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The Sexual Exploitation of Looked After Children in Scotland
A scoping study to inform methodology for inspection

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Acknowledgements

We would like to thank the many participants who took part in this research. They have shown great professionalism, kindness and good grace, even though we have at times made unreasonable demands on their time and energies.

This research covers a highly sensitive subject to which the researchers and the participants are committed to making a difference. Together, we hope that this research, along with the work done by many other individuals and organisations, will make a positive change for looked after children and young people in Scotland.
Foreword

Child sexual exploitation is an increasing issue of concern for our society. We have seen through recent media reporting the profound consequences on the lives of some very vulnerable children and young people.

While this issue affects all elements of society, there are some groups of children and young people who are particularly at risk. Looked after children and those who have experience of the care system are one such group. One of the issues for us in Scotland is to try to understand the depth and breadth of the challenge we face.

Child sexual exploitation is often hidden away from society, but the impact on the health, safety and well-being of very vulnerable young people is indescribable. We know that identifying the problem is only the start, and that all partner agencies need to come together and work closely together to ensure that all children and young people are prevented from being exploited in this way, are protected, and enjoy the best start in life.

With this in mind, we asked CELCIS to complete an initial, small-scale study in an attempt to answer some of the questions around child sexual exploitation, enabling us to ensure that - as we commence a review of our inspection methodologies and targeting of our scrutiny activities - we robustly address this important issue.

We plan to use the information gained through the CELCIS study to strengthen our inspection activity across relevant services, particularly in relation to child sexual exploitation, and undertake, along with scrutiny partners, a wider thematic study on risks, resilience and the mental health needs of young people aged 13-25 years in Scotland.

In this way, as a scrutiny and improvement body, we can continue to provide assurance about how vulnerable children and young people in Scotland are protected.

Annette Bruton
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Introduction

Background
In December 2012 the Centre for Excellence for Looked After Children in Scotland (CELCIS) was awarded the tender for a research project to investigate the sexual exploitation of looked after children in Scotland. The research was commissioned by Social Care and Social Work Improvement Scotland also known as the Care Inspectorate and related in particular to children in Scottish care services for which the Inspectorate has responsibility1.

To comply with funding arrangements and operational imperatives, the Care Inspectorate required this research to be conducted and reported within a very short timescale (three months), and within a fixed budget. Researchers often face restrictions such as these and must find creative ways to work within these limitations whilst also being honest about what is possible and what might realistically be achieved within the limits that prevail. CELCIS has over-lapping areas of interest with the Care Inspectorate; this has allowed the study to be somewhat more intensive than would otherwise have been possible, it will also facilitate any necessary follow-on work. This allows us to meet the requirements of the Care Inspectorate and to ensure that the research is conducted in a robust and responsible way.

This report draws together research related to sexual exploitation of looked after children in Scotland from four strands of this study and from earlier work done by others. This information will inform the work of the Care Inspectorate. Some strands of the study will continue to receive information via on-going participation in the various research activities already initiated. These data will be used to develop a more detailed and nuanced picture which will be made available to the Care Inspectorate in the form of an ‘Update Report’ in due course. The full analysis will also be used to inform CELCIS’s work and that of partners across the looked after children’s sector.

Sexual exploitation is a form of sexual abuse which is defined by the UK-wide National Working Group for Sexually Exploited Children and Young People (NWG) as:

The sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities.

Child sexual exploitation can occur through use of technology without the child’s immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones with no immediate payment or gain. In all cases those exploiting

1 www.scswis.com
the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.\textsuperscript{2}

This definition guides UK government policy and practice and was specified in the tender document as the definition to be used in the research project. It should be acknowledged that sexual exploitation is one form of child sexual abuse, this research has not addressed the issue of coercive and violent sexual abuse of looked after children (Kendrick, 1997, 1998).

This and other relevant definitions are discussed in detail in subsequent sections; for example, many of the experts in the e-Delphi study comment on the strengths and limitations of this definition. They note that definitions have a critical impact on policy, practice and indeed on research itself.

There have been a small number of earlier studies in Scotland related to the sexual exploitation of looked after children (Beckett et al., 2012; Berelowitz, Firmin, Edwards, & Gulyurtlu, 2012; Brodie & Pearce, 2012; SCCYP, 2011). These studies note the near absence of reliable information about prevalence and difficulties in gathering reliable data in this area (Brodie & Pearce, 2012). These studies also identify a range of risk factors and routes to sexual exploitation for children and young people. In some studies risk factors especially pertinent to children and young people looked after away from home and other looked after children are identified (Brodie & Pearce, 2012). Furthermore, a number of third sector organisations continue to work to raise awareness of how this issue affects children in Scotland.

It was in this context, that the Care Inspectorate sought to commission this research to get a clearer understanding of the incidence and prevalence of sexual exploitation of children in the Scottish care system. This clearer understanding will guide their work and the work of partner organisations and contribute to the CI’s vision:

\begin{quote}
... that people in Scotland should experience a better quality of life as a result of accessible, excellent services that are designed and delivered to reflect their individual needs and promote their rights.
\end{quote}

\textsuperscript{2} NWG, 2008. www.nationalworkinggroup.org/what-is-child-sexual-exploitation
Research questions implicit in the brief included:

- What is the prevalence of child sexual exploitation in the in-care population and the looked after at-home population?
- Are children and young people in Scottish care services being targeted by groomers?
- What is the strength of the relationship between the number of children going missing from care in Scotland and the prevalence of child sexual exploitation?
- What are the views of professionals in relation to gathering, storage and use of data related to the sexual exploitation of looked after children?
- What actions at a service level and locality level are in place to identify and respond to actual and potential occurrences of exploitation?
- What is the potential role of regulation in ensuring effective collaboration?

Progress
The research brief was indeed a challenging one, particularly in respect of the required timescales and the complexity and quantity of work involved with this project. As researchers we are dependent on the assistance and participation of various partners and stakeholders. We are grateful that we have encountered much goodwill towards the project and repeated endorsements of the need for the study and of the approach we have taken to it. Some of the requests we have made, have required partners to undertake detailed and difficult tasks, requiring significant time commitments. Some potential participants have not been able to comply with the timescales we set.

Many remain keen to be part of the study and suggest they will continue to provide responses when it is practical for them to do so. This may mean that data continue to be received for a number of weeks following the submission of this report. We remain committed to analysing and reporting all of the information we gather, as we believe these findings will inform the decision makers and practitioners who are best placed to improve the lives of looked after children in Scotland.

Structure of This Report
After this brief introductory section we turn our attention first to previous research. We originally planned to include a very brief overview of literature; however, we have found a considerable amount of good quality material that has direct relevance to the questions raised by this study. This literature is relatively easy to access; however, it is not clear that policy makers and practitioners have translated this knowledge into practice. There may be a number of reasons for this. For example, Nutley et al. (2007, pp. 81-83) identify a number of enablers and barriers to the use of research which they cluster these into four groups:
• The nature of the research;
• The personal characteristics of the researchers and potential research users;
• The links between research and its users;
• The context for the use of research.

Whilst space does not permit a detailed discussion of these factors here, researchers and those commissioning research may wish to consider these matters further. Appendix 1 provides an extended quote from the work of Nutley et al. which introduces these ideas.

Having accepted that there may be many reasons why previous research has not always been fully recognised or applied, we outline some of this important material in an extended literature review. The literature review is followed by a section outlining the methods used in this study and the methodological and ethical issues raised by research of this complexity and sensitivity. After this, we move to the findings from this study, describing progress and findings for each strand of the research:

• e-Delphi;
• Case Audits;
• Rapid Response Survey;
• Secondary Data.

Each section concludes with a discussion which highlights key information and relates it to the research questions.

The main body of the report concludes with a section entitled Answering the Research Questions; this section draws together findings from the earlier sections and outlines the implications of this study for the Care Inspectorate, for CELCIS and for the sector more widely. Finally references and appendices are provided at the end of the document.
Literature Review: Child Sexual Exploitation

Historical Context

Literature charts the shifting focus of concern within society in respect of children: in 1871 concern centred on abuse by adoptive parents; in 1885 it was teenage prostitution; in 1908 it was incest, then later it was neglect, physical abuse, sexual and emotional abuse (Bullock, 1995). Concern around sexual exploitation of children is not new; terminology in the area has changed over time and has included ‘teenage prostitution’ (ibid) and ‘child prostitution’ (Pearce, 2009) as well as ‘sexual exploitation’.

An example of this is provided by the USA, where there has been a subtle but significant shift from constructions of ‘child prostitution’ to those of ‘child exploitation’. Mitchell, Finkelhor and Wolak (2010) argue that this reframing has resulted in policy and practice change from an emphasis on juvenile justice to an emphasis on child protection. Child sexual exploitation remains a difficult phenomenon to define; whilst it is usually treated as a subgroup of sexual abuse, sources differ with reference to its distinguishing features.

It has also been noted that some children have been moved around the UK by adults for the purposes of child sexual exploitation (Barnardo’s, 2009). This is recognised as a form of child trafficking by the UK Action Plan on Tackling Human Trafficking (TSO, 2007). Again, movement of children for the purposes of prostitution was raised as a concern in the late 19th Century, at that time referred to as ‘the white slave trade’ (Cree, Clapton, & Smith, 2012). While some children are involved in trafficking for purposes such as employment or financial gain, it is evident that others are ‘trafficked’ specifically for purposes of sexual exploitation.

Sexual Exploitation of children has been the subject of considerable media, political and academic attention recently, evidenced through reporting of cases such as Rochdale (RSCB, 2012) and allegations of child sexual exploitation, rape and other forms of abuse in respect of Jimmy Savile (Gray & Watt, 2013); publications such as those by the Office of the Children’s Commissioner in England (Berelowitz, et al., 2012) and Scottish Government (Brodie & Pearce, 2012) and academic studies both internationally and within the UK (Cockbain & Brayley, 2012; Dodsworth, 2012; Kalergis, 2009; Thomson, Hirshberg, Corbett, Valila, & Howley, 2011; Twill, Green, & Traylor, 2010; Williams, Binagwaho, & Betancourt, 2012; Wurtele, 2012).

There is, however, evidence of concern about sexual exploitation of children within Scotland in the previous 10 years (Scottish Executive, 2003). The then Scottish Executive commissioned a study by the children’s charity Barnardo’s, the objectives of which were to extend knowledge of the way in which sexual exploitation was a factor for young...
people placed in secure care in Scotland, their experiences prior to secure care, and the way in which their needs were addressed in secure care and thereafter (Creegan, Scott, & Smith, 2005).

A further study was carried out into sexual exploitation of looked after young people by the Glasgow Centre for the Child and Society jointly funded by Barnardo’s and the Glasgow Child Protection Committee (Dillane, Hill, & Munro, 2005).

Other studies specifically of the Scottish context include: (Munro, 2004) (interviews with workers who were part of the Barnardo’s ‘Street Safe’ Project); and, although not specific to child sexual exploitation, Scotland’s Commissioner for Children and Young People and the Centre for Rural Childhood Perth College UHI (SCCYP, 2011) (a desk-based literature review, web survey and interviews with key professionals and young people into child trafficking). Findings of these studies are likely still to be relevant to everyone involved in policy, practice, management and inspection of standards today. While recognising that the trafficking of children for sexual exploitation is both undesirable and unacceptable, the way which the subject has been presented in the UK more recently however has been characterised by some as a ‘moral panic’ which it is argued risks inhibiting a helpful response (Cree, et al., 2012).

This more recent work, which has focused on sexual exploitation and child trafficking also needs to be considered in the context of ongoing concerns about the safety of children looked after away from home in Scotland which have also addressed sexual abuse: for example, The Children’s Safeguards Review (Kent, 1997).

**Modes of Child Sexual Exploitation**

A recent publication by Barnardo’s based on its annual survey of its 21 child sexual exploitation services proposes that there is no one single form of child sexual exploitation; sexual exploitation varies between geographical areas and its form can change quickly. Some features of recent trends include:

- Organised abuse and internal trafficking- based on links between abusers, this often involves young people being moved to other towns or cities for exploitation.
- Older men masquerading as boyfriends of teenage girls, with the reverse being true for teenage boys.
- Involvement of peers in exploitation – both directly as abusers or indirectly in linking other young people to abusers
- CSE also occurs through loose networks of abusers and criminal gangs
- Exploitation of younger children – with children as young as 11 years believed to be at risk of exploitation.
- The role of technology in exploitation – shown to have increased markedly since 2010.

(Barnardo’s, 2012)
Data collected by The Child Exploitation and Online Protection Centre (CEOP) (2011) indicates that young people aged 14-15 are most likely to be victims of CSE. Perpetrators are usually male aged 18-24 which is distinct from the characteristic representation of ‘the older man’ most usually associated with sexual abuse. In approximately 80% of cases sexual offences are committed by a family member or someone known to the child, often in a position of trust (CEOP, 2012a).

It was also discovered that across 13 Local Safeguarding Children Boards over 230 networks were involved in CSE (from two offenders to much larger numbers), highlighting the sizeable scale of this type of exploitation (CEOP, 2011).

It is widely acknowledged that some perpetrators volunteer or seek employment in organisations for young people such as care settings and schools (Wurtele, 2012). However Wurtele suggests that intentional exploitation forms only a small part of the problem in youth organisations. She suggests that bad judgement and boundary violation is a frequent cause of exploitation and that this is more common when there are opportunities for unguarded access to young people. This has implications for training and ensuring that staff understand what constitutes appropriate boundaries in their relationships with children.

### Child Sexual Exploitation via the Internet

Sexual exploitation via the internet appears to account for a significant proportion of CSE (Mitchell, Finkelhor, Jones, & Wolak, 2010). CEOP reported that online offenders are frequently organised and often:

> ... coalesce to form online offender networks that are as tightly controlled as their ‘real world’ equivalents. It is understood that the individuals involved in these networks are generally unknown to each other offline and are commonly not financially motivated.

(CEOP, 2012b, p. 5)

It was emphasised that boys and girls were exposed to the same risk of online CSE (CEOP, 2012b). Mitchell et al. (2010) found that perpetrators used social networking sites to gain access to friends of their victims. There is an increasing risk of CSE from overseas offenders as internet use across developing nations expands (CEOP, 2012a, 2012b). In addition, concealed recording devices make it easier to take images in public without suspicion being raised (CEOP, 2012a, 2012b).

The most common routes to exploitation via the internet are through video chat rooms, online self-generated imagery, and social networking sites. Using social networking sites (SNS) offenders build a relationship with children then initiate some form of sexually exploitative activity on or offline. The most recently identified methods used by perpetrators involve obtaining the child’s SNS password directly from the child and at a later date compromising or threatening to compromise (by uploading inappropriate images or posting negative messages that appear as though they are from the child) the
child’s social networking site unless they agree to perform or participate in sexual activities. Increasingly victims are invited to small online groups where only those with access can see files.

Young people may also put self-generated indecent images of themselves online (CEOP, 2012b). The willing production of such images may indicate underlying vulnerability and increase the likelihood that these young people will be targeted. Peer exploitation can also occur, because self-generated imagery (e.g. via ‘sexting’) can often be uploaded online as a joke, after an argument or once a relationship has ended. Almost 22% reports to CEOP in 2011/12 related to the distribution of indecent images.

Group and Gang Associated Child Sexual Exploitation
Often victims of group or gang associated CSE are disengaged from professional services, so little is known about this type of CSE (CEOP, 2011). However gang offending is usually associated with greater levels of violence than group offending. Group offending tends to take place through loose networks with formal and informal associations whereas gang offending takes place within an organised group, with a clear membership, which is often involved in criminal activity. Gang and group offending is generally male against female sexual exploitation though this is not always the case (CEOP, 2011).

Beckett et al. (2012) highlighted a number of routes by which exploitation occurs via gangs, including sex as an initiation into the gang, being coerced by gang members, for material gain, young women ‘setting up’ people in other gangs, or young people being coerced into exploitation as a means of informal income. Many young people have been normalised to sexual violence and do not regard themselves as victims. Some within gangs have endured exploitation because of inclusion and perceived protection afforded by the gang (CEOP, 2011).

Extent of Child Sexual Exploitation in Scotland
While estimates exist about the number of children vulnerable to sexual exploitation in Wales and Northern Ireland, accurate figures of the scale and extent of child sexual exploitation are not available for Scotland (Barnardo’s, 2012). One Scottish study concluded that there is evidence showing the particular vulnerability of young people who are looked after to sexual exploitation (Brodie & Pearce, 2012) but that researching the prevalence is complex; there are barriers to prioritising the issue of sexual exploitation and a lack of consistent data gathering procedures in local authorities (Brodie & Pearce, 2012; CEOP, 2011; Jago et al., 2011). It is recognized however, that while all young people are vulnerable to sexual exploitation, some are particularly vulnerable. Personal characteristics associated with risk of sexual exploitation are known to include:
• Family difficulties;
• Experience of different types of abuse and neglect
• Experience of the care system
• History of educational difficulty, including truancy and exclusion from school
• History of running away or going missing
• Drug and alcohol misuse
• Delinquency and gang involvement


One study by the University of Bedford found on one day in 2011, 22% of children using child sexual exploitation services were ‘in care’ (Jago, et al., 2011). Similarly the Barnardo’s 2010-2011 survey of their sexual exploitation services found that 14% of service users had been in care. While recognizing the legislative differences between Scotland and the rest of the UK, these factors highlight the particular vulnerability of children who are ‘looked after’ to sexual exploitation.

Equally it must be considered that young people may have become looked after because they have been exploited. Gibbs and Sinclair (2000) reporting on sexual harassment in residential child care found that more than a third of the female residents (37%) but only 11% of the male residents said sexual harassment had happened before admission; conversely, nearly a quarter (23%) of the females and 7% of the males said that it had happened after.

A number of local authorities were able to explain recent initiatives that had been undertaken in relation to child sexual exploitation. These included moves towards new monitoring systems and moves towards better inter-agency working. Glasgow City Council recently conducted its own scoping study into sexual exploitation of ‘looked after and accommodated’ children and young people. A summary of their findings is reproduced below by kind permission of Glasgow City Council

**Practice example, Glasgow City Council**

The scoping study was commissioned to provide an estimate of the prevalence and risk of sexual exploitation amongst the looked after and accommodated population in Glasgow. Primarily, it was designed to provide a baseline for future research, policy and practice developments to begin identifying young people’s pathways into exploitation and more effective and appropriate models of care across all vulnerable groups.

The study focused on the looked after and accommodated population of children and young people as they may be at particular risk because of their existing vulnerabilities and complex needs. A group of 39 young people were identified from the 168 children and young people looked after away from home in provided and purchased children’s units in mid 2012. A two-stage process of case file analysis identified those cases where there were ‘warning signs’ and ‘strong indicators’ of risk of sexual
exploitation – indicating that 33% of children and young people were at substantial risk / harmed through sexual exploitation.

Vulnerability and risk were key elements in the histories and present circumstances of the young people, contributing to a complex and challenging assessment and intervention process for all agencies involved in supporting the young people. While information was collated and shared, and risk factors generally identified, there was variability in relating and assessing these factors to the risk of, or experience of, sexual exploitation. The risk factors were often referred to in isolation of the overall context and circumstances of the young people. Multi-agency input and support was apparent, but also accompanied at times by uncoordinated responses when faced with complex and challenging behaviours and circumstances.

Framing recommendations based on a small-scale local scoping study utilising single agency records designed to estimate the prevalence of sexual exploitation is problematic. However, the indicative findings of this work indicate that recommendations for policy, practice and research within a Glasgow framework may help in developing future responses.

- Repeat the scoping study, utilising the indicator matrix, on other vulnerable / at risk groups to better ascertain the prevalence of sexual exploitation in the city.
- Provide specific multi-agency training for managers and front line workers around the issues of sexual exploitation.
- Ensure that practitioners are familiar with the potential indicators of vulnerability, and specific risk factors of sexual exploitation.
- Ensure that practitioners and managers are more ‘proactive’ in identifying concerns rather than waiting for children and young people to ‘disclose’.
- Ensure that services / VYP processes are not concluded or withdrawn because a young person is ‘not engaging’.
- Develop a tool for practitioners that provides an evidence based resource for workers to more readily identify the risks associated with sexual exploitation. Drawing on the indicators utilised for this scoping study this development could incorporate a traffic light system of concerns.
- Rewrite the Vulnerable Young Person sexual exploitation guidance incorporating recent evidence, practice knowledge and research and ensure that the guidance is consulted when there are concerns around the issue of sexual exploitation.
- Establish a child sexual exploitation working group to adopt a strategic overview of policy, practice and research into all forms of exploitation. (Merging with the already well-established child trafficking sub group of the Child Protection Committee VYP may be a possible way forward – looking at child exploitation overall).
- Commission further research and practice developments to inform and implement best practice models. Ensure that future policy and practice developments are located in a robust monitoring and evaluation framework.
- In a collaborative, action research process between practitioners, managers and researchers monitor the 13 cases identified as ‘high risk’ over the next 12 months to provide comment on assessment, intervention and outcomes.

Further Information is available from Sheila Murie or Moira McKinnon
Glasgow City Council Social Work,
City Chambers East, 40 John Street. Glasgow, G1 1JL.
Estimates of the prevalence of CSE and the reliability of available data are explored more extensively in other sections of this report.

**Indicators of Sexual Exploitation**

A number of features are now recognised as possible indicators that young people may be being sexually exploited (Barnardo’s, 2012; Scottish Executive, 2003). Barnardo’s have identified a number of ‘key indicators’ of vulnerability to sexual exploitation, based on experience from their work with young people affected by childhood exploitation. These include:

- Going missing for periods of time or regularly returning home late
- Regularly missing school or not taking part in education
- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Having older boyfriends or girlfriends
- Suffering from sexually transmitted infections
- Mood swings or changes in emotional wellbeing
- Drug and alcohol misuse
- Displaying inappropriate sexualized behavior

(ibid, p.5).

Going missing is reported to be a feature in the lives of young people vulnerable to sexual exploitation (Barnardo’s, 2009; Brodie & Pearce, 2012; Dillane, et al., 2005) and thus a key indicator of vulnerability to sexual exploitation (Barnardo’s, 2009). However, it should be remembered that children may go missing for a number of reasons and that thresholds for reporting children as ‘missing’ may vary between different types of placement.

One study (Barnardo’s, 2012) found that 44% of service users had gone missing on more than one occasion, mirroring the findings of the University of Bedford that over half of all young people using child sexual exploitation services on one day in 2011 were known to have gone missing (a quarter more than 10 times) (Jago, et al., 2011).

**Disclosing Abuse and Exploitation**

**Children and Young People**

In a review of the literature about children’s disclosure of sexual abuse, Paine and Hanson(2002) reported that there are a range of barriers which children find immensely difficult to overcome. These barriers include direct threats to the child to keep silent or harm will come to them or their families, or that they will be responsible for the family splitting up. Perpetrators will also silence victims by telling the child that they (the
perpetrator) will go to jail or will commit suicide. Where there is some form of ‘positive’ relationship between the child and perpetrator, which is often the case, the child will not disclose abuse in order to protect the perpetrator. Children may not disclose abuse for fear that they will not be believed, a belief which is often confirmed for many children. Children may also be concerned about getting into trouble for something they shouldn’t have done (Beckett, et al., 2012). Other research highlights that all children feel shame and that they have a measure of responsibility for the abuse and for this reason find it difficult to disclose what has happened to them (Barnardo’s, 2011).

The extreme nature of the difficulty that children and young people experience in disclosing abuse should not be underestimated; even when there was clear evidence that abuse or exploitation had taken place via the diagnosis of a sexually transmitted disease, 57% children denied a history of sexual abuse (reported in Paine & Hansen, 2002).

Paine and Hansen’s (2002) review highlighted that it is not enough to educate a child and inform them to tell. Children and young people will keep the abuse a secret in many cases, and some may not recognise that they are being exploited and would therefore not feel there is anything to disclose.

**Equality Issues and Disclosure**

Barriers to disclosing abuse are even greater for some populations of children: disabled children, boys and young men, and children from minority ethnic backgrounds. Disabled children have smaller social networks than other children and therefore fewer individuals that they can disclose to; communication difficulties can also impede disclosure, and similarly disabled children may have limited ability to use or access phones or the internet to disclose (Oosterhoorn & Kendrick, 2001; Sullivan & Knutson, 2000). It has also been demonstrated that disabled children, most likely for their increased vulnerability, are more likely to be targeted for sexual abuse, although the relationship between disability and sexual exploitation is not straightforward and should be explored further (Sullivan & Knutson, 2000).

Additional pressures for boys and male young people include concerns about homosexuality (Moody, 1999; Paine & Hansen, 2002) and issues of masculinity such as not wanting to appear vulnerable and helpless (Moody, 1999).

Children and young people from an ethnic minority background but residing in the UK (as opposed to children who have been trafficked into the country for the purpose of sexual exploitation) may have additional cultural pressures which make it difficult to report any form of sexual abuse. Sexual relationships under certain circumstances may be forbidden in some cultures and therefore children and young people (who may feel they are more western than their parents) may go to even greater lengths to hide the abuse (Ward & Patel, 2006). In addition, there may be concerns about lack of cultural awareness and fear about the response from services (Gilligan & Akhtar, 2006). These
difficulties in disclosing exploitation are similar for children who are trafficked but interpretation difficulties are likely to pose a further problem for many (Lebov, 2010).

**Agencies and Professional Disclosure**

Whilst it is somewhat dated, the 1988 National Centre for Child Abuse and Neglect report (cited in Paine & Hansen, 2002) found that professionals frequently failed to report abuse or exploitation disclosed to them. Non-reporting was noted in 88% of cases from day-care centres, 76% in schools, 70% in social service agencies, 42% in mental health agencies and 31% in hospitals. These are organisations and settings where children might have expected to receive help and support; failure to respond appropriately may reinforce children’s fears that nothing will be done to help them or that they will not be believed. Non-disclosure both prevents individual children from gaining support and may allow perpetrators to commit further crimes against more children.

This quotation from a child victim of exploitation (non-sexual) in Sweden illustrates the turmoil children may experience in revealing their abuse, and the gentle approach that is required to uncover it.

> Don’t assume that I am lying. And if I am lying, please give me time to trust you. Give me a chance in your heart. Just say ‘good’, ‘take it easy’, ‘you’re ok, take your time’. Show me that you want to help me. It’s not easy telling you things that were dangerous to me. I was scared.

*(CBSSCC, 2013, p. 33)*

**Impact of Child Sexual Exploitation**

It is difficult to separate the influence of the life experiences which leave children vulnerable to sexual exploitation from the impact of sexual exploitation itself. The initial and long-term effects of childhood abuse and trauma are however well recognised in literature. In the 1980s, Finkelhor and Browne (1986) postulated that the experience of sexual abuse could be analysed in terms of four trauma-causing factors, which they refer to as ‘traumagenic dynamics’ - traumatic sexualisation, stigmatisation, betrayal and powerlessness. When present, these alter the child’s cognitive and emotional orientation to the world and create trauma by distorting the child’s self-concept, worldview and affective capacities (ibid). These may manifest themselves in behaviour such as: precocious sexual activity, aggressive sexual behaviour or avoidance of sexual intimacy; isolation, self-harm or substance misuse; aggression, relationship difficulties or clinging; dissociation, phobias and mental health disorders.(see Finkelhor & Browne, 1986, pp. 186-187).

Violence is also a concern in many studies, for example a large proportion of victims of CSE were found to carry weapons because of a perceived need for self-protection (Gilbert et al., 2008).
It has been shown that victims of child sexual abuse are particularly vulnerable to re-victimisation. There may be particular concerns for re-victimisation of girls who had been sexually abused by a family member. For example, it was found that girls abused by a family member were significantly more likely to have experienced rape or attempted rape as young women (see Lalor & McElvaney, 2010). The impact of this trauma was difficult to overcome and frequently led to poor life outcomes for victims, including lower levels of education (Gilbert, et al., 2008).

Experienced practitioners working with sexually exploited young people report features evident in the lives of sexually exploited young people including reported feelings of stigmatisation and difficulty in building trusting relationships (Barnardo’s, 2009), sexual exploitation of peers (Barnardo’s, 2012), and powerlessness and the need to exert a sense of agency in their lives (Pearce, 2009).

Research indicates that for young people involved in sexual exploitation, there are particular complexities. As a result of the grooming process some may not recognise the relationship as exploitative; even when involved in sexual relationships organised by older men, they may perceive the relationship as consensual and romantic (Barnardo’s, 2009; Creegan, et al., 2005). Frequent repeated sexual activity with strangers may make them vulnerable to sexually transmitted disease, pregnancy and other health-related conditions (Conway, 2012; Mitchell, Finkelhor, & Wolak, 2010).

**Intervention and Treatment**

Related to the prevention of CSE and other abuse, research suggests that offenders may avoid more knowledgeable children; for example, if a young child already knows the terms for genital areas then the person is less likely to abuse them (Wurtele & Kenny, 2010). This may suggest that education (in school or elsewhere) may have a role.

As outlined earlier, the needs of these young people are complex. They may have a range of physical, sexual, mental and emotional health problems, be dissociated from school and peers and they may repeatedly go missing. This would seem to indicate a need for long-term interventions from trained staff working within a supportive environment which address the complex underlying vulnerability factors (Pearce 2009).

Drawing on the Finkelhor and Browne model of traumagenic dynamics (1986), arguably these young people require experiences which will empower, build trusting relationships, and enhance self-esteem within safe boundaries. Creegan, Scott and Smith (2005) identify five key elements to any model of care provided:
Early intervention
Safe accommodation
Continuity of care
Intensive support
Multi-agency coordination

(Creegan, et al., 2005, pp. 66-67)

Writing within a Scottish context, they examine the implications for interventions in secure residential care, close support, specialist fostering and intensive intervention in the community. Reviewing the suitability of these settings individually, they propose that each can meet the needs of young people when the appropriate supports are put in place, although they caution that secure care works best only in the short term, where it may be necessary to break contact with abusive adults (Creegan, et al., 2005).

A number of services have been set up specifically to provide support to children who have been sexually exploited (see for example Barnardo's, 2011; Barnardo's, 2012).

**Barriers to Good Practice**

Poor awareness of sexual exploitation among professionals is a key concern. There is limited provision of expert services for children in Scotland; and where these exist they are usually provided by third sector organisations (Brodie & Pearce, 2012).

Harper and Scott (2005) note that there is often confusion in making the distinction between sexual exploitation and what is considered a young person’s choice to have sex. They found an extreme case of this in their research in London:

*A stark example was in one borough where the case of a 13 year-old girl with a 24 year-old ‘boyfriend’, who made her have sex with his friends in exchange for drugs, was identified only as ‘possible’ exploitation.*

(Harper & Scott, 2005, p. 43)

As previously mentioned, it has been suggested that children and young people can also be confused about sexual exploitation, with many apparently exploited young people asserting that they are in a consensual relationship. Related to this is the difficulty in addressing the needs of children and young people who do not wish to acknowledge that they had been sexually exploited (Thomson, et al., 2011).

Sometimes good practice is prevented through failure to pursue a case because a child or young person is unwilling to disclose exploitation. A Serious Case Review carried out in the Torbay area highlighted that there was a ‘significant missed opportunity’ to prevent a 13 year old girl experiencing further episodes of sexual exploitation because she was unwilling to make a statement to the police (Boxall & Wonnacott, 2013). The authors stated that support and protection should not have been dependent on
disclosure. As noted earlier, children and young people tend to feel far more strongly that they should keep the abuse secret rather than disclose it. Having ‘disclosure by the victim’ as a threshold for initiating support and investigation into the case can leave a child vulnerable to many more instances of exploitation.

The Rochdale review highlighted ‘uncoordinated multi-agency working’ as one of the key barriers to good practice. The review highlighted that staff were not skilled at recognising and responding to CSE (social services), there was no specific assessment tool (social services), the victims reports of exploitation were not followed up (Police, social services), there was little evidence of disruption of activities (Police) and the focus of child protection moved from the victim to her new baby (social services) (RSCB, 2012).

Poor practice is often compounded by practitioners’ views of young people as victims of CSE or as offenders involved in child prostitution. One US study found young women were viewed as victims in 96% of cases, if police had read a report about them first, compared to 35% of young women being considered victims if police discovered the sexual exploitation (often prostitution, in the police view) through their own actions (Halter, 2010).

It is not just the attitude of police, however, that has been described as significant. It has also been noted that staff in social work agencies may view children with difficult behaviour as less deserving. Therefore young people may receive a poorer level of services and continue to have increased levels of vulnerability to exploitation (Beckett, 2011).

Staff in residential child care in Scotland have, for some time, raised concerns related to sexual abuse of children, suggesting that this has at times been given a low priority (Lindsay, 1999).

Recent Policy and Practice for Child Sexual Exploitation (UK)

Most notably in the UK the highest concentration of work to develop policy and practice for CSE has been carried out in England and Wales. This work has largely been championed by Barnardo’s who set out an action plan covering four key areas of work: raising awareness of CSE, improving statutory responses and the provision of services, improving evidence and improving prosecution procedures (Barnardo’s, 2011).

Research by the University of Bedfordshire and a review by Barnardo’s indicates that a substantial amount of work still needs to be carried out to improve practice in relation to CSE (Barnardo’s, 2012; Jago, et al., 2011). Jago et al. (2011) discuss many topics, including co-ordinating multi-agency responses for CSE. Other useful documents include the Rochdale Borough review of multi-agency responses to CSE (RSCB, 2012), the
Department for Education and the London LSCB guidelines for sexual exploitation (DfE, 2012; LSCB, 2006), guidance produced by CEOP\(^3\).

The first annual report of the Inter-Departmental Ministerial Group on Human Trafficking outlines a clear emphasis on child sexual exploitation as one of its key strands of work to deal with child trafficking (HM Government, 2012b). This provides an overview of work being carried out in the UK in relation to child trafficking, including missing children.

The University of Bedfordshire has produced a self-assessment tool which can be used to assess a local authority/organisation’s response to CSE\(^4\). The tool is a checklist organised under four headings: co-ordinating a multi-agency approach; recognising child sexual exploitation; supporting young people and their families; identifying, investigating, disrupting and prosecuting abusers.

**Recent Initiatives in Scotland**

A number of related services have existed for some time in Scotland; for example Survivor Scotland the National Strategy for Survivors of Childhood Abuse\(^5\) which provide access to services, particularly in relation to abuse in care.

In addition a number of recent initiatives in Scotland have emerged aimed at increasing awareness of the problem of CSE and the need to address it (Barnardo’s, 2012). The Scottish Government commissioned research which identified that little is known about the scale and nature of sexual exploitation in Scotland (Brodie & Pearce, 2012). Following this a programme of action for tackling CSE was established (Scottish Government, 2013).

The publication of research about trafficking (SCCYP, 2011) and going missing and the link to sexual exploitation (Malloch & Burgess, 2007; Wade, 2001) are important sources of information which have implications for the identification and disruption of sexual exploitation.

The Scottish Coalition of Young Runaways (SCYR) report indicated that there may be some confusion between running away and sexual exploitation with protocol and responses being the same (Malloch & Burgess, 2007).

Relevant training materials and resources have been produced by ‘Stop it Now’ and The Scottish Coalition of Young Runaways\(^6\).

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\(^3\) [http://ceop.police.uk/](http://ceop.police.uk/)


\(^5\) [www.survivorscotland.org.uk/](http://www.survivorscotland.org.uk/)

\(^6\) Add link to training materials
The Scottish Guardianship service, developed jointly by Aberlour Child Care Trust and the Scottish Refugee Council, was set up to address child trafficking in Scotland7.

Child Protection Lead Officers in Scotland have established a small working group exploring national protocols with a specific focus on child trafficking and sexual exploitation. New protocols for child trafficking, which includes trafficking for sexual exploitation, are being developed by Scottish Government based on the London Safeguarding Children’s Bureau guidelines for trafficking. These guidelines have been highlighted as examples of good practice and are used widely in England (HM Government, 2012a).

Summary
This review has considered numerous sources relevant to sexual exploitation and related subjects. We began by examining the historical context which suggested that whilst terminology and the focus of concern has changed and shifted over time, CSE itself not a new phenomenon. The literature highlights how societal shifts impact on the way this issue is perceived at different times and in different places; for instance, by conceptualising children either as amoral perpetrators of prostitution or as victims of exploitation. An historical understanding is useful to the extent that stereotypes tend to persist albeit as a diverse spectrum of opinion.

The literature highlights that CSE can take several forms; consequently it is not possible to outline one form of abuse which represents exploitation. Despite this, it is more common for perpetrators to be young males and to be known to the child or young person. Perpetrators may gain access to children and young people by being be part of a network or by securing positions of trust as a worker or volunteer. Sexual exploitation may also take place over the internet and associated technologies, or these may be used to facilitate other forms of CSE.

Assessing the prevalence of CSE is found to be problematic; in terms of children and young people, the literature considers those who are known to have been sexually exploited but notes that confirmation is difficult so it is important to consider suspected cases. To aid this process various sources of literature provide lists of factors commonly associated with CSE.

We have also reviewed literature which considers the considerable barriers to the disclosure of CSE by children. We note literature that suggests a number of dimensions, notably disability, gender, ethnicity and sexuality all impact on barriers to disclosure, such that this issue should be considered from an equalities perspective.

Literature considering the impact of CSE on children and young people’s current wellbeing and future life outcomes is reviewed; this includes a poor outcomes across

7 www.aberlour.org.uk/scottishguardianshipservice.aspx
health (mental and physical), educational, behavioural, social and relationship dimensions.

A number of sources describe characteristics of interventions for children and young people (we do not review interventions for perpetrators here). We find one study which suggests that young children who are knowledgeable about their own bodies and can name body parts are less likely to be abused than other young children; this might suggest a role for education. Those studies which focus on intervention with children who have been sexually exploited call for long term support, in safe and stable contexts which allow trusting relationships to be developed over time.

A number of barriers to successful intervention are highlighted in literature. These include:

- a lack of awareness of CSE among workers;
- a lack of confidence for some workers in how to deal with suspected CSE;
- a tendency for some workers and other adults to stereotype victims of CSE;
- and difficulties with collaborative working between agencies and between diverse professionals.

The review concludes by identifying recent examples of policy and research which are relevant to the context in Scotland.
Research Methodology

Methods

We have used a mixed-methods design in order to respond to the research questions and meet the requirements of the specification. This involved four strands of activity which were initiated concurrently. The strands were an e-Delphi Study, a Secondary Data review, a Case Audit and a Rapid Response Survey. The four strands complemented each other and allowed a degree of triangulation, such that we are able to bring together diverse information to build up a reliable and complete response drawing on different perspectives. Inevitably some strands of activity have been easier to progress than others and some organisations and individuals invited to take part have been able to respond more quickly than others. It is our intention to continue to receive responses for some time after the production of this report and to provide an updated analysis in due course. The four strands of the study are described below

The e-Delphi Study

A Delphi study is an approach to gathering and checking information from a range of ‘expert’ informants able to give different perspectives on the topic of interest. The approach involves a number of cycles during which participants give insights which are analysed by researchers and fed back to the participants who are invited further validate the emerging conclusions or offer refinements. The Delphi study can be a rapid and effective way to generate valid conclusions and to secure buy-in from participants. In an e-Delphi study the process is conducted through electronic communication. This has a number of advantages for participants, including enabling them to participate at a time and place that suits them. There are also advantages for researchers, including savings of time and resources (e.g. travel and transcription), and the fact that raw data are received in a written format which prevents a number of potential sources of bias and is ‘analysis-ready’. Previous studies suggest that e-Delphi can be highly successful and point to a number of ways in which the approach can be enhanced (Welch, 2012).

Participants were recruited from a range of different constituencies including: area child protection committees; children’s hearings; police; children’s social care; service providers; third sector experts; researchers; and health workers. These were recruited using a convenience sample of known and recommended experts together with a snowball approach by following up participants’ recommendations. This sampling strategy worked well; having aimed for a minimum panel size of 15, we secured consent from 32 participants covering a range of different backgrounds. Two participants dropped out during the study because of changes in circumstances.

The e-Delphi study explored a number of themes including issues related to gathering, storage and use of data, the effectiveness of collaboration, and support for those who are or have been sexually exploited. We also examined participants’ views on the potential role of regulation in ensuring children’s safety.
Data from three rounds were collected and analysed using a qualitative thematic analytic approach (Braun & Clarke, 2006). Analysis was carried out by a team of three researchers with experience of qualitative analysis. Themes were initially identified independently; these were then compared and expanded to ensure thorough and detailed coverage of the data. Selected, anonymous quotations have been used, as appropriate, in the report to provide a real life context for our conclusions.

The Case Audit

Our intention was to identify between three and five local authorities willing to work with us to perform a case audit whereby social workers with responsibility for looked after children provided information about each child and young people in their caseload. We initially approached authorities that would provide a mixture of urban, mixed and rural areas typical of Scotland as a whole. We identified a number of benefits that authorities might secure from taking part in this audit, including raising social workers’ awareness of known risk factors for sexual exploitation and providing a method through which they can rapidly screen large numbers of cases. This may have an immediate benefit for young people who may be identified as needing further support. A further incentive for participation was our offer of providing a short tailored analysis of responses for each authority taking part, providing a unique opportunity for them to acquire important information for strategic planning purposes.

Some authorities were willing in principle to trial the case audit approach; however few have been able to implement this within the timescale required for this report. Thus although we are able to provide early findings from this strand, we will report revised findings when more authorities have been able to take part.

We sought to select areas which have combined responsibility for in excess of 2000 looked after children. Within these areas we aimed to get information about all looked after children. The rationale for this approach was two-fold; firstly we considered it likely that the response rate could be as low as 50% given the current resource demands in local authorities; secondly we believed that the inclusion of children looked after at home as well as those placed elsewhere (residential, secure, foster and kinship care) would provide valuable additional information about the risks and routes to sexual exploitation of children in both groups while still enabling disaggregated data to be presented for subgroups of different placement types. A further benefit of requesting this information about all looked after children was its relative administrative simplicity.

We expected that the highest rate of return was likely to be received from local authorities where there was enthusiastic buy-in from managers and practitioners. Thus we made considerable efforts to build strong working relationships, provide simple and clear information and minimise workload for the authorities. This process was time-consuming.

Given the intrinsic difficulties in gathering this type of data, we provided definitions of key terms and encouraged informants to seek clarification on any aspect of the
research. In addition, for a number of variables where there was likely to be uncertainty, the audit form provided an opportunity for practitioners to use their professional judgement to indicate more nuanced levels of certainty through the use of an appropriate Likert scale. Copies of the full audit form which show the variables requested and preliminary information are available from the authors, while a shortened version, showing data items only, can be found in Appendix 2.

The Rapid Response Survey
This comprised a brief national level survey of all local authorities in Scotland to identify key data and to explore the ways in which data are currently collected and used. Through this we aimed to gather basic data which might help to identify the known occurrence of sexual exploitation of looked after children and occurrences of looked after children being reported as missing.

A number of measures were put in place to reduce the burden of the survey on local authorities. In particular we requested a relatively small quantity of basic information which we hoped most authorities could access. We also attempted to approach all authorities by telephone in the first instance to explain the survey, outline its importance and to ensure that we identified the best individual to receive and respond to the request. Finally we offered support, flexible deadlines and regular reminders where these were desired.

We predicted that we would find it difficult to obtain a good level of response within the timescale. In the event, six out of 32 local authorities responded. Despite this low return, we feel that this strand provides useful complementary information, for example, helping to contextualise the findings from the ‘case audit’ and helping us to understand issues related to data collection and use. We expect some data will be received after this report has been submitted and additional analysis will be conducted in due course.

The Secondary Data Review
Recent studies have found that there are no data collected routinely in Scotland which measure the incidence or prevalence of child sexual exploitation. However, several studies have presented a range of proxy indicators which to a greater or lesser extent give information about the likely scale of the problem. We aimed not to duplicate this work, but to summarise information and, if possible, to combine it to estimate the potential scale of the issue.

Within this strand we also sought to identify local areas of good practice and suggest potential approaches to on-going data collection to build up information about the incidence and prevalence of the sexual exploitation of looked after children.
Governance and Quality Control
The research team comprised individuals with significant experience in research and in relation to sexual exploitation. In addition, a Research Advisory Group (RAG) was formed to support the project; this involved the researchers, a policy advisor, a representative from the Care Inspectorate and an independent expert. The RAG met three times to provide advice and guidance to the research team and was available for email consultation between meetings.

Ethical Considerations
Strathclyde University Ethics Committee was consulted and gave approval for this project. The committee approved information sheets, consent forms, draft instruments and protocols such as those for contacting potential participants and for data collection, usage and storage. There were a number of important ethical concerns which were considered, some of which are outlined below.

Promoting wellbeing. Any potential ethical risks should be considered against the potential that the project has to promote the wellbeing of children and young people and the people that work with them. We feel this is significant given the Care Inspectorate’s ability and that of CELCIS to ensure that this project has a real and lasting impact on the lives of looked after children.

Anonymity. We will protect the identities of the authorities and organisations taking part in the various strands of the project. Names are not used in reports or publications and sensitive reporting will prevent disclosure of authority level data which could identify particular areas.

In the audit we asked for individual level data about children and young people that covers highly sensitive subjects. We protected their confidentiality and anonymity by not requesting key identifiers such as name, date of birth or postcode such that the data we received was not traceable to individual young people. We have refrained from presenting data at individual level, except for direct quotations which have been used only if they do not identify the individual in any way. Confidential raw data have not been shared; we would only have done so in the event that not doing so would place people at danger of harm.

Protection from harm. Children and young people were not directly involved in this study but we did receive information about them. As mentioned above, we would always share information with appropriate authorities if evidence emerged which indicated a significant risk that someone was in danger.

In addition, whilst participants were all adults, we considered that some were potentially vulnerable, either because of traumatic experiences in their own lives or because they fear that disclosing certain information may have been a professional risk. Thus we made it clear that participation (or non-participation) in any aspect of the
project was voluntary and would not prejudice either treatment by an employer or services received. Furthermore, we were able to provide participants with details of support agencies if this became necessary.

**Data handling.** Data was securely stored in both electronic and hard copy (stored in locked facilities, in restricted access folders through password protected systems) and was backed up where necessary. Only members of the research team had access to raw data.

**Dissemination.** We will agree a plan for dissemination with the Care Inspectorate. However, we feel we have a responsibility to maximise the impact of this research. We will provide feedback to participants, participant organisations and share general learning across the sector as well as provide various dissemination activities to meet the needs of the Care Inspectorate.

**Equity / equality.** We were keen to ensure that the research protected and promoted equity, both for children and young people and for the participants in the project. We were aware of diversity issues in our analysis and reporting and activity tried to ensure that participants are supported to take part in the research in whatever way suited them best. We aim always to comply with, and exceed, our duties under the Equality Act 2010 and related guidance.
The e-Delphi: Progress and Findings

Overview and Sample
There was a strong response to the e-Delphi study with a greater number of participants than expected and good ‘round’ and ‘item’ response rates across the study. The data given were highly detailed, deeply reflective and carefully considered. The e-Delphi study will remain open for a short while to allow all members of the expert panel to give their final responses. Any additional insights from new data will be shared in the update report in due course.

We had hoped for between 15 and 30 members of the expert panel; in the event we secured consent from 32 participants, while two of these dropped out during the study because of changed circumstances.

The participants were identified through a convenience and snowball approach. The research advisory group initially identified people known to have relevant expert knowledge; this included people in a range of job roles linked to sexual exploitation of looked after children and people who had published research on the subject. Initial contact was made to explain the research and request participation; in addition we asked these contacts to provide us with contact details for others whom they identified as having significant relevant knowledge. This generated more names, who in turn were invited to participate. This snowball process worked well in this context, where a relatively small population of specialists exist and tend to know each other. We noted that many of the names we received were given to us more than once; this reassured us that we were reaching an appropriate group of informants.

Members of the expert panel included those from the following constituencies (we have not named them or their organisations, in order to protect anonymity):

- Police authorities
- Child protection committees
- Children’s Hearings services
- NHS services
- Local authority children’s services departments
- Large voluntary sector organisations
- Small voluntary sector organisations
- Children’s representative organisations
- Academic experts

The e-Delphi approach allowed early analyses to be checked with members of the group. Efforts were made to identify areas where consensus would be possible and to understand differences of opinion. The following findings are structured by particular
themes that were identified in the responses; these are to an extent driven by the initial stimulus questions that were asked as well as follow up themes in later rounds.

Findings

Definitions of Sexual Exploitation, Grooming and Trafficking

Participants in the e-Delphi study were asked to comment on the validity of definitions of sexual exploitation, grooming and trafficking presented earlier in the report (and copied below in the relevant sections). By asking the participants to discuss these definitions in detail, we hoped to ascertain more clearly how these concepts are understood and applied; in addition, participants provided a highly nuanced understanding of the subtleties of these issues.

Definitions were generally considered to be acceptable. There was consensus however that it would be useful for definitions to include particular groups of victims, perpetrators or methods used to commit sexual exploitation, grooming and trafficking offences. The range of victims, perpetrators and methods suggested varied and are outlined below.

It was thought that nationally agreed definitions of sexual exploitation, grooming and trafficking would be helpful. Many e-Delphi panel members emphasised the importance of broad definitions that would capture the wide range of circumstances connected with these types of exploitation.

Sexual Exploitation

Participants in the e-Delphi were asked to comment on the validity of the definition of sexual exploitation proposed by the UK wide group National Working Group for Sexually Exploited Children and Young People (NWG) as:

The sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities.

Child sexual exploitation can occur through use of technology without the child's immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones with no immediate payment or gain. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.8

Comments highlighted the complexity of one of the key issues of exploitation: ‘receiving something’. A few e-Delphi panel members wished to emphasise that ‘receipt of something’ may include affecion and love. One participant wrote ‘I’m not sure that exploitation always takes place in the context of compensation’ but it was unclear in this case whether affection might be included as ‘compensation’. The role of affection in sexual exploitation was questioned by one participant who thought that love and attention was part of the exploitation but was not a defining feature since this was also a common feature of sexual abuse:

I think it is the element of ‘trading or commercialising’ of the sexual relationship that makes it sexual exploitation as opposed to sexual abuse. So while the love and attention may be part of the trade-off, it may not specifically characterise it as sexual exploitation, because this is prevalent in sexual abuse as well as sexual exploitation. (e-Delphi participant)

At some point the ‘relationship’ will turn into an abusive one characterised by demands and threats. In some situations perhaps victims of CSE will experience both. The fluid or changing nature of exploitation is not addressed in the definition:

This relationship can feel like a caring relationship as those who exploit children and young people are very skilled at making them feel cared about. This makes the relationship one that young people will seek out. Through time the relationship will turn to an abusive one in many cases and fear will make a young person return to it. (e-Delphi participant)

The implied direction of the exploitation from exploiter to victim was also challenged; young people themselves may approach an individual who may exploit them:

I think that there is an emerging consensus (largely led by Finkelhor’s research group) that sexual exploitation or grooming needs to be understood in terms of the reciprocal nature of the problem and that some young people may make the first approach towards the person who will inappropriately respond to this. (e-Delphi participant)

Power dynamics in the case of peer exploitation was raised. This was not always viewed in the same way as the power dynamic in other types of exploitation.

I feel a large area of sexual exploitation which may be being overlooked is the sexual exploitation of young people by their peers. This would challenge the accepted definition of the perpetrator having power over the victim by means of gender, age etc. etc. as this type of CSE is often not picked up as sexual exploitation. (e-Delphi participant)

In cases I have been working with recently young women have been sexually exploited by a group of their peers and this has happened because those young people believe it is the norm within the group that girls are expected to perform sexual favours on boys when they have been drinking alcohol. The girls who are exploited have taken part in those situations in order to gain acceptance within that particular group or gang. (e-Delphi participant)
Taken together these raise issues about power via ‘peer group pressure’ and conforming to the norm, and ‘exploitation in terms of an age or power differential’. It was also suggested that religious and cultural factors, relationships and practices could be used to wield power over children and young people.

*Perhaps you might consider including reference to power relationships arising out of cultural and/or religious factors, relationships or practices. (e-Delphi participant)*

A few individuals commented that gender issues in exploitation should appear more clearly.

*I think there can be a view that it is females but is some evidence to suggest exploitation of males may be more hidden. (e-Delphi participant)*

Gender issues also extended to perpetrators whom it was noted were not always men, and female enablers could be part of the victimisation or be complicit in the exploitation because they did not do anything about it.

*Women can also be involved in sexual exploitation - often as enablers or those who turn a blind eye.*

**Grooming**

The following definition of grooming was used in the research and a number of suggestions were made about areas missing from the definition.

*Grooming is the process of reducing the resistance of a child, or their parents or carers, to abuse. This may be achieved by increasing a child’s or parent’s or carer’s fear of what might happen should they report the abuse as well as by inducing them to believe that the abuse is acceptable. Grooming may take place through personal contact with the child or the parent or the carer, or through other means of communication such as the internet.*

A common view was that the definition of grooming indicated that there was too much emphasis on fear.

*I think that the definition of grooming places too great an emphasis on inducing fear or inducement to see the behaviour as acceptable. Grooming takes place online (and probably offline) also because the young person feels that someone cares for them, or that this is a loving, romantic or even a desired sexual relationship. (e-Delphi participant)*

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Extending this view, one participant gave examples of how ‘encouraging empathy’ and making a young person feel as though they were a significant part of the perpetrator’s life could be used to groom victims.

This definition does not allow for the concept that some perpetrators groom by targeting young people with an empathic nature. They will do this by making that person feel sorry for them, encouraging the victim to feel as if they are helping them for instance. Also it does not cover the instances where the perpetrator causes the young person to feel they are an integral part of their life and have become indispensable to them. As one young person told me ‘he groomed me by being my "tube" and I could get him to do anything for me like give me lifts whenever I wanted to go somewhere’. (e-Delphi participant)

It was also felt that grooming involved receiving something, in-line with the definition of sexual exploitation.

Can’t grooming involve a young person receiving something also? In line with the definition of exploitation? Surely if a young person receives gifts or payments etc. this is part of a grooming process? (e-Delphi participant)

The impact of grooming for non-sexual purposes was also thought to leave children and young people susceptible to subsequent grooming for sexual (or any) exploitation. In the example below, grooming was used a means to sanction domestic violence.

Whilst the definition of grooming relates to sexual exploitation, children can also be groomed or controlled by parents /carers in a non-sexual manner, e.g. in the case of [known children] to monitor mum's alcohol use: and to continue to exert control over mum. In this case the children were therefore 'groomed' in the context of domestic violence. This has increased the eldest child’s overall levels of vulnerability and likelihood of exploitation has increased. (e-Delphi participant)

If grooming in relation to exploitation includes providing something desired to children or young people perhaps the NPIA definition above is inappropriate. In the above definition, grooming is considered in the context of abuse, not exploitation.

The processes involved in some forms of grooming might be compared to those of courtship or persuasion; what critically differentiates grooming from these other activities is that the groomer’s motive is predominantly to elicit some kind of sexual discourse or behaviour from a child or young person which they would not have sought otherwise. If it is the case that the inducement of fear is not often part of the grooming process, at least with respect to sexual exploitation, a definition which emphasises the ‘positive’ nature of the relationship, such as the one adopted in Northern Ireland, may be appropriate:

Grooming is when someone tries to build a relationship or gain the trust of a young person with the aim of getting them to take part in some kind of sexual activity, such as sending or
viewing sexual images, sexual conversations or some kind of sexual touching. The relationship will usually appear friendly and harmless at first, because of the clever tricks used to gain the young person’s trust but eventually the person will ask, or even pressure, the young person to take part in some kind of sexual activity. (Beckett, 2011, p. 43)

**Trafficking**

In general the following definition of trafficking was largely accepted by e-Delphi panel members; however as will be shown below, it would benefit from the identification of a wider range of processes involved in trafficking.

Child trafficking is the practice of transporting children into, out of or within the UK for the purposes of exploitation... Children are trafficked to, within and outside of the UK for various forms of exploitation. These include:

- Labour Exploitation (construction, restaurants)
- Domestic servitude
- Criminal activity (cannabis cultivation, petty street crime, illegal street trade)
- Sexual exploitation (brothel based, closed community, child abuse images)
- Application for residence abroad or in the UK
- Benefit fraud
- Illegal adoption
- Forced marriage

Although the definition of trafficking was largely accepted some participants felt that the focus on the UK was too narrow:

In most instances of trafficking into the UK children will have been removed permanently from their home, travelled a great distance and may not even realised they have been trafficked. Trafficking within the UK is no less traumatising, but for me it is different as it does not have that massive element of dislocation and isolation from all that is familiar to the child. I think it worth considering this in the definition. (e-Delphi participant)

Internal trafficking was also highlighted as an area which was not sufficiently explored in this definition. This is an area which Barnardo’s has recently noted is under-investigated.

... very frequently internal trafficking is being missed as a factor in CSE. Many still think of human trafficking as having an international dimension; however professionals should be recognising internal trafficking more. We are seeing young people being facilitated from one place to another using inducements for exploitative purposes. Whether this is from one

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city to another or from one house to another, it is still trafficking and we should be identifying it as such. To my knowledge very little use is made of the National Referral Mechanism in this regard. (e-Delphi participant)

One e-Delphi participant stated that the focus of the above trafficking definition on ‘into, out of, or within the UK … is limiting in its scope’. This participant stated that the international definition of trafficking (Article 3 of the Palermo Protocol, UN 2000) provided a better definition because it incorporated other processes involved in trafficking such as recruitment, transportation, transfer, harbour and receipt of persons and not only ‘being moved’:

**Trafficking Definition (Palermo Protocol)**

*For the purposes of this Protocol:*

(a) “Trafficking in persons” shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs;

(b) The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used;

(c) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons” even if this does not involve any of the means set forth in subparagraph (a) of this article;

(d) “Child” shall mean any person under eighteen years of age.

(Article 3, Palermo Protocol, UN 2000)

**Prevalence**

In the first round of e-Delphi questions participants were asked to estimate how prevalent they thought sexual exploitation was in the ‘looked after away from home’ and ‘at home’ groups of looked after children. For some, there was some reticence about making these types of judgements, while others were more comfortable with making estimates of ‘high’, ‘extremely high’ and ‘common’ for children looked after away from home. There was less consensus about prevalence among children/young people looked after at home, with fewer people willing to give (qualitative) estimates; where estimates were provided they were mixed: ‘the same as those looked after in care’, ‘less than those looked after in care’.

Some of these ‘qualitative’ estimates were based on prevalence rates in the literature and other estimates were based on experience in the sector. One participant indicated
that a recent internal review had revealed around a third of children looked after away from home were likely to have been sexually exploited.

During the e-Delphi study, some panel members estimated that a third of children looked after away from home and at home were likely to have been sexually exploited, in later rounds other panel members were asked to consider this estimate and indicate whether or not they thought it was realistic. Again many e-Delphi panel members were uncomfortable about making these estimates in part because of the unreliability of the data:

> I agree with the caution in which we should approach the data because it is patchy, inconsistent and in many instances, not recorded. (e-Delphi participant)

The following statement is illustrative of the views of participants who agreed with the estimate via a process of comparison with available statistics:

> This is a difficult one for me as I am not working directly now with young people but managing from a distance. However if we consider a range of statistics coming from adults it would appear somewhere between 20% - 25% of adults have experienced some form of CSA before they were 16 years old. Even if you take the more conservative estimates of 10% which have been around for a long time then 30% of young people in care doesn't seem too high given their higher levels of vulnerability than the general population. I suppose the question, which relates back to my points in Q1, how many of these young people have experienced familial sexual abuse and how many sexual exploitation and how the differences are defined. However you define [it], 30% does not seem too high a figure. (e-Delphi participant)

Another participant who disagreed with the one-third figure felt that there would be more indicators if exploitation was happening at this level. This has implications for levels of awareness of indicators, risks and routes to sexual exploitation among professionals and others working with young people:

> … I have a similar response to the data reliability and prevalence for this group - I would say less than one third [] are sexually exploited. Taken together, for looked after at home and looked after away from home we currently have around 16,000 children ‘in care’ - this would mean we have over 5000 children who are sexually exploited if the ‘one third’ estimate for each category was accurate. Generally, I think this is high estimate and I would expect there to be other signs that this number was involved, if this was the case. (e-Delphi participant)

Greater confidence and consistency in making qualitative estimates for children looked after away from home suggests that among professionals there is more confidence and knowledge about the routes to exploitation, level of risk that children are exposed to and vulnerability of children looked after away from home compared to knowledge about those who are looked after at home. Variation in estimates is likely to be affected
by different definitions of sexual exploitation and where the boundaries between sexual
abuse and sexual exploitation are taken to lie.

**Risk Factors: Children Looked After Away from Home**

When asked to make estimates about the prevalence of sexual exploitation e-Delphi
panel members gave a significant amount of attention to the risk factors that were
associated with the likelihood of being exploited. Although the risk factors below are
presented separately, e-Delphi panel members were clear that it was the
interconnection of these factors that made children and young people more or less
vulnerable to exploitation, with particular emphasis on the interplay between living in
residential care and prior abuse.

Some of the most common risks identified were abuse at an earlier age, seeking
relationships to fulfil unmet emotional needs, attitudes towards children, low safeguards
in some care settings, wide friendship groups, technology and running away. Care
leavers were also identified as ‘at risk’ for these reasons but it was thought that they
had additional financial difficulties which may mean that the lure of extra money
existed.

Also identified were the interconnected nature of placement type, misuse of alcohol or
drugs, level of abuse and trauma, isolation and the trusting nature of children and how
these may lead to an individual becoming vulnerable to sexual exploitation:

*Children who are placed in care are mainly placed there because there has been some form
of abuse or neglect. Even where there is bereavement that leads to experiences similar to
trauma. We know from our evaluations that this makes them more vulnerable to further
abuse. The care situation is not the one that is most important... The most important aspect
is the level of abuse or trauma they have faced prior to being placed in care. However if
there is a strong, supportive adult carer in the care setting that can help children and young
people build resilience factors that would make them safer from further exploitation. We
have found that sexual exploitation of young people who have spent time in care is
extremely prevalent. We know this from our statistics from our prison services where the
majority of service users spent time in care and [other service]. With [other service] further
abuse has taken place in the care setting making young people increasingly vulnerable to
further exploitation. There is a risk of using coping strategies such as drugs and/or alcohol
to block out memories and this makes young people extremely vulnerable. They have
grown up in a system that requires them to trust unknown adults and this makes them
more vulnerable to trusting adults who seek to exploit them and use of substances further
reduces inhibitions. There is a large tendency for suicidal ideation and self harm and risk
taking behaviour due to not having self care. Isolation is a huge factor for vulnerable young
people which leaves them open to being groomed by adults who are able to exploit the
feelings of isolation. (e-Delphi participant)*
It was highlighted that undisclosed abuse or abuse where no support or therapy was provided were likely to leave young people without an understanding of appropriate relationships and how to keep themselves safe. In residential settings this could have implications for other young people who may be at increased risk of copying this type of risk taking behaviour:

I would say that many young people in our care system have had previous experience of sexual abuse which has perhaps not been disclosed or for which they have not had any form of counselling support. Those young people may be at increased risk of sexual exploitation as they may not have understood their abuse and/or how to keep themselves safe. They may have links or contacts with groups of abusers and also may inadvertently allow these perpetrators access to their friendship circles within and outwith the residential unit. However the same applies to young people in the community. (e-Delphi participant)

Poor understanding of healthy relationships and seeking out any form of love and affection are key vulnerabilities that perpetrators look for when targeting children and young people:

Perpetrators are often well able to 'spot' a vulnerable child or young person which increases the likelihood of them being targeted. Young people in care unfortunately often look for love and affection from others if they are not receiving this from family - that can also increase the risk factors. (e-Delphi participant)

Perpetrators may target residential units where they know that vulnerable children and young people are likely to be living:

It is simply from my practice background that I draw anecdotally that young people can be targeted physically in residential units (they are 'known' by abusers and it was not unusual for abusers to wait for the girls in cars round the corner). (e-Delphi participant)

The ‘mobility’ of children looked after away from home was also thought to be a factor that could lead to increased risk due to increased numbers of friends and the ‘spread’ of risk taking behaviour:

There is something do with the "mobility" (i.e. changing moving around care placements especially group living) of changing care placements, increases the networking opportunities amongst risk taking young people, who "encourage" other young people to recruit similar behaviour. (e-Delphi participant)

The role technology played in increasing the number of children involved in risk taking behaviour was noted:

Children / young people who are in group living situations are more at risk as "vulnerable" children are living together allowing the risk taking to spread amongst the group. They also have a tendency to move placements and communicate to each other through mobile
phones & using "BBM"/facebook. A number of young people have an incredible amount of friends e.g. 600! (e-Delphi participant)

Technology was also implicated in other risk taking behaviours such as having a wider network of ‘friends’ to run away to; previously children and young people would run to close friends or family but contact via social networking gives children more choice and places them at greater risk of running somewhere where they will be in danger:

Vulnerable young people are communicating through mobiles/BBM/facebook to meet up with other vulnerable young people who they network with. Previously children who went missing went to family/friends. Now they appear to travel with friends to unknown houses, consuming alcohol and drugs (e-Delphi participant)

Disabled children in residential care were viewed as being at greater risk because they had few relationships outside this setting. This will influence who may notice the exploitation and reduces opportunities for young people to disclose. Communication challenges for disabled children could also increase the risk of exploitation:

The more that children/young people are excluded from ‘normal’ communities and networks the more hazards they face, e.g. disabled children in residential schools who have few or no relationships outwith their setting. (e-Delphi participant)

Language and cultural barriers were mentioned as being implicating factors for asylum seeking children but this may equally apply to children from a minority ethnic background residing in Scotland:

To risk factors I would also add the vulnerability of unaccompanied young asylum seeking children who have cultural isolation, [who] may have language difficulties, and difficulties navigating the system and understanding what rights to support and protection they are entitled all of which increase their vulnerability to sexual exploitation. (e-Delphi participant)

Going missing was also a significant feature but this will be discussed in a separate section.

Risk Factors: Staff Attitudes and Practice Issues
Risk factors were not only thought to be connected to the child or placement type but also as a result of staff attitudes and safeguarding within organisations. There were three elements relating to staff attitudes towards children. Where children or young people were viewed as ‘street wise’ it was assumed that they had the capacity to protect themselves. This was seen as a dangerous assumption because it is often the ‘street wise’ child who puts themselves most at risk:

Often the ones who are most at risk are the children who the care home staff identify as being ‘street wise’. This seems to make some of the staff believe that they are more capable
of looking after themselves than others, however, the opposite is often the case. The ‘street wise’ kids are often the ones who have no concept of risk and will repeatedly put themselves into situations where they don’t have the life skills to get themselves away until it’s too late. Even when it is too late there are difficulties in getting the children to engage with services as many don’t recognise the power imbalance in what they often deem to be a consenting relationship. [e-Delphi participant]

Another attitude towards young people which was thought to place them at greater risk (by way of not receiving support) was the view that children are viewed as ‘problematic’ rather than the behaviour being acknowledged as indicating underlying vulnerabilities. It was noted that this attitude existed within agencies that were tasked with supporting children:

Some older young people have the risk of their risk-taking behaviour being labelled as troublesome rather than troubled – including by Children’s Panel members. (e-Delphi participant)

A third attitude towards young people, again in social care settings, is that expectations of looked after children are in general lower than expectations for children who are not looked after. This means that poorer outcomes and certain behaviours are accepted as ‘normal’ for this population. This in turn creates high thresholds for intervention:

Too many professionals have low aspirations for our looked after children and young people. Behaviours that would cause alarm within our own families are too easily ignored with looked after children and glib excuses made such as ‘she’s ok - she’s street wise’ or ‘it’s her choice’. (e-Delphi participant)

Lack of awareness among staff about what constitutes sexual exploitation posed a risk to young people. Staff may fail to support a child or disrupt exploitation because they view sexual activity as the young person’s ‘choice’.

A lack of appropriate safeguards in some ‘away from home’ settings was thought to increase risk of exploitation. Foster care in particular was identified, although lack of supervision in residential care homes was a factor which allowed children to put themselves in risky situations:

Some of the ‘not for profit’ foster care agencies seem to have fewer safeguards and not so experienced social workers as local authority or well established charity agencies. (e-Delphi participant)

In my experience young people who have been looked after in residential units have been groomed and sexually exploited, however staff appear to be very aware of these instances and of the potential for situations where a young person may be vulnerable to exploitation. Perhaps foster carers may be less aware but this is just a thought I don’t have experience of this. (e-Delphi participant)
Difficulties of lack of staff for supervision, older age means difficult to actually prevent them going out. (e-Delphi participant)

Children were also seen as being at risk where there is a culture of denial and non-reporting, where for example certain individuals may ‘appear to be untouchable’, for example, as per the Savile case.

**Risk Factors: Children and Young People Looked After at Home**

It was acknowledged that children looked after at home faced many of the same risks as children looked after away from home. Many participants admitted that they had less knowledge of the risks faced by those looked after at home, although a few additional or alternative risks were proposed for the looked after at home population. Some of these risks are based on educated guesses rather than experience. Additional or alternative risks may include:

- Missing school and education;
- Not being taken seriously when running away from home (although it was noted that this was a problem for those looked after away from home too);
- Especially vulnerable to sexual exploitation which involves, directly or indirectly, their parents. For example, inability of parents to keep their children safe and protect them, children and young people being exposed to inappropriate others in their own home, low parental awareness of grooming.

_I would imagine it would be easier for a perpetrator to groom a single carer or two carers than a whole staff group given that their grooming behaviour would be exposed to people who have had training and also who would probably as a staff team, challenge each other’s thinking._ (e-Delphi participant)

Greater access to technology at home may lead to increased risk of sexual exploitation; Abusers target vulnerable families.

_By definition of being subject to compulsory measures of care at home, the child will be in a vulnerable situation, usually linked to parental problems which will expose the child to hazards. If their situation has become safe and stable they shouldn’t be on supervision._ (e-Delphi participant)

**Risk factors: Children and Young People who Go Missing**

‘Going missing’ has been highlighted in recent research as a high risk factor for sexual exploitation. Views of this specific issue were therefore explored in the e-Delphi study. Going missing was viewed as an indicator that children and young people were experiencing difficulty at their home or care setting and that this was a ‘powerful push’
associated with running away. The need to respond appropriately to running away and in the early stages is highlighted:

_Having worked for many years in [organisation] and worked with very many children and young people who had run away almost without exception it was to get away from something, or someone, or to try and express unhappiness or fear. I don't recall the underlying reason ever being about going to something without a powerful push from behind. On that basis going missing then means that there is an underlying difficulty back in the place where they should feel safe - and that is before you add other risk factors like alcohol and drugs - cumulatively this adds to the risk. However there is also evidence that young people don’t always go very far initially but the more often they run the further they travel, the more it can be accepted that it is something they do and perhaps less concern is shown to them. This has the potential to isolate them further leaving them more open to exploitation. (e-Delphi participant)_

In addition to a ‘push factor’, going missing was also associated with a ‘pull factor’ to which children and young people ran. Although it is _not inevitable_ that children who go missing become victims of sexual exploitation, it was highly likely that children who regularly went missing were exposed to or participating in risky behaviours:

_In my experience, young women do not tend to abscond from care repeatedly or for long periods unless there is a significant 'pull'. This pull tends to involve alcohol and/or drugs and males but not always older or abusive males. Young people who are missing from care are rarely safe. They are generally being 'harboured' by people who know that the young person is away from their home or care placement. ... A young person who is repeatedly absconding must be assumed to be involved in/exposed to dangerous activity. (e-Delphi participant)_

The pull factors could result in the child or young person ending up in a safer or riskier setting than the setting from which they ran.

_In my experience I have seen both sides of this. For example I have seen young people exploited by someone who has befriended them and given them a place to stay when they have been "on the run". However I have also seen children run away from sexually abusive situations at home - some have then gone on to become further exploited whilst running away and some have run away to safer situations. (e-Delphi participant)_

Most e-Delphi panel members agreed that going missing was a risk factor or high risk factor for sexual exploitation however some questioned the need for a _hierarchy of risks_ where going missing was considered one of the most important elements:

_I agree that 'going missing' is a risk factor. However, as with all risk factors it has to be taken in the context of other risk factors - such as unknown adults in contact, unexplained_
appearance of mobiles, clothes or money - I am sure there are others identified through existing vulnerable persons protocols. (e-Delphi participant)

Regularly running away was thought to indicate a higher likelihood of exploitation:

*The key is in the 'regularly'. We know from reports from Children and Young People themselves that they may need to make money etc. and a pattern sets in that adults fail to notice. If there is a regular pattern then there is likely a very strong chance the YP is being exploited.* (e-Delphi participant)

Some e-Delphi panel members preferred to identify vulnerabilities and early abuse (rather than going missing) as key indicators that a child was at risk of sexual exploitation.

Under certain circumstances it was thought that going missing was an almost certain indication that a child was being sexually exploited. For example, if a child who had been trafficked for sexual exploitation was missing it is extremely likely that the traffickers still have power over the child:

*In relation to young people trafficked for sexual exploitation who have escaped from traffickers and are in care but then go missing, "going missing" is likely not to be a risk factor for sexual exploitation but evidence of ongoing sexual exploitation from traffickers. Therefore the issues are to do with how traffickers exert ongoing power over young people including threats to them and to family members, threats of deportation, marking of young people through scars, effects of power of curses, making young people feel that there is no other future for them etc. The risks are then to do with lack of support, protection, belief in other possible futures, sense of safety that is greater than the threat exercised by traffickers etc.* (e-Delphi participant)

**Risk Factors: Grooming**

One of the research questions set out in the study was to ascertain whether children and young people in Scottish care services were being targeted by groomers. There was general consensus that it was very likely that grooming does occur in care services and a number of practitioners cited evidence. Grooming was not considered to be unique to the Scottish looked after away from home population, rather this population was seen as just one of a number of areas that were targeted by groomers. Grooming was thought to be targeted at any area where safety checks for children were not considered to be thorough:

*I would say that abusers are always able to manipulate the system and will target any area of weakness whether this is residential units, foster care or vulnerable families. It should be considered that they will find different routes to children - research highlights they will target anywhere that isn’t thorough in checking safety of children. For example, they may*
not be able to work in a residential [unit], but may apply to be a befriender with a voluntary project (I had experience of this happening at our service). (e-Delphi participant)

Social networking sites were considered to be a common medium for grooming:

I would say you cannot restrict this to young people in Scottish care services. Children and young people across Scotland are becoming increasingly vulnerable to being targeted by groomers. We have had a large number of instances of young people being targeted on facebook and other social network sites. This has become an area of very high risk as is the area of older young people targeting younger young people. However it is of note that groomers are skilled at identifying young people who are particularly vulnerable. (e-Delphi participant)

One participant described a method of grooming used by perpetrators who target children and young people who live in residential care homes:

I know from the past that some residential units have been targeted by groomers. From my experience the abusers are usually known to at least one of the young people before that child was accommodated in a particular unit. Often a child’s journey through care can unfortunately involve many placements meaning that the perpetrator may have access to a large number of young people both in care and outwith care by exploiting a young person’s contacts. This is especially true now we are in the age of social media where grooming takes place at an incredibly fast rate and young people openly advertise contact details and friends lists. (e-Delphi participant)

**Protective Factors**

Limited reference was made to factors that may protect children and young people from sexual exploitation but this may be expected in a study which seeks to explore the nature and prevalence of sexual exploitation. Some of the factors that were considered to be risks could alternatively act as protective factors for young people. These include protection from peers who looked out for one another: ‘Peer groups can have a protective role as well - young people can ‘look out’ for each other.’

Mobile phones were also considered to provide protection, although it was noted that staff did not always agree that this was the case:

I’d want to explore more of the research from children and young people in care about the perceived risks and how they state they may protect themselves. For example, one residential unit tried to take mobile phones off the girls but as they explained to me, they used these phones to contact friends/family/police in difficult situations. They could be a lifeline - whereas some workers felt removing the phones would take away the risk. (e-Delphi participant)
As mentioned earlier, in some cases, going missing was regarded as being protective if it provided children and young people safety from abuse:

*It should be considered (see research on 'young throwaways') that being missing can be protective if they are at risk in the family home. (e-Delphi participant)*

**Legislation and Regulation**

Participants were asked about their views on the role of regulation, legislation or guidance in respect of effective collaboration to prevent sexual exploitation of children and young people looked after away from home.

Legislation was seen as important in that it provided a framework to disrupt and prosecute abusers. It was pointed out however that legislation is in place in the form of the Protection of Children and Prevention of Sexual Offences (Scotland) Act 2005 but that there was possibly a lack of awareness of this statute:

*Existing legislation in the form of the Protection of Children and Prevention of Sexual Offences (Scotland) Act 2005 is not well known in police circles and there needs to be efforts made to raise awareness of its provisions. It was not used during [a named police operation] and this may have been down to a knowledge gap for the officers involved. It creates a specific offence of child grooming and also makes provision to apply to the court for a Risk of Sexual Harm Order (RSHO) where an individual is suspected of being involved in a course of conduct to groom a child. This generally means more than one occasion. The RSHO is a preventative order that puts obligations on the perpetrator to either do something or refrain from doing something. It usually has a power of arrest attached and would allow law enforcement to better police these individuals. There could be conditions such as not allowed to possess an internet enabled device or access the internet, no unsupervised contact with anyone under 16 etc. etc. To my knowledge this legislation has not been tested to any great extent in Scotland and I also believe that applications for RSHO’s have been few and far between. (e-Delphi participant)*

It was also suggested that Section 37 of the Sexual Offences Act be repealed so that young people and their parents, teachers and other relevant professionals can be unafraid of raising concerns. It was suggested that rather than simply change legislation, there was a need for a fundamental re-thinking of how children and young people are cared for.

Similarly, regulation and guidance were seen as important. It was mentioned that Barnardo’s has developed a ‘Good Practice Guide’ for local authorities to help them develop effective responses to CSE. Several participants cautioned however that while regulation and guidance should help develop priorities and underpin a safe and supportive environment for vulnerable young people, they are far from a ‘cure all’:
Regulation, legislation and guidance seem to me important in: 1) raising the profile of the issue 2) as a first step in identifying how far professionals understand and are able to respond to cases of sexual exploitation (both through generating discussion and monitoring practice) 3) ensuring accountability for policy and practice. At the same time, I suggest there are difficulties in generating too many specific pieces of guidance that are ‘issue based’. These seem likely to create confusion or be ignored by safeguarding authorities. There are also dangers, at national policy level, of seeing guidance as a means to plug holes i.e. issue dealt with. The experience in England and Wales suggests that guidance is far from being a panacea, especially if it is not backed by resources or clear lines of support/expertise. (e-Delphi participant)

Rather than reliance on legislation, regulation and guidance it was suggested that there were other issues which were important in addressing the needs of this group of children and young people. The following were proposed:

- Effective collaborative practice and the need to foster ‘a collective will’ among those involved in this field;
- A shift in organisational culture and willingness to share information;
- Address the lack of knowledge and awareness about sexual exploitation, particularly among those caring for and working with children and young people in residential care, schools etc. This includes not only recognition of sexual exploitation but also understanding how groups and networks of abusers operate and knowledge of appropriate intervention strategies;
- Sharing of research, evidence and practice knowledge to inform practice;
- A ‘fundamental shift in thinking about how we care for and support children and young people in care’; a need to work from a children’s rights/ child centred framework, working inclusively with young people;
- Advocacy for young people and routes for them to disclose abuse.

There need to be focus groups of interested organisations to look at this issue and to put together regulations for care environments in identifying and recording this issue. But again I think the issue needs to be wider. This issue has the potential of affecting all young people and there needs to be a strategy to tackle it. We had a case recently where a 13 year old young person was being targeted by a 17 year old who had been grooming her on the internet. The response by the police, school and GP was uncoordinated and further traumatised the young person. There was no prosecution despite the young person having to go through repeated and intrusive interviews. In instances such as this there needs to be a multi-agency approach with support put in place for the young person throughout the process. There should be guidance and training for care workers in this area. (e-Delphi participant)

It was also suggested that there is learning transferable from other initiatives such as those involving adult survivors of historical institutional abuse.
Data Collection

Information and data indicating concerns about sexual exploitation of young people were seen as valuable and as potentially available from a variety of sources. Participants felt data was needed, both for the purposes of identifying trends and patterns and for identifying the vulnerability of individual children and young people. Police intelligence was seen as being helpful and insightful and it was noted that looked after children’s nurses also have access to information which can indicate exploitation. Residential facilities were also thought to record valuable information including maintaining records on young people who have experienced exploitation.

There has been on-going monitoring and evaluation of the situation in respect of trafficking of children in one local authority for the last five years:

*It has been identified that approximately one third of child trafficking victims have been trafficked for the purposes of sexual exploitation, some for commercial exploitation. The data has been used to inform training, procedures and national developments. [e-Delphi participant]*

There was consensus around the need for a consistent data set, but less so as to the content and the process of collating this. There were thought to be challenges to organising such data in a way, which could be built up ‘a bigger picture’. It was also suggested that increasingly fewer data are recorded about individual work with children, thus making it difficult for children to retain a full picture of their lives, particularly if they are looking for this retrospectively.

Suggestions as to the challenges to data collection and data storage were as follows:

- As yet there is no clarity as to what needs to be collected and how this should be used. One example cited was the inconsistent operational response (across agencies) to repeatedly missing young people from residential care;
- To be effective there needs to be multi-agency cooperation, involving care homes, social work, police health and education. It was suggested that the information is recorded but that there is often ‘silo working’ failing to join up across agencies, place and time (for example as above, young people repeatedly missing);
- Challenges with the routes by which information comes in to police was cited as one of the main drivers behind the police moving to ‘single referral hubs’ which are increasingly used across Scotland (see below);
- Data protection legislation was suggested by some as impeding sharing of information about children identified as vulnerable to sexual exploitation;
- Some participants noted a tension in respect of young people’s rights to privacy;
- There were ethical issues noted around confidentiality, ‘need to know’ and data security issues (e.g. encryption);
- Looked after children who were exploited were described as a ‘hidden population’, data will be hard to collect due to under-reporting and the mobility of this group of young people;
• There is a need for training for staff working with children to increase awareness if issues. It was suggested that sexual exploitation is not always recognised by staff, but rather seen rather as ‘choice’. There is therefore a need for training on risk factors and signs, to enable staff to recognise CSE and collect the relevant data.

The combination of these factors has led to tension and confusion; about information to be gathered, about confidentiality and about the role is supporting young people.

‘Single referral hubs’ were suggested as one way forward. Led by police, these are at various stage of development across Scotland. Described as ‘vulnerability’ hubs, these bring together social work, health and education. It is hoped that these would lead to better information sharing, recognition of repeat referrals, better safety planning and quicker information sharing and decision making.

It was also noted that the University of Bedfordshire dataset was being adopted by several police forces in England and it was suggested that this be considered in Scotland. In the absence of such a pre-existing model in Scotland, the following suggestions were forthcoming:

**Content of data collection**

In respect of content, it was suggested that there should be a national template. This should include:

• Clear definitions;
• Successful prosecutions;
• Potentially risky situations for young people (such trends will change over time);
• Where young people are exploited (including residential units, foster-care providers, specialist providers);
• Police should be notified of young people placing themselves in situations where they could be sexually exploited.

**Process**

Consensus among those who commented on this was:

• Retrospective examination of Child Protection Registers may reveal some relevant data;
• Police and social work should be the main organisations gathering information;
• Data from specialist services and those caring for/ looking after the looked after child/ young person should be included but routed via police and social work;
• This should be collated by the local Child Protection Committee (CPC). It was suggested that CPCs should have explicit policies in place and include sexual exploitation in their regular case audit activities;
• This should also be held nationally by Scottish Government;
• It was also suggested that there be a child protection registration category of ‘at risk of sexual exploitation’ to replace the ‘vulnerability procedures which exists in most local authorities’. While recognising that this would have implications for young people thus registered, it would allow local trends to be followed. It was suggested that young people could be involved in advising on this process;
• This should also be held nationally by Scottish Government;
• This should include data from specialist services and those caring for or looking after the child or young person but routed via police and social work.

Other data
It was suggested that it would be helpful for police to be made aware of young people placing themselves in situations where they can be sexually exploited. It seems that there can be an inconsistent operational response to young people going missing from residential establishments; relevant information does not always reach the police when called to a critical incident of a young person missing, offending or offended against. It was also thought that it would be helpful to invest in research and outcome monitoring of work with young people and their families.

It was also suggested that it would be helpful to complete research based on the testimony of young people and for Scottish Government to know of research under way. In conclusion of this section, it was observed that while data collection was seen as important, there would be under-reporting unless accompanied by awareness raising measures.

The Role of Care Inspectorate
Participants were asked what the Care Inspectorate could do in order to reduce the risks of sexual exploitation of children and young people looked after away from home and to ensure that those who need support receive it.

Although it was recognised that they cannot reduce the risk of sexual exploitation alone, a clear role for the Care Inspectorate was suggested by several participants:

*The Care Inspectorate should make sexual exploitation a specific area for inspection for LAs and all organisations who provide accommodation for children. The Care Inspectorate process should assume that all young people who abscond from care placements are at risk of being sexually exploited and closely investigate procedures for such young people.*

(e-Delphi participant)

Moving on to specifics, one suggestion was towards establishing some consistency across Scotland in respect of guidance, policy and procedures and thereafter in evaluating the effectiveness of local arrangements. This scrutiny should extend across all care providers. It was noted that some local authorities and Child Protection Committees do
not have local policies and procedures in place. There was a suggestion that denial is a problem in some areas:

I have some concerns that a number of Local Authorities in Scotland are going it alone and trying to formulate their own guidance re CSE. I would much prefer the Government and/or Care Inspectorate took on a coordination role here and ensure that there was one national position, rather than the patch work quilt that is starting to form. (e-Delphi participant)

It was also pointed out that with the formulation of a single police force in Scotland there may be less potential for regional variation in how a number of issues including CSE were tackled.

A second role for the Care Inspectorate was that of scrutiny of how residential and child service provision address issues, a factor which is regarded as being responsible for some of the indicators of vulnerability to CSE:

In relation to regulation. I am aware the Care Inspectorate have a role in inspecting care homes and also the wider children’s services provision in Local Authorities. I would like to see much greater scrutiny around how care homes deal with repeat missing persons, escalating risk and vulnerability. I know that it currently forms part of the Care Inspectorates inspection regimes. (e-Delphi participant)

A third role for the Care Inspectorate was that of requesting multi-agency case file audits as part of the inspection regime:

When identifying children that are going to form part of a multi-agency case file audit in advance of any inspection I would like to see more and more children who are repeat missing persons and at risk of sexual exploitation being selected for the multi-agency chronologies that need to be supplied to the Inspectorate. This would expose current multi-agency deficiencies and help drive an improvement agenda. (e-Delphi participant)

A fourth role of the Care Inspectorate was in ensuring robust methodology of registration and inspection:

- Improving methodology and care standards; this would include recognition of appropriate staffing levels for young people’s needs; ratings awarded reflecting feedback from residents; scrutiny of residential and foster care placements being ‘over numbers’; how GIRFEC principles are incorporated into the care provided; evidence of a focus on protection particularly given the recent concerns about exploitation;
- Responses to missing persons should be scrutinised during inspections with further investigation into reasons and responses;
- Review case files of young people at risk of being sexually exploited;
- A specific requirement on care providers to keep records of young people who are at risk and action taken.
It was also suggested that (where possible) the Care Inspectorate should consider conducting user surveys of victims involved in police operations into sexual exploitation. In the example cited, of one such investigation, anecdotal evidence indicated that most of the victims, half of whom were looked after away from home, were disillusioned by multi-agency failings.

**Intervention strategies**
One other theme, which was evident throughout the e-Delphi study however was the role of care providers, firstly in reducing the risk of sexual exploitation and secondly in meeting the needs of young people either vulnerable to or already involved in sexually exploitative relationships.

Young people looked after away from home were generally perceived as particularly vulnerable; care arrangements and relationships were seen as needing to compensate for this:

*The risk factors for young people in care relate to their experience of developmental adversities, fractured and dysfunctional family relationships, (sometimes) unstable care arrangements, (sometimes) lack of trusted adult to confide in and alienation from positive peers groups. (e-Delphi participant)*

Young people were brought into residential care for their own protection, but the intrinsic nature of the care system, particularly residential care, was seen to introduce additional hazards and risks:

*There is something (to) do with the “mobility” (i.e. changing moving around care placements especially group living) of changing care placements, increases the networking opportunities amongst risk taking young people who “encourage” other young people to recruit similar behaviour, (e-Delphi participant)*

It was seen as important therefore for childcare resources and individual practitioners to be child centred:

*People setting up and running service provision should make sure that their service is about the child and gear everything towards this. Is child protection training provision really sound and detailed or is it minimal... (e-Delphi participant)*

It was also seen as critically important that staff develop quality relationships with young people, for several reasons:
To facilitate prevention and early intervention by helping young people understand the risks;

To know young people well and thus recognise and ‘read’ indicators of them being exploited;

To be able to ask questions and to raise concerns sensitively;

To be aware of young people’s individual strengths, risk factors and propensity to come in contact with sexual predators;

To know how young people are spending their leisure time and what company they are keeping:

Workers need to know more about how young people spend their time in and out of placement. Care providers should make more of an effort to meet friends of young people and ensure that procedures allow for friends to come to placements for visits etc. — in the same way as parents would in their own homes. (e-Delphi participant)

It is recognised that those recruiting and exploiting children and young people may be only slightly older than them and indeed may have lived in the same residential unit (this is a particularly complex dynamic to manage).

It was also proposed that all sections of the community need opportunities to increase their awareness of child sexual exploitation. Children’s Panel members were identified by one participant for particular attention:

There should be more effective scrutiny of Panel members towards children and adolescents; and their ability to hold difficult conversations with parents. It is too easy for panel members to ‘give a row’ to young people and possibly undo a constructive discussion being pursued by colleagues. (e-Delphi participant)

Promising Practice and Practice Implications
Identifying areas to guide and improve practice was a key focus within this strand of the research. Key themes emerging from the analysis are presented below.

Expert Knowledge and Services
The expertise of professionals in services with a central remit to support victims of sexual exploitation was identified as a useful source of information on the subject, which should be accessed more frequently:

There is some fantastic knowledge about the issues in a very small number of services across the UK. It is key to harness this knowledge and disseminate. (e-Delphi participant)

A number of organisations based in Scotland were identified by participants as having expertise in this regard. These were mainly third sector organisations including Quarriers, Barnardo’s (who were identified as working in collaboration with a number of
local authorities on different projects), Children 1st, 18 and Under, Aberlour and Open Secret. The e-Delphi participants suggested that young people and children who are victims of CSE should have better access to these expert services:

> Young people should have more access to abuse and trauma recovery services at the earliest possible time in order to support then build resilience, and emotional literacy around this. (e-Delphi participant)

**Awareness of Child Sexual Exploitation**

There were significant data suggesting that many workers in contact with children had a general lack of awareness of CSE, related procedures and appropriate practice. In some areas of Scotland it was noted that there was ‘an assumption that ‘it doesn't happen still; even despite high profile cases in the media’:

> My understanding is that there are still a number of local authorities in Scotland in denial that CSE is a problem in their area. (e-Delphi participant)

On the other hand there is a danger that professionals may think CSE is a problem for all children looked after away from home:

> The flip-side is an over-reaction to media cases and speculation that this is an issue for all children in care. In the Rochdale case, the majority of girls were not in care - most were very vulnerable in the community (I think only 2 were in residential care at the time). (e-Delphi participant)

Lack of awareness by individual staff members could manifest in poor use of risk assessments, no action being taken to protect the young person or increased thresholds for evidence before action is taken:

> Some workers do not wish to appear judgemental about a young person’s sexual activity and this blinds them to the law and to the young person’s vulnerability. Some workers feel overwhelmed by the behaviour of some young people (and girls in particular) and do not know how to help. This leads to inaction and excuse making. A tendency to want ‘hard’ facts or evidence can also constrain some professionals. There are issues of lack of awareness of and use of risk assessment tools. (e-Delphi participant)

Variations in awareness across placement types are likely to exist:

> ...[young people] have professionals trained in sexual exploitation including internet abuse working with them, who should be able to identify the signs and offer interventions whereas for those living at home these may go unnoticed. (e-Delphi participant)
It was suggested that increased levels of awareness would allow staff to identify potential risk factors for children such as the level of pocket money received by young people looked after away from home:

*That a young person with problematic behaviours, negative peer associations and poor judgement/lack of maturity is given £20 per week to spend as they choose is clearly a risk factor. This goes to concerns about systems which are meant to protect children in care.* (e-Delphi participant)

Several participants felt that staff should also have greater awareness of legislation and consent to sexual activity:

*Professionals need to be clear that young people cannot legally consent to sexual activity under the age of 16 years - it is not a 'lifestyle choice' and awareness of a young person’s sexual activity should trigger sensitive conversations with the young person to establish his/her understanding of the relationship.* (e-Delphi participant)

Participants suggested that at the systems and service levels, better awareness could help professionals and other decision makers consider the appropriateness of secure care for victims of CSE, which is often *‘used as a “last resort” for girls where LA ‘couldn’t keep them safe’.*

**Involving young people**

Engaging and working with young people to understand their views and to improve practice and outcomes for victims were considered to be areas in need of significant attention. The issue of retaining control was highlighted as a key factor contributing to young people’s engagement with services and something that professionals should take seriously:

*We need to rethink this whole area to work with children and young people. Even in the most challenging of circumstances, they need to retain a sense of control over their lives. Professionals ‘saving’ young people can be really problematic - many young people will push away. My experience was with very outwardly street wise young women who were generally constructed as ‘a problem’ for the local authority. Methods to control included taking their mobile phones off them (seem to over look that this could be critical to their safety as well as part of their identity). The use of secure was inappropriate - no therapeutic work was done with the girls and they ended up more isolated and even more vulnerable.* (e-Delphi participant)

Participants suggested that conceptualising children as ‘vulnerable’ was a barrier to carrying out work with children:

*The experience of looked after children and young people needs to be located in their broader experience as, firstly, children and young people and, secondly, as vulnerable young people, who share many characteristics with those not in care.* (e-Delphi participant)
There was a suggestion that opportunities should be created to involve children and young people in decisions about their care or to become engaged with services. Suggestions included ‘regular days for young people in different care setting to come together to have their thoughts and views heard’. It was recognised that there were some opportunities to engage in this type of activity but that this may not be widespread and may or may not include a focus on CSE:

Some local authorities have Vulnerable Young Persons meetings, however these are not replicated across Scotland. Where they are in place, depending on which professional you speak to, they may or may not address CSE! (e-Delphi participant)

One participant suggested that for young people who were not engaged with services ‘more assertive outreach to groups of young people’ was required. Increased advocacy for young people would help to ensure that appropriate decisions about care placements are made for young people:

Also access to independent Children’s Rights Officers, advocates and ChildLine. Advocacy can become crucial for children in care as sometimes the perceived but undisclosed risk leads to moving placements. (e-Delphi participant)

Court processes were thought to be ‘child unfriendly and are often more about covering workers’ backs than truly responding to a child or young person’s needs’. In addition some suggested that insufficient support was provided to children following investigations or court meetings:

The introduction of intermediaries would help this along with better implementation of existing special measures. After investigation, court etc. young people sometimes feel dumped - the formal processes have been completed and sometimes the professionals back off - but the child is left with the emotional baggage and sometimes no way to deal with this - leaving them with continuing vulnerability. Abuse and trauma recovery counselling and therapeutic services are low down the funding agenda in many authorities - leaving damaged young people high and dry. (e-Delphi participant)

The changing role of social workers to being case managers was thought to reduce opportunities for engagement with children and therefore opportunities to develop relationships were missed:

It is much harder for children and young people looked after either at home or away from home to build the kind of trusting relationships which encourage disclosure. This is largely in my opinion due to a change of the role of social workers from individual worker to case manager. It is not nearly as easy for them to spend time with a child or young person getting to know them and building trust. We also have many more restrictions on ways workers can work with children and young people now, some of which are important for
child protection, but some of which are resulting only in a distancing relationship which is unlikely to be used by the young person to confide. (e-Delphi participant)

Protocols, Guidance and Assessment
A range of protocols, procedures and guidance were identified by respondents such as: The West of Scotland Child Protection Procedures\(^1\); Fraser Guidelines (guidelines about contraception for under 16s); and Glasgow City Council’s Vulnerable Young Person Procedures\(^2\). It was felt that careful consideration of the appropriateness of action in individual circumstances should always be given before following procedures outlined in guidelines. This seems reasonable given Happer and Scott’s (2005) finding that a large number of protocols regarding sexual exploitation contained inaccurate information:

Responses by professionals to actual incidents reported are clear in the national CP guidance for young people up to 16 and some others. Suspicion of sexual exploitation can sometimes get lost in public attitudes to troublesome young people and assumptions about children in care. For example, the Fostering Network protocol on responding to allegations about carers contains an approach that requests that the child’s background and assumed credibility be assessed before the usual joint police/social work enquiries takes place, thereby placing children in care in a ‘less eligibility’ status than a non-accommodated child who makes a similar disclosure. This is also still the case to some extent in residential care approaches to concerns expressed by a child. (e-Delphi participant)

Similarly another participant pointed out that procedures did not include a sufficient level of detail:

Not all Missing from Care procedures clarify that the child should always be interviewed by qualified professionals who are not linked to their current carers or care providers – we need to be careful that the source of their unhappiness is not in the care facility or foster home. (e-Delphi participant)

Participants made it clear that children and young people’s assessments can be used explicitly to raise issues about CSE with children and young people:

LAAC comprehensive health assessments are offered to all children in care and as well as assessing their health needs, we will ask them about do they feel safe in placement. A considerable area that is covered is sexual health and we will ask all young people - have they had sex? - if so who with (males/ females/ both)? - what is the age of the older partner - have you ever been paid for sex? - have you ever had sex that you did not consent to? this should be getting rolled out to LAC, in response to CEL 16. If any concerns about a

\(^1\) [www.online-procedures.co.uk/westofscotland/](http://www.online-procedures.co.uk/westofscotland/)

child's safety that would cause us to worry, we would need to discuss this with the young person and hopefully support them to inform the social worker. (e-Delphi participant)

Issues in relation to the prosecution and disruption of perpetrators were also raised. It was identified that there is a need to increase work to ‘identify potential groomers’.

**Summary**

This analysis has shown that although the national definitions of sexual exploitation, grooming and trafficking used in this research were acceptable they were not broad enough to allow understanding of all the key elements associated with each of the terms. A number of suggestions were made about widening these definitions to facilitate understanding of the range of processes, methods and individuals associated with any one term. The process of discussing these definitions has enabled us to outline a detailed and nuanced picture of CSE.

The prevalence of sexual exploitation was described as being ‘high’ or ‘extremely high’ in care settings, but it is not clear exactly what participants meant by this; there was little consistency when participants were asked to quantify this, and some felt it inappropriate to do so. However, estimates of around one third of all children looked after away from home seemed to accord with several participants’ judgements. The e-Delphi participants were less consistent still in their judgements about the prevalence of sexual exploitation for children looked after at home, with estimates that it was higher, lower or the same as levels for children in looked after away from home. The difficulty that participants had may be related in part to the frequently noted absence of reliable data and in part to the considerable diversity of experience for different groups of young people, as noted in the case audit strand of this study.

A wide range of risk factors for sexual exploitation were identified including mobility of children looked after away from home who frequently move placement. Networks become multiplied and magnified such that young people have connections to many individuals, some of whom may wish to exploit them. The role of technology in exploitation was also raised but at the same time mobile phones in particular were viewed as a potentially protective factor. Disability and cultural issues could increase risks of exploitation and reduce the likelihood that it would be identified.

Establishing the strength of the relationship between going missing and sexual exploitation was one of the aims of the research. While it was agreed that going missing or running away was an important factor, the context of running away was regarded as particularly important; for example, children could be running from or to exploitative situations.

A key risk factor identified was children’s emotional vulnerability, poor understanding of healthy relationships and their desire for love and affection. This made them an easy target for perpetrators who took advantage of this vulnerability.
Another aim of the research was to discover whether groomers were targeting children looked after away from home. Grooming was viewed as a wide ranging problem which occurs in many settings, particularly online and in any organisation where safety checks for children are not thorough. Grooming was thought to be a problem for those looked after away from home but participants felt that the definition given was a rather narrow view of grooming. Similarly grooming is just one aspect or dimension of CSE which may take other forms.

A number of risks were associated with staff attitudes and service provision. Staff sometimes viewing children as troublesome rather than troubled and this led to acceptance of behaviours which may have indicated concerns. Staff sometimes viewed children’s engagement in sexual activity as their choice and therefore no investigation or risk or action was taken. In addition, ineffective safeguarding such as a lack of supervision was considered to put children at increased risk of exploitation.

Respondents provided a range of examples that would improve practice in relation to CSE. These included harnessing and disseminating the knowledge of professionals in specialist services for CSE, increasing staff awareness of risks, routes and indicators of sexual exploitation, improving methods to engage children and allowing them to retain a level of control in their lives and increasing the use of available protocols and guidance.
The Case Audit: Progress and Findings

Progress to Date

We have contacted a small number of local authorities to discuss the possibility of involvement with the case audit strand of this study. We feel that participation provides advantages to authorities including: the opportunity to receive objective feedback on the known prevalence of sexual exploitation and various risk factors among their looked after children; the opportunity for their social workers to consider individual cases in the context of known risk factors; the potential to identify unmet need; and the opportunity to contribute to the development of nationally representative information against which to benchmark their local position.

Local authorities are currently facing a number of operational challenges including financial pressures, rapid policy and practice developments and, for some, a range of recruitment issues. As a result of the pressures, some local authorities have expressed concern about the potential time commitment required to conduct the audit. In some cases authorities have declined participation and the research team had to approach substitute authorities; in other cases authorities have offered to re-consider participation after they have addressed a particular operational issue.

Our experience so far suggests the audit is less onerous than some authorities have feared, each case taking around five to 10 minutes to review. In addition, early findings confirm that the audit is capable of producing very powerful and informative findings. Hence, assuming the research team is able to identify sufficient on-going resource for this study, it is our intention to continue this strand (and potentially to broaden it).

To date we have received data related to 75 looked after children, completed by a total of nine social workers from one local authority. The authority that has already taken part contains both urban and rural areas; however, it is not possible to say that it is representative of Scotland as a whole. To avoid on potential source of selection bias, social workers taking part reported data for all of the looked after children on their caseload.

Whilst this number is relatively small, it is sufficient to allow us to perform some preliminary analyses; these are reported below. Further audit returns will allow us to perform a wider range of statistical analyses and further subgroup analyses. Additional data will also allow us to confirm the extent to which these findings should be considered representative of the experiences of looked after children and young people across Scotland. Consequently we request that the following findings be treated as provisional and potentially biased.
About the Instrument
The data collection section of the audit form is shown in Appendix 2 (minus various preliminaries). This appendix provides information which may help the reader to understand the following analyses.

A number of the variables we asked about are potentially difficult for social workers to identify with certainty. For example, in the case of sexual exploitation it seems likely that in order for a social worker to state that a young person was ‘known or confirmed’ to have experienced sexual exploitation a very high threshold would have to have been met. For example, this might include confirmation through a clear disclosure or a Court or Hearing process.¹⁴

With this in mind, the audit form therefore gave social workers the opportunity to use their professional judgement to indicate various levels of suspicion of CSE (and other factors) in cases where they could not be certain that this had taken place. This effectively provides us with different levels of information for these variables, one which provides relative certainty and one which indicates levels of suspicion.

For most of the variables where we ask social workers to apply their judgement, we link this to the specific time period ‘during the last year’. This was a pragmatic balance between topicality and ensuring a large enough period of time to capture relevant information. Moreover, it was felt that this time period would enable social workers to respond with relative confidence, had we asked them to consider several years we feel that they would have found this much more difficult.

It might be argued that this data is inherently unreliable since it is based on the impression of the social worker. We accept that there will be a certain amount of fallibility in these accounts, but we feel that social workers are generally well equipped to make difficult assessments and are trained to base their judgements on a critical appraisal of evidence.

About the Analyses
Our analyses are presented in two groups, fulfilling two functions; ‘Descriptive Analyses’ help to characterise various features of this sample of young people and may help the reader to understand the ways in which this sample may or may not be representative; ‘Inferential Analyses’ assess associations between different factors and help to answer a number of research questions. The terms ‘children’ and ‘young people’ are used throughout the findings and should be read as representing all 75 cases unless stated otherwise.

¹⁴ We would like to investigate the issue of thresholds further, perhaps through qualitative follow ups with social workers who had completed the audit.
All ‘items’ on the audit form achieved a very high response rate; however, occasionally a form was received where data was missing for a small number of items. Most percentages are therefore based on the full 75 cases, with a small number being based on 74 or 73 cases. Absolute numbers (in narrative, or shown as ‘n’) are given to help clarify and contextualise this information.

**Descriptive Analyses**

**Sample Characteristics**

Of the 75 children and young people included so far, 52% (n=39) were female and 48% (n=36) were male. Only one of the 75 young people was identified as coming from a Black or mixed ethnic group and none was recorded as being identified as lesbian, gay, bisexual or transsexual (LGBT). None of these children or young people was identified as having a physical disability. Twelve young people (16.0%) were identified as having a learning disability, and 26 (34.7%) were identified as having additional needs in terms of social, emotional or behavioural difficulties (SEBD).

These young people were currently resident in a range of placement types, summarised in Table 1.

**Table 1. Current Placement Type**

<table>
<thead>
<tr>
<th>Placement Type</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small Residential Unit (0-5 residents)</td>
<td>1</td>
<td>1.3</td>
</tr>
<tr>
<td>Large Residential Unit (6+ residents)</td>
<td>10</td>
<td>13.3</td>
</tr>
<tr>
<td>Residential School</td>
<td>3</td>
<td>4.0</td>
</tr>
<tr>
<td>Foster Care (only looked after child)</td>
<td>3</td>
<td>4.0</td>
</tr>
<tr>
<td>Foster Care (with looked after siblings)</td>
<td>5</td>
<td>6.7</td>
</tr>
<tr>
<td>Foster Care (with other non-related looked after children)</td>
<td>7</td>
<td>9.3</td>
</tr>
<tr>
<td>Kinship Care (grandparent/step grandparent)</td>
<td>16</td>
<td>21.3</td>
</tr>
<tr>
<td>Looked after at home with birth family</td>
<td>30</td>
<td>40.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>75</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Of these young people, 27 (36.0%) had been looked after for more than three years and 14 (18.7%) had been accommodated for more than three years. Sixteen young people (21.3%) had experienced a placement move during the last year and three (4.0%) had experienced five or more placement moves during their life. During the last year, four young people (5.3%) had experienced an ‘out of authority’ placement and three (4.0%) had experienced homelessness.
Ages of these children and young people ranged from six months to 16 years. The mean age was 10.9 (σ 4.58), the median age was 12 and the modal age was 15. It may be inferred from these data that the variable ‘age’ is not normally distributed. The age structure is illustrated in Figures 1-3, showing the frequencies of various ages for the whole sample, for males and for females respectively. It will be seen that there is a greater proportion of young people aged 14, 15 and 16 than any other age. Whilst noting the scale differences in the ‘y’ axis for the three figures, it will also be seen that the overall age structure for males and females appears somewhat different. It must, however, be remembered that the numbers in each group are small and we again caution against generalising from this sample to other children and young people in Scotland.
Figure 1. Age distribution whole sample

Figure 2. Age distribution for males

Figure 3. Age distribution for females
Challenges and Experiences

Four young people (5.3%) had at some point been permanently excluded from a school and 14 young people (18.7%) had been temporarily excluded from a school.\(^{15}\) Twenty two (29.3%) were known to have truanted during the last year and this was suspected for three further young people. Twenty seven (36.0%) were known to have had a poor school attendance record (<70% attendance). Four (5.3%) of these 75 young people were reported to have been involved with the criminal justice system during the last year.

Eighteen (25.0%) children and young people were known or suspected as having been subjected to damaging levels of violence in the past year and 26 (35.6%) were known or suspected to have witnessed damaging levels of violence in the past year.

Eleven young people (14.7%) were known to have misused alcohol in the last year, with this being suspected for a further eight, taking the total to 19 (25.7%). Similarly 10 young people were known to have misused drugs in the last year, with a further five beings suspected of this, giving a total of 15 (20.3%).

Eleven young people (15.1%) were known or suspected to have been involved with gangs in the last year.

Sixteen young people (21.4%) were known or suspected to have experienced under age sex in the last year; all of these were aged 14 or older. This included four males (30.8% of males in this age range) and 12 females (63.2% of females in this age range).

Fifteen (20.3%) of these young people were known or suspected to have been sexually abused before becoming looked after; two were known or suspected to have been sexually abused whilst looked after away from home. In this audit, we did not seek to clarify what form this sexual abuse took.

Eight children or young people were reported to be known or suspected to have been exposed to grooming in the last year; of these, three were under the age of 13.

Reported Child Sexual Exploitation in the Last Year

Six children or young people (8%) were confirmed to have experienced child sexual exploitation during the last year (CSE). Four of these young people were looked after away from home (9% of ‘looked after away from home’) two were looked after at home (7% of ‘at home’). The difference between these two groups is not statistically significant in this sample.

\(^{15}\) Note that while some local authorities still apparently distinguish between temporary and permanent exclusions, this distinction does not feature in the legislation, as the Scottish Government’s guidance (2011) makes clear: www.scotland.gov.uk/Publications/2011/03/17095258/0
When cases of suspected CSE are added to known cases, the total number is 16, indicating a potential overall prevalence of 21.3%; this seems in broad agreement with several sources of literature and with some of the opinions expressed by experts in the e-Delphi. This figure includes 16.6% of children or young people looked after at home, and 24.4% of children and young people looked after away from home, however, this difference was not found to be statistically significant. All cases of CSE involved young people aged 14 or more.

The inferential analyses below suggest that the prevalence of CSE varies according to a number of factors; not all subgroups of young people have the same likelihood of experiencing CSE. To illustrate the extent of these differences, some estimates of prevalence for different subgroups are summarised in Table 2 below. This information should be considered indicative only, as it is currently based on a relatively small sample from one local authority. Nor is this designed to be an exhaustive list of factors, the table merely highlights the potential scale of differences between subgroups.
### Table 2. Some estimated subgroup prevalences of CSE in the last year

<table>
<thead>
<tr>
<th>Known or confirmed cases of CSE in the last year (based on limited data from a small sample)</th>
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<tbody>
<tr>
<td>Estimated prevalence of confirmed CSE for all looked after children</td>
</tr>
<tr>
<td>Estimated prevalence of confirmed CSE for male looked after children</td>
</tr>
<tr>
<td>Estimated prevalence of confirmed CSE for female looked after children</td>
</tr>
<tr>
<td>Estimated prevalence of confirmed CSE for looked after children in residential placements</td>
</tr>
<tr>
<td>Estimated prevalence of confirmed CSE for looked after young people aged 14 -16</td>
</tr>
<tr>
<td>Estimated prevalence of confirmed CSE for children looked after away from home, reported missing</td>
</tr>
<tr>
<td>Estimated prevalence of confirmed CSE for looked after children known to have misused alcohol</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Suspected or confirmed cases of CSE in the last year (based on limited data from a small sample)</th>
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<tr>
<td>Estimated prevalence of suspected or confirmed CSE for all looked after children</td>
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<tr>
<td>Estimated prevalence of suspected or confirmed CSE for children looked after away from home</td>
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<tr>
<td>Estimated prevalence of suspected or confirmed CSE for children looked after at home</td>
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<td>Estimated prevalence of suspected or confirmed CSE for looked after children in residential placements</td>
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<td>Estimated prevalence of suspected or confirmed CSE for looked after children known or suspected of misusing alcohol</td>
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<td>Estimated prevalence of suspected or confirmed CSE for looked after girls aged 14-16 in residential placements</td>
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<td>Estimated prevalence of suspected or confirmed CSE for female looked after children</td>
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<td>Estimated prevalence of suspected or confirmed CSE for male looked after children</td>
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<td>Estimated prevalence of suspected or confirmed CSE for children looked after away from home and who are reported missing</td>
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<th>Some comparators</th>
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<tr>
<td>Estimated prevalence for CSE in children looked after away from home in Scotland according to several e-Delphi participants.</td>
</tr>
<tr>
<td>Estimated prevalence of confirmed CSE for all children in care in England (based on combined sources of English Data)</td>
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<tr>
<td>Estimated prevalence of confirmed CSE for children in care in England who have been reported missing</td>
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<tr>
<td>Estimated prevalence of confirmed CSE for children in care in England who have been not reported missing</td>
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Inferential Analyses

Given the relatively small size of this group and the fact that most of the variables are ‘categorical’, it was decided that the most appropriate statistical approach was to create (as far as possible) a range of dichotomous variables which could be compared through contingency tables and appropriate statistical tests such as Chi-squared tests. Only associations found to be significant at the \( p=0.05 \) level or below are reported here. It is highly likely that further associations will be found to be significant when more data are available. Where any ‘expected’ cell values in contingency tables were fewer than five, the Chi-squared statistic is still reported and probabilities for Fisher’s Exact Test are also given; this is a widely used statistical practice in this situation.

The analyses reported below highlight associations only, and they cannot be taken to infer direction or causation. For example, being in a residential placement is associated more commonly with being reported to have had under age sex; this neither implies that under age sex leads to residential care nor that residential care leads to under age sex; it is likely that each variable is associated with one or more other variables that function together to produce this association. For a small number of fixed characteristics, notably age and gender, it may be possible to presume direction, but it is still not possible to infer causality.

In each of the sections below a short narrative is followed by bullet points giving the statistical information. We have reported association which have exceeded certain confidence levels typically used in social research, i.e. associations found to be significant at the \( p=0.05 \) level (one in 20 change of being due to chance alone). Where levels of certainty are greater such that associations are significant at the \( p=0.01 \) level (one in 100 chance of being due to chance alone) we have highlighted this in bold text.

Factors Associated with Confirmed Sexual Exploitation

Six children or young people (8%) were confirmed to have experienced child sexual exploitation (CSE) during the last year. Four of these young people were from the looked after away from home population (9% of ‘away from home’) two were looked after at home (7% of ‘at home’). The difference between these two groups is not statistically significant in this sample.

The numbers are relatively small in absolute terms due to the small sample. This provides little confidence in the extent to which this result should be generalised and makes it less likely that any trends will be identifiable. In addition, when compared to some estimates provided by e-Delphi participants the 8% rate may seem small, with this in mind, overleaf we additionally provide analyses of cases in the following section where CSE was confirmed or suspected.

Despite the relatively small numbers some associations were noted. It was found that known CSE was associated with misuse of alcohol during the last year, with being in the
older half of the sample (aged 13 and over) and with having experienced sexual abuse before becoming looked after.

There were also clear associations with being groomed (for sexual exploitation), with being abused whilst ‘in care’ or with having under age sex in the last year; however, it could be argued that each of these three factors are conceptually linked to CSE and therefore that these associations would be expected.

- If known or suspected to have misuse of alcohol, confirmed CSE is more common (Chi-squared 10.7, Fisher’s Exact Test \( p=0.004 \)).
- If in the older age group (13 and over), confirmed CSE is more common (Chi-squared 6.70, Fisher’s Exact Test \( p=0.012 \)).
- If known or suspected to have been sexually abused prior to being looked after, confirmed CSE is more common (Chi-squared 7.99, Fisher’s Exact Test \( p=0.017 \)).
- If known or suspected to have been exposed to grooming, confirmed CSE is more common (Chi-squared 10.6, Fisher’s Exact Test \( p=0.014 \) ** conceptually linked).
- If known or suspected to have been sexually abused in care, confirmed CSE is more common (Chi-squared 23.6, Fisher’s Exact Test \( p=0.005 \) ** conceptually linked).
- If known or suspected to have experienced under age sex, CSE is more common (Chi-squared 14.9, Fisher’s Exact Test \( p=0.001 \) ** conceptually linked).

Factors Associated with Confirmed or Suspected CSE

When cases of suspected CSE are added to known cases, the total number found was 16, indicating a potential overall prevalence of 21.3% during the last year. This figure seems in broad agreement with several sources of literature and with some of the opinions expressed by experts in the e-Delphi. This new variable (known or suspected CSE) also provided greater statistical power due to the larger base number; it is more likely to identify any trends in the data.

The known or suspected prevalence of CSE in this group (21.3%) includes 16.6% of children or young people looked after ‘at home’, and 24.4% of children and young people looked after ‘looked after away from home’, however, this difference was not found to be statistically significant. It should also be remembered when reading the analyses below, that all cases of CSE involved young people aged 14 or more. Future analyses will include subgroup analyses for the older age range; this may give a more nuanced picture.

As noted above, misuse of alcohol was significantly associated and in this case it was also found that misuse of drugs was statistically associated with CSE. Also, as above, it was found that having been sexually abused prior to becoming looked after was associated with later CSE.
However several further associations became evident by inclusion of suspected cases of CSE. It was found the frequency with which CSE was reported was significantly higher for girls than for boys. In addition, this was the case independently for CSE via technology when separated from other types of CSE.

Young people who had been subject to, or who had witnessed damaging levels of violence were more frequently reported as having been exploited.

Of particular interest, is the observation that young people who were placed within a residential care setting were also significantly more often reported to have been subjected to CSE.

Consistent with of the available literature, it was also found that having been reported as missing on one or more occasions was also associated with CSE. It should however be noted that thresholds for being reported missing may vary for different placement types.

If children in residential care are more likely to be reported missing overnight than children from other placement types (including kinship and at home), it could be that any associations found are as much an indicator that these young people are in residential care.

Finally, and as above, the three conceptually linked factors - experiencing grooming for sexual exploitation, underage sex, and being sexually abused whilst being looked after - were also found to be associated with CSE.

- For females, known or suspected CSE is more common (Chi-squared 10.3 $p=0.001$).
- For females, known or suspected CSE via technology is more common (Chi-squared 5.62 $p=0.018$).
- If known or suspected to have been subject to violence, known or suspected CSE is more common (Chi-squared 12.0, Fisher’s Exact Test $p=0.001$).
- If known or suspected to have been a witness to violence, known or suspected CSE is more common (Chi-squared 8.58 $p=0.003$).
- If known or suspected to have misused alcohol, known or suspected CSE is more common (Chi-squared 13.4, Fisher’s Exact Test $p=0.001$).
- If known or suspected to have misused drugs, known or suspected CSE is more common (Chi-squared 9.99, Fisher’s Exact Test $p=0.004$).
- If known or suspected to have been sexually abused prior to being looked after, known or suspected CSE is more common (Chi-squared 14.78, Fisher’s Exact Test $p=0.001$).
- If in a residential placement, known or suspected CSE is more common (Chi-squared 8.43, Fisher’s Exact Test $p=0.008$).
- If reported missing one night or more, known or suspected CSE is more common (Chi-squared 5.77, Fisher’s Exact Test $p=0.026$).
• If reported missing 10 nights or more, known or suspected CSE is more common (Chi-squared 7.58, Fisher’s Exact Test \( p=0.043 \)).

• If reported to have experienced under age sex, known or suspected CSE more common (Chi-squared 14.8, Fisher’s Exact Test \( p=0.001 \) ** conceptually linked).

• If known or suspected to have been exposed to grooming, known or suspected CSE is more common (Chi-squared 23.4, Fisher’s Exact Test \( p=<0.001 \) ** conceptually linked).

• If known or suspected to have been sexually abused in care, known or suspected CSE is more common (Chi-squared 7.58, Fisher’s Exact Test \( p=0.043 \) ** conceptually linked).

Other Patterns in the Data
The findings above show potentially strong association between CSE and a range of factors. With this in mind, it is important to explore the associations between various factors, as an understanding of these relationships may suggest more complex interaction effects which may increase or mask other associations.

Below we consider four important dimensions which have particular relevance to this study: male /female; care / non-care population; residential / non-residential placement; and missing / non-missing. Further subgroup analyses may be conducted when additional data are available.

Gender Male / Female
As mentioned above, an increased prevalence of CSE and of CSE via technology were associated with being female. Being female was also significantly associated with being reported as having experienced underage sex, with exposure to grooming and with having experienced sexual abuse prior to becoming looked after; all of these factors are in turn associated with CSE.

It was also found that females were more likely to have experienced one or more placement moves within the last year, but it was not found that females in this sample had experienced more moves over their lifetime. This was an unexpected finding, and we would like to consider potential explanations for this, if this effect is confirmed in further data.

Having additional needs attributed to SEBD was found to be more frequent among males. This is relevant to the extent that it may mask any potential tendency for SEBD to be associated with CSE; further data are needed to confirm or refute this.

• If known or suspected to have experienced underage sex, being female is more common (Chi-squared 4.31 \( p=0.038 \)).

• If known or suspected to have had exposure to grooming, being female is more common (Chi-squared 4.52, Fisher’s exact \( p=0.036 \)).
• If known or suspected to have experienced sexual abuse prior to being looked after, being female is more common (Chi-squared 6.97 \( p=0.008 \)).
• If the young person had experienced one or more placement moves during past year, being female is more common (Chi-squared 6.97 \( p=0.008 \)).
• If young person has additional needs for SEBD, being male is more common (Chi-squared 4.82 \( p=0.028 \)).

Away from Home / At Home Populations
The experience of children in various care placements is likely to differ from those looked after at home in a number of important ways. The funders of this research have a particular interest in understanding any differences between the ‘looked after away from home’ and ‘looked after at home’ populations as they have responsibilities towards each of these groups.

A small number of significant results were found, including the fact that the ‘looked after away from home’ population were more likely to have experienced a placement move during the last year; it could be argued, however, that these two factors are conceptually linked.

Two further significant results were noted: the ‘at home’ population were more likely to have poor school attendance and to have misused drugs. The latter factor has been shown above to be associated with CSE.

• If one or more placement moves occurred during last year, looked after away from home population is more common (Chi-squared 6.41 \( p<=0.011 \) ** conceptually linked).
• If known or suspected to have poor school attendance (<70%), at home population is more common (Chi-squared 8.33, \( p<=0.004 \)).
• If known or suspected to have misused drugs, at home population is more common (Chi-squared 8.33, \( p<=0.004 \)).

Residential / Non-residential Placements
As reported above, 14 children and young people (18.7%) were reported to be currently in some form of residential placement; most of these (n=10) were in a residential unit with six or more residents. Being in residential care was found to be significantly related to a number of different factors.

Children known or suspected to have been sexually exploited via technology were more often in residential care than other placements; it is possible that with further data this relationship will be seen for all forms of CSE.

Young people in older age groups were more likely than others to be in residential care as were those who had experienced sexual abuse prior to being looked after.
Children and young people with additional needs due to SEBD were more likely than other children to be in residential placements, as were those who had been subject to violence or who were involved with gangs.

Young people known or suspected to have misused alcohol and drugs were both more highly represented in residential care than other placement types.

Children in residential care were also more likely to have been reported missing for one night or more or to have been known or suspected to have experienced underage sex.

- If known or suspected to have been sexually exploited via technology, residential is more common (Chi-squared 14.8, Fisher’s Exact Test \( p=0.001 \)).
- If older age group (13+), residential is more common (Chi-squared 13.0, \( p<0.001 \)).
- If known or suspected sexual abuse prior to being looked after, residential is more common (Chi-squared 4.75, Fisher’s Exact Test \( p=0.040 \)).
- If the young person has additional needs for SEBD, residential is more common (Chi-squared 6.67, Fisher’s Exact Test \( p=0.013 \)).
- If known or suspected to have been subject to violence, residential is more common (Chi-squared 4.13, Fisher’s Exact Test \( p=0.048 \)).
- If known or suspected to have been involved with gangs, residential is more common (Chi-squared 7.83, Fisher’s Exact Test \( p=0.012 \)).
- If known or suspected to have misused alcohol, residential is more common (Chi-squared 12.5, Fisher’s Exact Test \( p=0.001 \)).
- If known or suspected to have misused drugs, residential is more common (Chi-squared 25.7, Fisher’s Exact Test \( p<0.001 \)).
- If known or suspected to have had under aged sex, residential is more common (Chi-squared 13.2, Fisher’s Exact Test \( p=0.001 \)).
- If reported missing one night or more in last year, residential is more common (Chi-squared 12.82, Fisher’s Exact Test \( p=0.002 \)).

Reported Missing for One Night or More / Not Reported Missing

Much attention has been paid in recent literature to an association between being reported missing (or running away) and being sexually exploited; a similar association has also been noted above.

Other factors are also associated with being missing, and these factors may in turn interact with the association with CSE. For example, being reported missing is more common among older young people and with young people in residential placements both of which are also associated with CSE.

These findings suggest also that being reported missing is associated with an increased frequency of being known to truant or suspected of truancy and having a poor school attendance.
Similarly being reported as having experienced under age sex or being involved with gangs is more common for young people who were reported as having been missing for one or more nights.

Being reported as missing was also more common among young people who were known or suspected to misuse alcohol and drugs.

Finally being known or suspected to have been exposed to grooming was more common for this group.

- If older age group (13+), missing is more common (Chi-squared 16.2, \( p < 0.001 \).
- If within a residential placement, missing is more common, Chi-squared 12.8, Fisher’s Exact Test \( p = 0.002 \).
- If known or suspicion of truancy, missing is more common (Chi-squared 11.4, Fisher’s Exact Test \( p = 0.001 \)).
- If known or suspicion of poor school attendance (<70%), missing is more common (Chi-squared 5.60, \( p = 0.018 \)).
- If known or suspicion of having under age sex, missing is more common (Chi-squared 15.15, Fisher’s Exact Test \( p = 0.001 \)).
- If known or suspicion of involvement with gangs, missing is more common (Chi-squared 9.11, Fisher’s Exact Test \( p = 0.008 \)).
- If known or suspicion of misusing alcohol, missing is more common (Chi-squared 20.31, Fisher’s Exact Test \( p < 0.001 \)).
- If known or suspicion of misusing drugs, missing is more common (Chi-squared 9.91, Fisher’s Exact Test \( p = 0.005 \)).
- If known or suspicion of exposure to grooming, missing is more common (Chi-squared 6.67, Fisher’s Exact Test \( p = 0.027 \)).

**Summary**

Thus far the case audit has shown that the method has the potential to produce valuable findings. It is hoped that it will be possible to continue this strand of the study to gather sufficient data to ensure a nationally representative sample and to undertake more detailed subgroup analyses and further statistical modelling.

Despite this a number of associations have been found which are statistically significant within this group. In particular they enable us to answer, with some degree of certainty, three of the research questions.

1. **What is the prevalence of child sexual exploitation in the in-care population and the looked after at-home population?**

For this group of children and young people the prevalence of known or suspected CSE during the last year is 21.3%. For those children or young people looked after ‘at home’
the rate is 16.6%, and those children and young people looked after away from home it was found to be 24.4%. More data are needed to establish whether these figures are representative at a national level, and how suspicion of CSE relates to confirmation of CSE. It is our contention that these social workers may have been cautious and conservative in their suspicion and that other cases may well be completely undetected.

Provisionally, based on these results, the assumptions above and findings from other strands, a prevalence of CSE of at least approaching 25% (one in four) would seem likely for children in the care population. Furthermore we expect this to be considerably higher for older age groups, for girls and for children placed in residential care.

Within this small sample, 11 girls aged 14-16 were currently placed in residential care. Of these, seven (63.6%) were either known or suspected to have been sexually exploited during the last year. This may or may not be unusually high, and we do not know whether or not this finding will be replicated when more data are available.

2. Are children and young people in Scottish care services being targeted by groomers?

Yes. We have found clear evidence from this and other strands that children in the Scottish care system have been targeted by groomers during the last year. We are not yet able to say with any certainty whether or not children in the care system are proportionately more likely to be targeted than other looked after children. Further data will allow us to explore this question in more detail.

We are also not able to say whether Scottish care services are disproportionately targeted by groomers, over and above other services that children may use such as schools, youth centres and leisure services.

3. What is the strength of the relationship between the number of children going missing from care in Scotland and the prevalence of child sexual exploitation?

Within these data there is a significant relationship between the numbers of looked after children going missing and the prevalence of CSE. The majority of young people going missing in this sample (11 out of 13) went missing for between one and ten nights over the last year. Of the 13 who were reported to have gone missing for one or more nights over the last year, six (46.2%) were either known or suspected to have been sexually exploited. More data may confirm whether or not this strength of relationship is more widely representative.

It should however be noted that thresholds for being reported missing may vary for different placement types. If children in residential care are more likely to be reported missing overnight than children from other placement types (including kinship and at home), it could be that this result is as much an indicator than these children are in residential care as that they are sexually exploited; more data are needed to tease out this potential interaction effect and to confirm the strength of the relationship.
However, being reported missing, even for one night, should be considered an indicator that a child or young person is potentially being sexually exploited.

The limited amount of subgroup analyses conducted thus far highlights the fact that in respect of CSE, children and young people do not all have the same ‘risk’ of being involved. Every child is an individual who lives within a unique environment and context; it is not advisable to forecast risk in a formulaic way, for example, by use of tick-lists. However, based on these results particular consideration should be given to young people in the following groups:

- Female children and young people;
- Those who are in residential care placements;
- Those who are aged 14 and over;
- Those who have been sexually abused prior to being looked after;
- Those who misuse alcohol or drugs;
- Those who have been subjected to or witnessed violence;
- Those who are reported missing for one night or more.
The Rapid Response Survey: Progress and Findings

About the Instrument
Appendix 3 provides a copy of the survey instrument, minus various preliminaries. This form was designed to be completed quickly. It allows local authorities to provide data or to indicate when data is not available or when it is available but they are reluctant to share this with the researchers.

In addition the forms asks for open responses to three questions which focus on how the authority gathers and uses data related to sexual exploitation and whether they anticipate changing these arrangements in the future.

Progress to Date
We have contacted all 32 local authorities on a number of occasions, by telephone and by email, to invite them to take part in the survey strand of this study. As with the audit, we have been able to outline the advantages of participation. These primarily focus on the opportunity for the authority to reflect on how they collect, collate and utilise information about sexual exploitation of looked after children and risk factors associated with this. In addition, if sufficient authorities take part in this strand in future, we will be able to provide them with valuable national level information against which to benchmark their local position.

Despite the relatively small amount of time that completing the survey would take, local authorities voiced concerns about the pressures they currently face. We have offered support and flexibility around return dates and to date we have received responses from six local authorities. Whilst we are disappointed by the low level of response so far, we are hopeful that this will increase. It appears that most authorities who have now taken part did not find this to be time consuming, due in large part to the fact that very little data are collected and therefore for many items nil responses are given. It may be that later returns will be qualitatively different, in that they may be received from local authorities who have more information and thus require more time to process it.

As with the audit, we will continue to collect information returned by local authorities and will analyse and report this more fully in the ‘Update Report’.

Findings
The survey instrument collected two types of data: open narrative responses related to have the authority collected and used information; and numerical information about numbers of children known, or suspected to have been exposed to CSE from various different subgroups.
From the five authorities who have responded thus far, it appears that collection of these data in any systematic way is rare; this observation accords with previous research and with our expectation. Where data are available, numbers reported thus far are very low (less than five), and we are not able to draw any reliable conclusions from a numerical analysis. However, the written responses give useful insights into the current situation with regard to collection of this information in local authorities.

It is apparent that authorities do see the monitoring of CSE as an issue; for example, one local authority reported:

“We are currently concerned regarding the issue of sexual exploitation of young people in our area as a result of recent media coverage and a number of cases within our local authority where sexual exploitation has been suspected. We also have concerns relating to the use of social media and its potential to place children in care at risk of sexual exploitation. [Local Authority]

When asked: ‘Does your organisation record information about sexual exploitation of looked after children? [For example, known or suspected cases of sexual exploitation, grooming, trafficking, children and young people reported missing]’, authorities generally explained that whilst this information would be gathered at the individual level, it was not collected or reviewed centrally.

Not specifically – One of the concerns which would be recorded at a Child Protection Case Conference is with regard to exploitation but we would not distinguish the nature of the exploitation or whether the child was Looked After. [Local Authority]

As part of our child protection procedures we record "sexual abuse" and "child exploitation" as two distinct categories. These are recorded once at investigation and again at initial case conference as reason for registration. We would not make a distinct between suspected and known cases. There is no retrievable data system for children and young people outside the child protection process, although information will exist in systems that are not searchable. [Local Authority]

....at present we do not routinely collect and record this information. We are however now linked in with [removed identifier] and in the process of developing both guidance and recording procedures in respect of this area of work. [Local Authority]

Our local authority does not routinely collect data in a form which can be aggregated relating to the areas covered in question 4. Our local authority does record information relating to concerns for a child’s welfare within the child’s individual file, electronic records and Integrated Assessment Framework. This would include issues relating to sexual exploitation, and absenteeism. [Removed identifier] Social Work Service have a protocol
with [Removed identifier] Police relating to children who go missing from care. [Local Authority]

When asked: ‘How does your organisation currently use the data you collect?’, participants provided a range of responses, suggesting that this information is used internally at the individual level, but also that it is in some cases reported to other organisations:

The information is reported to Scottish Government. It is not currently reported in our own Performance Management System. [Local Authority]

Quarterly reporting to the child protection committee. [Local Authority]

...information about sexual exploitation is recorded in individual case records and is used to inform risk assessments, reports and individual case planning etc. to ensure that appropriate action is taken to safeguard the child/young person and meet their needs. [Local Authority]

When asked: ‘Does your organisation have any plans to change your data collection procedures in relation to these areas? If so, what changes will you make?’ the responses varied from those who anticipated no change, to those who had quite advanced plans for change.

We have no specific plans at this time to change our data collection procedures in relation to these areas. [Local Authority]

Yes, although not sure of exact changes to be made. We recognise data collection, reporting and analysis in this area is a gap in local systems and practice. We are about to embark on a self assessment process of our response to sexual exploitation which will inform changes to systems. We would hope in the future to make better use of data in informing policy, practice, allocation of resources etc. [Local Authority]

There are no current plans to change the data collection procedures but the study has prompted us to consider changes. We would welcome examples from other local authorities who have more comprehensive data sets. [Local Authority]

Development of a system to collect and analyse this information would be part of the above process. We currently use a traffic light system with the police for young people missing from care which does allow us to identify any particular pattern of behaviour or circumstances giving cause for concern, and have a staged process with the police for public alerts where young people are missing for long periods or disappear. Gathering of this information includes details such as drug / alcohol use, and associations with others. This system could therefore be further refined to include better identification of behaviours / circumstances which may relate to exploitation. [Local Authority]
Social Work Service have an in house information system which is continually subject to development. Development of this service is informed by a practitioners’ and operational managers’ users group and a development board. This allows for a degree of flexibility and responsivity in relation to the development of our in house information system... Our [removed identifier] is leading a multi-agency working group to develop our local authority’s thinking in relation to these issues and develop recommendations and procedures. It is likely that this will result in some in house research and potentially recommendations relating to system development to ensure that we are able to identify children who are at risk of or subject to sexual exploitation. [Local Authority]

Summary
Whist information about the exploitation of individual looked after children might be recorded and used effectively; it is not currently possible to use routinely collected information to build a reliable picture of this issue across Scotland. Other strands of this research have shown that at the individual level, there may sometimes be a reluctance to make a clear assessment of sexual exploitation; when this effect is aggregated to a group level it may lead to a serious risk of under-estimating prevalence. These insights are important; they seem to confirm that despite the wide reporting of previous research which found that data collection and use was poor, little progress has been made.

The sexual exploitation of children is a complex and emotive issue; we need a better understanding of the nature and scale of the problem so that appropriate resources can be given to addressing this issue. Our understanding of this issue also needs to be nuanced enough to take account of the difficulties that social workers and other professionals have in identifying CSE with certainty. More sensitive systems would involve monitoring not only of known cases, but of levels of concern and of various factors associated with CSE.

Our results so far suggest that local authorities recognise that data collection is problematic, and that some are taking measures to improve the situation. It also seems that participants in this strand of the study would welcome guidance and support; indeed, some are looking for examples of good practice. Whilst local arrangements might improve over time, progress so far has been slow, despite the acknowledged urgency of the situation. We feel that if a more sensitive and effective data system is to emerge a range of partners, including police, child protection committees, local authorities, Scottish Government and others need to develop this together. We also feel that the involvement of young people, in particular young women with experience of residential care, would be particularly valuable in designing effective systems to monitor prevalence and risk.

Participants in other strands of this research have called for a national initiative to routinely collect relevant data in a systematic fashion. We consider there is considerable
merit in this suggestion; however, this is not a quick or easy task. Careful thought needs to be given to both the precise nature of data to be collected and the systems required to collect this information. To be fit for purpose data must be: coherent, comparable, accurate, relevant and timely, in that it:

- brings together information in a systematic way;
- provides a true measure of what it is supposed to represent;
- and provides information when needed to inform decisions and actions.

In practice a process of careful negotiation with stakeholders would be required to ensure that any systems developed were efficient and effective. Data items would need to be agreed and clearly defined; this may for example include some harmonisation with existing data systems and items. This shared understanding needs to permeate throughout organisations, so that all stages in the data collection process are robust. The UK Statistics Authority summarises some important issues in relation to data quality:

There is no universal definition of quality; it is multifaceted and can therefore mean different things to different people, and vary in concept in relation to different procedures and products. Yet, to maintain trust in official statistics and to provide products that are fit for purpose, quality should be at the centre of our procedures and methods.

Statistical quality is embedded both in the statistical products themselves and in the processes used to produce them. These two aspects of statistical quality are often referred to as (a) output quality, and (b) process quality.

In relation to output quality, the European Statistical System’s (ESS’s) six dimensions of quality are generally used: relevance, accuracy, timeliness, accessibility and clarity, comparability and coherence. There are other dimensions relating to process quality: effectiveness, efficiency, robustness, flexibility, transparency and integration. (UK Statistics Authority, 2009, p. 6)

We will continue to gather and analyse responses to the rapid response survey and will include further information in the Update Report. This will especially valuable if we are able to identify examples of good practice or if we are able to use this information to promote partnership working to tackle this issue.
Secondary Data: What Data are Available Elsewhere?

Overview
Child sexual exploitation is not an easy issue, at any level. It is socially and politically sensitive; and this in itself is in part what leads to: a) the difficulties in collecting reliable and valid data; b) the problems in analysing and interpreting these data; and c) the complex judgments involved in making appropriate policy recommendations.

In this piece we attempt to map out some of these factors. Brodie & Pearce (2012), writing about this in a Scottish context, lay out the problems in summary form:

*Establishing the prevalence of sexual exploitation is very difficult. The problem is not visible, and its existence is difficult to uncover. Specific problems include: growing but still limited awareness of the issue; differences in the ways in which the issue is defined by young people, parents and carers and professionals; and differences in the way in which policy and practice is developed at local level.* (Brodie & Pearce, 2012, p. 3)

And the same authors point out:

*There is currently no estimate of the prevalence of child sexual exploitation in Scotland. Throughout the UK, there is no single indicator that can be used to gather data on child sexual exploitation; information must be extracted from a variety of sources in order to make realistic estimates of scale.* (p. 24)

In studies that have quantitative dimensions, interest unsurprisingly tends to focus on:

1. The number of young people who are currently, or have been, sexually exploited;
2. The number of young people who are at risk of being sexually exploited.

Both these dimensions are problematic, notably the second one. However, there are some data available in England.

Findings

Reported Data on Incidence of Sexual Exploitation
One of the more authoritative and much-quoted studies calculated that there were, in England, 5,411 reported cases in 2008/9 and 6,291 in 2009/10 (Centre for Exploitation and Online Protection (CEOP, 2011)). [Later in this analysis, for simplicity’s sake and for purely illustrative purposes, we use the figure of 6000].
Another and also well-quoted study, albeit working in a more limited context (that of gang membership in England), reported as follows:

*Based on evidence submitted to the CSEGG Inquiry, at least 16,500 children were identified as being at risk of child sexual exploitation during one year and 2,409 children were confirmed as victims of sexual exploitation in gangs and groups during the 14-month period from August 2010 to October 2011. Evidence to the Inquiry indicates that in any given year the actual number of children being abused is far greater than the 2,409 that have been confirmed. Interviews with children and young people, evidence collected during site visits and gathered at hearing sessions all indicated that many children who were sexually exploited either remained unseen by professionals or, even when known, were not recorded in the call for evidence submissions received by the OCC. 16,500 children from across England were identified as being at high risk of child sexual exploitation during the period April 2010-March 2011. This figure is based on children who displayed three or more signs of behaviour indicating they were at risk of child sexual exploitation (Berelowitz, et al., 2012, p. 9).*

Barnardo’s’ reporting unfortunately confounds actual sexual exploitation with ‘at risk’ children:

*Barnardo’s has been tackling sexual exploitation since 1994 when we opened our first service. Our direct support of victims now extends through 21 services across the UK. Each year we work with over 1,000 children and young people who have been sexually exploited or are at serious risk of exploitation, and the numbers keep rising. In 2010-11 we worked with 1,190 young people affected by sexual exploitation – an eight per cent rise on the previous year (Barnardo’s, 2012, p. 3).*

**Validity and Reliability of Reported Data**
The CEOP study itself indicates the difficulty in making population estimates of sexual exploitation:

*This important attempt to assess the extent of CSE had limited results as the terms of reference were restricted by: excluding specific forms of abuse such as gang-associated or peer-on-peer abuse; the limited statutory powers held by CEOP to request information; the methodology; the period over which the research took place (CEOP, 2011, p. 23).*

The CSEGG Inquiry is even more explicit about why its data have to be treated with care:

*While perpetrators have been convicted for their involvement in the sexual exploitation of children, using offences such as ‘grooming’ or ‘sexual activity with a child’ (the same as those used for other sexual offences), there is no specific crime of child sexual exploitation. Therefore, it is not possible to obtain figures through a trawl of police crime data on sexual offences. Furthermore, given that the majority of offences do not result in*
a conviction, reliance on crime statistics alone will not provide a full picture of this form of abuse.

Having studied the data from areas that did respond to the call for evidence, the Inquiry has no reason to believe that these areas are significantly different from those that did supply evidence. The only clear difference between the areas that did identify victims and those that did not is that the former contained agencies that were determinedly looking for victims. Of those agencies that did submit cases to the call for evidence, 41 agencies within four police force areas identified over half of the 2,409 recorded victims, with one area identifying 582 and another identifying 575 (Berelowitz, et al., 2012, pp. 54-55).

Where data are available, they are held across multiple agencies that share limited amounts of information and have different record-keeping and computer systems, thereby making it very difficult to identify and protect victims (Berelowitz, et al., 2012, p. 82).

A particular difficulty lies with agencies reporting low figures or in some cases not reporting at all:

Jago et al (2011) conducted a national survey of policy and practice in LSCBs in England and Wales. This took place as part of a trial to develop a data collection system for the UK. Twenty-five LSCBs (out of 100 approached) agreed to participate...... [They] reported that there were a number of difficulties associated with collecting this data: there was a very limited response to the invitation to participate and a high level of missing data (Brodie & Pearce, 2012, p. 25).

The 25% response rate is low. That may or may not be a problem. The unknowable is whether the 25% are representative of the other 75%. There may be good reasons why they are not: but, on balance, that seems unlikely. Incidence of sexual exploitation is almost certainly underestimated because of such difficulties. Beyond doubt, the difficulties, albeit with some differences, are relevant to Scottish research.

And CEOP (2011) suggest a further reason for under-reporting:

In many cases, agencies do not have any data on child sexual exploitation. Indications from service providers suggest that, because victims frequently do not recognise that they are being exploited and do not disclose abuse, there is significant unidentified and unmet need (p8).

At Risk Factors
There is a large literature addressing ‘at risk’ factors, much of it identified with attempts at producing checklists to identify such children, i.e. children who may be at risk of sexual exploitation or children who already are being exploited but who are not known as such to the authorities. One prominent factor from this data is being in care.
There are just over 65,000 children in care in England. Most of these children live in foster care but around 7% of children in care live in one of England’s 1,810 children’s homes.

Many have had difficult starts to their lives and have experienced abuse or neglect. As a consequence, these children are often extremely vulnerable and easy prey for predatory adults exploiting the gaps in the systems put in place to keep them safe.

10,000 children are estimated to go missing from care in a year. When these children run away they are in great danger of being physically or sexually abused or exploited. As children in care – foster care or residential care – are three times more likely to run away than other children, agencies’ understanding of, and response, to this issue are critical (HM Government, 2012a, p. 7).

These observations can be explored further.

i. The relevant total population of young people is about 6.5 million in England.

ii. One percent are in care at any one time, i.e. about 65,000. (Seven percent of these are in residential care, i.e. about 4550)

iii. For most cases in the dataset information about whether the victim had gone missing was not known, but out of the 1,014 cases where information on this was recorded, 842 children were known to have been reported missing on at least one occasion. Unfortunately, the data does not show whether these missing incidents fell before, during, or after the period of exploitation. Of the 896 children in the dataset whose living situation was known, 311 were already in care at the time of the exploitation and a further 43 children were moved into care following intervention”(CEOP, 2011, p. 9).

iv. A tentative and experimental analysis can be conducted with the English data by combining various sources of information. Whilst this is unlikely to produce a reliable result, it is potentially possible to produce some rough estimates of scale. If we take these (albeit incomplete and uncertain) statistics at face value, almost 40% of children known to be sexually exploited are in care when the exploitation begins. That is alarming and deplorable. But it can be exaggerated if it leads to an over-emphasis on being in care as a predictor of sexual exploitation. This suggests that 40% of the 6000 known to be exploited sexually are in care, i.e. perhaps 2400 or so. So 60% of the 6000 sexually exploited are not in care i.e. 3600). But that leaves approximately 62,500 out of 65,000 children in care who are not known to be sexually exploited. As a proportion of the relevant population, 2400 out of 65,000 in care (1 in 27) is of course considerably higher than 3600 out of the 6.4m total child population (1 in 1800 or so). But it does lead to some danger of intuitively confusing the 1 in 27 fraction with the 40% (1 in 2.5) fraction.

Whilst this cautionary analysis is not consistent with some sources (for example Gibbs & Sinclair, 2000); it seems to be reinforced if one gives credence to Beckett’s statistics.
Beckett (2011) examined the time-frame of the onset of concerns about child sexual exploitation with young people’s entry to care. In almost exactly half of the cases where this could be determined, concerns about child sexual exploitation were reported to exist prior to entry to care; in over half of these cases, the concerns continued during the care placement. For the other half, concerns emerged after entry to care (p32, Brodie & Pearce, 2012).

For some children sexual exploitation occurred before being in care; for others sexually exploitation occurred while in care.

The next most commonly cited ‘risk factor’ is running away or going missing, something which approximately 10,000 children in care in England do annually, as noted above in the Parliamentary Report. The proportion of children in care who become ‘runaways’, again as noted in the Parliamentary Report, is estimated to be three times as high as the proportion among non-care children (HM Government, 2012a, p. 7).

Surveys have found that, while less than 1% of children are looked after, around 30% of runaways reported to the police are missing from substitute care (Biehal & Wade, 2002, p. 13).16

Evidence submitted to the Inquiry indicates that between April 2010 and March 2011, over 47,000 children aged between 10 and 17 were reported to police forces across England as missing, of whom at least 5,400 were reported missing three or more times in 90 days (Berelowitz, et al., 2012, p. 69).

These two latter pieces of evidence do not match the Parliamentary Committee figure in that 10,000 children in care go missing (out of some 65000), and some 37,000 of children not in care going missing (out of some 6m plus) is a ratio of the former proportion to the latter proportion that approximates to almost 30: 1, not 3:1. This shows some of the fragility of at least some English data:

Warning signs linked to CSE, such as a child going missing, are not recorded consistently. Local authorities do not have a common definition to determine what data to record on children missing from care, with some local authorities logging details only of children missing for a period of 24 hours or longer. Police forces have different ways of recording instances where children repeatedly go missing (Berelowitz, et al., 2012, p. 10).

And the same authors point out:

There is no standardised process for recording sexual offences by multiple (more than one) perpetrators. Each police force has its own way of coding sexual offences against

16 NB The thresholds for reporting looked after children as missing are likely to be somewhat different than those of other children.
children, many of which cannot distinguish where groups of individuals are reported to have carried out the offence or directly set it up. At local level this means that both data-sharing and the flagging-up of possible CSE cases are disjointed. At a national level this inconsistency forestalls the collation of accurate numbers of reported cases, the number of children affected, and their profile. This lack of and inconsistencies in data-recording locally mean the number of children identified in this report as being at risk of child sexual exploitation will be lower than the actual number (Berelowitz, et al., 2012, p. 10).¹⁷

To date we have not traced much data which estimate the additional independent effect that ‘running away’ has on the chances of a child in care (or indeed of a child not in care) being sexually exploited, with one exception:-

_A study by the University of Bedfordshire into child sexual exploitation showed that over half of all young people using child sexual exploitation services on one day in 2011 were known to have gone missing (a quarter over 10 times), and 22% were in care._(HM Government, 2012a, p. 12).¹⁸

Indeed much of the evidence possibly comes largely from the testimony of ‘expert witnesses’ (as generally with the UK Parliamentary inquiry) rather than from hard data. But it seems likely that running may sometimes indicate either present or past sexual exploitation or the likelihood of its occurrence in the future; and the Bedfordshire data suggest an effect often additional to and independent of the care factor, i.e. of those 47,000 who run away a proportion very much higher than in the population of ‘non-runaways’ is sexually exploited: the ‘in care’ factor and the ‘running away’ factor certainly have an overlap, but the second one has an effect that is independent of (and additive to) the first, i.e. children identified as having run away, even those not in care, have a ‘risk’ factor that should not be confused with the fact that ‘children in care’ disproportionately run away, particularly those in residential care (Biehal & Wade, 2002). On the other hand, most of the 47,000 are not, to the best of our current knowledge, sexually exploited.

**Predictive Checklists.**

There has clearly been a considerable rise in the development of checklists of factors which are designed to screen for children who may currently be being sexually exploited or who are at risk of such exploitation. The Office of the Children’s Commissioner (OCC) in England reports:

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¹⁷ As this report was being written, ACPOS published interim guidance on the management, recording and investigation of missing persons: [www.acpo.police.uk/documents/crime/2013/201303-cba-int-guid-missing-persons.pdf](http://www.acpo.police.uk/documents/crime/2013/201303-cba-int-guid-missing-persons.pdf)

¹⁸ NB The direction and nature of this association is not implied; sexually exploited children having gone missing does not mean that children going missing are sexually exploited.
16,500 children from across England were identified as being at high risk of child sexual exploitation during the period April 2010-March 2011. This figure is based on children who displayed three or more signs of behaviour indicating they were at risk of child sexual exploitation. (Berelowitz, et al., 2012, p. 9).

This sounds impressive. Intuitively three ticks sound more secure than two ticks; and two ticks than one.

The OCC has published its lists:

- Those children living in households described by professionals as ‘chaotic’ or ‘dysfunctional’ were considered vulnerable for several reasons, including a need for love and security, and a lack of parental supervision or monitoring to enable early recognition of or active protection from abuse.
- Children with a history of abuse – including familial child sexual abuse, and children at risk of forced marriage and ‘honour’-based violence.
- Loss through bereavement or family breakdown, including being taken into care.
- Children living in gang-affected neighbourhoods.
- Children witnessing domestic violence.
- Children with low self-confidence or low self-esteem had an increased vulnerability to grooming, and to the need to be part of a group/gang or to be ‘loved’ by other people.
- Children with a low socio-economic status had an increased vulnerability to grooming in return for gifts such as jewellery, clothing and mobile phones.
- Children in care.
- Children and young people trafficked into the country and who were exploited sexually or otherwise once in England, were vulnerable to abuse due to isolation, dependence on the traffickers, threats of and actual violence, and/or threats to their family in their country of origin.
- Children at risk of forced marriage or ‘honour’-based violence, resulting in the child running away from home, becoming homeless or being less likely to disclose exploitation should it take place.
- Children experiencing homelessness prior to abuse, including those occasions when a young person disclosed they were lesbian, gay, bisexual or transgender.
- Children from black and minority ethnic communities perceived as ‘westernised’ and consequently abused by people within their family or extended family.

Evidence shows that any child presenting with combined vulnerabilities from the above lists should be considered to be at high risk for sexual exploitation. Professionals should immediately commence an investigation to ascertain risk and initiate preventative and protective action as required. However, it is important to note that children without pre-existing vulnerabilities can still be sexually exploited, and therefore any child presenting with the risk indicators in the second list but none of the vulnerabilities in the first, should also be considered as potential victims and appropriate assessment and action initiated as required (Berelowitz, et al., 2012, pp. 83-84 / 110).
And OCC has a checklist for identifying those who may already have been sexually exploited:

- Missing from home or care.
- Physical injuries.
- Drug or alcohol misuse.
- Involvement in offending.
- Repeat sexually-transmitted infections, pregnancy and terminations.
- Absent from school.
- Change in physical appearance.
- Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites.
- Estranged from their family.
- Receipt of gifts from unknown sources.
- Recruiting others into exploitative situations.
- Poor mental health.
- Self-harm.
- Thoughts of or attempts at suicide.

(Berelowitz, et al., 2012, p. 114).

Such lists appear to be potentially useful in practice, although the statistical basis for them is far from clear. But we can make some observations about factors on such lists (using the two factors discussed earlier on which the bases are well established, i.e. in care and running away):

i. In the real world, the two factors will normally be associated (i.e. overlap) with each other (although in logic this is not necessary). For example, ‘in care’ will have some association with ‘running away’. It has.

ii. One factor should be additive to the other and have some degree of independence in its own right. For example,

a. ‘running away’ children who are ‘in care’ should be more likely to be sexually exploited than those who are ‘in care’ but do not run away. They are.

b. ‘running away’ children who are not ‘in care’ should be more likely to be sexually exploited than those who are also not ‘in care’ but do not run away. They are.

To illustrate this, let us consider the following quotation:-

There is a close association between running away and school non-attendance through truancy or exclusion (Safe on the Streets 1999). For example, the Safe on the Streets study found that over half of those who regularly or sometimes truanted had run away overnight compared to just 6% of those who had never truanted. The York University study also found that going missing from care placements is strongly associated with
school exclusion and non-attendance. Over two fifths of their sample were out of mainstream schooling at the time they last went missing (Biehal & Wade, 2002, p. 13).

This statement certainly illustrates an association between truancy and running away - perhaps unsurprisingly. Children who run away from home may be less likely to continue to attend school. But whether truancy has an additive and independent use as a predictor of sexual exploitation is unknown.

So checklists have a use, but with one caveat. Ticking three items rather than two or four rather than three may not add anything to the security of one’s prediction.

**Summary**

This chapter has considered the available data on the prevalence of sexual exploitation, principally from the context in England. It has:

- Surveyed some of the relevant literature to identify relevant data and issues;
- Used a sub-set of secondary data to perform some tentative analysis;
- Explored some the statistical issues in data collection;
- Highlighted some statistical issues in data analysis and interpretation.

Using and combining various English data presented in this chapter it is possible to tentatively calculate an estimate of the prevalence of sexual exploitation for different groups, this is outlined in Figure 4 and Table 3. For the reasons outlined above this estimate should be viewed as problematic and of limited reliability; it may however give a rough estimate of scale which may help to contextualise our other analyses.
Figure 4. Estimating prevalence of child sexual exploitation in different groups (various English data)

The above decision tree presents four groups of sexually exploited children or young people. These groups differ in whether they are in care and whether they have been reported as missing / running away. The estimated prevalence of sexual exploitation for each of the four groups is reported in Table 3. Prevalence is expressed in very rounded terms because of the potential errors involved, and we again caution the reader that this estimate is likely to be somewhat unreliable.

Table 3. Tentative estimated prevalence of sexually exploitation by group (English data)

<table>
<thead>
<tr>
<th>Group</th>
<th>Flow diagram</th>
<th>% Prevalence CSE</th>
<th>Prevalence of CSE (odds)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not in care, not reported as running away</td>
<td>No-no</td>
<td>0.027%</td>
<td>About 1 in 4000</td>
</tr>
<tr>
<td>Not in care, reported as running away</td>
<td>No-yes</td>
<td>4.7%</td>
<td>About 1 in 20</td>
</tr>
<tr>
<td>In care, not reported as running away</td>
<td>Yes-no</td>
<td>2.3%</td>
<td>About 1 in 40</td>
</tr>
<tr>
<td>In care, reported as running away</td>
<td>Yes-yes</td>
<td>12.5%</td>
<td>About 1 in 8</td>
</tr>
</tbody>
</table>
Answering the Research Questions

Introduction
This study involved four research strands plus a literature review; whilst the research strands vary in the extent to which they can be considered complete, all have produced some evidence for this report. This vindicates our four strand approach to this project.

We appreciate that this is a long and complex document, this has been necessary given the complexity of the subject and the subtlety of the findings. In addition, it has been important that we explain, where necessary, the limitations of these findings.

In this section we avoid reiterating what has been discussed previously, rather we briefly integrate key findings from various strands of the research to synthesise responses to each of the research questions.

Prevalence:

What is the prevalence of child sexual exploitation in the in-care population and the looked after at-home population?
It is possible to produce overall estimates of prevalence. An overall measure of prevalence would have some value in that it would allow a general picture of the scale of CSE to be understood. This information might then be tracked over time in order to generate evidence of the impact of wider initiatives to address the issue. Our estimates thus far suggest that:

- Using a small sample of all looked after children we find that 8% are known or confirmed to have experienced CSE during the last year.
- Using a small sample of all looked after children we find that 21% are suspected, known or confirmed to have experienced CSE during the last year.

We note that for the limited data we have, there is no significant difference between the prevalence of CSE for young people looked after at home or away from home, however when more data are available we might expect to be able to detect a small difference.

We hope to give more reliable estimates when further data are gathered, but given that there are in excess of 16,000 looked after children in Scotland, it is likely that hundreds or potentially thousands of these young people will have been sexually exploited. We do not know how this compares to other children in the population.

It is very important to understand that the use of an overall prevalence figure may mask significant heterogeneity of experience. We have identified marked differences in the...
experience of different groups differentiated by a range of factors such as individual characteristics (including age and gender), experiences and exposures (including current placement type and prior sexual abuse) and behavioural indicators (including misuse of alcohol and going missing).

Services are most often targeted at different subgroups rather than at all looked after children; when planning or monitoring such services, it will be important to understand the likely prevalence of CSE for that group, rather than relying on a single global prevalence rate for all looked after children.

An understanding of the prevalence of CSE in different subgroups may allow practitioners to consider potential risks for individuals; however, prevalence makes little sense at the individual level and caution is required. An individual child or young person is either sexually exploited or not; put another way, the presence of one or more of these factors cannot be taken as confirmation of CSE in any individual case, nor should the absence of any factor be taken to indicate that CSE has not occurred. It is likely that many factors which are associated with CSE also interact with each other and with further unknown variables.

**Grooming:**

**Are children and young people in Scottish care services being targeted by groomers?**

Evidence from several strands of this study suggests that young people in Scottish care services have been groomed for sexual exploitation; for example, the e-Delphi suggested that grooming had been identified by several participants, similarly the case audit found that a number of children were identified as known or suspected to have been exposed to grooming in the last year.

Participants in the e-Delphi study highlight that grooming itself, is a process that can take several forms. In particular they suggest that fear is not necessarily a part of grooming in the context of sexual exploitation and that grooming in these cases may be more focussed on the manipulation of young people’s attitudes, thoughts and feelings. Grooming may take place through direct contact with the young person or over social network media and other forms of technology.

There is some concern that carers, including workers and parents may be unaware of grooming and the different forms it can take and may not have the skills needed to recognise it.

There was a sense that there are a number of reasons why looked after children, including those in care services, may be more vulnerable to grooming. Some participants felt that this meant that groomers were more likely to target these children than others.
Links to going missing:

What is the strength of the relationship between the number of children going missing from care in Scotland and the prevalence of child sexual exploitation?

There is a clear association between going missing from care and the prevalence of child sexual exploitation, both in the English data we have examined and in the new data gathered through this study. Several e-Delphi participants clearly felt that going missing was a risk factor or an indicator of sexual exploitation.

With the limited audit data available to this study so far, we estimate that young people who go missing from care (from any accommodated placement for one night or more) are between one and a half to two times more likely to be sexually exploited or to be suspected of having been sexually exploited than those who are not reported missing.

However, it is important to understand that going missing is also associated with other factors such as age, misuse of alcohol or drugs, being involved with gangs and living in a residential care placement. All of these factors are also significantly associated with CSE. It is highly likely that there are interactions between these factors such that the association between going missing and CSE is in part attributable to these and other variables. Therefore whilst going missing needs to be considered a potential indicator of CSE, it is not inevitable that children who are reported missing will be exposed to CSE.

Data:

What are the views of professionals in relation to gathering, storage and use of data related to the sexual exploitation of looked after children?

Participants suggest that useful information about CSE and some associated risk factors is identified, recorded and applied at the level of individual cases. Participants differ in the extent to which they highlight sharing of individual information as a problematic area.

However, all strands of this study have identified an urgent need for better systems to gather and use aggregated data. There is currently little clarity about what data should be gathered and how it should be used. Systems and practices for this are variable across Scotland, both in the context of local authorities and other bodies. We identify some initiatives which are underway to improve systems at the local level.

There is a view that a national system or national standards may be required. This could bring together information from a range of sources including police, health services, care providers, local authority social work departments and specialist agencies working with children.
A national system would require careful development in respect of data, definitions, systems and procedures. A wide range of stakeholders should be involved in the development of any such systems to ensure their appropriateness, effectiveness, applicability and use. Issues of data protection and children’s rights to privacy would need careful consideration and the inclusion of young people in planning these systems should be a priority.

**Identifying and Responding:**

**What actions at a service level and locality level are in place to identify and respond to actual and potential occurrences of exploitation?**

Various examples of services are given throughout this report; some of these provide examples of promising or innovative practice. Many participants stress the need to provide services which are more child-centred which develop meaningful and trusted relationships with carers. Similarly, it has been noted that greater involvement of young people in issues related to services and policy is likely to ensure that these are more effective.

There is recognition that effective initiatives are likely to require extended periods of time in which to engage the young person. The literature review also provides several examples of services which have been evaluated more comprehensively.

In respect of residential care, several specific factors were mentioned which might increase the likelihood of CSE. In particular, increases in mobility and instability within the system were thought likely to result in greater risk due to negative peer contagion and ever increasing networks of contacts. This anxiety around residential care needs to be balanced against the benefits that a residential placement may be able to offer some young people and considered in the context of the range of placements that may or may not be available to them.

One area of particular concern in relation to a range of services for children, focussed on staff awareness of CSE, grooming and trafficking. There was little confidence that workers, including many care workers were able to recognise and respond to these issues in an effective and timely manner. Whilst this potentially identifies a training need, worker’s ability to respond will also be influenced by leadership, management and service structures.

Another area of concern related to the fact that there were marked inconsistencies between (and within) areas. For example, there was thought to be significant variation in the approach taken to young people reported missing or who were offending in some way. This variability inevitably means that some young people are getting less effective support than others; a level of standardisation of policy, procedure and practice may ensure that overall response is improved.
Regulation:

What is the potential role of regulation in ensuring effective collaboration?
The e-Delphi study provided an effective way to gather expert opinion related to this question. Regulation was felt to be important, however there was a sense that the participants often felt that existing regulations needed to be used more effectively and that further regulation would only have value to the extent that it had a positive impact on practice.

Several participants were very clear that regulation should only be considered in the context of a more comprehensive review of the way we think about and provide care to looked after children and young people. A number of areas where the Care Inspectorate may have a role in ensuring consistent high quality policy and procedures were identified. These included;

- Further scrutiny of care provision to include consideration of risk factors for CSE and how services currently respond to these;
- Scrutiny and analysis of multiagency case files;

These issues are discussed in more detail in the relevant sections.

Concluding Remarks

Sexual exploitation of children is a subject which rightly provokes strong reactions; we should acknowledge that the sexual exploitation of looked after children and young people in Scotland is not a rare occurrence. In order to respond effectively it is important that we understand the issue, both quantitatively in respect of the extent of CSE and qualitatively in respect of the various forms it takes and what impact it has on children and young people. We also need to understand how policy and practice currently respond to the issue and where there is potential to make improvement. This study has considered the research questions by addressing these from various perspectives using diverse techniques to gather data. Participants to this research have provided rich insights which will inform the work of the Care Inspectorate and CELCIS, and we are very grateful for their participation.

We have warned that some of our quantitative results are tentative and should, at this stage, be regarded as being indicative only. Data will continue to be received and further analyses will be continued; in due course an update report will be produced and this will provide more certainty.

CELCIS remains committed to improving the lives of looked after children and young people at risk of CSE as well as those who have experienced CSE; together with the Care Inspectorate, Scottish Government and partners across the sector, we continue to consider this area to be a high priority.
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Appendices
Appendix 1 Barriers and Enablers to the Use of Research

Extended quote from Nutley et al. (p81-3)

Box 3.3: Barriers and enablers to the use of research

The nature of the research
Research is more likely to be used that:
- is high quality and comes from a credible source;
- provides clear and uncontested findings;
- has been commissioned, or carries high-level political support;
- is aligned with local priorities, needs and contexts;
- is timely and relevant to policy makers’ and practitioners’ requirements;
- is presented in a ‘user-friendly’ way – concise, jargon-free and visually appealing.

The personal characteristics of researchers and potential research users
- Policy makers and practitioners with higher levels of education or some experience of research are more likely to be research users.
- Lack of skills to interpret and appraise research can inhibit research use.
- Some individuals may be hostile towards the use of research, or to research more generally.
- Researchers may lack the knowledge and skills to engage effectively in dissemination and research use activities.

The links between research and its users
- Research use may be inhibited where policy makers and practitioners have limited access to research.
- Knowledge brokers – both individuals and agencies – can play an effective ‘bridging’ role between research and its potential users.
- Direct links between researchers and policy makers or practitioners also support research use. Face-to-face interactions and two-way exchanges of information are most likely to encourage the use of research.

The context for the use of research
Context plays a key role in shaping the uptake of research.
- In policy contexts, research is more likely to be used where:
  - it is aligned with current ideology and individual and agency interests;
  - its findings fit with existing ways of thinking or acting or with other information within the policy environment;
  - open political systems exist;
  - institutions and structures bring researchers and policy makers into contact;
  - at a local level, an organisational culture exists that is broadly supportive of evidence use.
- In practice contexts, local organisational, structural and cultural issues may limit the use of research, for example:
  - lack of time to read research;
  - lack of autonomy to implement the findings from research;
  - lack of support – financial, administrative and personal – to develop research-based practice change;
  - local cultural resistance to research and its use.
- In research contexts, a number of barriers inhibit the flow of findings to policy makers and practitioners:
  - lack of incentive or reward for engaging in dissemination and research use activities;
  - high value placed on traditional academic journal publications at the expense of ‘user-friendly’ research outputs;
  - lack of time and financial resources for research use activities;
  - a set of attitudes among some academic researchers that dissemination is not part of their role.
Appendix 2 Case Audit Sheet (without preliminaries)

Audit sheet
This sheet is to collect detailed information about the looked after children and young people for whom you are responsible. Please complete one copy of the sheet for each young person or child who is looked after.

<table>
<thead>
<tr>
<th>Basic information (please enter details)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age last birthday (in years)</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Legal reason(s) for being looked after</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current placement type (please indicate one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small residential unit / home (0-5 residents)</td>
</tr>
<tr>
<td>Larger residential unit / home (6 or more residents)</td>
</tr>
<tr>
<td>Residential school</td>
</tr>
<tr>
<td>Secure care unit / school / home</td>
</tr>
<tr>
<td>Foster care* (as the only looked after child in household)</td>
</tr>
<tr>
<td>Foster care* (with looked after siblings in household)</td>
</tr>
<tr>
<td>Foster care* (with other non-related looked after children in household)</td>
</tr>
<tr>
<td>Kinship care (in the care of grandparent / step grandparent)</td>
</tr>
<tr>
<td>Kinship care (in the care of aunt / uncle)</td>
</tr>
<tr>
<td>Kinship care (in the care of adult siblings)</td>
</tr>
<tr>
<td>Kinship care (in the care of friends of the family)</td>
</tr>
<tr>
<td>Looked after at home with their birth family</td>
</tr>
<tr>
<td>Any other placement type (please describe)</td>
</tr>
</tbody>
</table>

*there may be birth children in any of the foster care placement types

<table>
<thead>
<tr>
<th>Risk and route factors 1 (please indicate any/all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanently excluded from a school at any point during the last year</td>
</tr>
<tr>
<td>Temporarily excluded from a school at any point during the last year</td>
</tr>
<tr>
<td>Reported missing for one night or more at any point during the last year</td>
</tr>
<tr>
<td>Reported missing for ten nights or more during the last year</td>
</tr>
<tr>
<td>Has been homeless at any point during the last year</td>
</tr>
<tr>
<td>Has had an ‘out of authority’ placement at any point during the last year</td>
</tr>
<tr>
<td>Involved with youth justice system at any point during the last year</td>
</tr>
<tr>
<td>Has been ‘accommodated’ for more than three years</td>
</tr>
<tr>
<td>Has been a looked after child for more than three years</td>
</tr>
<tr>
<td>Has experienced one or more placement moves during the last year (inc. birth parents)</td>
</tr>
<tr>
<td>Has been placed in five or more different placements during life (excl. birth parents)</td>
</tr>
<tr>
<td>Is from a Black or mixed ethnicity group</td>
</tr>
<tr>
<td>Is a physically disabled child (any physical disability)</td>
</tr>
<tr>
<td>Is a learning disabled child (any learning or intellectual disability)</td>
</tr>
<tr>
<td>Has additional social, emotional, behavioural or developmental (SEBD) needs</td>
</tr>
<tr>
<td>Identifies themselves as lesbian, gay, bisexual or transgender (LGBT)</td>
</tr>
<tr>
<td>Risk and route factors 2</td>
</tr>
<tr>
<td>-------------------------</td>
</tr>
<tr>
<td>(please use your professional judgement and knowledge of this child or young person to indicate your best answer in each case)</td>
</tr>
<tr>
<td>Known or confirmed</td>
</tr>
<tr>
<td>---------------------</td>
</tr>
<tr>
<td>Has played truant from school in the last year</td>
</tr>
<tr>
<td>Has poor school attendance (&lt;70%) over the last year</td>
</tr>
<tr>
<td>Has been subjected to damaging levels of violence or aggression in the last year</td>
</tr>
<tr>
<td>Has witnessed damaging levels of violence or aggression in the last year</td>
</tr>
<tr>
<td>Has been involved with a youth or street ‘gang’ in the last year</td>
</tr>
<tr>
<td>Has misused alcohol in the last year</td>
</tr>
<tr>
<td>Has misused drugs in the last year</td>
</tr>
<tr>
<td>Has had underage sex in the last year</td>
</tr>
<tr>
<td>Has been exposed to grooming* in the last year</td>
</tr>
<tr>
<td>Has been sexually exploited* in the last year</td>
</tr>
<tr>
<td>Has been sexually exploited via technology (e.g. internet or email on computers or mobile phones) in the last year</td>
</tr>
<tr>
<td>Has a pre-care history of sexual abuse</td>
</tr>
<tr>
<td>Has an in-care history of sexual abuse</td>
</tr>
<tr>
<td>Has ever been the subject of trafficking* (from outside the UK)</td>
</tr>
<tr>
<td>Has ever been the subject of trafficking* (from inside the UK)</td>
</tr>
</tbody>
</table>

* Using definitions given

**NOTES** (Please enter any notes for clarification, special risk factors for this child, comments about difficulties completing this information for this child / young person or any feedback you would like to give about the audit)
Appendix 3 Rapid Response Survey (without preliminaries)

Survey Questions

Q1. Does your organisation record information about sexual exploitation of looked after children (e.g. the information in Q4.)?

Q2. How does your organisation currently use the data you collect?

Q3. Does your organisation have any plans to change your data collection procedures in relation to these areas? If so, what changes will you make?
Q4. Please complete the following table as fully as possible; it may be helpful to read through the whole table before starting to answer.

<table>
<thead>
<tr>
<th>In relation to Looked After Children and Young People, including at home, between 1st August 2011 and 31st July 2012 (or most recent 12 month period available in which case please specify)</th>
<th>For all looked after children and young people including those at home (please enter numbers below)</th>
<th>For children and young people in care placements only (foster, kinship and residential) enter numbers</th>
<th>We have this data but are unable or unwilling to share it (tick below)</th>
<th>We do not have this data (tick below)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of looked after children and young people known to have been sexually exploited</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of looked after children and young people suspected to have been sexually exploited</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What is the age (last birthday) of the youngest looked after child and young person known or suspected to have been sexually exploited?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What is the mean age (in years) of all looked after children and young people known or suspected to have been sexually exploited?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many looked after males are known or suspected to have been sexually exploited?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many looked after females are known or suspected to have been sexually exploited?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many looked after disabled children and young people are known or suspected to have been sexually exploited?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many looked after children and young people from Black and mixed ethnicity groups are known or suspected to have been sexually exploited?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many looked after LGBT (lesbian, gay, bisexual, transgender) children and young people are known or suspected to have been sexually exploited?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of looked after children and young people who have been reported as being exposed to grooming</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of looked after children and young people who have been reported to be subject to trafficking</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of looked after children and young people who have been reported as missing for one or more nights during the period</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of looked after children and young people who have been reported as missing for ten or more nights during the period</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Optional questions

Q5. It would help us to analyse patterns, trends and good practice across Scotland if we know which authorities provided which data. Authorities will not be individually identified when we report these data.

Your Local Authority (optional) ______________________________________

Q6. You may also provide your own contact details if you would like to receive information about the outcomes of the research.

Name _____________________________________________

Email address _________________________________________
About CELCIS

CELCIS is the Centre for Excellence for Looked After Children in Scotland. Together with partners, we are working to improve the lives of all looked after children in Scotland. We do so by providing a focal point for the sharing of knowledge and the development of best practice, by providing a wide range of services to improve the skills of those working with looked after children, and by placing the interests of children at the heart of our work.

For more information
Visit: www.celcis.org
Email: celcis@strath.ac.uk

Improving care experiences  www.celcis.org
Annex 1 to report

This annex should be read in conjunction with the full report which provides content and context vital to its understanding. The purpose of this annex updates the findings of the Case Audit which was one of several strands within the study. It reports further analyses conducted in late 2013 at which point the final case audit forms had been returned.

The Case Audit: Updated Findings

The sample
We received data related to 339 looked after children, completed by social workers from two local authorities; we provide only limited information here to prevent disclosure of the authority identities. Together these authorities contain a mix of substantial urban and substantial rural areas and cover disparate parts of Scotland. However, Scotland is a very diverse country and it is not possible to confirm that these two authorities are representative of the nation as a whole.

It is already known that CSE affects all types of areas but that it tends to be somewhat more concentrated in areas of highest deprivation. In terms of IMDS deprivation scores, one of these authorities is fairly close to the national average across most domains (except for the ‘access to service’ domain where it is less deprived). The other authority is moderately less deprived than national averages across most domains (but is substantially more deprived than average on ‘access to services’). Taken together, we feel that these two areas are moderately less deprived than the national average. Looked after children also tend to be concentrated in areas of most deprivation and it is not clear that looked after children in areas of different affluence have significantly different experiences.

We therefore have no reason to suggest that the CSE prevalence results for looked after children in this sample will be significantly higher or lower than the prevalence rate for Scotland as a whole and we feel the rate for this sample is likely to be similar to, or slightly lower than, the national rate.

As before, our updated analyses are presented in two groups, fulfilling two functions: ‘Descriptive Analyses’ help to characterise various features of this sample of young people and the range and distribution of their experiences; ‘Inferential Analyses’ go on to examine the links between different factors and help to answer a number of research questions. The terms ‘children’ and ‘young people’ are used throughout the findings and should be read as representing all cases unless stated otherwise.

All ‘items’ (questions) on the audit form achieved a very high response rate; however, occasionally a form was received where data was missing for a small number of items. Most percentages are therefore based on all 339 children, with a small number being based on slightly fewer. We round percentages to whole numbers as we feel not doing so may imply a level of precision which is not supported by the nature of this sample.
Absolute numbers (shown as ‘n’) are given to help clarify and contextualise this information.

**Describing children’s characteristics**

Of the 339 children and young people included, 48% (n=163) were female and 52% (n=175) were male; we were not told about the gender of one child. Eight of the 339 young people were identified as coming from a Black or mixed ethnic group and two were recorded as being identified as lesbian, gay, bisexual or transsexual (LGBT). Sixteen (5%) of the children were identified as having a physical disability and 63 young people (19%) were identified as having a learning disability. One hundred and seven (32%) were identified as having additional needs in terms of social, emotional or behavioural difficulties (SEBD).

Ages of these children and young people ranged from birth to 19 years. The mean age was 9.8 (± 4.8), the median age was 11 and the modal age was 15. The age structure is illustrated in Figures 1–3, showing the frequencies of various ages for the whole sample, for males and for females respectively.

It will be seen that there is a high proportion of young people aged 11, 14, 15 and 16 and that the overall age structure for males and females appears somewhat different. In particular, there is a spike at age 11 which is more pronounced for boys than girls, and a slight spike at age 15 for girls which is not seen for boys. Equally there is a very low number of girls aged five. However, it should be remembered that the numbers in each group are small and we caution that these apparent patterns may disappear with a larger sample.
Figure 1 Age last birthday whole sample (in years)

Figure 2 Age last birthday for boys (in years)

Figure 3 Age last birthday for girls (in years)
Where the children and young people lived

These young people were currently resident in a range of placement types. These are summarised in Table 1.

Table 1. Current Placement Type

<table>
<thead>
<tr>
<th>Placement Type</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smaller Residential Unit (0-5 residents)</td>
<td>15</td>
<td>5</td>
</tr>
<tr>
<td>Larger Residential Unit (6+ residents)</td>
<td>19</td>
<td>6</td>
</tr>
<tr>
<td>Residential School</td>
<td>17</td>
<td>5</td>
</tr>
<tr>
<td>Secure Unit</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>Foster Care (only looked after child)</td>
<td>34</td>
<td>10</td>
</tr>
<tr>
<td>Foster Care (with looked after siblings)</td>
<td>42</td>
<td>13</td>
</tr>
<tr>
<td>Foster Care (with other non-related looked after children)</td>
<td>46</td>
<td>14</td>
</tr>
<tr>
<td>Foster Care (other and undefined)</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Kinship Care (grandparent/step grandparent)</td>
<td>55</td>
<td>16</td>
</tr>
<tr>
<td>Kinship Care (aunt/uncle)</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>Kinship Care (adult sibling)</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Kinship Care (family friend)</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>Looked after at home with birth family</td>
<td>85</td>
<td>25</td>
</tr>
<tr>
<td>Other or undefined</td>
<td>5</td>
<td>0.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>339</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Of these young people, 117 (35.0%) had been looked after for more than three years and 71 (21%) had been accommodated for more than three years. Eighty young people (24%) had experienced a placement move during the last year and 23 (7%) had experienced five or more placement moves during their life. During the last year, 35 young people (10%) had experienced an ‘out of authority’ placement and four (1.2%) had experienced homelessness.

Educational experiences

Seven young people (2%) had at some point been permanently excluded from a school and 54 young people (16%) had been temporarily excluded from a school.¹ Forty-eight (15%) were known to have truanted during the last year and this was suspected for twenty-seven further young people (8%). Sixty (18%) were known to have had a poor school attendance record (<70% attendance) and this was suspected for ten (3%) further young people.

¹ Note that many practitioners distinguish between temporary and permanent exclusions although this distinction does not feature in the legislation, as the Scottish Government’s guidance (2011) makes clear: www.scotland.gov.uk/Publications/2011/03/17095258/0
Challenges and life experiences

Thirty-six young people (11%) were known to have misused alcohol in the last year, with this being suspected for a further 27 (8%). Similarly, 25 (8%) young people were known to have misused drugs in the last year, with a further 23 (7%) being suspected of this. Sixty (18%) children and young people were known or suspected to have been subjected to damaging levels of violence in the past year, and 94 (29%) were known or suspected to have witnessed damaging levels of violence in the past year. Twenty-two (7%) young people were reported to have been involved with youth justice systems during the last year.

Seven young people (2%) were known to have been involved with gangs in the last year with this being suspected for 23 (7%). Twenty-eight children and young people (8%) had been missing for one night or more during the last year; of these, two were aged under ten. Five children or young people (2%) had been missing for ten or more nights during the year; all of these were aged 14 or more.

Forty-three were known or suspected to have experienced under age sex in the last year. This included 41% (n=39) of all young people aged 14-16 years; 14 males (24% of males 14-16yrs) and 25 females (53% of females aged 14-16yrs).

Fifteen (5%) of the sample were known to have been sexually abused before becoming looked after and this was suspected for a further 28 (8%). Thus, a total of 13% were known or suspected to have been sexually abused before becoming looked after. Twelve children and young people (4%) were known or suspected to have been sexually abused whilst they were looked after; we did not seek to clarify what form this sexual abuse took and this may include cases of sexual exploitation.

Reported Grooming and Child Sexual Exploitation in the Last Year

Six (2%) children or young people were known to have been exposed to grooming in the last year; of these, most were aged 14 or more. A further 18 (5%) were suspected of having been exposed to grooming. Five children known or suspected of being exposed to grooming were aged less than 14; four boys were suspected of being exposed to grooming. A small number of young children were said to have been exposed to grooming; it is possible that social workers included examples where a parent had also been groomed.

Of the 339 children or young people in the sample, ten (3%) were known definitely to have been subjected to CSE during the last year. Seven of these young people were currently looked after away from home and three were looked after at home. One child known to have been sexually exploited was aged less than 14.

There was also a strong suspicion of CSE for a further ten looked after children and young people; adding these to known cases, indicated a potential overall prevalence (confirmed and strongly suspected) of 6% (n=20). This seems similar to some data from England but is rather lower than estimates given by some experts in the e-Delphi study (see main report).
The prevalence of CSE (confirmed or strongly suspected) was 4% for children or young people looked after at home, and 7% for children and young people looked after away from home.

When the number of children where there was any level of suspicion of CSE was added to confirmed cases, the total number increased to 38, indicating a potential overall CSE (confirmed or suspected) prevalence of 11%. This figure also seems in broad agreement with several sources of literature and with some of the opinions expressed by experts in the e-Delphi study. The prevalence of CSE (confirmed or suspected) was 9% for children or young people looked after at home, and 12% for children and young people looked after away from home.

It is important to know that the analyses of different sub-groups reveal that the prevalence of CSE (confirmed or suspected) varies greatly according to a number of factors; not all looked after children and young people have the same likelihood of being exploited in this way. To illustrate the extent of these differences, some prevalence rates among different subgroups in this sample are summarised in Table 2 below. This is not designed to be an exhaustive list of factors; rather, the table aims to demonstrate the scale of differences between subgroups.
Table 2. Reported prevalence of CSE in the last year for selected subgroups

<table>
<thead>
<tr>
<th>Subgroup</th>
<th>Reported prevalence of CSE (%) based on this sample (N=339)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Known (%)</td>
</tr>
<tr>
<td>Looked after children (all)</td>
<td>3</td>
</tr>
<tr>
<td>Looked after boys</td>
<td>1</td>
</tr>
<tr>
<td>Looked after girls</td>
<td>6</td>
</tr>
<tr>
<td>Looked after children aged 14 - 16</td>
<td>8</td>
</tr>
<tr>
<td>Looked after boys aged 14 - 16</td>
<td>2</td>
</tr>
<tr>
<td>Looked after girls aged 14 - 16</td>
<td>16</td>
</tr>
<tr>
<td>Looked after children in residential homes /units</td>
<td>6</td>
</tr>
<tr>
<td>Looked after boys in residential homes /units aged 14-16</td>
<td>--</td>
</tr>
<tr>
<td>Looked after girls in residential homes /units aged 14-16</td>
<td>25</td>
</tr>
<tr>
<td>Looked after at home children</td>
<td>4</td>
</tr>
<tr>
<td>Looked after at home boys aged 14-16</td>
<td>--</td>
</tr>
<tr>
<td>Looked after at home girls aged 14-16</td>
<td>25</td>
</tr>
<tr>
<td>Looked after children reported missing (one or more nights)</td>
<td>10</td>
</tr>
<tr>
<td>Looked after children known / strongly suspected to have misused alcohol</td>
<td>9</td>
</tr>
</tbody>
</table>

Some comparators

- Children looked after away from home in Scotland according to several e-Delphi participants: 33%
- All children in care in England (based on combined English Data): 4%
- Children in care in England who have been reported missing: 13%
- Children in care in England who have not been reported missing: 2%

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2 As discussed in the main report, this information should be considered to be indicative only; these rates may change if a different or larger sample were taken. However, the current sample size should be sufficient to demonstrate the likely scale of differences between groups. As previously discussed, the geographic areas from which this sample is drawn might be expected to be similar, or slightly better placed, in respect of CSE than Scotland as a whole. Furthermore, as discussed in the main report, this information is based upon the reports and judgements of social workers working with these children and young people. We believe they are well-placed to make these judgements and it is likely that they have high thresholds of proof for known examples of CSE. Equally it is likely that they have high thresholds for ‘strongly suspecting’ CSE. Despite this, it must be considered that social workers may miss some actual examples of CSE and they may have unfounded suspicions in others. With this in mind, we leave readers to select which column in the table they feel is most likely to represent the true prevalence for each subgroup.
Sub-group analysis
Next we wanted to establish in further detail how the prevalence of CSE may be statistically associated with these and other characteristics, including children’s looked after status. To properly establish the ‘causes’ or precursors of CSE, it would be necessary to conduct a longitudinal study and compare different groups of children over time. This study was cross-sectional (it took place at one point in time) and therefore does not attempt to identify ‘causes’; instead this study identifies correlations and linkages, demonstrating which characteristics are relevant or important. This in turn will help to focus potential responses and interventions aiming to reduce rates of CSE.

Given the nature of the sample and the fact that most of the variables are ‘nominal / categorical’, it was decided that the most appropriate statistical approach was to create (as far as possible) a range of dichotomous variables which could be compared through contingency tables and appropriate statistical tests such as Chi-squared and related tests. For simplicity we report only the p values. We only report associations which exceed a confidence level typically used in social research, i.e. the p=0.05 level or less which represents a one in 20 chance of occurring due to chance alone. We also found many instances of the more rigorous level p=0.01 or less; these more certain responses have a one in a hundred or less chance of occurring due to chance alone. Similarly, there are many examples where p=0.001 or less; these have a one in a thousand chance or less of being due to chance alone. Where any ‘expected’ cell values in contingency tables were fewer than five, we give p for Fisher’s Exact Test; where results are for a two by two table, p for Yates’ continuity correction is used. Where both pertain, the higher (more conservative) p value is taken. Effect sizes are not given in this document; however, readers may contact the authors if they require this information and we will try to assist.

It should be remembered that the analyses reported below highlight associations only, and they cannot be taken to infer causes or direction. For example, being in a residential placement is associated more commonly with being reported to have had under age sex; this neither implies that under age sex leads to residential care nor that residential care leads to under age sex. Other confounding (interfering) variables are likely to influence both factors.

Factors Associated with Confirmed Sexual Exploitation
Ten children or young people (3%) were confirmed to have experienced child sexual exploitation (CSE) during the last year. Given these relatively small numbers there is little opportunity to explore association and this makes it less likely that any statistically significant trends will be identifiable; with this in mind, analyses in this section include instances where CSE was confirmed or strongly suspected as this gives larger numbers to deal with. However, despite the relatively small numbers of confirmed instances some significant associations with confirmed CSE were seen:

It was found that known CSE was associated with being a girl, misuse of alcohol and drugs during the last year, being in the older half of the sample (aged 11 and over) and with having experienced sexual abuse before becoming looked after.

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3 As with all statistical testing it should be remembered that the level of certainty is a different concept to the size of the difference (effect size); some small effects may be reported with high certainty whilst some large effects may be reported with less certainty. In other words, just because something has a highly significant (certain) p value, this does not necessarily mean there is a large difference between the groups.
There were associations with being groomed (for sexual exploitation) and with being abused whilst ‘in care’ or with having under age sex in the last year; however, it should be argued that each of these three factors are conceptually linked to CSE and therefore that these associations would be expected.

- If female, confirmed CSE is more common ($p=0.02$)
- If known or suspected to have misuse of alcohol, confirmed CSE is more common ($p=<0.001$).
- If known or suspected to have misuse of drugs, confirmed CSE is more common ($p=<0.007$).
- If in the older half of the age range, confirmed CSE is more common ($p=0.007$).
- If known or suspected to have been sexually abused pre-care, confirmed CSE is more common ($p=<0.001$ ** conceptually linked).
- If known or suspected to have been exposed to grooming, confirmed CSE is more common ($p=0.001$ ** conceptually linked).
- If known or suspected to have been sexually abused in care, confirmed CSE is more common ($p=0.004$ ** conceptually linked).
- If known or suspected to have experienced under age sex, CSE is more common ($p=<0.001$ ** conceptually linked).

Statistically significant associations with confirmed CSE were NOT found for other factors including ethnicity, disability, placement type and moves, going missing and length of time looked after.

**Factors Associated with Confirmed or Strongly Suspected CSE**

When cases of strongly suspected CSE are added to known cases, the total number found was 20, indicating a potential overall prevalence of 6% during the last year. The use of this variable (known or suspected CSE) provided greater statistical power due to the larger base number and therefore helps us identify more patterns.

As above, age, gender, misuse of alcohol and drugs and prior sexual abuse were significantly associated with CSE. However, several further associations became evident: young people who had been subject to damaging levels of violence or involvement with gangs were more frequently reported as having been known or strongly suspected of being exploited. Of particular interest is the observation that young people who were placed within a residential care setting were also significantly more often known or strongly suspected to have been subjected to CSE. Consistent with the available literature, it was also found that having been reported as missing on one or more occasions was also associated with CSE. It should, however, be noted that thresholds for being reported missing may vary for different placement types. Truancy and poor school attendance were also associated with known or strongly suspected CSE. Involvement with youth justice was negatively associated with known or suspected CSE, possibly due to interaction effects with gender.

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4 If as suspected, children in residential care are more likely to be reported missing overnight than children from other placement types (including kinship and at home), then any apparent associations found could be an indicator that these young people are in residential care rather than they are independently related to other factors.
Likelihood of known or strongly suspected CSE was not found to be statistically significantly associated with ethnicity, disability, length of time looked after, or number of placement moves.

Finally, and as above, the three conceptually linked factors - experiencing grooming, underage sex, and being sexually abused whilst being looked after - were also found to be associated with CSE.

- For females, known or suspected CSE is more common ($p=0.001$).
- If in the older half of the age range, known or suspected CSE is more common ($p=0.017$).
- If known or suspected to have been subject to violence, known or suspected CSE is more common ($p=0.017$).
- If known or suspected to have been involved with a street gang, known or suspected CSE is more common ($p=0.017$).
- If known or suspected to have been truanting, known or suspected CSE is more common ($p=<0.001$).
- If known or suspected to have misused alcohol, known or suspected CSE is more common ($p=<0.001$).
- If known or suspected to have misused drugs, known or suspected CSE is more common ($p=<0.001$).
- If known or suspected to have been sexually abused prior to being looked after, known or suspected CSE is more common ($p=<0.001$).
- If in a residential placement, known or suspected CSE is more common ($p=<0.001$).
- If reported missing one night or more, known or suspected CSE is more common ($p=0.002$).
- If known or suspected to be involved with youth justice in the last year, known or suspected CSE is still significant but LESS common ($p=0.041$).
- If reported to have experienced under age sex, known or suspected CSE more common ($p=<0.001$ ** conceptually linked).
- If known or suspected to have been exposed to grooming, known or suspected CSE is more common ($p=<0.001$ ** conceptually linked).
- If known or suspected to have been sexually abused in care, known or suspected CSE is more common ($p=<0.001$ ** conceptually linked).

Other Patterns in the Data
The findings above show a potentially strong association between CSE and a range of factors. With this in mind, it is important to explore the associations between various factors, as an understanding of these relationships may suggest more complex interaction effects which may either increase or mask other associations. Below we consider four important dimensions which have particular relevance to this study: male /female; at home / away from home placement; residential / non-residential placement; and missing / non-missing.
Gender Male / Female
We explored a range of different factors for boys and girls and found similarities and differences:

Looked after boys and girls were statistically indistinguishable in terms of:
- Being looked after at home or elsewhere,
- Length of time looked after or accommodated,
- Number of placement moves,
- Out of area placements,
- Having a physical disability,
- Using alcohol or drugs,
- Having poor school attendance,
- Truanting,
- Being subject to or witnessing damaging levels of violence,
- Going missing,
- Gang involvement,
- Ethnicity and age,
- Various placement types (although a near significant relationship suggests boys may be more likely than girls to live in residential care)
- Pre-care history of sexual abuse (although a near significant relationship suggests this may be more likely for girls).

Looked after girls were more likely to:
- Be reported as having experienced underage sex \( (p=0.027) \),
- Be exposed to grooming (known or suspected) \( (p=0.001) \).
- Experience of CSE and CSE via technology, both \( (p<0.001) \).

Looked after boys were more likely to:
- Be involved with youth justice \( (p=0.024) \),
- Have a learning disability \( (p=0.013) \),
- Have additional needs attributed to SEBD \( (p=0.018) \).

Away from Home / At Home Populations
The experience of children in various care placements away from their birth family is likely to differ from those looked after at home in a number of important ways. The funders of this research have a particular interest in understanding any differences between the ‘looked after away from home’ and ‘looked after at home’ populations, as they have responsibilities towards each of these groups. We investigated this for a number of factors and found similarities and differences between the two groups:

These populations were statistically indistinguishable from each other in terms of:
- Gender,
- Age,
- Going missing,
- Gang involvement,
- Misuse of alcohol or drugs,
- Additional needs (SEBD),
- Underage sex,
- Exposure to grooming and CSE.

Children looked after at home were more likely than children looked after away from home to:

- Be from a BME background \((p=0.042)\).
- Have been subjected to damaging levels of violence in the last year \((p=0.034)\),
- Have witnessed damaging levels of violence in the last year \((p=<0.001)\),
- Have poor school attendance \((p=<0.001)\),
- Be involved with truancy \((p=<0.001)\),
- Have been ‘temporarily excluded’ from school \((p=0.007)\).

These children were less likely than children looked after away from home to:

- Have a learning disability \((p=0.017)\),
- Have a physical disability \((p=0.037)\),
- Have been looked after for more than three years \((p=0.001)\).

**Residential home or unit / Non-residential Placements**

As reported above, 52 children and young people were reported to be currently in some form of residential placement; this included 33 boys and 19 girls. There were both similarities and differences between these children and others. Some differences may be due to different reporting thresholds for these children:

Children and young people in residential care were statistically indistinguishable from other looked after children in respect of:

- Gender,
- Length of time looked after,
- Number of placement moves,
- Violence (either subject of, or witness to),
- Gang involvement (known or suspected),
- Ethnicity,
- Involvement with youth justice (although there was a near significant relationship - more likely),
- Poor school attendance (although there was a near significant relationship - more likely),
- Exposed to grooming (although there was a near significant relationship - more likely),
- Pre-care sexual abuse (although there was a near significant relationship - more likely).
Children and young people in residential care were more likely than other looked after children to:

- Be in the older half of the sample, age 11 plus ($p=<0.001$),
- Be permanently excluded from school ($p=0.013$),
- Be temporarily excluded from school ($p=0.035$),
- Be missing one night or more ($p=<0.001$),
- To have misused alcohol ($p=<0.001$),
- To have misused drugs ($p=<0.001$),
- Have a learning disability ($p=<0.001$),
- Have additional needs related to SEBD ($p=0.001$),
- Be involved with truancy (known or suspected) ($p=0.029$),
- Have experienced underage sex ($p=<0.001$),
- Have experienced CSE in the last year ($p=<0.001$).

**Reported Missing for One Night or More / Not Reported Missing**

Much attention has been paid in recent literature to an association between being reported missing (or running away) and being sexually exploited; a similar association has also been noted above. It is undoubted that children who run away are showing their distress and potentially placing themselves at greater risk of harm.

We therefore compared children who have been reported as missing for one night or more with other looked after children over a number of factors. Again we found similarities and differences:

Children who go missing were statistically indistinguishable from other looked after children in terms of:

- Gender,
- Ethnicity,
- Living at home or away from home,
- Number of placement moves,
- Being accommodated for more than three years,
- Having an out-of-area placement,
- Having a pre-care history of sexual abuse,
- Being sexually abused in care,
- Disability,
- Being in a kinship placement (although a near significant relationship suggests that going missing may be less likely for this group).

Children who go missing were more likely than other looked after children to:

- Live in residential care ($p=<0.001$),
- Be in the older half of the sample ($p=<0.001$),
- Be more likely to have had under age sex ($p=<0.001$),
- Be involved with youth justice ($p=<0.001$),
- Be involved with gangs (known or suspected) ($p=<0.001$),
• Misuse alcohol \((p<0.001)\),
• Misuse drugs \((p<0.001)\),
• Be involved in truancy \((p<0.001)\),
• Have poor school attendance \((p<0.001)\),
• Be subjected to damaging levels of violence \((p=0.007)\),
• Witness damaging levels of violence (known or suspected) \((p=0.023)\),
• Be exposed to grooming (known or suspected) \((p=0.010)\),
• Have experienced CSE and/or CSE by technology \((p<0.001)\).

Children who go missing were less likely than other looked after children to:

• Live in foster care \((p=0.003)\),

**Summary**

This audit further highlights the complexity of CSE and the factors associated with it. However, it does provide us with a measure of CSE for this sample of young people, and a number of associations have been found which are statistically significant. These enable us to answer, with a degree of certainty, three of the research questions.

1. **What is the prevalence of child sexual exploitation in the in-care population and the looked after at home population?**

For this group of looked after children and young people the prevalence of known or suspected CSE during the last year is 11%. For those children or young people looked after ‘at home’ the rate is 9%. For those looked after away from home the rate is 12%.

Wider information leads us to believe that our data are likely to be similar to or slightly lower than true rates at a national level. It is also our contention that the social workers who provided this data may have generally been cautious and conservative in their suspicion and that other cases may well be undetected.

Provisionally, based on these results, the assumptions above and findings from other strands of the study, an overall prevalence of exposure to CSE in the last year of between 11% and 20% would seem likely for looked after children.

But it is vital to understand that different subgroups are disproportionately affected; this was highlighted Table 2 and throughout these results. In particular, older age groups, girls and children living in residential care warrant particular consideration, particularly where these factors are present in combination. For example, within this sample, 12 girls aged 14-16 were currently placed in residential care. Of these, 9 (75%) were either known or strongly suspected to have been sexually exploited during the last year. Of the remaining three girls there was some level of suspicion that one other was being sexually exploited. It therefore seems safe to presume that considerably more than half of girls aged 14-16 in residential care across Scotland will be sexual exploited in some way.

2. **Are children and young people in Scottish care services being targeted by groomers?**
Yes. We have found clear evidence from this and other strands that children in the Scottish care system have been targeted by groomers during the last year. We do not find any significant results to suggest that children looked after at home or away from home are more likely to be targeted than other looked after children. However, when considering children in residential care as a separate group, it appears that they are more likely than other looked after children to be known or strongly suspected to have been exposed to grooming \((p<0.001)\), but there is not sufficient data to test this for confirmed cases only, and it may be that part of social workers’ suspicion is based in their understanding that residential care homes have been targeted by groomers in the past.

We have not investigated whether Scottish care services are targeted by groomers more than other institutions or services that children may use, such as schools, youth centres and leisure services.

3. What is the strength of the relationship between the number of children going missing from care in Scotland and the prevalence of child sexual exploitation?

Within these data there is a significant relationship between the numbers of looked after children going missing and the prevalence of CSE. When considering the prevalence of confirmed and strongly suspected cases:

Twenty-nine children in this sample are reported to have gone missing for one night or more over the last year; of these, eight are known or strongly suspected to have been sexually exploited in some way. This relationship is statistically significant \((p<0.001)\). The effect size (Cohen’s \(d\)) for this relationship is 1.2 \((0.7-1.7 \text{ at } 95\% \text{ CI})\) which might typically be considered a ‘large’ effect. However, we would urge caution when interpreting this finding for two reasons. Firstly, there are not sufficient numbers of confirmed cases to test this without incorporating strongly suspected cases. Secondly, other large effect sizes are apparent in this data set suggesting that other factors may be equally important. ‘Going missing’ is clearly an important factor but it is one of a constellation of related factors; consideration needs to be given to others (such as being subjected to or witnessing violence, poor school attendance, alcohol and drug use, etc.) as well as age, gender and placement type.

**In conclusion**

Every child is an individual who lives within a unique environment and context; it is not advisable to forecast risk in a formulaic way as any child could be at risk of CSE. However, when considering wider relationships with CSE, our findings suggest that consideration should be given to the following groups:

- Female children and young people;
- Those who are in residential care placements;
- Those who are aged 13 and over;
- Those who have been sexually abused prior to being looked after;
- Those who misuse alcohol or drugs;
- Those who have been subjected to or witnessed violence;
- Those who are reported missing for one night or more.