Sect Policy and Procedure – Harmful Sexual Behaviour (HSB)

Children who sexually abuse others or display sexually harmful behaviour

It is important that these procedures are applied irrespective of whether the victim is an adult or a child and whether the offence is contact or non-contact.

Where a child is responsible for harmful sexual behaviour or is a victim of sexual abuse, it is important to apply principles that remain child-centred. Harmful sexual behaviour by children must be recognised as being harmful to both the victim and the child or young person who displayed the behaviour.

A child who engages in harmful sexual behaviour may be suffering, or be at risk of significant harm and may be in need of protection.

Harmful sexual behaviour, when identified in children, must be taken seriously by all agencies. It is important to distinguish between behaviours which are experimental in nature and those that are exploitive and harmful.

What is Harmful Sexual Behaviour (HSB)?

Harmful Sexual Behaviour (HSB) is developmentally inappropriate sexual behaviour which is displayed by children and young people and which may be harmful or abusive. It may also be referred to as sexually harmful behaviour or sexualised behaviour.

HSB encompasses a range of behaviour, which can be displayed towards younger and older children, peers and adults. It is harmful to the children who display it as well as the people subjected to it.

Technology Assisted Harmful Sexual Behaviour?

Technology assisted HSB is sexualised behaviour which children or young people engage in using the internet or technology such as mobile phones and tablets.
This might include:
– viewing pornography (including extreme pornography or viewing indecent images and videos of children)
– sexting
– revenge porn

The role of professionals in recognising HSB

Children and young people demonstrate a range of sexual behaviours as they grow up and those behaviours are not always harmful

Sexualised behaviour sits on a continuum of 5 stages:
– **appropriate**: the type of sexual behaviour that is considered ‘appropriate’ for a particular child depends on their age and level of development
– **inappropriate**: this may be displayed in isolated incidents, but is generally consensual and acceptable within a peer group
– **problematic**: this may be socially unexpected, developmentally unusual, and impulsive, but have no element of victimisation
– **abusive**: this often involves manipulation, coercion, or lack of consent
– **violent**: this is very intrusive and may have an element of sadism

In assessing such distinction the Brook Sexual Behaviours Traffic Light Tool offers guidance about age-appropriate behaviour. The following diagram is part of a screenshot from the Brooks Traffic Light Tool, and shows behaviours for a young person aged 13-17 years old that fall within Green, Amber and Red categories:

**Green behaviours**

- solitary masturbation
- sexually explicit conversations with peers
- obscenities and jokes within the current cultural norm
- interest in erotica/pornography
- use of internet/e-media to chat online
- having sexual or non-sexual relationships
- sexual activity including hugging, kissing, holding hands
- consenting oral and/or penetrative sex with others of the same or opposite gender who are of similar age and developmental ability, young people must be 16 years of age
- choosing not to be sexually active

**Amber behaviours**

- accessing exploitative or violent pornography
- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress,
• withdrawal from friends, mixing with new or older people,
• having more or less money than usual, going missing
• concern about body image
• taking and sending naked or sexually provocative images of self or others
• single occurrence of peeping, exposing, mooning or obscene gestures
• giving out contact details online
• joining adult-only social networking sites and giving false personal information
• arranging a face to face meeting with an online contact alone

Red behaviours
• exposing genitals or masturbating in public
• preoccupation with sex, which interferes with daily functioning
• sexual degradation/humiliation of self or others
• attempting/forcing others to expose genitals
• sexually aggressive/exploitative behaviour
• sexually explicit talk with younger children
• sexual harassment
• non-consensual sexual activity
• use of/acceptance of power and control in sexual relationships
• genital injury to self or others
• sexual contact with others where there is a significant difference in age or ability
• sexual activity with someone in authority and in a position of trust
• sexual activity with family members
• involvement in sexual exploitation and/or trafficking
• sexual contact with animals
• receipt of gifts or money in exchange for sex

Social Services should refer to NSPCC.Org.Uk/HSBHealth ‘Responding to children who display sexualised behaviour’,
https://learning.nspcc.org.uk/health-safeguarding-child-protection

Principles

The following principles underpin effective child protection intervention in respect of children who sexually abuse others:
• In any intervention, the welfare of the child victim must always be paramount, and this overrides all other considerations
• The needs of children who abuse others should be considered separately from the needs of their victims
• The child involved in offending behaviour should be held accountable for his/her actions, with consideration given to his/her age, understanding and level of maturity. This may involve criminal prosecution.
• There should be a co-ordinated approach by child welfare and youth justice agencies. This should include appropriate communication between those professionals working with the victim and those working with the child who sexually abuses others.

Assessment of Risk and Need

Individual multi-professional assessments should be carried out in relation to both the victim and the child who engages in harmful sexual behaviour.

A full multi-disciplinary, inter-agency assessment must be carried out in respect of all children suspected of engaging with harmful sexual behaviour to decide the most appropriate level of intervention and assessed level of risk. A multi-disciplinary UNOCINI assessment should include the following:

Hackett’s (2010) continuum of children and young people’s sexual behaviours. This is a useful tool for initial determination of where a referred behaviour falls within this continuum. Normal and Inappropriate HSB normally require either no intervention or a short piece of educative work as do the lower level problematic behaviours. High level problematic behaviours, and abusive and violent conduct all usually require a full assessment and intervention which can be provided, where appropriate, by a local HSB service.
• Assessment of risk in line with the ‘Hackett Continuum in relation to normal, inappropriate, problematic or harmful/abusive sexual behaviour
• Identify the child’s needs
• Take into account age and stage of development
• Assessment of child’s environment and familial circumstances

The AIM 3 Assessment is designed to assist practitioners in Understanding Harmful Sexual Behaviour through a trauma informed lens

The Principles from the AIM 3 assessment are as follows:-

• Seek to understand the HSB within the context of the wider functioning /experiences of the young person
• Analyse the profile of the young person considering all their life domains
• Gain a profile of the young person to identify the specific areas for safety planning and intervention
• Review the AIM3 profile after intervention to assess progress and continue to target specific areas through bespoke , individualised interventions
• The overarching approach should be gender neutral and able to be used with race / culture allowing for unique considerations within items

Following multi-disciplinary assessment, consideration should be given to threshold for convening an Initial Child Protection Case Conference (Child Protection Case Conference Section 2).

The Child Protection Case Conference in addition should address the following:

• The nature and extent of the harmful sexual behaviour (expert professional judgement may be required).
• The child’s level of understanding and acceptance of the abuse.
• The need to complete a risk analysis in relation to the child and his family.
• The need to consider the broader risk in relation to public safety.
• The parent’s/carer’s attitude and level of understanding in relation to the abuse and their capacity and ability to protect against it.
• The child’s need for services and support to address any offending behaviour and consideration as to who is best placed to provide these.

When the threshold of significant harm is not met, the needs of the child must be considered through the multi-disciplinary Family Support UNOCINI Pathway and reviewed regularly.

When the child who has been involved in harmful sexual behaviour can no longer live at home, the Trust, in consultation with the family and other relevant
agencies, should consider arrangements for care, accommodation, education and supervision as per UNOCINI pathway assessment.

Intervention

Intervention programmes should be tailored to meet the individual needs of each child or young person, taking account of the level of the concerning behaviour under the Harmful Sexual Behaviour Framework.

Child Sexual Exploitation (CSE) and the link with HSB

CSE and HSB are seen as separate yet interlinked phenomena, with some distinct elements but the potential for overlap. CSE is more likely to be represented by sexual violence towards teenagers, often in a relational context, and frequently where young people are sexually exploited by either individuals or group offenders (adults or juveniles). HSB is envisaged as abuse that more often involves young people harming younger pre-pubescent victims of all genders in family or community contexts. Young people who sexually abuse other young people within the context of relationships, often described as ‘peer-on-peer’ abuse (Firmin, 2015), fit the definitions of both HSB as sexual behaviour which victimises others and CSE as exploitative, exchange-based abuse. Hackett et al (2016) therefore argue that it is appropriate to view HSB and CSE as distinct but overlapping forms of sexual abuse, as both share the elements of coercion, misuse of power, violence and lack of consent and choice.

Record Keeping

Accurate, clear and timely record keeping is important to evidence the proper consideration of all decisions. It is therefore imperative that a full record is made of all discussions, actions and decisions taken.