

# **Structured Guide to Inform CSE strength and need discussions - Definitions**

**Physical signs;** bruising, unexplained injuries, sexually transmitted disease

**Emotional signs;** withdrawn, extreme mood changes, angry, self-harm, suicidal, disengaged.

**Material signs;** mobile phone/technological equipment, clothing/footwear, regularly under the influence of alcohol or drugs, in possession of money, **when** there is no reasonable explanation for how they have attained or paid for these things.

**Behavioural signs;** secretive, periods of going missing, getting in or out of cars driven by unknown adults, described as out of control or as having risky behaviour by their family, carers or by practitioners, concerns about the way in which the child uses their mobile phone or the internet

## **Trauma and Abuse History**

### **Exposure to Child Sexual Abuse**

There are 2 different types of child sexual abuse. These are called contact abuse and non-contact abuse.

Contact abuse involves: touching behaviour where an abuser makes physical contact with a child, including penetration. It includes: sexual touching of any part of the body whether the child's wearing clothes or not, rape or penetration by putting an object or body part inside a child's mouth, vagina or anus, forcing or encouraging a child to take part in sexual activity, making a child take their clothes off, touch someone else's genitals or masturbate.

Non-contact abuse involves: non-touching activities such as grooming, exploitation, persuading children to perform sexual acts over the internet and exposing themselves to the child. It includes encouraging a child to watch or hear sexual acts, not taking proper measures to prevent a child being exposed to sexual activities by others, meeting a child following sexual grooming with the intent of abusing them. Online

abuse including: making viewing or distributing child abuse images; allowing someone else to make, view or distribute child abuse images; showing pornography to a child sexually exploiting a child for money, power or status, gratification (child exploitation).

### **Exposure to Domestic Abuse**

Domestic violence or abuse is abusive behaviour taking place in a relationship as a way for one person in that relationship to gain or maintain control over another. It includes physical, sexual, emotional psychological and financial abuse. The term 'domestic violence and abuse' is used to describe any incident or pattern of incidents of controlling and threatening behaviour, violence or abuse between anyone over 16 years, who are/have been intimately involved or are family members. Domestic abuse can also happen on mobile phones, on the internet and on social networking sites - a child is subject to abuse if they are able to hear, see or are aware of the abuse.

### **Exposure to Physical Harm**

Physical abuse means deliberately hurting a child or young person. It includes: physical restraint; such as being tied to a bed, locked in a room, inflicting burns, cutting, slapping, punching, kicking, biting, choking, stabbing or shooting, withholding food or medical attention, drugging, denying sleep, inflicting pain, shaking or hitting babies, fabricating or inducing illness

### **Exposure to Neglect**

This means a failure to meet a child's basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the child's well-being (for example, an impairment of the person's health). Examples include malnutrition, environment, failure to thrive, and non-attendance at medical and/or school appointments.

### **Exposure to Emotional Harm**

Emotional abuse is the ongoing emotional maltreatment of a child. It's sometimes called psychological abuse and can seriously damage a child's emotional health and development. Emotional abuse can involve deliberately trying to scare or humiliate a child. It can include isolating or ignoring them. Emotional abuse includes: humiliating or constantly criticising a child threatening, shouting at a child or calling them names, making the child the subject of jokes, or using sarcasm to hurt a child, blaming, scapegoating, making a child perform degrading acts, not recognising a child's own individuality, trying to control their lives, pushing a child too hard or not recognising their limitations, exposing a child to distressing events or interactions such as domestic abuse or

drug taking, other inappropriate adult behaviours which they would struggle to contextualise. Emotional neglect includes: failing to promote a child's social development not allowing them to have friends, persistently ignoring them, being absent, manipulating a child, never saying anything kind, expressing positive feelings or congratulating a child on successes, never showing any emotions in interactions with a child.

### **Other Trauma experiences**

A traumatic event is an incident that causes physical, emotional, spiritual, or psychological harm. The child experiencing the distressing event may feel threatened, anxious, or frightened as a result. The person will need support and time to recover from the traumatic event and regain emotional and mental stability

There are three main types of trauma, these are acute, chronic, or complex.

- Acute trauma results from a single incident.
- Chronic trauma is repeated and prolonged such as domestic violence or abuse.
- Complex trauma is exposure to varied and multiple traumatic events, often of an invasive, inter-personal nature.

### **Child has received support to recover from the impact of known trauma and or abuse**

Examples of this would include professionals support including: school counselling, CAMHS, statutory and voluntary sector support.

Family/ carers have been supportive to child/ young person accessing the appropriate service.

The support offered would have been appropriate, accessible and readily available to the child and the child would have been available to engage in the support.

## **Emotional health, wellbeing and development**

### **Child has own strategies in place to manage emotionally charged situations or feelings (can regulate self without support)**

Examples of self-regulation can be defined in various ways. In the most basic sense, it involves controlling one's behaviour, emotions, and thoughts in the pursuit of long-term goals. More specifically, emotional self-regulation refers to the ability to manage disruptive emotions and impulses

**External supports for co-regulation are recognised, in place, implemented and accepted**

Examples of this include professional support, families/ carers supporting, guiding and being available to support young person with self-regulation. The young person is receptive to the support and engages with process in order to help their regulatory state. Scaffolding is used to facilitate the co regulation.

**Child has the ability to be compassionate to themselves and others**

Self-compassion is extending compassion to one's self in instances of perceived inadequacy, failure, or general suffering. The child may show this by reflecting some of the reasons behind their behaviours. For example: being uninterested in a social event may be due to low mood they are in because of parents unavailability to them. The definition of compassionate is someone who shows kindness and empathy to others, or is something or some act that expresses kindness or empathy. An example of this may be a teenager, recognising that someone is upset following an argument with family members and allowing that person to express/ show how they feel and just spending time with them whilst these feelings pass, acknowledging it's a really hard time for them.

**Child is able to see things from another's point of view**

When you see another's point of view it allows you to be more empathetic. Child is able to see other views but can still disagree with opinions. School and family have been able to see empathy expressed.

**Child is described as impulsive by others/self-impulsive.**

Impulsive behaviours can create difficulties in relationships; child may struggle to sustain and maintain relationships. Impulsiveness in school may be seen in poor work or school performance. Impulsiveness can include poor decision making. Examples of this effect include the tendency to express thoughts and emotions without any sort of censorship; and, acting without regard to how such behaviour may affect others. Child may present as younger than their chronological age.

**Child is described as withdrawn or self isolates**

Social isolation is a state of complete or near-complete lack of contact between a child and society. It differs from loneliness, which reflects temporary and involuntary lack of contact with other humans in the world. Children may socially isolate from the on and offline world, or continue in one arena specifically online, as this may falsely feel safer

(children and young people vulnerable to being groomed and exploited online). Socially withdrawn children frequently refrain from social activities in the presence of peers. The lack of social interaction in childhood may result from a variety of causes, including social fear and anxiety and from childhood abuse.

## **Sexual Development and Beliefs**

### **Child's level of sexual knowledge is in line with others their age**

What would support this includes: child has received sex education from school and other appropriate sources including parents/ carers. An example of this is child has an interest in sexual issues or displays certain sexual behaviours appropriate to age and stage of development including a level of inquisitiveness, experimenting and exploration. Child shows an understanding of social norms including appropriate social sexual behaviours.

### **Child holds problematic norms about sex and relationships**

This can include having knowledge of specific sexual acts or explicit sexual language inappropriate to age. The child may have skewed views in relation to children/ adult relationships including sexual contact and may not recognise the behaviour towards them as abusive and exploitative. They may feel they are in a loving relationship and in control of what is happening to them. The child may not understand that children cannot consent to sex and may minimise the harm it causes to children due to the exploitative nature of the grooming where children can be falsely led to believe they have power and control within the relationship.

The child may have skewed views around how healthy sexual relationships are navigated; this may include how sex is initiated and consented to, how partners communicate with one another, how conflict is resolved, boundaries and expectations within relationships. They may hold skewed attitudes or beliefs around certain behaviours to include verbal, physical, sexual abuse and coercive control/ or they may not recognise elements of such behaviours as abusive or harmful.

The child may have been exposed to pornography and have knowledge of inappropriate websites/ social media which they will likely have struggled to contextualise.

The child may be engaged in adult-like sexual contact by other adults or attempt to engage in such behaviour with other children . This may be shown through a child playing including the language they use

**Concerns relating to sexualised behaviour have existed but not been met for the child in prepubescence**

This can include child, professionals and family sharing previous concerns which have not been in line with normative development. The child may have been prematurely sexualised and act this out through play, language and contact with others. The child may have been groomed by an abuser to believe that they can engage in sexual behaviours and that children have a choice, and led to believe they are old enough to make decisions and are more mature older than they.

Child and family have not received support to explore the concerns.

The family may not feel supported or able to respond to the child.

The child may have been responded to in a way not commensurate with their age or stage of development.

The child may have received inappropriate or disproportionate responses including punitive and shaming responses, or a minimisation of the concerns/ reinforcement of unhealthy messages, which further skew the child's understanding of relationships and normative/ healthy sexual behaviour.

## Social Development

**Child has one or more close positive friendships with peers**

Child has skills that enable them develop and maintain relationships. Child is an active participant in the relationships and feels they are giving and getting from the relationship. Adults are supportive of the relationship.

**Child has skills to form relationships and to maintain them**

Child has good interpersonal skills: empathy, perspective, turn taking, and moral reasoning. Family/ carers/ education have seen child's

interpersonal skills and feel confident they are able to without support develop relationships.

**Child has one or more hobbies/interest and/ or is valued by others**

Examples of this would include child attending structured organised hobbies. Child has a sense of achievement and enjoyment when undertaking the hobby. When the child discusses the hobby they are able to articulate what their interests are and what they enjoy. The child may feel valued for her/his input into her/his interest and be a valued member of a team.

**Child or those caring for them describes the child as socially and or emotionally lonely**

Social loneliness refers to the absence of an acceptable social network, that is, a wider circle of friends and acquaintances that can provide a sense of belonging, of companionship and of being a member of a community; whereas emotional loneliness refers to the absence of an attachment figure in one's life and someone whom they can connect with on a regular basis.

**Childs social networks primarily exist in the digital world**

Examples of this would include: majority of child's social interactions are online. The child may have preoccupation with being online, maybe accessing inappropriate age content online. The child may believe they have friends in the online world that they do not know in the offline world.

Information to query:

- Who is the child in contact with on line and via which platforms
- Is the child supervised online
- Is the child live gaming online
- Does the child have any awareness of online safety support

**Child is engaged in age appropriate activities**

Age appropriate activities would include structured and unstructured activities with peers. Concerning inappropriate activities examples would include frequenting areas of concerns, going to adult night life venues, visiting properties of concern and travelling in unknown vehicles/ vehicles of concern. Child is engaging with other including peers in anti-social behaviour.

Child has age appropriate relationships (including romantic and friendships)

Child has relationships with peers and these are positive and healthy. In appropriate relationships would include with older/ younger persons, and/or negative abusive relationships with peers

## **Family History and Identity**

### **Child resides in a safe and stable environment**

Would include previous experiences child has had, positive and negative, concluding with current environment.

A stable environment provides a sense of constancy, predictability, routine, and continuity, essential to child well-being

An unsafe environment includes: physical, sexual, emotional abuse to intentionally harm the child's body or mind. Neglecting the child by failing to give them what he/she needs. Failure to supply enough food or appropriate medical care.

An unsafe home would include: unknown adults/ adults of concern frequenting the property; carers being unviable to the child due to their own needs, child has no safe space.

### **Child has a positive sense of belonging to their family/carer**

Child has an identity within their family. Child has positive regard for family and the feelings are reciprocated. When children feel a sense of belonging and sense of pride in their families, their peers, and their communities, they can be emotionally strong, self-assured, and able to deal with challenges and difficulties. This increases a child's resilience. A sense of belonging is a human need. If child has no sense of belonging they are at increased risk of being vulnerable to being groomed for purposes of sexual exploitation due to their unmet needs for emotional connection and warmth having to be sourced outside of their care givers.

### **Parental/carer warmth and encouragement is present**

Emotional warmth: is concerned with ensuring the child's emotional needs are met and giving the child a sense of being specially valued and a positive sense of own unique identity. Emotional warmth is present when a child feels they have a safe emotional and physical space, they are praised, encouraged and cared for, their emotional needs are met, their carer attunes to the needs they have this includes spending time, with the child, holding the child emotionally and being consistent and available to the child.



Lack of emotional warmth could include: the child being ignored, blamed, and scapegoated. The carer giving the child inconsistent responses leaving the child feeling confused. The carer may be needy of the child and role reversal between child and carer.

### **Cohesion and care within the family is present**

Family cohesion can be defined as the emotional bonding that family members have toward one another and to the level of independence they feel within the family system. Cohesion exists across a continuum, with high disengagement on one end and high enmeshment on the other. Examples of care and cohesion present within the family would include: the family system is working for all family members; the child feels cared for and connected with the family.

### **Close relationship with caring adult within immediate or extended family is evident**

Child has emotional warmth and connection with a safe adult. The adult provides nurture and care for the child. The adult is a safe person who the child can connect with. The adult will look out for the safety and welfare of the child (including online) and encourage the child to engage in education and age appropriate activities.

### **Close relationship with an appropriate adult is evident**

The child has a healthy positive relationship with an adult. The adult has the interests of the child at the forefront. The child feels valued in the relationship. The relationship is a safe place for the child to discuss their emotions. The adult will provide the child with accurate, age appropriate information and guidance.

### **Parents/carers have positive sense of belief in the child**

Parents believe the child can reach their full potential and have a belief that the child can achieve. Parents are supportive and encouraging of their child. They believe in their child's ability to reach their full potential and support and empower them to do this. Examples of this include: supporting the child to attend extra-curricular activities, school and age appropriate activities. Supporting the child to have autonomy (age appropriate). Parents/carers will also instil a sense of safety for the child. The child will be aware that their parents/ carers believe in them.

### **Non blaming approach to the child is taken by parents/carers/other adults**

A non-blaming approach can involve where the parent/ carer try to stay positive and offer ways for children to find solutions. They respond in a child centred way. Parents/ carers will have an understanding of child's

vulnerability and grooming strategies employed by abusers and understand that children cannot consent to their own abuse.

A blaming approach would involve: parent/ carers responding to the child in non-age appropriate way and blame the child for some of the concerns/ behaviours.

**Parent/carer has support in place to meet any needs identified**

Parent/ Carer have networks of appropriate support including professionals, community and family. Parent/ carer is responsive to support offered and engages in the support.

Parent/ carer are isolated with limited network support

Parent's/ carer needs are not being supported or parent /carer is not responsive to support being offered.

**Responses to the child by parents/carers/others are with developmental awareness**

Parent has a good understanding of their child's needs and has a good understanding of child's developmental stage including specific needs of their child. They would respond to their child in line with their developmental awareness.

**Child's sense of self and esteem is positive/in line with others their age**

Child's self-esteem initially develops within the family and thus is influenced greatly by the feelings and perceptions that a family has of them. As children are developing their sense of identity, they explore different aspects of it (physical, social, emotional, spiritual, and cognitive), through their play and their relationships. When children feel safe, secure and supported they grow in confidence to explore and learn hence their self-esteem develops and grows.

## **Behavioural Development**

**Behaviours that indicate expression of despair or coping strategies are present**

The term coping generally refers to adaptive (constructive) coping strategies which are deemed as age appropriate and safe. Children often develop their coping skills from the care givers. In order to survive

everyone utilises strategies to cope. Children and young people who have not been supported to develop coping strategies and supported with emotional regulation through their early years will often adapt maladaptive coping strategies. Examples of maladaptive behaviour strategies include dissociation, self-harm, sexual behaviours, violence, and alcohol and substance misuse.

**Other behavioural concerns and or unmet needs are present**

The child may have displayed other behavioural concerns for several years which have been observed in different environments including school, community and home. Some examples of behavioural concerns include: alcohol misuse, substance misuse, self-harm, emotional dysregulation, displaying emotional distress, aggression, violence, anti-social and offending behaviour

The child may have had brief periods of their needs being unmet or extensive periods. Unmet needs can include: lack of stability, no sense of safety, no sense of belonging and identity, lack of appropriate connection with others. Those that are intent on exploiting children for purposes of sexual exploitation would exploit the child's unmet needs and normalise concerning behaviours which others may have concerns about.

**Child or those caring and supporting them describe being fearful or threatened by others generally or specific individuals**

Child has shared that they are fearful of someone. Child's behaviour may change following contact (direct or indirect e.g. through mobile phone) with unknown persons. Unknown or persons of concern have called to the property looking for the child. Child has expressed fear over adult/ male / female. Child has spoken about debt, bondage, concerns in relation to child having unknown callers at door, child has persons listening to their phone calls and professionals/ family report unable to see child alone. Child who is living independently is not available to meet with professionals.

**Child has been subject to criminalisation or is engaging with youth justice services on a voluntary basis**

Can include historical and current. How did the child engage? And what support did they receive? Child's view of the experience?

## Educational Achievements and Relationships

### **Child is in full time education/training/employment and is attending regularly**

- Child has key persons in education whom they have protective/ positive relationship with.
- Child has had continuous consistent education
- Child is supported to attend education
- Child has a sense of belonging and identity in education
- Child has attended several different education settings
- Child suffered trauma in education settings
- Child is not engaged in education
- Child is not supported to attend education
- Child's peer group in school are at risk of sexual exploitation
- Child goes missing from education and it is not known where they are

### **Child is achieving within capabilities**

- Child has the ability or knowledge to achieve in certain areas
- Child is aware they have strengths and can achieve
- Child with support is able to achieve goals and has ambition
- Child can see a positive future and believes they can achieve. Child has aspirations
- Child does not believe they are capable of achieving in any areas
- Child is not able to recognise any strengths.
- Child is not able to visualise a positive future for themselves and do not believe it is possible for them
- Child will likely struggle to recognise abuse as has normalised previous abuse and has come to accept it.

### **Child is a valued member of the school /community**

- Child has a sense of safety in school/ education/ training/ job
- Child has connection with community and feels safe and comfortable in the school/community
- Child has peers, friends and teachers whom they feel value them
- Child has safe appropriate accessible adults available to them in the school/ community
- Child has sense of purpose and achievement within the school/community
- Child has no or very little connection with their school/community
- Child has moved areas several times
- Child has had several different carers
- Child's life has been very chaotic and lacked consistency

- Child has had several different professionals in their life but limited consistent persons

### **Child has relevant support networks in place to succeed**

This includes professionals, community and family support. Child is engaged with the support networks and feels able to access them. Networks of support have the child's best interests at forefront and invest in the child.

Child has limited networks of support outside of professionals. Child is not engaged with networks of support and/ or unable/ inaccessible to the child.

## **Safeguarding and Protection**

### **Safeguarding needs exist in the family**

- Family have failed to safeguard child from harm
- Family have own needs which impact on ability to safeguard child
- Family have been abusive towards the child
- Associates of family are a concern and put child at risk of harm
- Child is exposed to abuse within the family home
- Child is/ has previously been on child protection register
- Intergenerational concerns of child abuse/exploitation.

### **Safeguarding needs exist in the community.**

Forms of abuse within the local community:

- Child has been subject to abuse with the community.
- Community members have been served with a CAWN in relation to young person.
- Child has been involved in ASB in community
- There are concerns that the child is being criminally exploited
- Child has been found missing in the local community.
- Child been engaged in or exposed to behaviours in the community not appropriate for their age/ stage of development
- Child been linked to adults in the community or locations/ addresses of concern

### **Safeguarding concerns exist across a range of contexts**

This includes:

- Online
- Offline

- Criminal
- Community
- Family
- Peer exploitation

**Services to reduce concern are in place and child/family are engaging with them**

The services in place are child-centred and appropriate to the child's developmental stage