

# Reducing the risk:

Barnardo's support for sexually  
exploited young people

A two-year evaluation

**Sara Scott and Paula Skidmore**



**Barnardo's**

GIVING CHILDREN BACK THEIR FUTURE



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# Foreword

It is now more than 10 years since Barnardo's opened its first service for sexually exploited young women in Bradford. Our 'Street and Lanes' service was a pioneering project reaching out to some of the most vulnerable young people in our society: those involved in sexual exploitation, whose difficulties and disadvantages had drawn them away from their peers, their parents, and any positive connections with professionals.

Working with this group of young people is extremely challenging. Over the past decade Barnardo's has developed its understanding of how young people become vulnerable to exploitation and the multiple risk factors which lead them to fall prey to abusive adults and dangerous lifestyles. Barnardo's now has 14 services for young women and men in towns and cities all over the UK and has developed ways, often in partnership with other agencies, of reaching and working with young people to bring an end to their abuse and help them build new lives.

As we develop further services, and as other organisations do so, it is important that we do things which have been proven to be effective. This is the purpose of this report, the result of three years close collaboration between our research team and 10 of our sexual exploitation services to assess what makes a difference and how.

Our evaluation makes clear that services can achieve positive outcomes for young people, often against tremendous odds. The report highlights the success of specialist services in meeting the needs of a particularly vulnerable group of young people. It also demonstrates the benefits of partnership working. By working together we *can* reduce the risk of sexual exploitation for young people.

But the report also highlights challenges. Young people arrive at Barnardo's services with multiple difficulties, with a long history of problems in their family and in school. Most have lives blighted by substance misuse, abuse and exploitative relationships. Such vulnerable young people need a long term commitment from skilled staff working within a supportive environment with a positive policy framework and a secure funding base. Unfortunately, the reality is often very different. Many of our services struggle to maintain the commitment of partner agencies and even where such commitment is strong, the challenge of providing adequate funding is one Barnardo's and our partners continue to face.

As the new Chief Executive of Barnardo's, I'm proud of our track record in this difficult area of work. I'm especially proud and appreciative of the commitment of staff. If there is one overriding message from this report, it is the importance of sticking with young people through all their difficulties and against all the odds which, in the end, really makes the difference. Barnardo's will remain committed to providing support to such young people. I hope that you will continue to support us to do so.

*Martin Narey*  
Martin Narey



# Executive summary

## Introduction

Barnardo's has been involved in sexual exploitation work since 1995 and has sought both to influence policy and practice, and to develop effective inter-agency approaches to service provision for young people. Over the past decade, considerable success has been achieved in raising public, political and professional awareness of sexual exploitation, and in redefining the issue as one of child abuse rather than juvenile prostitution. Over the same period, Barnardo's has developed a range of services across the UK to meet the needs of young people involved in, or at risk of exploitation. This is an evaluation of 10 such services.

Barnardo's services aim to achieve a set of core outcomes for the children and young people with whom we work in order to reduce the risk factors and increase the protective factors in young people's lives. This evaluation was designed both to assess whether these outcomes are being achieved and to describe the model of practice used to achieve them.

Data were collected over a two-year period, following a year of preparation and piloting of the research methods. We collected data on an overall sample of 557 young people in contact with Barnardo's services, and detailed information on the case histories of 42 young people. We interviewed external stakeholders in the locality of each service, and analysed data from a specially designed outcome monitoring form which collected assessment and review information on changes in risk and protective factors.

## What works?

Barnardo's sexual exploitation services are engaging with young people who are currently experiencing sexual exploitation or are at immediate risk of such exploitation. These young people are extremely vulnerable as a result of a range of underlying factors including abuse, neglect, domestic violence and parental difficulties. They are also at risk because of a constellation of immediate risk factors including going missing, placement breakdown, disengagement from education, drugs/alcohol, homelessness, peers' involvement in prostitution and association with 'risky' adults.

Their sexual exploitation incorporates a spectrum of experience ranging from what is generally referred to as 'child sexual abuse' at one end, to 'formal prostitution' at the other. Many young people are first drawn into 'informal exploitation' where sex is exchanged for drugs or somewhere to stay. Many young women become engaged in a coercive relationship with an adult man who sometimes grooms them for more formal prostitution.

These young people present major challenges to services attempting to intervene in their lives. Most do not recognise their own exploitation – particularly in the initial stages of their involvement. By virtue of their previous experiences they are extremely 'needy' for the attention, 'love' and sense of belonging that their abusers supply. They have little if any experience of

reliable, supportive adults, distrust professionals, and are convinced that they are best served by leaving childhood behind and looking after their own interests.

Despite the challenges, Barnardo's services facilitate positive outcomes for young people, and as a result of their contact with our specialist services many young people's risk of sexual exploitation is reduced. The most significant positive outcomes are:

- a reduction in the number of episodes of going missing
- reduced conflict and improved relationships with parents and carers
- access to safe, stable accommodation
- an improved ability to recognise risky and exploitative relationships
- an increased awareness of their own rights.

This research has shown that, taken together, these outcomes **significantly reduce the risk of ongoing sexual exploitation**.

## Barnardo's service users

The case study sample of 42 service users was selected to represent young people presenting different levels of risk, and to be representative of young people Barnardo's works with by gender and ethnicity. Information was collected through interviews with practitioners on the young people's life history, history of sexual exploitation, issues during contact with the service and involvement with the service and its workers.

The analysis supports two concepts developed in Barnardo's previous research: the importance of understanding the factors which make particular young people vulnerable to sexual exploitation, and the usefulness of defining sexual exploitation as incorporating a spectrum of abusive relationships rather than conforming to a single model.

The case studies also confirm our understanding of sexual exploitation as incorporating a spectrum of experience ranging from what is generally referred to as 'child sexual abuse' at one end to 'formal prostitution' at the other. Young people are initially involved in informal kinds of exploitation where sex is the price for being accepted in an adult sub-culture, a place to 'hang out', or for alcohol and drugs. Young women often go on to become involved with an adult man who may intend to involve them in formal prostitution.

The histories of almost all the young people represented here are characterised by the following factors:

- **Disrupted family life:** only five young people were living in 'intact' families with both birth parents; 19 of the 42 had spent some part of their childhood in the looked-after system.
- **A history of abuse and disadvantage:** the majority (28) had suffered sexual abuse in the family, with physical abuse and neglect also common experiences: in only 4 case studies was there *no* apparent history of abuse or neglect. Domestic violence was a feature in 13 cases, with parental alcohol/drug misuse in 14.

- **Problematic parenting:** there was a clear deficit in the parenting capacities of many young people's parents, although many remained loyal and protective of their mothers. Relationships with fathers were frequently poor or non-existent and although some young people had support from other relatives, many were reliant for adult support entirely on professionals. In the absence of support in their teenage years, many young people had made a premature move into adult lifestyles where they became easy prey for 'risky' adults eager to supply an alternative sub-culture.
- **Disengagement from education:** almost all the young people in our study had disengaged from school in their early teens, compounding the disconnection from peers, regular routines and the prospect of college or employment, and increasing the likelihood of attachment to older people involved in drugs, crime and prostitution.
- **Going missing:** many young people had a history of going missing from home, during which they became increasingly involved with other vulnerable young people and exploitative adults through a need for somewhere to hang out and to receive acceptance.
- **Exploitative relationships:** already vulnerable because of a combination of the above factors, the majority of the young people became involved in exploitative relationships. Of the 35 young women in our sample, 32 had a clearly identified route into sexual exploitation via an older person. In 21 cases this involved an older 'boyfriend'; of these, 13 young women were being 'groomed' into exploitation by a pimp/boyfriend.
- **Drug and alcohol misuse:** substance misuse was a concern to workers in 30 case studies. Sometimes this was a response to the emotional pain arising from an exploitative situation, which in turn fuelled the exploitation as young people needed to maintain their habit. In only four cases did the substance misuse evidently develop independently of the sexual exploitation.
- **Poor health and well-being:** the physical and mental health of the young people was severely compromised both by their family histories and current lifestyles.

The seven young men in the case study sample shared many of the characteristics of the young women but also revealed some differences. Sexual identity was an issue for each of the young men, with four identifying as gay or bisexual but generally finding it difficult to discuss their sexuality. For these young men, as for the young women, there was considerable denial of sexual exploitation in their relationships with adult men.

All these young people present three major challenges to services attempting to intervene in their lives. First, they do not acknowledge their own exploitation. Second, they are extremely 'needy' for attention, 'love' and of belonging somewhere – and are reliant on abusive adults to meet these needs. Third, they have little previous experience of adult support and believe they are better off looking after themselves rather than relying on parents or professionals.

## Outcomes for young people

This is the first study in the UK which has attempted to evaluate quantitatively the success of specialist services in achieving positive outcomes for young people who are being sexually exploited. Quantitative research took place with ten services, both to evaluate how successful specialist services are in achieving positive change with sexually exploited young people, and to develop a greater understanding of the population characteristics of young people accessing sexual exploitation services.

The overall sample consisted of 557 young people with whom an initial assessment was undertaken between August 2003 and August 2005. The analysis of outcomes is based on a sub-sample of 226 children and young people under the age of 18 with whom the service had a sustained relationship.

The overall sample consisted of 454 young women (81 per cent) and 103 young men (19 per cent). The mean average age of young people accessing services was 16 years, with a range from 10 to 27 years. For under 18s, young women made up 86 per cent of the 387 total, with a mean average age at assessment of 15 years.

All participants received an initial assessment. Of these, 71 per cent of young people stayed with the service long enough for at least one review. Our analysis shows that these young people had higher risk scores, suggesting that services were working more intensively with those at higher risk. At initial assessment, almost half the young people had either previously experienced exploitation or were currently being exploited. Seventy-four per cent were assessed to be at high risk.

At final review (end of service provision for the young person) our analysis shows a highly significant reduction in the level of sexual exploitation risk for children and young people aged under 18. The reduction was particularly marked for those young people who were experiencing definite current exploitation at initial assessment. Seventy-five per cent (n=44) showed a reduced level of exploitation and of these, 34 per cent (n=19) at final review were in a currently stable situation and had exited exploitative relationships.

Services successfully reduced risk factors for young people across five out of six measures: going missing, accommodation need, relationship with carers, rights and risk awareness and engagement with services. There was no statistically significant change in the sixth factor, engagement with education.

In conclusion, our statistical analyses comparing levels of risk for young people at initial assessment and final review provide substantial evidence that sexual exploitation services are successful in achieving improved outcomes for young people at risk of or experiencing sexual exploitation. Particularly substantial reductions in risk were found for young people on measures of sexual exploitation and going missing. Positive changes were also observed for protective factors, with substantial improvements observed for young people's awareness of their individual rights and their engagement with Barnardo's services.

## The Barnardo's model of practice

Barnardo's services aim to prevent sexual exploitation, increase the protection for young people being sexually exploited, and support them out of exploitation. In addition to direct work with young people, services carry out a range of activities including educational work in schools and other settings, training for other agencies and involvement in multi-agency strategic groups. However, this evaluation has focused specifically on the direct work of services with young people which aim to achieve outcomes via the reduction of risk and the promotion of protective factors in young people's lives.

The core features of Barnardo's model of practice can be summarised in the Four A's of Access, Attention, Assertive outreach and Advocacy.

### Access

Young people may access services via referral from another agency or by self-referral. Services have all contributed to the development of protocols in their area to ensure effective pathways of referral, and this has included inter-agency work to raise awareness of sexual exploitation and increase identification of young people at risk.

The majority of young people involved in, or at risk of sexual exploitation have chaotic lives and a history of poor relationships with helping professions. Consequently, accessibility has to be more than simply making a service available. Considerable efforts are made to ensure that services are provided in a safe, attractive environment, flexible and responsive to young people's needs, by staff who take time to build a trusting relationship. Providing support to young people on their own terms is crucial, as is honesty about the boundaries of confidentiality.

### Attention

Many sexually exploited young people have few, if any, concerned, attentive adults in their lives. With a history of abuse, family breakdown and poor parental relationships, often with a background of disruption in the looked-after system, it is hardly surprising that young people are attracted to the attention offered by unsafe, abusive adults. Our services aim to provide a different kind of attention; attention that will 'hook' a young person out of unsafe relationships into safe and positive ones. This entails focusing on the issues that matter to the young person and persistence over time.

Consistent and persistent attention from a named worker enables the development of a protective, supportive relationship within which young people feel safe enough to examine their lives and start to make changes.

### Assertive outreach

Establishing and maintaining contact is achieved through a range of methods, including regular texting, calls and cards, arranging to meet on the young person's 'home ground' or at venues where they feel comfortable. The steady persistence of workers is eventually understood as being a genuine demonstration of concern and an indication of reliability. Such persistent engagement techniques are particularly important to counteract the influence of, often equally persistent, abusive adults.

### Advocacy

Effective support to young people has to involve a range of agencies. Many of the young people receiving a service from Barnardo's have been failed by previous services and a key role of staff is to ensure that they can advocate for the provision they need.

This advocacy can give rise to tension between agencies, but an important aspect of Barnardo's work is to establish and maintain effective inter-agency protocols and practices which keep the needs of young people at the centre.

Our interviews with services and analysis of case histories have highlighted a number of factors which can act as 'turning points' in young people's lives, where advocacy for the right kind of support at the right time can be particularly important. These include advocacy to get young people into education and good quality accommodation, and to get them the support they need as parents.

Involving young people themselves in developing services helps to build the skills and confidence necessary for young people to become self-advocates.

Providing support to young people in such difficult circumstances inevitably has an impact on staff. Sustaining support to young people has to involve sustaining support to the staff team, and a key element of Barnardo's services is a recognition of the necessity of looking after the needs of their staff.

## The policy context and perspectives of local stakeholders

In recent years, there have been some welcome changes in the policy context across the four nations of the UK in relation to young people involved in sexual exploitation. The key change has been to recognise that such young people need protection and that their needs should be addressed via multi-agency approaches within a child protection framework.

Our interviews with 26 stakeholders across the 10 service localities support previous Barnardo's research, that while sexually exploited young people have many needs and characteristics in common with other young people 'in need' and can benefit from generic support services, it is only through specialist services that we can ensure that their needs receive adequate attention.

Interviewees particularly highlighted the importance of Barnardo's services in acting as champions for the development of partnership working and protocol development. They also valued the expertise of specialist practitioners in working with this highly vulnerable group of young people.

All respondents expressed concern at the insecurity of funding experienced by the services.

Our research found many examples of highly effective inter-agency working. However, despite the huge improvements in the policy framework and the provision of guidance for children's services, this evaluation suggests that there is no room for complacency. Barnardo's service managers identified a number of ways in which young people continue to be failed by difficulties in inter-agency working, especially a reluctance or inability of key partners to engage in strategic approaches (most notably education, health and youth offending teams). Constraints to inter-agency partnership working impact in particular on the ability of specialist services to work fully towards primary prevention and early intervention.

Additional barriers to effective service provision detected in the research are: restricted understandings of the nature of sexual exploitation by professionals; the operation of high thresholds for intervention due to resource constraints; gaps in local services providing intensive support in the community (particularly safe accommodation, housing and substance misuse services) and particularly poor continuity in support to young people aged over 16.

# I. Introduction

## Summary

This section gives the background to Barnardo's work on sexual exploitation and provides an overview of the approach taken to the evaluation.

Barnardo's has been involved in this area of work since 1995 and has sought both to influence policy and practice and to develop effective inter-agency approaches to service provision for young people. Over the past decade, considerable success has been achieved in raising public, political and professional awareness of sexual exploitation and in redefining the issue as one of child abuse rather than juvenile prostitution. Over the same period, Barnardo's has developed a range of services across the UK to meet the needs of young people involved in, or at risk of exploitation. Ten such services have participated in this evaluation.

Barnardo's services aim to achieve a set of core outcomes for the children and young people with whom they work, in order to reduce the risk factors and increase the protective factors in young peoples' lives. This evaluation was designed both to assess whether these outcomes are being achieved, and to describe the model of practice used to achieve them.

Data were collected over a two-year period, following a year of preparation and piloting of the research methods. Our approach involved collecting information on the case histories of 42 young people in contact with Barnardo's services via interviews with managers and practitioners, the collection of external stakeholder views in each locality and the analysis of data from a specially designed outcome monitoring form, which collected assessment and review information on changes in risk and protective factors.

Barnardo's, along with other children's charities, has played a key role in awakening concern about the sexual exploitation of children and young people, and in redefining the issue as one of child abuse rather than juvenile prostitution (see Barnardo's, 1998). There has been considerable success in influencing policy and practice guidance such as *Working together* (Department of Health et al, 1999), which clearly places sexual exploitation in the context of child protection. At the local level, Barnardo's has been concerned with the development of good practice and effective inter-agency working, and has spearheaded the development of services for young people. Barnardo's is committed to the ongoing evaluation of its interventions and to developing the knowledge base on which appropriate policy and practice depends. The purpose of this national evaluation of our sexual exploitation services is to learn from our experience of providing direct support to sexually exploited young people and to inform our services and their partner agencies of opportunities and barriers to providing effective interventions.



Barnardo's first specialist sexual exploitation service opened in 1995 and its fifteenth launched in 2005. There are services in each of the six English regions, in Scotland and in Northern Ireland. A further two services in Wales and South London are currently in development. In addition, Barnardo's operates a number of services that concentrate on young people who have gone missing from home or care. These services also encounter young people at risk of sexual exploitation. In 2004/5 the specialist services worked with a total of 2,075 young people through their direct support, outreach and educational work.

The extent of child sexual exploitation in the UK is unknown. The largest scale attempt to estimate prevalence was conducted by Swann and Balding (2002) as part of the review of Department of Health Guidance. They found that 76 per cent of the 111 Area Child Protection Committees (ACPCs) in England which were surveyed were aware of children involved in prostitution in their area. In addition, a targeted survey of 50 ACPCs from the same sample specifically identified 545 girls/young women and 57 boys/young men. The authors of the survey therefore concluded that an average of 19 girls/young women and 3 boys/young men will be being abused through prostitution in any given local authority, at any given time. This is an extremely conservative estimate, as this evaluation makes clear. In 2003, 2004 and 2005 the 10 specialist services involved in our evaluation each provided direct, intensive support to an average of 28 young people per year, and had brief contact with, or knowledge of, many more.

In research conducted in 31 London boroughs in 2004 (Harper and Scott, 2005), 507 separate cases of young people where sexual exploitation was either known or indicated were identified by social services. Statistical techniques were used to estimate the risk of sexual exploitation for each borough in London based on a set of proxy indicators for exploitation.<sup>1</sup> The total number of young people estimated to be at risk across London was 1,002 (an average of 32 young people per borough). This was double the number of young people actually being identified by social services. The statistical estimates suggested that some London boroughs might have been under-identifying young people at risk by up to 80 per cent.

There are many reasons for this under-identification, not least being the difficulties young people face in disclosing sexual abuse and violence. Barnardo's service development has taught us that it is only through the process of raising awareness and providing a service that young people are identified.

## The national evaluation

Five years ago, one of the authors undertook a formative evaluation of one specialist sexual exploitation service in the Midlands. The evaluation was extremely positive about the service, but the data available on outcomes for clients were entirely anecdotal (Scott, 2001). Six months later the service had its local authority funding withdrawn and it closed down. The idea of conducting a national evaluation of Barnardo's sexual exploitation services was born out of that experience. By collecting and aggregating monitoring data across a number of services over a substantial period of time we aimed to establish whether the interventions really made a difference to young people's lives.

<sup>1</sup> These proxy indicators included: the numbers of young people going missing, the numbers of children in local authority care, the numbers of children in residential homes, rates of school absence, levels of sexually transmitted infections and teenage pregnancy, levels of youth homelessness and levels of drug use in the community.



The national evaluation began, where all good outcome-focused evaluation must, with the clarification of the changes for service users which services sought to achieve. For many years Barnardo's has expressed its desired outcomes for children and families in terms of the Barnardo's 'Building Blocks'. More recently the government has adopted an almost identical set of overarching outcomes for all children's services – the Every Child Matters (ECM) Outcomes.

#### **Barnardo's Building Blocks**

- A family that can cope
- Emotional, physical and mental health
- Protection from harm
- Opportunities to learn
- A sense of belonging in the community
- A stake in society.

#### **Every Child Matters Outcomes**

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Have economic well-being.

In recognition of the significance of the ECM outcomes for commissioners, funders and providers of services, Barnardo's has rewritten its Building Blocks as Barnardo's Outcomes to ensure a ready fit with the ECM framework, with one important addition: 'A positive family life'. This remains a key outcome for an organisation which believes that the interests of children and those of their families cannot be readily divided, and that wherever possible children should enjoy health, safety and opportunity in the context of family life.

#### **Barnardo's Outcomes**

Children and young people:

- enjoy a positive family life
- enjoy emotional, physical and mental health
- enjoy safety from harm
- have opportunities to learn, enjoy and achieve
- belong and contribute to their communities
- have a social and economic stake in society.

Barnardo's services identify the specific outcomes for children and their families that they endeavour to achieve in relation to these overall outcomes. Consultation with the managers of our sexual exploitation services enabled us to clarify the specific outcomes which framed their work. Although expressed slightly differently from one service to another, there was considerable agreement on the core outcomes.

## Outcomes for sexual exploitation services

### Long-term outcome

Children and young people are not sexually exploited or at risk of being abused through prostitution.

### Interim outcomes

Children and young people:

- are in regular contact with services and able to accept support
- have a suitable place to live, with care and support adequate to their needs
- do not go missing from home/care
- have reduced conflict with parents/carers
- do not associate with controlling/risky adults or with peers involved in prostitution
- attend school/college regularly
- are aware of sexual health risks and protect themselves appropriately
- are not drug/alcohol dependent
- are able to recognise risky and exploitative relationships and to assert their rights in relationships
- do not experience intimate violence and are safe from abuse.

We compared these outcomes to the risk indicators for sexual exploitation identified in previous research, and concluded that the services' implicit 'theory of change' was based on the available evidence of what was likely to decrease risk factors and increase protective factors for young people. Evaluating change against these outcomes was therefore appropriate.

## Sample and approach

Ten Barnardo's services participated in the evaluation. Two services were in development during the evaluation period; one service had a particularly small number of service users at the beginning of the evaluation (less than 10 young people) and was also staffed by statutory social workers under a partnership agreement; and one service experienced significant staffing and management changes and was not able to participate. The locations of the 10 participating services were: London (2), South East (1), South West (1), Midlands (1), Yorkshire (2), North East (2), Scotland (1). The smallest service that participated in the research was staffed by a sole practitioner for almost the whole period; the largest had a team of 17 staff connected to the service.

The 10 services participated in the piloting and implementation of the outcome monitoring tool; managers participated in national consultation meetings, briefed and supervised staff in completion of the tool, and facilitated interviews with their staff and appropriate local stakeholders. Participation involved managers and their teams in a considerable amount of additional work. The involvement of service managers in the initial design of the evaluation, and the excellent relationships that evolved between practitioners and members of the research team, ensured that data collection was efficient. The national evaluation was one strand of Barnardo's research programme on sexual exploitation and during the last three years

practitioners also had opportunities to contribute to two EC-funded projects and to research conducted in Scotland, London and the South East. This experience of close collaboration has increased services' understanding of the value of research, evaluation and evidence-based practice. (See Appendix A for details of Barnardo's participatory approach).

## Aims of the evaluation

The national evaluation was designed to address additional questions in addition to this core question:

- Do our services succeed in facilitating positive outcomes for sexually exploited young people?

The other questions were:

- Who are our service users? What are their histories and difficulties? What are their routes into sexual exploitation?
- What is the Barnardo's model of practice and how does it work?
- What are external stakeholders' views on our services?

The overall aim of the evaluation was to show not simply whether our services had made a difference to young people's lives, but also how they had done so. The national evaluation, therefore, sought to establish a model of Barnardo's practice through interviews with practitioners and managers. In addition, managers were interviewed about the strategic operation of each service and the priorities for future development of the provision. The majority of interviews were conducted face-to-face and the average duration was one hour. All face-to-face interviews were taped and transcribed; a smaller number of interviews were conducted over the telephone, when full notes were taken (five interviews).<sup>2</sup> A total of 50 interviews were completed with practitioners and managers from the 10 services.

In each locality, contact was made with key stakeholders connected to the service. Individuals were interviewed to describe their contact with the Barnardo's service, and the nature and dimensions of the professional relationships in each location. All these interviews were conducted over the telephone with full notes being taken and lasted on average 40 minutes.<sup>3</sup> Representatives from the police, social services, education, health, youth services, youth offending teams (YOTs) and voluntary sector services, such as adult sex worker projects or substance misuse services, agreed to be interviewed for the research. Using this approach, qualitative interviews were conducted with 26 stakeholders across the ten service locations.

## Case histories of children and young people using Barnardo's services

The evaluation sought to gather detailed information about the specific experiences of service users. Previous research has often sought to interview children and young people themselves about their background, needs and service use. It was decided that it was ethically problematic

<sup>2</sup> Full details of the interview schedule are reproduced in Appendix B

<sup>3</sup> Full details of the interview schedule can be found in Appendix C

to conduct interviews with service users who may currently be experiencing chaotic and abusive situations and that this would potentially work against a child protection approach to their support, compounded by interviews having to be carried out by research staff unknown to the children concerned.

An alternative approach to gathering case history material has been successfully used previously, by conducting interviews with key workers for each client (Scott, 2001). The national evaluation utilised the same method, interviewing key workers from across the 10 services that were engaged with the research (see Chapter 2 for details of sampling). Interviews followed a structured framework to gather information about children and young people around four key areas:<sup>4</sup>

- life history
- history of sexual exploitation
- current situation
- involvement/ interaction with service and its workers.

Using this approach, 42 case histories of children and young people were gathered.

## The outcome monitoring research

An outcome monitoring form (OMF) was developed for completion in relation to each young person with whom there was contact following a referral. The OMF was piloted for a 12-week period in 2002/3 and then revised after detailed consultation with practitioner teams and service managers. The final monitoring tool was primarily completed as an Excel document in electronic form,<sup>5</sup> and an adapted version is reproduced in Appendix E. Details of the methodology are included in Chapter 3 and in Appendix F.

At initial assessment, the OMF enabled practitioners to rate young people over a set of risk factors, linked to the assessment approach that services were already using. The areas monitored included:

- going missing
- relationship with parents/carers
- accommodation
- experience of violence
- substance use
- sexual health
- awareness of risks or own rights.

This chapter has provided an introduction to the background and approach to the evaluation. In the next chapter, we describe the case histories of 42 young people using the 10 participating services.

<sup>4</sup> Full details of the interview schedule are reproduced in Appendix D.

<sup>5</sup> One service was only able to complete the forms on paper due to a lack of standardised IT capacity.

## 2. Barnardo's service users

### Summary

This section provides information on 42 young people using 10 of Barnardo's sexual exploitation services. The sample was selected to represent young people presenting different levels of risk, and to be representative of young people Barnardo's works with by gender and ethnicity.

Case studies were collected through interviews with practitioners. Information was gathered on the young people's life histories, history of sexual exploitation, issues during contact with the service and their involvement with the service and its workers.

The analysis supports two concepts developed in Barnardo's previous research: the importance of understanding the factors which make particular young people vulnerable to sexual exploitation, and the usefulness of defining sexual exploitation as incorporating a spectrum of abusive relationships rather than conforming to a single model.

The case studies confirm our understanding of sexual exploitation as incorporating a spectrum of experience, ranging from what is generally referred to as 'child sexual abuse' at one end, to 'formal prostitution' at the other. Many young people are first drawn into 'informal exploitation' where sex is exchanged for drugs or somewhere to stay. Many of the young women rapidly become engaged in a coercive relationship with an adult man who may groom them for more formal prostitution.

The histories of almost all the young people represented here are characterised by the following factors:

- Disrupted family life: only five young people were living in 'intact' families with both birth parents; 19 of the 42 had spent some part of their childhood in the looked-after system.
- A history of abuse and disadvantage: the majority (28) had suffered sexual abuse in the family with physical abuse and neglect also common experiences: in only 4 case studies was there no apparent history of abuse or neglect. Domestic violence was a feature in 13 cases, with parental alcohol/drug misuse featuring in 14.
- Problematic parenting: there was a clear deficit in the parenting capacities of many young people's parents, although many remained loyal and protective of their mothers. Relationships with fathers were frequently poor or non-existent, and although some young people had support from other relatives, many were reliant for adult support entirely on professionals. In the absence of support in their teenage years, many young people had made a premature move into adult lifestyles where they became easy prey for 'risky' adults eager to supply an alternative sub-culture.

- Disengagement from education: almost all the young people in our study had disengaged from school in their early teens, compounding the disconnection from peers, regular routines and the prospect of college or employment, and increasing the likelihood of attachment to older people involved in drugs, crime and prostitution.
- Going missing: many young people had a history of going missing from home, during which they became increasingly involved with other vulnerable young people and exploitative adults through a need for somewhere to hang out and to receive acceptance.
- Exploitative relationships: already vulnerable because of a combination of the above factors, the majority of the young people became involved in exploitative relationships. Of the 35 young women in our sample, 32 had a clearly identified route into sexual exploitation via an older person. In 21 cases this involved an older 'boyfriend'; of these, 13 young women were being 'groomed' into exploitation by a pimp/boyfriend.
- Drug and alcohol misuse: substance misuse was a concern to workers in 30 case studies. Sometimes this was a response to the emotional pain arising from an exploitative situation, which in turn fuelled the exploitation as young people needed to maintain their habit. In only four cases did the substance misuse evidently develop independently of the sexual exploitation.
- Poor health and well-being: the physical and mental health of the young people was severely compromised both by their family histories and current lifestyles.

The seven case studies of young men shared many of the characteristics of the young women but also revealed some differences. Sexual identity was an issue for each of the young men, with four identifying as gay or bisexual but generally finding it difficult to discuss their sexuality. For these young men, as for the young women, there was considerable denial of sexual exploitation in their relationships with adult men.

Young men or women, all these young people present three major challenges to services attempting to intervene in their lives. First, they do not recognise their own exploitation – particularly in the initial stages of their involvement. Second, by virtue of their previous experiences they are extremely 'needy' for the attention, 'love' and sense of belonging that their abusers supply. Third, they have little if any experience of reliable, supportive adults, distrust professionals, and are convinced that they are best served by leaving childhood behind and looking after their own interests.

Detailed information about the histories and experiences of 42 young people using 10 of Barnardo's sexual exploitation services was collected during the evaluation period. These case studies have enabled us to explore the backgrounds and experiences of young people who come to be at risk of sexual exploitation.

Previous research has identified a number of practical, social and emotional issues that need to be addressed in order for young people to exit prostitution successfully. Taylor-Browne (2002) interviewed 47 young people from across England who had been abused through prostitution.

The problems identified include:

- financial difficulties
- drug addiction
- single parenthood
- lack of qualifications and training
- housing problems
- existing social networks
- lack of family support
- abusive partners/pimps/boyfriends
- criminal convictions that prevent people taking on relatively low-skilled work such as childcare.

However, Barnardo's services work largely with young people whose sexual exploitation is recent, and before they have become entrenched in formal prostitution. Their primary concern is to understand the childhood antecedents and the 'push/pull' factors in adolescence that put young people at risk of exploitation. By understanding the 'routes in' to sexual exploitation, services are in a better position to help young people find routes out of such a dangerous lifestyle at an early stage. A previous analysis of 12 case studies from one of our services (Scott, 2001) revealed a number of risk factors associated with being drawn into exploitation, including:

- physical or sexual abuse within the family
- mothers who were victims of domestic violence and/or dependent on alcohol/drugs
- being disengaged from education by their early teens
- being alienated from their families or communities
- being hungry for attention
- a history of 'going missing'
- being keen to 'escape' childhood and be regarded as adults
- drug/alcohol dependence
- being targeted and sexually exploited by an adult male.

These were the issues we set out to explore in relation to this larger sample of case studies.

## The case study sample

Guidelines were developed so that services could contribute cases to the overall sample in a consistent way. Each service manager was asked to identify a 10 per cent sample of young people representing a balance of service users according to age, ethnicity and gender. In addition we asked that the sample included a range of cases where young people were assessed as having different levels of risk (using the definition set out in the outcome monitoring) so that the sample represented not only young people at the 'highest', most extreme level of exploitation, but also those at medium and lower levels. Importantly, managers were asked to include cases with a range of positive or negative outcomes for young people – including young people who had difficulty engaging with the service. Service users in contact within the last two years, including those no longer accessing the service, could be included. The case study sample was therefore a subset of the overall outcome monitoring sample of 557 young people who participated in an initial assessment between August 2003 and August 2005.

## Confidentiality and consent

All case studies were anonymous at the point of data collection, and managers were assured that the research report would not use any 'complete' accounts or extracts that might identify any young person. It was explained that the case studies would be analysed and written up in such a way that information would be 'fragmented' across themes and topics. Extracts quoted in this report have been further anonymised by changing or editing out any potentially identifying features. We did not attempt to obtain the direct consent of the young people, which would have been impossible to gain if the young person was no longer in touch with the service.

In order to achieve as much consistency as possible, case studies were collected largely through practitioner interviews, using a detailed topic guide.<sup>6</sup> Practitioners were asked to read through their case notes prior to the interview, and bring service users' files with them so that details could be checked if necessary. In a small number of cases, practitioners wrote up case studies using the same topic guide. Each case study of a young person collected information across the following areas:

1. Life history
2. History of sexual exploitation
3. Current issues during contact with the service
4. Involvement/ interaction with the service and its workers.

## The sample

The qualitative sample consisted of 35 young women and 7 young men. This is in proportion to the gender balance in the quantitative sample of young people under 18 who experienced at least one review after the initial assessment (333 young women and 54 young men). There were issues unique to the experiences of young men which we will discuss at the end of this section. The bulk of this analysis is therefore concerned with the lives of sexually exploited young women, who form the majority of Barnardo's sexual exploitation service users.

Twenty-seven case studies concerned white British young people, two young women were identified as white European, three young women in the sample were Black, two Asian, and eight were dual-heritage young women. The breakdown matches that in the quantitative sample of young people under 18 who reached review almost exactly:

Table 1 Ethnicity of young people

Ethnicity	Outcome monitoring sample	Case study sample
White	68%	69%
Black	9%	7%
Asian	5%	5%
Dual heritage	11%	11%

<sup>6</sup> This can be found in Appendix D.



The sources of referrals for 42 young people were as follows:

Table 2 Sources of referral

Social services	13
Self/peer referral	6
Voluntary service (including drug agencies, adult prostitution services and Women's Aid)	5
Encountered through streetwork/outreach	7
Police	4
Schools	3
Other (including CAMHS, YOTs, A & E)	4

## Findings

### Family background

Only five young people in the case study sample were living in 'intact' families with both their birth parents. Nineteen out of 42 young people had spent some part of their childhood in the 'looked after' system, many having experienced a number of changes of carer. Two had been adopted in early childhood, two had been accommodated at their own request in their early teens, and a further six had significant social work involvement in their childhood prior to any concerns about sexual exploitation.

A striking feature was the prevalence of various forms of violence and abuse within the young people's families. The majority were from extremely disadvantaged backgrounds and had suffered sexual abuse in childhood (identified in 28 case studies), physical abuse (identified in 14 cases), emotional abuse and neglect (in 20 cases). In only four case studies was there no apparent history of abuse or neglect. In addition, domestic violence was known to have featured in 13 parental relationships, parental mental health problems were identified in 5 case studies, significant bereavements in 4, and parental alcohol/drug misuse in 14 cases. The capacities of the mothers in these families to act as reliably protective and supportive parents was severely limited, and children had sometimes lacked the most basic care, including adequate food, clothing and privacy.

Caryn went to live with her Mum when she was 11 or 12, when her Mum got a flat. Five years later there were still no carpets on the floors. The social worker looked in the cupboards for evidence of food, and none was found, absolutely nothing was found.

When he was received into care at 12 he'd been physically abused by his father and was suffering from malnutrition. Both his parents were alcoholics.

Her Mum had severe learning difficulties and her Dad was disabled, so she'd fended for herself since she was little. She'd be given money to get her tea, but she'd never been looked after, never been given any boundaries. She had no experience of ordinary family life at all.

Mum had a drink problem on and off. She had a few boyfriends, and there's been allegations of abuse. Barry claimed that one of them raped him when he was 7, it never went to court and he feels incredibly let down by that.

Her mother died when she was three. Her brother also died. Her Dad was alcohol dependent and she went in and out of care until she was 15. She herself had been a heavy alcohol user since she was 13.

Ongoing sexual abuse by her step-dad. Mum had mental health problems and it's possible [step-dad] had been sedating Mum, because he's been in control of her medication, then he's been free to abuse Gemma.

She was sexually abused by an uncle, but it seemed the family rejected her because she had disclosed it. They didn't want to know her after that.

In some instances abuse, neglect and disrupted attachment were known to have also featured in the childhoods of young people's parents:

Her Mum spent most of her early life in a children's home, and there was a question mark about whether she too had been sexually exploited – and involved in prostitution.

Mum had been sexually abused by the grandfather. That's how social services had come to be first involved with the family.

Her mother alleges that Debbie's Dad had forced her into prostitution at the age of 16. [She] suffered domestic violence – Debbie was aware of this.

However, service provider perceptions of a young person's family background and situation was also important – for example, in one case child protection concerns were apparently overlooked because the young woman came from a 'nice middle class family', even though the young woman was deeply unhappy and her parents were violent towards one another.

In three cases, parents splitting up acted as a catalyst for a teenager's involvement in a problematic peer group or with an older 'boyfriend'. In only three cases were no significant difficulties identified in the young person's history prior to their involvement in sexual exploitation.

### Relationships with parents

As well as the obvious failures in parenting related to abuse and neglect, there was a clear deficit in the parenting capacities of many young people's parents. Very few young people had grown up in intact families, with two parents who had enough time and energy for them, and who were capable of providing adequate physical and emotional care. Despite this, most young people in the sample maintained significant relationships with their mothers, towards whom they were often very loyal and protective. Even when a mother had neglected or rejected them, young people often did not wish to discuss her shortcomings. Mothers' mental health or alcohol problems were sometimes the source of considerable concern to young people, and some of them had been young carers from an early age. Many others had 'taken care of themselves'

rather than being actively parented by mothers struggling with poverty and domestic violence. Where workers had information on the very early childhoods of service users, it was frequently clear that there were likely to be attachment issues stemming from the ambivalent and inconsistent care they were likely to have received in infancy:

Mum, it seems, had always viewed Celeste as a younger sister, so there had never been a chance for the mother-child attachment in her early years. Celeste was diagnosed with an attachment disorder, which is a very broad term, but I think it was hugely significant. I would have benefited from knowing that earlier on, because her ability to form and sustain positive relationships was so limited.

There were concerns about her Mum prostituting her, and also about the relationship between herself and her Mum. We were concerned that Lola was more the parent and her Mum was more the child ... She was always running back to Mum when she absconded from the Unit ... Lola loved her Mum, and I think she had a lot of control because Mum was very childish, and at the end of the day I think she just wishes her Mum was like a Mum.

Hayley's parents both suffered from a history of depression. A number of years ago her mother ended her own life. Since this time she and her younger brother have lived with her uncle. There are very liberal rules and few boundaries in their living environment, and she continues to assume the role of a young carer:

In 15 cases it was noted that the young people were entirely estranged from their fathers. Few separated fathers maintained regular contact with their child. Despite this some were held in esteem and affection in absentia, but some were considered entirely irrelevant:

She did occasionally talk about Dad, who I think has a drink problem ... but she didn't want anything to do with him, she just described him as a drunk and a waster ... I think she bumped into him around town, but no [proper] contact, and no contact with Mum. In fact [during] the time I was working with her, her Mum moved and didn't inform anyone of the change of address – so Mum really didn't want anything to do with her at all.

This young woman has talked to me about the physical violence from her father, but she misses him so much. I mean she's angry because they went in the refuge and then he died of cancer. She ... is grabbing on to the moments that were good with her father, as anyone would, although she acknowledges that he was violent and the impact that has had on Mum subsequently.

Rejection within the parent-child relationship could occur in either direction, but young people were usually very ashamed of having been rejected by their families:

Natasha feels guilty about disclosures to social workers about her father. She only sees Mum once a fortnight. Mum is reluctant to increase visits. Natasha is only 13.

This young woman felt extremely guilty about the disclosures she had made – and blamed herself rather than her father's behaviour for subsequent events.

Workers reported that young people were often more forthcoming about stepfathers, or male partners of their mothers, who were rarely considered at all positively:

I think her Mum had a really abusive childhood and was in secure units from a young age. She has a diagnosed personality disorder and severe depression ... Jasmin's Mum has exposed her to numerous men who [have abused her]. There's only been one man that Mum has had a relationship with that hasn't abused her.

Young people's relationships with their mothers impacted on their relationships with project workers. Young people who were very protective of their mothers did not develop as close a relationship with project workers as in other cases. One young woman, whose sexual exploitation was thought to be funding her mother's drug habit, resisted forming anything more than a superficial relationship with the project worker:

Because of Mum's influence, well I am presuming it is Mum's influence, but I have not been able to see this young person for a long time. Every time I have rung her on her mobile phone we have lovely, long conversations and she has agreed to see me ... and I have turned up there, and there has been the most beautifully written note left hanging out of the letterbox for me ... and she is not there. The last note said: 'Don't bother knocking because I ain't in the house'.

Some of the young people who had 'given up on' their parents or been rejected by them, were dubious about the value of relationships with other adults, whether workers or carers. Others were desperate to find some reliable source of support and often formed very strong attachments to project workers.

In seven of the cases where relationships with parents were problematic or had broken down, grandparents were mentioned as providing significant attachments, care and support to the young people:

She was in contact with her grandparents so she did talk about her grandparents, they were extremely, extremely important. She would have weekly contact with them and if that was taken away there'd be a huge playing up. She'd run away and put herself at extreme risk. That was her way of saying 'I am not happy with this. I have to do something'.

She was brought up by grandma, who she feels is the only positive role member of the family.

In four cases aunts, and in two cases uncles, provided significant and supportive family relationships. A sister, a cousin and a grown-up nephew were mentioned in this regard in other case studies. For many young people, no significant positive familial relationship could be identified, and many were reliant for adult support entirely upon their relationships with professionals.

Neither of the young women who had been adopted as young children enjoyed positive relationships with their adoptive parents. One had re-entered the looked-after system after making an allegation of abuse against her adoptive father. The other had described how her adoptive mother had frequently condemned her to 'turning out no better' than her birth mother – who may herself have been sexually exploited.

In five cases mothers were described as being concerned, protective and able to improve their relationship with their daughter, or at least at the time of interview the worker felt optimistic that this might be the case:

Her Mum was trying her hardest to get Steffi out of the situation that she was in and giving as much support as she could. But she has other kids and was concerned for their safety, and I think she was fed up with the whole up and down situation. But since I have been involved she's attended every meeting and been really proactive about what she could do to help.

Sharon is the eldest and she says her mum just nags her and doesn't appreciate when she tries to be good ... I've only met her Mum once and she seems very nice, but I'm not sure if she maybe parents the younger children more and thinks that Sharon is of an age where she doesn't need to parent her.

One worker described the desperate sadness of a mother over the man her daughter had apparently 'chosen'. Having come from a very violent background herself, she had fled her violent husband while pregnant and built a new life for herself and her children, believing they would be able to enjoy lives without fear and pain.

It is often assumed that young women who have suffered or witnessed abuse as children go on to 'choose' abusive partners in adulthood, and thereby help to perpetuate an intergenerational cycle of violence. Indeed, some project workers interviewed suggested that for some of the young women such choices were based on ignorance of alternatives: 'it was all she knew', 'that's what her experience had taught her to expect'. However, these case studies suggest that there may also be a more prosaic link between childhood abuse and later exploitation: running away. It is a bitter irony that for some of these young women it was their attempts to escape abuse that made them vulnerable to sexual exploitation:

Meena ran away and stayed at her friend's. Of course she had no money, so the girl's mother got her 'working' to pay her way.

### Identity and isolation in adolescence: a window of vulnerability

During their teenage years young people need support as they move backwards and forwards between child and adult identities. Such support was not readily available to the young people in these case studies. Some had been forced to 'fend for themselves' in response to parental incapacity, others were attempting to make a premature move into adult lifestyles in order to escape unhappy or abusive familial or care contexts. Where parents, peers and school had failed to meet their needs for attention and identity there were often 'risky' adults eager to supply an alternative sub-culture.

### Disengagement from education

In adolescence, disengagement from education means disconnection from the majority of one's peers, from regular routines and the prospect of college or employment. It also increases the likelihood of meeting with older people involved in drugs, crime and prostitution who may offer somewhere to 'hang out' and a sense of acceptance and belonging. For girls, the loss of any educational or employment prospects may increase the importance of achieving an adult-like heterosexual relationship as an indicator of adult status.

Almost all the young people in these case studies had disengaged from education in their early teens. In some cases where family life had always been problematic, school life had been equally difficult. Some young people had been bullied, some had specific learning difficulties, or their distress had been 'acted out' in ways that were difficult for teachers and peers to cope with. There were cases where schools had worked hard to prevent young people from drifting away and others where alternative provision had been effective. However, there were some cases in which everyone had 'given up' on education:

She is not in school because the school has now taken her off their school roll for non-attendance which is nonsense really and she is just, well ... I don't know where she is.

School, when we first started working with him he hadn't been in school, they'd tried everything, they'd tried different programmes with him, I think he stopped engaging with school when he was about twelve or thirteen and they tried everything, they tried different programmes, I mean he's really creative and he loves drama, they tried every sort of package, but his lifestyle was too chaotic especially when he was in the care system.

And it also came out that she'd been bullied, she was being bullied at school and nothing was being done about it, so we kind of ... and obviously that links into self esteem, so we did, we kind of tackled the bullying issue by asking her 'what did she want to do about it?' By finding out what the school's bullying policy was – and this is what they should do and 'what do you want to do?'

Rosie came here on a week to week basis at this place and week by week has become a year, so it was always 'we'll see next month, we'll see next month' and so educational provision was generally been rubbish. She did start [a work placement] at one day a week ... I think it might've even gone up to three days ... I began to hear about the possibility of English and maths and home tuition but that never really materialised, it might've materialised into a couple of sessions but then it all ... she never really had any education, it's always discussed in case conference but nothing ever really happened.

[Her previous school was] for children who don't do so well in mainstream. It's not a very big school and from what I've asked her about it you have about eight people in a class but she absolutely loved this school, loved attending, just liked it. I think that's one of the things she does miss being at Earlswood being at this school because this was one positive thing in her life that she enjoyed she really did like this school.

Where young people had previously been high achievers in school, re-engaging them with education was easier. However, even where this appeared to have been successful, it could easily break down again because of the particular vulnerabilities of these young people and the patterns of absenting themselves that they had previously established:

At school she was a bright child but because of her problems lacked the ability to mix in large groups.

He'd been dead settled for ages ... School were always saying he was doing really well and expecting him to do well in his exams and ... this is really two months before his exams, he suddenly starts running away, you know, and ... I asked him but didn't really answer me. So I don't know if that did play a part of not or ... there were these expectations and he might not live up to them. I'm not sure about that.

Barnardo's services saw education as crucial to protecting young people in the present and providing options for their future. They were sometimes frustrated that schools and social services did not prioritise education for looked-after teenagers highly enough. Services sometimes worked very closely with school mentors and others to get a young person's education back on track. Returning to mainstream school after an extended period was often too difficult socially and academically, but there was enthusiasm for some alternative provisions:

[S]he is now attending ... an alternative education provision, which is great and her attendance has gone up and I think she sees herself as one of the brightest in the group which has been good for her confidence. But I think there is a problem with the fact that it is mornings only, and so it leaves her with a lot of spare time, especially when people are worried about her and what she is doing with her spare time to then give her more just seems ridiculous so we just slotted in and did afternoon sessions with her to get her here straight from school and stay for a couple of hours.

### Going missing

The involvement of young people in sexual exploitation does not occur overnight, and overt force is rarely used by third parties. Usually there is a combination of 'push' and 'pull' factors involving a family or living situation from which there is a desire to escape, and the promise of something that appears to be a better option.

'Going missing' is the most immediate indicator of vulnerability to sexual exploitation. In the lives of many of the young people featured in this evaluation it indicated a crucial transition period during which they moved back and forth 'between worlds':

It was just him and his Mum and they were driving each other insane in this flat together ... She's been very violent towards him in the past, when she was drinking, that led him to go missing. He went missing from a young age, but just running you know, running out of the house just to get away. Mum didn't report him. Now it's just stress. If Mum gets stressed it'll escalate. He was saying this weekend that [running away] was just to get away from it.

She's been missing from home on numerous occasions, but as soon as she was found and returned, she'd get back and just get the ... hell kicked out of her.

Few young people simply pack a bag and fail to leave a forwarding address. Most 'leave home' gradually, disappearing when things get too much and returning the next day to try and 'make up'. Some will be reported missing from home or care dozens of times over a year or more. During this period they are liable to become increasingly involved with other vulnerable young people and exploitative adults simply by virtue of needing somewhere to hang out, and people to hang out with. Angry, lonely young people are flattered and 'seduced' by the attention of more independent, streetwise young adults who sympathise with their situations, and will increasingly gravitate towards them:

She was constantly running away from placements. She would run away for the weekend and come back, and I'm sure some of it was made up, but I'm also sure a lot of it was true, that she just ran away and was on the streets, and bumped into people, and went back to people's houses. It was amazing how fast she built up a friendship network considering she was not a local girl, amazingly quickly.

They were running off together [from the residential unit], this other girl had the networks out there. She knew other men, she knew men she'd given her phone number to in the past, or had made connections with while running and they would stay in their flat for a couple of days, or they would run home to the other girl's mother ... and there was a question mark whether the other girl's mother was involved in prostitution ... But then Penny's behaviour drastically deteriorated, she started to abscond and was away for longer periods, she was not looking after herself when she came back either.

Her parents regularly reported her missing, which was helpful in terms of us working with her really. When she was first missing it was probably on a weekly basis, she'd be there overnight. Then I think she'd be going two, three nights a week, sporadic, depending on his demands.

There were instances where overstretched teams, poor inter-agency co-ordination and a serious lack of appropriate placements hampered efforts at timely intervention when a young person went missing:

Cheryl was first reported missing in 2002 when she was staying out very late and no one knew where she was. She also began missing school at this time. Her periods of missing from home and school have gradually deteriorated, and her [primary carer] found it hard to continually report her missing. In 2004 the referral we got came in regards to her going missing and being in the company of an older male ... she was missing, living in a car, and the male he was out of prison [where he'd been serving a sentence for] three counts of bodily harm and rape of a 16 year old girl.

### Desperately seeking adulthood: routes into exploitation

So far we have described the cumulative risk factors for sexual exploitation in the lives of this sample of young people. Unhappy at home and in school, these young people absented themselves from both, and entered a marginal world in which they were reliant for shelter,



'protection' and entertainment on its adult inhabitants. In the 35 case studies of young women, 32 had a clearly identified route into sexual exploitation (the remaining three were at a lower level of risk or an earlier stage). In 21 cases this involved a relationship with an adult man the young woman identified as her 'boyfriend'. In 13 instances the case material clearly shows that these relationships precisely fit the model of the pimp/'boyfriend' deliberately grooming a teenage girl for the purposes of prostitution as described by Sara Swann (Barnardo's, 1998). These men tended to be in their early and mid-twenties.

In five cases a much older male was involved; in each case he was a known or convicted sex offender and appeared to be primarily interested in the girl for his own use – although issues of being 'shared' or sold to 'friends' also appeared, this was not in a pimping arena. At 12 and 13 these were the youngest girls in the sample, and despite the fact that the men involved were in their 30s, 40s and 50s, they too considered their abuser to be their 'boyfriend'.

In three cases young women had slightly older boyfriends (age gap less than 5 years) with a drug problem, but while they 'worked' in order to support themselves and their boyfriend's habit, there was apparently no direct coercion. In one case a young woman had an extremely violent boyfriend her own age.

Three young women had become associated with a group or network within which they were then exploited. Five young women had been initially 'groomed' or introduced to prostitution by older women, and three by peers. These routes into sexual exploitation were not mutually exclusive. Adult women appeared to 'groom' girls on behalf of male associates, teenage girls introduced their peers to their 'boyfriend's' friends, and one member of a group might become a 'boyfriend', pimp or 'protector'.

### Exploitative relationships

Exploitative relationships with adult men are crucial to the involvement of many young women in formal or informal prostitution. These relationships act to ensnare girls in an attachment they regard themselves as having freely chosen:

The term 'boyfriend' is crucial, as it is the young woman's perception of their relationship that sustains the control and abuse. (Barnardo's, 1998: 13)

[S]he saw him as loving and caring for her. He looked after her; fed her; let her do what she wanted, and it was hard having a discussion with her about how that relationship came about, and how he might be abusing her; given the way they met.

She had a boyfriend, and to work with Sharon I had to work with him too. He was an ex-heroin user and was also using other stuff. She was 15, he was 19. She wouldn't move anywhere without him – so social services wouldn't accommodate her. They were saying to her 'Leave him, leave Mark'. But she wouldn't. She didn't have anyone in the world but him ... she wanted to be with him. And anyway, the places they were going to house her in she'd have been too scared to be there by herself anyway ... He'd had previous relationships with girls that were involved in prostitution. He knew what to do ... She [still] doesn't want to admit that he would do that to her. But he would take the money off her as soon as she'd done what she had to do ... and tell her to hurry up about it.

In some cases young women had moved from one exploitative relationship to another:

The original male that groomed her was in prison when I met her. He's back out now, but she's had numerous adult boyfriends since him who've been linked to prostitution or drugs ... The latest ... she still sees him as a bit of a protector ... because he ordered her around so much he'd kind of took on a kind of father role for her ... Because of her exploitation beforehand he would call her things like 'slut' and 'whore' ... and said 'I don't want you in that lifestyle any more', separated her from those groups. So it looks like he's saying 'I want to protect you' ... when actually from the information I've got now he is putting her in contact with males. He's remained very controlling and abusive instead of [really] freeing her from her ties.

I think very much she has become [involved] in her own right now. I'm not saying it was a conscious decision of hers because it had already all happened and now, certainly in the last year or so ... she's chosen that lifestyle after being groomed. Do you see what I mean? There's nobody forcing her to do it now ... I think it was the older prostitute led her into it, and then she got raped, then there was an older male coming on the scene, that lasted quite a short time and another one's involved now.

In five of the cases described the services knew that the men whom the young women were involved with had previously exploited other young women:

The workers had information about him from a previous service user and from adult working women. He was a crack user and previous coercer of young women.

In the cases where girls became connected to a group, the 'boyfriend' role played by one of the young men was often quickly dropped, and more overt forms of pressure applied:

These guys had picked her up, her and her friend. They'd started off as friends but it ended up they were working her, making her sell sex. She said at first these guys, one of which was her 'boyfriend' had paid for her and her friend to stay at a hotel while they were missing because they'd nowhere to stay. So for the first few nights these guys paid. Anyway after that they started to say they didn't have the money to pay ... but they knew how she could get the money to pay for it ... the so-called 'boyfriend' started phoning different numbers and fixing her up with different people for sex. Now this could be anything from taking her to a bedsit, or a house or sometimes meeting in a car park. And they'd sit and wait in the car while she was having sex with these punters in cars or bedsits.

In some cases young people introduced their peers to the sexually exploitative adults they were themselves associated with:

Our greatest worry was we were meeting a number of young women who had met her and had subsequently been abused ... Now that wasn't to say that she was grooming them, because I don't think she was even aware that she was in an abusive lifestyle herself, but her associates were targeting the young women she was hanging out with.

She was getting friendship because she was absconding with another young person and it felt as if she belonged. She had someone who was giving her that sense of 'you are a friend', you are part and parcel, we do things together ... and they were running off and making attachments to boys and men so she was also gaining that sense of belonging. ... even though it was belonging in the wrong sense ... it wasn't the right kind of friendship, relationship and love. But she didn't know what was right and what she was worthy of.

In some instances, while it was obvious that looked-after young women were being drawn into sexually exploitative relationships, there was an equally clear failure by social services to provide either appropriate accommodation or adequate protection:

At 15 she was placed in a bed and breakfast where there were adult women sex workers and a Schedule 1 offender (non-paedophile). She went back on the streets. The boyfriend figure was very influential.

The other children at the unit were saying she might be dead – she was ingesting so many drugs ... [Then] her mother's boyfriend started turning up at the unit in a very flash car, with money he was giving to the children. Young women flew out of the unit to go and see him. The staff described him as a 'Pied Piper' figure.

Not all relationships with an older boyfriend were reported as being exploitative, and it was clear that workers explored them with sensitivity to the young person's perspective:

Was he a lot older than her?

No more than five years I would say. It just seems he has his own damage issues. Not that you can guarantee ... but I didn't get a negative ... It's not a healthy relationship. I wouldn't deny that for a single second ... that they are not good for each other. But I think he's just another lost soul really.

### Drug and alcohol use/misuse

Drug and alcohol use were of concern to workers in 30 case studies. Problematic alcohol use and recreational cannabis use were more common than other drug use.

Young people's parents' dependency on drug and alcohol was significant in 14 of the cases, and parental dependency often facilitated the young person's own dependency and route into exploitation.

Mum was a drug user and probably suffering from depression, quite serious depression, and trying to manage this difficult partner who could be aggressive and so I think Mum's probably neglecting the young person.

There were issues of her Mum's alcohol and stuff like that as well, but basically her and her wee cousin were hanging about the streets and caught themselves heavy heroin habit. They very, very quickly got caught up in the whole scene and excitement of it and all that.

The young person that I was working with was selling sex to feed her mother's drug habit and also her own drug habit as well, although she was in denial about her own drug misuse she was very open with me about her mother's drug misuse.

Sometimes the drug use was a straightforward attempt at 'self medication' in response to emotional pain. As one worker described it: 'Annette met somebody who introduced her to something that would take away all that pain. So she got a crack addiction.' Drug use was often closely associated with sexual exploitation in a variety of ways:

This young woman was befriended by an older woman who was street working and she got drawn in. Saw it as 'easy money' to fund drug use. She was finding £50 a day for heroin through street sex work.

In 10 cases problematic drug use was identified as subsequent to, or associated with, grooming for abuse, either by a 'boyfriend/pimp' or a group of adult men:

[She was 13 and] this 19 year old boyfriend was supposed to be working for a drug dealer ... and she'd been staying out late at night ... [When she told me about this abuse by a group of men] she just said 'I felt so dirty' and ... 'but most of the time I were on drugs or drink' and she said a lot of it were a blur and ... They were giving, I think she said she had crack, coke ... and I think they might have drugged her up with something else that she didn't know about as well.

These so-called pals turned out to be older men who would offer Dan a bed for the night, supply him with 'E's' and alcohol. Eventually Dan disclosed that the men were making requests for him to provide sexual favours for these 'treats' to continue. When he refused he was threatened with violence.

In four cases where young women saw themselves as 'working' in order to support an older boyfriend's drug habit, they did not apparently use drugs themselves:

They didn't see it as a working arrangement, she was doing it for him, she loved him ... I mean she was hardly getting anything from it herself apart from, you know, horrible, potential awful things happening ... She's managed to keep herself away from that [the drugs] ... she's smoked a bit of marijuana but nothing, you know, she doesn't drink, she's never used heroin she wouldn't dream of it, she didn't like him using it, she didn't like the culture of it at all, she did try to help him, you know, she's tried to help him stop using, I know it's amazing isn't it, but she's never ever been drawn into that, that shows a lot of will power [given] the situation that she was in.

In four cases it seemed clear that the young person's drug habit had developed prior to, and independently of any sexual exploitation. Young people whose routes into sexual exploitation were linked to their prior drug misuse, appeared to become less enmeshed in relationships associated with prostitution than those who were introduced through grooming and sexually exploitative relationships. Their routes out of exploitation also appeared to be easier because of the lack of significant attachments. Where drugs were a significant issue, addressing the drug problem rapidly reduced the risk of ongoing exploitation:

She met an older guy who offered her a joint and unbeknown to her she smoked the joint and it was laced with crack cocaine and that is the start of everything. Then she liked it, she liked smoking it, she enjoyed it, she liked the taste, she liked the feeling that

she got so she would go to older men's flats in her school uniform and eventually they were offering her crack cocaine for sexual favours and then she was going down to the canal in her school uniform and giving guys blow jobs for rocks of crack cocaine so she was really putting herself in risky situations.

Incredibly, this young woman is a success story:

She went back into education and it has been pure determination that she – just from coming to Barnardo's literally she was on like a £100 habit a day. [She uses] nothing now. She is completely off drugs, she has had a baby, she has met her partner ... it is almost as if she doesn't acknowledge the sexual exploitation as the problem, it was the drugs that was the problem and so she stopped doing that then everything else was fine, everything she had to do was because of the drugs, it was more the drugs it wasn't because she was being sexually exploited first and then pushed into drugs.

You know like the drug use was really bad, she had abscesses, she was just an absolute mess and then I met her last night and she is looking brilliant. She is on 10 ml of methadone and things are going OK ... that is definitely a success story, whether it lasts for a period of time or not I don't know, but to get her out of that crisis I think has a lot to do with her own personal capacity as well I have to say because she is an incredible young woman, but I think for our involvement in terms of just keeping plodding away and just whatever they ask, we were there.

### Health and well-being

The physical and mental health of many of the young people in these case studies was severely compromised by their family histories and current lifestyles. Depression was a feature in a number of cases and self-harm or attempted suicide was identified in ten cases. The most recurrent issue discussed was the poor self-regard in which young people held themselves. Low self-esteem restricted the options young people saw themselves as having in life; in some cases it impacted on their self-care in terms of eating, hygiene and grooming, and their inability to see themselves as having a right to be valued and respected by others. Violence was a frequent experience, and sexual health – in terms of the risk and actuality of sexually transmitted infections (STIs) – was a core concern of workers. The minimisation of these issues by the young people themselves was described in case studies thus:

I think Becky has always suffered violence since she's been involved ... her boyfriend now, he's 37 ... a regular set of bruises and she will say 'I bruise easily' and I'll say 'You do if you're hit hard enough'. But ... she can't see the violence ... and she almost kind of like laughs it off.

The physical side is ... he'd slash the ties to her fingers – with a knife between the fingers. She'd say it was accidental 'oh, he didn't mean to do it' ... skin bruising on her arms ... Sexually violent I think at times and in respect of her sexual health he's given her a fair few STIs.

## Young men

The seven young men for whom services provided case studies shared many of the background characteristics of young women in the sample. However, in certain respects their experiences, difficulties and engagement with services were somewhat different. With such a small number of cases it is impossible to see them as 'representative' of any wider population of sexually exploited or 'at risk' young men, but given that there is so little research in this area it seems important to learn what we can from the data available. The young men were aged between 11 and 17 at the time of first contact with services – two were 13 and two were 14 years of age. Three were met 'on the street' in 'red light' areas by a street work service, and four were referred to Barnardo's services by social services. Three of the young men engaged well with the services although in two of these cases their contact was sporadic. The three 'street work' young men had occasional contact with outreach workers over many years (from the age of 17 to 25 in one instance).

He's 25 now ... There were short periods when he wasn't working if he was in a relationship at the time but without relationships he was always working. Some of the relationships were with men, some were with women this was his confusion he felt that was all linked to that one incident that happened to him as a young boy ... But it has tailed off in the past couple of years. Just isolated incidents over the past couple of years. Early 20s, late teens, it was a lot more solid more a way of life for him.

All except one had been 'looked after' for a substantial period of their childhoods, and five had been sexually abused prior to any issue of sexual exploitation arising. In five cases one or both parents had alcohol problems.

The two youngest boys at 11 and 12 had started going missing from care and been befriended on the street by men they regarded as their 'friends'. These men gave them a place to stay, drink and drugs in return for sex. One returned to his family for a while, but when his relationship with his parents broke down he ended up sleeping rough and 'working' to fund his drug habit. The other boy had severe emotional and behavioural problems. He was constantly missing, attacked residential staff and ended up in a secure unit for up to two years. There he has 'settled down' and is doing well:

Both his parents had serious alcohol problems and there was violence in the home from his father to his mother. From that he was taken into care from the age of 3. That's where he spend all his younger years apart from his time with foster parents. Rather than looking at other issues he felt that everything swung on this one incident ... [being sexually abused by a neighbour]

The exception in terms of family background was one young man who at 12 had been 'befriended' by a man in his 40s over a period of two years. He had then been sexually assaulted by him. He was beginning to 'explore his sexual identity' as a young gay man – but was unable to discuss this with his parents, who were otherwise supportive.

Jamie was middle class. His self image was quite good, not unhappy with himself. He was the type of young person that wants to please, this came through strongly in how he

described his relationship with the older man. He was very articulate and responsive and seemed to make the most of the service we offered. He saw me as a counsellor every week.

In each case study workers described the young men as having issues about their sexual identity. Four clearly identified themselves as gay or bisexual, but with the exception of Jamie, found this difficult to discuss. Issues of sexuality seemed bound up with difficulties in engaging with workers:

We do still see him kind of in the park. He doesn't say explicitly he's working but it's always, he's pretty open about it kind of thing, in a kind of non-open way ... and he's now maybe seventeen, eighteen. So technically he's an adult kind of thing but he is still quite vulnerable. But it's difficult 'cause you kind of think you're getting something from, you know when you're talking with him [but] he's quite a kind of closed book. Keeps his cards very close to his chest. Very polite, you know, engaging as in a kind of chat kind of way, but he doesn't really tell you anything meaningful.

It's a way to make money and because of the uncertainty of his sexuality that led him into that.

In one instance engagement with the service had been facilitated by a change of key worker, as the young man felt more comfortable talking to a woman member of staff.

In two cases there were offending issues:

He was offending as well ... Stealing from clients and also violent attacks, sometimes under the influence, sometimes not. Violence sometimes threatening support workers. Taking things off the scale ... He was focusing on the wrong side of things and losing touch with reality at times so things were breaking down for him. The process was just repeating itself. He'd go back out working again and offending and back in jail. You'd try and get him set up again. That happened quite a lot.

For these young men, as for the young women, there was considerable denial of sexual exploitation in their relationships with adult men – who were often seen as 'mates' with whom sexual favours were a 'fair trade' for drugs and access to an adult lifestyle:

He constantly referred to all these, the males that they were going out in cars with, they were going to, what they call 'cruisers'. They were going clubbing, they were going out of the area but it was always, he saw it as friends, and um if he did anything with anybody it was through his consent, yes they might have given him vodka, they might have given him E's but it wasn't prostitution, or anything like that because 'that's disgusting and they just wouldn't do that'.

This young man was, however, extremely concerned for the well-being of the young woman he frequently absconded with, who was clearly being drawn into more formal prostitution. One worker tried to explain what was different about working with the denial from young men that there was anything problematic about their lifestyle:



It just seems a bit different for boys. The whole culture supports something much more promiscuous – and especially maybe for gay men ... lots of partners, lots of sex, having sex with someone and not knowing his name isn't sordid, there's not the same stigma. It's being poor and homeless and addicted that's more the stigma. I think for some maybe the line between cruising and working isn't always that clear, I don't know ... but it's like the boundaries are a bit more blurred for boys.

## Conclusion

The analysis of these 42 case studies provides additional support for two concepts developed in Barnardo's previous research concerning the sexual exploitation of young people: the importance of understanding the factors which make particular young people vulnerable to sexual exploitation, and the usefulness of defining sexual exploitation as incorporating a spectrum of abusive relationships rather than conforming to a single model.

In the course of research conducted for the Scottish Executive on the use of secure accommodation for sexually exploited young people (Creegan, Scott and Smith, 2005), we identified both underlying and immediate vulnerability factors which put young people at risk of sexual exploitation, and stressed the necessity for effective intervention in their lives to address both:

### Underlying vulnerability factors

- Physical and sexual abuse
- Neglect and emotional abuse
- Domestic violence
- Parental drug/alcohol misuse
- Parental mental health problems
- Family breakdown.

### Immediate vulnerability factors

- Going missing
- Placement breakdown
- Disengagement from education
- Drugs/alcohol
- Homelessness
- Peers' involvement in prostitution
- Association with 'risky' adults
- Sexual identity issues (young men).

This evaluation confirms the salience of such factors in understanding young people's routes into sexually exploitative relationships.

The case studies analysed here also confirm our understanding of sexual exploitation as incorporating a spectrum of experience ranging from what is generally referred to as 'child



sexual abuse' at one end to 'formal prostitution' at the other. Many young people are first drawn into 'informal exploitation' where sex is exchanged for drugs or somewhere to stay. Many of the young women rapidly become engaged in a coercive relationship with an adult man who grooms them for more formal prostitution.

The young people whose experiences are discussed here present three major challenges to services attempting to intervene in their lives. First, they do not recognise their own exploitation – particularly in the initial stages of their involvement. Second, by virtue of their previous experiences they are extremely 'needy' for the attention, 'love' and sense of belonging that their abusers supply. Third, they have little if any experience of reliable, supportive adults, distrust professionals, and are convinced that they are best served by leaving childhood behind and looking after their own interests.

# 3. Outcomes for young people

## Summary

This is the first study in the UK which has attempted to evaluate quantitatively the success of specialist services in achieving positive outcomes for young people who are being sexually exploited. Quantitative research took place in ten services, both to evaluate how successful specialist services are in achieving positive change with sexually exploited young people, and to develop a greater understanding of the population characteristics of young people accessing sexual exploitation services.

The overall sample consisted of 557 young people with whom an initial assessment was undertaken between August 2003 and August 2005. The analysis of outcomes is based on a sub-sample of 226 children and young people aged under 18 with whom the service had a sustained relationship.

The overall sample consisted of 454 young women (81 per cent) and 103 young men (19 per cent). The mean average age of young people accessing services was 16 years, with a range from 10 to 27 years. For under 18s, young women made up 86 per cent of the 387 total, with a mean average age at assessment of 15 years.

All participants received an initial assessment. Of these, 71 per cent of young people stayed with the service long enough for at least one review. Our analysis shows that these young people had higher risk scores, suggesting that services were working more intensively with those at higher risk. At initial assessment, almost half had either experienced exploitation or were being currently exploited. Seventy-four per cent were assessed to be at high risk.

At final review our analysis shows a highly significant reduction in the level of sexual exploitation risk for children and young people aged under 18. The reduction was particularly marked for those young people who were experiencing definite current exploitation at initial assessment. Seventy-five per cent (n=44) showed a reduced level of exploitation and of these, 34 per cent (n=19) at final review were in a currently stable situation and had exited exploitative relationships.

Services successfully reduced risk factors for young people across five out of six measures: going missing, accommodation need, relationship with carers, rights and risk awareness and engagement with services. There was no statistically significant change in the sixth factor, engagement with education.

In conclusion, our statistical analyses comparing levels of risk for young people at initial assessment and final review provide substantial evidence that sexual exploitation services are successful in achieving improved outcomes for young people at risk of, or experiencing, sexual exploitation. Particularly substantial reductions in risk were found for young people on measures of sexual exploitation and going missing. Positive changes were also observed for protective factors, with substantial improvements observed for young people's awareness of their individual rights and their engagement with Barnardo's services.

This is the first study in the UK which has attempted to evaluate quantitatively the success of specialist services in achieving positive outcomes for young people who are being sexually exploited. As part of this national evaluation of Barnardo's sexual exploitation services, quantitative research took place with ten services, with the twin aims of evaluating how successful specialist services are in bringing about positive change in sexually exploited young people's lives and developing a greater understanding of the population characteristics of young people accessing sexual exploitation services.

Data were collected using an outcome monitoring form (OMF) as part of initial assessment (IA) and at each of up to three subsequent reviews – including a final review when a case was closed (see Appendix E). The OMF was a specifically designed closed questionnaire covering 14 items reflecting Barnardo's national sexual exploitation outcomes and known risk factors for sexual exploitation identified from existing research literature.

The overall sample consisted of 557 young people with whom an initial assessment was undertaken in one of 10 Barnardo's services during the 24-month period between August 2003 and August 2005. The population characteristics discussed below are based on this sample. It should be noted that this sample does not represent all Barnardo's service users across the 10 services. Some young people have 'casual' contact with a service, eg by telephone or by attending a drop-in, but their contact allows no opportunity for an assessment to be undertaken.

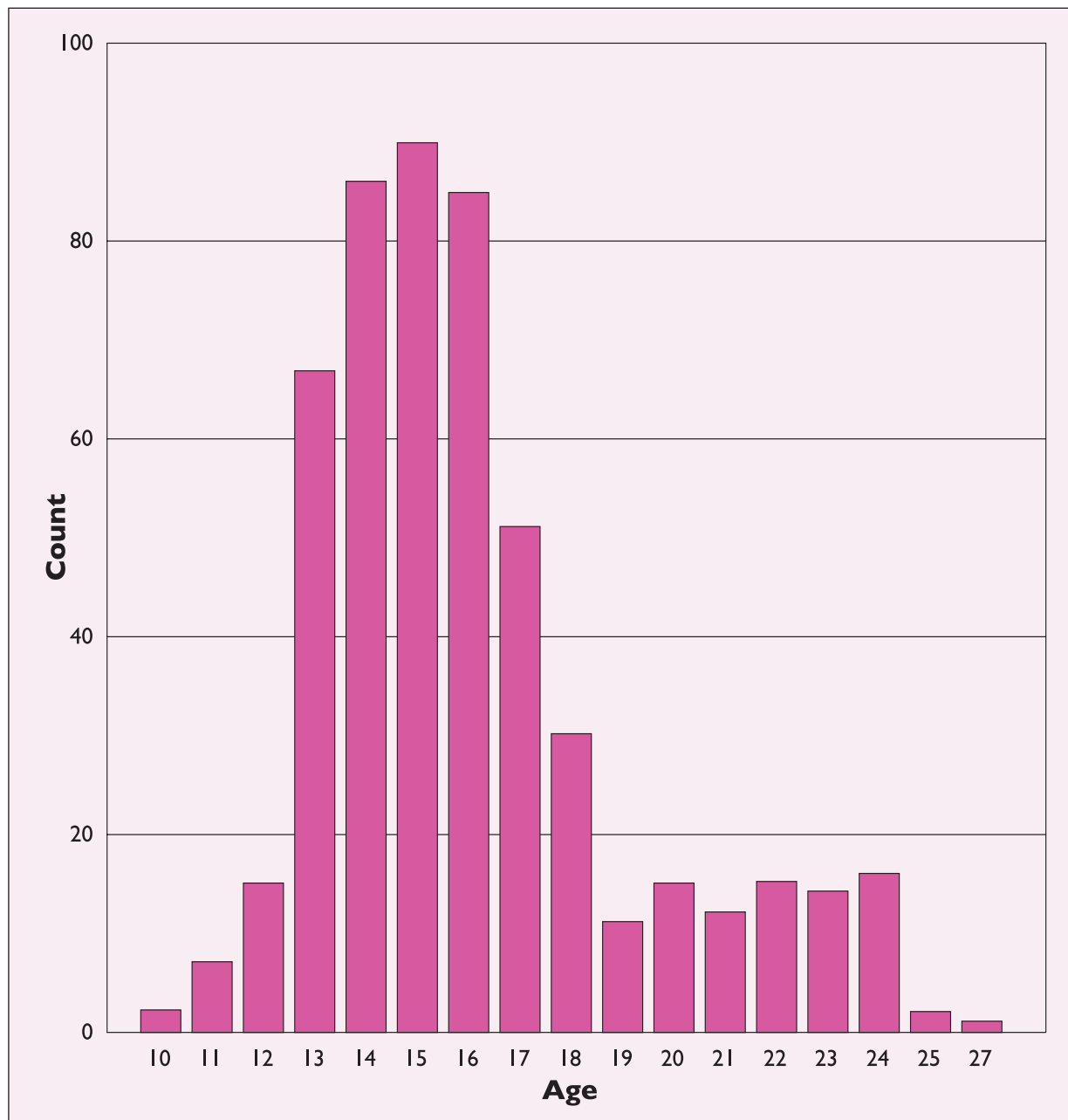
The analysis of outcomes for service users is based on a sub-sample of 226 under 18s with whom an initial assessment and at least one review was completed. This sub-sample excludes over 18s and the users of one exclusively street-based service. The decision to focus our analysis on under 18s was made because the risk factors for sexual exploitation primarily relate to young people under 18, rather than to older young people, eg going missing, engagement with education and relationship with carers. Furthermore, due to the different nature of Barnardo's work with young people over 18 there was a higher level of missing data for this group.

## Population characteristics

Young women constituted 81 per cent (n=454) of the overall sample and young men 19 per cent (n=103). Young men made up a larger percentage of young people over 18, accounting for 25 per cent of this group. The age range of young people was from 10 to 27 years and the

mean age overall was 16, with mean ages of 15 for young people under 18, and 21 for young people aged 18 and over. The biggest difference is observed between the ages of 12 and 13, with an 11 per cent increase in the number of young people attending services at 13.

Figure 1: Age of young people accessing Barnardo's sexual exploitation services



Information on age at initial assessment was provided for 109 young people over 18 and 387 young people under the age of 18 (excluding 61 cases from a street-based service). Of these 387 young people, 86 per cent were young women, with age data provided on 54 young men compared to 333 young women. A mean age of 14 (modal age of 13)<sup>7</sup> is found amongst young men with whom initial assessments were undertaken, compared to a mean and modal age of 15 for young women.

<sup>7</sup> The mean age is the sum of all ages divided by the number of participants; the modal age is the most common age in the set.

The experience of violence in childhood (sexual and physical abuse or domestic violence) was identified in 128 of the 557 initial assessments (23 per cent of cases). At initial assessment, 129 young people were recorded as using substances on a daily basis (either drugs and/or alcohol) with a further 193 young people using substances weekly. These are most certainly underestimates of the prevalence of these issues in the population, as disclosure of abuse and substance use tends to be gradual as trust develops. The case study analysis confirms this. Forty-three per cent (n=239) of young people had an allocated social worker; while 131 (23 per cent) of young people had a history of being 'looked after' by their local authority.

### Young people reaching review

An initial assessment and at least one review were undertaken in 71 per cent of cases of young people under 18 (226 out of 317 young people).<sup>8</sup> In 42 cases information was given on why cases were closed before a first review was undertaken. A variety of reasons were provided by practitioners, with the most common being: work completed (9 cases), non-engagement (8 cases), young person moving away (5 cases) and inappropriate referral (6 cases). Some of these young people may have only had contact with the service at their initial assessment; others may have had more contact, but over a relatively short period. Reasons for cases being closed were re-coded into three categories (positive, neutral and negative outcomes). In 32 of the 42 cases where young people did not get to review there was a positive or neutral outcome (see Table 3 below).

Table 3: Outcomes for young people not reaching a first review

Outcome	Number
Negative (eg not engaged, refusal of service, no contact)	10
Neutral (eg moved away from area, inappropriate referral)	17
Positive (eg work completed, young person no longer at risk)	15

Young men were more likely than young women to reach a first review, with 80 per cent of young men reaching review stage one compared to 70 per cent of young women. No differences are observed in the ethnic breakdown of the sample at initial assessment, first or final review.

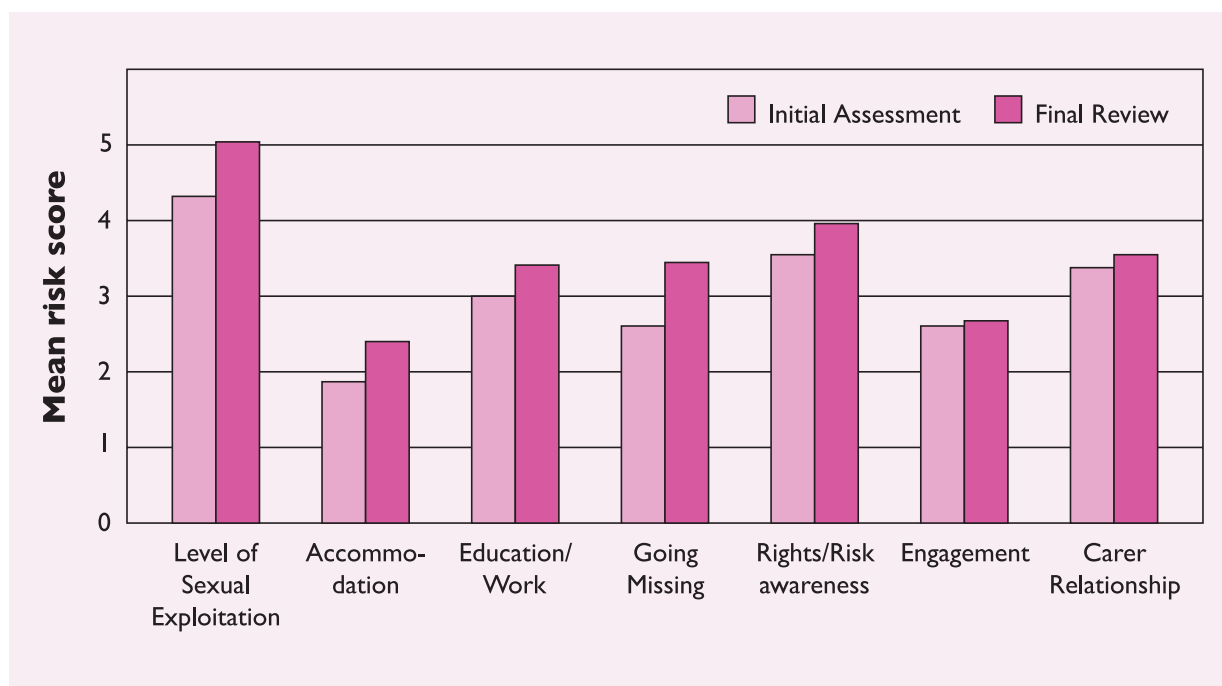
Independent sample t-tests<sup>9</sup> revealed significantly higher risk scores for young people who reached final review on measures of sexual exploitation, poor educational engagement, going missing and problematic accommodation compared to young people only assessed at initial assessment (see Figure 2). This reveals that the services were working most intensively with those young people at highest risk. No significant differences were found in young people's mean

<sup>8</sup> Seven cases were excluded from one service which only recorded young people at initial assessment (they are then referred on to a specialist Barnardo's sexual exploitation service). A further 74 cases were excluded from one service, as due to a period of change, outcome monitoring stopped for several months, and initial assessments were not followed up for later reviews (see Appendix F).

<sup>9</sup> A statistical test which looks at the difference in mean scores for two groups of young people.

scores on rights and risk awareness, relationships with carers or engagement with the service. In relation to the last of these, this would indicate that young people's initial willingness to engage with a service was not a significant factor in securing an ongoing relationship.

Figure 2: Differences in risk levels between those young people only seen at initial assessment and those reaching final review



## Findings

### Level of sexual exploitation

Data were provided on the level of sexual exploitation for 532 young people at initial assessment (missing data: n=25). Almost half of the young people in contact with services had either previously experienced exploitation or were currently being exploited. Seventy-four per cent of young people were assessed as being at high risk of exploitation compared to only 11 per cent of young people considered to be at low risk. This suggests that the majority of referrals to the 10 services during this period were appropriate.

Differences (non-significant) in level of sexual exploitation were found between age matched young men and women. Thirty per cent of young women at initial assessment were experiencing 'definite and current' exploitation compared to 17 per cent of young men. However, 69 per cent of young men were assessed as being at high risk of exploitation compared to 76 per cent of young women. In other words, at initial assessment more young women are known to have been exploited, whereas an almost equally high number of young men and young women are thought to be at high risk. This may well be a reflection of different levels of disclosure by gender.

Eighty per cent of young people over 18 were known to be experiencing current or previous exploitation. For young people under 18 the risk of exploitation increased with age, with 17 year olds having the highest mean score for sexual exploitation (see Figure 3).

Figure 3: Mean level of sexual exploitation by age

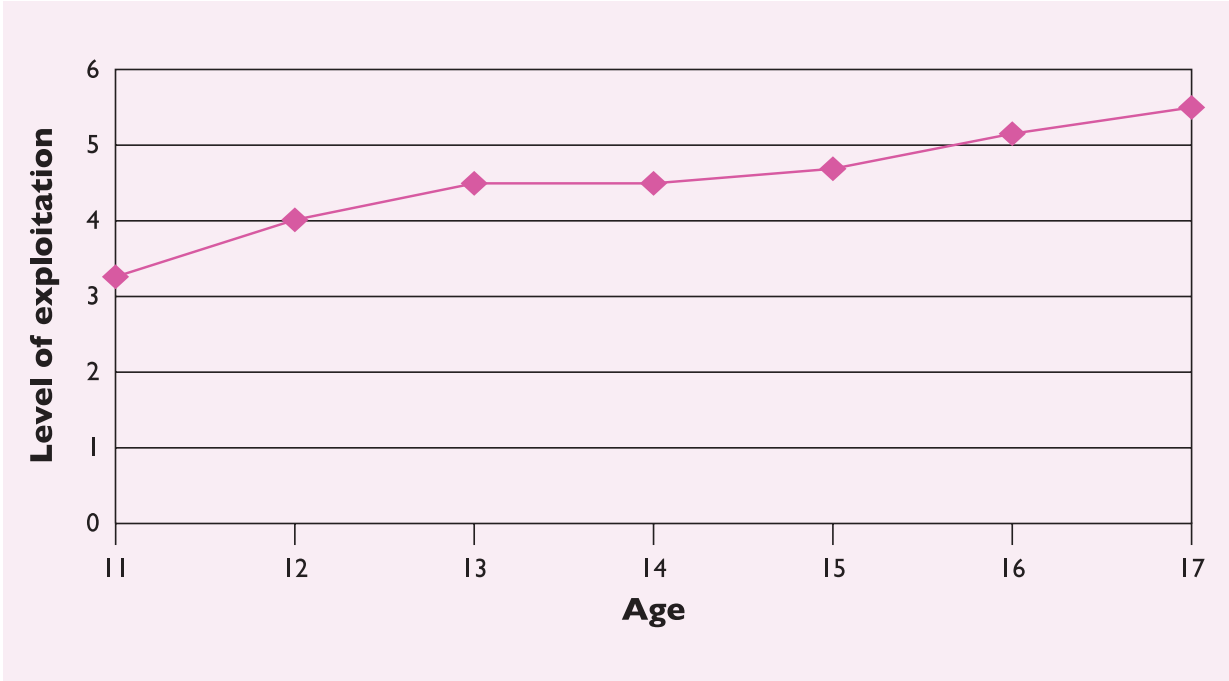


Figure 4: Level of sexual exploitation by age at initial assessment

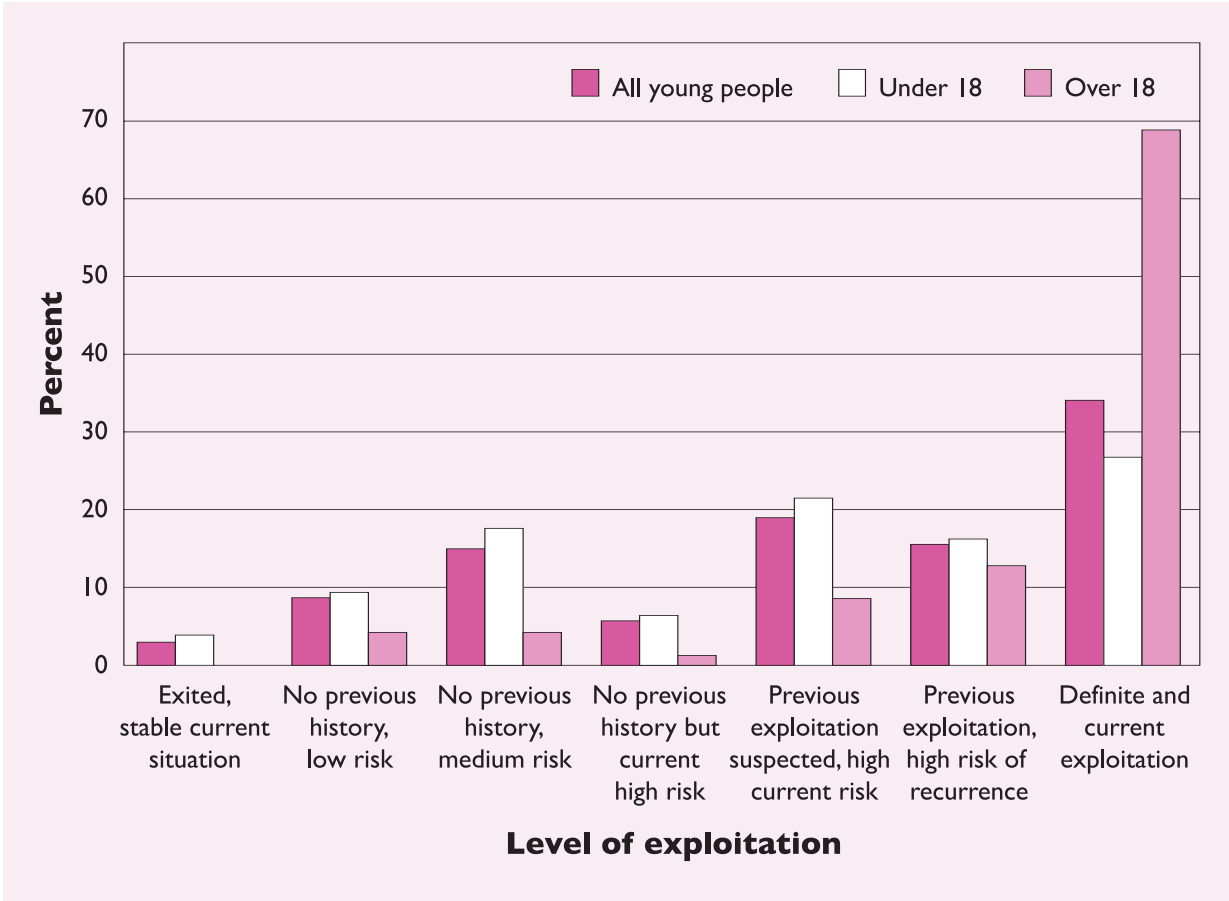
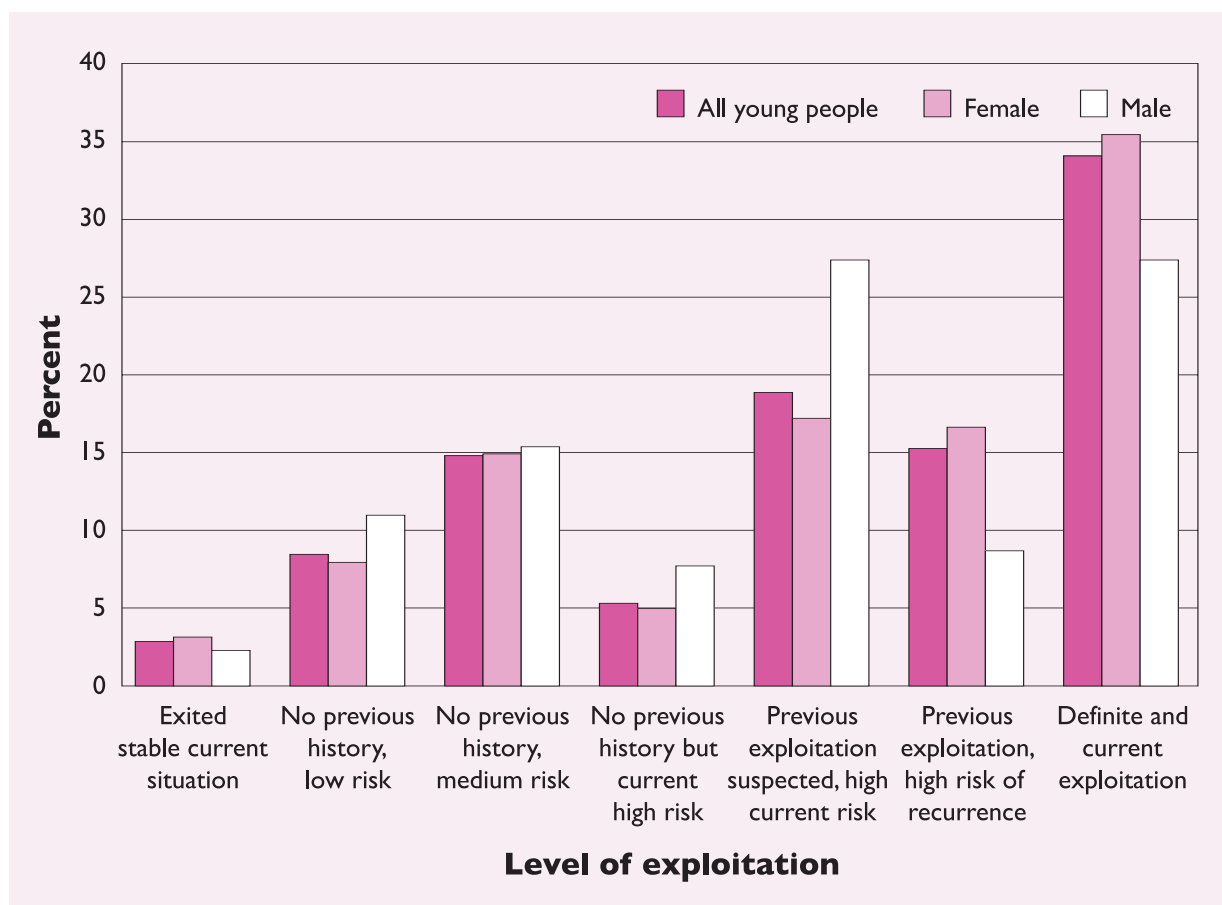


Figure 5: Level of exploitation at initial assessment by gender



**Risk factors associated with sexual exploitation**

The OMF was designed to monitor risk across a number of areas. In analysing the data, an overall ‘risk score’ was calculated according to young people’s scores on six lifestyle risk scales: going missing, accommodation, rights and risk awareness, engagement with education, level of contact/engagement with service, and relationship with carers. Scores were computed for cases where there was no incomplete data on any of the variables (n=225) and banded as in Table 4 and Figure 6.

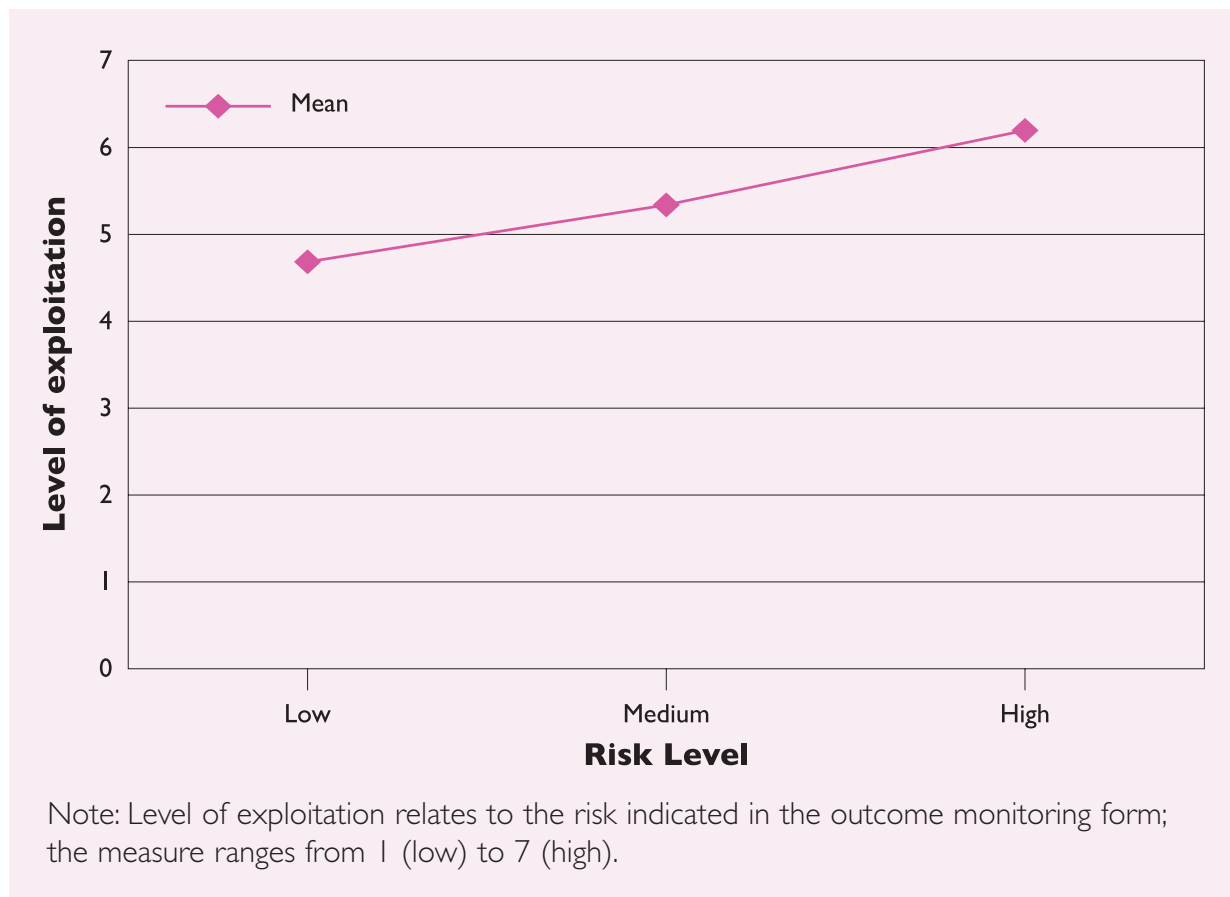
Table 4: Young people and overall level of risk

Risk	Frequency	Percent
Low	85	38
Medium	84	37
High	56	25
Total	225	100

As might be anticipated, higher mean scores are observed for risk of exploitation in line with higher risk lifestyle categories (Table 4 and Figure 6).



Figure 6: Mean level of exploitation by risk category



### Level of sexual exploitation at final review compared to initial assessment

For young people under 18 there was a highly significant reduction in the level of sexual exploitation between initial assessment and their final review ( $p=0.01$ ) (Tables 5 and 6). Of 226 young people, 113 showed a reduction in the level of exploitation. Almost half of young people (46 per cent) at final review were considered to be at low risk or medium risk, compared to a quarter at initial assessment. An 11 per cent reduction was also found in the number of young people where previous exploitation was suspected with a high current risk.<sup>10</sup>

Particularly satisfactory results were found for young people who were experiencing definite and current exploitation at initial assessment: 75 per cent ( $n=44$ ) showed a reduced level of exploitation and of these, 34 per cent ( $n=19$ ) at final review were in a currently stable situation and had 'exited' exploitative relationships.

A significant difference was found in the level of sexual exploitation for young people over 18 at final review compared to initial assessment ( $p=0.05$ ) with a 14 per cent reduction in the number of young people experiencing definite and current exploitation.

<sup>10</sup> It should be noted that some young people will continue to access services after formal work has been completed, or will return for some additional support at a later date.

Table 5: Level of sexual exploitation by age: initial assessment and final review (%)

Review	Total sample		Young people under 18		Young people over 18	
	Initial assessment	Final review	Initial assessment	Final review	Initial assessment	Final review
Level of sexual exploitation						
Definite and current exploitation	37	24	29	13	63	54
Previous exploitation, high risk of recurrence	14	20	13	18	17	22
Previous exploitation suspected, high current risk	24	15	29	18	11	8
No previous history but current high risk	5	3	5	5	1	2
No previous history but medium risk	12	8	15	9	4	3
No previous history and low risk	6	12	7	15	4	6
Exited/stable current situation	2	18	2	22	0	5
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>

Table 6: Level of sexual exploitation by gender: initial assessment and final review (%)

Review	Total sample		Young men		Young women	
	Initial assessment	Final review	Initial assessment	Final review	Initial assessment	Final review
Level of sexual exploitation						
Definite and current exploitation	37	24	30	24	39	21
Previous exploitation, high risk of recurrence	14	20	10	21	15	16
Previous exploitation suspected, high current risk	24	15	32	14	22	20
No previous history but current high risk	5	4	3	4	5	3
No previous history but medium risk	12	8	15	8	12	8
No previous history and low risk	6	12	10	10	5	16
Exited/stable current situation	2	18	0	19	2	16
<b>Total</b>	<b>100</b>	<b>101</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>

### Risk factors associated with sexual exploitation: initial assessment and review

Paired samples t-tests<sup>11</sup> were conducted for going missing, accommodation need, engagement with education, relationship with carers, rights and risk awareness, and engagement with Barnardo's services. Inspection of means (see Appendix F) reveals that there was a significant reduction in the level of risk for mean scores between initial assessment and final review for young people across five of these six variables, with only engagement in education being statistically non-significant.

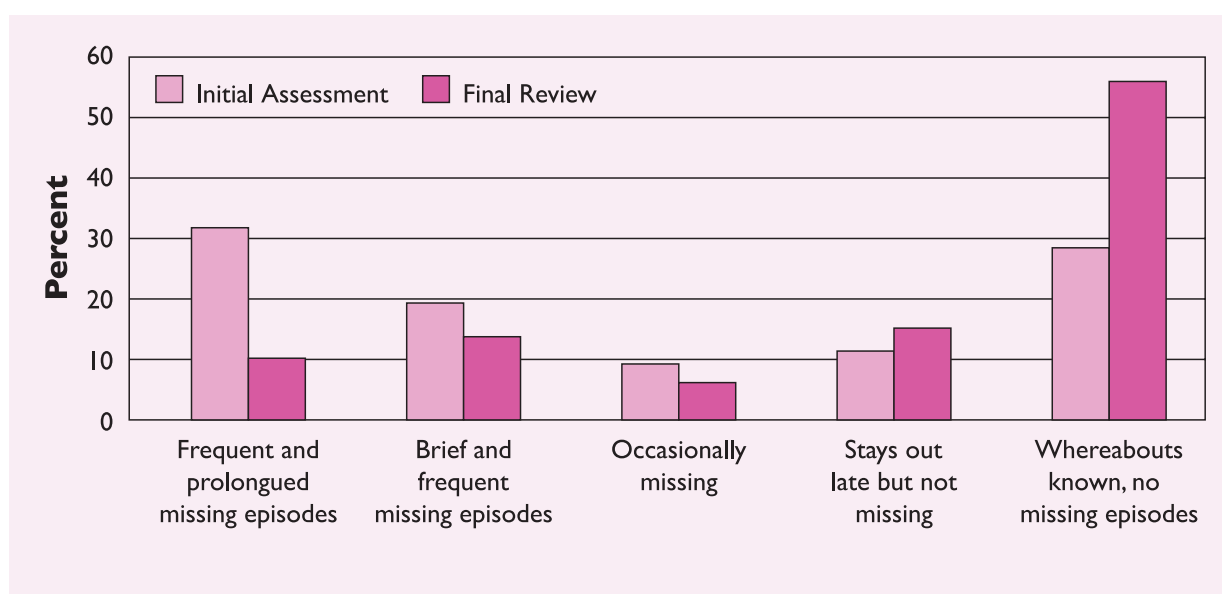
The highest levels of change for under 18s were in relation to a reduction in missing episodes, higher level of engagement with the service and an increase in young people's awareness of their rights and risk behaviours. Moderate effects were found for improvements in relationship with carers.

For over 18s significant change was found in relation to accommodation needs and rights and risk awareness.

### Missing

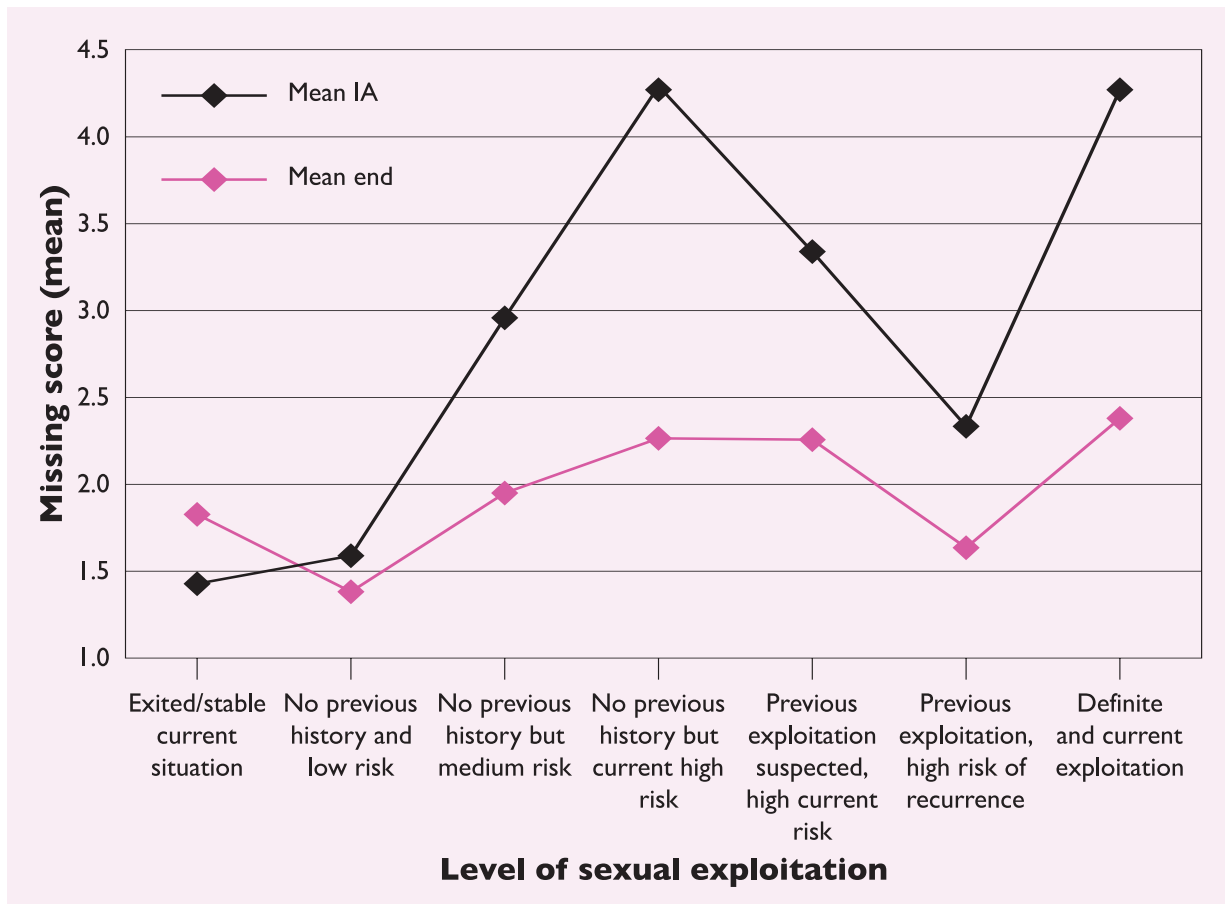
At initial assessment the majority of young people were going missing from home, with 63 per cent of young people being reported as having gone missing from home or care, and a third of young people having had frequent and prolonged missing episodes (Figure 7). Young people experiencing definite and current sexual exploitation showed the greatest risk for going missing (had the highest mean score). Interestingly, there are variations in missing scores for young people at high risk of sexual exploitation, as Figure 8 shows. Young people known to have experienced previous exploitation show a lower level of risk, compared to young people with no previous history but at current high or medium risk. This finding can perhaps be explained by the higher mean age at initial assessment for young people who have previously experienced exploitation and who are less likely to be reported missing once they reach 16.

Figure 7: Young people going missing at initial assessment and final review



<sup>11</sup> Paired sample t-tests: A statistical test which looks at the difference in mean scores on two separate occasions in one group of young people. The test can also be used when you have a matched pairs design, where young people are matched with a pair on specific criteria, eg age and level of sexual exploitation, to see if there are observed differences in the means.

Figure 8: Mean scores for going missing by level of exploitation at initial assessment (IA)



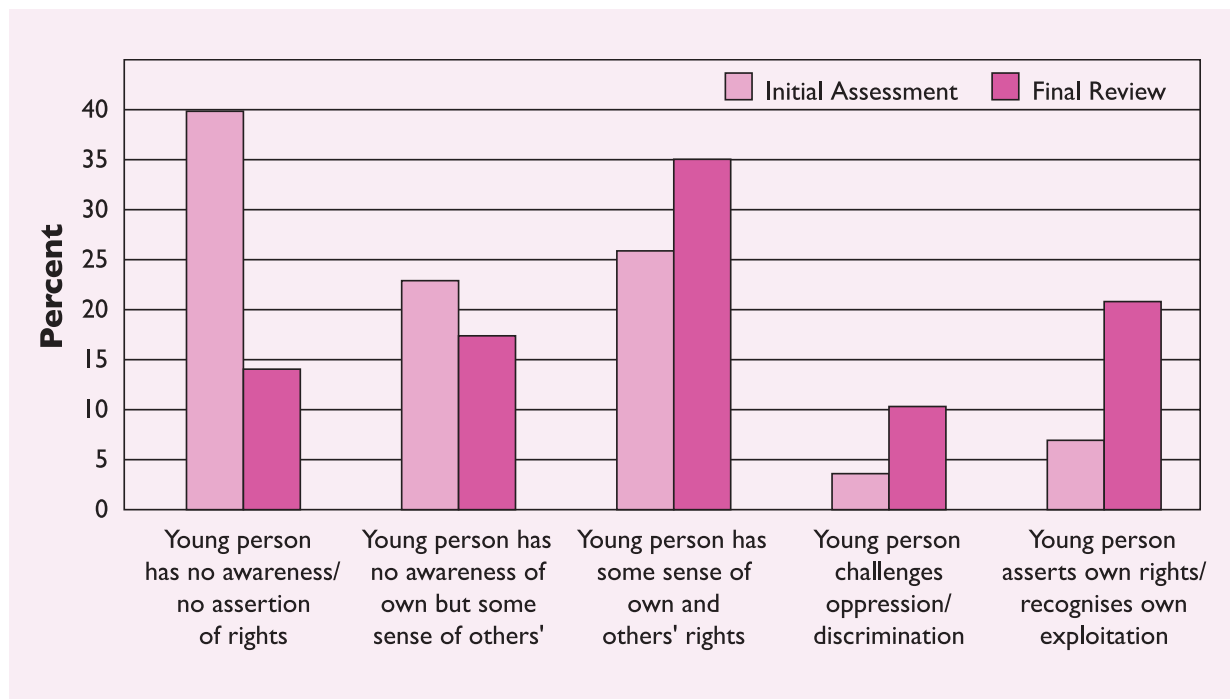
At final review a dramatic change in the pattern of going missing is found from initial assessment with 70 per cent of young people not going missing (very strong effect size). At the end of intervention there is a 23 per cent reduction in the number of young people recorded as having ‘frequent and prolonged’ missing episodes (see Figures 7 and 8). Furthermore, the number of young people going missing overall is reduced from 63 per cent to 31 per cent, with a 27 per cent increase in the number of young people who have no missing episodes by final review.

**Rights and risk awareness**

At initial assessment young people had a poor awareness of the risks they were taking and of their interpersonal rights, with 62 per cent of young people assessed as having no awareness of their own rights. Only 8 per cent of young people were assessed as being able to assert their own rights and recognise exploitation. At final review there was a 24 per cent reduction in the number of young people who were considered to have no awareness or no ability to assert their rights, and a 16 per cent increase in the number of young people considered to have good rights and risk awareness (Figure 9).

A paired samples t-test for young people over the age of 18 also reveals significant differences in mean scores at initial assessment and final review in relation to rights and risk awareness.

Figure 9: Rights and risk awareness at initial assessment and final review



### Accommodation

At initial assessment, 64 per cent of under 18s had a low accommodation need, while 22 per cent had a high/acute accommodation need. At final review a significant but small change was found with an 8 per cent reduction in the number of young people in high/acute need of accommodation.

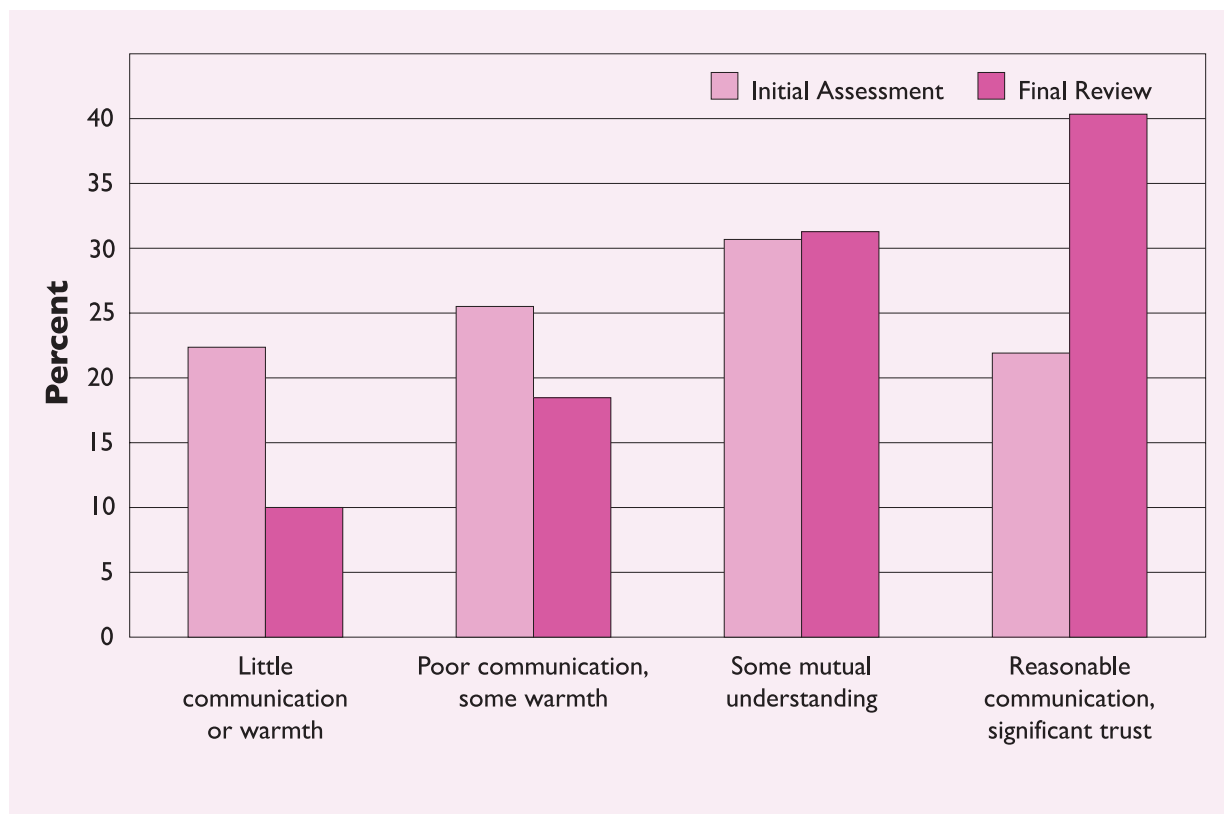
A different pattern of accommodation was found with young people over 18, with 52 per cent of young people having an acute or high accommodation need at initial assessment. A significant difference was found at final review with 45 per cent of young people having an acute or high accommodation need, while there was a 10 per cent increase in the number of young people with low or no need for appropriate accommodation.

### Relationship with carers

At initial assessment a mixed pattern was found for young people's relationships with carers (Figure 10). Young people experiencing definite and current sexual exploitation were more likely to have problematic relationships with their carers. Overall, 46 per cent of them were reported to have little or no communication with their carers, and 28 per cent to have poor communication.

At final review an increase was found in the number of young people having positive relationships with their carers, with 40 per cent of young people considered to have reasonable communication and trust with their carers, compared to 22 per cent at initial assessment.

Figure 10: Young people’s relationships with carer at initial assessment and final review



### Education

Over half of young people at initial assessment were disengaged from education. Fifty-five per cent were either permanently or temporarily excluded from school, not attending school/college, and not in employment. Fourteen per cent had regular but poor attendance at school/college, and 31 per cent attended school/college regularly. There were gender differences in engagement with education (non-significant): at initial assessment 41 per cent of the young men were engaged in education and attending regularly compared to only 32 per cent of young women. Almost all the young people over the age of 18 were in neither work nor education.

There was an increase (non-significant) in the number of young people attending school/college with 39 per cent attending regularly. At final review there was a small increase in the number of young people who were permanently excluded, had dropped out, or had no job – 44 per cent of young people, compared to 37 per cent at initial assessment.

This increase can mostly be attributed to the number of young people reaching school leaving age at the end of the intervention (with the mean age of service users being 15 at initial intervention, compared to a mean age of 16 at young people’s last review).<sup>12</sup>

12 A further issue is the limitation of the categories provided on the OMF, as in some instances young people were reported by practitioners to be starting to attend courses part time, or were beginning to re-engage in education through the service, but there were no categories for recording these outcomes.

### Contact/engagement with the service

We elected to monitor young people's engagement with service provision because so many teenagers who are going missing and spending time with 'risky' adults have already fallen through the statutory safety net. Their trust in adult care may have been broken at an early age and they are particularly wary of professionals. As engagement in protective relationships, and the ability to seek and use support, is an absolute prerequisite to achieving better outcomes for exploited and at-risk young people, the efficacy of Barnardo's services in forming relationships with these young people is the bedrock of our model of working.

At both initial assessment and final review a positive level of engagement was recorded. At initial assessment 32 per cent of young people had irregular contact but were interested in the service, and 19 per cent had regular contact, but were still wary of the service. A further 32 per cent of young people had regular contact with their key worker established. As would be expected at final review there is an increase in the number of young people who are 'moving on' from the service, while 48 per cent of young people had an established relationship with a key worker.

A paired samples t-test for young people over the age of 18 reveals significant differences in mean scores for young people at initial assessment and final review in relation to contact and engagement with the service. The eta squared statistic reveals this to be a strong effect size.

### Substance use, sexual health needs and experiences of violence

At initial assessment there was a comparatively low level of completion by practitioners of these categories on the OMF, and the completion rate was reduced even further by final review stage. As a result, the statistical analysis of change data for substance use, sexual health and violence categories has not been possible (See Appendix F).

From our consultations with practitioners and service managers it appears that the main reason for this is a lack of specific disclosure on these topics. Even if a child or young person discloses to their key worker in general terms about substance use, sexual health or violence, they rarely provide detailed enough information for the practitioner to assess change in levels of risk and subsequently record this on the OMF.

In addition, the majority of services operate specialist on-site provision for sexual health and substance use, facilitated by outside professionals, such as nurses. Children and young people consult these professionals separately under the overall umbrella of the service, and any information disclosed in these setting remains confidential. This is another reason why specific indications of change for children and young people in these areas are more likely to remain undisclosed to Barnardo's practitioners.

## Conclusion

Statistical analyses comparing levels of risk for young people at initial assessment and final review provide substantial evidence that sexual exploitation services are successful in achieving improved outcomes for young people at risk of or experiencing sexual exploitation. Particularly substantial reductions in risk were found for young people on measures of sexual exploitation and going missing. Positive changes were also observed for protective factors, with substantial improvements observed for young people's awareness of their individual rights and their engagement with Barnardo's services.

## 4. The Barnardo's model of practice

This section provides an account of how Barnardo's services work with young people. It outlines the main elements of a Barnardo's model of practice based on interviews with service managers and practitioners.

Barnardo's services aim to prevent sexual exploitation, increase the protection for young people being sexually exploited, and support them out of exploitation. In addition to direct work with young people, services carry out a range of activities including educational work in schools and other settings, training for other agencies and involvement in multi-agency strategic groups. However, this evaluation has focused specifically on the direct work of services with young people which aim to achieve outcomes via the reduction of risk and the promotion of protective factors in young people's lives.

The core features of Barnardo's model of practice can be summarised in the Four A's of Access, Attention, Assertive outreach and Advocacy.

### Access

Young people may access services via referral from another agency or by self-referral. Services have all contributed to the development of protocols in their area to ensure effective pathways of referral, and this has included inter-agency work to raise awareness of sexual exploitation and increase identification of young people at risk.

The majority of young people involved in, or at risk of sexual exploitation have chaotic lives and a history of poor relationships with helping professions. Consequently, accessibility has to be more than simply making a service available. Considerable efforts are made to ensure that services are provided in a safe, attractive environment, flexible and responsive to young people's needs, by staff who take time to build a trusting relationship. Providing support to young people on their own terms is crucial, as is honesty about the boundaries of confidentiality.

### Attention

Many sexually exploited young people have few, if any, concerned, attentive adults in their lives. With a history of abuse, family breakdown and poor parental relationships, often with a background of disruption in the looked-after system, it is hardly surprising that young people are attracted to the attention offered by unsafe, abusive adults. Our services aim to provide a different kind of attention; attention that will 'hook' a young person out of unsafe relationships into safe and positive ones. This entails focusing on the issues that matter to the young person and persistence over time.



Consistent and persistent attention from a named worker enables the development of a protective, supportive relationship within which the young people are safe enough to examine their lives and start to make changes.

### Assertive outreach

Establishing and maintaining contact is achieved through a range of methods, including regular texting, calls and cards, arranging to meet on the young person's 'home ground' or at venues where they feel comfortable. The steady persistence of workers is eventually understood as being a genuine demonstration of concern and an indication of reliability. Such persistent engagement techniques are particularly important to counteract the influence of, often equally persistent, abusive adults.

### Advocacy

Effective support to young people has to involve a range of agencies. Many of the young people receiving a service from Barnardo's have been failed by previous services and a key role of staff is to ensure that they can advocate for the provision they need.

This advocacy can give rise to tension between agencies, but an important aspect of Barnardo's work is to establish and maintain effective inter-agency protocols and practices which keep the needs of young people at the centre.

Our interviews with services and analysis of case histories have highlighted a number of factors which can act as 'turning points' in young peoples lives, where advocacy for the right kind of support at the right time can be particularly important. These include advocacy to get young people into education and good quality accommodation and to get them the support they need as parents.

Involving young people themselves in developing services helps to build the skills and confidence necessary for young people to become self-advocates.

Providing support to young people in such difficult circumstances inevitably has an impact on staff. Sustaining support to young people has to involve sustaining support to the staff team, and a key element of Barnardo's services is a recognition of the necessity of looking after the needs of their staff.

## Services for sexually exploited young people

There is limited research on service provision for sexually exploited young people and most tends to focus on the approach of services rather than on outcomes for service users. However, there are some common themes which emerge from these studies.

A co-ordinated, multi-agency approach is recommended throughout the literature. Studies have identified that young women involved in sexual exploitation often have a range of complex needs which cannot be met by a single agency (Cusick, 2002; Swann and Balding, 2001; Pearce et al, 2003; Hester and Westmarland, 2004; Creegan, Scott and Smith, 2005) Multi-agency co-ordination is needed to provide a package of support, which may involve social work, health, education and specialist services in the voluntary sector.

Schorr (1989) suggests that effective interventions should be flexible and comprehensive, and be delivered by staff who are able to form relationships based on trust and respect, and Joseph (1997) argues that while there is no standard approach to support individuals wishing to exit prostitution, interventions should aim to foster security, stability, a sense of inclusion or belonging, and a positive recognition of self and identity.

The concept of 'assertive outreach' (Creegan, Scott and Smith, 2005) or 'therapeutic outreach' (Pearce et al, 2003) has also been developed. This approach recognises that young people's lack of engagement relates to their distrust of adults and an effective response requires continued effort to reach out and engage them. Continuing to offer services even when the young person is refusing to take them up gradually builds up trust and forms part of a therapeutic approach. Such proactive and assertive outreach methods have been developed by Barnardo's sexual exploitation services to engage with young people in crisis and at high risk.

Pearce et al (2003) found that the services most often used by young people experiencing or at risk of sexual exploitation were local community-based projects offering a range of legal, social and health services accompanied by outreach and drop-in provision.

There has been some debate in the literature about the value of specialist versus generic services for adult women and young people who exchange or sell sex. Recent research in south London found that women exchanging sex in crack houses to fund a drug habit often did not self-identify as 'sex workers'. Women may also 'enter into relationships' with a man or groups of men and exchange sex for drugs, which may be perceived as favours or 'keeping their side of the relationship' (Nash and Cusick, 2004). In this context, the authors suggest that services based on a stigmatised 'sex worker' identity may be rejected, and advocate for holistic services profiling drugs, housing, outreach, health and youth services. They consider that this may be particularly important for young people and for those who are exploited in the context of a relationship. Barnardo's experience working with young people does not support these conclusions, as we discuss below.

## Barnardo's services

The aim of Barnardo's services for sexually exploited young people is to ensure that children and young people are not sexually exploited or at risk of being abused through prostitution. As we have outlined in the introduction, the focus is to achieve the 10 outcomes for young people that reduce known risk factors and increase protective factors. All specialist services aim to achieve positive outcomes for young people through a combination of preventative education, effective child protection interventions and support to help young people recover from abuse.

Barnardo's practitioners are generally trained in social work or youth work, and many hold counselling qualifications. Teams also include people seconded from social services or youth services, or organisations involved in education, sexual health or substance misuse, so team members usually have backgrounds in teaching, nursing, mental health or social care.

The overall prevention, protection and recovery approach is delivered primarily through the following activities:

- Direct support to children and young people experiencing or at risk of sexual exploitation
- Educational work in schools, pupil referral units, residential homes etc
- Training for professionals from social services, police, education, health etc
- Strategic involvement in multi-agency forums, such as Safeguarding Children involved in Prostitution (ACPC forum), Crime and Disorder Strategy Groups and Children and Young People Forums.

This chapter focuses on the first of these activities, the direct service provided to young people, and we highlight the key elements of Barnardo's approach.

## Access, attention, assertive outreach and advocacy: the core features of the model of practice

### Access

Ensuring that young people in need of a service get access to it involves two strands of work. First, it is important to ensure that agencies in contact with young people are able to identify when they may be involved in or at risk of sexual exploitation and can make appropriate and timely referrals. Second, services need to ensure that they are accessible to young people themselves, both enabling direct self-referrals and, critically, making the service appealing to young people who are frequently alienated from most forms of professional support.

Ensuring that there is a clearly understood 'pathway' for young people to receive a service is a critical starting point. This involves working across the range of professionals in touch with young people to ensure that they can identify when a young person may be at risk of sexual exploitation and what action should be taken. Barnardo's has been instrumental in the development of local protocols for effective inter-agency working where sexual exploitation is known or indicated.<sup>13</sup>

<sup>13</sup> Protocols are developed according to the supplementary guidance in *Safeguarding children involved in prostitution* (Department of Health et al, 2000).

Specifically, local protocols tend to identify the potential risk indicators for children and outline the referral process:

[The criteria for being referred to us range from] being involved in a sexual exploitative relationship where it's very obvious that they are being sexually exploited, to there [being a number of] indicators of risks such as living within the local authority care system, being excluded or truanting from school, going missing, running away, absconding, perhaps have been abused in the past, sexually abused or coming from a chaotic family where there's a lot of instability within the family home, self-harming – clear sort of indicators that their emotional health is not very robust. Abuse of substances and alcohol and sexual health issues often, they may be very young and pregnant and involved in a relationship with an adult that may appear to be exploitative, or there are issues around their sexual health. So there's a whole range of issues that we have on our referral form and they should be meeting some of those criteria.

Young people can access Barnardo's specialist services either through a referral from social services, police, education or another voluntary agency, or through 'self-referral' by attending a drop-in, by using a freephone number, or through contact with a worker in an outreach setting. Many services have altered their access routes over time:

When the service was initially set up the model was that the service was a drop-in, which is what was needed at that point. Now several years on, what we've had to develop is responding to agency referrals. Also, the girls bringing younger girls here. Parents referring, teachers ... in the end, we respond to anybody!

Most services provide a range of ways for service users to engage – establishing regular contact and the acceptance of support being early outcomes services try to achieve. One service manager described their approach to this:

It is a combination of individual work with young women, [the option of] freephone contact with us at all times, wherever they are, drop-in services for the high risk, (because of what we've learned about how girls use drop-in services), a preventative group work programme for the girls who are less high risk and can use structured help in a different way.

Establishing ongoing contact with young people and building relationships with them is often a slow and fragile process – particularly with those already entrenched in sexual exploitation. At the point of referral, some young people are already living 'on the margins' of a largely hidden subculture and many distrust official services. The accessibility of Barnardo's specialist services and their willingness to accept contact with young people on their own terms is crucial in building trust.

Most services operate from a dedicated building incorporating office space for staff and 'young people's space' in the same setting. Accessibility is not simply about being 'open all hours', but about offering a physical place and service culture that is safe and comfortable for young people to spend time in. Services usually provide a kitchen area, showers and washing facilities, comfortable lounge space and counselling rooms. The larger services may have additional on-site provision of fitness/gym

equipment, art/activities rooms, sexual health/nurses room and outside space including a garden. The smaller services often operate in shared buildings and usually only have office space plus a young persons' room, which functions as a combined lounge and activity area. Whatever their size and specific provision, the common aim is to provide a safe, private space for young people at risk.

Staff commented on the importance of the initial impression of a safe, welcoming and supportive physical environment when a young person first visits the service:

What will often happen is that when a young person is brought here they are shown around the building, and it is a very nice building to look at, and that normally wins a fair number of young people over actually.

Practitioners work hard to ensure that the space is safe and accessible to different children and young people from diverse ethnic and cultural backgrounds:

There is a real value in having a [culturally] mixed staff team, apart from the obvious, it is positive to have diversity for these young people, and it makes for a more positive work environment.

Services that are physically large enough, offer a drop-in service for potential service users at specific times and days of the week. This enables young people to come into the building and use the space as they want – to wash, shower, make some food,<sup>14</sup> see a project worker, seek advice from another professional such as the sexual health nurse or Connexions worker, listen to music, watch television or engage in group work sessions that might be on offer. The provision of food, shower and laundry facilities gives a practical focus to project use for those reluctant to acknowledge any need for emotional support. Several managers commented on the importance of having on-site facilities to encourage young people to attend, particularly the sexual health provision that some offer through partnership arrangements:

It's very, very good to have sexual health service on site – this is a big draw to get girls into the service. Once they're in the building we can do all sorts of things with them.

Two services are primarily outreach services; they work in street or community settings, as well as in hostels, residential units and youth service facilities without a dedicated building. Staff emphasised the importance of flexibility combined with clear boundaries, and 'going to where young people are at':

I think the most important thing is that we actually go to where young people are and that is something that they find quite unique, in the sense of we are making an effort to go to them, as opposed to them coming to us.

Being able to go where the young person feels safe, at a time they're happy with – some of them might be sleeping a lot of the day so you need to see them in the evening. So staff have to be flexible with their approach. It needs to be very child centred and work with very, very, clear boundaries.

14 Services provide food and drink free of charge, and many are supported by donated provisions through the 'Fareshare' scheme.

This flexibility is a feature of all the services. The case studies provided examples of workers meeting young people at home, in school, in prison, over breakfast and at McDonalds. Flexibility allowed workers to provide support when it was most needed: accompanying young women to genito-urinary (GU) clinics, antenatal appointments and to court. Services frequently pick up young people for whom ties to family or carers are already weak, and who are in danger of 'falling through the net'. Engaging with such young people entails both easy access to services and having staff who are open, honest and non-judgemental.

This openness and honesty entails being clear about the reasons for young people's involvement with the service and about confidentiality and the circumstances in which information will be shared with other agencies. When young people first have contact, practitioners state clearly the nature and purpose of their service, and their confidentiality policy, in a very direct way. Several managers outlined how their service approaches this:

What we do is explain to them ... about sexual exploitation and often it needs to be said so it's really clear that we are not about prostitution as [names staff member] always says to every young person: 'You will not find anybody talking about you as a prostitute in this building', just to make that really clear because that is so often the misconception that young people come here with – and that may come from their referrer about why they are being referred.

Once we started talking about 'sexual exploitation' they felt freed by that – the prostitution word could be put aside because they didn't claim that name and that's not their perception of what happened to them.

[We say to them] 'You tell us what you want and we'll work with that – we're not going to judge you on that.'

Barnardo's confidentiality policy is also communicated to young people at first contact with a service.<sup>15</sup> Where information has to be shared with other agencies, the actions and implications are discussed with the young person. Great care is taken to involve service users in decisions, to encourage them to act on their own behalf whenever possible, and to keep them informed at every stage. One manager outlined how the confidentiality policy is communicated to the service users and very 'visible', literally displayed on the wall of the building:

That's been accepted by the girls and it's up there and they are very clear. We need to work with them to talk to the other agencies about keeping them safe. When we've worked towards that, it's very rare that the girls completely disappear after that.

Many practitioners commented on the importance of the first meeting with the potential service user and in particular the reassurance regarding confidentiality:

The big thing is us saying 'you don't have to tell us anything'.

<sup>15</sup> That information given by a child/young person will stay within the service unless they, or someone else they know, is in immediate or grave danger. Even then, this will be discussed first with the child/young person.

Quite often we say to the young person, let's meet you once and we'll talk about the service, it's up to you whether you meet us again, I think that's one of the strengths as a voluntary agency that we can actually say that we don't have the statutory responsibilities, although we explain if we have any child protection concerns we have the connection to social services.

The pressure isn't on them and they see it as their choice. They see it as a service for them, not pushed on them.

Managers also commented that young people generally respond positively to this approach, and explained why a truly accessible service is also one young people will stick with:

Then if the young person would like to work with us then, it's a voluntary arrangement, it's up to them, for them to think about it. It doesn't surprise me, but it does surprise a lot of referrers, about the rate of young people at that point who say, 'Yes please, I'd like the service' and it surprises referrers because often these are young people, who although they are not entrenched in really chaotic lifestyles, there are young people who social workers find difficult to manage.

### Attention

Young people with histories of abuse and disrupted care are often described as 'demanding' or even 'attention seeking'. Staff described some of their service users instead as being 'attention hungry' and discussed the central role that giving serious attention to young people played in their work.

In some cases, young people's desire to enter adulthood on almost any terms is in part a response to powerlessness, and their frustration at not being heard when they speak of their lives and difficulties. Staff therefore emphasised the importance of taking seriously young people's concerns: they are listened to 'as adults' while accorded the protection appropriate to young people.

One of the main 'hooks' that services offer is the allocation of a named worker – this practitioner remains the consistent person for the child throughout the duration of contact with the service. They begin by forging a relationship and establishing the young person's agenda:

We try and have that initial meeting with the young person and then within that ask the young person what do they want, [and they] might be identifying things that are very different from what the referring agencies referred them for – so we start with looking at those issues that have come for the young person and ideally we come up with a six week plan, which we will always review, and that's the way of setting out what the young person wants.

... once the young person has decided they would like the service, the first thing will be, 'OK before you answer my questions we need to get to know each other a little bit'.

The primary aim of the key worker relationship is to build trust with the young person so that they are able to work with them to address areas of difficulty in their lives:

So the first stage is always that engagement, building up the relationship to develop trust, helping them explore who they are, where they are up to, what their likes and dislikes are, all those kind of very basic 'engaging type' activities.

I think for most young people it's knowing there's actually someone there whose got some time for them, and you know it's their time, because it's hard to believe that so many of these young people just don't have anyone who ever spends any time with them at all.

Initially the practitioner seeks to identify the young person's own understanding of their situation, and in doing so can begin to do a simultaneous assessment of risk.

The young person knows why they are coming to the service, it's not for a 'nice time'. It's a friendly service but it's not just to go to McDonalds – they do know and there are discussions going on between the worker and the worker is constantly assessing the level of risk.

[Engagement] can be around practical things, but very young person-led particularly to start with. What we don't want to do is push our luck, by looking at other issues until that young person is ready.

The aim of the sessions between the key worker and young person is to develop a flexible, protective and supportive relationship, which is able to explore the concerns others have about the risks they may be taking:

And so each service user, if they choose to work with us, will potentially have a different package of services that we can work with them through, it won't be a case of them coming here and they do this session and then go through the whole lot to the end, it's about what is the most pressing need for that young person at the time ... and that will hopefully then help us engage and build up the relationship. Then we can explore other areas of their life that may be contributing to their not being safe: a difficult relationship, or not getting on with their parents, or having to remain within a local authority care situation, or ending up in secure – or whatever.

Ongoing work may involve one-to-one working and counselling for individual young people, alongside drop-in support and groupwork activities. However, the underpinning is based on building security of relationships. As two managers summarised:

We can't change all the things that are happening for them, if they're in a foster home or they're in residential care and we can't magically find a perfect placement for them and make things better. We can't change the abuse that's happened to them but we can perhaps try and help them to make the best of their situation, make more appropriate choices, think through actions that may actually come out with a consequence that is harmful to them – maybe they could make different choices, or recognise what's happening and change their actions.



The priorities are moving that young person from a position of distress and not functioning in their environment for whatever reason, to a position where they are less distressed and more able to cope with whatever situation they're in. In some cases that may be exiting a sexually exploitative relationship, in others it may be trying to stabilise their foster care placement, or their relationship in their family, or whatever – which will in turn then perhaps have a knock on effect to make them safer in their environment.

The development of a relationship can be facilitated by the opportunity to do things alongside a trusted adult. Workers may undertake one-to-one youth work activities: going bowling, ice-skating, attending a dance class or doing henna hand painting:

We've worked with young people who are trying to develop independence skills so like being in the kitchen, showing them how to make a pizza or whatever.

Whatever the specific activities undertaken or topics discussed, staff are working to raise awareness of exploitation, the risks involved in young people's current lifestyles and their rights to relationships that are free of violence and abuse. In addition to the explicit discussion of such topics, they attempt to model respectful, reliable, honest and non-coercive relationships, which they hope will encourage young people to assess other relationships in their lives in a different light.

### Assertive outreach

Many services identified a specific method of 'assertive outreach' used to try and 'hook' young people in need. This involves techniques such as frequent text messages or mobile calls, and even 'door-stepping' a young person who has not maintained contact. In a number of case studies it was evident that the persistence of workers in following up on young people – including those who showed little or no interest in return – was eventually understood and appreciated as being a genuine demonstration of concern for their well-being, and an indication that a worker was trustworthy:

We are really having to chase and they are young people who have got quite chaotic lifestyles who may not have been to the service either, never seen the building, and how we try to engage them is by texting, unannounced visits at addresses where they may be, quite a few have to be joint visits in terms of the staff safety aspect.

So, you know, we often get a strategy [meeting] and the young person will go out and say 'I don't want to work with you' and we'll say 'Fine, well we're here and this is our opening hours' and you might drop another little line in a month's time or go back [to social services] and say 'Look, she's not engaging what's she doing from your point of view?' and still keep on, keep it rolling and then eventually you get a call.

In this way the young person knows that the service is still prepared to work with them in future, even if they have currently chosen not to access support:

You almost take that for granted in what we're doing, we do that a lot of that actively pursuing them. I mean there's one young lad in a secure unit who didn't want to engage with us and we said that that was fine but we wrote to him on a regular basis just to say the service was still here if you would like, so we didn't give up on him and he eventually got moved from that secure unit, out somewhere, so we had to finish in the end but we were able to write that final letter and say all the best for your future and so even though we never actually engaged with him, we hope that he felt there was a caring organisation out there should he need it.

The adoption of persistent engagement techniques was identified as particularly important when children and young people were being heavily influenced by an adult exploiter or groomer; what some practitioners referred to as the effect of 'the strong abuser':

You've got to work with the fact that there may be others that are pulling on their strings, you know, not wanting them to come here or in some cases don't understand why they're coming here – they think it's nothing to do with getting them out, 'cause the young person's not told them, they say 'I'm coming here for my sexual health reasons', which is OK, you know – but it's working with the strong abuser, if you like, that has the control and we have to equally work with that but in a non-abusive and very caring way.

We are working with young people who don't necessarily define themselves as sexually exploited and they've also been groomed and those groomers are not going to want professionals in their lives – they're going to do everything they can to keep them isolated.

If somebody is exploiting you they are not just being a complete bastard to you, they are offering you a lot of things that you want to invest in, in terms of emotional time, energy, a feeling of someone who has taken an interest in you. And we have to rival that in terms of the emotional engagement that a young person might put into their relationship with their worker, which is incredibly difficult because we are very, very bounded as well.

Specialist practitioners therefore aim to offer the intensity and persistence of support that most young people need if they are experiencing sexual exploitation:

And you sort of keep like, drip, drip, dripping away that this is OK, and we care about you, and we're here, until the penny drops, or there's a need, where they say – 'oh hang on, you know, they've been consistent with me, probably the only people who have been consistent with me for years' and they start to trust.

Building a relationship of trust with a key worker, especially for the most chaotic or hard-to-reach young people, often takes a long time:

[Most young people] aren't able, or at a point where they're able, to recognise their own exploitation, so it takes a long time to do a piece of work sometimes, so it can be a long term, ongoing, starting with prevention work and then trying to enable the young person to look at their relationships and keep themselves safe, so its very rarely a six-week piece of work, sometimes it is if you catch people early enough, but often you're talking one or two years, and even then young people still have issues.

### Advocacy and links to other services

For young people whose lives encompass drug or alcohol dependency, sexual exploitation, homelessness or domestic abuse, everyday life is often chaotic. Appointments may be impossible to keep, leading to hostility and rejection from overstretched services. Barnardo's services seek to prevent this by accompanying them to appointments and advocating for them when relationships with services break down. They work with other professionals to increase the understanding of the pressures on young people's lives. This advocacy often enables staff to make an immediate difference in the lives of their service users, facilitating access to services which meet their needs:

Sometimes it is about advocacy, it's about saying to a local authority: 'Look what are you [doing] putting that child back into that placement when you know that that's abusive? There needs to be something else done for this child' ... and sometimes that works. Sometimes it's actually just getting the agencies to talk to each other and co-ordinate a plan ... and we often have a key role in making people come together and talk about things.

Yes, some of the young people are offered support from CAMHS and another specialised therapeutic young person's service. However it's quite common for the young person to do that very short term or not to turn up to those sessions. Quite often they're not at a very stable point, so they really struggle to access those services and part of our work is sometimes taking the young person there, trying get them safer to access those services, encourage them to go, but quite often they're loath to.

It is also the reality of the life we lead that we do have to conform to keeping appointments and things like that so it's also trying to help young people learn how to cope with what is reality, how they can engage with services as well, 'this is real life', so it's all part of that.

Overall, services worked well with external agencies to ensure that young people's needs were met and that they were able to access the resources to which they were entitled. The services worked mainly with social services, police and schools and in most cases enjoyed positive relationships over referrals, information sharing and collaboration. However, problems were encountered with social services due to overstretched staff and unallocated cases, ineffective planning, lack of flexibility (eg working with young people who have come from outside their area), and in a few cases, a poor understanding of sexual exploitation. The age of young people can be a barrier to support, with those over 15 frequently not being accorded priority by social services. Relationships with police and schools were generally good, although in a number of cases there was a sense of frustration with the lack of prosecutions of abusers and coercers.

All service managers identified the importance not just of the direct work, but the building of a protective network for children and young people through close inter-agency working. Working in direct partnership, through information sharing protocols, or by 'fast track' access to other specialist services, provides a crucial way for services to provide continuity of care. Importantly, this often focused on establishing effective inter-agency practices to counter the discontinuity of care that service users had experienced previously.

Inter-agency working can require many different protocols:

There's a lot, there's the Missing from Home protocol, there's the information sharing protocol with the police and there's the joint ACPC protocol, which is about child protection ...

Most services felt that they had achieved a great deal in recent years in establishing arrangements with other professionals and linked this to engagement in relevant strategy and inter-agency forums:

From the start Barnardo's were involved in the [prostitution] forum reporting to council members, and that still goes on. And at that time we were able to look at, and raise the profile of, sexual exploitation within the city, and be recognised as the authority about children who were being sexually exploited.

We have established ourselves at a strategic level which is incredibly important. So if you were established either under the Crime and Disorder side or the Children and Young People partnership side, which all fits in the local strategic partnership, you're in a pretty strong position.

The importance of links to other specialist services, often voluntary sector agencies, was also emphasised by service managers:

[We're] linking with this under 18s alcohol and drug service ... The girls have said 'we want real drugs provision in here'.

We have managed to secure a three year post where the [abuse recovery service] will offer us a five day a week service, where they can offer consultations with young people, either over the phone, one-to-one, or groupwork.

We've also got a lot closer to the [adult women's support] service. It's very interesting at the moment – like a triangular thing, coming together to just meet the needs of the girls, particularly between 16-21. That's never happened before – that triangle is working or intending to work harmoniously together to meet the needs of this group that keeps falling through the net.

Some services are able to offer on-site access to sexual health, education, counselling and substance misuse guidance, often through working with partner agencies which offer satellite provision:

The nurse service here is a major, major plus, without that nurse service I think we would see a lot fewer young people.

Services have worked hard to develop close working relationships with the police and where these had been successful, managers commented on the importance of them for sexually exploited young people:

So they know that we work [with other agencies] and that we share information, but I suppose the real confidence that we have is that we can always say this information is going to be managed properly, not just within the service, but by those agencies with whom we share. It's brilliant, because I know not all the projects can say that, because they can't trust the police to respond as appropriately as we can.

Services also aim to increase young people's control over their lives so that they can advocate for themselves. An important element of this is ensuring that young people are involved in Barnardo's own services.

Taylor-Brown's study of sexually exploited young people (2002) revealed that young people often feel disempowered by their involvement in prostitution, and the way society perceives them:

We should be part of the decision making. We're certainly capable of doing that but I think society tends to think you lose your brains or something when you become a prostitute. (Jessica, quoted in Taylor-Brown, 2002)

Barnardo's is committed to the participation of young people in its work and believes that giving service users a voice encourages young people to contribute to their communities and develop a stake in society. This ethos is reflected in the efforts of all services to involve young people in shaping their work.

Managers described how the active participation in the running of the service can make a direct contribution to young people's self-esteem:

Participation – to make that work, and for the girls to be planning the basic activities, being involved with recruitment of new staff, planning evaluation days, research, advisory group – trying to make that real – so that the emphasis is not just on support, but empowering them in the process of the support. That is our priority.

I think a feeling of increased self-worth, that they are worth something, that they have got power and control, that they can make a difference, that they have changed the situation that they may have felt out of control in.

Towards the end of their involvement with a service some young people become involved in supporting other young people, in speaking out about their own experiences and in service development:

She has put a lot back into the service to help us out by doing the interviews and things like that. And everyone that she has come across within Barnardo's has always said what a bright, intelligent ... She helped choose the deputy for the project. Also I think in a way it gives her a bit of an inspiration by coming here because she can use the computer.

## Turning points: achieving change

Of course, there are many aspects of young people's lives which are beyond the influence of Barnardo's services. Staff can provide access, attention and advocacy, but the motivation and determination to escape abuse, give up drugs and build a better future comes from young people themselves. In analysing the case studies for those young people who appeared to be doing well, or who had completed their work with the service leaving sexual exploitation behind them, we found some significant factors or 'turning points' which had facilitated their ability to build new lives.

For two young women, the key factor appeared to be their re-engagement with education. College, and the opportunity it provided for finding a new peer group were significant. Two other young people had found a fresh start in a new area where they were free of previous associates. In one case the move was to an out-of-borough foster placement with an experienced single carer. The worker reporting on this case commented that: 'It looks as though she is going to get back some of the childhood she missed out on. Already her appearance is age-appropriate, instead of her being 14 and looking 27.'

In three cases where drugs were an issue prior to involvement in sexual exploitation, success in addressing drug dependency led to an immediate 'exit' from sexual exploitation.

### Parenthood

Teenage parenthood is generally seen in a negative light. However, for some young women it can be a significant and positive turning point. In 10 of the case studies, young women had become pregnant while they were involved with the service. For six of these (aged between 15 and 18) the prospect or actuality of parenthood provided considerable motivation to change their lives: to escape abusive relationships, replace chaos with routine, accept support and even return to education:

Now she's pregnant ... she's finished with him. She's very much I can make up my mind ... I know she's not working at the moment, she's pregnant and focusing on the baby and that has been ... the catalyst of change.

Because she's engaged with Sure Start the baby can [have a nursery place] ... she wants to wait the six month or nine month ... because ... I've talked about attachment ... and we talked about how important them six to nine months are about giving your baby the primary attachment. So after the nine months she's going to introduce them to nursery then she really wants to get some education or some kind of work and she's so excited about it now so I know that she's going to do it.

[when pregnant] She even gave up smoking because she was pregnant, she was a little bit [upset] to start with obviously because she was confused about being pregnant but basically she gave up running away, she stopped having sex, she stopped drinking, she stopped smoking and her behaviour just kind of levelled out, she still has her moments but my gosh she pulled herself together in a way that I don't think any worker could have, we supported her in that but she showed the resilience that was inside her really.

Of course for some young women the choice to continue or terminate a pregnancy was painful and complex. Some continued to be sexually exploited and physically abused while pregnant. For some it was an experience of great distress and young motherhood provided further evidence of their own incapacity, sometimes compounded by the responses of professionals to teenage pregnancy:

That placement broke down because she started to abscond, she wasn't ever there ... [She was seeing him again] The baby was taken off of her; it was all on the back of the child being taken off of her and then she just decided, well she just went missing basically ... She is allowed access but she doesn't go and see [the baby], at the moment, [so] she is missing out on a lot of his development.

### Accommodation

For young people aged 16 and over the problem of safe, affordable and sustainable accommodation was a major issue. For some young people, needing a roof over their heads was a major barrier to escaping a sexually exploitative lifestyle or abusive partner. The lack of suitable options could trap young people into escalating risk at an extremely vulnerable transition into independent life. For others, a new home helped to provide a new start:

So she carried on being homeless ... throughout Christmas ... I was fighting and fighting and fighting to get her somewhere to live. It was one of the hardest, it has been the hardest case I think I've ever worked on ... As soon as they moved in to the flat they all stopped using drugs. The flat was just so lovely it was obvious these kids they just wanted some kind of nurturing warm, warm environment.

She's got a beautiful home at the moment, she's just got a house with the council, ... and the first time the social worker came to see her and walked in and he went 'Oh, my god, I can't believe you've got a home like this' and she went 'Why (laughter) do you think cos I'm, you know, just because I'm seventeen it doesn't mean to say I haven't got taste'.

Despite the significance of these turning points in some young people's lives, it was frequently the ongoing support of the service and of other agencies which enabled young people to make and sustain the changes in their lives, underpinning the importance of sustaining contact over time.

### Support for staff

Staff in service teams come from a range of disciplinary backgrounds, and individuals enjoy considerable autonomy over their style of working. However, service managers talked about the importance of team support:

It feels very much like a supportive project in which practitioners have an understanding of the workload and what the work issues are that different practitioners are confronting.

In each meeting there's an opportunity to share any specific issues about a particular service user that the allocated worker thinks the team needs to know, ... there's a whole range of information that could be shared. Or it may be, I feel stuck with this

person I'd appreciate some advice about what we might be able to do next, because we're having problems with this social worker, you know, or because they're not hearing what I'm saying. It's also a bit of a forum to share practice points. So that's sort of the culture.

So there is a lot of autonomy for workers to make those fine professional judgements because the nature of the work means that they are going to have to. They need to check those judgements out with me and other colleagues, of course they do.

All those interviewed highlighted the importance of their service providing appropriate support to staff working in situations of high stress:

Actually it is very, very demanding work in terms of what it takes on you personally and the sort of interventions that you need to do are quite draining at times, so it is about making sure that there is the culture of support.

I think it works where that open team culture is really important and I think it's also the ability to tap in to some external support as and when needed.

For practitioners, there's huge challenges, and I think this is where you need clinical supervision which is independent of your case management. You've got people who are having to address some very abusive situations which pulls at all sorts of their own internal feelings and experiences.

Others commented on the strain on staff of the slowness of change for some young people they worked with:

Staff are living with the constant uncertainty of their clients' situations. Progress is so slow here – you want to see progress for your client.

If you ask young people about where they will be in about five years time, they can't see beyond next week. So it is quite difficult and from that point of view it makes it quite difficult for staff not to feel powerless quite a lot of the times, hence the need for some external support.

Managers specifically identified how they respond to the secondary impact on staff of the violent and abusive worlds that many service users inhabit:

Staff safety is a big thing – exploiters and abusers are antagonistic towards the service and the workers – staff can be left feeling quite vulnerable. So we have to always balance safety with the need to see the girl.

We can't underestimate that for the girls coming here, it is a respite from the very serious challenges in their lives – they face harm, danger – it's huge. When they come in here they are 'girls' ... But the impact on the staff for them to hold that, and what they are meeting when they go out, and what the girls are telling them, is very difficult because sometimes they will mirror the chaos – the workers will be experiencing and living out the chaos that's brought to them in the service.



# 5. The policy context and perspectives of local stakeholders

## Summary

This section outlines the policy context in which services are provided, and explores the importance of inter-agency working through a summary of interviews conducted with 26 representatives of external agencies across the 10 localities of Barnardo's services.

In recent years, there have been some welcome changes in the policy context across the four nations of the UK in relation to young people involved in sexual exploitation. The key change has been to recognise that such young people need protection and their needs should be addressed via multi-agency approaches within a child protection framework.

Our interviews with stakeholders support previous Barnardo's research, that while sexually exploited young people have many characteristics in common with other young people 'in need' and can benefit from generic support services, it is only through specialist services that we can ensure that their needs receive adequate attention.

Interviewees particularly highlighted the importance of Barnardo's' services in acting as champions for the development of partnership working and protocol development. They also valued the expertise of specialist practitioners in working with this highly vulnerable group of young people.

All respondents expressed concern at the insecurity of funding experienced by the services.

Our research found many examples of highly effective inter-agency working. However, despite the huge improvements in the policy framework and the provision of guidance for children's services, this evaluation suggests that there is no room for complacency. Barnardo's service managers identified a number of ways in which young people continue to be failed by difficulties in inter-agency working, especially a reluctance or inability of key partners to engage in strategic approaches (most notably education, health and youth offending teams). Constraints to inter-agency partnership working impact in particular on the ability of specialist services to work fully towards primary prevention and early intervention.

Additional barriers to effective service provision detected in the research are: restricted understandings of the nature of sexual exploitation by professionals; the operation of high thresholds for intervention due to resource constraints; gaps in local service for providing intensive support in the community (particularly safe accommodation, housing, and substance misuse services) and particularly, poor continuity in community support to young people aged over 16.

Barnardo's services do not work in isolation. Locally, they are part of a whole network of interacting statutory and voluntary services with responsibility for safeguarding children and young people. The effectiveness of Barnardo's services is in large part dependent on good inter-agency co-operation, a shared understanding of the issues, an effective policy framework and the reputation of our services among our partners and stakeholders. At the most basic level our services are dependent for both referrals and funding on this reputation. This evaluation was therefore concerned to incorporate the perspectives of key stakeholders on the effectiveness of Barnardo's sexual exploitation services, both in terms of their perception of our direct work with young people and the impact of a specialist service on the policy and practice of other agencies.

The development of practice at the local level also takes place within a national policy context which has been subject to some important recent changes. In the last few years the English government has initiated the first major review of legislation relating to prostitution and sexually violent crime for almost fifty years.<sup>16</sup> It has promoted a child protection approach to young people involved in prostitution (Department of Health et al, 1999; Department of Health et al, 2000) and has recently legislated for the transformation of child protection services through the establishment of Local Safeguarding Children Boards and Children's Trusts (HM Government, 2004; Children Act, 2004).

Scotland has produced guidance on *Vulnerable children: young runaways and children abused through prostitution* (Scottish Executive, 2002) and established an Expert Group on Prostitution (Scottish Executive 2004) to advise the Scottish Parliament on legislative reform and the Protection of Children and Prevention of Sexual Offences (Scotland) Act (2005).

## Child protection frameworks

In England and Wales the supplementary guidance to *Working together to safeguard children* (1999) was issued jointly by the Department of Health, the Home Office, the Department for Education and Skills and the National Assembly of Wales as *Safeguarding children involved in prostitution* (2000). The core message of the guidance was:

Children involved in prostitution should be primarily treated as the victims of abuse, and their needs require careful assessment. They are likely to be in need of welfare services and, in many cases, protection under the Children Act 1989. (Home Office 2004: 35)<sup>17</sup>

The Safeguarding Children involved in Prostitution (SCIP) Guidance explicitly sets out that such a child protection approach should:

- apply to all young people aged under 18 (1.5)
- operate through multi-agency forums (2.4)
- be guided proactively by the local Area Child Protection Committee (ACPC) (5.5)
- operate according to agreed sexual exploitation protocols (6.14)

<sup>16</sup> Sexual Offences Act 2003; *Paying the price* (Home Office, 2004); *A co-ordinated prostitution strategy* (Home Office, 2006).

<sup>17</sup> The Safeguarding Children involved in Prostitution (SCIP) guidance was issued under Section 7 of the Local Authority Social Services Act (1970) that requires compliance, unless exceptional local circumstances exist to justify a variation.

- also develop a protocol for runaway or missing children (6.14)
- have a named lead from each agency (6.2)
- offer long-term support (2.4)
- involve the child/young person in care plans (5.12)
- consider the need for professional training and preventative work (5.6 and 5.7).

The criminal offences of soliciting, loitering or importuning remain, and the Guidance states that they can still be used against children deemed to have 'voluntarily and persistently' returned to prostitution (6.21). Barnardo's has previously called for the removal of these provisions to arrest and prosecute young people. They are rarely used, but they run entirely counter to an understanding of the vulnerability of sexually exploited young people and the need to offer long-term support in order to engage them away from abusive networks.

In Scotland the 'Vulnerable Children' guidance similarly took a decriminalisation approach, albeit working within different legal and child welfare systems (Scottish Executive, 2002). The Scottish guidance identified similar principles about the approach of local agencies: to develop local protocols through Child Protection Committees; to work in partnership; to protect children against abuse and exploitation; and to support through a harm reduction approach.

Importantly, the SCIP guidance (Department of Health et al, 2000) clearly outlined the roles and responsibilities of the lead agencies and local authority departments that should operate within the ACPC multi-agency forum: police, social services, health, education, youth services and voluntary sector agencies (these are detailed in Appendix H).

Recent research from Barnardo's on the needs of young people at risk of exploitation in London identified clear problems in the application of the SCIP guidance across the city (Harper and Scott, 2005). The research found that a significant number of Area Child Protection Committees had not developed proactive identification of young people at risk and designated lead officers to support the SCIP protocols, nor developed training and preventative work on sexual exploitation. In addition the research detected significant failings by all agencies – social services, police, education, health and youth offending teams – in working fully to the SCIP guidance.

The research also identified examples of good practice, where local ACPCs did work proactively and in partnership with specialist voluntary sector providers who provided holistic harm reduction services to children and young people at risk of sexual exploitation. However, even then, the research found clear problems in effective, consistent and clear inter-agency partnership work to support the specialist provision (Harper and Scott, 2005).

Research and practice experience confirms that sexually exploited young people have many needs in common with other disadvantaged young people, including those who are homeless, living in poverty, have issues around substance misuse or whose health is at risk through lack of awareness (Pearce et al, 2003; Melrose and Barrett, 2004). Shaw and Butler (1998) argue for a holistic social work response to children and young people 'abused through prostitution', as separate services aimed at narrowly-focused client groups may only serve to isolate those they wish to support. However, others maintain that services intended specifically for sexually exploited young people are more desirable because service users do not need to either conceal, or openly reveal, their involvement (McIver 1992, cited in Cusick 2002). The

stakeholders interviewed for this evaluation come down firmly on the side of specialist service provision as being invaluable in engaging with this particularly vulnerable group.

## The stakeholder sample

Interviews were completed with 26 stakeholders who came from a range of professions linked to the work of the 10 Barnardo's services. Service managers were each asked to identify three key stakeholders, holding senior positions, who knew the work of their service and with whom they were engaged in some form of inter-agency work. Respondents included those working within the police, social services, health, education, youth work and youth offending teams, as well as other voluntary agencies such as adult female sex worker projects or substance misuse services. The majority of interviewees had worked locally with each service for at least 18 months; the longest had known a service since its inception nine years previously, and the average length of respondents' contact with a service was three years.

Interviewees were asked to reflect on their working relationship with Barnardo's, the value of the specialist support provided to children and young people, the contribution of the service to the development of local policy and provision, and the strengths and weaknesses of the multi-agency approach to anti-sexual exploitation provision (see Appendix C).

## Working together – protocols and partnership

Many interviewees, particularly those from social services and the police, discussed the important role that Barnardo's services had played in developing and implementing local protocols. Particular service managers were identified as having been 'main drivers' and 'champions' whose expertise had been essential to the process. All those interviewed valued the way that Barnardo's services had helped to develop SCIP protocols and the effort they made to work in partnership within them:

They are really good at partnership working. They frequently hold the whole process together ... Sometimes they have to push hard, but I'd say they are more 'critical friends' rather than just being a thorn in our side ... And you always know they are fighting on the child's behalf – it's not about covering their own backs or whatever, and you have to appreciate that. (SSD)

There's a real willingness to work towards the same goals. (SSD)

On the whole I've been fairly impressed – they're on the ball with the meetings – there's been nothing detrimental at all. I wish there was a greater geographical area covered by the service – so, more of the same really! (Police)

We work through the ACPC protocol – it's a very good working relationship, for example they're always reachable by phone. (Police)

By contrast, a number of interviewees identified serious problems in the strategic operation of local SCIP protocols, from the point of view of the involvement of other partner agencies:

We should have education, health, police, lead officers – did have for a few months, then they're posted elsewhere, don't have a solid commitment. We always ensure they're invited but it requires a high level of commitment over the long term (CP/SSD)

The part of protocol that requires us to hold and map information, to map links between young women and other young women and between abusers/procurers is an issue ... It's partly about resources, having enough of the right sort of skilled resource, because we're talking about quite complex data analysis, and also people hold information and they are not sure when to share it and who to share it with – the CP unit, the police, which bit of the police? There's some confusion about which information they should share. (SSD)

Police involvement is an issue – there was a lead officer [who retired], the new one looked at the protocol and said 'we don't do this'. It's very hard to get them involved especially at the 'low end' of the sexual exploitation spectrum. They have such a huge role in relation to criminal investigation ... sexual exploitation is not in the police top 10 list – probably not even in the top 20. (SSD)

The Crown Prosecution Service are still not on board. We need a pool of two or three lawyers who will lead on these cases, to have continuity. [Sexual offences] legislation is very new – there's a huge lack of knowledge about what's possible. (Police)

Partner agencies need assistance from other agencies, primarily education, to access schools, via schools to parents, that's for educative and preventative work, and that really needs to begin with the last year of primary school when young people are preparing to move into secondary education. [The service] needs to be supported in getting access to schools, many of which are a little reluctant to have this issue talked about, albeit sensitively, but still in an explicit way. (SSD)

It was recognised by a number of stakeholders that local resource constraints limited the full application of the SCIP protocols, such as developing more preventative education work, or expanding the range of service provision to a broader range and higher number of service users. Those representatives interviewed from social services and the police did recognise how restricted resources within their own organisations had impacted on their ability to implement local protocols fully:

There has been very short staff in social work over the last two years, which makes it very difficult for Barnardo's. Sometimes there's been no allocated social worker for a child. (SSD)

I know our social services departments are very heavily working with very limited resources and I guess that pressure sometimes is pushed on to [the service] a bit. (CAMHS)

Our problem is resourcing in the broadest sense – having to be realistic. (Police)

Overall, a number of respondents felt that limited resources afforded to the implementation of the SCIP guidance was the underlying problem. As a result, as one social services interviewee put it, their sexual exploitation protocol – ‘creaks along’. Another concluded:

We can have all the multi-agency meetings in the world, if you can't deliver it on the ground, we might as well pack up and go home. (YOT)

## Why Barnardo's 'works' – effective support and user feedback

All stakeholders recognised the high levels of need and extreme vulnerability of young people who experience sexual exploitation. Linked to this they acknowledged the key role that their local Barnardo's services played in supporting them:

They are quite disadvantaged young people, usually failed by other services and 'fallen through all the cracks in the boards'. They can be difficult young people to work with. Young people we refer have often been unable to engage them with any other service. (Voluntary)

They are young women who often have anxiety about engaging with statutory services, possibly because of their own previous experience of services or what they have been told will occur by people involved in their exploitation or what they hear from other young women. I have heard it said that they feel a sense of stigma in agencies and possibly in other people being aware that they are involved or at risk of sexual exploitation. (SSD)

Stakeholder interviewees were positive in their assessment of how Barnardo's services operated for their service users:

I can't sing their praises enough because they are the **only** people who work with this group of young people. (Police)

It's an easy, accessible, safe environment, workers are lovely – there isn't only one thing it's a package. (Voluntary)

For those women that we know that have used the service, they wear it as a badge of pride, because it is often the only positive intervention they have had in their teenage years. (Voluntary)

Young women, they love it, they love it! The feedback we get is really positive. It's a beautiful building with lots of facilities for young women. It's safe and non-judgemental – that's the key. (Voluntary)

Stakeholders from a range of professional groups identified what they felt to be the different reasons behind the 'success' that the specialist services could have with children and young people:

I would say, speaking from a personal point of view for my clients, it is a place where they feel safe, where they can go and talk about it, because a lot of them have got a problem with it, but won't go to the police, and it is somewhere where they can go and talk about it and know that nobody is going to judge them – so to me it is very important. (YOT)

... open, acceptance and working at the young person's pace, help them to think about returning [to safety] and practical help to do so. They build up trust, often see them night after night. (SSD)

The service offers a safe environment for them – nothing to do with the police or social services – women-only environment, nurturing female environment – there's things there they really want, all sorts to do – a **really** constructive environment. (SSD)

They're good at building personal relationships – staff demonstrate understanding and young people pick up on this. Not forcing the pace, allowing the time and space. (Voluntary)

Several interviewees commented on the importance of being a voluntary sector service, both for the likely engagement of young people and the flexibility of delivery:

A statutory service couldn't deliver that type of service. (Voluntary)

You have a window of opportunity with young people, so at that point when somebody is willing to engage and that sometimes if you can't actually deliver there and then, that you might lose them altogether. (SSD)

Kids who won't talk to social workers will talk to [the Barnardo's service]. It is something only the 'third sector' can address. Statutory services think in 'silos' and to performance targets – young people get lost. (Community Safety)

The feedback I have got is the girls are saying that someone who can offer them that one-to-one when they are ready to access it and can stick with them over that period of time is really helpful. And they think having the services like Connexions, and the schooling side, and the counselling for drug and alcohol services – because it is available quickly and when they are ready to access it, they find that helpful. (SSD)

## Why Barnardo's 'works' – benefits to partners

Stakeholders also commented on the perceived benefits for themselves within their professional organisations in having a specialist sexual exploitation service to work alongside.

Without them, I wouldn't have got as far in my role as lead officer [on sexual exploitation]. I couldn't have done what I needed to do. Sometimes they're propping me up. (SSD)



I could put a [care] plan in place for a sexually exploited young woman, but I would have to co-ordinate six or more individuals – but they go to Barnardo's and get it in one place. (CP/SSD)

[It provides] access for those [young people] the rest of us are struggling to engage with. Social work will never replicate it, never be on the streets when young people are at their most vulnerable. (CP/SSD)

For us it's knowing that you have someone there who will support you, support me, with what I don't know about. But it's also about the support network for the young person – that helps me achieve my goal re the prosecution of abusers. (Police)

[The service] is really unique because it looks at everything as a whole for the young person ... These people disappear otherwise, they do not access services. The key thing what we're able to do via [the service] is linking them into support and getting them back on track, particularly around education and training opportunities. (Youth service)

My role is to keep the child protected and I can trust Barnardo's to respond appropriately – this doesn't happen enough with [statutory] social workers themselves. (CP/SSD)

... some of the girls just would not engage with health and not engage with social services or education and so [the service] have been able to enable us to have some contact with these young people, which we otherwise would not be able to come near, and that has been a fantastic resource. (CAMHS)

Many stakeholders also emphasised the impact that Barnardo's service had on raising professional awareness about sexual exploitation through local partner networks:

They had an enormous impact in attitudes with some people, especially the police. Hitting targets and being effective changes attitudes. (Voluntary)

Getting people to understand the complexity, not just 'numbers' and 'quick fixes'. (Housing)

It is just the idea that it enabled people to see that young women can get targeted, groomed and used for sexual exploitation. It is just not teenagers having a good time with dodgy mates, it is much more potentially life-threatening than that. And it stops people looking at it that it is a choice, that it is an informed choice that young women are making to involve themselves in prostitution – by and large it isn't. (YOT)

## The issue of resource constraints for Barnardo's services

All 26 stakeholders interviewed raised concerns about the impact of significant funding problems experienced by specialist services working against sexual exploitation. Responses to the question: 'What is the main challenge for Barnardo's services?' were very similar:

Funding. They can't think or plan ahead [and therefore] participate as equal partners in multi-agency work. (SSD)



Like all voluntary sector, the struggle for funding – what you get is piecemeal, short term, you can't plan. You need specialist workers, and you fear that you'll lose them. (Voluntary)

Funding is the main challenge – I'm sure if they had some more workers, more people could be engaged with (for example from outside of the City). (Police)

In general it's about under-staffing – a massive issue. I think sexual exploitation is under-recognised generally, so we're under-representing the number of young people in need – a lot more young people could be picked up. [The service] are working at the higher end of the triangle, because resources are restricted. (Youth service)

## Adding local value

All the stakeholders interviewed were asked to identify one key benefit they believed resulted from having a Barnardo's service locally. Common responses were around uniqueness, effectiveness and ability to raise awareness of sexual exploitation issues:

If we didn't have the service we'd be struggling even more than we are. (Health)

I think because they are the 'lead' in it. [Barnardo's] did the work to get this recognised. When it started it was 'a child can't be a prostitute', so to have that local knowledge and expertise in the issue [is significant]. (Voluntary)

Definitely a driving force to highlight sexual exploitation problems *per se* with the government and raise it up the agenda with the police. (Police)

I think there are loads [of benefits]. Again, having worked in other places where there isn't anything like this I think that it is about the benefit of having a service that focuses on young women and on vulnerable young women ... who aren't necessarily going to come to the attention of anybody else or any other service because they are unlikely to be picked up ... young women who would fall through the net and who are clearly very vulnerable. (Youth service)

[The service] is nationally a groundbreaking piece of work. I take great pride in it because I think it's a real plus for the region, for the city – it's a feather in the cap. (Voluntary)

## Continuing problems in providing a protective network

Despite the huge improvements in the policy framework and the provision of guidance for children's services, this evaluation suggests that there is no room for complacency. Barnardo's service managers identified a number of ways in which young people continue to be failed by difficulties in inter-agency working, especially a reluctance or inability of key partners to engage in strategic approaches (most notably education, health and youth offending teams). Constraints to inter-agency partnership working impact, in particular, on the ability of specialist services to work fully towards primary prevention and early intervention.

Additional barriers to effective service provision detected in the research are: restricted understandings of the nature of sexual exploitation by professionals; the operation of high thresholds for intervention due to resource constraints; gaps in local service for providing intensive support in the community (particularly safe accommodation, housing, and substance misuse services); and in particular, poor continuity in community support to young people aged 16+.

Several specialist service managers discussed cases where social services had taken children off the child protection register at age 16, even when the young person was still at high risk of sexual exploitation. One service manager gave a particularly concerning account in relation to this:

A 15 year old girl, who was just in [the service] last week, missing from home for six days, was seen by her Mum for ten minutes within that six-day period, nobody knows where she is staying, and she has been hanging around the periphery of the street drug scene, strong suspicion that she is running crack, she is certainly self-harming profusely, drinking and taking drugs, completely out of it, running in front of cars and passing out having wet herself, in sexual relationships with adults who the police are concerned are dangerous adults involved in drug dealing, certainly having weapons around them ... social services closed the case. She is fifteen, she is in need of protection, she is a child in need. They spent £50,000 in the last twelve months putting her in secure because this behaviour was so worrying.

Many specialist service managers believed these decisions by some social services departments were related to financial constraints in the statutory sector that 'are pushing their thresholds unacceptably high'. In addition, there were problems of professional awareness, skill and high staff turnover in many social services departments:

The high turnover of [social work] staff means we have to keep going back and retraining all the time, you get your message across one month, then you go back the next month – all new faces, never heard of us, 'what are you doing here?' The previous social worker referred your child, so you have to just keep doing it over and over again. The children themselves are affected because they'll have six social workers in a year and they won't have any consistency in their care plans.

A key area is children's homes – trying to get to the point where all residential social workers are confident about the issues, how they should work multi-agency, we need to work towards that. The issue is that these young people are often in care and the workers there are unskilled and they don't know how to respond.

The issue of the lack of safe and appropriate accommodation, particularly for the 16+ age group, was raised by many staff across the country:

A big issue is appropriate accommodation – it also makes a massive headache in terms of care planning, It's not seen as a priority for the local authority and is often left out of early care plans.

She also got placed in a B&B which was really dodgy and in another B&B which was really dodgy and I know social care and health are bound by resources and money and staff like everyone else but I don't necessarily think that abdicates bad decision making really.

If there is no 'safe place' we can't have an impact on the girls.

Creating a protective network for children and young people at risk depends on other professional agencies being prepared to work within a multi-agency framework of care. Several managers commented on their desire to work more closely with a variety of other agencies:

We've got to get those other agencies like housing, less so social services but like housing and drug agencies on board with us instead of, sort of them trying to deny their little bit that could be very, very helpful.

I think the work with schools is so important because I see there's three ways young boys can become involved – either as a future purchaser, a future pimp or a future seller, exploited – and I think those three have to be addressed.

The other key agencies in the protective network are the police and criminal justice system. Service managers felt that they had gained considerable benefits from developing their professional relationships with local police officers:

... we've seen great changes over the last five years, you know, from being, the police following the young people home or the police vans parking outside your building arresting kids, to completely being supportive and sharing information and working together.

Often however, these changes had come about through relationships with individual local police officers – often those from the anti-vice units. All services felt that much more needed to be done by the police with regard to taking effective action against abusers and coercers of children and young people:

One of the challenges is clearly the relationship with the police – it doesn't feel like we're any further on than five years ago. We've had no prosecutions from this service.

There's got to be far more ownership by the local authority and the police ... to be really serious and thorough in sharing information about these adults – whether they're linked or not, looking at how there can be systematic collecting of evidence that is not just reliant on the girls' own statement but taking all those national policy initiatives and new laws – being serious about them and carrying them forward in the district and not just looking to the service manager of Barnardo's to actually always be in the driving seat, even about the coercers and abusers. That's not possible.

# Conclusion: The challenge continues

Barnardo's sexual exploitation services are engaging with young people who are currently experiencing sexual exploitation or are at immediate risk of such exploitation. These young people are extremely vulnerable as a result of a range of underlying factors including:

- physical and sexual abuse
- neglect and emotional abuse
- domestic violence
- parental drug/alcohol misuse
- parental mental health problems
- family breakdown.

They are also at risk because of a constellation of immediate risk factors including:

- going missing
- placement breakdown
- disengagement from education
- drugs/alcohol
- homelessness
- peers' involvement in prostitution
- association with 'risky' adults
- sexual identity issues (young men).

Their sexual exploitation incorporates a spectrum of experience ranging from what is generally referred to as 'child sexual abuse' at one end, to 'formal prostitution' at the other. Many young people are first drawn into 'informal exploitation' where sex is exchanged for drugs or somewhere to stay. Many young women become engaged in a coercive relationship with an adult man who grooms them for more formal prostitution.

These young people present major challenges to services attempting to intervene in their lives. Most do not recognise their own exploitation – particularly in the initial stages of their involvement. By virtue of their previous experiences they are extremely 'needy' for the attention, 'love' and sense of belonging that their abusers supply. They have little if any experience of reliable, supportive adults, distrust professionals, and are convinced that they are best served by leaving childhood behind and looking after their own interests.

Despite these challenges Barnardo's services facilitate positive outcomes for young people, and as a result of their contact with our specialist services many young people's risk of sexual exploitation is reduced. The most significant positive outcomes are:

- a reduction in the number of episodes of going missing
- reduced conflict and improved relationships with parents and carers
- access to safe, stable accommodation
- an improved ability to recognise risky and exploitative relationships
- an increased awareness of their own rights.

Taken together these outcomes significantly reduce the risk of ongoing sexual exploitation.

## What works?

The ultimate aim of Barnardo's services for sexually exploited young people is to ensure that children and young people are not sexually exploited or at risk of being abused through prostitution. On a day-to-day basis their focus is to achieve the 10 outcomes for young people that reduce known risk factors and increase protective factors (see Introduction).

Barnardo's practice incorporates activities geared towards prevention, protection and recovery:

- Direct support to children and young people experiencing or at risk of sexual exploitation
- Educational work in schools, pupil referral units, residential homes etc
- Training for professionals from social services, police, education, health etc
- Involvement in multi-agency forums and strategy groups.

The purpose of all these activities is to promote the 10 outcomes for young people who are sexually exploited or at risk. However, the focus of this evaluation is the direct work services undertake with young people. The core features of the Barnardo's model of practice are: access, attention, assertive outreach and advocacy. Services provide a range of ways for different service users to engage – engagement through regular contact and the ability to accept support being one of the early outcomes services try to achieve. It is the intensity of contact provided, particularly when young people are assessed as being at high risk, that appears to facilitate engagement with the service. Establishing a relationship with a concerned, non-judgemental adult is the key strategy services deploy in reducing risk in young people's lives. The evidence of this evaluation is that these ways of working provide the best chance of achieving change in service users' lives.

Barnardo's services are highly valued by multi-agency partners and seen to be professional and expert in the service they deliver. However, stakeholders indicated that specialist service delivery is frequently underfunded and there remain many difficulties in providing an adequate response to young people fully in line with national guidance.

# Appendix A: Participatory research approach

Prior to the national evaluation, Barnardo's had already published reports based on the experience of its sexual exploitation services (Barnardo's, 1998; Palmer, 2001). This work helped develop some internal coherence about the nature of such exploitation, routes into abuse through prostitution, and risk factors for sexual exploitation. Building on this, the research team identified a number of service managers to act as 'evaluation champions' for building the approach to the research.

Two service managers had already worked with research staff within Barnardo's to develop their own pieces of outcome-focused work.<sup>18</sup> These service managers undertook an initial period of development work with the lead researcher to identify a set of 'SMART'<sup>19</sup> outcomes. These practitioner-researcher conversations crystallised the key aspects of what services were trying to achieve, as the following research note illustrates:

There are three levels on which the young women we work with are vulnerable to sexual exploitation; immediate vulnerability factors include disengagement from education, homelessness and substance use; background factors include lacking a positive relationship with any adult carer; a history of sexual abuse and the experience of family violence; then there are the social forces to which all young women are subject, such as the romanticization of inequality in heterosexual relationships, the unacceptability of an assertive sexuality for young women and the existence of a sex industry where men buy access to women's bodies. (Author's research note 6 January 1999)

Subsequently, these issues were further articulated through email exchanges between the researchers and service managers so that eventually a set of outcomes was agreed for the pilot phase. These were the outcomes that services felt they were actively working towards in their interventions with young people. The pilot outcome monitoring form (OMF) therefore represented a 'working hypothesis' or 'theory of change' about what services agreed was likely to reduce the risk of sexual exploitation.

Barnardo's had no previous experience of undertaking a thematic evaluation across a 'family' of services, and the initial stage of the research was therefore focused on building the participation of services. The internal infrastructure to build a participatory research project at this point was weak. There was a National Policy and Practice Officer for sexual exploitation, and some individual service managers had supportive relationships with colleagues from other sexual exploitation services. However, there was little opportunity for cross-service collaboration, and no national practice sharing forum or learning network on sexual exploitation. We recognised that some kind of national forum or network was going to be crucial to

18 Ginny Wilkinson, then manager at Streets and Lanes, now UK Agenda, Sexual Exploitation Policy and Practice Officer, and Libby Fry, then manager at London Young Women's Service, now Assistant Director Children's Services, LEASE region.

19 Specific, Measurable, Achievable, Realistic and Time-based.

sustaining the full collaboration of services over a period of up to three years. The first stage of development for the evaluation therefore had to be around building an embryonic 'community of practice' to work closely with the evaluation team. Following the initial consultation with the 'evaluation champions', a pilot of the outcome monitoring was devised and implemented. The second phase of implementation was to analyse and revise the pilot outcomes and this was done through bringing together representatives from all the sexual exploitation services for a feedback meeting.<sup>20</sup>

This meeting was to be the first of a series of events that took place at approximately six-monthly intervals during the three years. On each occasion the research team took the opportunity to feed back current findings from the outcome monitoring, outline the next stage of the research evaluation and respond to questions and queries from practitioners. In addition, each service was visited several times by a researcher, particularly during the first 12 months of the evaluation period, to talk directly to staff about the research at team meetings. Secondary benefits to services were also agreed at this time – such as the feedback of interim data broken down by service at each interim report stage, which could be used in annual reports. Direct communication with Assistant Directors in the Barnardo's regions was also instituted, to try and ensure that services had local managerial support for undertaking the additional work the evaluation involved.

We believe that this participatory approach was crucial to the overall success of the research. Through this format the researchers sought to outline for practitioners the potential benefits to service users of identifying 'what works and why', in the delivery of services to reduce sexual exploitation, as well as the likely benefits to service development in a funding climate increasingly focused on evidencing outcomes not outputs.

Other effective pieces of research on the sexual exploitation of children and young people have been accomplished using an action research approach, and the particular problems associated with doing so have been discussed by Pearce et al (2003). It cannot be claimed that the national evaluation was initially framed as a piece of 'action research' but it did have consequences on the practice delivery of services which participated. The systematic co-ordination of the service managers into a research-focused series of meetings over the three-year period, plus the direct communications with staff teams, produced an active forum for the discussion of practice and policy issues outside of the evaluation tasks. By the end of the research period, service managers had committed themselves to twice-yearly policy and practice meetings, and three different sexual exploitation practitioner forums have evolved.<sup>21</sup>

20 Representatives at this point tended to be service managers.

21 Focused on: the challenges of work with boys and young men; developing educational resources for sexual exploitation; and a 'community of practice' for sexual exploitation practitioners.

# Appendix B: Interview schedule for service managers

1. Paint me a quick verbal portrait of what this service does.
2. What are your main challenges and difficulties as the manager of this service.

## Initial engagement

3. How do young people come to your service? What are the criteria for accepting a referral?
4. So what is it that 'sells' the service to clients at their initial entry point or first contact?
5. What proportion of those initial meetings turn into ongoing relationships?

## Model of working

6. I'd like you to just talk to me about the style of working of the practitioners here. How do you educate new workers to adopt a particular way of working with young people and try to give me a sense of what that consists of.
7. What do you think most helps young people to engage with a worker/the service?
8. Such a way of working involves quite a lot of professional judgement, taking some risks and not just following rules. How do you provide the staff support that makes this possible?
9. Do you think that practitioners work differently according to the level of risk that they assess somebody as being at, at a particular time? What different kind of things would people be doing?
10. How do you ensure staff are able to work in this way? Do you have difficulty recruiting good enough staff?
11. How do you think young people understand your assertive outreach/active relationship approach? I'm interested in the kinds of messages it gives to young people who are not used to adults having that kind of focus and concern for their well-being.
12. If you provide support to a young person over a period of months what do you think are the things they are likely to have got from that engagement? What are they likely to take away from that relationship with a key worker that's gone on for 6-12 months?



## Local political and social context

13. Does your service have a set of current priorities; are there things that are very high on your agenda in terms of service development at the moment?
14. What are your priorities in relation to direct work? Do they match your partners' priorities? Who is the service answerable to in terms of setting priorities and delivering effective intervention in young people's lives?
15. How influential are you in the city – and how does that relate to your direct work?
16. What kind of profile does the issue of sexual exploitation have in the city? Why is that so?
17. Tell me about the wider social services environment in [City]?
18. Is there a kind of external reference or steering group that is specifically for the service?
19. And are there any specific partnership arrangements that you work within?
20. Are there voluntary agencies that you've got specific links with?
21. Any plans for developing any new partnerships or are there other kind of stakeholders that you would like to be involved with?
22. What are the benefits of being Barnardo's as opposed to an independent voluntary doing this kind of work? Disadvantages?

## Evaluation

23. How do you evaluate the usefulness of your direct client work, your partnership/influencing work and your preventative/awareness raising work?

# Appendix C: Interview schedule for stakeholders

1. Can you outline how your service/agency has links to/works with [name service] and for how long?
2. Are you a member of the service's reference/advisory/steering group?
3. Can you tell me what you believe the service's remit and provision to be?
4. Can you tell me something about the children and young people who use the service?
5. Does your service/agency work within an agreed protocol with the service?
6. Have there been any difficulties in working to the protocol?
7. What other services work within that protocol?
8. Can you identify any changes locally that have affected the service over the last two years? In what way have they impacted on what the service does?
9. What do you believe are currently the main challenges/difficulties for the service?
10. Have there been any problems with your involvement/relationship to the service?
11. In what ways would you suggest there could be any improvements to the service provision?
12. If you can, name one key benefit you think results from having the service locally.
13. Are there any other sexual exploitation services locally that you know of/work with? Or any similar services (eg sexual health, missing/runaway, substance misuse)?

# Appendix D: Interview schedule for practitioners (case histories)

Each case study of a young person will collect information across the following main areas :

- life history
  - history of sexual exploitation
  - current situation
  - involvement/ interaction with service/workers.
1. Start with referral information – how young person made initial contact with service
  2. Pattern of service use (types/contacts)?
  3. How did you establish a relationship with young person?
  4. Explain their history of sexual exploitation:
    - route/s into sexual exploitation (link to risk indicators)
    - discovery/disclosure of SE
  5. Abuse and violence experiences:
    - sexual/family/peers
    - exploitative relationships
  6. Life history details:
    - geographical/cultural origins/family/early life
    - school/education/care background
  7. Protective relationships (siblings/friends)?
  8. Social services involvement/care and missing/running links?
  9. Pattern of service use (eg contacts)?

10. Support needs over time (including unmet):
  - drug use/misuse
  - housing and financial support
11. Current emotional issues:
  - Health, and self-harm/self-image
  - Past/current experiences of violence
12. Content of interactions eg prevention, harm reduction, role of counselling
13. Young person's own hopes/dreams/plans and specific needs (self defined)?
14. Exit strategy/story?
15. Young person's evaluation of service?

**CONFIDENTIAL****Sexual Exploitation Projects Outcome Monitoring Form**

BASIC DETAILS	Enter below:
Project Name:	
Worker Initials:	
Case Reference Number - CRMS:	
Case Reference Number - Livelink:	
Age in years:	
Gender (M or F):	
Ethnicity (choose livelink category from menu):	

This form enables your project to collect information about some outcomes over time for your service users. Please complete this form as part of your initial assessment of a new client. Review regularly and use the following columns to record changes. It is probable that reviews of most young people's progress will take place at intervals of between one and three months, but these intervals will vary according to the individual circumstances and level of service use.

DATES FOR REVIEW	Record date below:
Initial assessment	
Review 1	
Review 2	
Review 3	
Review 4	
Review 5	

If case is closed or you do not see service user for three months, record date:	
Write in the reason for case being closed:	
If service user starts again note the date and continue to record change:	

1. LEVEL OF SEXUAL EXPLOITATION	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
Please tick a number to indicate your assessment of the young person each time you update the form.						
1=Definite and current exploitation with controlling adult/peer pressure to continue	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2=Previous exploitation definite, not current but high risk of recurrence	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3=Previous suspected and high current risk	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4=No previous history indicated, but current high risk (e.g. clipping, lookout for others)	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5=No previous but medium risk indicated by lifestyle assessment	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
6=No previous and low risk indicated through lifestyle factors	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6
7=Exited/stable current situation with low/no lifestyle factors	<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7	<input type="radio"/> 7
98=Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

Ignore and do not delete automatic numbers entered here:

2. LIFESTYLE RISKS FOR SEXUAL EXPLOITATION	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
Please tick a number to indicate your assessment of the young person each time you update the form.						
<b>Tick any that apply</b>						
1= Gone Missing during previous month	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2= Stays out late or all night	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3= Parents/carers do not know whereabouts	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
4= In conflict with parents/carers	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
5= Out of school/college	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
6= Bullying at school	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6
7= History of public care	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7
8= Associates with controlling/risky adult (includes 'boyfriend')	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8
9= Peers involved in clipping/prostitution	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9
10= Has money/items/clothing without explanation	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
11= Other (specify)	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11
98=Unknown	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

**3. CHILD PROTECTION AS A RESPONSE TO SEXUAL EXPLOITATION**

Please tick a number to indicate your assessment of the young person each time you update the form

Tick any that apply	Position at initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1=No CP procedures in place/begun	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2= Awaiting strategy meeting/discussion	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3= CP SW allocated	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
4=Placed on register	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
5=Not known/not relevant (i.e.client 18+)	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
98=Unknown	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

**4. INVOLVEMENT WITH SOCIAL SERVICES - GENERAL**

Please tick a number to indicate your assessment of the young person each time you update the form

Tick any that apply	Position at initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1=Has an allocated Social Worker	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2=Awaiting allocation	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3=Is accommodated by Local Authority	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
4=Has had previous involvement with Social Services	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
5=Is in secure accommodation	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
98=Unknown	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

**5. SEXUAL HEALTH/BEHAVIOUR**

Please tick a number to indicate your assessment of the young person each time you update the form.

Tick any that apply	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1.Never uses condoms	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2. Occasionally uses condoms	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3.Regularly uses condoms	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
4.Never attends GU clinic	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
5.Occasionally uses GU clinic	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
6.Regularly uses GU clinic	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6
7.Previous pregnancy/termination	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7
8.Current pregnancy	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8
10.Poor awareness of sexual health risks	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
11.Has difficulty negotiating safe sex	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11
12.Is willing to discuss sexual health risks	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12
13.Reasonable/good awareness of sexual health risks	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13
14.Encourages sexual health behaviour in peers	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14
15.Unwilling to divulge information	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15
16.Sexually inactive	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16
98.Sexual health information/behaviour unknown	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

**6. ACCOMMODATION**

Please tick a number to indicate your assessment of the young person each time you update the form

	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1-Acute need (no suitable permanent/ temporary accommodation eg on streets)	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2=High need (unsuitable and unstable)	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3=Medium need (unsuitable but relatively stable)	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4=Low need (suitable, some instability)	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5=No current unmet need	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98=Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

Ignore and do not delete automatic numbers entered here:

**7. EDUCATION/WORK**

Please tick a number to indicate your assessment of the young person each time you update the form.

	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1= Permanent exclusion/ dropped out/ no job	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2= Temporary exclusion/ not attending/ PRU	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3= Regular but poor attendance (e.g weekly)	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4= Regular attendance (half time or more)	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5= Full attendance	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98=Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

Ignore and do not delete automatic numbers entered here:

**8.SUBSTANCE USE**

Please tick a number to indicate your assessment of the young person each time you update the form

**N.B.** If relevant note **Method of Use** under 'Background information'.

	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1. Heroin use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Heroin use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Heroin use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Heroin use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Heroin use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Methadone use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Methadone use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Methadone use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Methadone use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Methadone use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Other Opiates use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Other Opiates use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Other Opiates use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Other Opiates use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Other Opiates use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Cannabis use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Cannabis use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Cannabis use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Cannabis use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Cannabis use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Tranquillisers use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Tranquillisers use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Tranquillisers use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Tranquillisers use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Tranquillisers use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Amphetamines use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Amphetamines use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Amphetamines use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Amphetamines use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Amphetamines use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Cocaine use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Cocaine use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Cocaine use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Cocaine use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Cocaine use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98



1. Crack use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Crack use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Crack use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Crack use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Crack use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Hallucinogens (inc.LSD/Magic Mush's) daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Hallucinogens use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Hallucinogens use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Hallucinogens use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Hallucinogens use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Ecstasy use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Ecstasy use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Ecstasy use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Ecstasy use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Ecstasy use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Ketamine use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Ketamine use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Ketamine use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Ketamine use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Ketamine use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Amyl Nitrate use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Amyl Nitrate use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Amyl Nitrate use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Amyl Nitrate use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Amyl Nitrate use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Volatile substances use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Volatile substances use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Volatile substances use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Volatile substances use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Volatile substances use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
1. Alcohol use daily/most days	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2. Alcohol use weekly or less	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3. Alcohol use monthly or less	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4. Alcohol use but frequency unknown	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5. Alcohol use suspected	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98. Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
Other substance used (specify below)	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Substance use suspected but no details known	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

**9. EXPLOITATION, RIGHTS & RISK AWARENESS**

Please tick a number to indicate your assessment of the young person each time you update the form.

	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1=No awareness of exploitation or risk/no assertion of rights	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2=No awareness of own exploitation/risk, but some sense of others rights and needs	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3=Some sense of rights, risks and needs of self and others	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4 = Challenges oppression/discrimination (e.g. racist remark, victim blaming) Tries to meet own needs safely	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5=Asserts own rights in relation to others/recognises own exploitation/risk	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98=Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

Ignore and do not delete automatic numbers entered here:



<b>10. LEVEL OF CONTACT/ENGAGEMENT</b>						
Please tick a number to indicate your assessment of the young person each time you update the form						
	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1=Occasional access for practical needs (e.g. condoms, shower)	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2=Irregular contact, but interested ('checking service out')	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3=Fairly regular service use, but limited engagement with staff	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4=Regular contact with key worker (wary but engaged/some disclosure)	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5=Regular contact with key worker (alliance established, support accepted)	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
6=Regular but infrequent contact ('moving on')	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6	<input type="radio"/> 6
98=Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

Ignore and do not delete automatic numbers entered here:

<b>11. GOING MISSING</b>						
Please tick a number to indicate your assessment of the young person each time you update the form						
	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1=Frequent (weekly) and prolonged missing episodes (24hrs+)	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2=Frequent brief missing episodes (overnight)	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3=Occasionally missing (once in previous month)	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4=Stays out late, but no missing episodes in previous month	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
5=Whereabouts known to carers. No missing episodes.	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5	<input type="radio"/> 5
98=Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

Ignore and do not delete automatic numbers entered here:

<b>12. RELATIONSHIPS WITH CARERS</b>						
Please tick a number to indicate your assessment of the young person each time you update the form						
	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1=Little/no communication. Low attachment/little trust or warmth	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1	<input type="radio"/> 1
2=Poor communication. Some warmth	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2	<input type="radio"/> 2
3=Some mutual understanding. Communication is sometimes positive, but patchy.	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3	<input type="radio"/> 3
4=Reasonable communication. Significant trust/attachment	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4	<input type="radio"/> 4
98=Unknown	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98	<input type="radio"/> 98
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

Ignore and do not delete automatic numbers entered here:

<b>13. EXPERIENCE OF VIOLENCE</b>						
Please tick a number to indicate your assessment of the young person when you update the form						
<b>Tick any that apply</b>	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
1. Has experienced violence recently (within prev. month)	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
2. Has experienced threat of violence recently (in prev. month)	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
3. Experiences current violence from controlling other/pimp	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
4. Previously experienced violence from controlling other/pimp	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
5. Experiences current violence from peers	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
6. Previously experienced violence from peers	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6
7. Experiences current violence from 'drug associates' (eg. dealer)	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7
8. Previously experienced violence from 'drug associates'	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8
9. Currently associates with other violent individuals (eg gang members)	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9
10. Currently associates with individuals who have guns	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
11. Currently associates with individuals who carry knives	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11
12. Has experienced homophobic violence	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12
13. Has experienced racial violence	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13
14. History of 'domestic violence' in family background	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14
15. Has experienced violence/maltreatment in childhood	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15
16. Has experienced sexual abuse in family/childhood	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16
17. Any other previous experience of violence	<input type="checkbox"/> 17	<input type="checkbox"/> 17	<input type="checkbox"/> 17	<input type="checkbox"/> 17	<input type="checkbox"/> 17	<input type="checkbox"/> 17
98. Current experience of violence unknown	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98
99. Previous experience of violence unknown	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
<b>Background information</b>	Add further info here	Further info	Further info	Further info	Further info	Further info

<b>14. OTHER INFORMATION</b>						
If you have any information you wish to record that does not fit into the previous sections, please write in at relevant stage						
	Initial Assessment	Review 1	Review 2	Review 3	Review 4	Review 5
<b>Other Information:</b>						

# Appendix F: Measuring outcomes

The outcome monitoring sheet (OMF) was first developed as a pilot measure over a 10-week period in 2002 with participants from five of Barnardo's services (n=75). Following a successful trial period, the OMF was modified, with an item on rights and risk awareness replacing self-esteem. A violence measure was also added and the category on substance use was expanded to allow the recording of specific substances. Background information recorded on the OMF detailed young people's gender, age, ethnicity, dates of initial assessment and review. To ensure anonymity, young people were identified by their unique Barnardo's record number from each service.

All items on the OMF were directly linked to Barnardo's national outcomes on sexual exploitation, as outlined in Table A1. Scores on the scales were re-coded prior to analysis for ease of understanding, with a high score meaning that an individual young person is at high risk.

## Recording of information

OMFs were completed by practitioners following their first meeting with a service user, and were then regularly reviewed, with the completion of another OMF, up to four times after the initial assessment. The OMF was completed on assessments made by the practitioner and based on information from the referral agency, disclosures and contact with the young person. The OMF was accessed by practitioners in a computerised form in Excel, with an individual file containing outcome monitoring information for one young person across initial assessment and follow-up reviews. Individual data files were then transformed into a database in Excel before being exported for analysis in SPSS (Statistical Packages for Social Science), version 12.

To ensure consistency and understanding in recording of data, all services received substantial face-to-face guidance and support from members of the Research and Development Team throughout the research, including written guidance on completing the OMF.

Table A1: National outcomes

National outcome	OMF item	Scale
Child or young person is not sexually exploited or at risk of being abused through prostitution	Item 1: Level of sexual exploitation	7 item scale
Child or young person is in regular contact with service and able to accept support	Item 10: Engagement	6 item scale
Child or young person has a suitable place to live, with care and support adequate to their needs	Item 6: Accommodation Item 12: relationship with carers	5 item scale 4 item scale
Child or young person does not go missing from home/care	Item 11: Missing	5 item scale
Child or young person attends school/college regularly	Item 7: Education	5 item scale
Child or young person does not associate with controlling/risky adults	Item 2, question 8	1 question item
Child or young person is aware of sexual health risks and protects themselves appropriately	Item 5: Sexual health behaviour	Individual item: 3 point scales for condom use and GU clinic attendance
Child or young person is not drug/alcohol dependent	Item 10: substance misuse	5 point scales for 14 different substances, collapsed into one 5 point scale
Child or young person does not experience intimate violence	Item 13: Violence	2 item scales across 5 different types of violence
Child or young person is able to recognise risky and exploitative relationships and to assert their rights in relationships	Item 9: rights and risk awareness	5 point scale
Child or young person is safe from abuse	Item 1: Level of sexual exploitation Item 3: Child protection as a response to sexual exploitation Item 4: Involvement with social services: general	7 point scale

Note: For more information on the scales and questions used please see Appendix E.

## Research findings

### Assessing change over reviews

Variation was found in the length of time between initial assessment and later follow-up reviews for young people. The widest variation was found between initial assessment and review one, where the elapsed time ranged from less than a month to 24 months, (seven cases with scores over 15 months were found to be univariate outliers).

Table A2: Time between reviews

Stage	N	Range	Time (in months)			
			Min	Max	Mean	Std Deviation
No. months between initial assessment and review one	317	24	<1	24	6	4.49
No. months between review one and review two	124	20	<1	20	4	2.97
No. months between review two and review three	66	12	<1	12	4	2.23
No. months between review three and review four	44	12	<1	12	4	2.17
No. months between review four and review five	26	9	<1	9	4	2.38

Due to the differences in time between initial assessment and follow-up reviews for individual cases, we could not be confident through the data analysis that all young people were at the same stage of intervention. Therefore, the last review at which young people were assessed was used to compare with the initial assessment; at this stage all young people had finished working with the service.

### Excluded cases

Sixty-one cases were excluded from analysis for young people under 18, because the data came from young people who worked with a street-based service. This model of intervention differs significantly from that used by other services as it is largely based on outreach work. Information on a further 81 young people was excluded from analysis when comparing differences between young people who were and were not assessed following initial assessment. Of the 81 cases, 74 were excluded from one service as the low number of young people being assessed following initial assessment was anomalous with other services; this was due to a period of disruption at the service when OMFs were not completed.

Table A3: Number of excluded cases by category

Findings	Group	Excluded cases	Total
All returns			557
Population characteristics ( <i>p</i> )	All young people over and under 18	61 (under 18s from street-based service)	496
Differences in young people reaching review ( <i>p</i> )	Young people under 18	81	317
Young people under 18 reaching review ( <i>p</i> )	Young people under 18 who reach review	None (91 young people were not reviewed following initial assessment)	226
Young people over 18 reaching review ( <i>p</i> )	Young people over the age of 18 who reach review	None (47 out of 109 young people did not get to review)	62

### Non-recorded data

Prior to analysis, the dataset was screened for missing data using guidance for dealing with non-recorded data (Tabachnick and Fidell, 2000). A higher level of non-recorded data was found for young people over 18, but no other patterns were observed in the distribution of missing data across population characteristics. With the exception of age (where services were contacted for information), it was not possible to gain retrospective data on variables.

In common with other quantitative research carried out with highly vulnerable young people in a social care setting (cf Rees et al, 2005), non-recorded data was problematic for some variables; it was highly problematic for measures of substance misuse, sexual health social care involvement, lifestyle risks and experience of violence. Due to the high level of missing data found (particularly at final review), these variables were dropped from statistical analysis as we could not be confident that the data were representative of the sample. Cases were excluded from analysis only if they did not have data for the specific variable; they were still included in other analyses where the required data was present.

Table A4 shows the level of non-recorded information for individual variables, with the accompanying figures indicating the number of cases where information was not recorded. Information on risk factors for young people going missing, relationships with carers, and education were recorded under both lifestyle risks and a later separate variable. Due to the high level of missing data for the item on lifestyle risks, all statistical analysis was conducted on the latter variables.

Table A4: Non-recorded data by variable at initial assessment (all cases, n=557)

	Variable	Non-recorded data (n of cases)
1	<b>Sexual exploitation</b>	<b>10</b>
2	<b>Lifestyle risks</b>	
	Gone missing	360
	Stays out late	336
	Carers do not know whereabouts	371
	Risky adult	326
	Out of school	359
	Other	430
3	<b>Child protection</b>	
	No procedures in place	292
	Awaiting strategy meeting	340
	Child protection social worker	297
	On CP register	329
4	<b>Social services</b>	
	Has social worker	283
	Awaiting strategy meeting	456
	Accommodated by local authority	406
	Previous involvement	347
	In secure care	534
5	<b>Sexual health</b>	
	Condom use	415
	GU clinic	429
	Sexual health practices	419
	Pregnancy	475
	Unwilling to give information	465
6	<b>Accommodation</b>	<b>57</b>
7	<b>Education</b>	<b>83</b>
8	<b>Substance misuse</b>	
	Any substance used, any frequency	296
9	<b>Rights and risk awareness</b>	<b>96</b>
10	<b>Engagement</b>	<b>127</b>
11	<b>Going missing</b>	<b>180</b>
12	<b>Relationship with carers</b>	<b>160</b>
13	<b>Violence</b>	<b>403</b>

### Normality and statistical significance

Prior to analysis, data was screened for assumptions of normality using guidance from Pallant (2005) and Tabachnick and Fidell (2000). Though histograms found that some of the variables did not display a 'perfect' normal distribution, probability plots revealed that none of the dependent variables flouted assumptions of normality. It is well documented that with large enough sample sizes this is not a big problem for parametric tests (Pallant, 2005; Gravetter and Wallnau, 2000; Stevens, 1996).

Statistical significance relates to whether the research finding is a 'real' finding or has been found due to chance (Frost et al, 2006). Statistical tests report a *p*-value which indicates the probability that a score was found by chance or not. The cut-off point for statistical significance is where *p* is less than 0.05, meaning that there is a 1 in 20 chance that the research findings were due to chance with a 0.01 level meaning that there is a 1 in 100 chance that the research findings were due to chance (Frost et al, 2006). The eta squared statistic reported tells us the magnitude (size) of the effect from the intervention (Pallant, 2005).

Significance for t-tests was calculated for one-tailed significance as we were looking for one-directional change at final review, with the experimental hypothesis being that following engagement with a Barnardo's sexual exploitation service, young people would show a reduced level of risk for sexual exploitation and associated lifestyle factors.

### Changes in sexual exploitation and lifestyle risks: initial assessment and final review

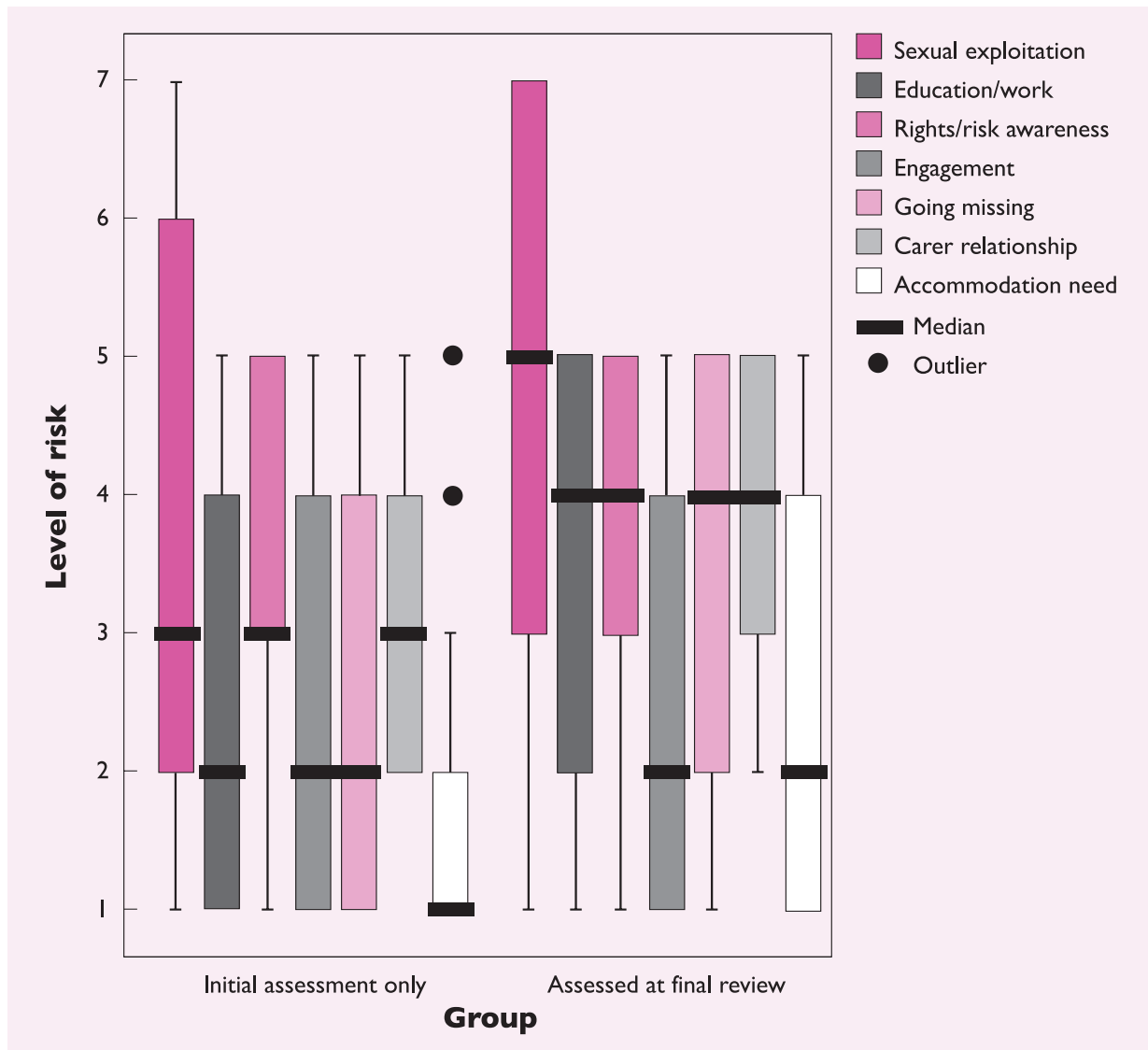
Young people assessed at final review show a higher distribution of scores than at initial assessment. Likewise, greater risks were found for young people who were assessed at later reviews; in particular, large differences were found for accommodation and sexual exploitation (see Table A5).

Table A5: Differences in risks between young people under 18 reaching final review and initial assessment only

Variable	t	df	Sig. (1-tailed)	MEAN			
				IA only	Final review	Mean Difference	Std Error Difference
Level of sexual exploitation	2.91	271	<0.00	4.32	5.03	0.71	0.24
Accommodation	2.83	272	<0.01	1.88	2.38	0.50	0.18
Education/work	2.06	265	<0.05	2.99	3.42	0.73	0.03
Going missing	3.06	238	<0.00	2.61	3.43	0.41	0.52
Rights/ risk awareness	0.12	241	NS	3.54	3.96	0.12	0.00
Engagement	0.44	222	NS	2.60	2.67	0.07	0.16
Carer relationship	1.23	247	NS	3.37	3.56	0.19	0.10



Figure A1: Box plot: distribution of scores for young people assessed only at initial assessment and young people assessed at final review



Note: Outliers are cases where the data on a variable does not fit into the pattern of distribution of scores observed for other cases.

#### Level of sexual exploitation and risk factors: initial assessment and final review

Paired samples t-test were conducted to evaluate the impact of contact with Barnardo's sexual exploitation services on measures of sexual exploitation and lifestyle risk for young people, measured through: going missing, accommodation need, young people's sense of risk and their own rights, education, engagement and relationship with carers.

A highly statistically significant reduction in risk was observed across six of the seven variables ( $p < .01$ ). The eta squared statistic indicated a large effect size for sexual exploitation, engagement, rights and risk awareness, going missing and relationship with carers, and a small effect size for accommodation need.

Table A6: Repeated measures t-test: sexual exploitation

Variable	Measure	Age	Mean time one	Mean time two	One tailed -t	DF	SD	eta squared statistic
Sexual exploitation	7 item scale	Under 18	5.03	2.31	6.77	225	1.58	.17
		18 and over	6.29	5.83	2.30	54	1.46	.09

Table A7: Repeated measures t-test: lifestyle risks, young people under 18

Variable	Measure	Mean time one	Mean time two	One tailed -t	DF	SD	eta squared statistic
<b>Risk factors</b>							
Going missing	5 item scale	3.86	2.65	7.77*	132	1.80	.31
Accommodation	5 item scale	3.90	3.65	2.57*	164	1.27	.03
Relationship with carers	4 item scale	3.03	2.51	5.77*	145	1.09	.18
Education	5 item scale	3.34	3.30	0.25 (ns)	160	1.58	n/a
<b>Protective factors</b>							
Engagement	6 item scale	3.56	4.41	5.22*	132	1.88	.17
Rights and risk awareness	5 item scale	2.05	3.04	9.69*	156	1.28	.37

Note: \* = significant at  $p < 0.1$

Table A8: Repeated measures t-test: lifestyle risks, young people over 18

Variable	Measure	Mean time one	Mean time two	One tailed -t	DF	SD	eta squared statistic
<b>Risk factors</b>							
Accommodation	5 item scale	3.66	3.20	2.19*	38	1.31	0.10
Rights and risk awareness	5 item scale	2.53	2.91	2.01*	42	1.20	0.08

Note: \* = significant at  $p < 0.5$

# Appendix G: Barnardo's statement of ethical research practice<sup>22</sup>

This statement sets out the ethical guidelines that should inform the conduct of all research undertaken by, or on behalf of, Barnardo's. The values and purpose of the organisation provide the overall framework within which ethical research practice is defined. These values are:

- respecting the unique worth of every individual
- encouraging people to fulfil their potential
- working with hope
- exercising responsible stewardship.

## Barnardo's purpose is:

- to provide services to children and young people in greatest need
- to demonstrate effective good practice and to promote developments in practice widely
- to influence social policy for the benefit of children
- to promote good childhood experiences for all children.

Barnardo's acknowledges that ethical practice is necessarily rooted in ongoing reflection and discussion. This statement does not, therefore, provide a set of rules, adherence to which will avoid ethical choices or dilemmas. It recognises that it is often necessary to make such choices on the basis of principles and values, and the – sometimes conflicting – interests of those involved (see Alderson and Morrow, 2004). The statement draws on the British Sociological Association (March 2002) *Statement of ethical practice* and the National Children's Bureau (May 2003) *Guidelines for research*.

## Core principles

Barnardo's researchers, and those undertaking research on behalf of Barnardo's, will:

- be open about the methods used and data gathered. They will ensure that: the purpose of their research is clear, the research they undertake is worthwhile, and the methods of investigation are appropriate (both to answer the research questions and for use with intended participants). Approaches adopted will avoid prejudice and stereotyping of individuals, groups or communities.

<sup>22</sup> Written by Sara Scott and Deena Haydon, December 2005, updated from previous 2002 statement.

- be honest about interpretation and presentation of findings. They will accurately and truthfully interpret findings; avoiding selective reporting, fabrication, sensationalisation and manipulation of data. Claims and recommendations will be supported by the data gathered.
- acknowledge the boundaries of their professional competence. The qualifications/ status/ experience of those conducting research and providing support will be clearly articulated in CVs and an ethical protocol. Researchers will carry out their work with regard to appropriate organisational policies (such as Barnardo's Basis and Values; Equality and Diversity Policy; Child Protection Policy; Data Protection Policy). All researchers are subject to enhanced checking by the Criminal Records Bureau before they conduct any research. They receive mandatory child protection training as well as ongoing professional development aimed at consolidating their research skills. For most projects, an advisory group provides expertise concerning the focus and conduct of the research.
- safeguard the interests of those involved in, or affected by, their work. This includes considering the consequences of their work, or its misuse, for those they study and other interested parties.

## Relations with, and responsibilities towards, research participants

Researchers undertaking work for or on behalf of Barnardo's are responsible for ensuring that the physical, social and psychological well-being of research participants is not adversely affected by their involvement in the research.

Research undertaken by, and on behalf of, Barnardo's is frequently characterised by disparities of power and status between researchers and participants. It is expected that such disparities should be addressed in relation to research design, methods and dissemination. Researchers should strive to develop relationships with research participants on a basis of equality, respect and trust.

The processes of selection, inclusion and exclusion should be explicit so that colleagues, participants and funders clearly understand who will be involved in the research, how they will be selected, how access will be negotiated, and how participants will be engaged to gain consent. Inclusive practice will be promoted to ensure the involvement of all eligible participants, including those frequently excluded from research (such as participants for whom English is not their first language, who have learning disabilities, or who use forms of communication other than speech).

Research should be based on the freely given, informed consent of those participating. This involves providing a full explanation of the research project, including information about: the purpose of the research, who is undertaking and financing it, why it is being undertaken, what is expected of participants in terms of time and activities, how information will be gathered and recorded, what will happen to the information provided, and how the findings will be disseminated. Such explanations should be provided in terms and language which are accessible and meaningful to participants. Researchers should be aware of the sensitivity required to understand when a participant does not want to continue, respond or be observed (particularly when working with young children, participants for whom English is not their first language or who use forms of communication other than speech):

- Research participants should be made aware of their right to refuse to take part, for whatever reason they wish and without adverse consequences, throughout the research process.
- Research participants should also be made aware of their right to withdraw – either temporarily (eg choosing not to answer certain questions or discuss certain topics) or completely – at any point, without adverse consequences.
- Researchers should agree, at the start, the point at which participants will no longer be able to withdraw consent retrospectively.
- Research participants should understand how far they will be afforded anonymity and confidentiality.
- When making notes, filming or recording for research purposes, researchers should make clear to participants the purpose of the notes, filming or recording and, as precisely as possible, to whom it will be communicated. Participants should be able to reject the use of data-gathering devices such as tape recorders and video cameras.
- Where there is a likelihood that data may be shared with other researchers, the potential uses to which the data might be put should be discussed with research participants.
- In situations where access to a research setting is gained via 'gatekeepers' (eg service managers, head teachers) researchers should adhere to the principle of obtaining informed consent directly from the research participants to whom access is required while at the same time taking account of the gatekeepers' interests. Since the relationship between the research participant and a gatekeeper may continue long after the researcher has left the research setting, care should be taken not to disturb that relationship unnecessarily.

Researchers should make every effort to ensure that participants feel comfortable and secure. This includes: using venues which are familiar to research participants and where they feel confident; providing transport or paying expenses; ensuring that refreshments are available; ensuring that support is available for those requiring it (eg participants whose first language is not English, disabled participants, those who would like to be accompanied by a friend, colleague or worker).

When planning methods, researchers should offer choice to suit participants' needs and preferences – while some might prefer talking about sensitive issues in a group with others who have shared similar experiences and can offer support, others may find group discussion intimidating or impersonal. Use of creative, participatory methods will prompt exploration of relevant issues without requiring individuals to relate personal experiences or events.

Researchers should agree with participants what support they would like during and after the research, and consider how they will respond to participants who become distressed during the research process. They should not attempt to provide advice or counselling, unless they are trained to do so.

The anonymity and privacy of those who participate in research should be respected. Researchers should avoid undue intrusion into the personal lives of participants and ensure that they do not feel pressured to discuss anything they do not want to. Personal information concerning research participants should be kept confidential. In some cases it may be necessary to decide whether it is appropriate even to record certain kinds of sensitive information. Where possible, threats to the confidentiality and anonymity of research data should be anticipated by researchers.

Guarantees of confidentiality and anonymity given to research participants must be honoured, unless there are clear and overriding reasons to do otherwise. Reasons for breaking confidentiality should be explained, with a clear outline of what would happen if this were the case.

Consent forms should include a section about anonymity and confidentiality, indicating understanding of procedures to be followed if confidentiality has to be broken. Researchers should be aware of the policies and procedures of the organisations with which they are working, building these into research methods where appropriate (eg confirming the name of the person with whom child protection concerns should be raised, the contact details of the local duty social work team or NSPCC service). If a researcher is concerned, they should: record what the child has said in the child's own words, checking with the child that this is an accurate record; speak to the named child protection person immediately after the interview/ discussion; make contemporaneous notes about their concerns, decisions and reasons, and actions; discuss their concerns with their supervisor. The supervisor should then send a letter to the manager of the organisation providing access, with a copy of the researcher's record of events. The researcher should ensure that immediate support is provided to the child and that the child is kept fully informed about actions taken.

If researchers observe behaviour or practice which does not raise child protection concerns but is considered unacceptable or inappropriate, they should report these concerns to their supervisor, who will feed back to relevant managers.

Research data given in confidence do not enjoy legal privilege and may be liable to subpoena by a court. In relevant circumstances, research participants should be made aware of this fact.

Permission should be gained for recording and storing data. Researchers should explain how information will be gathered and recorded, as well as who will have access to the data. Appropriate measures should be taken to store data in a secure manner and researchers should have regard to their obligations under the Data Protection Act. Wherever appropriate, methods for preserving the privacy of data should be used, including removal of identifiers and use of pseudonyms. Anonymised data such as transcripts will be saved in a confidential area of the electronic system until the research has been completed. Then hard copies will be archived in a locked cupboard and electronic versions deleted. Hard copies will usually be stored for up to a year after publication of a final report, but this timescale may need to be negotiated with funders or research ethics committees. Researchers should particularly guard against data being published or released in a form which would permit the actual or potential identification of individuals, groups or communities (such as dates, locations, descriptions of specific incidents or events).

When dealing with sensitive issues, research participants often share personal information and develop a significant relationship with the researcher. Participants who feel relatively isolated or ignored often appreciate the interest and company provided by the researcher. Consequently, researchers should consider their strategy for concluding relationships with research participants. This entails clarifying, at the start, the nature of the research and its duration. It also requires attention to 'closing down' activities or 'de-briefing' meetings, where participants can discuss final questions or issues with the researcher and the researcher can provide details about local sources of information/ advice/ support as well as their work contact details.

All those involved in the research should receive a recognition of their time and effort, including both participants and those providing access. In addition to some form of thanks, for participants – other than professionals – who have provided significant contributions to the research this may include: payment of expenses; vouchers for use in local shops; provision of refreshments or a meal; contributions towards a shared activity such as a cinema visit or leisure activity; presentation of certificates (Barnardo's has a Rewards and Payments Policy which is available on request).

Barnardo's is committed to providing feedback about research progress and findings to participants. Regular updates about progress may be made in person or written form by the researcher or an advisory group representative. In addition to making copies of full reports readily available, summaries, presentations and reports for participants should be produced as appropriate. Where these are available on the internet, the website link will be provided.

Dissemination is a key element of any research and will be negotiated within research proposals. Researchers should disseminate the findings and implications of their work using formats appropriate for different audiences, including: participants, practitioners, managers, policy makers, other researchers, academics, funders, media.

## Research involving children and young people

The majority of research conducted by and on behalf of Barnardo's involves children and young people, and the responsibilities detailed above apply equally to them. However, there are specific issues arising from the legal status of children and young people, their knowledge and experience of the world and their relative lack of independence/autonomy that require specific attention in order to ensure appropriate and ethical research practice. Research conducted by and on behalf of Barnardo's is committed to addressing these issues in the context of an organisational commitment to maximising the participation of children and young people at all levels of planning, evaluation and influencing.

Research intending to involve children and young people as respondents should begin with a consideration of the potential costs and hoped-for benefits of such participation:

- In order to ensure that such issues are central to the research design, young people should be involved/consulted in the planning and piloting of research whenever possible. Consideration should be given to practical issues, such as: language used, ways of presenting information, location and timing of meetings, provision of refreshments and appropriate support.
- Safeguards to minimise any inconvenience, intrusion, embarrassment, coercion, anxiety or distress should be written into an ethical protocol.
- Attention should be paid to ensuring that participation in research is a positive and rewarding experience. Where there is no direct benefit likely to ensue from the time and expertise contributed by young people, consideration should be given to appropriate gratuities.
- Feedback on research findings should be routinely provided to children and young people as part of acknowledging their contribution and seeking their views about outputs and dissemination.

The voluntary, informed consent of children and young people to participation in research should be actively and explicitly sought:

- Information about the proposed research and the optional nature of participation should be provided in both oral and written form, presented in accessible language.
- Attention should be paid to minimising possible coercion from parents, teachers and other adults, and to minimising the influence of peer pressure.
- Young people should be encouraged to question researchers about the aims and methods of the research.
- Written, or explicit, recorded consent should be obtained from research participants whenever possible. For children aged 3-12 the recommended procedure to be followed is Sieber (1992):

Hi [child's name]  
 My name is [your name], and I am trying to learn about [describe project briefly in appropriate language].  
 I would like you to [describe what you would ask the child to do. Don't use words like 'help' or 'co-operate' which imply a subtle form of coercion].  
 Do you want to do this? [If child does not give clear affirmative agreement to participate, you may not continue with this child.]  
 Do you have any questions before we start? [Answer questions clearly.]  
 If you want to stop at any time, just tell me. [If the child says to stop, you must stop.]

- The option of withdrawing from the research at any stage should be clearly communicated and reviewed at intervals in the research process.

Children and young people themselves must give their consent to participate. However, it may also be necessary to seek the consent of parents, guardians or 'gatekeepers' to engage the child. When a parent does not reside with their child, permission should be sought from resident parents/ carers, and non-resident parents who have substantial contact with their child should be informed. The consent of parents or guardians should be routinely sought except:

- where it is clear that participation in the research involves minimal risk (ie risks no greater than those in everyday life) and will not infringe the rights or impact on the welfare of participants
- where parental/carer permission is impossible or would not protect the child or young person (ie where relations have broken down)
- where the young people concerned are resistant to parental/carer consent being sought on the grounds of their right to privacy and confidentiality, and where the emotional and social maturity and particular vulnerabilities of the young people have been evaluated and the risks of participation are considered to be low.

To provide informed consent, parents/ guardians/ gatekeepers should also be provided with information about the purpose of the research, who is carrying it out, what it will involve and how the findings will be disseminated. Processes for giving or refusing consent should be clear, particularly if this is via a third party (such as parental consent through a project worker or teacher). If negotiating access through NHS services, application to a research ethics committee



may be required. Research involving social care clients will need to take into account ADSS (Association of Directors of Social Services) protocols and the *Research governance framework for health and social care* (Department of Health, 2001).

## At-risk and particularly vulnerable children and young people

Barnardo's recognises that young people involved in risky or illegal activities (eg under-age sex or substance use), who are incarcerated or have run away from home or care, will have heightened concerns over privacy and may be mistrustful of the confidentiality about their participation. In this context:

- Ethical dilemmas should be anticipated and advice sought from those working with the relevant population of young people.
- Where possible young people from the relevant population should be involved in research design and piloting consent procedures.
- Special precautions – such as the collection of anonymous data – may be used to protect confidentiality.
- Researchers should be cognisant of services relevant to the possible support needs of research participants. A fact sheet detailing available services should be prepared.
- Where participation in research is liable to be stressful, young people should be asked if they would like to have a friend or advocate with them.
- Arrangements for optional debriefing after interview/ focus group participation should be considered.
- The limits to confidentiality should be explicitly communicated:

Whatever you have to say in this interview/focus group/questionnaire is confidential unless you tell me that you or someone else is in immediate danger of serious harm, or I see or am told about something that is likely to cause serious harm. If that happens, I would need to report it to someone who might be able to help. I would talk to you about what I would need to do, what might happen, and how you would prefer to deal with the situation.

## Responsibilities to self, as a researcher

Researchers should make every effort to safeguard their own safety, by avoiding placing themselves in situations where they might be at risk of physical harm. Fieldwork with participants should be carried out in pairs, preferably in a neutral location which is familiar to the participants. Colleagues should always be aware of a researcher's whereabouts, and arrangements for contact on completion of interviews or focus groups should be pre-arranged.

Researchers will be encouraged to consider the potential impacts on themselves of carrying out research. Both formal and informal support mechanisms should be established at the start of the research process and regularly reviewed.

## Relations with, and responsibilities towards, colleagues

Researchers should consider the consequences of their behaviour while carrying out research, and its potential impact on others. This includes ensuring that the reputation of Barnardo's, the Policy and Research Unit, or researchers in general is not adversely affected by their language, behaviour or actions. They should make every effort to avoid saying or doing anything which might affect future access to particular individuals, groups or communities. An agreed method for dealing with complaints should be established with participants and gatekeepers.

When presenting their work, researchers should acknowledge the contributions of colleagues. Acknowledgements should include the source of any materials used during the research process as well as all the people and organisations involved. Publications arising from the research should include the names of those who made a substantial and identifiable contribution. Relative leadership and contributions should be reflected in the order of authorship.

## Relations with, and responsibilities towards, sponsors and/or funders

Research will not be undertaken or commissioned if:

- it is unlikely to contribute to Barnardo's purpose
- it is in contradiction with the organisation's values
- it is not adequately resourced
- it does not enable respectful contact with participants or high standards of research.

The integrity of the research will not be undermined by imposed conditions relating to methods, reporting of outcomes or dissemination.

Research will be undertaken with a view to providing information or explanation, rather than being constrained to reach particular conclusions or prescribe particular courses of action. While participating organisations and sponsors/ funders will generally be asked to provide comments on draft reports, Barnardo's retains responsibility for final versions and the independent conclusions and recommendations included within these.

Respective responsibilities and entitlements will be agreed within the terms of reference. Ethical issues underpinning the research will be clearly articulated in an ethical protocol (Barnardo's has an *Ethical Protocol: Guidance* and an *Ethical Protocol Template* which are available on request).

When Barnardo's is commissioning research, or being funded to undertake research on behalf of a third party, a written contract should detail: the purpose of the research, the central research questions, methods, conditions of access to data or participants, requirements for reporting and dissemination, time-frame, outputs, ownership of data, the researcher's right to publish, and accounting procedures.

Researchers have a responsibility to notify the sponsor and/or funder of any proposed departure from the terms of reference or proposed changes in the nature of the contracted research. Researchers must make every reasonable effort to complete the research on schedule, including reports to funders.

# Appendix H: SCIP guidance on the role and responsibilities of lead agencies<sup>23</sup>

The police service in any location works within the framework of the National Police Plan; this has only included child protection work as a policing priority since 2005. However, the Association of Chief Police Officers (ACPO) did produce guidelines on dealing with exploitation and abuse through prostitution in 1998, updated in 2004. The SCIP guidance outlined that the police have the lead in the investigation and detection of crime in relation to sexual exploitation of children and that they should:

... play a full role in the inter-agency discussions and their role in investigating criminal activity must run alongside the work of the social services department regarding the child's welfare (paragraph B9).

Social services are identified as having a lead role in the SCIP guidance, through the strategic work of each local authority Area Child Protection Committee (ACPC), the multi-agency forum responsible for protecting and safeguarding children. The ACPC is specifically responsible for developing and agreeing effective inter-agency policies and protocols as well as strategic planning and training for child protection. Under the SCIP guidance on children abused through prostitution, ACPCs have a key responsibility for:

- actively enquiring into the extent of the problem locally (5.5)
- developing a local protocol, monitoring and reviewing it (5.5)
- taking forward preventative work (5.6)
- organising inter-agency training (5.7)
- identifying specific agency leads under the protocol (6.2).

The health service role in meeting the needs of sexually exploited children is also outlined under the SCIP guidance. This clearly identifies that front-line health professionals play an important role in identification of this form of abuse (B5) and that Primary Care Trusts and Groups should assist in the development of protocols and ensure that health staff are aware of risk indicators for sexual exploitation (B8). The guidance states that all agencies should identify a sexual exploitation lead officer to represent their response and share and co-ordinate information, as well as ensure that appropriate and accessible services exist for sexually exploited young people (B7 and 6.2).

<sup>23</sup> Department of Health et al, 2000.

The guidance identifies a key role for education services:

Teachers and other staff in schools are in close and regular contact with children who may be at risk of becoming involved in prostitution. They should be aware of the risk that children may be drawn into prostitution and alert to changes in patterns of behaviour such as truancy. (B2)

The importance of schools developing preventative work around sexual exploitation under the national framework for PSHE (personal, social and health education), is also emphasised.

The SCIP guidance clearly states the importance of the voluntary sector service role in responding to sexually exploited children and young people. This focuses around a recognition that many young people are reluctant to engage with statutory services, and that voluntary services can offer an holistic, harm reduction approach to support them instead (B12).

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