Good Practice Briefing

Child Sexual Exploitation A Trauma Focused Approach

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ASCENT – Support services to organisations

Ascent is a partnership within the London Violence Against Women and Girls (VAWG) Consortium, delivering a range of services for survivors of domestic and sexual violence, under six themes, funded by London Councils.

ASCENT – Support services to organisations, is delivered by a partnership led by the Women's Resource Centre (WRC) and comprised of five further organisations: AVA, IMKAAN, RESPECT, Rights of Women, and Women and Girls Network.

This second tier support project aims to address the long term sustainability needs of organisations providing services to those affected by sexual and domestic violence on a pan-London basis. The project seeks to improve the quality of such services across London by providing a range of training and support, including:

- Accredited training
- Expert-led training
- Sustainability training
- Borough surgeries
- BME network
- One-to-one support
- Policy consultations
- Newsletter
- Good practice briefings

Good practice briefings

The purpose of the good practice briefings is to provide organisations supporting those affected by domestic and sexual violence with information to help them become more sustainable and contribute with making their work more effective.

For more information, please see:
www.thelondonvawgconsortium.org.uk

London VAWG Consortium

Women and Girls Network
Women and Girls Network (WGN) is a free, women-only service that supports women in London who have experienced violence, or are at risk of violence.

We offer counselling, advocacy and advice for women and girls who have experienced gendered violence, including sexual and domestic violence.

Our overall aim is to promote, preserve and restore the mental health and well-being of women and girls, to empower them to make a total and sustainable recovery from their experiences of violence.

Ascent services
Through the Ascent partnership, we offer free counselling for women in London who have experience of any form of gendered violence. To refer, call 020 7610 4678 or email ascentcounselling@wgn.org.uk. Check our website, www.wgn.org.uk, for information on which boroughs referrals are currently open for

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1. Introduction

For Women and Girls Network (WGN), Child Sexual Exploitation (CSE) is one of the greatest afflictions within our society.
We bear witness to the testimonies of young women and girls accessing our support services, who have been subject to such an abhorrence of human

behaviour. The, courage, strength and resilience within their testimonies is our motivation to keep on doing work that truly makes us enraged with this ugly face of gendered violence. The fact that we are seeing rising numbers of children affected by CSE across the country is both shocking and a call for action to communities and professionals to act upon the recommendations set out in successive guidance and serious case reviews to prevent the traumatic harm of our future generations.

It is also important to note that although this briefing paper focuses on the experience of girls and young women affected by CSE, we acknowledge that boys and young men also experience CSE. However, as explained within the prevalence evidence and patterns of vulnerability section, girls and young women are disproportionately affected. We therefore view CSE as a form of the gendered violence. Women and girls experience greater inequality, hardship and harm than their male counterparts, the heightened risk of violence and abuse facing women is in the context of lifetime inequalities.

This briefing paper is a synthesis of the established training program that WGN has successfully delivered to over 700 multi-disciplinary professionals since 2015. The training program and this complimentary paper offers insight into the work that is conducted within WGN's advice and counselling services to young women who have either experienced or are at risk of CSE. Our unique perspective is built within our expertise of understanding and responding to CSE from both a gendered and trauma informed lens. The paper is written as an aid to better professional knowledge and practice in supporting young women and girls affected by CSE. It synthesises the current legislative and good practice policy directives and combines the WGN perspective and model of effectively supporting with young women and girls affected by CSE.

2. CSE Prevalence

From our own experience of delivering professional training across 5 London boroughs we have observed the variation in CSE cases that professionals are dealing with. It is clear that CSE is taking place in every borough, across the UK however, where professionals have a more in-depth identification knowledge and seek to look for CSE, there is higher reporting and

prevalence. When considering the prevalence rates of CSE we know that the reporting figures are much lower than what is demonstrated and that the figures below are in fact the tip of the ice-berg.

Diagram 1: Prevalence Statistics

2.i. Patterns of Vulnerability and Victimisation[1]

Nationwide, there is a higher prevalence of CSE documented amongst girls than boys, with no more than one-third of known cases (and more often one-fifth or less) relating to young males. However, these figures may indicate a tendency to overlook harm amongst males, who are both less likely than females to disclose experiences of child sexual exploitation and less likely to have these identified by others. Numerous studies have raised concerns about lower levels of identification amongst certain groups such as males, young people from black and minority ethnic communities and those with disabilities, for example – noting the strong likelihood that rates of child sexual exploitation are much higher amongst these groups than is currently recorded.

CSE is most frequently observed or first identified between the age of 12-15 years. Recent studies show an increase of referrals for 8-11 year olds particularly in relation to online CSE. Furthermore, 16 to 17 year olds are identified as heightened risk, particularly for those with low economic and

[1] Beckett, Holmes and Walker (2017) Child sexual exploitation: Definition and Guide for Professionals - Extended text.

systemic support and that CSE is often over-looked in this age group due to the assumed capacity to consent.

2.ii. The London Picture

As part of the CSE Awareness Day 2017, the Metropolitan Police Service released figures that showed the significant rise in recorded CSE in the capital. Detectives believed these significant increases are as a result of not only better recording practices by officers and more incidents being reported to police, but also an actual increase in the number of offences.

- Between 2014 and 2016 there was a 49 per cent increase in crimes connected with child sexual exploitation across London, from 618 in 2014 to 922 in 2016.
- In addition, there was a 42 per cent increase in the number of children who police believe are at risk of CSE, from 1,116 in 2014 to 1,582 in 2016.
- Online CSE, where young people are groomed and abused online, increased by 135 per cent between 2015 and 2016.[2]

2.iii. London-wide CSE Needs Assessment

The following data is taken from the 2016 needs assessment that was commissioned by MOPAC and NHS England. It is one of the most comprehensive assessments available to understand the current need, the service response and its effectiveness for victims and survivors.

This is included to offer practitioners a more accurate London-wide understanding of the extent of the issue and the emerging themes specifically with the unique make-up of London.

[2] https://www.slatergordon.co.uk/media-centre/blog/2017/03/support-national-child-sexual-exploitation-awareness-day-2017/Metropolitan Police 2017 (CSE Day 2017 figures released)

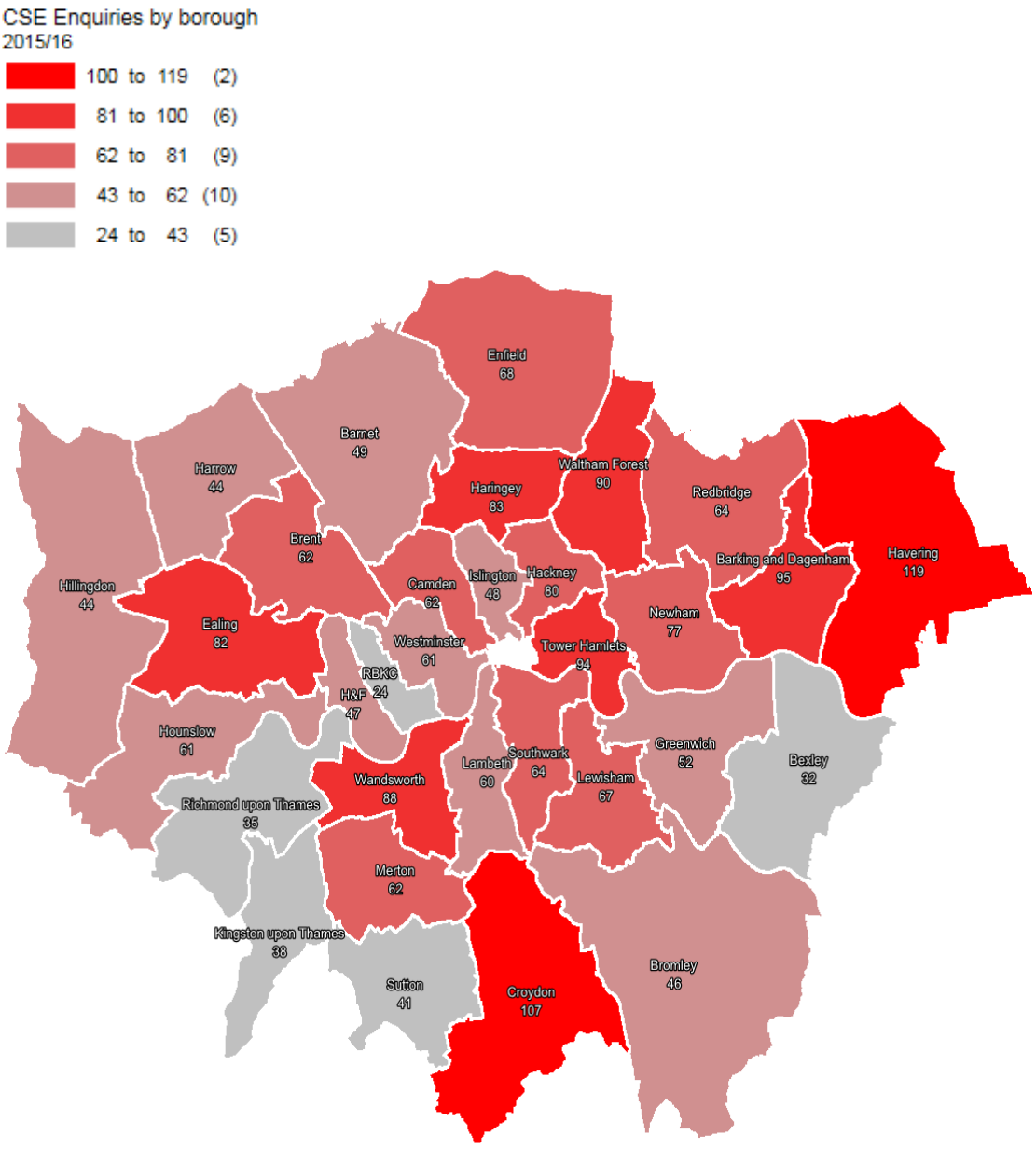


Diagram 2. CSE Enquiries by borough 201/2016

This map reports the number of recorded incidents/investigations of CSE in 2015/16. There is a close correlation to gang prevalence and areas of greatest deprivation such as Croydon & Havering[3]

2.iv. Service Data Metropolitan Police[4]

- There were a total of 333 substantive CSE flagged offences recorded
- The MPS, identified more than 1,400 “at risk” reports of CSE.

[3] MOPAC & NHS England MBARC (2016) ; London Child Sexual Exploitation Needs Assessment 2016

[4] MOPAC & NHS England MBARC (2016) ; London Child Sexual Exploitation Needs Assessment 2016

- The average age of victims was 14.6 years (although victims of gang perpetrated offences were slightly older at 15.4 years)
- 95% of all cases were young women (all gang related offences were against female victims)
- Just under half (48.5%) of victims were white with black victims over represented (28%) and Asian victims under represented (10%)
- A third of all offences took place in a different borough to the victim's borough of residence with a similar number across "county lines", that is outside London
- The average age of offenders was 24 although gang offenders were substantially younger at an average age of 17 years old
- Almost half of all reports were direct to the police (by phone or person) with the majority of third party referrals coming from social services (which included MASH referrals). Direct referrals from education and health services accounted for less than 5%.
- 16% of victims were foreign nationals. The largest nationalities being Polish and Nigerian
- 61.4% of CSE victims had previously been arrested (including 3 individuals for perpetrating CSE). The average that the criminal activity of these CYP had come to notice was 13.8 years old and their average number of arrests was 4
- Information on location of the offence was limited but indicated that 44% took place in private residences and 12% in public places
- Only 2.5% of CSE suspects were female but there was substantial stakeholder comment on female facilitators as an emerging trend
- 32% of suspects were black and 17% white – this is not reflected in the survey data from partners
- One in five cases was a group offence and 5% were gang flagged or with a suspect listed on the gangs matrix

2.v. MPS Data identified Vulnerabilities for contact CSE

The following vulnerabilities were identified from the data:-

- 35% of all victims were young people going missing
- 21% of all victims were looked after children
- Young people involved with gangs or other offending behaviours were deemed at significantly greater risk.
- Looked after children (LACs), those not in school (21%) and those in Pupil Referral Units (PRUs) were particularly vulnerable.
- A third of reported offences took place in a different borough to the victim's home and a similar proportion of young people were vulnerable to "county lines" e.g. the offence taking place outside London.

2.vi. Data from Havens: Identified Vulnerabilities for Serious Sexual Assault

- Those in the 30% most deprived communities were 7.5 times more likely to suffer abuse than those in the 30% least deprived communities: almost a third
- 1.8% had a pre-existing mental health issue and/or had experienced domestic violence (29.4%),
- 6.8% were learning disabled
- Around a quarter used alcohol (24.1%) or recreational drugs (23.4%).
- Data from MPS (CSE contact) and the Havens (serious sexual assault) indicate that risk levels were broadly proportionate for white CYP to their numbers in the population, but CYP from black and mixed heritage backgrounds were at greater risk and those from Asian backgrounds less risk.

3. CSE Definition

Having a common definition of child sexual exploitation is critical to identification, monitoring and effective multi-agency responses. The government issued a definition of child sexual exploitation in 2017 to be used for the purposes of the statutory Working Together guidance

"Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual.
Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology."[5]
Working Together to Safeguard Children 2018

Additionally, the CSE definition and guide for professionals[6] elaborates that:

"Child sexual abuse includes any act of 'forcing or enticing a child or young person to take part in sexual activities'. Like any other form of child sexual abuse, child sexual exploitation:-

[5] Working Together to Safeguard Children (2017)

[6] Beckett, Holmes and Walker (2017) Child sexual exploitation: Definition and Guide for Professionals - Extended text.

- Can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex.

- *Can still be abuse even if the sexual activity appears consensual*
- *Can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity.*
- *Can take place in person and via technology, or a combination of both.*
- *Can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence."*

3.i. What makes it CSE?

In our trainings, we are often asked the distinction between CSE and CSA. It is CSE:

- If someone takes advantage of an imbalance of power to get a child/young person to engage in sexual activity, it is child sexual exploitation if:
- The child/young person receives, or believes they will receive, something they need or want (tangible or intangible gain or the avoidance of harm) in exchange for the sexual activity.

AND/OR

- The perpetrator/facilitator gains financial advantage or enhanced status from the abuse.
- The presence of some form of exchange, for the victim and/or the perpetrator or facilitator.
- The victim is offered, promised or given something they need or want, the exchange can include tangible (money, drugs or alcohol, for example) and intangible rewards (status, protection or perceived receipt of love or affection, for example). [7]

  The receipt of something by a child/young person does not make them any less of a victim. This is an important distinction as, if perpetrator sexual gratification alone met the exchange requirement for child sexual exploitation, all cases of sexual abuse would fit into CSE and there would be no recognizable difference.

3.ii. Profiles and Patterns of Perpetration

Most known perpetrators are male. Although white males perpetrate the majority of CSE, perpetrators come from a wide range of ethnic backgrounds. Perpetrators operate as both sole and group offenders. Operating, in cities,

[7] Beckett, Holmes and Walker (2017) Child sexual exploitation: Definition and Guide for Professionals - Extended text.

towns and rural areas including, schools, neighbourhoods, parks, houses, hotels, takeaways, retail and entertainment outlets.

Peer on peer, exploitation within London as an increasing concern reflected both in London-wide data, as well as anecdotally within WGN's trainings and advocacy case-load. Additionally, there is an over-lap between victim and perpetrator overlap.

Online CSE, is through a range of access points - including social media forums, dating websites, escort websites, chat rooms and gaming sites. There is an increasing crossover between the online and offline environments as technology continues to develop and ease of access to it increases.

Sexual exploitation is commonly characterised by the grooming of young people. Perpetrators to gain their trust carry out this process. Perpetrators often target children who are already vulnerable – who may have troubled family histories and/or be bullied outside of the home and socially isolated. Once the young people are thought to be sufficiently emotionally involved, violence and intimidation is often used to ensure compliance. In addition, perpetrators may give drugs and alcohol to victims and encourage addiction in order to ensure they become dependent on them for the supply of these substances. It is useful for professionals to distinguish between, Group CSE and Gang CSE.

3.iii. Group Based CSE:
Involves people who come together in person or online for the purpose of setting up, coordinating and /or taking part in sexual exploitation of children in either an organized or opportunistic way.

3.iv. Gang Based CSE
Mainly comprising of men and boys aged 13-25 who take part in many forms of criminal activity (e.g. knife crime or robbery) who can engage in violence against other gangs and who have identifiable markers e.g. territory, a name, or (sometimes) clothing The exploitation takes place due to hyper masculinity, view of women as property, or to threaten/punish women and girls.

4. Routes into Sexual Exploitation:
Sexual exploitation can take a number of different routes, recognising the variations that exist is necessary so as not to over-look potential perpetration.

4.i. 'Older boyfriend'/ Inappropriate Relationships
In these form of CSE, a young woman is often targeted due to her vulnerabilities. The adult maybe (not always) older than victim but has inappropriate power or control over a young person (physical, emotional or

financial).Initially, the relationship can feel positive and rewarding for young woman. The adult uses abuse and coercive techniques to increase isolation and create dependency in order to force the young woman into sexual activity with others.

"A 25-year-old male persuading his 17-year-old 'girlfriend' to have sex with his friends to pay off his drug debt."
"A 15-year-old female who views a 21-year-old male as her 'boyfriend' and engages in sexual activity with him, as he has said he will end the relationship with her if she doesn't".

4.ii. Online grooming
Within online grooming, perpetrators are able to conceal their true age, gender and identity. They target young women online and then meet them in person. Exploitation can occur over the internet or through making contact later, through a variety of online forums. Perpetrators are able to contact young woman easily and quickly, without parents/professionals being able to identify and disrupt what is happening.

"A 44-year-old male posing as a 15 year old to persuade a 12-year-old girl to send her a sexual image, then using the threat of posting that image on a social media site to make sure she continues to send more explicit images"

4.iii. Peer on Peer exploitation
For 16 and 17 year olds who are in abusive relationships, what may appear to be a case of domestic abuse may also involve sexual exploitation. It is essential to understand that a power imbalance informs the exploitative relationship, but this inequality will not necessarily be the result of an age gap between the abuser and the abused. Analysis of MPS data in 2015 indicated that peer on peer abuse accounted for over half (55%) of all CSE cases in London The London profile of CSE and the preponderance of peer-on-peer abuse is very different from other parts of the country where the proportion of peer on peer cases is estimated at around a quarter. Ms Understood partnership was commissioned to undertake more detailed analysis in a number of boroughs; their recent work has indicated that peer-on-peer abuse rises to 85% of all cases in some London boroughs[8]

"A 15-year-old female bringing two other 15-year-old females to a party (where they are sexually assaulted) in order to prevent her from being sexually assaulted again."

[8] MOPAC & NHS England MBARC (2016) ; London Child Sexual Exploitation Needs Assessment 2016

“A 16-year-old female whose 17-year-old boyfriend films her giving him oral sex,
and uses the threat of showing her parents the video to get her to have anal sex with him.”

4.iv. Gang exploitation
Young people may be coerced into sexual activity in exchange for ‘protection’ or as part of initiation Young women are sexually exploited in the gang to improve their status and rank . Sexual violence against young women is used as a form of attack, revenge and punishment against another gang; are sexually exploited as a reward for lower ranked male gang members or used as a form of punishment for letting the gang down

“A 14-year-old female having sex with a 16-year-old gang member and his two friends to gain the protection of the gang.”

4.v. Gang Exploitation - County Lines
This typically involves inner city criminal gangs travelling to smaller locations to sell drugs. Gangs tend to use a local property belonging to a vulnerable person as a base for activities, which they have often taken over by force or coercion. Women and children are often used to transport drugs. CSE can also be seen in these cases where young people are being sexually exploited as well as being coerced into other criminal activity.

4.vi. Familial exploitation
In this form of exploitation, an older family member who presents with a high level of vulnerability (mental health problems, drug or alcohol dependency, previous experience of exploitation and gang association) may involve their child/sibling in exploitative situations. The relative may be forced or threatened into involving the family member into the exploitation.

“a 16-year-old female, who is told to introduce two 14 year olds to her abusers, if she does not want her 11-year-old sister to be sexually assaulted.”

4.vii. Opportunistic targeting
Opportunistic targeting can happen very quickly, without any prior grooming. Often young women who go missing, are out late or are in adult environments may be at risk. Perpetrator targets a young woman who is visibly vulnerable (who may also have been previously groomed or sexually abused.)
The perpetrator will offer a young person a 'reward’, money, accommodation, money, drugs etc. in exchange for sexual activity. The perpetrator may often be linked with a network of abusive adults.

“A 13-year-old female offering and giving an adult taxi driver sexual favours in return for the taxi fare home.”

4.Viii.Organised/networked sexual exploitation or trafficking

Young people (often connected) are passed through networks, possibly over geographical distances, between towns and cities where they may be forced/coerced into sexual activity with multiple men. Abuse occurs at 'parties', where young people are used to recruit others into the network. Offenders describe some of this activity as serious organised crime and can involve the organised ‘buying and selling’ of young people. Organised exploitation varies from spontaneous networking between groups of offenders, to more serious organised crime where young people are effectively 'sold'. Children are trafficked across local authority boundaries and regions and across international borders. An adult, with the promise of a better life, an education or the chance to earn money, brings young people exploited internationally to the UK. In some cases the young woman’s family are aware of the perpetrator’s intention to exploit. Perpetrator may exploit the young woman directly or ‘sell’ them to a third person for exploitation. Young woman is hidden from services, making identification especially difficult

> *“A 16-year-old female who has been trafficked into the UK on the promise of a job, but is sold by her trafficker to a 50-year-old male who wants a wife.”*

5. Vulnerability factors

Vulnerabilities are examples of the types of things children can experience that might make them more susceptible to child sexual exploitation. Once again it is important to note that not all children and young people with these vulnerabilities will experience child sexual exploitation. Child sexual exploitation can also occur without any of these vulnerabilities being present. Risks and vulnerabilities may or may not be present, but it is only in the presence of a child sex offender that these factors become connected to CSE.[9]

[9] Research in Practice (2017): Working Effectively to Address Child Sexual Exploitation: An evidence scope.

Table 1: Vulnerability Factors

VULNERABILITY FACTORS	
● Sexual, physical emotional abuse ● Chronic neglect / abandonment ● Exposure to DV ● Risk of HBV ● Gang Association ● Rape and sexual assault ● Household substance misuse ● Household mental illness ● Experience of family breakdown ● Significant bereavement ● Experience of bullying ● Homelessness/insecure accommodation ● Children with mental health conditions ● Social isolation or social difficulties ● Being looked after/in residential care	● Disengagement or absences from education /training /employment ● Parents with high levels of vulnerability ● Physical or Learning disability ● Poverty, deprivation and economic vulnerability ● Association with other children sexually exploited ● Family members or other connections involved in adult sex work ● Refugee children, unaccompanied children from migrant communities ● Unsure about sexual orientation and absence of a safe environment to explore sexuality

The interconnected conditions for CSE to occur are the presence of a perpetrator, inadequate protective structures and the young person's vulnerability. These vulnerabilities are influenced by the above internal, external factors. Some additional factors that need to be considered are:-

- Risks relating to gender and sexuality
- Young people who do not conform to their family or community's expectations of gender and sexual identity and/or behaviour are more likely to feel isolated and unable to disclose sexual exploitation if they experience it. They might fear being judged and labelled; These fears are likely to be different for boys and girls. Girls are more likely to fear being judged as sexually available whilst boys may fear their masculinity and sexuality being questioned if they refuse sex.
- Being forced into marriage; Violence from family/community members who feel they have brought shame onto the group.
- In addition, perpetrators may target young people who they know come from families and/or communities with strongly held and negative views of

sex outside of marriage and of same sex relationships as this leaves those young people particularly vulnerable to self-blaming and blackmail.
- Young people who are believed to be, or are having, inter-racial/religious relationships and these relationships are disapproved of by their family/community.
- Young people who do not conform to gender norms Boys who have sex with boys or are believed to be attracted to boys;
- Girls who are sexually active or are believed to be sexually active. Girls are particularly likely to experience strong familial and social pressure to not have sex outside of marriage or a long term relationship and/or not to give any appearance that they are sexually active;

IMPORTANT: Although many factors may coexist, two of the factors that are strongly evidenced in research indicating CSE is children going missing and gang involvement.

6. Indicators of Sexual Exploitation

The hidden nature of the abuse, its many forms and the low levels of disclosure can make identifying CSE difficult. Sets of 'risk indicators' have been developed to try to aid identification of child sexual exploitation. These commonly include factors such as:[10]

· unexplained money or gifts
· going missing (for short or long periods)
· being distressed or withdrawn on return
· disengaging from existing social networks
· secrecy around new associations
· additional mobile phones or concerning use of technology
· sexual health problems
· disclosure of rape/sexual assault (and reluctance to report)
· changes in temperament/emotional wellbeing
· drug or alcohol misuse
· secretiveness
· unexplained physical injuries.

For practitioners it is important to note that this is not an exhaustive list exclusive to CSE), nor is there any definitive interpretation of what these indicators might look like. The presence of a number of these factors should prompt professional curiosity and questions around the possibility of child sexual exploitation occurring. However, we should remain open to the potential for other explanations (drug dealing) and crucially to the fact that child sexual exploitation can occur without any of these risks. Additionally,

[10] Department for Education (2017): Child sexual exploitation; Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation

when under-taking risk assessment professionals need to be mindful that the indicators are often constructed around indicators of face-to-face perpetration by adults and may not effectively capture online or peer-perpetrated forms of harm.

The following SAFEGUARD mnemonic is part of the London Child Sexual Exploitation Operating protocol and has been developed to support professionals to recognize the warning signs. [11]

[11] MPS (2017): The London Child Sexual Exploitation Operating Protocol. (3rd Edition)

Diagram 3: SAFEGUARD mnemonic – CSE Warning Signs

Appendix 4 – Child Sexual Exploitation Warning Signs – 'SAFEGUARD'

Often, children and young people who are victims of sexual exploitation do not recognise that they are being abused. There are a number of warning signs that can indicate a child may be being groomed for sexual exploitation. The mnemonic

Sexual identity, wellbeing and choice

Sexually transmitted infections (particularly repeat infections); pregnancy; lose sexual orientation and fearful of societal responses.

Absence, truancy and going missing

Truancy from school, including during the school day; missing from home or care, and repeat incidents; travelling outside borough/town when missing; unexplained absences.

Family and home

Sexual, physical, emotional abuse and neglect; risks of forced marriage or so called honour based violence; female genital mutilation; domestic violence; substance misuse; parental mental health concerns; bereavement; parental and sibling criminality; experiences of homelessness or sofa surfing; living in care or temporary accommodation; immigration status.

Emotional and physical health

Suicidal thoughts, plans and attempts; self-harm; low self-esteem/confidence/worth; learning difficulties; changing emotional wellbeing and signs of poor mental health; unexplained injuries and changes in physical appearance.

Gangs, Groups, Age Gaps and Crime

Involvement in gangs or gang affected family, peers or siblings; concerns of abusive peer groups; involvement with older individuals or groups, lacking friends in the same age groups; older 'boyfriends'; sudden changes in peer groups; bullying, both on and off line; friends of young people experiencing CSE.

Use of technology and sexual bullying

Sexting, both sending and receiving; being listed on social network pages in relation to sexual activity and, or named in videos; secretive use of the internet/phones/social networking sites; sudden behaviour changes when using the phone or internet; control via phone or internet; multiple or secretive social networking profiles.

Alcohol and substances

Reliance on and changing use of substances, both legal and illegal.

Receipt of unexplained gifts or money

Unexplained money, mobile phones; phone credit, items, clothes, money; new nails; travel in taxis; gifts where payment is required at a later date; worries about having debt.

Distrust of authority figures

Resistance to communicating with parents, carers, teachers, social services, health, police and others.

7. The trauma of CSE

Trauma is defined as a psychological, physical threat or assault to an individual, involving their physical integrity, sense of self, safety and survival. Such an experience results in an overwhelming amount of stress for an individual that can exceed one's ability to cope or integrate the emotions involved with that experience. Within this context the behaviours experienced under within child sexual exploitation is deemed as a traumatic event for the victim and survivor.

7.i. Impact of Trauma

The factors influencing an individual's response to trauma are ultimately dependent on the resources available to the individual. Trauma is a result of our resources being exceeded to cope with the single, continued or complex traumatic events that over-whelm the human system, this leads to a cascade of minor or major disruptions within the human system leading to the following sequela of symptoms.

Table 2: Global impact and sequela of symptoms

	Symptoms
Emotional	Mood swings, hopelessness, fear, anger, hypersensitivity, pre-occupation with danger
Cognitive	Diminished concentration, self-blame, fragmented memory and recall problems, flashbacks, nightmares, phobias
Physical	Sleep / eating problems, gastro-intestinal problems (IBS), impaired immune system, chronic fatigue syndrome, asthma, migraines
Behavioural	Self-harming, suicidal ideation/ activation, risky sexual behaviour, impulsive and aggressive behaviour, irritable, impatient
Interpersonal	Withdrawn, difficulties with trust, problems relating to others, lack of inter-personal boundaries, isolation and sense of alienation, intolerance

7.ii. The neurobiology of trauma

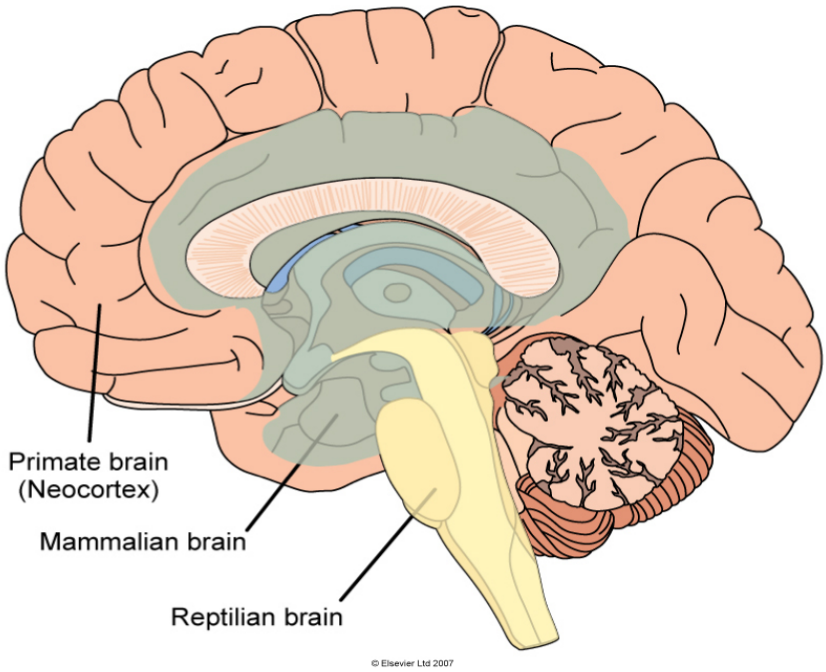
The human brain is a complex system and is divided in terms of structure and function through the process of evolution into three distinct parts. The oldest and most primitive part of the brain, the brain stem, is referred to as the reptilian brain and is concerned with internal homeostasis such as breathing and heart rate etc.

The mammalian brain (the limbic system) is responsible for basic instincts towards; safety, food, shelter, sex, power, attachments and emotional

responses of anger, anxiety, sadness joy and lust. Fundamentally within the trauma response it is the limbic system that governs the survival reactions of fight, flight, freeze, flop and friend. The processing systems within the limbic system are fast, involuntary and hard to verbalize.

The cerebral cortex and frontal lobes of the higher human brain appeared as a genetic shift 2 million years ago and enabled analysis of the external world, self-awareness and consciousness, eternal understanding. This enabled the development of advanced skills such as: planning, the evaluation of consequences, imagination (mental imagery) and ruminations (ability to worry). The processing systems of the cortex are; integrated, evolved, slow, reflective, easy to verbalise. The system engages with cognitive competencies and the learning of social rules, opposite to the limbic system it is a slower more voluntary system. The cerebral cortex is divided into two interconnected lobes with differentiated function. The left hemisphere is concerned with liner thought, logic, analysis and language with functions closely aligned to cortical functioning. The right side of the brain relates to nonverbal more emotive and body sensation of the reptilian and mammalian brain.

Diagram 3: Brain



7.iii. The trauma response

Danger and the fear response are located in the mammalian brain in a collection of primitive structures referred to as the limbic system. The thalamus is the central neural centre for all five senses (vision, hearing, smell, taste and touch). The amygdala is a small almond like structure and is associated with big emotions related to fear, horror, attachment and emotional/ sensory memory. The amygdala is activated by visual or auditory threat with an incredibly fast response rate, firing at 7 millionth of a second. Once the amygdala is activated it will fire the hypothalamus to release the stress hormones, cortisol and adrenaline, which prepare the body for flight and fight responses. The Hippocampus is linked to memory function and retains information in a spatial and chronological order, similar to the functions of a filing cabinet and filing system where everything is logically filed and everything is in its own space. Trauma material cannot usually be integrated into this system and tends to be repeated via a loop type memory system referred to as an active memory, responsible for flashbacks during the day and nightmares of a night. In usual neural functioning the frontal cortex will activate an appropriate response. However, in trauma situations terror and fear responses overwhelm brain functioning with survival mode superseding all other brain activities and inhibiting activation of the frontal cortex resulting in an impairment of executive functioning and the loss of the ability to plan, organise or take appropriate action.

7.iv. Flight, Fight, Freeze, Flop and Friend Survival behaviours.

Defensive survival behaviours referred to as the 5 F's dictate responses. The initial human instinct is flight, to run from danger, without an escape route but with strength a fight response is activated. In situations without either an escape route or strength, the body switches the nervous system response (from sympathetic to parasympathetic) triggering first catatonic immobility or a freeze response and then with repeated exposure to danger activating the opposite tonic immobility to a loss of muscle tension resulting in a flop response. An additional response available to humans within the defensive survival behaviours is the 'friend response'. This is considered to be our earliest defence strategy, similar to babies crying when in danger to alert others and bring a caregiver. With language individuals are able to negotiate, plead or bribe in an effort to overcome danger. The social engagement system can be heightened in extreme situations with adaptations and connections to the aggressor as seen in the Stockholm syndrome.

7.v.Trauma pathway

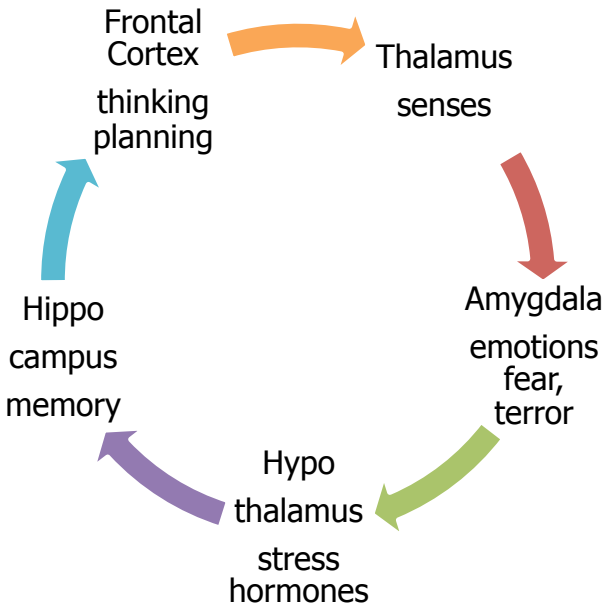


Diagram 4: Trauma Pathway

These symptoms can be experienced in the short-term, however, when experienced over a longer and more chronic period they can result in a number of conditions. Trauma can be life altering, changing the way that an individual views the world and their place within it. It can affect the long-term life trajectory and outcomes particularly for women and girls who have faced repeated and prolonged abuse.

Section 1.01

Section 1.02 7.vi. Clinical conceptualisations of the impact of trauma

The long-term impacts of trauma can be described through three clinical conceptualisations: developmental trauma, post-traumatic stress disorder, and complex traumatic stress (Figure , following page). These can provide an essential diagnostic framework to understand how survivors of CSE might engage with services, and the interventions they need.

Table 3. Developmental Trauma, Adolescent CTS, PTSD, CTS

Developmental Trauma	Adolescent Complex Traumatic Stress	Post-traumatic Stress Disorder (PTSD)	Complex Traumatic Stress
• **Who it impacts:** children and young women who have experienced adverse interpersonal trauma during childhood e.g. harmful practices, child sexual exploitations, witnessing domestic violence • **Symptoms:** Confusion, depersonalisation, failure to achieve cognitive competencies, interpersonal disturbances, negative self-concept, affect disregulation	• **Who it impacts:** • Children and young people exposed to multiple and prolongued trauma. Its more relevant for young women experiencing CSE as goes beyond tri symptoms and is more relevant for inter-personal violence. • **Symptoms:** Relates to psychological fragmentation including loss of safety, trust, self worth, coherent sense of self, personal agency and leads to potential re-victimisation	• **Who it impacts:** Indivduals exposed to actual or threatened death, serious injury or sexual violation. • **Symptoms:** Intrusive thoughts, avoidance, alterations in cognition and mood, alterations in arousal and reactivity	• **Who it impacts:** Typically, individuals with a history of subjection to totalitarian control over a prolonged period involving situations where the individual is trapped • **Symptoms:** Alterations in systems of meaning, alterations in somatic experiences, alterations in relationships, alterations in perception of the perpetrator/s, alterations in self-perceptions, alterations in consciousness, alterations in emotional regulation

7.vii. Impact of trauma on brain development

It is useful to further examine the impact of CSE on the developing brain of an adolescent, as we can then begin to understand the additional neurophysiological complexities and challenges that this poses for CSE victims and survivors. It also helps professionals to identify what maybe a 'trauma response/symptom'. The developments within neuroscience offer us a more in-depth picture of the adolescent brain. It is now known that adolescence is a period of exuberant growth, which continues until the mid twenties. During this time the prefrontal cortex develops into full maturity and is associated with the integration of key areas of functioning:-

- Controlling impulses
- Initiating appropriate behaviour
- Inhibiting inappropriate behaviour
- Organising, prioritising, making decisions
- Insight
- Working memory

However, trauma is responsible for the release of cortisol within the body. Cortisol inhibits the production of two critical neuro-transmitters

- Dopamine which is involved in judgement and impulse control
- Serotonin essential for self-soothing and calming abilities

Sustained high levels of cortisol can damage the hippocampus, an area of the brain responsible for learning and memory. Young women who have experienced CSE and are experiencing trauma symptoms, maybe adversely affected in not only their learning but due to the affects of cortisol on both their impulse control and self-regulation, they can displaying behaviours that are often misunderstood as 'challenging behaviour' particularly within educational settings. As professionals, understanding CSE from a trauma informed perspective offers us an opportunity to understand the complexities of this behaviour without the judgement and misunderstanding which further alienates young women from accessing the effective support they need to recover from the trauma of CSE.

8. Practice Based Issues – Historical Lessons from the Serious Case Reviews

The serious case reviews of Oxford 2012, Rochdale 2012, Stockport 2013, Rotherham 2014 and Manchester 2014, provided the catalysts for the UK to finally accept that CSE was a previously unacknowledged form of Child Abuse. These high-profile cases of organized child sexual exploitation catapulted the urgent need to address the critical failings by both professionals and communities to safeguard and protect children and young people from sexual exploitation. The seminal national enquiry by the Office for Children's Commissioners' Report[12] and the resulting, serious case reviews finally offered those responsible for such duties the necessary policy and practice guidance on how to effectively support children and young people.

The findings from the independent CSE enquiries and Children's Commissioners enquiry identified the following over-arching themes and system failings[13]:-

- **In Denial:** Professionals were found to be in denial about the issue, choosing to not prioritise it.

[12] Sue Berelowitz et al. (2013) "If only someone had listened" Office of the Children's Commissioner's Inquiry into Child Sexual Exploitation in Gangs and Groups

[13] Sue Berelowitz et al. (2013) "If only someone had listened" Office of the Children's Commissioner's Inquiry into Child Sexual Exploitation in Gangs and Groups

- **Failure to Recognise:** Misconceptions and misinterpretations about the nature of abuse were seeped in professional prejudice. They failed to recognise the signs and symptoms of CSE or how to respond effectively to victims therefore missing early opportunities to prevent, the abuse. The level of totalitarian control exercised by perpetrators was not recognised. The enquiries demonstrated that perpetrators had control over every element of victims' lives. Tactics used included threats and the use of violence – towards young people and their families. These were the main reasons given by young women for not disclosing the abuse. Perpetrators told young people told they would not be believed and there would be no hope of escape. Tragically, even when young people co-operated with services and disclosed the abuse nothing changed and the abuse continued.
- **Working in Isolation:** Organisations worked in isolation, not following basic information sharing protocols, which not only prevented them from arriving at a comprehensive picture of the problem but resulted in a lack of early intervention and appropriate risk assessment.
- **Labelling and Victim Blaming**: The 'risky behaviour of young women' including them going missing was labelled as rebellious and making willing choice resulting in them being treated as an offender as opposed to a victim. Additionally, the police informed parents that their daughter's were hanging about with the 'wrong crowd' and making 'choices' about relationships and sexual partners.
- **Forgetting the Child:** Despite clear disclosures by young women, services did not listen, act and safe-guard the young women from the abuse that was taking place. Boroughs were unable to identify victims due to incomplete tracking data and not adequately recording young people they considered at risk of CSE. Importantly, people's voices were missing in both their own care planning and at the level of strategic planning around CSE.
- **Failing to engage:** There was clear feedback from the voluntary sector that statutory services were unable to engage young people, which led to young people slipping through the net. Statutory services demonstrated a lack of understanding of the needs of LGBT, BME, and/or disabled young people. There also failed to contextualise CSE as a gender specific issue. In relation to engagement the focus was on the victim to engage with services as opposed to services engaging with the victim, demonstrating a clear lack of knowledge on how to address barriers for children to engage with support services.
- **Lack of Leadership and No Strategic Planning:** At the time of the enquiry there was a lack of leadership or strategic planning, 43% of LSCB's had no strategy to tackle CSE. This has vastly changed in that there is now a strong directive from central government. The enquiry

findings have resulted in the new CSE definition and guidance for professionals. In London, there is the CSE Operating Protocol to compliment the London Safeguarding Child Protection procedures and more recently the enquiry into child abuse has offered further central government commitment to tackling the issue. At the time of inquiry

As is shown the vast number of systemic and professional failings required an urgent over-haul of the policies and procedures for those responsible in supporting children and young people.

8.i. Professionals Attitudes

One of the most shocking failings was the attitude displayed by those responsible professionals. Some of the most common phrases used in the call for evidence submissions as part of the serious case reviews demonstrated a professional attitude that was seeped in judgment and victim blaming. The language used demonstrated a focus on the victim being responsible for the events and lacking understanding of the crimes being committed against her.

Diagram 5: Professional attitudes

Attitudes that label young women reflects a worrying perspective held by a number of professionals, namely that children are complicit in, and hence responsible for, their own abuse. This often demonstrates a lack of awareness of the impact on children living in dangerous environments and of the consequences for the child or young person saying "no". Numerous testimonies from young people provided evidence that failure to comply with demands for sex, were likely to result in serious harm to them and/or to their

family. It was clear that, even when young women were saying that they were agreeing to sex, this was happening under manipulative and coercive circumstances. However, coercion was not always identified, or even considered, by professionals. Professionals beliefs and attitudes influence actions. So if a professional believes a young person to be complicit then no action is taken. This leaves the young person further exposed to exploitation and maybe a factor in why most incidents of abuse and violence are not reported to the police. Fear of not being believed is a key reason why (young) survivors don't tell anyone about their experiences of violence. When adults perpetuate judgmental attitudes and beliefs, young people may experience further feelings of stigmatisation and be even less likely to seek help. Professionals need to be clear – that sexually-exploited children are children first and foremost, and that their experience in these circumstances is not consensual, but abusive.

8.ii Key Messages for professionals

- Accept that CSE exists. As with other forms of child abuse, denial and to the existence of CSE have contributed to the challenges of defining and addressing CSE.
- Professionals need to challenge any perception of victim responsibility within CSE as well as any judgment and victim blaming by focusing on language and actions that are used with young women.
- Be aware that victims and survivors frequently don't understand and recognise that what is happening to them as abuse. Perpetrators often manipulate the victim to believe that the perpetrator genuinely cares (even despite the violence and abuse that is exerted. If young women do not see themselves as victims they do not seek support or engage when we intervene.
- Be aware of the extreme violence and sexual abuse that children and young people experience. During their experiences of CSE, young people, will not talk about it, so it is possible to underestimate what is happening to them
- It is important to locate CSE within a wider understanding of harm and vulnerability and to make connections with other vulnerabilities and forms of abuse. The misconception of challenging and confrontational behaviour can make it difficult for professionals to perceive the under-lying vulnerability that is exploited by perpetrators.
- Be mindful that not all children who are sexually exploited have an underpinning vulnerability.
- Recognise that a child or young person's vulnerability is not the reason they are sexually exploited. The reason is that someone is willing to take advantage of the vulnerability and the absence of protection and support.
- Note that perpetrators may not always seek out opportunities to abuse, they create new opportunities to abuse and they create new vulnerabilities

that did not exist before.
- Address and challenge the myths and misconceptions about who perpetrates and experiences child sexual exploitation, for example some sexual activity that may appear to be consensual may not be so. CSE can be over-looked for 16-17 year olds. Furthermore, CSE does not cease because a young person turns 18.
- Recognise that the receipt of something tangible/intangible by the child or young person does not negate the abusive nature of the act. [14] [15]

9. Good Practice when working with young women on CSE

A number of good practices guidelines have been developed for working effectively to support victims and survivors of CSE.

The following section addresses key good practice principles that have been synthesised from core guidance as well as our own models of working with young women who have experienced CSE. From our own experience we have identified some key practice areas that are important to address when working with young women who are at risk or have experienced CSE. Within these areas we identify key service characteristics to support professionals in their role.

[14] Research in Practice (2017): Working Effectively to Address Child Sexual Exploitation: An evidence scope.

[15] Beckett, Holmes and Walker (2017) Child sexual exploitation: Definition and Guide for Professionals - Extended text.

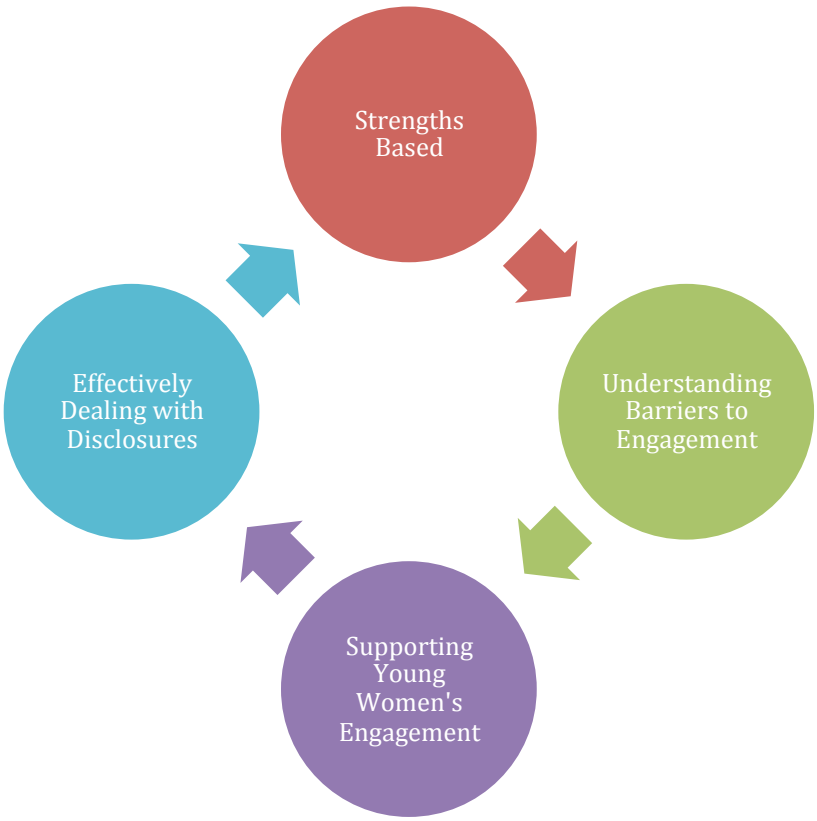


Diagram 6: Good Practice Characteristics

1. **Strengths Based, Promoting Resilience and Protective Factors –** Young women have an array of tools and strategies that they have used to cope and survive their CSE experiences, taking a strengths based approach means identifying and building on the strengths and resilience displayed whilst promoting additional protective factors. Some identified resilience and protective factors to support young women are:

    - Support from positive role models, mentors and friends.
    - Developing assertiveness skills both (internal and external) e.g. self esteem, but also self-defence and self-protection
    - Supporting young women to develop a sense of physical, emotional and economic security
    - Developing young women's agency and input into decision-making
    - Promote a sense of belief that others have high expectations of them
    - Participation in engaging and challenging activities that build skills and competencies
    - Supporting a sense of belonging/safety structure[16]

[16] Sharpen, J., 2009. Policy Briefing: Teenagers and Domestic Violence. London: AVA.

2. Address Barriers to Engagement

Research shows that young people are active in seeking help but professionals do not always pick up signs and clues. However, help seeking is hard for young people due to barriers they face these include:

- Psychological: embarrassment, fear of rejection, not wanting to expose one's (self-perceived) inadequacies, wish to avoid feeling indebted, not wanting to trouble the helper, pride and a desire to overcome a problem on one's own
- Service & professional bias, fear, stereotypes & stigmatisation
- Grave consequences to exposure of problems e.g. fear of retaliation, personal attack or reprisals against her family, reinforces young women's silence
- Normalisation of sexual and domestic violence
- Lack of confidentiality when disclosing to professionals e.g. fear of police and social services involvement
- Stigmatisation associated with accessing particular services e.g. sexual health, substance misuse
- Specific gender or cultural issues e.g. talking about issues outside the family/culture
- Disillusionment with services and/or professionals, believing that they won't really be able to help (young people in care are less likely to seek help)
- Isolation, low self-esteem and self-worth make accessing help difficulty for young women.
- Perpetrator tactics and modes of deception used in grooming, can create confusion and makes it difficult for young women to be clear about what help they need/seek.
- Loss of supply of drugs/ alcohol/money/ 'gains' etc. /protection/status
- Fear of separation from family/ friends /boyfriend/
- Difficulty disengaging from 'gang' due to the relationships within the gang that substitute for a family structure.
- Impact of trauma on the brain may inhibit planning and action
- Lack of available resources to meet the young person's specific needs e.g. translators for young people who can't communicate fluently in English (BAMER young people, deaf young people
- Fear of bullying and peer pressure
- Young women's experience creates huge levels of shame which negatively impacts on help seeking behaviour

3. Effectively Dealing with Disclosures

As with all disclosures of violence against women, the primary role when women disclose harmful practices is to be a witness and a compassionate presence. This requires active listening skills and verbal support, in which the practitioner considers:

- Eye contact
- Facial expression
- Tone of voice i.e. not too loud
- Head movement, encouraging prompts
- Try not to interrupt
- Ask questions to clarify
- Occasionally restate a part of the story in your own words to make sure you understand

Furthermore it is crucial that practitioners challenge and work to reduce the stigma, shame and blame that is present for young women who have experienced CSE by being clear that young women are not to blame for the abuse and place responsibility for the abuse on the perpetrator.

4. Supporting Young Women's Engagement

Collaborative, motivating and child-centred relationships are at the heart of young women's engagement.[17] Trusted relationships have repeatedly been proven to be the most effective tool to support CSE and ensure earlier intervention. Believing in each young woman's individual's agency, and making space for her autonomy is critical to the success of the relationship and her long term safety. Each young woman is different. Equity is different to equality. Understanding young women's unique context and responding appropriately ensures professionals are responding to each young woman's various identities and needs. Engaging young women effectively requires professionals to embody and demonstrate within their services a set of principles that are rooted in young women's recovery from CSE and other forms of gendered violence. Young women accessing the WGN 'Making Space Advocacy Service' have created the following principles:-

- Holistic – Mind body, spirit,
- Rights- Know your rights, fight for your rights , Knowledge is power
- Therapeutic – Supporting growth, healing and development
- Intersectional- Seeing and celebrating diversity
- Trauma Informed - What's happened to you, not what have you done

[17] **Mason & Prior, 2008.** ***Engaging young people who offend***

- Mutuality – Connection to yourself. Others, relationships of care, respect and kindness
- Strengths – We believe in you, we will support you to believe in yourself
- Rebellion – change is positive and necessary, we celebrate your resistance
- Feminist and Gender Responsive– The world is gendered our work must be too.

10. Organisation

Organisation	What they do	Contact
Women and Girls Network	Provide Counselling, Advice Advocacy, body therapy, group work to women and girls experiencing violence and abuse across London boroughs. Offers a specialist young women's service in West London.	West London Rape Crisis Centre and Young Women's Advocacy Service for Ealing: 020 8567 7347 Sexual Violence Helpline: 0808 801 0770 Advice Line: 0808 801 0660
London Survivors Gateway	Telephone hub for sexual violence support services For anyone aged 13 or above, who has experienced sexual violence or abuse at any time in their life and lives, works or studies in London. A team of telephone navigators help survivors to: • access sexual violence support services in London • make decisions about what support is right for you • consider your own safety and support needs • find self-support guides and resources	**0808 801 0860**
STOP CSE - National Working Group (NWG) Network	The NWG Network links professionals working with children and young people affected by sexual exploitation.	http://www.stop-cse.org/

	They provide resources, training and advice and aim to help professionals and organisations provide the best support to victims and their families and ultimately to stop CSE completely	
The International Centre: Researching Child Sexual Exploitation, Violence and Trafficking	The Centre is part of the University of Bedfordshire and aims to increase understanding of and improve responses to child sexual exploitation, violence and trafficking	http://www.beds.ac.uk/ic
National Society for the Prevention of Cruelty to Children (NSPCC)	NSPCC has a specific set of resources for use with children and young people and their families when dealing with CSE	https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/child-sexual-exploitation/
Barnado's	Barnardo's specific web resources for CSE include case studies, explanatory materials to help children, young people and their families understand what CSE means and resources for professionals to update their professional knowledge and understanding	http://www.barnardos.org.uk/what_we_do/our_work/sexual_exploitation.htm
Parents Against Child Sexual Exploitation (PACE)	Pace works alongside parents and carers of children who are – or are at risk of being – sexually exploited by perpetrators external to the family.	http://paceuk.info/
Child Exploitation and	CEOP is a command of the National Crime	https://www.ceop.police.uk/

Online Protection (CEOP)	Agency5 which works with child protection partners across the UK and overseas to identify the main threats to children.They protect children from harm online and offline	
I Didn't Know CSE Campaign	I Didn't Know Campaign was launched across Southend, Essex and Thurrock in March 2016 as a public facing campaign to raise awareness about CSE, how to spot the signs of CSE and where to go for help if you have concerns	https://www.essex.police.uk/advice/child-sexual-exploitation/

11. References

Beckett, Holmes and Walker (2017) *Child sexual exploitation: Definition and Guide for Professionals* - Extended text.

Berelowitz, S et al. (2013) *"If only someone had listened" Office of the Children's Commissioner's Inquiry into Child Sexual Exploitation in Gangs and Groups*

Department for Education (2017): *Child sexual exploitation; Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation*

HM Government (2018) - *Working Together to Safeguard Children*

HM Government (2017) – *Tackling Child Sexual Exploitation – Progress Report*

London Child Protection Procedures: *Supplementary Guidance for Safeguarding Children Abused Through Sexual Exploitation*

http://www.londonscb.gov.uk/procedures/

Mason & Prior, (2008) - *Engaging Young People Who Offend*

MOPAC & NHS England MBARC (2016) ; *London Child Sexual Exploitation Needs Assessment*

Metropolitan Police Service (2017): *The London Child Sexual Exploitation Operating Protoco*l. (3rd Edition)

Metropolitan Police Service (21017): CSE Day 2017 Figures https://www.slatergordon.co.uk/media-centre/blog/2017/03/support-national-child-sexual-exploitation-awareness-day-2017/Metropolitan Police 2017

Research in Practice (2017): *Working Effectively to Address Child Sexual Exploitation: An evidence scope.*

Sharpen, J., 2009. Policy Briefing: *Teenagers and Domestic Violence*. London: AVA.

Walker, K. et al (2018): *Characteristics and motivations of perpetrators of child sexual exploitation - A rapid evidence assessment of research*

12. Resources and Further Reading

Alexis Jay (2014).Independent Inquiry into Child Sexual Exploitation in Rotherham 1997- 2013.

Ann Coffey, (2014). Real Voices: Child Sexual Exploitation in Greater Manchester. An Independent Report by Ann Coffey MP.

Barnardo's Tackling CSE Helping Local Authorities to Develop Effective Local Responses

Carmody, M., 2008. *Sex and Ethics: young people and ethical sex*. South Yarra: Palgrave Macmillan.

Firmin, C., 2010. *This is it. This is my life…* London: Race on the Agenda.

Independent Inquiry into Child Sexual Exploitation in Rotherham (1997 – 2013)

Sexual Offences Act 2003 Sections 47-51 (appendix5) http://www.legislation.gov.uk/ukpga/2003/42/contents