in a sexualised way from the age of 12 and sometimes younger. It suggests that this is closely linked to the internet and social media, which acts as a vehicle to spread sexual content, bullying and harassment. This supports a continuing trajectory of concern in this area as identified by previous investigations such as that conducted by Dr Linda Papadopolous in 2010.⁵⁶

The OCCE’s report into CSE in gangs and groups⁵⁷ found that anal and oral rape were reported most frequently and vaginal rape least frequently in the cases of CSE they investigated. Professionals who gave evidence to the report cited the influence of pornography as one of the main reasons for this. The report did not specify whether this was true for CSE committed by peers as well as adults.

A review of the literature commissioned by the OCCE as part of their inquiry found that access and exposure to pornography are linked to children and young people’s engagement in “risky behaviours”, which they define engagement in sexual practices from a younger age, engagement in riskier sexual behaviours such as unprotected anal or oral sex, and the involvement of drugs and alcohol in sex. They further found that young people who used pornography were more likely to report having had anal

54 <http://www.parliament.uk/business/committees/committees-a-z/commons-select/women-and-equalities-committee/inquiries/parliament-2015/inquiry1/>

55 <http://www.parliament.uk/documents/commons-committees/women-and-equalities/FixersSS.pdf>

56 <http://webarchive.nationalarchives.gov.uk/+http://www.homeoffice.gov.uk/documents/sexualisation-of-young-people.pdf>

57 http://dera.ioe.ac.uk/16067/1/FINAL_REPORT_FOR_WEBSITE_Child_Sexual_Exploitation_in_Gangs_and_Groups_Inquiry_Interim_Report_21_11_12.pdf

sex, sex with multiple partners, and using alcohol and drugs during sex.⁵⁸

During this Inquiry, the police also reported that they believed the exponential increase in the viewing of pornography by young people, if not contributing to an increase in HSB, was certainly affecting the type of sexual abuse being reported:

“The way we’re also seeing it is in the forms of sexual abuse being reported – anal rape for example”

Gareth Edwards, National Police Chiefs’ Council

Mitigating the impact of pornography and sexualised online content

The Inquiry debated quite extensively how far children and young people could be protected from accessing pornography and other inappropriate material online, whether willingly or not. Obviously this is an issue which has already been championed by successive governments working with internet service providers (ISP) to improve internet filters and parental controls, whilst at the same time encouraging business and developers to consider how they might mitigate ways in which their platforms or apps might be being misused by children.

Some of the possibilities for protecting children from exposure to pornography and other inappropriate content online were explored during the evidence sessions with witnesses. It was apparent that the difficulties the internet presents in regulation are particularly pernicious. Simple past forms of censorship – such as age-rating schemes – are difficult to apply to the internet and new technologies given the almost infinite amounts of content being generated across a similarly gargantuan number of platforms and websites.⁵⁹ The Government is currently consulting on how to address the issue of age-verification for pornography to keep children safe.⁶⁰

Whereas previous forms of harmful media content generally needed to be obtained via an intermediary (a shopkeeper, for example) and therefore legal responsibilities could be attached to such persons, the internet replaces this ‘gatekeeper’ role. ISPs might be a route to explore but this would be particularly problematic to implement

Broadly the Inquiry heard that it would be desirable to try and prevent children and young people from accessing negative content on the internet.

“I do think if it’s possible to have some age limit for children accessing some social media that would be helpful.”

Dr Eileen Vizard CBE

But there was also scepticism that this was possible:

“We’re pretty clear that no children should be viewing pornography or be having access to pornography, but they are. The challenge is that the majority of pornography is coming in from outside the EU; it’s free at the point of viewing and incredibly difficult to control. Age verification is not going to deal with that.”

Jon Brown, NSPCC

Alternatively the Inquiry considered whether it would be possible to make some

⁵⁸ http://www.childrenscommissioner.gov.uk/sites/default/files/publications/Basically_porn_is_everywhere.pdf

⁵⁹ The third, 2015, edition of the Data Never Sleeps infographic showing how much content is generated on average every minute on some of the most popular internet platforms – such as Facebook, YouTube etc. – provides an idea of the scale of material being produced.

⁶⁰ <https://www.gov.uk/government/consultations/child-safety-online-age-verification-for-pornography>

form of offence to stop neglectful parents not doing enough to prevent their children accessing pornography – effectively making it a form of abuse. However, it was felt this would be extremely problematic to practically implement, predominantly because children were accessing this material through smartphones or outside the home.

“I don’t see how you would practically do that as in my experience children often know far more about this than their parents.”

Chief Constable Simon Bailey

Despite much discussion during this Inquiry, the evidence suggests it is no longer as practicably easy to limit children’s access to inappropriate media as it may have been in the past, due to advances in technology. Efforts to limit the ready availability of pornography (and indeed other harmful content) to children on the internet should continue to be pursued vigorously⁶¹, but the message from professionals is that politicians must be realistic about how far censorship alone can remain an effective strategy in the era of the smartphone – particularly given children are no longer just passive consumers, but also creators and distributors of their own content.

The internet should be harnessed as part of the solution, so that young people are able to use it to access accurate, age appropriate, accessible information about sex and relationships to complement what happens at home and at school.

Responses to HSB

How do we respond to HSB?

Broadly, this Inquiry found that services range from preventative to punitive but there is no consistent application across England at present, meaning the same behaviours might be treated very differently in different areas of the country:

“It can still be a little bit of a postcode lottery in terms of what services you receive. We don’t have that expectation for adult sex offenders, so why should we have it with adolescents that display HSB?”

Stuart Allardyce, Barnardo’s

Part of the explanation for this inconsistency is that there is currently no statutory framework or national strategy for dealing with HSB:

“Various Inquiries and different reports – the NCH report on young people who sexually abuse from 1992; the Childhood Lost report that came out in the late 90’s; the Colyn Evans Inquiry in Scotland from 2005 – all ask for a national strategy in relation to working with HSB. 25 years on we still don’t have one. This is why we still have a very piecemeal picture of service provision across the UK.”

Stuart Allardyce, Barnardo’s

Professor Simon Hackett believed it was important that a national strategy was developed, possibly using the impetus created by a keener focus on the issue of CSE:

“I think that the time is right for a national strategy. Those of us who work within this field are desperate to get this issue acknowledged in a policy context.”

⁶¹ The following places have advice on how to keep children safe online: <https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/online-safety/>
<https://www.thinkuknow.co.uk/>

Dr Vizard and I wrote a draft national strategy ten years ago that still hasn't actually been implemented. We have a real issue about ensuring consistent and fair provision of services. We missed opportunities in the past to do that, but with the increased focus on CSE we now have an opportunity to look at this specific issue with fresh eyes."

Professor Simon Hackett

Pathways to specialist support

The two principal pathways for young people displaying HSB are typically the child protection system or the criminal justice system described below:

1. Child protection route

A young person who displays HSB may be referred to a HSB specialist service through social services or through the school.

The statutory guidance Working together to safeguard children⁶² sets out the responsibility of local authorities to safeguard children and young people and describes the steps a local authority should take once it has received a referral. Children's social care will hold an initial strategy discussion together with the police. The police should be present regardless of whether there is suspicion that a crime has been committed. A decision is then made whether:

- the child requires immediate protection
- the child is 'in need'⁶³
- the child is suffering significant harm

After the initial discussion a decision is made on whether to proceed into a child protection route (if the child is under the age of criminal responsibility and/or no offence has been committed) or a criminal justice route, if an offence has been committed.

Many children and young people who are charged with sexual offences have previously been referred to children's services for displaying harmful sexual behaviour. However, the significance of their behaviour on referral was not recognised or dismissed by children's services. This is thought to be a barrier to providing effective interventions.⁶⁴

There is further strong evidence that practice in this area is inconsistent and that responses to children in similar circumstances vary considerably around the country.

"There is a clear need for local authorities (LAs) to develop and manage multi-agency policies and procedures within existing bodies of values, knowledge and good practice, in relation to how practitioners 'on the ground' respond to both HSB and CSE. Without a clear lead many practitioners who are the corner stone of service delivery will feel de-skilled and anxious. The AIM project has developed

62 [https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working Together to Safeguard Children.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf)

63 under section 17 of the Children Act 1989

64 <https://www.nice.org.uk/guidance/gid-phg66/documents/sexually-harmful-behaviour-among-young-people-final-scope2>

such processes in relation to HSB and these have been adopted and adapted by a number of LA's but the situation remains ad hoc and patchy. The project is currently working with NSPCC and other key agencies to develop a national strategy.”⁶⁵

Assessment, Intervention, Moving on (AIM) Project

Additionally, there is evidence that identification and referral to specialist services are happening too late:

“Our Old Enough to Know Better report raised concerns about the lack of therapeutic support for young people who display sexually harmful behaviour. Our practitioners report an absence of clear referral pathways for young people to get assessment of their needs and to access therapeutic support to deal with their behaviour, or to help them recover from earlier abuse that was a contributory factor to the development of sexually harmful behaviours.”⁶⁶

The Children's Society

2 Criminal justice route

This route only applies to children over the age of 10. Young people who have committed a sexual offence may access specialist services through the criminal justice system.

Below is an example of a child or young person's pathway through the criminal justice system, which has been submitted to the Inquiry by the Youth Justice Board. It is important to keep in mind that this is a general pathway, which might not necessarily be true for all cases across the country.

When a child or young person is arrested, he or she will be subject to a screening, which identifies any potential mental health issues, learning disabilities or substance misuse⁶⁷. This assessment is commissioned by NHS England. Where there is sufficient evidence and the offence is sufficiently serious or forms part of a known pattern of behaviour, the police, youth offending team (YOT) and the Crown Prosecution Service will consider the merits of prosecution. In these circumstances, those involved in the process will work together with children's social care to gather information and make a professional assessment as to the best outcome for all parties.

If the child or young person is charged with an offence, they will be removed from policy custody to local authority accommodation. The child or young person is then assessed by the local YOT which produces a pre-sentence report. The child or young person's case may go through a youth court or the Crown Court, depending on the seriousness of the offence. The Youth Magistrate or Crown Court Judge will use the pre-sentence report and the youth sentencing framework (described above) to inform their sentence.

The child or young person may either be given a community or custodial sentence. In the case of community sentences, local YOTs are responsible for delivering community youth justice services, including addressing HSB among children and young people.

⁶⁵ Written evidence from the Assessment Intervention Moving on (AIM) Project

⁶⁶ Written evidence from The Children's Society

⁶⁷ <https://www.england.nhs.uk/commissioning/health-just/liason-and-diversion/ld-about/>

The offer of interventions is determined locally, and will differ from area to area. In the case of custodial sentence, the child or young person is placed in youth custody, for instance in a secure training center or a young offender institution. NHS England is responsible for commissioning all health services, including mental health services, in the youth secure estate.

Alternatively, a young person may be referred to a treatment facility, such as Glebe House, by court order or as an alternative to custody.

Case study: Glebe House

Glebe House is an independent children's home, run by a Quaker charitable trust. Founded in 1965, it operates as a therapeutic community for particularly damaged and challenging young men, typically aged 16-19 years, who are also perpetrators of harmful sexual behaviour.

Glebe House accepts young men who have been criminalised, including increasingly those previously held in Secure Units or Young Offender Institutions, some of whom may be on parole licence or as an alternative to custody.

In 2002 a 10-year longitudinal piece of research was commissioned to study Glebe House's effectiveness in terms of reducing the problems identified on the young men's arrival, changes in their lifestyles and reduction in their harmful sexual behaviour⁶⁸. The research drew on interviews with 43 young men at intervals during and after their residency, with a further 15 young men who left Glebe House prematurely, due to offending or unacceptable behaviour, and with staff and external professionals. The study concluded in 2014 and it found that that the young men who completed the programme reported a reduction or cessation of their highest-ranked problems, including self-harm, suicidal thoughts and depression. They also reported that the programme had helped heal their own experiences of abuse and neglect. Only two of the 43 were convicted for an offence after completing the programme, one of these was a sexual offence, the other a violent (non-sexual) offence.

Additionally, the research found that the group of young men who left the Community prematurely were slightly older, often came direct from the secure estate and if they were criminalised, they had often committed more serious offences compared to the young men who completed the programme. Recidivism of sexual offences among this group was eleven times higher than among the young men who completed the programme.

68 <http://www.ftctrust.org.uk/research.php>

However, the Inquiry received evidence that in many cases, young people were not referred for appropriate support, despite concerns from professionals that an intervention might be required. Evidence received from Safer London⁶⁹ stated:

“We deliver a service for young men that display HSB in the problematic category (AIM2) we have found that there are numerous cases where young people have been arrested for a sexual offence (CSE related) and receive ‘no further action’ (NFA) due to witnesses not willing to testify or lack of evidence etc. These young people are immediately dismissed and are not referred to any services for work around harmful attitudes and behaviours. We believe that this is a great opportunity to intervene and do some work around healthy relationships and should be a necessity for any young person brought to police attention.”⁷⁰

Safer London

Harmful sexual behaviour in schools

HSB is an issue of increasing importance to schools. Last September, a response to a Freedom of Information request showed that between 2012 and 2015 there had been nearly 4,000 alleged physical sexual assaults and more than 600 rapes on school premises. A least of fifth of these offences were carried out by children.⁷¹ This is quite apart from the growing awareness of sexting between pupils taking place within schools mentioned earlier in this report.⁷²

Problems with sexualised behaviour in schools is also highlighted in *Fixers investigates: the trouble with sex in schools* report, which found that 27 per cent of the young people who took part in the survey had felt pressured into sexting, sexual activity, drinking alcohol and taking drugs. 18 per cent reported being sexually harassed once or more and 12 per cent stated that they had been sexually assaulted.⁷³ The report further found that young people say some teachers “brush off” incidents of sexual assaults or sexually threatening behaviour because of the young age of the perpetrators. Young people reported that they often do not speak up about incidents because they are worried about repercussions and victims being punished as well as perpetrators.

Schools’ safeguarding duties are governed by statutory guidance (*Keeping children safe in education*, Department for Education, July 2015)⁷⁴. This requires schools and colleges to have a child protection (or safeguarding) policy, relevant procedures and a designated lead for child protection. For instance, staff members who have concerns about a child should raise these with the designated safeguarding lead, who will decide whether to make a referral to children’s social care, though any staff member can also raise concerns with children’s social care directly.

When defining sexual abuse, the guidance states:

⁶⁹ Safer London is an independent charity that supports young people affected by violence and crime.

⁷⁰ Written evidence from Safer London

⁷¹ <http://www.bbc.co.uk/news/education-34138287>

⁷² <http://www.telegraph.co.uk/education/educationnews/12191946/Wave-of-sexting-by-school-children-raises-fears-of-grooming.html>

⁷³ <http://www.parliament.uk/documents/commons-committees/women-and-equalities/FixersSS.pdf>

⁷⁴ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/447595/KCSIE_July_2015.pdf

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

The guidance is in the process of being updated.⁷⁵ The consultation document indicates the new guidance will, among other things, have a new section covering online safety. The document proposes that all schools should be required to ensure filtering and monitoring of harmful and inappropriate material online. The consultation also proposes that governing bodies should ensure (rather than consider) that children are taught about safeguarding online.

How should we respond to HSB?

Balancing objectives

The evidence presented to this Inquiry highlighted that developing an appropriate policy response to incidences of HSB was an extremely complex conundrum affected by a number of delicate considerations. One panel member broadly summarised the key elements as follows:

“The important thing is that 1) measures are put in place to ensure public protection and that the young people who’ve acted in a harmful sexual way do not continue with that behaviour; 2) the right kind of interventions are targeted to individuals to prevent the behaviour recurring and 3) that victims and families of victims see justice done in some way.”

Stuart Allardyce, Barnardo’s

Whilst Professor Simon Hackett stressed that community interventions and therapy might be more effective in many cases.

“Most of these children and young people can be managed effectively in their communities with appropriate support, through to more intensive, restrictive and intrusive interventions for those who are not safe to be in their communities.”

Professor Simon Hackett

The interplay between these factors always needs to be carefully balanced, often according to the circumstances of the individual case – particularly in the context of the ‘continuum’ of behaviours described earlier. This is echoed in the Office of the Children’s Commissioner’s recent report into child sexual abuse in the family network, which also reflects that *“balancing criminal justice and child protection processes in respect of children who engage in harmful sexual behaviour is a considerable challenge”*.⁷⁶

It is however, important to keep in mind that children displaying HSB are likely to have suffered trauma or abuse and may be extremely vulnerable. Interventions must be aimed primarily at supporting children to overcome the challenges they face and go on to achieve positive outcomes.

⁷⁵ The consultation process ended 16 February, but the new guidance is still to be published <https://www.gov.uk/government/consultations/keeping-children-safe-in-education-proposed-changes>

⁷⁶ <https://www.childrenscommissioner.gov.uk/sites/default/files/publications/Protecting%20children%20from%20harm%20-%20full%20report.pdf>

Preventing further harm: Specialist therapeutic support

The Inquiry heard that the success rates for therapeutic programmes working with children and young people exhibiting HSB was extremely good. Professor Simon Hackett stated that meta-analyses looking at different samples and different levels of risk had suggested between 3 and 12 per cent of children treated for HSB sexually reoffend.⁷⁷ This low recidivism rate provides a strong incentive for society to look at working therapeutically with young people displaying HSB.

As described above, young people who have committed a sexual offence may access specialist services through the criminal justice system. Alternatively, a young person may be referred to a treatment facility by court order, as an alternative to custody, such as the one provided by Glebe House Friends Therapeutic Community Trust.

Research from Glebe House shows that 84 per cent of the group of young males who had displayed HSB and completed their treatment programme were not reconvicted, compared with only 56 per cent in the comparison group, and that only one person had reoffended sexually and one violently, compared with five each in the comparison group.⁷⁸

“My time at Glebe has really helped me. My therapist and keyworker have been fantastic with me and supported me a lot throughout my placement – with self-harm, my mum, and other struggles that have come up like nightmares about my dad and my sexual abuse, and the day I got stabbed in a prison kitchen during work-experience.”

Young person from Glebe House

“I have been able to come to terms with my past. I guess going through the treatment programme helps you understand the things you wouldn’t have understood as a young adult – which helps massively for the future.”

Young person from Glebe House

Dr Eileen Vizard stated that other research had highlighted that of those who do reoffend there was a small number of very high-risk children whose sexual offending began in childhood and then continued right through to adulthood. These children often showed signs of psychopathy putting them in the highest category of risk. But, the patterns of behaviour meant these children could be identified early and prevention measures put in place if resource was available to do so.

“This is a very small proportion but they are responsible for a significant amount of violent offending and they are also extremely expensive to deal with when they reach adult services. If we are looking at how to spend preventative money I’d certainly say we should look at early prevention of this higher-risk group.”

Dr Eileen Vizard CBE

The Inquiry heard that young people were more likely to be successfully rehabilitated by approaches that forced them to confront the negative consequences of their behaviours, whilst recognising their age may determine a degree of naivety about sexuality. Treating such young people in the same way as older perpetrators risks

⁷⁷ although this does not include non-sexual reoffending

⁷⁸ <http://www.ftctrust.org.uk/research.php>

stigmatising and reinforcing such behaviours rather than unravelling the cognitive distortions so vital to preventing them going on to reoffend. The same young person went on to describe how they responded much better to a more straightforward, non-judgmental approach:

“When I went through the case with my youth offending officer it was a very different attitude. They said ‘ok – this has happened. Let’s talk about why. How do we manage this?’ I found I got more out of it when the person speaking to me was more open, honest, upfront and not judgmental. I opened up because I knew the person the other end was honest with me and patient with me.”

Young person from Glebe House

In a recent report, the Children’s Commissioner recommended “children and young people with harmful sexual behaviour receive proportionate and timely intervention to reduce the risk of this behaviour continuing into adulthood.”⁷⁹

Of concern was the suggestion made to the Inquiry that prevention of HSB could be hampered by a lack of knowledge and understanding of what to do about low-level behaviours earlier in life:

“I would say that most of the children we work with at the higher end have all experienced trauma, domestic abuse and severe neglect. These children have actually quite often, when we look at the case histories, been picked up very early on by demonstrating some behaviour that some people are unsure of. But people don’t know what to do about it or just leave it, and then it manifests itself in adolescence as much bigger problems.”

Sue Cuffe, Barnardo’s

Another important part of interventions is the role of families. Families of children who display HSB face considerable social stigma, rejection and isolation in relation to their child’s behaviour. Common emotional responses in parents whose children display HSB include intense fear, shock and denial, guilt, shame and self-blame.⁸⁰ This can have a negative effect on the children.

From criminalisation to rehabilitation

The Inquiry heard from Professor Simon Hackett that in the past children and young people displaying HSB would have been “treated as mini-sex offenders”, but that this was increasingly seen as an ineffective means of dealing with the problem.

There are no studies to date directly comparing the effect of treatments for adult sex offenders with interventions for children who display HSB. The academic literature on the effects of treatment of adult sex offenders has provided no conclusive answer as to whether treatment has an effect on sexual reoffending in adults.⁸¹

79 <http://www.childrenscommissioner.gov.uk/sites/default/files/publications/Protecting%20children%20from%20harm%20-%20full%20report.pdf>

80 Hackett (2002): Abused and abusing: work with young people who have a dual sexual abuse experience. In Calder MC (ed.) Young people who sexually abuse. Building the evidence base for your practice. Russell House Publishing. Lyme Regis.

81 The academic literature on the effects of treatment of adult sex offenders has provided no conclusive answer as to whether treatment has an effect on sexual reoffending in adults. Reference: Losel and Schmucker (2005): The effectiveness of treatment for sexual offenders: A comprehensive meta-analysis. Journal of Experimental Criminology, 1: 117–146

However, the evidence review from the recent consultation on NICE guidelines shows that certain interventions for children who display HSB have a statistically significant reduction in recidivism outcomes for both sexual and other offences.⁸²

During the Inquiry it was also pointed out that criminal justice responses were particularly inappropriate for more vulnerable child offenders. An overly punitive approach risked criminalising some young people, including those who have made a ‘mistake’ in their adolescent development, or those with a learning difficulty or disability who may have misunderstood the situation or been taken advantage of by others. Young people in these categories most often do not pose an ongoing risk.

The Sentencing Council has proposed new guidelines for sentencing youths for sexual offences. The aim is to improve the way in which the age, background and circumstances of each offender are taken into consideration to reach a sentence that will achieve the primary aim of preventing further offending. The proposed guidelines will also take into account the use of technology, including the aggravating factors of filming an offence and sharing it on the internet.⁸³

Notably, the young people responding to the Inquiry were broadly complimentary about the support they had received from support services – while they were critical of the police’s approach:

“The treatment that I got from [The Police] was completely different from the treatment I got from the youth worker, the social worker or from Glebe. It was very much a case of ‘you know you’ve done bad. You’re a nasty person. You’re horrible.’ It was very demeaning. I’m sat in a room with a solicitor I don’t know at 15 with two police officers across the desk and the last thing I wanted to hear at that stage is ‘you’re a terrible person.’”

Young Person from Glebe House

It is, of course, understandable why the police might behave in this way, given the degree to which they are required to uncover often horrific cases of sexual abuse of children, in many cases committed by adults in full knowledge of the criminal acts they are carrying out. However, for many young people still exploring their sexuality, discovery and the subsequent consequences may be the first time they acknowledge their HSB and fully comprehend or understand that it is wrong.

Age of criminal responsibility

Professionals working in the field are agreed that perpetrators under 18 should be viewed as children first and offenders second. Although no respondent suggested that criminal sanctions should be entirely removed for this age group in the case of serious criminal offences, one panellist did suggest that:

“We could help here if we decriminalised a relatively small number of very high-risk children, between ages of 10-12. If the age of criminal responsibility was raised, it would take these children out of the criminal justice system, which has a very bad effect on them and seems to encourage their deviant behaviour (regardless of the type of sexual offence). Their development in all ways is impaired.”

Dr Eileen Vizard CBE

⁸² <https://www.nice.org.uk/guidance/GID-PHG66/documents/evidence-review>

⁸³ <https://www.sentencingcouncil.org.uk/news/item/new-guidelines-proposed-for-the-sentencing-of-young-offenders/>

Research has found that young people's exposure to the youth justice system can have adverse consequences. There is a danger that labelling children and young people as criminals may serve to stigmatize them and create a self-fulfilling prophecy.⁸⁴ The most recent Ministry of Justice statistics from 2013 show that 36.1 per cent of young people released from custody reoffended within one year of their release.⁸⁵

System-wide transformation of responses to HSB, based on the principle that the children in question are children first and offenders second, would be in line with similar recent changes in the criminal justice system. For example, the Serious Crime Act 2015 removed the term 'child prostitute' in recognition that sexual activity under these circumstances is a form of CSE, and the children involved are victims. It does seem somewhat anomalous that while the legal age of consent is 16, the age at which a child is held legally responsible for sexual (and other) offending is just 10.

“Obviously when we respond to sex offenders of any age we need to make sure that the needs of justice and victims are met. But we also need to have a balanced approach that sees that these are first and foremost children and young.”

Professor Simon Hackett

There are signs that we are moving away from criminalisation of children in relation to lower level sexual offences. The National Police Chiefs' Council (NPCC) is currently drawing up guidance for police forces on how to respond to cases of sexting.⁸⁶

“Sexting can present itself in a range of scenarios and it is important to focus primarily on the safeguarding of the child and not necessarily go down the full criminal justice route if the images are taken and shared with consent between two similar aged children and no exploitation is present”

Gareth Edwards, National Police Chiefs' Council

New guidance is expected to state that where sexting is within the context of a consensual relationship, and is not harmful or exploitative, children should not be placed on the Sex Offenders Register. This progress is welcome and will set a useful precedent for helping to improve the response to tackling this growing issue.

Multi-agency working: Barriers to early intervention

The evidence presented to the Inquiry suggested that there was not enough joined-up working currently, with different agencies too often dealing with HSB in isolation of others.

The police is the agency potentially most likely to come into contact with HSB. But the nature of their role – upholding the law, in particular the Sexual Offences Act 2003 – means that their response is, almost by necessity, predominantly about enforcing the law first, and identifying underlying causes of offending second. They are concerned with whether an offence has been committed and if so whether or not to prosecute in the public interest, principally around public safety.

Chief Constable Simon Bailey added that one area he would like to see improvement

84 McAra and McVie (2010): *Criminology & Criminal Justice* 10(2) 179–209

85 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/399379/youth-justice-annual-stats-13-14.pdf

86 <http://news.npcc.police.uk/releases/police-dont-want-to-criminalise-children-for-sexting>

in is the role and capabilities of local safeguarding children's boards (LSCBs). He said that the intention behind them was good, but that their capacity to deliver was limited. He recommended that their functions should be strengthened to improve their efficiency, and that they should be supported by an analytical division which could support and direct their activities.

Though the police were keen to encourage greater joined-up working with other services to tackle HSB they often felt as though they were the only agency prioritising the issue, as other professionals did not have the time or resource to deal with incidents, particularly at a lower level. This is compounded by the lack of consistency in the availability of specialist HSB services across the country, and by the fact that those that are available are expensive, which means that the threshold for accessing them can be high.

One positive model emerging was where police forces are working directly in schools so they are able to interact directly with young people to deliver messages about online safety and sexual abuse, amongst other things. Chief Constable Simon Bailey highlighted that his force (Norfolk Constabulary) had officers in every secondary school, but acknowledged this was not replicated in every school in all parts of the country.

Preventing HSB emerging before it occurs

Unfortunately one barrier to offering early support to children exhibiting the warning signs of HSB is the comparative lack of budget compared to that available to deal with sex offending later in life:

“We don't have a third of the funding we have to deal with adult sex offenders”

Stuart Allardyce, Barnardo's

This message was delivered by professionals from different sectors in different roles:

“Too often, thresholds are too high for referrals to be accepted and waiting times for services are excessive, leaving schools trying to support and manage pupil needs.”

Sarah Hannafin, National Association of Head Teachers

The National Association of Head Teachers (NAHT) also highlighted the need for training for schools so they could understand how best to deal with any incidents of HSB on school premises:

“Child protection training for all school staff needs to be developed to include recognising, and dealing with, concerning and harmful sexual behaviours.”

Sarah Hannafin, National Association of Head Teachers

In particular schools were often placed in a difficult position following low-level incidents of HSB, with a sense of duty to ensure perpetrators could continue their education but often under pressure from other parents about the risks such students might pose to other children. It was felt that more might be done to support schools in such circumstances.

The evidence received by this Inquiry supported the widely held belief that prevention is better than cure. Whilst responding early and appropriately to children who display

HSB can enable them to rebuild their lives, the goal must be to prevent harmful behaviour occurring in the first place. The majority of evidence provided to the Inquiry suggested that at present too little emphasis was placed on stopping incidents of HSB happening at all.. Chief Constable Simon Bailey said that once a criminal case of abuse is reported to the police, the abuse has already taken place, when it's too late to prevent harm:

“By the time a report comes to us, the damage is done.”

Chief Constable Simon Bailey

Despite the risk factors outlined earlier in this report, and the links between HSB and historical trauma and abuse, this should not disguise the fact that all children could potentially exhibit HSB in the course of their sexual development. For this reason, the Inquiry heard that in order to prevent HSB, decision-makers should take a more holistic view of how to foster healthy sexual development.

“We can equip children to better understand [their sexual development], we can equip parents to do better in supporting them and be aware of the risks, but I don't think we have a good strategy for doing either of these things right now.”

Donald Findlater, Lucy Faithfull Foundation

Sex and Relationship education

A consistent theme in the Inquiry was the need for Sex and Relationships Education (SRE), as part of the Personal, Social and Health Education (PSHE) curriculum to help children understand what is ‘normal’ and help them keep themselves safe⁸⁷. This is especially relevant in light of the increased exposure to pornography and other materials detailed in this report. SRE is currently statutory in maintained secondary schools only in England. Other schools, such as academies, may deliver such education at their own discretion but are not compelled to do so.

“Currently Sex and Relationships Education (SRE) is only statutory in all maintained secondary schools and the DfE guidance has not been reviewed since 2000 leaving it hopelessly outdated.”

Sarah Hannafin, National Association of Head Teachers

In recent months, wide-ranging concerns have been raised about the lack of universal provision of SRE, the age at which it should be taught and the variable quality of what is currently being delivered, including whether it is fit for purpose in addressing the dangers of technology and the internet.

Chairs of the Education, Health, Home Affairs and Business, Innovation and Skills Committees in the House of Commons have all called on the Secretary of State for Education, Rt Hon Nicky Morgan MP to move towards PSHE becoming statutory in all schools which would hopefully incorporate elements of SRE.⁸⁸

Specifically, the Inquiry heard that SRE should not be seen as a ‘one off’ to be delivered at some point in a child’s school career, but present on an age-appropriate and ongoing basis throughout:

⁸⁷ http://www.barnardos.org.uk/onlineshop/pdf/digital_dangers_report.pdf

⁸⁸ <http://www.parliament.uk/business/committees/committees-a-z/commons-select/education-committee/news-parliament-2015/phse-statutory-letter-published-15-16/>

“We need to assist children to learn about decent relationships, sexual development, privacy and consent at different stages of their development.”

Donald Findlater, Lucy Faithfull Foundation

The risk is that the current approach to SRE may not be as effective as it could be. Much of the evidence received by the Inquiry suggested that the public debate around when and how to deliver SRE most effectively did not fully appreciate how the world had changed for young people. Online media has led to the vast majority of children being exposed to a vastly greater volume, and more disturbing degree, of sexualised content at far earlier ages than previous generations. It was increasingly important that children had access to information from responsible authorities to help them make sense of adult content they may inadvertently come across more readily in today’s world. If this is not available they would seek information anyway, but be more likely to receive this from less reliable sources such as peers or online forums.

However, the Inquiry also heard that to be most effective SRE needed to be delivered by specialists – not only because of the knowledge base, but also in terms of engaging children and young people in the right way:

“If making PSHE mandatory, it would be inappropriate if the Maths teacher takes PSHE in the period between 11am and 12pm and then in the next period is talking about quadratic equations. It needs to be people with credibility, people who can go in and have those types of conversations and say things like ‘Right, how many of you have accessed porn websites?’ – if the Maths teacher asks that no-one’s going to put their hand up”

Chief Constable Simon Bailey

This was echoed to some extent by the NAHT stressing the need for specialist training for teachers to be able to speak with pupils on these sensitive topics – which of course they may encounter informally, as well as in formal lessons.

“High quality, funded training must be made available to teachers to develop their knowledge, understanding and confidence in teaching pupils about these issues.”

Sarah Hannafin, National Association of Head Teachers

Consequences of not acting: Impact on children’s life chances

At the heart of policy around HSB must be the drive to maximise children’s life chances – both for child victims and children who offend. For children who display HSB, the first concern should be for the safety both of potential victims and also the child themselves. But the aim of our response should not just be to prevent recidivism, but to support them to continue to a positive future minimally impacted by mistakes they may have made in the past.

The Inquiry heard substantial evidence that displaying HSB had a negative impact on children’s outcomes. Sue Cuffe of Barnardo’s told the Inquiry that a key problem identified by her specialist HSB service staff is that children who display HSB are often excluded from school, which inevitably has a negative impact on their development. Beyond school, being categorised at an early age as a ‘sex offender’ significantly damages children’s opportunities to rebuild their life constructively.

“Having the label of a sex offender attached to you when you are 13-years old can affect your employment and relationship opportunities and be extremely damaging. It’s not to say that we should never criminalise, but have an open discussion and keep in mind that these are children first and foremost.”

Stuart Allardyce, Barnardo’s

This evidence is mirrored by the Standing Committee for Youth Justice’s report on the International Treatment of Childhood Criminal Records which concluded that “the system governing the treatment of childhood criminal records in England and Wales is the most punitive of all the jurisdictions examined”, and that this means that child who has offended is held back from reaching their full potential.⁸⁹ As the case studies below illustrate, being on the sex offenders register has negative implications for the ability to take part in education, find a job and the level of confidence and self-esteem.

Perspectives of young people from Glebe House

“The only point that hindered me moving on was the Sexual Offenders Register. Having completed 2 years at Glebe House and then doing A-levels and heading off to uni, having to sign the register at the start of every term and when moving house was just a constant reminder of ‘yeah you’ve screwed up’ which really does knock your self-esteem and confidence. Additionally, as part of this, having two police officers randomly turning up at your uni flat where your mates are and then having to explain that one is a bit of a tough one! Personally, in my opinion, I felt that the whole process was over the top and unnecessary but then, from my dealings with the police during the whole time from court case to close that doesn’t really surprise me.”

“I guess having the Sex Offenders Register over you can feel quite self-critical. It reminds you that you have done something really bad which can knock your self-esteem, confidence etc.”

“At the time I felt angry, scared, embarrassed, and shocked. I guess at the time I was young which felt overwhelming with the Police there and going to Court was an experience I won’t forget. It was strange, and I didn’t understand what was going on. It was very daunting.”

⁸⁹ <http://scyj.org.uk/2016/04/new-report-shows-that-england-and-wales-top-the-international-league-tables-for-its-punitive-childhood-criminal-records-system/>

6 Recommendations

This Inquiry heard evidence from a multitude of interested organisations and individuals, and represents perhaps the most wide-ranging investigation yet into what is a highly taboo and often misunderstood issue. The following recommendations have been drawn from the evidence received.

1. Children who display harmful sexual behaviour (HSB) should be treated as children first and foremost.

Underpinning any new strategy to tackle HSB should be the principle that all children, including those who have committed sexual offences, should be treated as children first and foremost. Children displaying HSB are likely to have suffered trauma or abuse and may be extremely vulnerable. Crucially, interventions must be aimed primarily at supporting children to overcome the challenges they face and go on to achieve positive outcomes.

1.1 Pathways for children and young people who display harmful sexual behavior, including those who offend, should always include access to specialist support

Too often children displaying HSB are treated as ‘mini sex offenders’. This approach not only fails to pay due consideration to the trauma they may have experienced, but also overlooks that children and young people are more likely than adults to achieve successful rehabilitation.

In recent years, social attitudes and legal definitions have shifted to recognise that children are never to blame for their own abuse, and cannot always be expected to make choices about sex in their best interests even when they believe or claim to have done so. This was exemplified by the removal of the term ‘child prostitute’ from the statute books. Yet young people over the age of 10 who display HSB are still deemed ‘sexual offenders’ and held accountable for their actions under the law. Policy makers should ensure all under 18s are treated as children first, and avoid unnecessary criminalisation.

Although public protection should always remain the primary driver when dealing with cases of HSB – and the Inquiry recognises that some young people will need to be subject to a criminal justice response – young offenders should be treated as children first and offenders second.

1.2 Decisions about specialist support for the small number of children who are in the criminal justice system, following a sexual offence, should always be made in the child’s “best interests”. Decisions must be driven by the aim of effective rehabilitation and future positive outcomes, not on the basis of financial considerations.

Specialist support, including residential alternatives to custody, does have significant resource implications in the short term. However, currently children and young people who commit sexual offences are more likely than others to commit further sexual and non-sexual offences. They are also more likely to have poor outcomes in terms of education, health and employment. Therefore, investing in access to high quality

services that meet children's needs will clearly deliver savings in the longer term.

2. The Government should work with relevant partners to develop a national strategy for preventing and responding to harmful sexual behaviour in children

For 30 years, professionals have consistently called for a national framework governing responses to HSB, but successive governments have not so far sought to develop one. In order to build effectively on work by the NSPCC and others, this Inquiry believes that national Government leadership is essential. In light of the increasing visibility of HSB, including concerns over sexting; the risks posed by easy access to online pornography and other sexualised content; and the links between HSB and child sexual exploitation and wider abuse, a national strategy for managing and preventing HSB is imperative and should be prioritised by Government.

2.1 A ministerial-led working group should be established, with representation from government departments, voluntary sector and other agencies working with children affected by HSB. The voice of children and young people should also be represented.

This strategy should be cross-departmental, involving all agencies, voluntary sectors and others who work with children affected by HSB. Its work should be overseen by a ministerial-led working group. It should be particularly clear about how different professionals – including those within schools, the police, health, and social services – should interact with each other, and identify how each agency should improve its response to HSB, including through training for staff.

2.2 In developing the strategy, the working group should agree on a clear, universally accepted set of definitions for 'harmful sexual behaviour'.

Given the complex nature of this issue, clear definitions are a crucial first step. This will help clarify what is meant by HSB, and how it relates to CSE and CSA, as well as to sexual offending and concerning sexual behaviour. Given the wide range of behaviours covered by the present terminology, it may be that any definition contains accurate sub-categorisations to accommodate specific issues, akin to the way the overarching term 'mental health' describes a broad number of conditions and behaviours. Breakdowns underneath HSB may include types of behaviours (such as those harmful to the perpetrator but not to others); grades of behaviour (to classify lower level incidents and higher risk offending); or the context of behaviours (to distinguish between, say, online behaviours such as sexting and gang-based sexual exploitation for example).

2.3 The strategy should aim to establish best practice and improve a) consistency of approach towards children displaying HSB and b) consistency in the quality of HSB services

Currently, support for children who display HSB varies considerably based on a variety of factors. The strategy must ensure that, in future, children receive responses that address their needs, including where the child has committed an offence under the law. The ministerial-led working group should also ensure that best practice is shared across local authority areas to improve pathways, and that the nature and quality of support is consistent. It should also embed the principle that access to

specialist support should not vary depending on whether or not a child has been committed an offence.

2.4 The Working Group should consider whether to commission new guidance for schools on responding to sexually concerning and harmful behaviour, akin to existing guidelines on sexting.

The Inquiry found that schools face a daunting task in determining how best to respond to sexual behaviour. As demonstrated by the discussion of HSB definitions, determining whether behaviour is concerning, harmful, or even illegal can often be challenging. Whilst in some areas, schools are supported effectively by the local authority and/or the police, this is an area where greater consistency is needed in order to protect all children involved, prevent unnecessary criminalisation, and ensure children are referred to appropriate, specialist support where needed.

2.5 The Working Group should oversee the introduction of high quality training for a range of professionals on HSB, including police, social workers, teachers and lawyers.

The Inquiry found that the level of understanding amongst key professionals varied greatly. In many cases, there was insufficient understanding of how to recognise harmful sexual behaviour, what action to take when it has occurred, and the likely vulnerability of the children involved. Training is essential to improving young people's experience of statutory services and the quality of the support they receive. Where appropriate, specific information on HSB should be included in existing high quality safeguarding training.

3. The Government should work closely with schools, local government, the voluntary sector and others to:

- a. Improve support for parents in keeping their children safe from HSB;**
- b. Increase children's knowledge and understanding of safe and healthy relationships; and**
- c. Restrict access to inappropriate online content.**

Improving responses to HSB and improving prevention will require a multi-faceted approach. The strategy must consider not just the role of statutory agencies in delivering improved services, but also how they can work together to equip parents and carers, and children themselves, to improve safety. There is widespread agreement that the increase in scale as well as visibility of HSB is driven in large part by technology. Discussions during the Inquiry evidence sessions brought to light the fact that regulation cannot fully protect children from accessing inappropriate sexual content online. But we know that for some children such content can be harmful, distorting their understanding of healthy relationships. A broad range of measures is necessary to tackle this issue effectively, including education, awareness and regulation.

3.1 The Government should work with local authorities, schools, police and industry to improve information and support for parents/carers around HSB. this should include the development of messages for parents about what constitutes healthy sexual development at different ages, and how to spot the signs of concerning or harmful sexual behaviour as early as possible.

Parents and carers have a vital role to play in helping to prevent HSB and ensuring children receive timely, appropriate support where it does occur. Heightened public awareness of child sexual abuse over the past two decades has increased parental awareness of the propensity of their child becoming a victim of such abuse and how they can safeguard against this. Yet the findings of this Inquiry suggest that far fewer will be aware of the possibility that their child could be harming themselves or other children, or how they can identify the warning signs. In addition to supporting parents to understand ‘normal’ sexual development, information and advice must address the realities of the smartphone age, and how best to protect children from engaging in harmful or even illegal behaviour.

3.2 Parents must take an active role in keeping their children safe on and offline, especially in the family home.

As a member of the panel pointed out, if a child drinks a whole bottle of whisky in the family home, we would question why his or her parents did not prevent this from happening. Whilst parents cannot reasonably be expected to exercise total control over what their children see online (or what they are shown by their school friends) parents must take an active, vigilant approach protecting children from harmful content, and helping them to become “critical consumers” of what they are exposed to.

3.3 The Government should ensure all children have access to high quality, age-appropriate information and advice about healthy relationships; their rights and responsibilities; and how to seek support if they need it

Almost universally the experts giving evidence to this Inquiry felt that age-appropriate advice and information to all pupils in all schools was crucial in preventing HSB. Most importantly, though, was the sense that this could not be delivered through a ‘one off’ lesson to be taught at some point in a child’s school career, but must take the form of an on-going series of age-appropriate discussions about issues such as love, expectations of relationships, the concept of consent, and rights and duties towards others. Above all, children need to know that practices such as sexting – even between teenagers in a consensual relationship – can amount to breaking the law. The interests of justice, and of maximising children’s life chances, dictate that children must be taught about which behaviour is illegal, what the penalties and consequences are, and where they can go for help if they are involved in harmful and/or illegal behaviour.

Education of this sort should help prepare children and young people for the sexualised content they are almost inevitably liable to come into contact with online, either directly or second-hand through conversation or experience in the playground. In the face of the proliferation of such content, the risk is that if such, admittedly difficult, discussions are delayed too long, children will seek out their own information – and misinformation – about sex from the internet, rather than the institutions and individuals responsible for upholding the values and cultural norms

of society. Practical consideration should be given to how such education might be delivered in modern engaging ways, in addition to lessons in school, for example via on and off-line public health campaigns – which could be targeted at young people as well as parents, carers, professionals and others.

3.4 The Government should continue to improve regulation of online pornography and sexualised content, working with industry and others, domestically and internationally

The Government is right to pursue measures such as age restrictions on pornography websites, and to continue to explore all possible regulatory measures to keep children safe online. Additionally, Government must continue to work collaboratively with industry and use all possible levers to ensure industry is acting responsibly and supporting customers to maximise their children's safety. However, it must also recognise that this in itself cannot be a panacea and should be part of a wider strategy in tackling HSB.

4. The Government should work with partners to commission research to further our understanding of HSB, in order to:

- a. Improve identification of children at risk**
- b. Improve prevention of HSB and CSE/A**
- c. Identify gaps in provision**
- d. Improve the effectiveness of interventions**
- e. Improve outcomes for children who display HSB**

Whilst this Inquiry has referred to much of the existing research into this specialist and under-reported topic, it is very clear that there are many gaps in our knowledge. Understanding which children are at risk of HSB is crucial to improving prevention of future sex offending. More research is needed to fully understand the complex network of risk factors which leads children into displaying HSB so that early intervention can be put in place to help these young people.

The findings of this Inquiry show that HSB is strongly linked to Child Sexual Exploitation and Child Sexual Abuse, but the way HSB interacts with CSE and CSA is currently little understood. Whilst clearer definitions will help to better demarcate HSB in public discourse, more research around the links between HSB and other forms abuse is needed to help in the prevention of all three phenomena.

Research is also needed to identify gaps in service provision. We know there are areas of good practice and individual excellent services, but as part of a national strategy, the working group must assess which geographic areas, and which groups of children, are missing out on the support they need. The current inconsistencies in provision in different parts of the country might also be seen as an opportunity for research to assess and measure the effectiveness of different approaches by retrospectively tracking the outcomes of young people receiving different approaches to help inform the strategy's direction.

Research should also be designed to identify good practice, including through evaluating services. Agencies such as the Early Intervention Foundation might be well placed to make an independent assessment of what works. The Working Group should then ensure that good practice is shared effectively.

The ultimate goal of all research in this area must be to improve outcomes for children who display HSB, by ensuring that wherever they live, and whatever challenges they face, they receive the support they need to achieve a positive future.

APPENDIX A – Definitions of harmful sexual behaviour

There has been significant debate about how to define harmful sexual behaviour and different organisations use different definitions.⁹⁰ Below is an overview of the definitions used by leading organisations:

NSPCC

NSPCC uses the term ‘harmful sexual behaviour’ and defines it in their impact and evidence series report *Turn the Page* (2014) 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’⁹¹

This definition is also used by NICE in their scope guideline *Harmful sexual behaviour: identifying and helping children and young people who display harmful sexual behaviour* (2016)⁹²

NSPCC states on their webpage that harmful sexual behaviour includes a) using sexually explicit words and phrases b) inappropriate touching c) using sexual violence or threats d) full penetrative sex with other children or adults. Children and young people who develop harmful sexual behaviour harm themselves and others⁹³.

Department for Education

The Department for Education’s guidance *Keeping Children Safe in Education* (2015)⁹⁴ defines the term ‘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. 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 (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.’

90 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/447595/KCSIE_July_2015.pdf

91 <https://www.nspcc.org.uk/globalassets/documents/evaluation-of-services/turn-page-report-large-text.pdf>

92 <https://www.nice.org.uk/guidance/gid-phg66/documents/sexually-harmful-behaviour-among-young-people-final-scope2>

93 <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/harmful-sexual-behaviour/>

94 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/447595/KCSIE_July_2015.pdf

Department of Health

In *The needs and effective treatment of young people who sexually abuse the Department of Health* (2006)⁹⁵, the Department uses the term ‘sexually abusive behaviour’. This is defined as: ‘any sexual interaction with a person(s) of any age that is perpetrated (1) against the victim’s will, (2) without consent, or (3) in an aggressive, exploitative, manipulative or threatening manner’.

⁹⁵ http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4140269.pdf

APPENDIX B – Sexual behaviours traffic light tool

Brook, a charity that provides sexual health services and advice, has developed a tool to categorize sexual behaviours in children and young people. It supports professionals working with children and young people by helping them to identify and respond appropriately to sexual behaviors. Below is an extract of the information the tool provides. The full tool can be accessed here:

<https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool>

It uses a traffic light system to categorise the sexual behaviours of children and young people into three types of behaviours:

- Green behaviours are part of a safe and healthy sexual development
- Amber behaviours have the potential to be outside of safe and healthy behaviour
- Red behaviours are outside safe and healthy behaviours

0-5 years		
Green behaviours	Amber behaviours	Red behaviours
<ul style="list-style-type: none"> ■ holding or playing with own genitals ■ attempting to touch or curiosity about other children’s genitals ■ games e.g. mummies and daddies, doctors and nurses 	<ul style="list-style-type: none"> ■ preoccupation with adult sexual behaviour ■ pulling other children’s pants down/ skirts up/trousers down against their will ■ talking about sexual activities seen on TV/ online 	<ul style="list-style-type: none"> ■ persistent attempts to touch the genitals of adults ■ sexual behaviour between young children involving penetration with objects ■ forcing other children to engage in sexual play

5-9 years		
Green behaviours	Amber behaviours	Red behaviours
<ul style="list-style-type: none"> ■ feeling and touching own genitals ■ curiosity about other children’s genitals ■ sense of privacy about bodies 	<ul style="list-style-type: none"> ■ sexual bullying face to face or through texts or online messaging ■ engaging in mutual masturbation ■ use of adult slang language to discuss sex 	<ul style="list-style-type: none"> ■ frequent masturbation in front of others ■ sexual behaviour engaging significantly younger or less able children ■ forcing other children to take part in sexual activities

9-13 years		
Green behaviours	Amber behaviours	Red behaviours
<ul style="list-style-type: none"> ■ solitary masturbation ■ use of sexual language including swear and slang words ■ having girl/boyfriends who are of the same, opposite or any gender 	<ul style="list-style-type: none"> ■ verbal, physical or cyber/virtual sexual bullying involving ■ sexual aggression ■ exhibitionism, e.g. flashing or mooning ■ giving out contact details online 	<ul style="list-style-type: none"> ■ distributing naked or sexually provocative images of self or others ■ sexually explicit talk with younger children ■ forcing other children of same age, younger or less able to take part in sexual activities

13-17 years		
Green behaviours	Amber behaviours	Red behaviours
<ul style="list-style-type: none"> ■ sexually explicit conversations with peers ■ interest in erotica/pornography ■ having sexual or non-sexual relationships 	<ul style="list-style-type: none"> ■ accessing exploitative or violent pornography ■ Taking and sending naked or sexually provocative images of self or others ■ single occurrence of peeping, exposing, mooning or obscene gestures 	<ul style="list-style-type: none"> ■ attempting/forcing others to expose genitals ■ sexually aggressive/exploitative behaviour ■ genital injury to self or others ■ sexual contact with others where there is a big difference in age or ability ■ sexual activity with someone in authority and in a position of trust ■ sexual activity with family members ■ sexual contact with animals ■ receipt of gifts or money in exchange for sex

Appendix C – Young people from Glebe House’s stories

Interview with Child A

I am an 18 year old, who as a child experienced a lot of corrupt, confusion around the sexual action around my parents. At the age of 8 I started to sexually abuse members of my family, and non-related members. Due to these circumstances when I was 14 I was given an Indeterminate Public Protection Order (IPP). I was also placed on the Sex Offences Register and received a custodial sentence with a minimum of 2 years. I was placed in a children’s secure unit. Whilst I was there I did CAMH work on a regular basis. As I was approaching the end of my placement there I applied for Parole, I got referred to Glebe House to carry on with my therapy which is going really well (I have 4 months left).

How well do you think things are going for you overall?

At the moment I am currently coming to the end of my Glebe House placement. I am looking to go to college and have an interview very soon. I am looking for flats around my home town. I am also part of the Glebe House football team which I have been involved with since I came to Glebe House. I also think my resilience to the work and with general issues has improved massively to when I first arrived at GH.

What kind of accommodation are you living in now? Do you live on your own?

I am currently living at Glebe with a few months left. When I leave I hope to move into temporary supported accommodation in a flat.

What kind of work do you do?

At Glebe I work around the harmful sexual behaviour displayed as a child. Looking at what kind of things played a part towards my abuse. Looking at how I am going to manage the difficult feelings in the future and understanding what is right and what thing that isn’t.

How do you spend your free time?

In my free time I enjoy playing football, listening to music. I also play Peter (Director) at chess on a regular basis. Football is the main sport for me as I’ve always played it as a child.

Who are the important people in your life now?

I would say that my Gran is the most important person in my life. She has supported me massively since my offences were discovered. I have appreciated the support she has given me from the start as close members of the family understandably didn’t want me to be in the family anymore. My Gran has stuck beside and I am really grateful for everything she has done.

Thinking back to when concerns were first raised about your problematic sexual behaviour what happened at that time?

Concerns were raised when I was around 11 ½ years old. When it was disclosed about the abuse I felt like my life was over. I had butterflies, it was horrible. My Mum rang the police and they took me to my Gran's house to stay. I felt at that time I needed to let everything out – which I did. I was bailed to my Gran's house for about 14 months then got my sentence.

Can you remember how you felt about these events at the time?

At the time I felt angry, scared, embarrassed, and shocked. I guess at the time I was young which felt overwhelming with the Police there and going to Court was an experience I won't forget. It was strange, and I didn't understand what was going on. It was very daunting.

How did people react and what did people do?

I guess there was a reaction of shock. It really made a dilemma in the family, very challenging and difficult (which is understandable). There were arguments about bad parenting on both sides of the family. I also guess these things felt unrepairable, but that's something I have to live with and credit to my Gran – she stuck by me since day 1.

Did you have contact with local social workers or probation officers? What were they like?

Due to my age I had a social worker who I found quite challenging. She came across really threatening with the punishments which she was implying. When I was in secure I got appointed a YOT worker who was very approachable and understanding. I found it easier opening up to him.

How come you were referred to Glebe House?

I got referred to Glebe House to carry on with the therapy and it also boosted to get granted Parole. It was really helpful knowing about Glebe as my other option was just a standard care home. So it was good I could get a second chance to improve my life.

What did you think of the staff at Glebe House? Did your time at Glebe House help you?

I think the staff at Glebe House are amazing. I guess there's the odd person who you don't necessarily get on with but that's life. The staff are caring and supportive who are always there for you- which feels sometime surreal. I have a therapist who I get on really well with, and who I've always felt that any issues I had would be dealt with. That feels comforting it felt easier to vent.

Have there have been significant points in your life that have helped or hindered you to deal with your experiences as a teenager and move on?

I guess having the Sex Offenders Register over you can feel quite self-critical. It reminds you that you have done something really bad which can knock your self-esteem, confidence etc. But at the same time you have to weigh out the positives

– things about yourself that makes you feel that you can move forwards and have a positive future.

Have specialist health and/ or social services been in your life again since you had help as a teenager? How has that been?

I had a social worker when I was about 12/13. I found that OK, there was a lot of different opinions around how my social worker was treating me – but that's old now! I also had a YOT worker who was amazing as I've said. He was very outgoing and 'sound'.

How far do you feel you've been able to deal with what happened in the past and look to the future?

I've been able to deal with things in the past. I'll admit that it's never going to go away of what happened in the past but the only way is to set my eyes on the future. I feel that my future does look positive due to the massive help from GH.

Do you or other people consider that your sexual behaviour problems are still a problem?

I don't think that my sexual behaviour is a problem like it was when I first arrived at GH. I think I have identified the risks which reassures me and others.

Do you think you've been able to come to terms with your past? (If yes) what has made this possible?

I have been able to come to terms with my past. I guess going through the treatment programme helps you understand the things you wouldn't have understood as a young adult – which helps massively for the future.

Have your experiences when you were a teenager had a longer term impact on your life? Are things better, worse or about the same as they were when you were a teenager?

I guess to some degree things have had an impact on me for my future such as going for jobs (disclosing), feeling paranoid about future relationships- but that is something I will have to live with.

What makes life enjoyable and worthwhile at the moment?

Probably playing football and getting out as much as possible. But I'm currently at GH so there are more things to do which will be more enjoyable and worthwhile when I leave.

Has your life turned out as you expected?

I guess I never expected these sorts of things to occur. But I feel the future will be as I expect it to be.

What would you like to be doing in ten years from now?

I would hopefully have a job around construction (preferably painting and decorating). I hope be with a partner and have 2 children.

Thinking about messages to pass on to professionals working with young people who are in a similar position to you back then, what did the professionals in your life do right?

The first thing is about being open and honest. Knowing that you build up a trusting relationship with your therapists really important. For me showing my feelings was difficult, my therapist says that I can mask my feelings really well when it comes to difficult situations. But for me when someone who knows you well it's good that they can recognise when you move to that position and that recognition is massive.

What was not helpful?

For me what was not helpful was the recognition in general. I felt at times people didn't notice me and felt that because of my personality I was seen as someone who could manage difficult feelings. That's the only thing I found unhelpful.

What should they have done differently?

It's hard to say really because I found that every difficult situation is beneficial even if it's intentionally or unintentionally. Because it either shows you how to deal with a difficult situation and how to manage afterwards. There is not much Glebe could have done differently. For me it's an amazing place and I can't thank them enough for what they have done. I guess there are people out there who need/deserve a second chance and I'm grateful I have had that opportunity to change my life and move forward.

Finally, what personal qualities and skills did you most appreciate about the professionals who were helpful to you?

I felt the staff I worked with were humble about their work. The patience, the openness and I think the most important the listening from everybody.

Thank-you.

Interview with Child B

I am a 20 year old man who was arrested at 15 for a serious sexual assault of two girls under 8 years old. They lived near me. When I was young I was heavily beaten and sexually abused. When I was 9 months old I was admitted to hospital with broken ribs, a broken arm and a broken leg. My sexual abuse lasted 9 ½ years and was f***ing horrible to live with for that long – as you can probably imagine.

For my offences I was taken into custody and sentenced to 4 ½ years to life. I am on the Sex Offenders Register and MAPPA level 3. Glebe fought for me for a year but were told to wait for my Parole Hearing to happen. In March 2014 I was granted Parole and I am still a resident of Glebe. I am looking to leave in about 2 months' time.

How well do you think things are going for you overall?

For me things have had their ups and downs and when it's been bad it's been minor things like misuse my mobile phone. When it's been good it's had a massive influence on my life for the better. My past life had low points and some good points. Life at GH

has been a struggle but every bit is worth it.

What kind of accommodation are you living in now? Do you live on your own?

I live in the Independence Bungalow at GH with 1 other lad as I am in the last stages of my placement. I'm now just waiting for housing to find me place

What kind of work do you do?

For 19 hours a week I do intense therapy. The therapy includes 1-1 sessions, groups and Community Meetings – of which there are 3 a day. I also do education – City and Guild Catering and Open Awards (skills for working life).

How do you spend your free time?

I spend my free time training for the 5-a-side football team. I also write poems and play x-box, listen to music and I am writing a novel. I also quite enjoy my art particularly fashion.

Who are the important people in your life now?

The most important people in my life are my mum and my therapist – Karen and my keyworker – Chris. I have a good relationship with these people because they have helped me change so much throughout my placement at GH. I don't always show my thanks to them but they know I'm grateful and I think the world of them.

Thinking back to when concerns were first raised about your problematic sexual behaviour what happened at that time?

Concerns were first raised when the police turned up to my house and said they were going to arrest me.

Can you remember how you felt about these events at the time?

I felt very sad and angry and confused about the situation I had put myself in. Earlier that day I had been attacked by the school bullies – that was shortly after my first offence.

How did people react and what did people do?

My foster family cried. My foster father had a depression breakdown because of what I had done.

Did you have contact with local social workers or probation officers? What were they like?

Once I was in court I had good lawyers. Then the Youth Offending officers got involved with my case and got my sentence reduced from 10 years to life to 4 ½ years to life. They were very friendly.

How come you were referred to Glebe House?

I was referred to GH because of my sexual risk and offences to sort out my head and get a better understanding of my background.

My local authority wanted me to go to an adult prison because they thought I would not cope out of custody. I would have been in adult prison for quite a long-time. My lawyer worked very hard to turn that around.

What did you think of the staff at Glebe House? Did your time at Glebe House help you?

Most of the staff are fantastic. There are the odd few, but the most challenging staff are the ones you really learn the most off. Being able to approach them is a great way to learn about them and find the people you can trust and talk to – and the people to stay away from.

My time at Glebe has really helped me. My therapist and keyworker have been fantastic with me and supported a lot throughout my placement – with self-harm my mum and other struggles that have come up like nightmares about my dad and my sexual abuse and the day I got stabbed in a prison kitchen during work-experience.

Have there have been significant points in your life that have helped or hindered you to deal with your experiences as a teenager and move on?

All of my past experiences in my life have hindered me with my future life and present life with moving on. It has knocked my confidence and self-esteem massively but I have gradually built all that back up over my 2 years at GH. What has happened to me in the past still hinders me now.

Have specialist health and/ or social services been in your life again since you had help as a teenager? How has that been?

No. Because of my age and need of different help I haven't needed them as much anymore.

How far do you feel you've been able to deal with what happened in the past and look to the future?

I think I have dealt fairly well with my past and yeah I have made a few mistakes with self-harm – but nothing major.

Do you or other people consider that your sexual behaviour problems are still a problem?

There have been concerns from me and others about my sexual behaviour. The biggest concern is that I struggle to put limits on my desire to access pornography and chat-lines.

Do you think you've been able to come to terms with your past? (If yes) what has made this possible?

Yes and No. Yes I have in that the past is a lot clearer for me. No because there are still things that could come to light via my mum and dad.

Have your experiences when you were a teenager had a longer term impact on

your life? Are things better, worse or about the same as they were when you were a teenager?

I think a long term impact for jobs and relationships in the future. I regret all my criminal behaviour.

What makes life enjoyable and worthwhile at the moment?

I think what makes my life enjoyable is space and the people around me that give me support.

Has your life turned out as you expected?

Yes because my offences were in relation to my past life.

What would you like to be doing in ten years from now?

10 years from now I would like to have a family and work full-time in a restaurant.

Thinking about messages to pass on to professionals working with young people who are in a similar position to you back then, what did the professionals in your life do right?

The professionals in my life tried their hardest to keep me safe by moving me around in foster care but wherever I was bad things would happen to me or to others.

What was not helpful?

For me at first my mum not knowing or being able to understand the situation I was in with going to custody was unhelpful.

What should they have done differently?

They should have sat my mum down and properly explained it to her in a manner to help her understand.

Finally, what personal qualities and skills did you most appreciate about the professionals who were helpful to you?

Their professionalism and patience. Speaking clearly and explaining things.

Thank-you.

Interview with Child C

Child C is a young man in his twenties who, as a teenager, was discovered to have been sexually abusing others in his family. As a result he was convicted of serious sexual offences; his name was placed on the Sex Offenders Register and, under a Supervision Order with a condition of residence, he was admitted into Glebe House (GH), a therapeutic residential home, where he lived for two years before moving to a flat for a short while, then attending university and finally returning home. The

interview was conducted via e-mail correspondence and telephone conversations.

How well do you think things are going for you overall?

Life at this moment in time is really good and I currently have a very active social life. That's without saying that there haven't been times that are tough since being at GH but this has been your 'normal' life struggles, your usual ups and downs.

What kind of accommodation are you living in now? Do you live on your own?

Currently I am living at home with my parents saving for my own place on which I'm hoping to get a mortgage sorted in the next few months.

What kind of work do you do?

Apart from a month last year when I was made redundant, I have worked continuously since I left university. For me, finding work has not been a problem but I know that others with similar circumstances and convictions sometimes struggle. My approach has been to only apply for posts where disclosure is not required or, if it is, I write a covering letter to explain my situation and the rehabilitation I have been through, hope to get an interview and then explain myself more fully face-to-face if I'm offered one.

I am now an Assistant Brand Manager for a company based in the East of England that has offices in Europe and the US which is providing me with some great opportunities.

How do you spend your free time?

Outside of work I don't really have any spare time. Weekends in the winter are spent playing football for a local team and the summer is spent playing cricket. During the week regular running with my mates is a big part of my evening routines, as well as spending time with friends in the pub, at the cinema etc. The rest of my free time is spent volunteering at the local cricket club as club secretary managing the day-to-day admin for a club that has over 250 members. My work there ranges from player registration, finance, memberships, training & coaching, facilities hire and management and team selection. Keeps me busy!!!

Who are the important people in your life now?

Family play a close part to it but mainly I have a good, close knit group of friends with which I spend quite a lot of time as they are associated with the Football and Cricket clubs that I play for.

Thinking back to when concerns were first raised about your problematic sexual behaviour what happened at that time?

Concerns were first raised by my mum when I was 15, she thought that my behaviour was suspicious and she actually sat me down and confronted me about it. It was at that point that I told her about my sexual behaviour. With her job as a School Nurse she then reported this to Social Services and the rest is history as they say, but looking back fair play to her for doing it.

Can you remember how you felt about these events at the time?

Well, shame and embarrassment about what I had been doing, anger that I had to tell her but also anger with myself for getting caught; how I felt was very self-centred around myself and not the wider outlook.

How did people react and what did people do?

As my behaviour was with people inside the family it split it in two. My parents were great, of course they were angry and upset about it all but that didn't change how they were with me. Other members of my family were harsh and blamed my parents which caused arguments between them but then, on the other side of my family, a lot of them were as supportive as they could be, with grandparents and relatives coming to see me during my time at GH.

Outside of the family no one else knew apart from a few people at school and even they offered as much support they could do at the time; even though my parents told them what happened I still don't think they quite knew the seriousness of it all. Despite that, the fact that they knew my family quite well as my brother and sister had been through the same school, even after I went to GH, they went out of their way to help me to sit my GCSEs; I got 2 B's and 9 C's - not too shabby considering the court cases, leaving home etc. that happened at the time!

Did you have contact with local social workers or probation officers? What were they like?

Once my case started going to court I was then put in contact with a Youth Offending Officer (S) and a Social Worker (K). It was through S that I was put through to GH and it was an area that he pushed hard with. K didn't really come into play until the end of my time at GH; she checked up on me, but she mainly stayed in the background at the start. Towards the end of my time at GH, she became more actively involved and for 6 months after I left. Both of them were fantastic and I couldn't fault them.

How come you were referred to Glebe House?

Due to the serious nature of the offences, the judge was considering imposing a long custodial sentence but because of my parents' attitudes and support plus the work I had already been doing to change, he decided not to. Since then I have often had the question in the back of my head as to whether, if I had come from a different background (I was from a middle class family and supportive home; it was the first and only time I'd been in trouble with the police; my parents had respectable jobs - school nurse and council work - and I had older siblings at Uni) as to whether I would have gone to GH!

What did you think of the staff at Glebe House? Did your time at Glebe House help you?

I thought the staff at GH were great, don't get me wrong there were some that I didn't see eye to eye with for many reasons i.e. personality, the way they approached things and approached me, but even then you were still able to engage and interact with them. There were key figures as there always will be in somewhere like GH. I managed to have a therapist who I could just click with, which was a big help. We could be having

one of our weekly sessions and there were times when the discussions were heated and intense and we would disagree with each other but I could leave that room and know that it stayed in there; 10 minutes later after that session we'd be able to grab a coffee and carry on as normal. I think that's what really helped - I could say things that I knew I wouldn't be judge on to an extent. What also helped was that I'm not stupid and my engagement level with staff reflected that in the fact they engaged and pushed things in a way that challenged my brain. If it had been the case of keeping it simple I would have switched off and paid no interest.

Have there have been significant points in your life that have helped or hindered you to deal with your experiences as a teenager and move on?

The only point that hindered me moving on was the Sexual Offenders Register. Having completed 2 years at GH and then doing A-Levels and heading off to Uni, having to sign the register at the start of every term and when moving house was just a constant reminder of 'yeah you've screwed up' which really does knock your self-esteem and confidence. Additionally, as part of this, having two police officers randomly turning up at your uni flat where your mates are and then having to explain that one is a bit of a tough one! Personally, in my opinion, I felt that the whole process was over the top and unnecessary but then, from my dealings with the police during the whole time from court case to close, that doesn't really surprise me.

Have specialist health and/ or social services been in your life again since you had help as a teenager? How has that been?

The last time I spoke to Social Services was just after I graduated but my whole contact with them was limited as they weren't needed.

How far do you feel you've been able to deal with what happened in the past and look to the future?

For me I have dealt with the behaviour and identified the problems and cause. For me there is no point looking back, heck it happened I screwed up but it's of no gain to anyone, especially those who have helped in my situation, if I don't set my eyes on the future!

Do you or other people consider that your sexual behaviour problems are still a problem?

For me I don't think it's a problem and I feel other people think that way as well.

Do you think you've been able to come to terms with your past? (If yes) what has made this possible?

Yes I have been able to come to terms with it all, but that was only due to having an environment that was open and supportive enough to deal with it. If GH hadn't been suitable or available I do feel the path would have been different and I question as to whether there would have been A-Levels, a degree and a good job afterwards.

Have your experiences when you were a teenager had a longer term impact on your life? Are things better, worse or about the same as they were when you were a teenager?

I don't feel that they have had a long term impact. The things that were important to me then are still the same and as is what I want to achieve, however, on the plus side, they can be approached safe in the fact that the behaviour has been challenged and addressed.

What makes life enjoyable and worthwhile at the moment?

Sport, social life and work make it all worthwhile at the moment; I am at the stage where I have all that I need and can't complain.

Has your life turned out as you expected?

Yeah I'd say it has, probably taken a bit of a different route than planned but where I expected to be.

What would you like to be doing in ten years from now?

In 10 years' time, I will have liked to have worked up the career path still working within marketing but hopefully within the sport industry to combine two passions of mine.

Thinking about messages to pass on to professionals working with young people who are in a similar position to you back then, what did the professionals in your life do right?

Being open is a two-way street, the fact that I felt confident that the person I was speaking to was being honest, truthful and upfront (and man that hurt at times) meant that I felt comfortable to talk openly with them. I struggled in opening up with anything, I just wouldn't talk at all; as my therapist described it at times, she was just looking at a 'crystal ball' as I wouldn't talk, but her openness with me helped to feel comfortable to open up.

What was not helpful?

Don't think you know everything, I feel that assumptions were made at times about myself because of what they read on a piece of paper. I felt that sometimes if they could have spoken to/challenged me it would be more beneficial to all.

What should they have done differently?

As much as the work is aimed at the present and the past, don't forget about the future. That's just as important and being ill-prepared for this is more damaging/worrying. I personally had set goals for what I wanted to do after GH and that meant that I focused and I feel that is what helped me as I was looking past those two years to what I wanted to achieve. Help people to focus on what they can achieve which builds confidence and provides focus. But with all these things what works for me doesn't necessarily work for someone else.

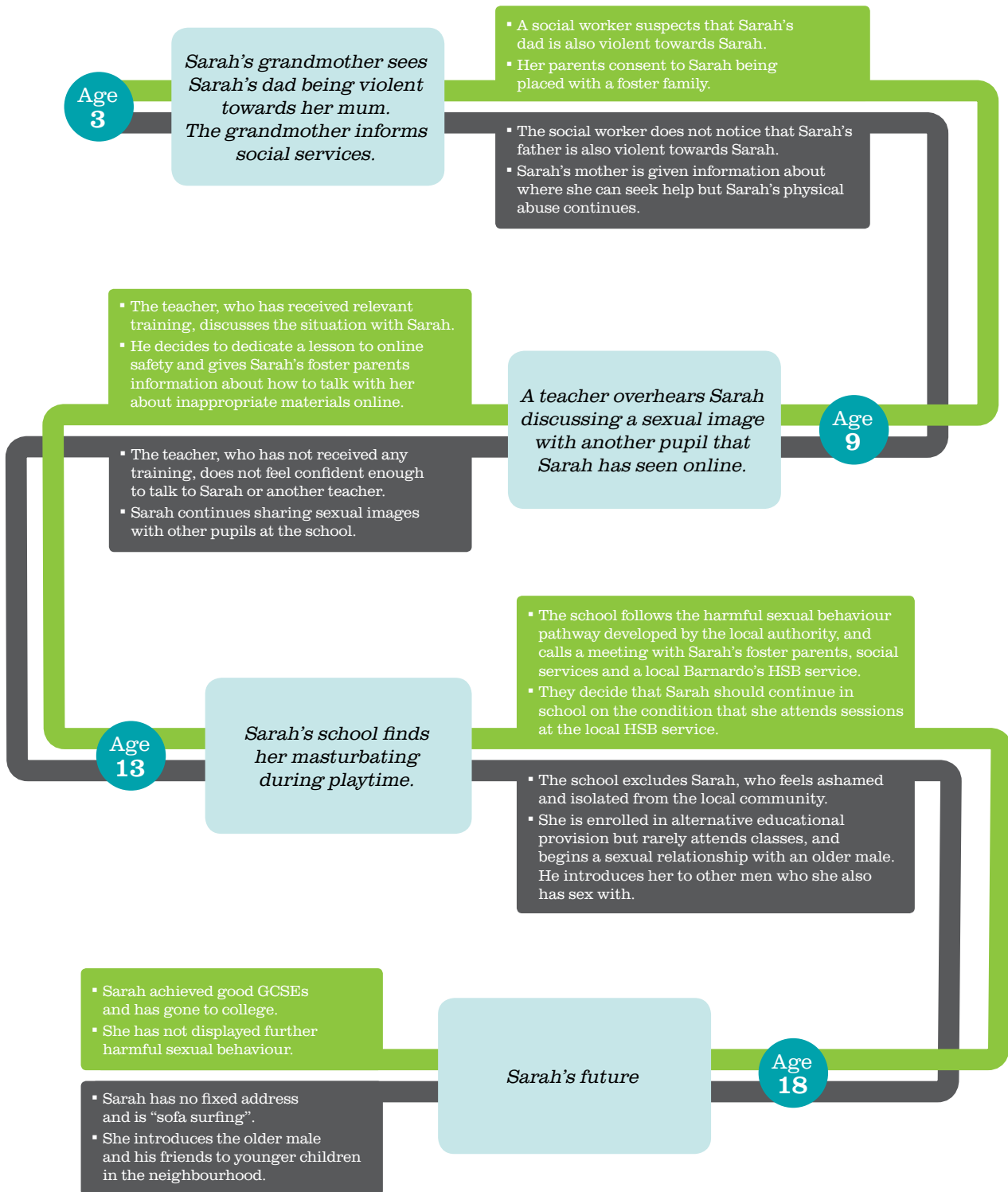
Finally, what personal qualities and skills did you most appreciate about the professionals who were helpful to you?

Patience, honesty and don't be afraid to ask difficult questions.

Thank-you

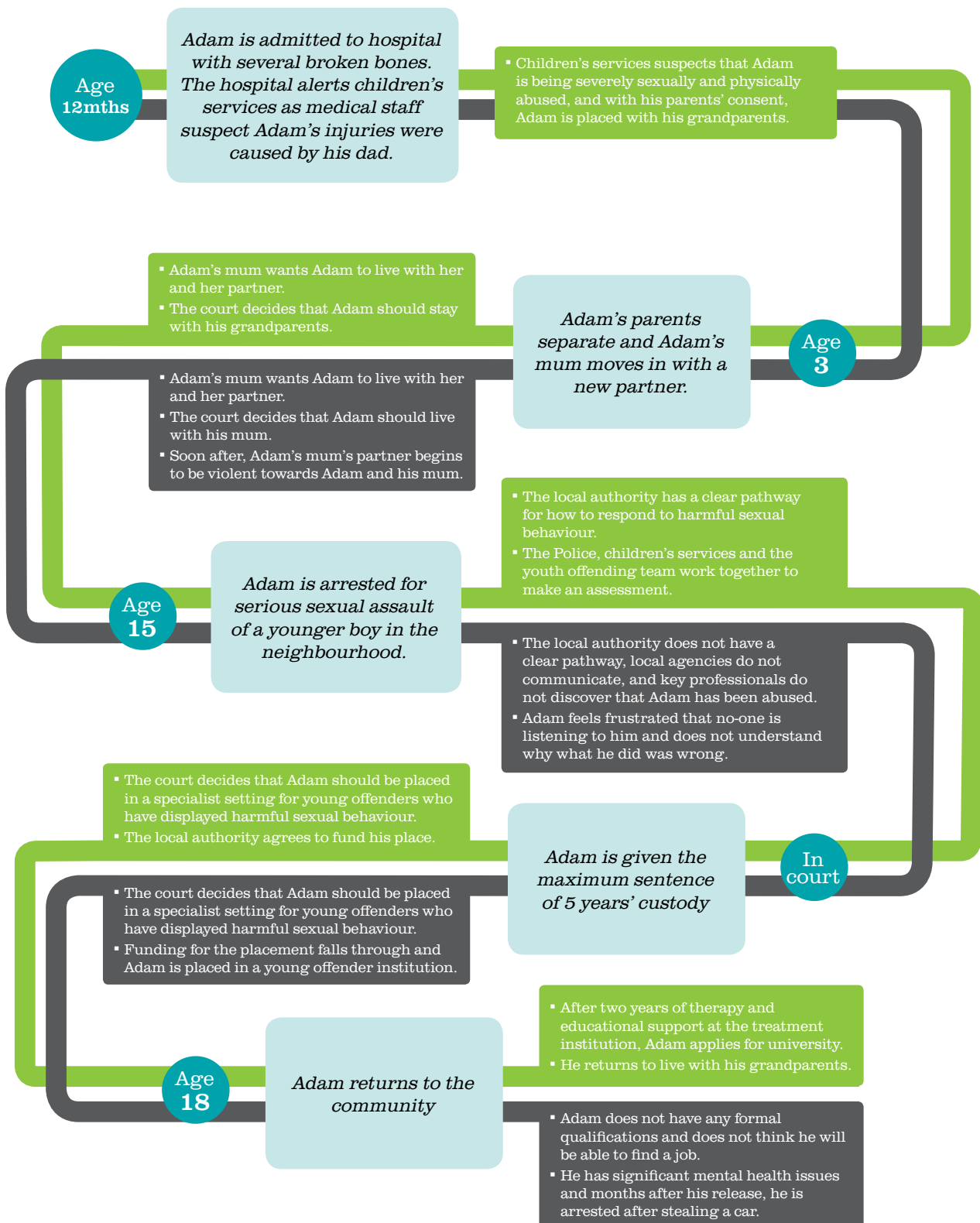
Appendix D: Case studies

Sarah's journey



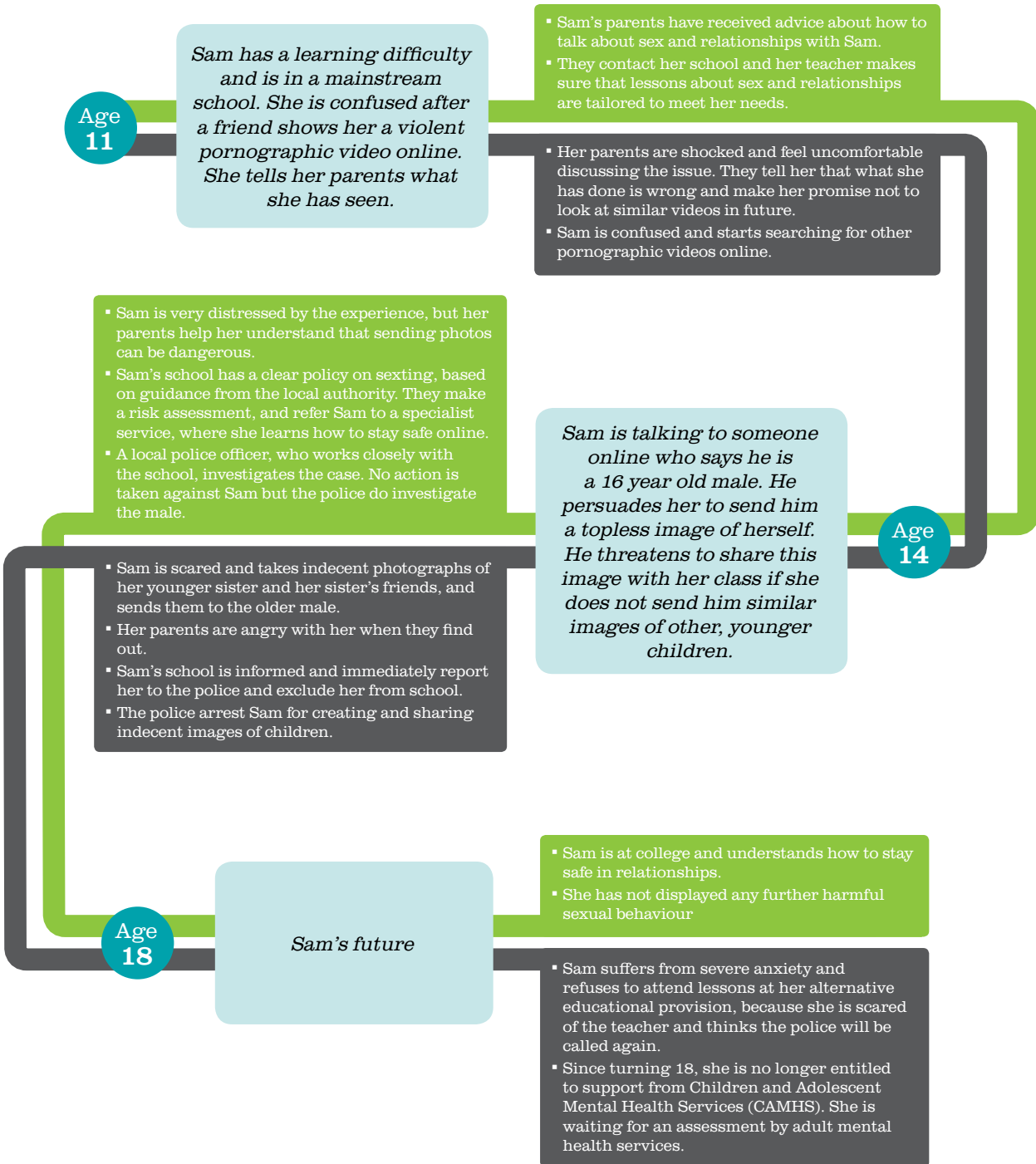
Appendix D: Case studies

Adam's journey



Appendix D: Case studies

Sam's journey



Now I know it was wrong:

Report of the Parliamentary
inquiry into support and
sanctions for children who
display harmful sexual
behaviour

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