Harmful sexual behaviours tool kit for social workers

It's important that professionals working with children and young people who display HSB take a holistic approach, using a range of responses tailored to each child.

Consider:

- the child's age,
- the child's stage of development,
- the level of risk and need

This toolkit is some ideas of ways to support young people's holistic needs when harmful sexual behaviour is a factor.

Meeting the holistic needs of children aids a reduction of future risk of sexually harmful behaviour. For example, some children and young people's needs can be met through parental monitoring and work on positive social behaviour, while others need therapeutic support and specialist services (Hackett, Branigan and Holmes, 2019).

It's important to promote stable and supportive relationships, self-awareness, self-management and a healthy lifestyle.

Toolkit ideas:

Practitioners' interventions for harmful sexual behaviours can include:

Intervention suggestions	Tools
Assessment: clear understanding of the behaviour, • who was involved,	Signs of Safety mapping tool, and risk of harm matrix (first, worst, last) to identify how long there have been concerns, how serious they are and when the most recent concern was.
 when, what happened, how often, what was happening at 	Brook traffic light tool or Hackett's Harmful Sexual Behaviour Framework NSPCC (p15) to help identify to seriousness of behaviour.
the time – eg was mum at the shops / when on the play station together.	Leaflets for parents PP_Preschool_Traffic_Lights_Under_5_ENG.pdf (parentsprotect.co.uk) PP_Primary_Traffic_Lights_5_11_ENG.pdf (parentsprotect.co.uk)
There needs to be an understanding of family	Be mindful: does the child/young person have additional needs? Are they functioning emotionally much younger than their chronological age? Do they have an EHCP which will help

dynamics where HSB occurred and family context.

Need to understand family response and what boundaries have been in place / have previously been put in.

Clear understanding of YP / child's response to boundaries about behaviour required.

inform the best ways to support them and identify the impact of additional needs. You will need to adapt your approach accordingly.

Are they open to CAMHS/had any CAMHS involvement before?

Children may be denial (as might their parents). There is a need to understand this response (as it can affect future safety) – use respectful curiosity / third party scenarios / empathy.

Suggestions for assessment and planning https://www.csacentre.org.uk/csa-centre-
https://www.csacentre.org.uk/csa-centre-
prodv2/assets/File/Sibling%20sexual%20abuse%20report%20-%20for%20publication.pdf

SW completing the assessment – check in with yourself about how this makes you feel. HSB work is tough and you may need to talk it through with a colleague or your manager first. CFST HUBS are also a good way to explore how best to approach this sort of work.

Explanations. Why are we working together? e.g. ...has a problem with his/her harmful sexual behaviour. There are worries that This has meant that...... is working with him/her and their family to keep everyone safe.

Need to ensure that families, children and young people are clear about why we are working with and the possible outcomes. Need to think with family / young person what words to use to describe the behaviour.

Clear danger / worry statements and safety / wellbeing goals will help. May need different ones for different family members.

Need to be clear about any criminal processes and how the Children's Social Care and Early Help intervention fits with this.

Be careful not shame the young person. Be mindful that something might have happened to them that had led to them using this behaviour.

- 'has a problem with his/her harmful sexual behaviour' I
 would advice against using this sort of language.
 Remember it's the child/young person are separate to the
 behaviour they are using. most likely, the behaviour is a
 way to express an unmet need.
- *'There are worries that' is good other suggestion:*

Direct work with siblings on safety planning and why we are involved?	 'is displaying behaviour that makes us feel really worried. it makes us feel worried because its hurt others and could lead togetting into serious troubleetc' Words and pictures or other ways to help explain why we are working together to children Separate plans / discussions with siblings – what works for them? How will adults manage their safety? 3 houses to explore any worries and goals Consideration if they need to be directly spoken to about the worries? Words and pictures or other ways to help explain why we are working together to children Planning for the future and what contact will look like in the future between siblings if relevant
 Safety planning. Realistic and detailed safety planning. Can family live with the safety arrangements? How are we checking the safety is working? What are the family's/other professionals' views on this? Are they taking this seriously? 	Use of the SOS roadmap – plan rules section to cover home, school, other environments – will need a detailed breakdown of situations, and who will do what and when. Need to test out the safety plan and check it works. Can you role play/look at scenarios to think about what needs to be in place to create safety. Parents' Protect support with safety planning and ideas Family Safety Pack WEB JAN16.pdf (parentsprotect.co.uk) ACE model to behaviour can inform the planning. Avoid -controlexit (childs safety planning)
 Support networks (family-friends- relationships) How can they be part of the safety planning? To consider - What do they know? What do they need to know? 	Genogram/ecomap
Direct work with parents- support, understanding of HSB and future safety. Exploring dynamics in family and parents' attitudes to the HSB	Use of Parents book-Simon Hackett 'facing the future' Helping parents understand what is appropriate and strategies to use (Parents' Protect Leaflets) • PP Preschool Traffic Lights Under 5 ENG.pdf (parentsprotect.co.uk)

- PP Primary Traffic Lights 5 11 ENG.pdf (parentsprotect.co.uk)
- What are the parents' expectations of their child?
- What are the views of sex and relationships within the family.
- Cultural views towards sex and relationships

Statistically, DV is a core factor in children/young people using HSB. If this has occurred even historically, parents need to take ownership of this and be responsible in repairing this for their child.

HSB work needs to be done in a systemic way – working with those around the child / young person as well as the child / young person.

Harmful sexual behaviour is **relational** even though it is extremely harmful. It links to body, feelings and the mind. Relationships outside of the child/young person, historically or present will impact the use of this behaviour. The behaviour is about getting needs met – i.e. power and control. Need to understand what might be missing in the child/young person's life that other relationships can put back successfully?

'The Wall' <u>The Wall (slideshare.net)</u> is a good activity to demonstrate this. it shows where attachment points have been lost or disrupted that could lead to HSB.

Addressing issues within the whole context of the young people.

Building on the skills and ability the child or young person has. Focused on resilience – with an emphasis on identifying factors that improve a young person's strengths and enabling them to

Supporting their needs being met in a strength based and aspirational way. (Health, education, identity, social, relationships etc). If you understand what needs the behaviour was meeting, you can explore with young people alternative ways to meet those needs.

Be creative – relationship with the child/young person is key. What are their interests? What inspires them?

Understanding their world, relationships and influences - genogram/ecomap

understand what influences their behaviours and how they can manage it.	Understanding how they manage their emotions and impulses (current strategies, supporting them to develop new strategies, links to mindfulness apps, use of CBT ideas) Be mindful: does the child/young person have additional needs? Are they functioning emotionally much younger than their chronological age? You will need to adapt your approach accordingly.
Supportive – creating an environment where young people feel safe to talk. Have they close people to talk to, have they the space to talk?	
Life experiences. What have they experienced growing up? Child's lived experience and parenting experience/attachment	Timelines/roadmaps of life can be used but again be careful not to retraumatise children/young people. Keep checking in with them about where they are/how are they feeling? They may not be able to tell you so use yourself as a barometer for them: 'I wonder if you might be feeling', 'it looks like this is making you uncomfortable'
Understanding of the young person's sexual development and sexual behaviour- what do you already know? And what information needs sharing.	 Consider – Who can do this work? School nurse? Has the child / yp been part of sexual education lessons? Particularly key where children may not be in mainstream school – how is this work undertaken / level of understanding? How do the family talk about sexual development / relationships at home? What are the expectations / knowledge? Be mindful: What might have occurred for this young person in relation to sexual development? Be careful not to shame the child/young person.
Direct work on what sexual behaviour is ok and what sexual behaviour is not ok.	Cup of tea – consent video <u>Tea Consent - YouTube</u> Planet Porn resource – working with young people to unpick the unreality of pornography (ask CFST to send) <u>Thinkuknow: professionals</u>
Healthy sexual relationships. Work on consent	Healthy Healthy-Relationshi Creative Relationships Toolki p-Workbook.pdf Interventions.pdf

How to stay safe online- (sexting, use of pornography)	Thinkuknow: professionals Online Safety for Children - Tips & Guides NSPCC Childnet - Childnet
Reflective supervision to support the assessment / intervention	Use of CFST consultation hub.

