

# **Unprotected**, **overprotected**:

meeting the needs of young people with learning disabilities who experience, or are at risk of, sexual exploitation

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## Introduction

Although child sexual exploitation (CSE) can, by its very nature, be difficult to detect, a growing body of evidence has given some indication of the extent of CSE, the different forms it takes, and its impact on victims.<sup>1</sup> Research focused on CSE in relation to specific groups of young people - including those with learning disabilities - has, however, been limited. To address this knowledge gap and to usefully inform policy and practice development, Comic Relief commissioned a UK-wide study,<sup>2</sup> the main aim of which was to increase understanding of how to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE. The findings of this project are presented in the report Unprotected, overprotected.

One of four nation-specific briefings, this paper presents a summary of the key findings from the study. These clearly demonstrate the need for policy and practice change in Northern Ireland, as set out in the recommendations from the research that are detailed at the end of this briefing.

#### **Key findings**

- Young people with learning disabilities are vulnerable to CSE due to factors that include overprotection, social isolation and society refusing to view them as sexual beings.
- Lack of awareness of the sexual exploitation of young people with learning disabilities among professionals also contributes to their vulnerability.
- There are gaps in national policy and a lack of implementation of current guidance.
- Young people with learning disabilities are often not specifically considered in local

multi-agency arrangements for CSE, which has implications for whether those experiencing or at risk of CSE are identified or receive support.

Young people with learning disabilities can face a number of challenges to disclosing CSE, including the negative responses of professionals.

# Definitions used in the research<sup>3</sup>

Sexual exploitation: 'The sexual exploitation of children and young people under the age of 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/ or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones with no immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.<sup>4</sup>

Learning disability meets three criteria:

- a. a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with;
- b. a reduced ability to cope independently (impaired social functioning);
- c. which started before adulthood, with a lasting effect on development.<sup>5</sup>

## Policy context for Northern Ireland

The Barnardo's NI *Not a world away* research brought the issue of CSE to the fore in Northern Ireland.<sup>6</sup> Established in 2012, the Safeguarding Board for Northern Ireland (SBNI) subsequently prioritised CSE from the outset and is taking a strategic lead on this issue. While learning disability is not specifically mentioned in the SBNI's Strategic Plan, disabled children and young people are noted as a priority group requiring protection from abuse.<sup>7</sup>

Following police identification of 22 young people as possible victims of CSE in 2013, an independent one-year inquiry began to establish the nature of CSE in Northern Ireland and the effectiveness of responses. Evidence given to the Inquiry included many concerns about the vulnerability of children and young people with a learning disability, especially where this is mild and undiagnosed, and for those with language and communication difficulties. The Inquiry further highlighted that disabled children can be particularly affected by exploitation involving social media. It resulted in 17 key recommendations and a further 60 supporting recommendations,<sup>8</sup> including that schools should receive guidance on how they can provide flexible support sessions about CSE that are accessible for parents and carers of disabled children. The Department of Health, Social Services and Public Safety (DHSSPS) has set up a response team with responsibility for the implementation of the CSE Inquiry's recommendations. Also of note, the revised CSE risk assessment tool now used in Northern Ireland includes learning disability as a vulnerability factor.<sup>9</sup>

Furthermore, in August 2015, the Department of Education issued revised guidance for schools on relationship and sexuality education (RSE) and drugs education. This guidance references the recent inquiries into CSE and provides an opportunity for schools to play a preventative role by improving awareness among staff of the vulnerability factors and current indicators of CSE.

## About the research

The methodology<sup>10</sup> encompassed both qualitative and quantitative data collection across the UK, including: a literature review and policy analysis; a survey of local authorities/Health and Social Care Trusts (HSCTs);<sup>11</sup> a CSE practice survey;<sup>12</sup> a survey of projects working with young people with learning disabilities;<sup>13</sup> and interviews with stakeholders and with children and young people with learning disabilities who have experienced, or are at risk of, sexual exploitation.

#### About the young people who participated in the research

- Twenty-seven young people with learning disabilities were interviewed, ranging in age from 12 to 23 years old; seven were male and 20 were female.
- The majority of the sample were white British (n=22), with five young people from black and minority ethnic communities.
- Fifteen young people had been identified as experiencing CSE and the remainder were identified as being at risk of CSE.<sup>14</sup>
- Fifteen had a Statement of Special Educational Needs or nation-specific equivalent.
- In addition to a learning disability, the following impairments were also noted across the sample: autistic spectrum

conditions (ASC) including Asperger syndrome; dyslexia; attention deficit hyperactivity disorder (ADHD); dyspraxia; emotional and behavioural difficulties; attachment disorders; emotional deregulation disorder; and mental health needs.

## Findings

#### **Vulnerability factors**

- Overprotection, disempowerment and social isolation of young people with learning disabilities all contribute to increased vulnerability to CSE.
- Society often refuses to view young people with learning disabilities as sexual beings, making it harder for people to accept that they can be sexually exploited.
- Professionals' understanding of 'capacity to consent' to sex by young people with learning disabilities was raised as a concern.
- Lack of accessible sex and relationships education, including information about how to stay safe online, for young people with learning disabilities was seen as creating vulnerability.<sup>15</sup>
- Young adults aged 18 and older who are at risk of sexual exploitation may fall through the gap between children's and adults' services.
- There was a lack of awareness and training of professionals, both in terms of sexual exploitation and concerning learning disabilities.

'I'm really quite shocked at some of the professional attitudes towards disabled

# people, and disabled children in particular.'

#### (Professional)

#### **Case study**

Tom, aged 15, was sexually exploited by an older male who groomed him via Facebook. The older male told Tom that he loved him and wanted to be his boyfriend. He also told him that he was 18, when he was actually 37. Tom explained that, because of his autism, he found it particularly challenging to understand why someone would lie to him and say something they did not mean:

'He said he loved me and wanted to be my boyfriend. Why would he say those things if he didn't mean them? I wanted a boyfriend so why would I not have someone as my boyfriend who said he wanted to be my boyfriend?'

Tom said he did not tell his social worker, or any other professionals, that he was having a sexual relationship with an older male because no one asked him. When asked whether he would have told his social worker if she had asked him, Tom said he did not know because his older boyfriend had told him that he must not tell anyone about their relationship as Tom would get in trouble:

'He said it was a secret... He said that lots of people thought that people with autism shouldn't have boyfriends or girlfriends and that they would be angry with me if they knew I had a boyfriend.'

# Policy, guidance and local strategies

Gaps were identified in national policy and guidance in relation to (i) the importance of introducing compulsory sex and relationships education for all young people in every school and (ii) a clearer obligation on local areas and individual agencies to address the particular needs of young people with learning disabilities.

# Multi-agency working and sharing of information

- There is widespread variability of multi-agency working occurring in practice, despite it being seen as critical to this group of young people.
- Learning disability often does not specifically feature within current information-sharing processes and systems.
- Professionals in Northern Ireland pointed to the Inquiry (Marshall, 2014) and thematic review<sup>16</sup> as indicative that responses to CSE in general have not been adequate. They also highlighted that

when there is a multi-agency response, young people with learning disabilities are viewed in the same way as other young people who experience, or are at risk of, CSE.

Professionals from the statutory sector explained that a multi-agency forum, established by a specialist CSE service, had led to improved information-sharing between relevant agencies, including information about learning disabilities. They added that regular meetings between social care and the police provided another opportunity for this to happen.

#### Identification

There is a wide variety in processes, systems and the criteria used to identify and record CSE and young people with learning disabilities.



- Low levels of awareness of CSE affect the identification of CSE, particularly in terms of young people with learning disabilities, who are often 'invisible' within services.
- Only 31 per cent of local authorities and Health and Social Care Trusts (HSCTs) stated that the numbers of young people with learning disabilities could be identified in the CSE figures they collated.

'If they're aware of the issues and they recognise that a young person's being sexually exploited and they're not just "a willing participant" or "choosing this" and that there are other factors underlying it, if they're taking that view, then they respond more positively. But their response is inconsistent across Northern Ireland. One of the things the police is doing to change [the inconsistent response] is they're restructuring the Public Protection Units to align themselves to the [...] five [Health and Social Care] Trusts – so they are making attempts to have a bit more consistency.'

#### (Professional)

#### **Agency responses**

Young people and professionals in CSE or learning disability services had mixed views and experiences of other agencies' understanding of CSE, their attitudes and responses, including in relation to social workers, schools, the police and the Crown Prosecution Service.

## Referrals to specialist CSE services

The majority of specialist CSE services request information about learning disabilities at the time of referral. Around



half said that this information is only provided some of the time or rarely, and that it varies in quality.

- Specialist CSE services could often be working with a young person and have concerns about a learning disability that has not been assessed.
- Some young people had not been properly informed – or told in a way they had understood – why they were being referred. They recalled being confused or unhappy about this but, once they knew their worker better, had welcomed the support.

'I mean: why would you tell someone they were going to a project so they could get help to keep safe? It made me think that I wasn't safe. [...] I just worried that I wasn't safe and I didn't know why.'

(Tom, aged 15)

#### **Diagnosis and assessment**

- Many of the young people with learning disabilities currently being supported by CSE services did not meet the high thresholds for learning disability services, but had unmet needs associated with their impairment.
- Professionals identified that a lack of recognition and/ or proper diagnosis and assessment of learning needs was negatively impacting on the protection of young people with learning disabilities and the provision of support.
- CSE professionals can struggle to get young people referred to children's and adults' learning disability services.

'I find that the older the young people get – so, say 13, 14, 15, 16 – we certainly find that there is a barrier there. We find that other organisations will say: "That's just a wee bit late now," when actually you can really very much see that [the young person] is not doing well in school, they've ended up in the residential care system; there's just something not quite right, but there are challenges to actually getting them referred.'

#### (Professional)

#### **Disclosure of CSE**

When it comes to disclosure, many young people explained that three factors may have inhibited them from telling someone:

- They did not understand, recognise or accept that they were being sexually exploited.
- Even when they had become aware that something was not right about what was happening to them, they had concerns about the consequences of telling somebody.
- There was no one whom they regarded as being an appropriate person to talk to – someone they were confident would listen to and believe them, and whom they could trust.

Young people also said that disclosure to a professional had, in most cases, taken time and only occurred once a longterm relationship had been built with one worker, usually from a specialist CSE service.

#### Diversity

Further work is needed to understand issues around gender, ethnicity, sexual identity and sexuality and young people with learning disabilities who experience, or are at risk of, CSE.

# Outcomes and meeting need

Specialist CSE services are able to work with young people to achieve a range of positive outcomes. From the young people's perspectives, these outcomes include:

- increased understanding of CSE, risk and keeping themselves safe
- considering consequences and recognising healthy relationships
- improved relationships with family and understanding of friendships
- improved mental, physical and sexual health
- engaging with education, moving into paid employment, or planning for the future.

Disclosure of CSE or risk of CSE was recognised as an interim outcome and identified as supporting the achievement of other longer-term outcomes for some young people.

# Recommendations from young people

To prevent young people with learning disabilities from experiencing, or being at risk of, CSE, and to improve support, the young people identified four key areas where improvements could be made:

- Education and information on sex and relationships and exploitation
- Earlier, child-centred general support for young people so that issues do not escalate and create risk; this includes being listened to by professionals
- Support to meet their specific learning needs
- Access to more CSE services.



'They should teach kids what it is and what they can do to make sure it doesn't happen to them.'

#### (Lizzie, aged 17)

## Conclusion

A small number of UK studies have reported that young people with learning disabilities or difficulties constitute a significant minority of sexually exploited young people<sup>17</sup> and that young people with learning disabilities or difficulties are at increased risk of CSE.<sup>18</sup> The evidence from this project has shown that unless attention is paid to the additional barriers and issues faced by this group of young people, their exploitation will remain invisible and continue. The research findings make a clear case for changes to policy and practice, as set

out in the recommendations below. When considering these, it is important to bear in mind that, despite the primary focus having been on young people with learning disabilities, the evidence gathered indicates that the recommendations are equally applicable to young people with learning difficulties and autistic spectrum conditions (including Asperger syndrome). They are also relevant to young people whose learning disability has not been assessed or diagnosed and who may not meet the high eligibility threshold for disability services.

Although each of the recommendations plays a part in improving the situation, they should be implemented in combination to produce effective and sustainable change. Coordinated action across a number of areas is required to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE.

#### Summary of recommendations<sup>19</sup> for Northern Ireland

1. The Northern Ireland Executive must ensure the development, revision and implementation of legislation, policy and guidance in NI to meet the needs of young people with learning disabilities who experience, or are at risk of, CSE. This should include the following changes:

- a. The development of a Northern Ireland CSE strategy and action plan and the revision of statutory and practice guidance addressing CSE and child protection should incorporate information relating to young people with learning disabilities and include: vulnerability to CSE; prevention of CSE; identification of young people who have experienced CSE; and meeting their individual needs.
- b. The Department of Health, Social Services and Public Safety (DHSSPS)'s implementation plan in response to the Marshall CSE Inquiry should actively consider the needs of young people with learning disabilities across the Inquiry's wide range of recommendations.

#### 2. Multi-agency arrangements must lead to an effective response to young people with learning disabilities who experience, or are at risk of, CSE.

- c. The Safeguarding Board for Northern Ireland (SBNI) should ensure that key agencies identify a designated strategic and operational CSE lead for disabled children and young people.
- d. Multi-agency CSE mapping activity should take place and incorporate a focus on the risks to young people with learning disabilities, to support with assessment and response.

e. Multi-agency responses to young people with learning disabilities who experience, or are at risk of, CSE should focus on meeting their individual needs.

3. The Northern Ireland Executive and local agencies, including schools, should take an active role in raising awareness of CSE among young people with learning disabilities and their parents and carers, and equip and empower them with the skills and knowledge to keep safe and seek help.

- f. All schools should implement the updated guidance from the Department of Education relating to sex and relationships education, with information adapted and made accessible.
- g. Information and guidance on sex, relationships, keeping safe and risk-taking must form part of every child's plan (education, health and/or care plan).

4. Regulatory bodies for education, social care, health and criminal justice in Northern Ireland should ensure that all inspections, including those relating to child protection or CSE, incorporate a focus on responses to young people with learning disabilities.

5. Professionals, practitioners and volunteers in Northern Ireland should be better equipped to respond to young people with learning disabilities who experience, or are at risk of, CSE.

- h. Organisations responsible for the pre-qualification training curricula and induction of professionals whose work involves young people and families should make sure that learning disability and CSE are included as core topics for study and preparation for practice.
- i. Bodies that commission, and agencies that deliver, multi-

agency training at a local level to professionals whose work includes responsibility for the safety and welfare of children should ensure that this incorporates information on both CSE and learning disabilities.

#### 6.CSE campaigns and

awareness-raising activities at national and local levels in NI should include a focus on young people with learning disabilities and be aimed at all stakeholder groups to raise awareness of the sexual exploitation of these young people and encourage action to improve protection.

The full research report, practice guide, executive summary and easy-read version of the summary can be found at: **www.barnardos. org.uk/cse-learning-disabilities** 

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to localised grooming: Second report of session 2013–14. House of Commons, London.

The project was undertaken by a fivepartner consortium of Barnardo's, the British Institute of Learning Disabilities (BILD), Coventry University, Paradigm Research and The Children's Society.

- 3 These definitions, which are commonly used in the UK, were used to frame the research; however, please note a different, recently agreed definition of sexual exploitation being used in Northern Ireland by professionals working in a safeguarding capacity.
- safeguarding capacity.
  National Working Group for Sexually Exploited Children and Young People (2008). http://www.nwgnetwork.org/ who-we-are/what-is-child-sexualexploitation.
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- 7 Safeguarding Board for Northern Ireland (SBNI) (2013) *Strategic Plan* 2013–2016. SBNI, Northern Ireland.
- 8 Marshall, K (2014) Child sexual exploitation in Northern Ireland: Report of the Independent Inquiry. RQIA, Northern Ireland.
- 9 Health and Social Care Board (2014) Interim Regional Guidance – Management of Child Sexual Exploitation Referrals http://www. belb.org.uk/Downloads/cpsss\_ management\_of\_child\_sexual\_ exploitation\_referrals.pdf
- 10 Ethical approval was sought from and granted by Coventry University's Ethics Committee and Barnardo's Research Ethics Committee (BREC).
- 11 An overall response rate of 34 per cent

was achieved (71 responses). One of the five HSCTs in Northern Ireland completed this survey, indicating a response rate of 20 per cent for Northern Ireland.

- 12 Twenty-three services responded to the CSE practice survey. Within this, 14 responses were received from specialist CSE services and nine from more generic services that worked more broadly with disadvantaged young people.
- 13 Fourteen projects responded, including those from across the voluntary sector, schools, and health and social care.
- 14 CSE specialist workers reported that it is quite often the case that they support young people considered at risk of CSE and a disclosure or discovery of sexual exploitation occurs, so it is possible that more of the sample of the young people could be experiencing CSE, or had experienced CSE at the time of the interview, than identified.
- 15 Specific issues were highlighted around the inaccessibility of information for young people with learning disabilities relating to sexual orientation in general and homosexuality in particular.
- 16 Following police identification of 22 young people as possible victims, the SBNI was asked to conduct a thematic review of CSE in late 2013; the findings have not yet been published.
- 17 Brodie, I & Pearce, J (2012) *Exploring* the Scale and Nature of Child Sexual *Exploitation in Scotland*



Smeaton, E (2009) Off the Radar: Children and Young People Living on the Streets in the UK Railway Children, Sandbach

- 18 Beckett, H (2011) 'Not a World Away': The Sexual Exploitation of Children and Young People in Northern Ireland Barnardo's, London Smeaton, E (2013) Running from hate to what you think is love: the relationship between running away and CSE. Barnardo's, London
- 19 The range of UK-wide recommendations and supplementary recommendations are available in the full research report. Some have been adapted here for the audience in Northern Ireland.

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