Practice guide

Supporting professionals to meet the needs of young people with learning disabilities who experience, or are at risk of, child sexual exploitation

Emilie Smeaton, Anita Franklin and Phil Raws
Partnership for the study

Dr Anita Franklin, Children and Families Research, Coventry University; Phil Raws, The Children’s Society; and Emilie Smeaton, Paradigm Research, undertook all aspects of the research on which this guide is based.

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Emilie Smeaton, Research Director, Paradigm Research. Email: emiliesmeaton@paradigmresearch.co.uk. Tel: 07891 086 147

Dr Anita Franklin, Reader in Children and Families Research, Coventry University. Email: anita.franklin@coventry.ac.uk. Tel: 024 7679 5834

Phil Raws, Senior Researcher, The Children’s Society. Email: phil.raws@childrenssociety.org.uk. Tel: 020 7841 4400
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Introduction to the practice guide
The aim of this practice guide is to provide professionals with learning from an exploratory research study addressing the needs of children and young people with learning disabilities who experience, or are at risk of, child sexual exploitation (CSE). It should be noted that much of the learning included here is applicable to all children and young people who experience, or are at risk of, CSE but that, due to the focus of the research, it is presented in relation to children and young people with learning disabilities, learning difficulties, autistic spectrum conditions (ASC) and attention deficit hyperactivity disorder (ADHD).

The UK-wide research was commissioned by Comic Relief and undertaken by researchers from Coventry University Paradigm Research and The Children’s Society as part of the CSE and Learning Disability Research Consortium that also included Barnardo’s and the British Institute of Learning Disabilities (BILD).

The research aims to increase understanding of how to improve responses to children and young people with learning disabilities who experience, or are at risk of, CSE by identifying what is currently taking place across the UK to meet their needs. The research also aims to provide evidence-based recommendations to support service delivery and inform policy decisions. The research report, executive summary, nation-specific briefings and easy-read version of the executive summary can be found at www.barnardos.org.uk/cse-learning-disabilities

The majority of the learning presented in this practice guide was gathered from specialist CSE professionals – as, in the main, it is predominantly specialist CSE services that presently work to meet the needs of children and young people with learning disabilities who experience, or are at risk of, CSE. However, this guide is aimed at any professional working to meet the needs of this group of children and young people. It will also be of use to professionals who commission and manage services, and presents information that will be helpful for agencies with responsibility for the general welfare of children and young people and their families.

It is recognised that audiences for this practice guide are likely to have different levels of knowledge and experience of working to meet the needs of children and young people with learning disabilities who experience, or are at risk of, CSE. Therefore, no assumptions are made about existing knowledge and the document simply presents the learning gathered throughout the course of the research.

As well as supporting direct practice, the guide includes prompts for reflection and action, which encourage professionals and services to consider what steps are, and can be, taken in the local area to meet the needs of children and young people with learning disabilities who experience, or are at risk of, CSE. Where appropriate, additional information, other than that provided by the research, is presented.
1.1 Explanation of key terms, definitions and approaches

A number of key terms are used in the practice guide. To ensure clarity, the following explanations and definitions are offered:

**Learning disability**

Several definitions of learning disability are used in the UK. The terms ‘learning disabilities’ and ‘learning difficulties’ are often used interchangeably and are subject to continual debate. The commonly used definition from *Valuing People* (Department of Health, 2001)¹ states that a learning disability meets three criteria:

- a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with;
- a reduced ability to cope independently (impaired functioning);
- which started before adulthood, with a lasting effect on development.

Mencap defines a learning disability as follows:

‘A learning disability is a reduced intellectual disability and difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for their whole life.’²

In education settings, the term ‘learning difficulty’ is often used to describe individuals who have specific problems with learning, such as dyslexia or dyspraxia. These young people may not have a significant impairment in intelligence.

The research was guided by the *Valuing People* definition and the social model of disability, which locates disability in the social, cultural, material and attitudinal barriers that exclude people with impairments from mainstream life, as opposed to looking at an individual in terms of ‘deficit’. This model promotes ‘assets’ – what a young person ‘can do’ – instead of focusing on what disabled children ‘cannot do’, and encourages researchers, practitioners and policymakers to view disabled children as being children first.

**Asperger syndrome**

Asperger syndrome is a form of autism and is mostly a ‘hidden disability’. This means that it is not possible to tell that someone has the condition from their outward appearance. People with this condition have difficulties in three main areas: social communication, social interaction and social imagination. While there are similarities with autism, people with Asperger syndrome have fewer

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problems with communication and are often of average, or above average, intelligence. They do not usually have the accompanying learning disabilities that are often associated with autism, but they may have specific learning difficulties. These may include dyslexia and dyspraxia or other conditions such as attention deficit hyperactivity disorder and epilepsy.

### ADHD

The NHS describes ADHD as a group of behavioural symptoms that commonly includes the symptoms of:

- a short attention span or being easily distracted
- restlessness, constant fidgeting or overactivity
- being impulsive.

ADHD is more common in people with learning difficulties but can occur in people of any intellectual ability. Symptoms tend to be first noticed when a child is at an early age and most cases are diagnosed when children are aged between six and 12.

### Autism

Autism is a lifelong developmental disability. It is part of the autistic spectrum and is sometimes referred to as an ASC. The word ‘spectrum’ is used because, while all people with autism share three main areas of difficulty, their condition will affect them in very different ways. Some are able to manage most ‘everyday’ activities; others will require a lifetime of specialist support. The three main areas of difficulty that all people with autism share are sometimes known as the ‘triad of impairments’. They are difficulty with: social communication; social interaction; and social imagination. People with autism can also be over-sensitive or under-sensitive to sensory stimuli including sound, light, touch, colour, smell and taste.

### Inclusion of young people with ASC and/or ADHD in the research

While it is recognised that many young people with ASC and/or ADHD will not have learning disabilities, it became apparent during the recruitment process that CSE practitioners were supporting a significant number of young people with one or both of these conditions. Although some of these young people also had a specific learning disability, others had unmet learning needs that played a part in placing them at risk of CSE or had led to them being sexually exploited. For this reason, these young people were included in the research study and are discussed in the practice guide.

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CSE

In 2008, the National Working Group for sexually exploited children and young people (NWG) developed the following definition of CSE, recognised in English guidance to safeguard children and young people from sexual exploitation (DCSF, 2009):’

‘The sexual exploitation of children and young people under the age of 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive ‘something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child’s immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones with no immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.’

(National Working Group for Sexually Exploited Children and Young People, 2008)

Although recent reports (Berelowitz et al, 2013, 2015; Smeaton, 2013) have highlighted the need for revision of the definition of CSE, the NWG definition is widely used and understood by policymakers and practitioners, and therefore used to frame the research.

It should be noted that CSE can be perpetrated by both adults and peers of the same age as, or slightly older, than the individual being exploited.

Young people

For brevity, the term ‘young people’ is used to describe children and young people with learning disabilities who experience, or are at risk of, CSE while under the age of 18.

4 The UK National Working Group for Sexually Exploited Children and Young People is now called the NWG Network and is a charitable organisation linking practitioners, policymakers and researchers working with CSE across the UK.
8 Berelowitz, S; Ritchie, G; Edwards, G; Gulyurtlu, S; Clifton, J (2015) “If it’s not better, it’s not the end”: Inquiry into child sexual exploitation in gangs and groups: One year on. Office of the Children’s Commissioner, London
1.2 Structure of the practice guide

The guide is structured as follows:

- Section 2 provides background information for professionals relating to working to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE.

- Section 3 presents learning relating to approaches to effectively engage with and support young people with learning disabilities who experience, or are at risk of, CSE.

- Section 4 outlines research findings relating to approaches to interventions to meet the needs of this group of young people.

- Section 5 covers work with parents and carers.

- Section 6 offers resources to support work with young people with learning disabilities who experience, or are at risk of, CSE.
2

Background information
This section of the practice guide provides background information to support professionals working with young people who experience, or are at risk of, CSE and includes:

- recognising the vulnerability of young people with learning disabilities to CSE
- capacity to consent to a sexual relationship
- the prevalence of young people with learning disabilities who experience, or are at risk of, CSE
- diversity issues
- training for professionals.

2.1 Recognising vulnerability to CSE

There is evidence from the research to suggest that young people with learning disabilities are more vulnerable to CSE than their non-disabled peers. The reasons for this are multifaceted and complex. All of the following elements are identified by the research as contributing to this increased vulnerability:

- impairment-related factors, including capacity to consent to sexual activity, lack of cognitive ability to recognise exploitation or risk, impulsive behaviours and needs associated with a different understanding of social interaction and communication
- societal treatment of young people with learning disabilities, including overprotection, disempowerment, isolation and not seeing them as sexual beings, leading to little attention being given to informing them about healthy, sexual relationships
- a lack of knowledge, understanding and awareness of the sexual exploitation of young people with learning disabilities among professionals, parents and carers and the wider community
- the lack of training received by professionals addressing CSE and learning disabilities
- the low priority generally given to young people with learning disabilities by service providers.

10 The policy context in the four nations of the UK for young people with learning disabilities is presented in detail in the full research report. However, in recognition of the fact that knowledge of the policy context can beneficially inform practitioners' work to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE, a summary of the policy context is included in Appendix one.

11 These elements are discussed in more detail in the report presenting the research findings.
Opportunities for reflection and action

What is the extent of your knowledge of the vulnerability of young people with learning disabilities to CSE?

What steps could be taken to improve this knowledge?

Has your service considered the impact of social isolation and disempowerment and how this places young people with learning disabilities at risk of CSE?

2.2 Assessing capacity to consent to a sexual relationship

The experiences of specialist CSE professionals who participated in the research reveal that there can be issues relating to assessing the capacity of young people with learning disabilities to consent to a sexual relationship. These issues include:

- the effectiveness of the process of assessing a young person’s capacity to consent to a sexual relationship, especially where professionals making the assessment have little understanding of CSE and/or learning disabilities
- concerns about young people aged 18 and over with learning disabilities, and their capacity to consent to a sexual relationship
- agencies’ responses to these young people
- the lack of support for young people aged 18 and over who are vulnerable to sexual exploitation.

There are differences between the relevant legislation in each of the four UK nations relating to capacity to consent to a sexual relationship, and it is beyond the scope of this practice guide to address this issue in detail. However, to support practitioners to understand and assess capacity to consent to a sexual relationship, learning has been drawn from an illustrated pack\(^{12}\) designed to explore sexual and social understanding with people with learning disabilities (Dodd et al, 2015).\(^{13}\) In accordance with current case law, the process of judging capacity to consent to a sexual relationship is act-specific and not decision-specific, which means that, to have capacity to consent to have sex, a person only needs to have an understanding and awareness of:

\(^{12}\) This pack is discussed in more detail in Appendix three.

the mechanics of the act
that there are health risks involved, particularly the acquisition of sexually transmitted and sexually transmissible infections
the fact that sex between a man and a woman may result in the woman becoming pregnant (this last criterion does not apply if the person is homosexual).

In addition to the above, a fourth principle has been outlined by case law:
that the person concerned has given consent.

The pack notes the importance of recognising that a person’s capacity may vary over time. Assessment of incapacity should not be presumed to be held for future decisions, as temporary factors such as acute illness and distress caused by acute mental health or bereavement may affect capacity to consent. In such circumstances, the pack advises that consideration is given to assessment of capacity being made until a point when the person has recovered.

In relation to CSE, even if a young person has capacity to consent to a sexual relationship, the sexual act or relationship may still not be consensual. In addition, young people can be coerced or manipulated to give consent. A young person cannot consent to their own abuse.

**Opportunities for reflection and action**

Do issues relating to young people’s capacity to consent to sexual relationships feature in your work with young people with learning disabilities who experience, or are at risk of, CSE? If so, what steps can be taken to address these issues?

Does your work with young people with learning disabilities include supporting them to understand giving, seeking and receiving consent?

Does this work form part of their support plan?

Is this work included as part of their transition planning and preparation for adulthood?

**2.3 Prevalence**

There is limited statistical evidence of the prevalence of CSE in general in the UK. A number of factors make it difficult to estimate the prevalence of CSE, including:

the majority of sexually exploited young people being hidden from public view and encouraged by perpetrators to be secretive about their meetings and activities
young people not identifying as being sexually exploited and therefore not seeking support

- professionals’ lack of awareness of the indicators of CSE leading to lack of recognition and recording of sexual exploitation at a local level.

Providing estimates of numbers of young people with learning disabilities who experience, or are at risk of, CSE is particularly problematic given the wider problems of establishing the prevalence of CSE and the lack of data collected about young people with learning disabilities who experience, or are at risk of, CSE.

The research that provides the learning for this practice guide was not able to establish the prevalence of sexual exploitation of young people with learning disabilities for the reasons previously specified. However, professionals working in specialist CSE services who contributed to the research estimated that between 10 per cent and just over 50 per cent of the young people they worked with had either a diagnosed or undiagnosed learning disability. This and previous research findings\textsuperscript{14,15} indicate that, despite the challenges to identifying prevalence, specialist CSE services work with a significant number of young people with learning disabilities who experience, or are at risk of, CSE.

Opportunities for reflection and action

Is information collected in your local area relating to numbers of young people with learning disabilities who experience, or are at risk of, CSE?

Is there any multi-agency working across specialist CSE services and specialist learning disability services to identify these young people?

What proportions of the young people your service works with are young people with learning disabilities who experience, or are at risk of, CSE?

What steps does your service take to record information about these young people?

2.4 Diversity issues

There is currently limited evidence concerning diversity issues, however the following are important to consider:

\textsuperscript{14} Jago, S; Arocha, L; Brodie, I; Melrose, M; Pearce, J; Warrington, C (2011) What’s going on to safeguard children and young people from sexual exploitation? How local partnerships respond to child sexual exploitation. University of Bedfordshire, Luton.

Gender

The research confirms that many specialist CSE services work with more girls and young women than boys and young men. Professionals who took part in interviews described challenges in gaining referrals for boys and young men due to the general lack of understanding that young males with learning disabilities can be at risk of CSE.

While girls and young women are more likely to be referred in general to specialist CSE services than boys and young men, there is some evidence (Cockbain et al, 2014)\(^{16}\) that boys and young men with disabilities are more likely to be referred for support to address CSE than girls and young women with disabilities. Comparative analysis of services users supported by Barnardo’s revealed that 35 per cent of boys and young men were identified as having a disability compared with 13 per cent of girls and young women. While the focus of this research was on disabilities in general, boys and young men were most commonly reported to have learning disabilities, behaviour-based disabilities and autistic spectrum conditions (ASC).\(^{17}\) The research that provides the learning for this practice guide found a reported perception that ASC predominantly affects males, which can lead to the needs of girls and young women with ASC being overlooked. This suggests that referral agencies and specialist CSE services should ensure that girls and young women with ASC are considered in relation to identification and response.

Sexual orientation and gender identity

Many specialist CSE services reported witnessing increases in young people experiencing issues relating to sexual orientation. When this relates to a young person with a learning disability, their sexuality and gender identity issues can become the main focus of agencies’ and professionals’ concerns and may lead to a failure to meet other needs. In general, there is a requirement for improved responses to young people with learning disabilities concerning their sexual orientation, and sexual or gender identity, that includes consideration of other needs.

Accessible information and support relating to sexual orientation and sexual or gender identity should be provided for young people with learning disabilities, as a lack of these resources can increase the vulnerability of this group of young people to CSE.

Young people from black and minority ethnic communities

The research reveals that specialist CSE services receive few referrals for young people with learning disabilities from black and minority ethnic communities and there is a general concern that these young people remain hidden and

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16 Cockbain, E; Brayley, H; Ashby, M (2014) *Not just a girl thing: A large-scale comparison of male and female users of child sexual exploitation services in the UK*. Barnardo’s, London.

17 Ibid.
vulnerable. To better meet the needs of these individuals, it is necessary to work with black and minority ethnic communities to raise awareness of CSE and the vulnerability of young people with learning disabilities to this form of abuse, thereby increasing referrals from these communities to specialist CSE services.

**Opportunities for reflection and action**

How are diversity issues addressed within any mapping activity undertaken in your local area?

What steps are taken in the local area to prevent the sexual exploitation of boys and young men with learning disabilities? Are these steps adequate? If not, what needs to take place to improve prevention?

What steps are taken in the local area to identify boys and young men with learning disabilities who experience, or are at risk of, CSE? Are these steps adequate? If not, what needs to take place to improve identification?

If your service works to address CSE, how can it promote increased referrals for boys and young men?

If your service works to address CSE, how can it ensure that girls and young women with learning disabilities and/or ASC are identified and referred for support?

How do you and your service support young people with learning disabilities who experience issues relating to sexual orientation? Are communication and learning needs considered in this response?

What steps are taken to ensure provision of accessible information and support for young people with learning disabilities who have needs relating to sexual orientation and sexual or gender identity?

Do service referrals for black and minority ethnic young people reflect the black and minority ethnic communities in the local area? If not, what are the potential barriers to referral for these young people and what steps can be taken to address these barriers?

What steps are taken to raise awareness of CSE and the vulnerability of young people with learning disabilities within local black and minority ethnic communities?

What other national or local organisations could offer support and resources relating to black and minority ethnic young people with learning disabilities?
2.5 Training

The research highlights the lack of training for professionals relating to CSE and learning disabilities. This learning is important as professionals’ lack of knowledge about CSE can undermine progress to improve protection of young people with learning disabilities. Similarly, lack of knowledge about learning disabilities can reduce the effectiveness of support to address CSE. There is evidence-based learning for the following recommendations in relation to training:

1. Induction for professionals whose work involves young people and families should be augmented with topics on learning disability and CSE.

2. Improved multi-agency training on both CSE and learning disabilities should be incorporated into existing training delivered at a local level to all professionals whose work includes responsibility for the safety and welfare of children.

3. CSE awareness training should be provided for workers who have regular contact with young people with learning disabilities and their families (including personal care assistants, staff in special schools, volunteers, residential school and care staff, and medical care staff).

4. Applied learning disabilities training should be made available to specialist CSE professionals who work with young people, with the aim of enhancing knowledge and skills to meet the needs of young people with learning disabilities.

An example of positive practice in relation to training is a reciprocal arrangement whereby a specialist CSE service provides CSE training for a learning disabilities project which, in turn, provides training on learning disabilities.

Opportunities for reflection and action

Are topics relating to CSE and learning disabilities included in your service’s induction for new staff?

Are CSE and learning disabilities incorporated into existing local multi-agency training for professionals? If not, what steps could be taken to ensure this happens?

Are there opportunities for specialist CSE services and specialist learning disability services to work together and support each other’s training needs?
Research findings relating to approaches to effectively engage with and support young people with learning disabilities who experience, or are at risk of, child sexual exploitation (CSE)
Both the preliminary work prior to engaging with young people with learning disabilities who experience, or are at risk of, CSE and the general, initial approach undertaken with them is crucial to successfully engaging a young person and ensuring their participation with support services to meet their needs. The research findings do not support any particular model of practice with young people with learning disabilities who experience, or are at risk of, CSE, and highlighted how specialist CSE professionals often tailor their approach to work with a young person based on the needs of the individual.

The information presented in this section of the practice guide therefore offers learning from the research that supports the building of foundations to support young people with learning disabilities who experience, or are at risk of, CSE and meet their needs.

3.1 Recognising the challenging and complex nature of work to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE

While supporting young people with learning disabilities who experience, or are at risk of, CSE can be immensely rewarding and enjoyable, work to address CSE can be complex, due to CSE-affected young people often experiencing multiple issues. Professionals who contributed to the research described how the particularly complex nature of working with these young people needs to be acknowledged, especially in terms of developing strategies to address actual or potential challenges.

Achieving a balance between child protection and children’s rights

Professionals also described how supporting these young people can be a balancing act between protection and child-centred working:

‘There’s got to be a balance between protection and involving the young person in the process, taking into consideration the level of disability, the level of understanding and the level of choice. It’s complex in a generic CSE world, but even more complex in a learning disabilities world.’

(Specialist CSE professional)

There can be a tension between protecting young people from others seeking to harm them and ensuring young people with learning disabilities have the right to experiment with the social world, make mistakes and have sexual relationships. This balance requires due consideration on an individual basis.
Lack of pre-existing assessment of a young person’s learning disability

A key problem highlighted by specialist CSE professionals is the lack of identification of a young person’s learning needs at referral, or an incorrect diagnosis or assessment. As work continues with the young person, it may become apparent that they have some form of learning disability that requires assessment and diagnosis. Rochdale Borough Safeguarding Children Board’s Serious Case Review (2013)\(^\text{18}\) notes the importance of assessing and diagnosing young people’s learning disabilities or difficulties due to the role they play in affecting how agencies: intervene with a young person; assess capacity to consent to sexual activity; and enable access to specialist services.

To add to the difficulties in gaining an assessment of a young person’s learning disability and the general complex nature of working with this group of young people, there may also be a crossover between symptoms of trauma and identification of learning disabilities. Professionals who participated in the research described how learning disabilities can sometimes be hidden due to difficulties faced by young people, including childhood abuse, and how the resulting emotional and behavioural difficulties may mask their learning disability. This is sometimes referred to as ‘diagnostic overshadowing’.

Conversely, some young people are diagnosed with a medical condition or learning disability when childhood abuse has resulted in them missing developmental milestones, experiencing difficulties with empathy, having impaired cognition or experiencing easily triggered fight-or-flight responses. In some instances, the crossover of presentation and symptoms of experiential trauma and learning disabilities can result in diagnosis not being clear – which, in turn, results in care plans that are not targeted to meet young people’s needs as effectively as they should be.

Difficulties in supporting young people to recognise that they have experienced, or are at risk of, sexual exploitation

Many young people do not recognise that they are being sexually exploited or are at risk. Interviews with specialist CSE professionals revealed that the lack of recognition of sexual exploitation can be intensified for young people with learning disabilities, adding an additional layer of complexity to the work. When young people do not recognise that they have been sexually exploited, they are not able to understand why they have certain emotional and physical responses and associated problems; there is enhanced potential for this among some young people with learning disabilities:

‘Some don’t have the cognitive ability to ever understand what it is that has happened to them in the way that other young people might.’

(Specialist CSE professional)

Misha’s experiences illustrate how someone with high-functioning Asperger syndrome may have difficulty understanding that they have been sexually exploited, due to the lack of social imagination associated with autism, which prevents them from imagining that what they have learnt applies to them:

Misha, aged 15, was referred to a specialist CSE service after peers reported concerns about her to teachers and the school instigated a police and social care investigation. Misha knows that she was referred to the specialist CSE service because of these concerns. However, despite thorough investigation to assess her risk of sexual exploitation and Misha having one-to-one sessions with her CSE project worker, Misha refuses to believe she was being groomed. She does not feel that she should be at the specialist CSE service.

Some young people recognise that they initially struggled to understand or accept that they were being, or were at risk of being, sexually exploited because they:

- did not have self-respect
- thought they were in a loving relationship
- wanted a relationship but thought they would not find someone because of their impairment.

Some young people who participated in the research continued to be sexually exploited, or be at risk of this, for some time while being supported by a specialist CSE service. This can be challenging for professionals who work to protect the young person from harm at a point when the individual has not accepted that what is happening to them is harmful.

**Young people’s learning disability affecting them from transferring experiences and learning**

Specialist CSE professionals who took part in research interviews also described challenges in moving casework forward with some young people with learning disabilities because they are not always able to retain and transfer their experiences or learning to other situations. As a consequence, it can be unrealistic to expect them to remember general ideas about what is ‘risky’ or ‘unsafe’, even when they have already had a bad experience:

‘We want a young person to get to the stage where they know what is a positive relationship and what isn’t, [...] be able to recognise risk and be able to recognise this is not ok, or I’m not happy in this situation. And then know it’s ok and that it’s not their fault – and to know when to go for help. That’s
the basic message we want for each young person [...] but it’s a very difficult message to get across to some of the young people with learning disabilities – it has to be a more basic message.’

(Specialist CSE professional)

Opportunities for reflection and action

In your experience, what are the challenges in meeting the needs of young people with learning disabilities who experience, or are at risk of, CSE? What strategies have been identified to meet actual or potential challenges?

What steps does your service take to achieve a balance between child protection and children’s rights?

What options are available to your service when there is a lack of identification of a young person’s learning needs at referral or an incorrect diagnosis or assessment? How can young people’s needs be met in such instances?

What options are available when there is diagnostic overshadowing?

What strategies can be put in place when a young person with learning disabilities is not able to recognise that they have experienced, or are at risk of, CSE? How can risk be reduced for these young people? Can third-party work/scenarios or role-play support this process?

When young people with learning disabilities are not able to transfer experiences and learning, are there some basic messages or specific social rules that can help them to understand risk and exploitation?

3.2 Ensuring long-term support

Research findings highlight how effective work with young people with learning disabilities who experience, or are at risk of, CSE can be underpinned by providing an open-ended timeframe. Achieving positive outcomes to meet young people’s needs can be a lengthy process but is necessary, despite being at odds with child protection timescales and the amount of time for which many social workers are expected to work with young people to close their case. Specialist CSE services reported sometimes receiving referrals relating to a young person with a learning disability with the request that they provide a ‘quick fix’ response that is not viable and does not meet the young person’s needs. Working in a time-limited manner is challenging with all young people who experience, or are at risk of, CSE, but is particularly so where young people with learning disabilities are concerned.
Opportunities for reflection and action

Is there understanding in your local area among commissioners and referral agencies of the need to work with young people with learning disabilities in a manner that is not time-limited and is led by the young person’s needs? Could more be done to develop a shared understanding?

3.3 Recognising the needs of individual young people with learning disabilities

The research reveals how responses to young people with learning disabilities who experience, or are at risk of, CSE should focus on meeting individual needs. Research findings repeatedly reiterate the importance of not treating all young people in the same way because they share an impairment label. The spectrum of learning disabilities and ASC, for example, means that young people can have different needs and experience the world in very different ways.

Approaches to interventions should therefore ensure the needs of individual young people are considered. To meet individual needs, the information that is gathered about each young person should include the nature of their learning disability, their set of circumstances, and their experience, or risk of, sexual exploitation.

It is necessary to consider the impact of a young person's learning disability when assessing their needs and designing a needs-based response to support them effectively:

‘It’s crucial at the early stage to consider the individual young person’s learning disability because if you don’t address that then and get that level of understanding of what their understanding is and how they make sense of the world, you could easily lose them.’

(Specialist learning disability professional)

This may require some ‘fact-finding’ about the nature of the young person’s learning disability and how it affects them.

Some disability professionals highlighted how young people with ASC, with or without accompanying learning disabilities, may not appear to have particular needs around sexual exploitation, but their difficulty in understanding social communication, social interaction and the social world can make them vulnerable.

When working with young people with ASC, meeting their individual needs often involves providing a context for rules to address their lack of imagination and prevent them viewing sexual exploitation, grooming or risk, for example, as not applying to them.
Drawing on young people’s experiences of autism, the research highlights the importance of ensuring that work with young people is presented in an accessible and meaningful way. In relation to young people who take things literally, information needs to be communicated to account for a literal interpretation.

**Ensuring specialist CSE professionals have a good understanding of working with young people with learning disabilities**

Young people’s contributions to the research reveal that it is necessary for specialist CSE professionals to have a good understanding of working with young people with learning disabilities. This can bring extensive benefits to work with young people:

‘[My CSE support worker] understands that my brain is different to other people’s. She knows that when I say things that people think are rude that I’m not meaning to be rude. She gets that I take everything literally. She knows that I can find social situations difficult and that I’m better on a one-to-one basis.’

(Tom, aged 15)

‘[My CSE support worker] was really good at understanding how it is for someone who is ADHD. […] It was like she had found out about it before she met me. […] She got that I’m not good with written words and all that and made sure she didn’t give me loads of written stuff to look at. […] She got that I get anxious really easily and always came up with ways to calm me down. […] It’s like sometimes she realised before I did that I was getting anxious and suggested we do something so that I didn’t get too hyper.’

(Megan, aged 16)

**Seeking additional support from specialist services**

The research reveals how specialist CSE projects may consider that it is appropriate to bring in services with different expertise to work with a young person to meet their needs effectively. This could be to provide additional intensive support relating to, for example: mental health issues; substance misuse issues; acting as a young carer; careers; employment; housing; or so the young person can access purposeful social activities.

In some instances, a good relationship between the young person and a professional can help the young person to receive additional specialist support to meet their needs. The example below illustrates a young person’s perspective of being supported by a specialist CSE service:
Sarah was referred to a specialist trauma centre because of the extent of trauma she experienced through sexual exploitation. She attended the trauma centre a couple of times but then stopped going. Her CSE project support worker explored why Sarah had stopped attending and two problems emerged: firstly, it was difficult for Sarah’s mother to physically get Sarah to the trauma centre and, secondly, there were communication problems between Sarah and the trauma specialist. Sarah did not always understand what the trauma specialist was saying and found it difficult to concentrate, and the trauma specialist did not understand how best to communicate with Sarah. The project support worker therefore suggested that she take Sarah to the trauma centre and sit in sessions with her. The project support worker now acts as an ‘interpreter’ between Sarah and the trauma specialist when required. This has meant that it is possible for Sarah to receive a service that is crucial for her and that she now benefits from.

Opportunities for reflection and action

What is the process for assessing young people’s individual needs? What information is collected to assess need? What steps are taken to assess the impact of a young person’s learning disability to gain understanding of their view of the world?

When working with young people with ASC, how do you ensure that work is communicated in an accessible and meaningful way that accounts for a literal interpretation?

What options are available in your local area to bring in additional specialist support services to meet young people’s needs? How can existing good relationships between young people and support workers help young people to receive additional support?

Are disability services represented on multi-agency CSE operational forums to ensure specialist input into responses to young people with learning disabilities?

3.4 Meeting communication and learning needs

Research findings emphasise how understanding a young person’s communication needs is one of the key foundations for supporting young people with learning disabilities who experience, or are at risk of, CSE.19

19 Appendix two provides additional information about communicating with young people with learning disabilities.
‘If a child cannot communicate their feelings and anxieties to people, then very often these feelings, anxieties and fears go internal and can show themselves through a child’s moods and behaviours. [...] It is about giving [young people] the understanding, knowledge, and vocabulary to be able to communicate concerns or explore them further and them having a range of options through which they can do this and then opportunities for seeking help.’

(Specialist learning disability professional)

It is important to ask young people, their parents and carers and other professionals who are familiar with the young person about what works best for that individual in relation to communication, understanding and learning. This should include enquiring how they communicate their emotions and feelings when, for example, they are happy, sad or in distress.

It is also necessary to listen to and work hard to understand young people who may have difficulties with communication. Young people appreciate the benefits when a professional is able to understand their communication:

‘Even if I don’t say something right, she still understands what I’m meaning.’

(Charlotte, aged 15)

To support young people’s understanding, information should be broken into smaller parts and understanding checked frequently:

‘[My project support worker] doesn’t bombard me with lots of information but concentrates on one thing at a time, which really helps me. She really thinks about how she says things to me so that it makes sense to me and I understand what she means.’

(Tom, aged 15)

Some young people with learning disabilities may say that they understand something when they do not and it is important to work with this and not assume that they have understood information or an issue:

“They’re like: “Yeah, yeah, yeah,” and I’ve thought [in the past]: “Oh, they understand; that’s great,” but now I know when they have said: “Yeah,” I need to check out that they do understand. It’s saying: “Can you tell me what you understand; tell me back what I’ve just told you in your own words,” – that sort of thing – to make sure they do understand. And then they say: “I dunno,” [when asked to repeat in their own words what they have understood] and I’m like: “That’s fine,” and I go through it again.’

(Specialist CSE professional)

The importance of repetition and regular review is emphasised as being helpful in meeting the needs of young people with learning disabilities:
‘That’s really important: to be able to support young people, especially those with learning disabilities, in reflecting and thinking through what’s being discussed, to embed it because it can take longer.’

(Specialist CSE professional)

To support a young person’s understanding, it may be necessary to explain the same point in different ways and to be prepared to repeat this information until they are able to understand it. Young people reported the importance of professionals being able to communicate with ease in this way:

‘If I don’t understand her she doesn’t mind if I ask her to repeat it again.’

(Emma, aged 18)

The need to work in this way reinforces the importance of professionals being able to create a relationship and communication exchange whereby young people feel able to ask for something to be repeated.

**Opportunities for reflection and action**

What steps are taken to understand a young person’s communication needs? Are young people, their parents and carers and other professionals involved in this process?

How can information shared with young people be broken down into smaller sections? What process do you use for checking young people’s understanding?

How is repetition and review used in your work with young people with learning disabilities?

### 3.5 Building good relationships based on trust

The research findings emphasise how taking time to get to know the young person and building a good working relationship based on trust is intrinsic to meeting the needs of young people with learning disabilities who experience, or are at risk of, CSE. Forming good relationships with young people’s key workers and parents or carers also plays an important part in meeting these young people’s needs.

From the perspective of young people who contributed to the research, the relationship they have with their project support worker is of paramount importance. Support workers developing relationships based on trust with young people in supportive environments enables young people to explore and
address often challenging issues. This, in turn, enables them to move forward with their lives. Young people described trusting relationships in terms of:

- being listened to
- not being judged
- being given time
- feeling that project support workers are there for them
- having someone to talk to
- feeling cared for.

Being transparent and consistent about limits to confidentiality and remaining persistent with ‘hard to reach’ individuals also helps to gain young people’s trust.

Building relationships based on trust can play a part in the ongoing protection of young people. Young people who participated in interviews stated that they would turn to those with whom they have relationships based on trust if they had any concerns or worries. However, it should be noted that young people may report worries or concerns in the third person, even to professionals they trust, as it may be easier for them to do so in this way:

'I would tell her but I wouldn’t say it was about me. [...] I’d pretend it was about a friend and she’d give me advice.'

(Emma, aged 18)

**Opportunities for reflection and action**

What, in your experience, works well with building relationships based on trust with young people, their parents and carers and key workers?

What hinders building trust with young people with learning disabilities?

Is there scope to address any barriers to building trust?

### 3.6 Supporting disclosure of CSE

It can be very difficult for any young person to disclose CSE, as this often leads to a sequence of events that entails them having to talk to a number of different professionals and answer numerous questions about sensitive matters. The research revealed how this can be particularly challenging for young people with learning disabilities, who may find it difficult to process and respond to so many questions. Young people described having to state what has happened to them in police interviews, for example, as exceptionally difficult.
Young people with learning disabilities recommend that questions are broken down into single items so they can make sense of them. Registered intermediaries can play an important part in supporting them, and advising police on how to conduct interviews with young people with learning disabilities. The difficulties of the aftermath of making a disclosure can be reduced by ensuring young people are supported effectively through the whole process by a professional with whom they have a relationship based on trust who is aware of the young person's impairment and communication needs.

It can take a long time working with a young person before a disclosure takes place. Disclosure is more likely to take place when a professional has proven to be trustworthy, patient and not judgemental of the young person and their actions and experiences:

> ‘She was really nice and she made me feel like she didn’t think anything bad about me. She wasn’t telling me that I was doing something wrong all the time like everybody else was. She listened to me. She made me feel like I was important.’

(Sian, aged 20)

In some cases, disclosure can take place through third-party work. For example, one young person made a disclosure about his sexual relationship with a 37-year-old male when working with scenario cards telling the story of an adult male who sexually exploits young people:

> ‘In this story, the kid meets an older male on the internet, and I said to my project worker: “That’s how I met my boyfriend”. The project worker said that she didn’t know I had a boyfriend and asked how long I’d been with my boyfriend. I said I didn’t know but that I thought it was for nearly two years. She then showed me some other cards and asked me if my boyfriend had done any of the things on the cards. He had done some of them so I told her that.’

(Tom, aged 15)

It may be necessary to offer alternative ways to make a disclosure. Some young people with learning disabilities who contributed to the research identified that it helped to write down what happened to them; however, it is also recognised that this may not be appropriate for all young people with learning disabilities.

**The importance of a positive response when a young person discloses sexual exploitation**

Young people’s contributions to the research reveal how some individuals are not believed or listened to when they first disclose CSE. This can be very distressing for them. It is clearly important that young people receive an appropriate and positive response when they disclose CSE or risk, and it is evident that this initial reaction can be very important:
'She was really nice, too. [...] She didn’t judge me. [...] She listened to me. [...] I trusted her too.'

(Zoe, aged 19)

There are a number of positive outcomes that stem from professionals responding well to disclosures. These include:

- young people feeling relieved
- young people becoming aware that it is safe to tell others what is happening to them, enabling responses to be put in place to meet their needs
- reducing young people’s risk of CSE.

**Reasons why young people with learning disabilities do not disclose sexual exploitation**

Young people who contributed to the research reported that they did not disclose sexual exploitation or grooming because they did not know that it is illegal for an adult to have sex with a young person under the age of 16, or because they were told not to tell anyone what was happening by the perpetrator of CSE:

‘He told me not to tell anyone that we were together because they would stop us being together. [...] ‘Cos of my autism, I often take things literally so if someone says to me to do something or not to do something, I will do it in the way they tell me.’

(Sian, aged 20)

Some young people with learning disabilities did not disclose sexual exploitation because nobody asked them about their sexual relationships or if they were at risk. Some did not tell anyone because they were concerned about consequences. For some young people, there was no available appropriate person to talk to whom they trusted and believed would listen to and believe them. While some young people who took part in interviews had professionals whose role it was to support them, the nature of the relationship between the professional and the young person sometimes hindered disclosure:

‘I didn’t really get on with my social worker. [...] She was alright and everything, but I didn’t know her; I didn’t trust her. She wasn’t the kind of person you talk to about sex and boyfriends.’

(Sian, aged 20)
Opportunities for reflection and action:

What, in your experience, supports young people to disclose CSE, grooming or engagement in risky activities?

What hinders disclosure? Can these barriers be addressed in any way to enable young people with learning disabilities to disclose CSE, grooming or engagement in risky activities?

What support is put in place for young people with learning disabilities once they have made a disclosure? Does some of this support come from a professional who is trusted by the young person and is familiar with their impairment and communication needs?

3.7 Planning sessions

The research findings include the necessity of paying particular attention to planning a session addressing CSE with a young person with learning disabilities and ensuring it is tailored to meet their needs effectively. This requires particular consideration of what resources would meet the young person’s communication needs, way of learning and level of understanding.

It is also important to create the right space for work with young people with learning disabilities. This may include ensuring all work takes place at the same time, in the same room and in the same venue.

It may also be relevant to consider a young person’s hypersensitivity to light, touch and smell. Planning a session could include addressing their anxiety or unease before starting a session. As described in section 6, providing ‘toys’ or ‘gadgets’ to fiddle with can alleviate a young person’s anxiety. These toys and gadgets may also help with focus. Playing a game with the young person at the start of the session can help them to relax.

Planning sessions should also allow for breaking information down into smaller sections and allowing for repetition and review. Some young people’s progress can be supported by provision of shorter sessions on a more frequent basis – so, for example, instead of providing one session for an hour a week, two half-hour sessions may make a difference. Shorter sessions of a lower intensity can also help engage some young people with learning disabilities.

Opportunities for reflection and action

How do you plan sessions with young people with learning disabilities? Are there any additional factors that could be incorporated into planning?
Approaches to interventions supporting young people with learning disabilities who experience, or are at risk of, child sexual exploitation (CSE)
The research highlights an array of interventions that specialist CSE services provide to support young people with learning disabilities who experience, or are at risk of, CSE. Some of the findings relate to supporting young people with learning disabilities to be better equipped to protect themselves from risk. However, it is important to state that the evidence from the research reinforces the fact that supporting young people to protect themselves from risk and sexual exploitation is the responsibility of others, including parents and carers, professionals, and the wider community, as well as the fact that young people are in no way responsible for being sexually exploited.

The research suggests that the following approaches have been effective in supporting young people with learning disabilities to both prevent and respond to sexual exploitation:

### 4.1 Preventative work

The research findings emphasise the importance of undertaking a variety of preventative work. This could be with individual young people with learning disabilities identified as being at risk of CSE, or wider preventative and awareness-raising work with groups of young people in, for example, educational establishments, children’s homes and secure training units.

The findings underline how providing accessible sex and relationships education is crucial to prevent the sexual exploitation of young people with learning disabilities. They also outlined how young people with learning disabilities in mainstream schools may not always be present for sex and relationships classes because this time is often used for catching up on other lessons or for additional support such as speech and language therapy. It is important for schools to ensure that these young people are provided with sex and relationships education and that materials and learning are accessible to them.

Preventative work addressing sexual exploitation in mainstream educational establishments should be adapted to ensure that young people with learning disabilities are able to understand what is being delivered. This will require schools to provide information about these students’ learning needs to any external provider. Professionals delivering this preventative work may have to request this information.

Preventative work in special schools for young people with learning disabilities can be successful when:

- there is a well-established relationship between the specialist CSE service and the special school
- the professional delivering the CSE preventative work has extensive experience of working with young people with learning disabilities
the class teacher provides expert support in developing the resources
young people who participate in the preventative programme are of a similar age.

Opportunities for reflection and action:

What CSE preventative and awareness-raising activities take place in your local area to meet the needs of young people with learning disabilities?

Does preventative and awareness-raising work take place in educational establishments?

Are there opportunities to work in partnership with educational establishments to support delivery of sex and relationships education to young people with learning disabilities?

What opportunities are there to include young people with learning disabilities who have experienced CSE in preventative work in schools?

When carrying out preventative work in mainstream schools, are young people with learning disabilities included? If so, do schools provide details of their additional support needs?

If your service delivers preventative and awareness-raising work in educational establishments and other environments, are you able to ask for information about the additional support needs of young people with learning disabilities?

How can your service adapt delivery of preventative and awareness-raising work to meet the additional support needs of young people with learning disabilities?

If your service is responsible for delivering CSE preventative and awareness-raising work in special schools for young people with learning disabilities, what steps can your service take to ensure this work is successful?

Is CSE preventative work included in a young person’s support plan? Is this considered in support given to younger children with learning disabilities to empower them, promote resilience and build their understanding and experience of relationships and, as the child becomes older, support their understanding of sex and relationships, consent and sexual exploitation?
4.2 Suggestions to support responses to young people with learning disabilities who experience, or are at risk of, CSE

The research highlights that the following can help to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE:

**Teaching young people about sex**

Both professionals’ and young people’s contributions to the research outline the importance of working with young people with learning disabilities to ensure that they have some understanding of sex. A key finding was that many young people with learning disabilities do not have a basic understanding of sex. This reinforces the need to work with them to gain understanding of their knowledge of sex and ensure this is adequate.

**Supporting young people to recognise that they have been sexually exploited and address the impact of this experience**

The research reinforces the importance of supporting young people with learning disabilities to recognise that they have experienced CSE, address its impact and recover as far as possible. Addressing these individuals’ self-esteem and self-blame is an integral element to enabling recovery from sexual exploitation, and plays an important role in preventing escalation of the risk of CSE.

**Increasing understanding of CSE and risk**

Improving young people’s knowledge of CSE can lead to some individuals actively changing their behaviour as a result of understanding more about risk and CSE:

‘I don’t go on Facebook anymore. […] If someone in a car stopped to talk to me, I would keep on walking; […] I used to sit and drink with people I didn’t know – I don’t do that anymore.’

(Lizzie, aged 17)

Through working to address risk, young people may experience a shift in relation to developing a deeper understanding of CSE and awareness that it can take a number of different forms. This may be accompanied by an increased recognition that risks are inherent in certain situations and in past actions and experiences:

‘[I] like don’t talk to strangers and stay away from these sorts of people, and stay out of arguments with other people. […] Before I didn’t really care and I would go off with loads of strangers and be really bad, but I have learnt that you can’t do that because bad stuff might happen, and you can be in danger and end up being sexually assaulted and all sorts of other bad things.’

(Chantelle, aged 14)
It is also important to support young people to understand that running away is generally dangerous, places them at risk and can increase their vulnerability to CSE.

Professionals and young people who participated in interviews described how young people with learning disabilities do not always consider consequences before they act:

‘And now I know that some people get into cars with people they do not know and bad things happen and now I realise that I shouldn’t have done that and I think about something and the consequences after I have done something.’

(Emma, aged 18)

It is often necessary to work with young people to consider consequences of certain actions; this is implicit in increasing their recognition of risk. Some young people described how they struggle to put their understanding into practice. Emma, for example, was very honest in her recognition that she now ‘sometimes’ thinks about possible consequences before acting and that this is an improvement. Despite the challenges to young people with learning disabilities being able to consider the consequences of their actions, this is nevertheless an important element of practice with this group of young people, requiring time, patience and a child-centred approach.

**Supporting young people to be safe**

Examples from the research reveal how work to support young people with learning disabilities to be safe includes:

- developing coping strategies
- recalling coping and safety strategies
- internet safety
- reducing risk
- seeking help
- addressing general health, sexual health and drug and alcohol awareness.

As a result of the work mentioned above, some young people who participated in the research made significant changes in their behaviour that reduced risk-taking and fostered a general improvement in feeling safe. Young people also became more settled in care placements and educational provision and experienced improved relationships with family and friends. All of these act as protective factors and reduce vulnerability to CSE. As a result of receiving support to address CSE and other issues, young people were often able to return to education, or attend educational provision on a more regular basis, secure paid employment and plan for their future.
**Working with young people to improve their relationships with others**

Interviews with specialist CSE professionals and young people reveal how young people with learning disabilities should be supported with recognising abusive and positive relationships, including friendships. An important outcome of such work was to reduce young people’s associations with risky peers and adults and ensure more positive future relationships. Examination of positive and unhealthy relationships considered, for example, how a boyfriend or girlfriend should treat the person with whom they are having a relationship and supporting young people to enable them to change their expectations of someone they are having a relationship with.

Young people who contributed to the research also described how work was undertaken to increase their understanding of friendships. This was achieved by facilitating improved understanding of what a friend is and what makes someone a good friend. In some instances, young people did not cease associating with ‘friends’ who were engaged in risky activities but were able to positively change their behaviour.

Young people were often realistic about the effects of peer pressure, alongside other complexities of their situations. These pressures could mean that, despite what they had learned through their work with a specialist CSE service, there may still be circumstances when it is difficult for them to say no and they could engage in activity they now know places them at risk.

To give support with achieving all of the above, professionals should ensure, as far as possible, that they provide positive and consistent models of secure attachment.

**Supporting young people who go through the criminal justice process as victims of CSE**

Research findings reveal how support for young people with learning disabilities during police investigations and the prosecution process is crucial and can take the form of:

- attending police interviews
- providing advocacy through the court process
- accompanying young people to pre-court visits
- pre-trial therapy within Crown Prosecution Service guidance on boundaries
- accompanying young people to court during a trial.

The research interviews with professionals and young people confirm that many young people with learning disabilities find it difficult to communicate with people they do not know. It is therefore important that a professional who knows the young person and their communication needs is present to enable
other professionals and the young person to communicate with one another. In some instances, it may be appropriate to work with registered intermediaries. It is vital that whoever is advocating for the young person is aware of the impact of trauma on young people with learning disabilities and how this affects their communication, and is able to impart this understanding to other professionals. Research findings also stress how offering therapeutic support for young people post-police operation and post-trial is an important consideration. A significant number of cases relating to the sexual exploitation of young people with learning disabilities do not reach court, or a verdict is reached that is not in the young person’s favour. This can be traumatising for the individual concerned, and post-police operation and post-trial support can help with this. Recovery plans should be tailored to meet individual needs.

**Ensuring support to meet mental health needs**

The research findings outline how specialist CSE services take different approaches to meeting young people’s mental health needs. Some offer talking therapies, while others work closely with Child and Adolescent Mental Health Services (CAMHS) to ensure mental health support is provided. However, some young people who participated in the research have mental health needs, including depression and anxiety, that have not been met. It is important to identify the mental health needs of young people with learning disabilities who experience, or are at risk of, CSE and help them to receive appropriate support. Young people’s communication needs should be checked so that any talking therapy approaches can be adapted.

Mental health can also be improved by having someone to talk to about a range of issues and experiences. For example, one young person ceased self-harming through being able to talk to her specialist CSE project support worker.

**Providing opportunities for group work**

Practitioners and young people who contributed to the research outlined how group work can be effective in providing support for young people who no longer need intensive one-to-one work and are able to cope with, and benefit from, a group setting.

The benefits of group work include providing opportunities to: benefit from peer support; experience ‘fun’; and enable young people to become involved in activities and participatory projects to influence local decision-making processes.

It should be noted that attending groups is not appropriate for all young people, but that groups for young people who have experienced, or been at risk of, CSE need to be inclusive so that those with learning disabilities can join. It is also necessary to undertake a full risk assessment for each young person who may become involved in group work to assess, for example, the potential for group topics to upset them, and the potential risks to individual young people or others in the groups.
Supporting young people when leaving specialist CSE services and making the transition to adults’ services

Young people aged 18, or approaching their 18th birthday, at the time of their participation in the research often had concerns about leaving a specialist CSE service. They were worried about no longer receiving the support offered by these services and, in some cases, making the transition to adult social services.

The nature of these concerns highlights the need for specialist CSE services and other agencies to support young people as they near the end of their time with specialist CSE services and make the transition to adult social services. While this milestone can be difficult for any young person, there are additional challenges faced by those with learning disabilities. For example, some young people are concerned about ceasing to work with a professional they have a good relationship with and understands their impairment and communication needs:

‘I don’t really like meeting new people. [...] It makes me feel anxious and I don’t like talking.’

(Emma, aged 18)

Some young people were supported by a specialist CSE service for years and withdrawal of the service was a significant loss. Young people often benefited from being able to retain contact and some form of relationship with the project team, particularly as some found the limited contact with adult social workers difficult.

The research findings indicate the need for ensuring smoother transition between children’s and adults’ services. This could be facilitated by, for example, joint working sessions involving both children’s and adults’ services during the last few months of support from children’s services.

Meeting the needs of young adults with learning disabilities who experience sexual exploitation over the age of 18

Interviews with professionals and young people highlighted how young adults with learning disabilities over the age of 18 can be, or are at risk of being, sexually exploited. Some of the young adults who participated in the research have not received any support to address sexual exploitation that took place when they were aged 18 or over. However, the research revealed that many specialist CSE services are willing to work with young adults, even though they are over the age of 18, as it is recognised that young adults with a learning disability face significant risk.

The vulnerability of some young adults aged 18 and over reinforces the need for work to take place with young people before they reach the age of 18 to prepare them for more independence and, where required, for this support to
be continued after they become 18. Sex and relationships education should form part of a life course approach from an early age, and specifically in transition planning for young people with learning disabilities.

**Young people's views of support that has been important to them**

Young people with learning disabilities’ accounts of the support received from specialist CSE services emphasise the importance of supporting these individuals in gaining increased knowledge and awareness of the following:

1. **Sexual exploitation as a form of abuse**

Some young people who participated in the research described how, before being supported by a specialist CSE service, they had not understood that abuse can take a number of different forms and/or that sexual exploitation is a form of abuse. They valued being supported to understand the different forms that abuse can take and that what someone had done to them was abusive.

2. **Understanding that adults should not have sexual relationships with young people**

Before work to address CSE, some young people did not know that there are laws relating to the age at which a young person can have sex and that it is illegal for adults to have sex with young people. As well as being informed about the law, young people benefited from being supported to understand why it is wrong for an adult to have sex with a young person.

3. **Understanding that young people should not be asked to have sex with other people**

Some of the young people had sex with other people because they were asked to by the person they thought they were having a relationship with. They did so because, at the time, they believed it was right to do what the person they loved asked them to. Young people have also had sex with other people because they were told, and believed, that this would stop the person they thought they were having a relationship with from getting into trouble. They described how they did not always realise that they should not be asked to have sex with other people and had to work with their project support worker to understand this.

4. **Keeping safe online and in the community**

Young people also described gaining benefit from direct work around being safe, both online and in the community. Some had not previously given thought to their safety and had not realised that they were at risk or being harmed. As described above, young people implementing changes to increase their safety had a number of positive outcomes and were able to move on with their lives.
Opportunities for reflection and action

What steps are taken to assess young people with learning disabilities’ understanding of sex? What work is undertaken with this group of young people to ensure they are informed about sex?

How do you provide support to increase young people with learning disabilities’ self-esteem? Are there any additional actions you can take to achieve this?

How does your service ensure that young people with learning disabilities know and understand the different forms of abuse?

What steps does your service take to ensure that young people know and understand that adults should not have sex with young people?

What steps does your service take to increase young people with learning disabilities’ knowledge of CSE? What impact does this have on increasing understanding of risk?

What work is undertaken with young people with learning disabilities to encourage them to consider the consequences of their actions? What has worked well? What challenges have there been in supporting young people to consider the consequences? Are there any steps that can be taken to address these challenges?

What outcomes are achieved with young people with learning disabilities as a result of support to stay safe? How does this reduce their vulnerability to CSE? Is there scope to develop this work further?

What support is in place to improve the relationships that young people with learning disabilities have with others and reduce any social isolation? What support is there to enable these young people to implement their learning about peer pressure so they are able to say no to risky activities?

Is your service able to offer support to young people with learning disabilities who go through the criminal justice process as victims of CSE? Is there potential for registered intermediaries to be part of this process? What steps are taken to ensure therapeutic support is in place post-police operation and post-trial?

What steps are taken to provide support to meet the mental health needs of young people with learning disabilities? Is there scope for any further steps to address these needs?

Is your service able to facilitate group work for those young people who no longer require intensive one-to-one support and/or would like to benefit from peer support?
4.3 Including young people with learning disabilities in service design, evaluations, reviews and inspections

To ensure young people with learning disabilities who experience, or are at risk of, CSE can share their views and experiences and influence service design and delivery, it is essential that they are meaningfully included in service design, evaluation of services, reviews and inspections. This entails ensuring accessible inclusion.

Opportunities for reflection and action

Does your service provide opportunities for young people with learning disabilities to input into service design and delivery?

Do you include young people with learning disabilities in evaluation of services, reviews or inspections?

What steps are taken to ensure accessible inclusion in evaluations, reviews and inspections?
5

Working with parents and carers and addressing the impact of the home environment
The benefits of working with families to address child sexual exploitation (CSE) have been evidenced in a recent evaluation report (D'Arcy et al, 2015) outlining the delivery of the Families and Communities Against Sexual Exploitation (FCASE) project. Specialist CSE professionals who contributed to the research also stressed the importance of working with parents and carers to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE.

5.1 Supporting parents and carers to recognise that their child is at risk of CSE

Professionals described how young people with learning disabilities can be vulnerable to CSE because of a lack of parental or carer recognition that, firstly, young people with learning disabilities can desire sexual relationships in the same way as their non-disabled peers and, secondly, the presence of a learning disability can place a young person at risk of sexual exploitation.

As identified by previous research, a young person’s vulnerability to CSE may increase when parents or carers also have a learning disability, as this can pose additional challenges to their recognition of the risks of CSE. The lack of recognition of vulnerability to CSE for young people with learning disabilities therefore reinforces the need for professionals to work with parents and carers to encourage them to recognise that their child is at risk.

Opportunities for reflection and action

What support is there in the local area for parents and carers of young people with learning disabilities who experience, or are at risk of, CSE?

5.2 Supporting parents and carers to meet the needs of their child

Specialist CSE professionals noted the necessity for professionals to work collaboratively with parents and carers to provide a supportive home environment that reiterates the learning from the work that takes place between professionals and young people. Parents and carers play a crucial role

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21 The project was funded by the Department for Education for two years and ended in March 2015. FCASE was piloted in three sites: Birmingham, Hampshire and Middlesbrough. The model included: a structured six-week programme of direct work with young people and families where risk of CSE has been identified; delivery of CSE training to professionals; and community awareness-raising.

in protecting young people from CSE and it is important for professionals to work with these caregivers to achieve this. In general, this may involve professionals enabling parents and carers to:

‘put things in place to better protect and support the young person and to be able to continue to support the young person to make safe choices and decisions in daily life’.

(Specialist CSE professional)

Part of this work entails professionals providing parents and carers with resources so they can implement boundaries and ensure they deliver key messages and expectations.

**Working with parents and carers to enable them to understand the young person’s learning disability**

Specialist CSE professionals who contributed to the research noted how, in some cases, it may be necessary to work with parents and carers to enable them to understand the impact of the young person’s impairment and how it affects their behaviour. Some specialist CSE services provide parents and carers with information about, for example, the young person’s learning disability, autistic spectrum condition (ASC) or attention deficit hyperactivity disorder (ADHD) and what steps their school should be taking to support them.

Professionals also described the importance of ensuring that parents and carers understand how a young person’s learning disability can affect their experiences of grooming and CSE through no fault of their own. In some instances, the young person’s learning disability is known but there are aspects of their impairment that have not been identified and recognised as playing a part in their risk. For example, when young people have no concept of time:

‘If you said to her: “Get back in half an hour,” that meant absolutely nothing to her and it caused problems with her parent and her social worker when she didn’t get back in half an hour. [...] So we had to sit down with her mum and explain that and set up a system for making sure the young person knew when she had to be back home and when she had to be in certain places.’

(Specialist CSE professional)

**Working with parents and carers to understand the impact of their child’s sexual exploitation**

The research findings identify how it may be necessary to support parents and carers to understand the impact of sexual exploitation on their child. Learning from an evaluation of a specialist CSE service reveals that sometimes parental or carer attitudes towards grooming and CSE can block them from viewing their child as a victim, and that it is necessary to work with family members.

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to help them understand CSE and its impact on the young person. Parents and carers can sometimes face difficulties after discovering that their child has been sexually exploited. This often affects relationships between young people and their parents or carers, and this is something that professionals should address as part of meeting young people’s needs.

**Supporting parents and carers with their needs**

Interviews with professionals and young people highlighted how it may be necessary for professionals to give consideration to unmet needs of parents and carers, as these can hinder a caregiver from supporting their child effectively. This assistance could take the form of helping parents or carers to access sources of support.

Specialist CSE professionals noted how the ability of parents and carers to gain support for their child can affect the extent to which the needs of young people with learning disabilities who experience, or are at risk of, CSE are met. While more focused and/or able parents and carers can ensure that their child receives a service to meet their needs, some parents and carers of young people with learning disabilities do not know how to access the support their child requires. Some parents and carers therefore require help to seek and gain access to the necessary support.

Specialist CSE professionals also described how, when a young person has a parent or carer with learning disabilities, other professionals’ perceptions of the parent or carer’s learning disability can also affect the level of risk experienced by the young person. In some cases, it is necessary for professionals supporting a young person to also work with other professionals to support their assessment of the parent or carer’s ability to protect their child. The following provides an example of this:

‘Social services took the view that the mother did have capacity and is able to protect [the young person] but now that they understand more about the mother’s learning disability, they are increasingly able to understand that the mother does leave the young person in the house with males in risky situations.’

(Specialist CSE professional)
Opportunities for reflection and action

How can collaborative work take place between parents or carers and professionals working to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE?

What resources can be provided for parents and carers to help them to implement boundaries and deliver key messages and expectations?

Where relevant, what support is there for parents and carers to understand their child’s impairment and how it affects the young person’s behaviour? Is your service able to address this?

How can parents and carers be supported to understand that a young person’s impairment can affect their experiences of grooming and CSE through no fault of their own? Is this something your service can address?

What support is available to parents and carers to promote their understanding of the impact of CSE? Is there scope for your service to support with this? If not, what alternatives are there in the local area?

How can support be put in place to address the relationships that young people have with their parents or carers as part of meeting young people’s needs?

What support is there in the local area to meet the needs of parents and carers? Is your service able to signpost them to sources of support? How can parents and carers be supported to gain access to support services to meet their children’s needs? To meet young people’s needs, what scope is there for working with other professionals with the remit of supporting parents and carers?
Resources to support work with young people with learning disabilities who experience, or are at risk of, child sexual exploitation (CSE)
Resources can be an important aid to young people’s understanding of CSE. They can allow a young person to address issues that are relevant to them and support change in their attitudes and behaviour.

6.1 General learning relating to use of resources

The general learning from the research about the use of resources to help meet the needs of young people with learning disabilities who experience, or are at risk of, CSE is presented below:

**Using basic resources to create a comfortable atmosphere**

Both professionals and young people described how basic resources can be used to create a comfortable atmosphere for young people with learning disabilities. Examples include stress balls and other ‘toys’ for a young person to fidget with while they work with their project support worker. There is evidence that providing young people with such ‘toys’ can assist learning:

'It can help them learn; while they’re doing other things they find it easier to process information and it can also help them with their feelings and emotions.'

(Specialist CSE professional)

It is also possible to create a positive environment by drawing on the personal resources of the project support worker and the young person. For example, one young person described how her project support worker produced a positive environment during a car journey and instigated role play:

'At first I was like: “This is just stupid [when initially asked to carry out role play with her project support worker]; I’m not pretending I’m someone else,” and then when I used to say no [to role play], I used to giggle afterwards and then she’d say: “This person says, come on, let’s have a bottle of vodka, blah, blah, blah,” and then I’d go like: “No,” straight to the point and didn’t make excuses and she would say [in the role of a person trying to get the young person to drink vodka]: “Why?” and I’d say: “Oh, ’cos I’ve got to get home for dinner;” just to make an excuse [not to drink the offered vodka].'

(Emma, aged 18)

**Avoiding a reliance on written information**

Interviews with both professionals and young people reveal how some young people with learning disabilities prefer to avoid using written resources. A common approach to supporting young people to understand and explore issues relating to CSE was to watch and discuss videos and work with scenario-based visual activities. Young people, many of whom indicated difficulties with reading, writing and retaining information, reported that this approach works for them:
‘And some of the stuff I’ve been shown, it’s helped me a lot to understand different things and how easy it is to get into a situation, like a bad situation [...] and look at what is a vulnerable situation and trying to prevent it and stuff like that; and drugs and alcohol.’

(Lauren, aged 21)

Where there is no option but to use written resources, project support workers adapted written information so that young people were able to understand it.

**Ensuring the right resources are used with young people with learning disabilities**

Both specialist disability professionals and specialist CSE professionals described how some CSE resources are likely to be particularly confusing for young people with learning disabilities and should not be used with this group of young people. This could include, for example, films with complex plots:

‘I’m thinking of one by CEOP called Exposed where the girl sends a photo of herself naked to her boyfriend and it goes all round. In that one, where she’s sat in the café, she’s talking to herself; the actress is there twice. [...] [Young people] that I’ve shown that to have gone: “Is that her twin sister? What’s going on? I don’t get it,” and it’s not easy to understand.’

(Specialist CSE professional)

Professionals also described how particularly graphic CSE resources could be problematic for some young people and care should be taken in the use of more graphic resources to avoid causing fright or anxiety.

**Adapting existing CSE resources for work with young people with learning disabilities**

The research reveals a commonly reported lack of CSE resources specifically for young people with learning disabilities. To compensate for this, specialist CSE professionals frequently adapt existing CSE resources to meet the needs of these individuals:

‘We use what we’ve already got but just use it differently. [...] So, for example, with Ryan’s Story [a DVD produced by The BLAST Project], I wouldn’t just play that from start to finish. We’d press play and then we’d pause it every few minutes and say: “What’s happened, what’s going on?” [...] You’d stop [the DVD] every three or four minutes at key points to make sure they’ve understood and also to ask key questions why something happened, what happened and why did they do that. But to do that, it means your session is longer than the usual session, so instead of playing a DVD for 15 minutes and talking for 15 minutes afterwards, it might take 30 minutes to play the DVD because of you stopping and starting it [...] but that’s what you’ve got to do.’

(Specialist CSE professional)
Professionals suggested that it is sometimes necessary to try a range of materials and resources before finding out which ones work well with individual young people:

‘It’s about finding out about what young people will respond to. [...] Not all young people with learning difficulties are the same so using one resource for one young person might be very different to using it for another.’

(Specialist CSE professional)

**Opportunities for reflection and action**

What resources does your service use with young people with learning disabilities who experience, or are at risk of, CSE? Are there any additional resources that can be used to meet these young people’s needs?

What is your experience of adapting existing CSE resources for work with young people with learning disabilities?

Are there any CSE resources that you do not think are suitable for young people with learning disabilities?

How is written information used with young people with learning disabilities?

What ad hoc opportunities arise for you to use role play, for example, with a young person?

What steps are taken to empower young people with learning disabilities to access resources?

**6.2 Resources that can be used with young people with learning disabilities who experience, or are at risk of, CSE**

This section of the practice guide provides details of resources that both specialist CSE professionals and young people who contributed to the research identified as effective in work with young people with learning disabilities who experience, or are at risk of, CSE.24

**Resources identified through the research**

Specialist CSE professionals who participated in the research have successfully adapted ‘Grooming Line’ and ‘Agony Aunt’, found in Barnardo’s *Bwise2 Sexual*

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24 Given the scarcity of such resources, additional resources are included in Appendix three that will support some of the work with young people described in this practice guide.
Exploitation\textsuperscript{25}, publication, for use with young people with learning disabilities. Sick Party,\textsuperscript{26} a DVD outlining grooming and sexual exploitation with an accompanying resource booklet that has a particular focus on peer-on-peer exploitation and the party lifestyle, has also been used successfully with young people with learning disabilities. Taking Stock’s\textsuperscript{27} sexual exploitation and relationships education programme Friend or Foe: Who Can You Trust? is also recommended as a resource that can be adapted successfully for work with young people with learning disabilities.

Specialist learning disability professionals who participated in the research recommended using the Child Exploitation and Online Protection Centre (CEOP)-adapted resources for young people provided on CEOP’s Thinkuknow website\textsuperscript{28}. Know your friends with Josh and Sue, for example, is a short film created specifically for young people with moderate to severe learning disabilities and supports the teaching of young people about online safety, bullying and friendships. The website also has a number of other resources addressing CSE that can be adapted to support young people with learning disabilities.

Specialist CSE professionals who participated in the research outlined how they often use creative resources with young people with learning disabilities:

‘We’ve got games; we’ve got plasticine; we’ve got a sand pit – to use more creative resources to get young people with learning disabilities to open up more.’

(Specialist CSE professional)

A technique used by one specialist CSE service was to have pictures of objects such as a mobile phone, drugs, a brain, a set of keys and money. One young person illustrated how using the pictures made her think about what she would need to take with her to ensure she was safe while going to a party with friends:

‘Say if you were going out with your mates to a house party, what would you take with you if you could only take three things [...] so I chose a brain ‘cos having your brain’s good, isn’t it, some money and a phone. And [the project support worker] went: “Do you know how many people choose drugs [to take to the party with them]? [...] They don’t take money [to get home] or their brain [to help them think about what they are doing]”’.

(Emma, aged 18)

Some specialist CSE professionals use scenario cards to encourage young people to think about risk:

\textsuperscript{26} Sick Party was produced by Genesis, a project based in Leeds working to support women involved in sex work and young people affected by sexual exploitation. Genesis also has a training arm, Basis, which was involved in the production of the DVD
\textsuperscript{27} Taking Stock is a Sheffield-based specialist service working with sexually exploited young people.
\textsuperscript{28} www.thinkuknow.co.uk, accessed 15 May 2015.
‘We’ve had like different cards and we put them on the table and then she’s [...] said: “Put [the cards with different scenarios] that you think are of higher risk or a lower risk. So, let’s say so and so has gone to the park; she’s met this person that she doesn’t know: what’s the risk? Is it higher risk, lower risk or in the middle?” So I’d say: “Higher risk,” and put the card in the middle with all the higher-risk scenarios.’

(Emma, aged 18)

As discussed above, assessing potential consequences of an action or situation was something that many young people with learning disabilities who experience, or are at risk of, CSE struggle to understand. Specialist CSE professionals often used DVDs or scenario cards to illustrate possible consequences and work through them with young people. Young people described how this helped them to consider consequences:

‘One [DVD] was where [some young females] were on a park bench and some boys come up to them and gave them drugs and alcohol [...] and there was like an EastEnders [DVD] and then we done some cards which make you think about what would you do if you were in this situation and what you should do. [...] So one of these cards was about a girl who goes into some random man’s car [which has other men in it as well as the driver] and they take her back to this flat and the card is about: “What would you do?” And thinking about it, if I was thinking [about possible consequences] before I even got in the car, I wouldn’t have got in the car because I don’t know [the men in the car]. And that’s how [my project support worker] has helped me: she makes me pretend I’m in these situations and then I think about the situations and that something’s not right.’

(Emma, aged 18)

Opportunities for reflection and action

Has your service developed any resources specifically for young people with learning disabilities? If not, is there scope to develop such resources?

Have you used any of the CSE resources mentioned above with young people with learning disabilities? If so, what was your experience of using these resources?

Does your service use creative resources?
Appendices
Appendix one: Summary of policy context relating to young people with learning disabilities who experience, or are at risk of, child sexual exploitation (CSE)

The UK has international obligations to protect children and young people from sexual exploitation and abuse. The United Nations Convention on the Rights of the Child was ratified by the UK government in 1991 and endorsed by all the governments in the devolved nations. Article 34 explicitly states that governments must protect children from sexual exploitation.29

The UK also has international obligations to protect the rights of disabled children and disabled people, specifically. Article 16 of the United Nations Convention on the Rights of Persons with Disabilities decrees that government should:

‘take all appropriate legislative, administrative, social, educational and other measures to protect persons with disabilities, both within and outside the home, from all forms of exploitation, violence and abuse’.

(UN, 2006, p 12).30

The CSE policy context in England

The Department for Children, Schools and Families (DCSF)’s 2009 Safeguarding Children and Young People from Sexual Exploitation,31 which forms supplementary guidance on safeguarding and promoting the welfare of children as presented in Working Together to Safeguard Children (HM Government, 2013),32 makes two references to children with learning disabilities. While recognising that any child may be at risk of sexual exploitation, it states that those with 'special needs' are a sub-group that may be particularly vulnerable. Sexual exploitation can be related to other factors in a child’s life, including learning disabilities. The guidance notes how perpetrators can target children with disabilities:

‘Children who have disabilities or special needs can also be targeted by perpetrators. Strategies, procedures and guidance will need to be adapted to meet their particular needs.’

(DCSF, 2009, p 39)

The guidance states that, when working to address CSE, service provision should recognise the particular needs of children with learning disabilities

alongside other children:

‘The particular needs and sensitivities of girls and boys, children with a physical disability or learning disabilities, those from ethnic communities or those for whom English is not their first language, should be reflected in the provision of services.’

(Ibid, p 13)


The Health Working Group Report on Child Sexual Exploitation (2014) states that the presence of a learning disability can heighten a child’s vulnerability to CSE and notes how the role of health professionals may include undertaking assessments for learning disabilities and then:

‘agreeing and implementing the best method of supporting the child’.

(Ibid, p 33)

The CSE policy context in Northern Ireland

In Northern Ireland, the issue of CSE was brought to the fore by a 2011 Barnardo’s study (Beckett, 2011). Established in 2012, the Safeguarding Board for Northern Ireland (SBNI) prioritised CSE from the outset and is taking a strategic lead on this issue. One of the Board’s key aims is to develop a coordinated and consistent multi-agency approach to the identification of all children in Northern Ireland who are at risk of CSE. While learning disability is not specifically mentioned in its strategic plan, disabled children and young people are noted as a priority group requiring protection from abuse (SBNI, 2013).

Following police identification of 22 young people as possible victims of CSE in 2013, an independent one-year inquiry began to establish the nature of CSE in Northern Ireland and the effectiveness of responses. The inquiry resulted in 17 key recommendations and a further 60 supporting recommendations (Marshall, 2014). These included: a public health campaign on CSE-related issues; a

36 Ibid
37 Ibid
commitment to collation and analysis of the data in a way that will facilitate a strategic response to CSE; consideration of proposals for legislative change; and the development of a regional strategy to prevent, identify, disrupt and tackle CSE.

Evidence given to the inquiry included many concerns about the vulnerability of children and young people with a learning disability, especially where this is mild and undiagnosed, and of those with language and communication difficulties. The inquiry further highlighted that disabled children can be particularly affected by exploitation involving social media. Supporting recommendations included that schools should receive guidance on how they can provide flexible support sessions about CSE that are accessible for parents and carers of disabled children.

The Department of Health, Social Services and Public Safety (DHSSPS) has set up a response team responsible for the implementation of the CSE inquiry’s recommendations. An implementation plan, which will include timescales for the completion of each recommendation, is due for publication in 2015. Also of note, the revised CSE risk assessment tool now used in Northern Ireland includes learning disability as a vulnerability factor.

The CSE policy context in Scotland

The Public Petitions Committee instigated an inquiry into CSE in Scotland in 2013, taking written and oral evidence from both statutory and non-statutory agencies on the nature, scope and prevalence of CSE in Scotland. It published a report with 28 key recommendations, which notes the:

‘definite gap in knowledge about disabled children and young people in relation to child sexual exploitation’.

Following the Public Petitions Committee report, the Scottish Government published a refresh of the National Child Protection Guidelines for Scotland with a separate section on CSE. The guidelines also contain a specific section on disabled children and young people, and have been further supplemented by the Child Protection and Disability Toolkit, due to recognition of the particular vulnerabilities of disabled children and young people. In November 2014, the Scottish Government published Scotland’s National Action Plan to Tackle Child Sexual Exploitation.

The 2010 National Guidance: Underage Sexual Activity: Meeting the Needs of Children and Young People and Identifying Child Protection Concerns notes the particular vulnerabilities of children and young people with disabilities to experiencing discrimination or disadvantage.
The CSE policy context in Wales

In 2011, the Welsh Assembly Government published *Safeguarding Children and Young People from Sexual Exploitation – Supplementary guidance to Safeguarding Children: Working Together Under The Children Act 2004*. This document identifies that children and young people with ‘special needs’ are particularly vulnerable to sexual exploitation. It makes specific reference to young people aged 18 and over with learning disabilities:

‘When a young person has a learning disability and is entitled to receive support via adult services, transition arrangements should take account of any risk to, history of or current abuse through CSE. Children’s services should ensure that they draw any specific needs in relation to the young person’s on-going safety and protection to the attention of colleagues in adults’ services to enable on-going care plans to reflect these specific needs.’

(Ibid, p 38)

Both the statutory guidance and the all-Wales child protection procedures protocol on CSE (2008) include direction on the use of the SERAF (Sexual Exploitation Risk Assessment Framework) tool in the identification of the risk of CSE. The SERAF now includes learning disability as a vulnerability factor for CSE.

**Generic safeguarding guidance for disabled children and young people across the UK**

In their analysis of child protection policies across the UK for disabled young people, Stalker et al (2010) found that, in the main, the four jurisdictions of the UK share a similar approach to disabled children’s protection, based on the principle that all children have a right to be protected. All four nations have generic safeguarding guidelines for all children and stress that the safeguarding of disabled children is essentially the same as for non-disabled children, although they do recognise the particular vulnerability of disabled children to abuse.

Specific supplementary guidance in England, *Safeguarding Disabled Children: A Resource for Local Safeguarding Children Boards* (DCSF, 2009), provides guidance to support the protection of disabled children, as does the National

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47 Stalker, K; Lister, P; Lerpiniere, J; McArthur, K (2010) *Child protection and the needs and rights of disabled children and young people: A scoping study.* University of Strathclyde, Glasgow.
Guidance for Child Protection in Scotland (2010), which devotes specific attention to disabled children. They highlight that there is a need for increased awareness and empowerment of disabled children and young people so they can make their wishes and feelings known, and stress the need for: awareness-raising; inter-agency working; improved communication with disabled children and young people; and improved monitoring and recording systems.

Despite some recognition within the child protection guidance, the particular vulnerabilities and needs of disabled young people are not always identified within policy. For example, it is noted that there is a lack of statutory guidance concerning disabled children and young people in residential special schools or healthcare settings for 52-week provision. Stuart and Baines (2004) highlight that disabled children still remain vulnerable in health settings and residential schools because education and health authorities fail to notify local authorities when a child is placed there. Likewise, independent special schools are also not required to have a governing body to provide external oversight. In addition, the most recent review of child protection services in England and Wales, the Munro Review of Child Protection (2011), which made many recommendations for change, made no reference to disabled children and young people.

Appendix two: ‘Top ten tips’ for communicating with people who have learning disabilities

To support communication with young people with learning disabilities, a learning disability specialist has produced their ‘top ten tips’:

1. Find a good place – somewhere quiet without distractions – to communicate. If you are talking to a large group, be aware that some people may find this difficult.

2. Ask open questions that don’t have a simple ‘yes’ or ‘no’ answer.

3. Check with the young person that you understand what they are saying: ‘The TV isn’t working? Is that right?’

4. If the young person wants to take you to show you something, go with them.

5. Watch the young person for their body language and facial expressions, as these may tell you something.

6. Learn from experience; you will need to be observant. Don’t feel awkward

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asking parents or carers for their help.

7. Use easy-read or pictorial resources. Try drawing even if your drawing isn’t great!

8. Take your time and don’t rush your communication.

9. Use gestures and facial expressions. If you are asking someone if they are unhappy, make an unhappy facial expression to reinforce what you are saying.

10. Be aware that some young people find it easier to use real objects to communicate, but photographs and pictures can help too. All communication is meaningful, but you may have to work harder to understand the young person’s communication.

The Royal College of Speech and Language Therapists has produced a resource outlining communication standards that individuals with learning disabilities and/or autism should expect in specialist hospital and residential settings (2013). This may provide useful learning for professionals and agencies, and help them ensure that service design and delivery is accessible for individuals with learning disabilities and/or autism.

Appendix three: Additional resources to support work with young people with learning disabilities who experience, or are at risk of, child sexual exploitation (CSE)

Details of additional resources that may support work with young people with learning disabilities who experience, or are at risk of, CSE are given below. It should be noted that this information is provided to offer professionals options for accessing resources that can be used, or adapted, to meet young people’s needs, and that the authors of the practice guide are not able to assess the effectiveness of these resources.

A Spanish organisation, Pantallas Amigas, has produced a range of short cartoon films addressing the risks that accompany the use of technology and explaining how to stay safe online. Its resources have been evaluated and can be adapted for use with young people with learning disabilities who experience, or are at risk of, CSE. Pantallas Amigas’ mission is to promote the safe and healthy use of new technologies and digital citizenship.

54 This resource was not highlighted through the research but identified after the data collection process.
in childhood and adolescence. Its website, www.friendlyscreens.com, offers resources for professionals, parents and carers and is aimed at raising awareness of how to use technology safely – including, for example, warnings about grooming and sexting.56

A number of resources have been produced for young people with learning disabilities, to support their understanding of consent, sex and relationships. These include the following:

- The British Institute of Learning Disabilities’ illustrated pack Exploring sexual and social understanding (Dodd et al, 2015)67 provides a flexible visual resource to assess sexual knowledge and capacity to consent. The pack can also be adapted to meet the needs of individual young people under the age of 18 and as a resource to work with a young person to identify:
  - sexual behaviour
  - the consequences of having sex
  - where it is and isn’t appropriate to have sex
  - issues relating to saying no to having sex
  - power issues
  - issues around age and relationships
  - other risks, including alcohol and drugs, abuse and exploitation, grooming, online safety and pornography.

The capacity assessment form for consent to a sexual relationship can be used for dual purposes: to make an assessment of capacity to consent to have sex; and to enable consideration of other issues within the young person’s support plan.

- Kylie’s Private World58 is a sex education DVD for girls and young women with learning disabilities. It has a strong emphasis on being alone and loneliness, sex and relationships, love and affection, and sex and consent within relationships.

- Jason’s Private World59 is a sex education DVD for boys and young men with learning disabilities. It features many of the same aspects as Kylie’s Private World but also includes consent, approaching someone, and understanding ‘yes’ and ‘no’.

56 The website is in Spanish and has an option to translate into English.
Talking together ... about sex and relationships is a practical resource aimed at parents and schools working with young people with learning disabilities to support young people aged 13 and over to explore a range of situations they may face as they grow up.

Living your life (Brook, 2011) is a sex education and personal development resource for professionals working with young people with learning disabilities.

Meeting the emotional needs of young people with learning disabilities (The Foundation for People with Learning Disabilities, 2011) is a resource for anyone supporting a young person with learning disabilities aged between 14 and 25. It has a specific focus on transition.

LGBT Health and Wellbeing has produced a list of easy-read and accessible resources on lesbian, gay, bisexual and transgender (LGBT) identities, gender, sexuality, sexual health and relationships.

Visual tools can help young people with learning disabilities to learn about their bodies and express their feelings and experiences. Examples of these resources include interactive body boards and emoticons or magnetic packs.

Appendix four: Organisations offering information, support and resources relating to child sexual exploitation (CSE), learning disabilities, autistic spectrum conditions (ASC) and attention deficit hyperactivity disorder (ADHD)

The following charitable and/or member organisations (both UK-wide and nation-specific) provide information, support and resources relating to CSE, learning disabilities, ASC and ADHD.

ADDISS – the National Attention Deficit Disorder Information and Support Service
www.addiss.co.uk
ADDISS provides information, support and resources about ADHD.


More information about these resources can be found at www.mybodyboard.co.uk, accessed 8 July 2015.
Ann Craft Trust\textsuperscript{65}
www.anncrafttrust.org
The Ann Craft Trust works to protect people with learning disabilities from abuse.

ARC UK
www.arcuk.org.uk
The Association for Real Change (ARC) is a leading UK-wide umbrella body representing service providers in the learning disability sector.

Barnardo’s
www.barnardos.org.uk
Barnardo’s is committed to helping children throughout the UK and works to tackle CSE and support those affected by it. Barnardo’s also provides services for children and young people with disabilities.

British Institute of Learning Disabilities (BILD)
www.bild.org.uk
BILD's aim is to ensure people with learning disabilities are valued equally, participate fully in their communities and are treated with dignity and respect. BILD's services help develop the organisations that provide support to people with learning disabilities.

Communication Matters
www.communicationmatters.org.uk
Communication Matters aims to increase understanding, awareness and knowledge of the needs of people with complex communication needs.

Council for Disabled Children (CDC)
www.councilfordisabledchildren.org.uk
CDC is the umbrella body for the disabled children's sector in England, with links to other UK nations.

Foundation for People with Learning Disabilities
www.learningdisabilities.org.uk
The Foundation for People with Learning Disabilities works to ensure that policies and services better meet the needs of people with learning disabilities and their families and carers.

Learning Disability Wales
www.ldw.org.uk
Learning Disability Wales represents the learning disability sector in Wales and works to ensure children, young people and adults with learning disabilities are valued.

\textsuperscript{65}At the time of writing the practice guide, the Ann Craft Trust (ACT) has developed a training programme that specifically helps organisations to protect young people with learning disabilities from sexual exploitation. Details of ACT can be found at www.anncrafttrust.org, accessed 15 June 2015.
**Mencap**  
www.mencap.org.uk  
Mencap delivers services for people with learning disabilities, provides advice and campaigns for change for people with learning disabilities.

**National Autistic Society (NAS)**  
www.autism.org.uk  
The NAS is a UK charity providing support for people with autism and their families. It also provides information and services.

**NWG Network**  
www.nwgnetwork.org  
The NWG Network is a UK network of practitioners, researchers, policymakers and other professionals working to address CSE, providing support, training, information and resources.

**Respond**  
www.respond.org.uk  
Respond works with children and adults with learning disabilities who have experienced trauma or abuse, as well as with those who have abused others.

**The Children’s Society**  
www.childrenssociety.org.uk  
The Children’s Society works to support vulnerable children in England, including those affected by CSE.

**Scottish Consortium for Learning Disability (SCLD)**  
www.scld.org.uk  
SCLD is a strategic partner in the delivery of Scotland’s learning disability strategy and brings together member organisations, people with learning disabilities and their families.
Practice guide:
Supporting professionals to meet the needs of young people with learning disabilities who experience, or are at risk of, child sexual exploitation

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The authors of this report are Emilie Smeaton, Anita Franklin and Phil Raws.

www.barnardos.org.uk

Head Office, Tanners Lane,
Barkingside, Ilford,
Essex IG6 1QG

Tel: 020 8550 8822

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