

**The use of secure
accommodation and alternative
provisions for sexually exploited
young people in Scotland**

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Executive Summary

Introduction

- This report presents the findings of research concerning the use of secure accommodation for young people involved in, or at risk of involvement in, sexual exploitation in Scotland. The research was commissioned by the Scottish Executive, and carried out by a research team from Barnardo's Policy and Research Unit between June 2003 and May 2004.
- The objectives of the research were to extend knowledge of: the extent to which sexual exploitation is a factor for young people placed in secure accommodation in Scotland; their experiences prior to secure placement; and the ways in which their needs are addressed whilst in secure units and after.
- The research sought to explore the views of a range of professionals on the efficacy of secure care in meeting the needs of sexually exploited young people. These included local authority managers, secure unit staff, community agency staff and children's reporters. Our aim was to contribute to the development of evidence based policy and practice concerning the use of secure accommodation and the feasibility of alternative provisions.
- The research grew out of work carried out by the working group on young runaways and children abused through prostitution (Scottish Executive, 2002). The working group highlighted the experiences of young people sexually exploited through prostitution in Scotland and the need for effective interventions to protect and care for them.
- The definition of the sexual exploitation of children and young people – their 'abuse through prostitution' – used in this study is:

Any involvement of a child or young person below 18 in sexual activity for which remuneration of cash or in kind is given to the young person or a third person or persons. The perpetrator will have power over the child by virtue of one or more of the following – age, emotional maturity, gender, physical strength, intellect and economic and other resources e.g. access to drugs.

The use of secure accommodation in Scotland

- In 2002/03 there was an average of 92 residents in secure accommodation in Scotland. The average length of stay in that year was just under five months. There was a significant variation in demand across Scotland varying from one or less admission per 10,000 12-16 year olds in four authorities, to around 25 admissions per 10,000 in Edinburgh and Dundee.

- The research shows that there are differences in policy and practice between areas in Scotland. Trends in reasons for admission vary both between local authorities and within local authorities over time, for example due to both changing and fluctuating patterns of behaviour and offending. The research also indicates that there are authorities that have taken a decision to manage risk in the community as far as possible. This includes care for young people involved in sexual exploitation.

Young people's involvement in sexual exploitation

- The research demonstrates that the nature of evidence about the involvement of young women in sexual exploitation varies considerably. *Direct evidence* may be based on knowledge, for example where young women have been seen in known 'red-light' areas by the police or other agencies. *Indirect evidence* may be based on suspicions about the actual involvement, or concerns about the risk of involvement, for example because of patterns of absconsion. Such variations may affect the assessment of risk. However, involvement, or risk of involvement, in sexual exploitation was commonly considered to be a factor for young women admitted to secure accommodation. The research underlined how little is known by both statutory and community based services about the involvement of young men in sexual exploitation in Scotland.
- Being prematurely 'adrift' from family life was probably the most significant immediate vulnerability factor for sexual exploitation amongst the young women identified by informants in this research. The other most common immediate factors were drug and alcohol misuse by young women - although the interplay between these factors and sexual exploitation was complex. The evidence is less clear in relation to young men, although it does suggest that there are similarities in the underlying and immediate vulnerability factors.

The use of secure accommodation in relation to sexual exploitation

- Evidence from local authority respondents suggests that in cases where secure accommodation is authorised for young women, repeated absconsion from either the parental home or residential care establishments is regarded as a strong indicator that they are either involved in, or at risk of involvement in, sexual exploitation.
- The decision to place young women in secure units where they had been involved in, or perceived to be at risk of involvement in, sexual exploitation was seen by local authorities to be in their best interests. However, this was sometimes related to a lack of suitable alternatives within the community. It was considered necessary because they were perceived to be out of adult control, in danger from others and/or a risk to themselves.

- There is a lack of data on the specific grounds for referral in relation to secure admissions. However, local authority respondents commonly cited the use of 'Falling into bad associations or exposed to moral danger' as the grounds for referral most often used with regard to young women involved in sexual exploitation.
- Young women placed in secure care in Scotland on these grounds often have histories characterised by underlying vulnerability factors. These may include neglect, abuse, family dysfunction and breakdown and the attachment and relationship difficulties associated with such problems. They have low self esteem, emotional difficulties and lack trust in supportive relationships with adults. As a consequence they are vulnerable to further abuse and self-harm is extremely common. Staff in secure units often experience them as 'attention seeking', 'manipulative' and 'hard work'.
- Staff in secure units estimated that between 40 and 90% of the young women resident in their unit at any one time had been exposed to some level of sexual exploitation. Whilst this range may be due to actual variations between units, the estimates of staff within units also varied. One possible explanation for this variation is different levels of understanding of the nature of sexual exploitation. Another may be varied practices in terms of assessment and intervention.
- Whilst there was widespread recognition that sexual exploitation was an issue for young people in secure accommodation, the ability of managers and care staff to address it either in a research interview, or in their work with young people, appeared to vary enormously.

The efficacy of secure care in relation to sexual exploitation

- The dominant view amongst secure unit respondents did not consider that secure accommodation was desirable for the majority of sexually exploited/at risk young women currently referred. It was not considered that physical security added any value compared to the same levels of intensive support and provision of programmes being available in the young person's own community. Managing risk in the community was generally preferred by local authority respondents, but was sometimes considered impossible because of lack of services/resources.
- Secure interventions are by definition short term and regarded by respondents, including secure unit staff, as being at best, only one stage in a much longer process. Their effectiveness was thought to be dependent upon the young person's needs being adequately addressed once they left the unit. While a number of the programmes in use were 'evidence-based', these tended to be cognitive behavioural interventions designed and evaluated in relation to a largely male population of young offenders. Access to individual therapy or

counselling - in which sexual exploitation, abuse and family relationships could be expected to be addressed - was very variable.

- Throughcare and aftercare were considered to present considerable challenges and were often thought to be poor. They were sometimes perceived to be so inadequate that it was feared any benefits that might accrue from a secure experience were liable to be cancelled out by the lack of continuity of care and effective follow through. The research found no evidence of systematic follow-up or tracking of young people who had been in secure accommodation.

Models of care and intervention

- The experiences of young people involved in sexual exploitation are complex and give rise to a range of needs which cannot be easily met by a single agency. The evidence suggests that an appropriate model of care to meet these needs will consist of five key elements: early intervention, safe accommodation, continuity of care, intensive support and multi-agency co-ordination.
- The evidence from this study points to a set of principles which should inform the process of making decisions about appropriate interventions for young people experiencing, or considered to be at risk of, sexual exploitation:
 - Intervention should occur as soon as possible after concerns have been identified.
 - Intensive contact with the young person addressing the key areas of vulnerability is vital.
 - Continuity and stability of care should be prioritised, and risk managed within the young person's home/community context wherever possible.
 - Parents and carers should be actively involved in planning and decision making about interventions, and additional support and guidance provided for them.
 - Safe accommodation should be provided at the lowest level of physical security necessary; and incorporate the highest level of relational security possible.
- Appropriate interventions may include intensive intervention in the community, specialist fostering, close support and, in some cases, secure care. Such interventions are not mutually exclusive, and in practice young people may experience more than one. However, every effort should be made to avoid discontinuity of care by minimising movement between placements, maximising the co-ordination of interventions and providing meaningful, joined-up throughcare when placement moves are unavoidable.

Recommendations

Policy

1. The Scottish Executive should take appropriate steps to promote awareness of and the use of existing guidance (Vulnerable Children and Young People: Sexual Exploitation Through Prostitution, Scottish Executive, 2003).
2. As recommended in the guidance, Child Protection Committees should develop and promote inter-agency protocols on working with children and young people who are vulnerable to sexual exploitation.
3. The Scottish Executive should consider engaging in consultation with local authorities and secure units in order to commission a feasibility study on the development of a co-ordinated approach to the management of secure placements.
4. Grounds for referral to a Children's Hearing should include specific reference to the involvement of young people in sexual exploitation in order to ensure that decisions are appropriate to their needs and that the effectiveness of interventions can be monitored and reviewed. Existing training for panel members should be refined to assist them in responding to the needs of sexually exploited young people.

Practice

5. The models of care and intervention for sexually exploited young people identified in this research should be used to inform the monitoring and evaluation of services provided by all relevant agencies, in order to identify and promote best practice in relation to the design and delivery of appropriate interventions and programmes.
6. Local authorities should be encouraged to establish working groups to review the impact of their practice on young people known to be sexually exploited, at risk or absconding. These should be used to develop effective early intervention, assertive outreach and intensive support in the community and foster good multi-agency practice.
7. Secure units should be encouraged to work in partnership to develop a consistent and coherent model of provision for young people who have been involved in sexual exploitation. This should cover placement needs, assessment procedures and options for programmes and intervention.
8. Secure units should be encouraged to ensure that appropriate accommodation and resources are provided for therapeutic work with young people who have been involved in sexual exploitation.

9. Secure units should be encouraged to take steps to ensure that a consistent level of CAMHS input is provided across all units. This should include the provision of training, clinical supervision and consultation for all care staff involved in direct work with young people who have been involved in sexual exploitation
10. Local authorities and secure units should be encouraged to ensure that the impact of programmes and direct interventions delivered for young people involved in sexual exploitation are rigorously monitored and where appropriate externally evaluated. Steps should be taken to involve young people directly in these processes.
11. The Scottish Executive should consider working in partnership with the Scottish Institute for Residential Childcare (SIRCC) to promote and support the development of training programmes targeted at non-specialist staff in secure settings. Such training should cover, working with sexually exploited young people, mental health (particularly self-harm), sexual health and relationships work with young people.

Research

12. The Scottish Executive should consider commissioning research with a wide range of stakeholders (e.g. local authorities, children's reporters, children's panel members, community based agencies, the police and young people themselves) to enable a more rigorous understanding of the extent of sexual exploitation of young people in Scotland. The findings of this study suggest that this may best be achieved by commissioning researchers with expertise in extrapolating prevalence estimates from partial secondary data.
13. The Scottish Executive should consider commissioning a small scale qualitative study to explore the experiences and service needs of young men involved in sexual exploitation. The study should involve a range of stakeholders including selected local authorities, community based agencies and young men.

1. Introduction

Background and objectives

- 1.1 This report presents the findings of a study concerning the use of secure accommodation for young people involved in, or at risk of involvement in, sexual exploitation in Scotland. The study was commissioned by the Scottish Executive, and carried out by a research team from Barnardo's Policy and Research Unit between June 2003 and May 2004.
- 1.2 The objectives of the study were to extend knowledge of:
- the extent to which sexual exploitation is a factor for young people placed in secure accommodation in Scotland
 - their experiences prior to secure placement
 - the ways in which their needs are addressed whilst in secure units and after.
- 1.3 In conducting the study we sought to explore the views of a range of professionals on the efficacy of secure care in meeting the needs of these young people. By doing so we hoped to contribute to the development of evidence based policy and practice concerning its use and the feasibility of alternative provisions.
- 1.4 The study grew out of work carried out by the working group on young runaways and children abused through prostitution (Scottish Executive, 2002). The working group highlighted the experiences of young people sexually exploited through prostitution in Scotland and the need for effective interventions to protect and care for them.

Research Strategy

- 1.5 The study commenced in June 2003 and was conducted in three stages:
- Stage one involved the development of research questions based on a review of relevant policy and research literature;
 - Stage two involved data collection in secure units, from local authorities and community based agencies and latterly from the Scottish Children's Reporters Administration;
 - Stage three involved detailed analysis of this data, and reflection on current knowledge about policy and practice in relation to the needs of sexually exploited young people.
- 1.6 Working through these three stages we were able to develop a provisional model of care and in turn focus on the principles and

practical considerations which should inform interventions for young people who have been involved in, or are at risk of involvement in, sexual exploitation. We present a range of options which may be used at various stages within a continuous care package underlined by common principles.

- 1.7 The research team was advised and assisted by research, policy and practice professionals from within and outwith Barnardo's. These included professionals within the fields of secure care and sexual exploitation.

Structure of the report

- 1.8 The report consists of a series of chapters which reflect the key stages of the research.
- Chapters 2, 3 and 4 focus on the review of literature, an explanation of our research methods and the context of secure provision in Scotland.
 - Chapters 5, 6 and 7 present our findings in relation to the involvement of young people in secure care in sexual exploitation, the practices of secure units, and the nature of the secure experience for young people.
 - Chapters 8 and 9 discuss the implications of our findings for policy and practice in this area.
- 1.9 Chapter 10 contains recommendations for future research, policy and practice.

2. Literature review

Alternatives to secure accommodation for children and young people abused through prostitution

- 2.1 In 2002 the Scottish Executive established a working group on 'young runaways and children abused through prostitution' to look at effective prevention measures and the promotion of good practice. National guidelines – published in July 2003 – state that:

'There is no single model of provision which will meet the needs of all children sexually exploited through prostitution. It is important that a range of services is available to young people, which may include outreach support, sexual health services, support to address substance misuse, counselling and mental health services (Scottish Executive, 2003a)'

- 2.2 As part of the process of support, the guidelines recognise that children and young people abused through prostitution might need access to safer accommodation. Although secure accommodation is one of the options available, it is acknowledged that this may not be the best alternative for all children and young people. It is often viewed as a punitive measure, which may increase the likelihood of children and young people abused through prostitution perceiving themselves as offenders rather than as victims (Lee and O'Brien, 1995).

'To criminalise young people ... is only to add to their social isolation and marginalisation. It does little to improve their image of themselves or to enhance their prospects of moving out of prostitution' (The Magistrates Association and the National Association of Probation Officers, cited in Cusick, 2002).

The needs of children and young people abused through prostitution

- 2.3 Along with other child care agencies, Barnardo's has done much in recent years to highlight the issue of young people abused through prostitution. Between 1998 and 2001 two Barnardo's publications *Whose daughter next?* and *No son of mine!* drew attention to the plight of some of the most vulnerable and marginalised young people in society, identifying key issues facing young people and influencing the way that the young people are viewed.
- 2.4 In spite of this, it is becoming more and more apparent that there are large gaps in the knowledge base, especially in relation to gaining accurate numbers of the young people involved in prostitution, the services available to them and the type of service that might be most effective at meeting their needs (Barnardo's, 1998 p.31).

- 2.5 The needs of children and young people abused through prostitution are complex and multi-layered. There is a need for intervention at an early stage to prevent children and young people becoming at risk of exploitation, as well as harm reduction and exit strategies for those already being sexually exploited (Barnardo's, 2000).
- 2.6 Through interviews with staff at a Barnardo's service in Wolverhampton, Scott, (2001) explored the case histories of 12 young people abused through prostitution. The analysis revealed a number of risk factors associated with being drawn into exploitation including:
- violent fathers or stepfathers
 - physical or sexual abuse within the family
 - mothers who were victims of domestic violence and/or dependent on alcohol/drugs
 - being disengaged from education by their early teens
 - being alienated from their families or communities
 - being hungry for attention
 - a history of 'going missing'
 - keen to 'escape' childhood and be regarded as adults
 - drug/alcohol dependence
 - being targeted and sexually exploited by a pimp.
- 2.7 Once caught up in prostitution, factors such as peer pressure, material rewards, drug use, fear of coercers, lack of self-esteem, denial of their situation, and in some cases a sense of power over 'punters' can act as barriers that make it extremely difficult for young people to want to move away from their involvement in exploitation (Barnardo's, 2000).
- 2.8 Research involving professionals and children and young people consistently identifies a number of practical, social and emotional issues that need to be addressed in order for people to successfully exit prostitution. Taylor-Browne (2002) interviewed 47 children and young people from across England who had been abused through prostitution. The problems they identified include:
- financial difficulties
 - drug addiction
 - single parenthood
 - lack of qualifications and training
 - housing problems
 - existing social networks
 - lack of family support
 - abusive partners/pimps/boyfriends
 - criminal convictions that prevent people taking on relatively low skilled work such as childcare.

- 2.9 Similar issues were identified by May, Harocopos and Turnbull (2001) through interviews with 55 adult sex workers. The study involved adults who had passed through an arrest referral scheme for drug dependent workers, almost half of whom had been placed in secure accommodation at some point in the past. Many stated that in order to give up sex work it was essential that they had somewhere safe and suitable to live. On the basis of information the women gave to the needs assessment worker at the project, referrals were made to services dealing with accommodation, sex work, problematic drug use, health and benefits.
- 2.10 Barnardo's (1998) suggests that a range of strategic responses are required to address the needs of children and young people abused through prostitution. A framework for intervention is proposed that incorporates primary prevention, targeted prevention, harm reduction and rehabilitation/recovery.

What does current service provision look like?

- 2.11 Recent research has revealed that throughout the UK there are fewer than 50 services working with young people abused through prostitution. These services have a very patchy distribution:
- 43 of the 50 services are located in England, and 42 of these are clustered in 13 major conurbations
 - only seven local government regions in the whole of Scotland, Northern Ireland and Wales have any service or provision at all.
- 2.12 The services that do exist can be divided into two broad categories: those that work partly or solely with young people abused through prostitution, and those who have expertise or experience in working with this client group (Phoenix, 2003). Of the services identified in Scotland, only two were dedicated exclusively to working with young people involved in prostitution. One of these is Barnardo's Streetwork Team and the other has ceased to exist. However, a number of other services were identified that either work with adults involved in prostitution and come across young people in the course of their work, or work with young people on a range of issues including prostitution (Directory of Sexual Exploitation Services, 2003). Barnardo's is also aware of a number of services across Scotland not identified during the course of the research, such as the FACE Project (Fighting Against Child Exploitation), an inter-agency initiative based in Dundee.
- 2.13 A survey carried out by Barnardo's in 1998 made contact with 48 agencies throughout England, Wales and Scotland via a directory of projects that provide sexual health services for prostitutes. The range of services provided included streetwork, outreach, drop-in facilities, clinics, contact with schools, colleges and residential homes, 39 of

which reported having contact with young people. (Barnardo's, 1998 p.34).

Is current service-provision effective?

- 2.14 Research regarding services working with children and young people abused through prostitution is limited. Of the information that is available, there appears to be a greater focus on the approach of the service rather than on outcomes for service-users, but a number of common themes emerge.
- 2.15 It is suggested that in order to be effective, interventions aimed at young people at risk of being abused through prostitution should be flexible, comprehensive, and be delivered by staff who are proficient at forming relationships based on trust and respect (Schorr 1989, cited in Cusick 2002). Joseph (1997) argues that there is no standard mechanism to facilitate change in individuals wishing to exit prostitution. Intervention design must take into account, '*the diversity and variety of human nature and experience,*' and should aim to foster security, stability, a sense of inclusion or belonging and a positive recognition of self and identity.
- 2.16 Pearce, Williams and Galvin (2003) found that the services most often used by young people experiencing, or at risk of experiencing sexual exploitation were local community based projects offering a range of legal, social and health services accompanied by outreach and drop-in provision.
- 2.17 Most people would agree that young people abused through prostitution have many needs in common with other groups of young people, but the priorities are often considered to differ between client groups. Shaw and Butler (1998) argue for a holistic social work response to children and young people abused through prostitution, as separate services aimed at narrowly focused client groups only serve to isolate those they wish to support. Children and young people abused through prostitution have much in common with other individuals, for example those who are homeless, living in poverty, have issues around substance misuse or whose health is at risk through lack of awareness. However, others maintain that services intended specifically for those abused through prostitution are more desirable because service users do not need to conceal or openly reveal their involvement in sexual exploitation (Maclver 1992, cited in Cusick 2002).
- 2.18 In 1997 NCH Action for Children set up the Community Alternative Placement Scheme (CAPS) to provide family placements as an alternative to secure accommodation for young people in Scotland. An evaluation of the first three years of the project followed the progress of 20 young people placed with CAPS and a comparison sample of 20 young people in secure accommodation. Outcomes were similar for

those placed with CAPS and those in secure accommodation in relation to behaviour, emotional difficulties, self-esteem and education, training or work. Social workers considered that the CAPS scheme had helped all of the young people to some extent, but the benefits were clearer for some young people than for others. When the research ended none of the carers had left the scheme or insisted on a placement being ended against the wishes of the young person and/or the professionals involved. The evaluation concluded that fostering could offer a distinctive service to some young people that face the prospect of secure accommodation, but is not a quick and easy answer. A key message from both young people and carers was that unless the young people felt valued and cared for, changes in behaviour were unlikely (Walker, Hill & Triseliotis, 2002).

What do we know about secure accommodation?

Routes into secure accommodation

2.19 Much of the research on secure accommodation to date has been based on units in England and Wales. In 1998 the Department of Health reported that of the three different legal welfare and criminal justice routes into secure accommodation, almost 29% of boys and 70% of girls were admitted via the welfare route. Placing children and young people in secure accommodation for welfare reasons raises a number of difficult issues relating to ethics and human rights, and a number of studies raise concerns about locking up young people who have not committed an offence (e.g. Goldson, 2002; O'Neill, 2001). These concerns are illustrated by the following quote:

Secure unit residential social worker

'I worry about it all the time ... you are touching on issues of human rights. They haven't done anything illegal but a magistrate deems that they need locking up for their own safety. For the kid it is their life and they think they should be able to do what they want with it ... a question that I ask myself is that as an adult if I did the same behaviour would I be locked up for my own good? In most cases I wouldn't. It's a question of rights and who has the right to decide what's best. It is really difficult.' (Goldson, 2002 p.111).

2.20 Goldson (2002) describes how placements in secure accommodation are something of a lottery, determined by a combination of four factors:

- the young person's vulnerability
- professional priorities and resources
- social class, race and gender of the young person
- geographical location.

- 2.21 A review by the Social Work Services Inspectorate (1996) revealed that it is not uncommon for children and young people to be placed in secure accommodation because there is no alternative option available. In 1995 the National Children's Bureau carried out a survey of 193 children and young people placed in secure accommodation in England (96 for welfare reasons). Managers believed that 60 of the children and young people concerned could safely have been placed in open accommodation (National Children's Bureau, 1995).

Therapeutic interventions

- 2.22 A social worker in a study carried out by O'Neill (2001) expressed concern that locking up young people who had not committed an offence is hard enough, but it becomes impossible to justify when no therapeutic intervention is provided (O'Neill, 2001 p.176).

Girl, aged 14:

'If you're vulnerable and you come in here it isn't going to make you invulnerable is it? Just because I'm in here isn't going to change being vulnerable when I get out. I have to learn that on the outside, not in here. I have to have help when I get out but it wasn't there when I came in and it probably won't be there when I get out.' (Quoted in Goldson, 2002 p. 124).

- 2.23 O'Neill describes a number of factors that make it difficult to offer specialist therapeutic services, including:
- the length of time it takes to arrange and wait for specialist assessments and services compared with the length of placement, especially where other agencies are involved
 - uncertainty concerning the period of a placement in secure accommodation
 - additional costs incurred by the placing authority
 - secure units being isolated from mainstream services
 - the time taken and confusion over sorting out who is responsible for arranging and funding the services (O'Neill, 2001 p.236)

Evidence of effectiveness

- 2.24 Evidence to indicate whether the role carried out by secure accommodation meets with expectations is restricted (Goldson, 2002), although previous research has indicated that secure accommodation is generally not a successful intervention for modifying behaviour such as prostitution and running away (O'Neill, 1999). Staff in O'Neill's study reported difficulties in evaluating the effectiveness of their practice, due in particular to a lack of clarity concerning the aims of the work. In addition, none of the units involved in the study had

any formal system in operation to monitor the progress of children and young people once they left secure accommodation.

- 2.25 Although secure accommodation does not represent a therapeutic setting, O'Neill considers that there is an expectation that skilled care and specialist therapeutic interventions will be provided for young people. However, the managers and staff that took part in the research admitted that they did not expect to be able to meet all the needs of a child or young person, and felt they could do very little to help the situation if the reason for referral lay in family or social circumstances. Secure accommodation staff interviewed by the National Children's Bureau (1995) considered children and young people abused through prostitution to be extremely difficult to care for and support effectively.
- 2.26 O'Neill (2001) interviewed 29 children and young people and 65 managers and staff members in six secure units across England. For most of the young people involved in the research, the problems that led to their admission to secure accommodation were only partly addressed by their placement. Some of the units used a standard care plan for each of the young people placed with them, and all 29 young people had unmet needs that required high quality care, in addition to those problems that resulted in their admission into secure care.
- 2.27 Seventeen of the 29 young people had been admitted through welfare routes, but it was felt that only four had gained any benefit from the placement. Exit plans for many of the young people admitted through welfare routes were often inadequate, and staff felt that placement in secure accommodation did not prevent continuation of the abuse when young people were released from the unit. Young people frequently returned to the same situations, risks and problems from which they were admitted. O'Neill (2001) also notes that there is emerging evidence that residential care itself presents a risk of initiation into prostitution.
- 2.28 Many young people commented that the harm they had suffered as a result of being placed in secure accommodation outweighed the benefits. Thirteen of the 17 young people admitted to secure accommodation through welfare routes had completed previous placements, demonstrating that prior admissions had *'failed to meet their needs, change their behaviour and protect them from the risks which had led to their admission, other than by containment on a short term basis'* (O'Neill p.256).

Impact on young people

- 2.29 In O'Neill's study self-concept was explored with each of the young people - using the self-perception profile for adolescents, a profile containing nine subscales that address eight specific subscales as well as global self worth (Harter, 1988). The findings revealed differences

based on gender, admission route and type of behaviour. The global self worth of those admitted through the welfare route was lower than those admitted through criminal justice routes, with the lowest scores being amongst those admitted for their involvement in prostitution or because they were self-harming. Two of the young people involved in prostitution had the lowest possible scores on the self perception profile.

- 2.30 The interviews also revealed that long term placements in secure accommodation have important implications for a young person's well-being and future life chances (O'Neill, 2001). All of the young people interviewed considered that the length of placement was an important issue for them, expressing anxieties about over-long placements, the likelihood of placement extension and an absence of positive future plans. A number of additional themes also emerged, including difficulties and fears relating to returning to live in the community, limited employment opportunities, problems in relationships with friends and family, lack of social support, social isolation, and the difficulty achieving or sustaining change. Many young people also reported suicidal feelings, a belief that they were powerless to achieve change and a sense of hopelessness about the future.
- 2.31 Goldson (2002) suggests that the needs of children and young people might best be addressed by *'intervening in the failing systems that create them, rather than resorting to the restriction of civil liberty. (p.24)'*

3. Research methods

- 3.1 This research is based primarily on semi-structured interviews with four clusters of respondents from local authorities, secure units, the Scottish Children's Reporters Administration (SCRA) and community based agencies. The data from these interviews was supplemented by the use of a selection of documentary sources.

Local authorities

- 3.2 All 32 local authorities in Scotland were invited to participate in the research. They were initially approached by letter asking them to nominate a social work manager (typically at service manager level) to act as a respondent for the authority. This was followed up by telephone and email. A total of 21 local authorities participated. These included the four major cities (Glasgow, Edinburgh, Aberdeen and Dundee) and a mix of small and large authorities, including central belt, rural and island authorities.
- 3.3 It was evident that the extent to which local authorities participated in the research was influenced by the relevance of the study to their experiences relative to pressures (often considerable) on staff time during the period of our research. Some authorities indicated at the outset that they had placed very few/no young people in secure care in the last three years and/or that they were unaware that involvement in sexual exploitation had been a factor in placements which had been made.
- 3.4 The purpose of inviting local authorities to participate was to understand the extent to which placements in secure accommodation had been used in response to concerns about the involvement of young people in sexual exploitation, perspectives on the utility of secure care and alternative interventions.
- 3.5 In the first instance two face to face interviews were conducted with social work managers from Edinburgh and Glasgow in order to design a topic guide for the remaining interviews (attached as Appendix A). The remaining interviews were conducted by telephone. The length of the interviews varied from 15 minutes to 60 minutes depending on the extent to which local authorities had used secure accommodation in general and specifically in relation to young people involved in, or at risk of involvement in, sexual exploitation. The extent to which the topic guide was used in full also varied according to these factors.
- 3.6 The interviews with local authority respondents were not taped. In each case a summary note of the interview was prepared for data analysis. As these interviews were not transcribed, the report does not contain illustrative quotations from the respondents.

Secure units

- 3.7 All six adolescent secure units in Scotland participated in the research. In the first instance visits were made to introduce the research to the unit manger. These visits enabled familiarisation with the unique context of each unit, assisted with the identification of suitable interviews and informed the preparation of an interview topic guide (see Appendix B).
- 3.8 A total of 21 interviews were conducted with staff working in secure units. This included staff based in the units and staff attached to them on a part time or sessional basis. The respondents included eight managerial staff (including unit managers and deputy unit managers), eight residential social workers, two teachers and three mental health professionals (including two psychologists and a mental health nurse). These interviews were semi structured and conducted within the units. They lasted between 20 and 60 minutes depending on the extent and relevance of each respondent's experience.
- 3.9 In preparing the topic guide and conducting the interviews, consideration was given to previous research on interviewing residential childcare staff about young people's experiences and perspectives. For example, Heron and Chakrabarti, 2003, highlight the importance of understanding the work of such staff not simply as 'tasks and duties', but in terms of the meaning which they place on events, including the behaviour of young people (see also Hicks et al (1998). Similarly, the care that is provided within secure settings needs to be understood not simply as routines and activities, but in terms of relationships between staff and young people. As Liebling et al (1998) suggest these relationships hold degrees of power and authority and degrees of trust and respect. As such they influence actions and behaviours within institutions.
- 3.10 The purpose of interviews with secure unit staff was to understand the nature of the provision and care at each unit (including the range of programmes and interventions), the extent to which young people placed in the units had been involved in sexual exploitation. We also sought staff views on the value of alternatives to secure placement for this population.
- 3.11 The interviews with secure unit staff were taped and fully transcribed (in all but four cases where summary notes were produced).

Scottish Children's Reporters Administration

- 3.12 Semi-structured telephone interviews were conducted with six children's reporters. These respondents were accessed via the research section at the SCRA. Those who participated volunteered to do so because they had experience of particular referrals where

secure authorisations had been made for young people involved in, or at risk of involvement in, sexual exploitation.

- 3.13 These interviews therefore focussed primarily on a discussion of those particular cases. As with the local authority respondents, the interviews were not taped. A summary note of each interview was prepared for data analysis.

Community based agencies

- 3.14 Semi-structured face to face interviews were conducted with staff in five community based agencies with knowledge and experience of working with young people involved in sexual exploitation primarily in non-secure settings. The interviews with community based agency staff were taped and fully transcribed.

Appreciative inquiry

- 3.15 All interviewees were approached as expert informants and our approach was that of 'appreciative inquiry'. In relation to topics/situations which may threaten or stretch informants' professional competence, or where there is conflict or uncertainty about what constitutes appropriate practice, 'appreciative inquiry' enables informants to engage with the research with a minimum of defensiveness and anxiety (See Liebling et al 1999, Scott and Parry-Crooke, 2001).
- 3.16 Such an approach involves an empathetic and supportive stance on the part of the interviewer so that interviewees do not feel judged or criticised. It is aided by 'lightly structured' talk and the use of generative questions which are framed in an appreciative way (e.g. What sort of care is most beneficial to young people who have experienced sexual exploitation?). Such questions do not replace those contained in the topic guide. Rather they provide a means of holding the interviewee in 'appreciative mode' while a particular topic is explored.
- 3.17 This was particularly important in relation to interviews with secure unit staff in order to establish a dynamic which enabled interviewees to talk about their 'best' experiences (albeit within the constraints of everyday life within a secure unit) rather than a presumed need to defend or justify their 'worst' experiences. This was consistent with focussing our study on identifying best practice and alternatives, rather than merely on perceived deficiencies with current practice.
- 3.18 In common with Liebling et al (1999) we found that the use of this approach meant that interviews were often conducted in narrative form so that interviewees told stories about the experiences of particular young people and their relationships with them. As with all qualitative research this inevitably raised questions about the extent to

which such stories could be taken to be ‘representative’ meaning that care would need to be taken when making generalisations about them. However, it also meant that the evidence generated by interviews was embedded in perceptions of actual experiences rather than abstract generalisations on the part of respondents.

Young people

- 3.19 The information about young people’s experiences in this study is based on the experiences and perspectives of these four groups of respondents and not on the direct participation of young people.
- 3.20 The decision not to conduct interviews with young people was made after the study had commenced for two reasons. First, we were concerned about the confidentiality implications of interviewing young people in secure units whilst simultaneously interviewing secure unit staff. We also considered that appropriate levels of privacy and confidentiality would be very difficult to achieve and that this could influence young people’s expression of views in a research interview with an unknown researcher. Second, when we began collecting data it emerged that a study of the experiences of young people in secure units based on interviews with them was being planned by Who Cares Scotland. We were therefore concerned about the implications of over researching a highly vulnerable population.
- 3.21 We are aware that our study therefore focused on the perceptions of a range of professionals involved in decision making and providing care for young people, rather than on the perceptions of young people themselves. We do not (and indeed would not) advocate that the perceptions of professionals should be seen as an alternative to the perceptions of young people or that they should be considered in isolation. As with any piece of social research, our inquiry was limited by particular constraints and circumstances and the evidence generated needs to be considered within the context we have described. However, it is worth acknowledging that the evidence from this study concerning the experiences of young people involved in sexual exploitation echoes the findings of those who have interviewed young people themselves (see for example Melrose et al, (1999)).

Data analysis

- 3.22 The data collected from interviews was analysed using the Framework method of qualitative data analysis developed by the National Centre for Social Research (Ritchie and Lewis, 2003). Framework enables a systematic approach to the analysis of qualitative data through the three key stages of the analytic hierarchy, data management, descriptive accounts and explanatory accounts.
- 3.23 In this study we used an abbreviated version of Framework which included three key stages. The first stage involved familiarisation with

the data whereby notes and transcripts were scrutinised and labelled. The second stage involved charting the data in relation to those labels which broadly corresponded to the research questions. Finally, key emerging themes and patterns were identified

- 3.24 A key challenge during the analysis of the data was to achieve a consistent approach which nevertheless acknowledged the different roles and stances of the four clusters of respondents and was sensitive to the varied conduct and focus of the interviews. The analysis from the four clusters reveals that while there is a consensus about many of the key issues emerging in the research, there are sometimes differences of perspective and emphasis which relate to their experiences of the use of secure care and other interventions.
- 3.25 We have used a series of case illustrations of young people to illustrate the experiences of young people discussed by respondents. Details of actual cases have been anonymised and altered to preserve confidentiality.
- 3.26 Our approach to analysis and reporting has been guided by the four principles contained in the framework on quality in qualitative evaluation devised for the Cabinet Office by Spencer et al (2003), viz. that research should be *contributory* in advancing knowledge and understanding, *defensible* in design, *rigorous* in conduct and *credible* in claim.

Ethical protocol

- 3.20 A bespoke ethical protocol (attached as Appendix C) was used in the conduct of this research.

4. Secure provision in Scotland

Legal provisions

- 4.1 Secure accommodation for children and young people under the terms of the Children (Scotland) Act 1995 is currently provided at six specialist residential care establishments across Scotland. These provide care and education on site and are subject to the Regulation of Care (Scotland) Act 2001.
- 4.2 There are two routes to secure care, commonly referred to as the 'offence' and 'welfare' routes. There are strict legal criteria for the placement of children in secure accommodation. The criminal route involves placements being made by an order of the Sheriff or High Court under the provisions of the Criminal Procedure (Scotland) Act 1995. The welfare route involves children's panels making an authorisation under the Children (Scotland) Act 1995.
- 4.3 Under Section 51 of the Criminal Procedure (Scotland) Act 1995, the courts can remand a young person awaiting trial on criminal charges to secure accommodation. This may include 16-17 year olds who are already subject to supervision requirements made by a children's panel. Through this process, such young people are committed to the care of the local authority and are therefore 'looked after'. However, children may also be sentenced by the courts to be detained in custody either wholly or partly in secure accommodation, rather than the adult prison system. These children are not 'looked after' by the local authority. Their placements are funded and reviewed by the Scottish Executive.
- 4.4 Under Section 70 of the Children (Scotland) Act 1995, children's panels may authorise the placement of children in secure accommodation provided that he '(a) having previously absconded, is likely to abscond unless kept in secure accommodation, and, if he absconds, it is likely that his physical, mental or moral welfare will be at risk; or (b) is likely to injure himself or some other person unless he is kept in such accommodation'.
- 4.5 Such authorisations must be ratified by the chief social work officer and the person in charge of the secure establishment. These officers may also make 'interim' placements of children in secure accommodation without authorisation from a children's panel.

Children's hearing system

- 4.6 The children's hearing system, established in 1971, is unique to Scotland and centres on the welfare of the child. In May 2004 the Scottish Executive announced a review of the hearing system with a view to developing and improving it, whilst retaining the fundamental

principles that underpin it (Further information about the review is available at <http://www.childrens-hearings.co.uk/review.asp>)

- 4.7 Children's reporters are the 'gatekeepers' of the system in that all referrals or risk or offending are referred to them in the first instance. Reporters undertake investigations and have statutory discretion as to the next step, including referral to a children's hearing where it is considered that the child is in need of compulsory measures of supervision. Grounds for referrals of children fall into two main categories: offence and non-offence. Grounds for the referral of children to a reporter and to a children's hearing are prescribed by Section 52 of the Children (Scotland) Act 1995 and cover a diverse range of circumstances, including where children are beyond parental control, exposed to moral danger, the victim of an offence, are likely to suffer serious impairment due to lack of care, are misusing alcohol or drugs, have committed an offence, or have failed to attend school without reasonable excuse.
- 4.8 In 2002/03 37,727 children were referred to reporters (the highest figure ever). In 2001/02 36,820 children were referred and in 2000/01 32,938. During this period around 20% of those referred to reporters were subsequently referred to a children's hearing (Scottish Children's Reporters Administration, 2003).

The secure estate

- 4.9 At the time of writing this report there were 96 secure accommodation places in Scotland. The six secure units are at St Mary's Kenmure in Bishopbriggs (31 places), Kerelaw School, Stevenston (24 places), Rossie School, Montrose (24 places), St Katherine's Centre, Edinburgh (7 places), Howdenhall Centre, Edinburgh (5 places) and The Elms, Dundee (4 places).
- 4.10 In May 2003, the Scottish Executive announced that an extra 29 places would be created by 2007. This will involve the redevelopment of the existing units at Kerelaw and Rossie and the creation of units at three further establishments, St Philips School, Airdrie (18 places), Good Shepherd, Bishopston (12 places) and Kibble, Paisley (18 places).

The nature of secure provision

- 4.11 Secure accommodation is seen as a means of providing both care and control. Children whose behaviour is considered to be out of control, such that they are at risk of placing themselves or others in danger, are placed within a locked physical environment as a means of providing security and safety. The Secure Accommodation Advisory Group, which conducted a policy review of secure accommodation in Scotland between 2000 and 2001 recognised that placement in secure accommodation involves 'loss of liberty and measures of control' (Scottish Executive, 2001).

- 4.12 One of the guiding principles adopted by the group was that 'secure care should not be seen as a 'last resort' but should be the response of choice, and must form part of a graduated scale of care and protection for children and young people for whom statutory intervention is deemed appropriate'. However, our research shows that in practice the placement of a young person in secure accommodation is commonly seen as a 'last resort' by both local authority managers and secure unit staff. In such circumstances, young people are placed in secure accommodation because everything else is deemed to have failed, leaving no other option. These were described as 'extreme level cases', where young people had gone through all the other 'various tariffs' and not 'bought into' other services or interventions. For one local authority manager every admission to secure accommodation amounted to 'a failure of community provision'.
- 4.13 Of course the use of secure accommodation for children and young people is not unique to Scotland. It is used throughout the United Kingdom and elsewhere in Europe. However, comparisons about its use are difficult because of different systems of residential childcare and criminal justice for children and young people. The terminology used to describe secure accommodation and its conceptualisation within different cultural and legal frameworks varies. In particular the relationship between welfare and justice, between how to deal with 'troubled' children and 'troublesome' children is blurred, contested and controversial. Like wise the need for and value of secure accommodation is open to question. Moreover, as Sabine Pankhofer has suggested, making a building 'secure' can have different meanings and does not tell us anything about what is actually happening 'in the building' (Pankhofer, 2003).

The secure population

- 4.14 There were 258 admissions to secure accommodation in 2002/03, of which three quarters were boys (Scottish Executive, 2003b). Two thirds of admissions were via children's hearings and one third through the courts, whilst a quarter came from their parental home, a quarter from residential schools and a fifth from children's homes. The average age at admission was 14 years and four months. The proportion of looked after children being admitted to secure units is extremely high, particularly when we consider that less than 1% of the general population have spent any part of their childhood in local authority care.
- 4.15 The available statistics suggest that older children tended to come from other secure care or young offenders institutions, and did so through the courts. Younger children tended to come from foster care or children's homes and did so through children's hearings.

- 4.16 While the 2002/03 statistics show an increase on the previous two years, admissions levels are at a similar level to the late 1990's. The main groups that have increased admissions in 2002/03 are boys, particularly those aged 14 and 15 (up over 50%), those admitted through the courts (nearly doubled and at 80 the highest level ever), those admitted from the parental home (up 45%) and those admitted from other secure accommodation (up 100%).
- 4.17 The average length of stay in secure accommodation in 2002/03 was just under five months. This was similar to 2001/02, but higher than years prior to that. Length of stay did not vary by age, but those coming via children's hearings stayed a month longer on average than those coming through the courts. In 2002/03 over a fifth of admissions were of young people who had previously been in secure accommodation. However, the gap between periods in secure accommodation has steadily increased from under two months in 1995/96, to five months in 2002/03. It has been suggested that this trend combined with the increasing length of periods spent in secure accommodation demonstrates that secure providers are retaining for longer those young people that they suspect will return quickly (Scottish Executive, 2003b).
- 4.18 There was a significant variation in demand across Scotland varying from one or less admission per 10,000 12-16 year olds in four authorities (Clackmannanshire, East Renfrewshire, Eilean Siar and Orkney to around 25 admissions per 10,000 12-16 year olds in Edinburgh and Dundee. It is recognised that this suggests 'different inherent needs in different parts of Scotland, but that it may also suggest differences in policy and practice between areas' (Scottish Executive, 2003b). Ongoing research about secure outcomes in Scotland suggests that three factors may affect local authority practice in relation to secure accommodation: attitudes to its use, the availability of alternative services and organisational arrangements (Social Work Research Centre, University of Stirling at al, 2004). Our research indicated such a variation does exist and that there were authorities which had taken a decision to 'manage risk in the community' as far as possible, including in relation to young women involved in, or at risk of involvement in sexual exploitation.
- 4.19 There was an average of 92 residents in secure accommodation in 2002/03, but the level varied between 83 to 105 during the year. This means that whilst demand was at capacity for the second half of the year, there were 37 days over capacity and a further 23 days at full capacity. Analysis of information collected from local authorities by the Scottish Executive in 2001 and 2002 indicates that there were 70 unmet places in 2001/01 and 71 unmet places in 2001/02 (Scottish Executive, 2003c). (Unmet demand defined by the number of young people who were authorised by panels, referred by the courts on remand or on an unruly certificate, or confirmed by local authorities (reason unspecified) as requiring secure but no place identified.)

- 4.20 Our research also shows that trends in reasons for admission vary both between local authorities, and within local authorities over time, for example due to changing and fluctuating patterns of behaviour and offending. Local authority managers also pointed out that it was common for young people to be admitted to secure accommodation for a mixture of offending and non-offending reasons.
- 4.21 The research also underlines the pressure on places. Local authority managers referred to cases where authorisations which had not resulted in an admission because no place could be found or where placements had been delayed. The non-availability of placements has also been identified as one of a range of reasons a placement may not be made after authorisation in an ongoing study concerning secure care outcomes (see Social Work Research Centre, University of Stirling et al, 2004). Local authority managers also commented on the ability of secure units to 'pick and choose' between young people, which meant that, 'the greatest need did not always result in the greatest care'. One manager added that secure care was effectively a 'free market' and that there should be greater co-ordination of placements (**See Recommendation 3**).

5. Secure accommodation and sexual exploitation

Defining sexual exploitation through prostitution

- 5.1 In its 2003 guidance on sexual exploitation through prostitution in relation to vulnerable children and young people, the Scottish Executive acknowledged that ‘sexual exploitation through prostitution’ is difficult to define (Scottish Executive 2003a). The guidance referred to the definition of children exploited through prostitution suggested by Barnardo’s as most accurately reflecting the reality for those involved:

Any involvement of a child or young person below 18 in sexual activity for which remuneration of cash or in kind is given to the young person or a third person or persons. The perpetrator will have power over the child by virtue of one or more of the following – age, emotional maturity, gender, physical strength and intellect.

Palmer, 2001

In the light of the responses of interviewees involved in this research this definition should probably be extended to include ‘*economic and other resources e.g. access to drugs*’ in the list of sources of power held by those who exploit young people through prostitution (**See Recommendation 1**).

- 5.2 It is generally recognised that ‘informal’ prostitution ‘may include the provision of sexual services in exchange for some form of payment, such as money, drink, drugs or consumer goods or even a bed and a roof over one’s head for a night’ (Scottish Executive, 2003a). This research confirms that such a definition appropriately describes many of the sexually exploitative experiences of young people in secure accommodation.
- 5.3 However, the terms used by respondents, and the experiences of young people described by them, indicate that it is necessary to develop this definition further. What emerges from their descriptions is a spectrum of sexual exploitation for children and young people from what is generally referred to as ‘child sexual abuse’ at one end to ‘formal prostitution’ at the other. At all points on the spectrum *abuse* is involved. As Hayes and Trafford (1997) note, when discussing children involved in prostitution we are, in essence, talking about “the sexual abuse of children by men prepared to pay for the privilege of assaulting them”. One informant with experience of working with sexually exploited young people, illustrated the complexity of the spectrum, and in particular the problem that children who are being sexually exploited may be under the illusion that they have chosen to participate:

'Some people think that child prostitution and child sexual exploitation are the same thing...it's not the same thing, it's part of it but (prostitution) is not the only way that children can be sexually exploited, but then we have this debate with other agencies that work with children that are sexually abused but for children who are sexually exploited, there is the illusion, they are under the illusion, the misapprehension that they have chosen to do that, [...] that's the difference between sexual abuse and sexual exploitation. Yes sexual exploitation is sexual abuse, but if children think that they have chosen to do it, consented to it, then...you have to work with these children in a different way to ones that think they've been abused, it's a different mindset.'

Community agency worker

Case illustration one

Carmen was a young woman of 15 when she went into secure. She'd grown up with her mum and little sisters and a series of violent 'stepfathers'. The family had been in and out of refuges. They'd witnessed a lot of domestic violence. She was also sexually abused by one of her mum's partners. Social work became involved and she was taken into care and moved placements five or six times in a few years. She ended up in a children's unit and was running away quite a lot and started to hang around streets at night, and meeting with young guys and having a lot of unprotected sex, and really putting herself at risk. I don't think she'd have seen it as prostitution, but gradually she got involved in a group of people where she was definitely being sexually exploited. She ran away one night from the unit and was raped and she was then sent to secure. It was for her protection but she interpreted it as "I ran away, I was raped, I have been locked up because of it".

She used to worry about her little sisters but her experience of care was so poor, she was so negative about care to the point where regardless of what happened to her sisters she would never want to see them in care.

Carmen continued to have sex illicitly with boys while in the secure unit. It wasn't a safe place for her, it wasn't made safe and none of her issues from outside were addressed: in terms of how she felt about herself, her body, giving consent, assertiveness and that kind of thing.

- 5.4 Child sexual abuse is usually conceptualised as the victimisation of children by adults, either within or outwith the family. Perpetrators sometimes share, exchange or sell children. This is the way younger children are abused through prostitution. In adolescence prostitution may involve a young person selling sex on the streets for money. In

between these two forms of exploitation young people (predominantly girls) may be involved in a range of less well recognised, but equally exploitative, sexual relationships. These may involve the receipt of money, drugs or accommodation in exchange for sex with one or more men. They sometimes involve a single sexual partner using emotional or physical coercion, but perceived by the young person as a lover and protector rather than as an 'abuser'.

- 5.5 The spectrum of sexually exploitative experience evident amongst those in secure accommodation in Scotland is accompanied by a spectrum of vulnerabilities. While some element of coercion or intimidation is common, the involvement in exploitative relationships is most significantly characterised by choices born out of the social, emotional and economic vulnerability of the young person (see Chapter 8, Figure 3.).
- 5.6 The evidence from this study suggests that in considering routes to involvement in sexual exploitation, it is necessary to make a distinction between what might be described as *underlying vulnerability factors* which are related to underlying circumstances in the young person's history, and *immediate vulnerability factors* which are related to the immediate circumstances in which they find themselves.
- 5.7 Examples of underlying factors identified by respondents included 'chaotic' or 'dysfunctional' family environments characterised by factors such as parental relationship breakdown and domestic violence. Young people may have been physically and emotionally neglected or abused, or they may have been sexually abused. One or both parents may have been involved in drug or alcohol misuse. Less common, but nevertheless evident, were children whose mothers had mental health problems, and children whose adoptive placements had broken down. Thus underlying vulnerability factors may involve a combination of family *dysfunction* and/or family *abuse* (see Figure 1).

- **Figure 1: Sexual exploitation of young people: Underlying vulnerability factors**

-
-
- Family *dysfunction* factors
-
- parental relationship breakdown
- domestic violence
- parental drug/alcohol misuse or addiction
- parental mental health problems
- placement breakdown
-
-
- Family *abuse* factors
-
- physical and emotional neglect and abuse
- sexual abuse
-

5.8 The outcome of these experiences was that young people were often alienated from their parents and often had no significant attachment to a caring adult. Being prematurely ‘adrift’ from family life was probably the most significant immediate vulnerability factor for sexual exploitation amongst the young people discussed by respondents.

‘It goes right back, I mean her dad was abusive and very controlling, abusive sexually and physically towards (her) and emotionally and she was never a stage in her life where she could relate to her mum either, so she had nobody really to go through her that way and the big thing for (her) was protecting her siblings as well, she was the oldest trying to protect the abuse that was going on in the house and mum didn’t help in the beginning she more or less accepted the abuse that was going on which led to anger towards her later in (her) life but she had always just internalised everything and that actually came out in the self-harm so for her to approach somebody and trust an adult was huge as it was with most of the kids because they have been so let down, usually with their own parents their mum and dad, that they just don’t trust adults at all...’

Residential social worker

‘Her mother also had the same history. Her mother was in care, had been in secure units as well and no matter what happened to her, her mother was always ridiculing her. The only stable person she had in her real life was her granny. Her granny worked in residential care so she had the problems of people knowing about her grand-daughter, working in residential care and trying to give her the care and level of security but it was always superficial, still had to reduce that resource but then she would run away. She took her brother to the red light district and kept him at the bottom of the lane while she did the turn and then they would get the money, so no matter what was in

place attachment was never there so the pair had to strive to get it, you really can't because the damage was done from very early on, to see she had been abused and so it was never there and it was awful hard.'

Secure unit manager

- 5.9 The other most common immediate factors (see Figure 2) identified by respondents were drug and alcohol misuse - although the interplay between these factors and sexual exploitation was not straightforward. Young people were described as exchanging sex for drugs or alcohol rather than money, or selling sex for money in order to fund drug abuse or addiction. Sexual exploitation could result from drug or alcohol induced vulnerability in a particular social setting, or drugs could lead to prostitution to feed a habit.
- 5.10 In terms of young people entering secure accommodation, sexual exploitation was invariably linked to absconsion by all respondents. This underlines the link between the two in the emerging findings of the working group on Young runaways and children abused through prostitution (Scottish Executive, 2002). However, it is important to recognise that absconsion is a pattern of behaviour and as such has a circumstantial rather than any clearly causal link to sexual exploitation. Young people may abscond from the parental home because of factors such as those identified above, or from residential establishments because of a failure in the care provided. They do not necessarily abscond in order to engage in prostitution, but sexual exploitation may result from the vulnerability created by having nowhere to go and the associations that are made in that context.
- 5.11 Immediate vulnerability factors may also involve circumstances within the family or within peer groups. Respondents identified circumstances in a child's family which could lead directly to sexual exploitation, for example where a mother or an older sister was already involved in prostitution or where a sexually abusive relative sells, or exchanges, a child. They also identified circumstances where young people had become involved through peer groups both within and outwith residential care.

- **Figure 2: Sexual exploitation of young people: Immediate vulnerability factors**

- - drugs
 - alcohol
 - going missing
- - parental involvement in prostitution
 - sibling involvement in prostitution
 - peer group involvement in prostitution

5.12 It is important not to over-determine the relationship between childhood sexual abuse and sexual exploitation through prostitution. Previous studies have suggested that the experience of rape and/or childhood sexual abuse can be a contributory factor in the pathway to prostitution (for example Silbert and Pines, 1981). However, it would be entirely wrong to interpret such underlying factors identified by respondents in this study as straightforwardly causal factors, and nor did they seek to do so. Rather they recognised prior abuse as one in a whole constellation of factors that had paved the pathways to sexual exploitation of young people admitted to secure accommodation.

Involvement in sexual exploitation

5.13 Evidence from respondents in this study suggests that the level and nature of involvement in sexual exploitation varies amongst young people placed in secure accommodation for whom it has been identified as an issue. The experiences of young women and young men are apparently differentiated by gender, as is the extent to which those experiences are acknowledged. However, as the information respondents were able to provide in relation to young men was extremely limited – and involved more guesswork than knowledge – we will of necessity concentrate here on the experiences of young women (**See Recommendation 13**).

5.14 Exploitation may have involved young women associating with individual men, or groups of men, and exchanging sex as a form of currency for obtaining drugs, alcohol or accommodation. In such circumstances young women may have exchanged sex for money, but not in the kind of stereotypical prostitute-client relationship often associated with adult prostitution. They may be considered to be on the ‘periphery’ of prostitution.

5.15 Alternatively, exploitation may have involved prostitution controlled by adults. Young women may have been sold for sex through contacts in the community, either through the family, or through adults in the

community associated with the prostitution scene. There was a widespread concern amongst respondents that adults either individually or in groups had targeted residential childcare establishments, including secure units, known to accommodate vulnerable young people with a view to 'grooming' them for prostitution and in some instances using young people to do so, for example by supplying them with mobile phones.

'We have had (pimps) phoning up, we have had them up at the gate, we have put them off the campus, we have had them coming up in cars.'

Secure unit manager

- 5.16 Young women's involvement in prostitution might be connected to a relationship with an older boyfriend. One unit manager suggested that relationships with an older 'boyfriend' were common amongst young women where active involvement in prostitution was known to have occurred. These men were said to have been 'using' or 'pimping' them to support their own drug use.

Case illustration two

Kerry was 14 when she was placed in secure. Her problems had escalated very quickly and social work interventions had no impact on her behaviour. She denied involvement in prostitution, but there was circumstantial evidence that she had been involved. She repeatedly absconded from home and frequented known red light areas. She was obtaining large sums of money and associated with a known 'pimp'. At no point did she acknowledge her involvement. She said she was in love with the pimp and that they were going to get married. The pimp was known for targeting vulnerable young women, but there was insufficient evidence to charge him. As a result of these circumstances a hearing had to be held very quickly and despite the fact that she had not previously been under supervision, she was placed in secure accommodation. She came out of secure at 16 and became reacquainted with the pimp. She is now homeless on the streets and taking drugs.

- 5.17 However, some young people were clearly organising activities independently of adults (one young woman was known to have hired a hotel room for the weekend; another was known to have used the internet). In such circumstances they may have operated with another young person, male or female, acting as a lookout for them. Involvement sometimes appeared to have resulted from peer group pressure in residential care establishments, including secure units. This could involve young women 'grooming' other young women.

‘Peer associations in residential care can in some respects open up the door to a behaviour pattern for absconding and opening up the behaviour pattern to absconding, some go the route to certain associations with the friend, drugs or alcohol or whatever and then open up the road to sexual activity.’

Residential social worker

- 5.18 The nature of evidence about the involvement of young women in sexual exploitation varies considerably. *Direct evidence* may be based on knowledge, for example where young women have been seen in known ‘red-light’ areas by the police or other agencies. *Indirect evidence* may be based on suspicions about the actual involvement, or concerns about the risk of involvement, because of patterns of absconion. Concern about possible involvement might be connected to young women reappearing with money or clothes, or based on information about people they are known to have associated with.

‘We get a lot of historical information that comes with the young person when they come here, reports but there is often not a lot of hard and fast evidence apart from the young person’s behaviour, perhaps the circles that they are moving in, the fact that at times they have maybe had access to finances that have been questionable or have been disappearing for days at a time or have provided with drugs or alcohol or whatever. All these things kind of pull a picture together that leads you in that direction plus the young person’s behaviour that can be quite provocative, young people that have sexually transmitted diseases, pregnancy but in terms of that for a young person that you can actually say that you definitely knew was perhaps involved in prostitution for example that’s quite slim and everything else indicates in that direction yes.’

Secure unit manager

‘In my experience the family relationships tend to have been fragmented, the circle of friends who they are with, nobody quite knows who they are and as [...] was saying they are basically disappearing and you are just having bits of hearsay and I think it’s that that actually raises people’s concerns, that they are disappearing, they are coming back under the influence of a substance. They look very unkempt, or they are coming back with condoms on them, or they had fights or whatever. So I think it is quite a lot of circumstantial things that tend to raise social workers’ concerns obviously, or carers, because it tends to be them that will make the referral to secure. So I think it is that that can possibly suggest sexual exploitation as opposed to a young person who’s sexually active within her peer group, or his peer group, or whatever. There is also obviously the situation where a young person may be in a relationship with an adult male, or female sometimes, that is kind of another strand which can be termed

as abusive or exploitative. But in terms of prostitution it tends to be a whole... and the money thing. Unexplained money, unexplained new clothes, mobile phones, disappearing in one set of clothes and coming back in a totally different set which are totally inappropriate, or not what that young person would normally wear.'

Secure unit manager

- 5.19 Concern may simply be based on the fact that young women will have had to seek a means of surviving whilst absconding, and will therefore have been vulnerable to sexual exploitation. For one local authority manager any young woman absconding must be considered to be at risk of sexual exploitation, and the manager of a community based agency indicated that it was always assumed that sexual exploitation might have taken place when young women presented themselves to the project.
- 5.20 The research underlined that far less is known in secure services about sexual exploitation amongst young men (**See Recommendation 13**). Whilst it was accepted that involvement, or risk of involvement, in sexual exploitation was almost invariably a factor for young women admitted to secure accommodation, local authority respondents offered few examples of young men. Indeed, it was suggested by one respondent that the problem was less recognised amongst young men because of gendered 'moral' attitudes to sexual activity amongst young people. The sexual activities of young men being generally regarded as being self-instigated and unproblematic, while those of young women were the focus of far more concern in relation to consent/coercion, sexual health, self-esteem, teenage pregnancy and 'reputation'.
- 5.21 However, some local authority respondents, particularly those from the larger cities did provide some information about young men's involvement. As with young women levels of evidence varied. Direct evidence might be based on known involvement in the 'rent boy' scene, or association with adult males involved in that scene. Indirect evidence could be based on suspicions about absconsion – 'Where are they going? We don't know?' – young men sometimes disappeared and then reappeared with money or clothes.
- 5.22 As with young women, the involvement of young men could vary both in terms of its regularity and the forms of payment involved. Whilst some young men were known to have exchanged sex for money, for example by going with men in cars, they were also known to have exchanged sex simply for sweets or cigarettes. Whilst there was evidence that young men's involvement could be instigated by other young men, young men and young women involved in sexual exploitation were also described as supporting and 'looking out for' each other.

- 5.23 Research respondents' accounts suggested that young people's attitudes to sexual exploitation are complex. Young women may openly acknowledge that they have been involved in sexual relationships with men. However, they would not necessarily see those relationships as exploitative, and indeed would invariably deny, sometimes adamantly, that they had been involved in prostitution.

'She [...] wouldn't see it as a form of prostitution but what she would do is she would abscond, meet young men, go back with them basically for a roof over her head for a night. She didn't view it as a form of prostitution, she would view it as a form of someone giving her time and attention.'

Residential social worker

They sometimes claimed that relationships with older men organising their prostitution or persuading them to 'work' were entirely consensual, romantic relationships. They would not necessarily see themselves as at risk in any way, romanticising what were in fact 'contradictory and predatory experiences' (Melrose et al, 1999). In addition they might deny involvement in prostitution because of fears about punishment.

- 5.24 Young men were even less likely to be open about their involvement, and even where there was evidence of involvement would be unwilling to discuss it.

'I can think of one young man who there was a lot of evidence, circumstantial again and it was broached at the placement meeting because we wanted to be quite upfront and say, you know, we know that this is why you are here, this is what the concerns are and just would not under any circumstances, yes he worked with us, he worked with us on his alcohol, but just would not even go there.'

Secure unit manager

'Young men are extremely difficult to unearth in that respect because for a variety of reasons. They keep it more close to their chest. The only way you would see them being or acknowledging they were sexually exploited is a sense that they frequented certain areas that you knew were associated with the rent boy scene or if they had a number of older male friends that they were unable to give you a certain definition on why they were friends. [] Young men are more difficult. [] They acknowledged that they were [] in the areas that you would consider to be the rent boy scene so there is always supposition, very rarely proven, young men will very, very rarely admit they have been involved in it.'

Residential social worker

Within secure units it was suggested that the 'macho culture' may inhibit young men from revealing involvement in sexual exploitation and they may be reluctant to 'show their emotions' echoing the experiences of Rose (2002):

'I think the difficulty is that young boys try to keep things in because they keep it to themselves more because they don't want other people to know because it makes them weak.'

Residential social worker

Case illustration three

Duncan was just short of 15 when he came here. Escalating self-harm while in foster care had preceded admission. He hadn't talked about what was going on for him previously, and he certainly wasn't going to let on while he was in here. He just put his head down and did his time – like a lot of the lads do. So all we ever knew was from the reports that there was an older man in the picture and that he might well have been in the lad's life since he was 11 or 12. The implication was that he'd been 'grooming' him. But Duncan had never made any kind of accusation, and it was to this man that that he'd go most times when his carers had reported him missing. The foster family had found out he was gay and the thing that concerned them was he was talking to people on the phone - whether through a chat line or whatever – and arranging to meet them. He was a bright lad, I think he was just biding his time until he was 16. He seemed pretty much in control – except for the self-harm of course, that was the only thing that told a different story.

- 5.25 Respondents suggested that the issue of young men's involvement in sexual exploitation raised difficult issues about their sexuality, and that they might be unwilling to discuss it for fear of being labelled as gay.

'Also too young men, a lot of them are very much, I wouldn't say confused with their sexuality, but they don't want to be labelled by their peers. They don't want to be labelled, they don't want to be seen as homosexual...'

Residential social worker

- 5.26 The evidence from this research is consistent with previous findings related to the involvement of both adults and children in prostitution, including research conducted in Scotland (Buckley and Brodie, 2000). O'Connell Davidson (1998 p.5) has argued that people become involved in prostitution 'because the economic, political and social circumstances in which they live make it either the best way or the only way of subsisting, or they are people who are forced into prostitution by a third party'. The involvement of third parties may

vary from criminal organisations trafficking girls and women, to individual young men persuading or coercing their girlfriends into sex work. Where children and young people are targeted and groomed for prostitution, there is often a relationship where corrupt forms of 'care' are extended by the abuser or pimp. There exist sub-cultural contexts involving extreme poverty, in which prostitution is inter-generational and prostitute mothers act as pimps, albeit that the relationship is on an entirely different basis and often one of mutual dependence.

- 5.27 All of these factors are to some extent present in the spectrum of sexual exploitation identified in the course of this research. It is important that we recognise that the role of the pimp is not ubiquitous. The evidence here demonstrates that social, emotional and economic factors can lead young people into prostitution without the brokerage of any third party. Moreover, the presence of the stereotypical pimp in Scotland was contested by some respondents in this study. What this suggests is that pimping may involve a range of activities and connections to young people involved in sexual exploitation both within and outwith the family.

Mapping sexual exploitation in relation to secure accommodation

- 5.28 This study underlines the need to develop more rigorous means of understanding the extent of sexual exploitation amongst young people in Scotland (**See Recommendation 12**). It offers some evidence of the nature of the phenomena in relation to young women, but far less in relation to young men. It is also only concerned with one section of the population i.e. those young people for whom secure care has been authorised.
- 5.29 Evidence from local authority respondents suggests that sexual exploitation is a common factor for young women for whom secure accommodation is authorised, and that patterns of absconion from either the parental home or residential care establishments is a strong indicator that they are either involved or at risk of involvement. Ongoing research about secure outcomes in Scotland has also identified that amongst secure authorisations arising out absconion in 2003, concerns about risk for young women typically centred around sexual behaviour and vulnerability and that this was also the case in relation to some young men (Social Work Research Centre, University of Stirling, 2004). More than half the local authority respondents indicated that there had been either direct or indirect evidence of involvement (or risk of involvement) in sexual exploitation amongst young women placed in secure care in the last four years.
- 5.30 There is a lack of data on the specific grounds for referral in relation to secure admissions. However, local authority respondents commonly cited the use of 'Falling into bad associations or exposed to moral danger' as the grounds for referral most often used with regard

to young women involved in sexual exploitation. This does not however assist in establishing the extent of the use of secure accommodation for young women involved in sexual exploitation (or indeed the incidence of sexual exploitation amongst young women more widely) because the consolidated figure for children and young people referred on these grounds may include those considered to be in other dangerous situations or those for whom sexual exploitation is only one of a number of factors (Buckley and Brodie, 2000). Indeed, Buckley and Brodie suggest that 'the classification of referrals to the Reporter may have a crucial role in the failure of the system to pick up on the incidence of child prostitution within Scotland (Buckley and Brodie, 2000 p. 133-4)

- 5.31 Secure unit respondents' estimates of the proportion of young women in secure accommodation who had been involved in sexual exploitation varied. Typically estimates were in the region of 75%, although estimates varied from 40% to 90%. Whilst this range may be due to actual variations between units, the estimates of staff within units also varied. One possible explanation for this variation is different levels of understanding of the nature of sexual exploitation. Shaw and Butler (1998) have argued that research in this area is affected by problems with definitions which tend to create different estimates of the scale of young people's involvement in prostitution. Another explanation may be varied practices in terms of assessment and intervention. The evidence from all respondents in relation to young men is far more limited, but does point to it being a factor in individual cases.
- 5.32 Mapping the full extent of the use of secure accommodation in relation to sexual exploitation is difficult for a variety of reasons. These include the lack of monitoring by local authorities of young people's involvement in sexual exploitation in relation to placements in secure accommodation (with few exceptions) (**See Recommendation 6**), variations in the management and monitoring of secure placements (see also Social Work Research Centre, University of Stirling et al, 2004), the lack of explicit referral grounds relating to sexual exploitation (**See Recommendation 4**) and the nature of evidence about young people's involvement in sexual exploitation. The fact that involvement in sexual exploitation may only emerge after a young person has been admitted and the different approaches to and levels of understanding between units and between different members of staff compound the problem.

6. The secure units

- 6.1 The six secure units varied considerably in terms of size, accommodation, staffing and other resources. There was also a wide variation in the conception of the role of the units, and consequently in the nature and focus of interventions for all young people, including those for whom sexual exploitation was a factor. A key difference was the extent to which units seek to engage in formal work with young people, which resulted in variations in both assessment and the subsequent use of programmes and interventions. Two of the larger units included specialist units that worked particularly, though not exclusively, with sexually exploited young people, one a trauma unit and the other a girl's only unit.

Staffing

- 6.2 Staffing levels varied depending on the size of units, though a common perception was that units were over stretched and understaffed given the intensity of the care needed, and what staff identified as the 'emotionally draining' nature of the work with young women. When problems occurred with individual residents, needs could escalate very quickly:

'I would like more staffing first of all because we have three staff on each shift but if somebody is dealing with a one-to-one situation, somebody is with the classes and they go up and they talk to them, and sometimes the floodgates open and they have to stick with it, they can't come back down [...] then they [the others] start vying for attention, they are very attention seeking and they are very emotionally draining.'

Secure unit manager

- 6.3 The knowledge, confidence and skills of care staff varied. Some care staff had no formal qualifications. Lack of confidence in dealing with mental health issues, self-harm and sexualized behaviour was common. Where young people displayed challenging behaviour, care staff found it helpful to draw on the expertise of staff with psychiatric or psychological training, including from external agencies.

'We are not sort of professionals in (mental health), but you can usually very quickly gather that there is some concern because young people are being observed on such an intensive basis.....We know what the behavior is because that's why they have been placed in a secure unit, but what is it that is underlying that and what is it that is motivating them?'

Residential social worker

'[M]aybe a young person for example is displaying a lot of kind of sexualized language towards staff, is sexually threatening towards staff, and I think that is when the referrals come into

us because they are concerned about what is underneath that, what is underlying.'

Mental health professional

- 6.4 Care staff valued the opportunity to draw on such expertise through having mental health professionals as part of the multi-disciplinary team. They also pointed out that such professionals acted as a 'bridge' between social and psychiatric services and ensured swift access to mental health resources when these were required.
- 6.5 Most of the 'mental health issues' staff encountered were understood as emotional and behavioural difficulties springing directly from the young people's histories of abuse, neglect and the trauma and attachment issues arising from these. Unlike expertise in relation to the major mental illnesses, these are not issues requiring psychiatric expertise. Residential social workers are the staff with which young people in secure have the most contact, yet the vast majority of those that we interviewed lacked knowledge or confidence in responding to the needs of many young people in their care. Provided with adequate training and support, staff from a variety of professional backgrounds can work effectively and therapeutically with young people (as they do in multi-disciplinary CAMHS teams). (**See Recommendation 9**).
- 6.6 It was evident in some interviews that staff were uncomfortable with discussing sexual issues, and that there was a tendency to treat young people as children, and ignore the accelerated adulthood that had resulted from their experiences. Whilst there was widespread recognition that sexual exploitation was an issue, the ability of managers and care staff to address it either in a research interview, or in their work with young people, appeared to vary enormously (**See Recommendation 5**).
- 6.7 The extent to which professional mental health staff were available for staff consultation or direct work with young people also varied. Two units had clinical psychologists who were involved in developing care and treatment packages alongside care staff. Two other units depended on the part-time input of a psychiatric nurse (although they were attempting to recruit an assistant psychologist). Levels of clinical supervision for care staff also varied. In some units individual and/or group supervision was provided by either an internal or external supervisor and was clearly distinguished from line management, whilst in others there was no provision (**See Recommendation 9**).

Assessment

- 6.8 All the secure units undertake some form of assessment with young people who are admitted. However, approaches to assessment varied from units where there was an informal 'observation' period and the completion of in-house monitoring forms, to units which adopted a much more formal approach and incorporated standardised

psychological assessment tools such as the Trauma Symptom Checklist. No universal assessment of involvement or risk of involvement in sexual exploitation was in place in any of the units (**See Recommendation 7**).

- 6.9 Those taking a less formal approach to assessment were the smaller units where care staff placed most value on their ability to work supportively, but informally, with young people and develop a relationship of trust.

‘Obviously we have monitoring sheets and sort of information and that but it’s not as formal as a checklist. It’s not as formal as that. [...] There’s not any time when they are not with a member of staff...We spend a lot of time with the young people whether it is playing in the courtyard, sitting watching TV, you know[...], it is very, very small so we are constantly with the young people which I think maybe helps. When you think of the bigger units that there’s a lot going on that maybe you don’t notice the same, I think it is quite a good arena for working with young people because you can give them a lot of one to one attention.’

Residential social worker

- 6.10 Working with the young people in the smaller units was described as an ‘organic’ process, whereby staff built a relationship of trust with young people over time. It was suggested that this enabled the issues that had led to their admission to be explored.

‘You develop obviously trust, you build a relationship and generally through time young people begin to start exploring some of the things that have happened prior to them coming here, some of the choices they have made and that then would become the focus of the work, if that is the choices you have made previously how do we change that in the future? or would you want to change it? [...] what can we do to help you make it safer for yourself in the future? You know it is not a case that we sit down and say, okay today we are going to talk about sex and we are going to talk about previous relationships, [but] there is a thread running through some of the one to one work that is undertaken and from the information that we gather through time then we would maybe start having more specific kinds of key work sessions in relation to like personal safety.’

Residential social worker

Staff in these units believed that they ‘often’ or ‘usually’ managed to make a connection with the young people in their care, and evidenced this by the distress that was often shown on leaving. Some were ambivalent about young people getting too attached when their stay

would be only a few months: 'If they don't it's just containment, but if they do you wonder if they can take anything good away with them when you're just one more loss in their lives.'

- 6.11 Staff described how the 'very small', rather claustrophobic, environment forced proximity and engagement, and the young people often 'regressed' and acted much younger than their age in the context of the intensive supervision and one-to-one attention provided. These 'effects' were apparently regarded as side-effects of the secure situation rather than a theoretically informed approach to the attachment difficulties common amongst the young people. The temporary 'regression' brought about by intensive supervision and interaction has some elements in common with the far longer term therapeutic approaches to facilitating change in children with attachment disorders (Hughes, 1997) but it was not discussed in these terms by respondents in this research. Some staff considered it evidence that secure accommodation could provide a period of respite for young people 'forced to grow up too fast'; others were anxious that young people might find coping 'in the real world' more difficult after secure.
- 6.12 In the larger units a more systematic approach to assessment was adopted. This would usually involve some form of psychological assessment with the input of a trained psychologist who may also be involved in subsequent work with individual young people on issues arising.

'The bulk of [my work] is assessments, or the young people will come to [the unit] and undergo a three week assessment, longer if necessary. Wherever possible there is a psychological aspect to it. So we always attend planning meetings which usually take place three or four days after the young person comes in and at that meeting we discuss whether or not a psychological assessment is necessary – most cases it is. [...] [W]e have an assessment conference after the professionals have done their individual assessments, and from that we discuss whether or not psychological inputs in the form of intervention is indicated so sometimes we carry on with a person that you have been involved with assessing for individual work.

Mental health professional

- 6.13 In one unit, the standardised tools for assessment included the Trauma Symptom Checklist. This was used to identify which symptoms of trauma were most prevalent. Taking steps to reduce those symptoms would be done at the same time as assessing and working on the emotional intelligence of young people. This was described as providing the basis for helping young people to understand their behaviours and express their emotions.

‘ [The scale we use] shows us very clear areas of strength, and very clear areas of deficit and we work on that and given that, what we’re hoping to do is to get the young people to be able to understand their behaviours, and to be able to start to express feelings and emotions, rather than acting out feelings and emotions. In that we feel that if we’re helping them to develop those skills that will help us reduce all sorts of levels of trauma when they’re able to start expressing themselves and to understand what all their emotions are.’

Residential social worker

- 6.14 At another unit a more comprehensive approach to assessment had been developed based on the use of standardised measures that would also provide a means of tracking the young person’s progress in relation to programme interventions.

‘There is far more structure now than in the past, it was not hit and miss but it was kind of verging on it at times, but more recently we look to do the [assessment] as soon as they come in and that measures their emotions, inter-personal skills and personal skills etc. and that gives us an understanding of where they are emotionally to feed back to the psychologist, so they have an overview then of the emotional side. We also do an assessment which is a broader view of the young person’s life. We look at peer relations, attitudes, pro-social attitudes, pro-criminal attitudes, relationships at home is the biggest one, education and from that there are four risk categories, low/medium/high/very high.’

Residential social worker

- 6.15 Although two of the larger units were beginning to use some of the assessment tools to provide before and after measures, there was no longer term follow up of outcomes for young people from any of the secure units.
- 6.16 Some staff in the units that undertook more comprehensive assessment emphasised the importance of integration between identification of individual needs, the provision of individual therapy and the content and style of the cognitive-behavioural programmes on offer.

Some concerns about assessment

- 6.17 The movement from reliance on professional ‘feel’ and experience towards the use of structured or standardized scales to assess need and risk in forensic populations is a widespread one. With it arises some concern about the suitability of instruments for the assessment of young women which have only been standardized in relation to men. Rates of some kinds of offending in women are so low that it would probably never be possible to obtain large enough samples to

enable assessment instruments to be standardized to the same level as in men (see Maden, 2004).

- 6.18 The development of more structured approaches to assessment was generally welcomed by staff in the secure units. However, these appeared to have been developed on a unit by unit basis. A more systematic approach across the sector along with careful monitoring of the relationship between assessment and therapeutic provision was promoted by some staff (**See Recommendation 7**).

Programmes and interventions

- 6.19 There was wide variation in the approach of the secure units to undertaking direct work with young people (**See Recommendation 7**). Approaches varied from the routine use of highly structured group programmes lead by residential staff, to the provision of occasional individual counselling from external specialist agencies. However, it is difficult to comment on the specific relevance of programmes and interventions to young people involved in sexual exploitation, since respondents did not necessarily make this distinction. Amongst respondents from secure units there were different conceptions of what constituted an appropriate therapeutic approach to young people's needs. These varied from those who valued highly the cognitive-behavioural training programmes to those who favoured a much more informal approach:

'I think just, I mean people kind of go on and on about 'therapeutic interventions' but for me you have got to start at the very basics. [...]I mean you could be working on a therapeutic intervention with a young person by cooking a meal or kind of doing a wee bit housework or just having that contact [...] That's giving you the basics of building up your therapeutic relationship with them, building up a wee bit trust and then you could start to sort of move on from there and then get into maybe a wee bit more focused work. What worries me about focused work is how you do it, how you implement it, could be a bit sort of like 'I am the teacher' if you know what I mean.'

Mental health professional

- 6.20 In broad terms there was a distinction between the approach of the three larger units and the three smaller units. The approach of the smaller units tended to focus on the development of individual relationships with residential social workers built around the 'key worker' system. This was supplemented to varying degrees by access to specialist support provided through external agencies. The dominant approach of the larger units partly reflects their history as institutions with a youth offending focus – illustrated by the delivery of cognitive behavioural programmes to address issues such as the management of anger, risk taking and problem solving.

- 6.21 In the three larger units the approach involved identifying different interventions depending on the difficulties being experienced by the young person. It was recognised that programmes developed for use primarily with (male) young offenders were not necessarily or wholly appropriate for young women. This also involved re-modelling interventions which had traditionally been used to deal with 'bad' (offending) behaviour and re-focussing them on bad experiences, as well as adapting them for smaller groups or work with pairs.
- 6.22 Although the focus of these two units was on providing appropriate individual 'packages' of support, there was also evidence of the development of a more consistent and 'strategic' approach to working with this population of young people. For example, at one unit where the core conceptualisation of some young people's difficulties was in terms of their histories of trauma and abuse, the team had developed a consistent approach to staff's use of language and imagery with young people. Although another unit had recently started to use the Trauma Symptom Checklist as part of its assessment process, the overall perspective conveyed by staff emphasised the social and educational deficits of 'looked after' young people, the approach was described as a strategy to enhance the skills of the young person during their stay in secure accommodation:

'The whole agenda is about a strategy, what is [it we are] here to do, taking the young person in at this end, here are all the levels of intervention, types of intervention, here are the core aspects of [...], here are the things that we might divert people into to meet their particular needs, here is the assessment, here are the ways in which we focus on and promote, work on the resilience factors and here is the young person more skilled up on leaving the programme or a place whatever it is to go, you know, something different.'

Secure unit manager

It is clear that while some of the standard CBT programmes were being delivered in all the larger units, the underlying emphasis and approach to working with young women with abuse, exploitation and attachment issues varied considerably.

- 6.23 The most focussed intervention in relation to young women (including those who may have experience of sexual exploitation) was the use of Dialectical Behavioural Therapy (DBT). DBT is a behavioural programme with a specific focus on reducing self-harming behaviour. It was developed for working with adult women with a diagnosis of Borderline Personality Disorder.
- 6.24 Borderline Personality Disorder is an adult diagnostic category and women account for 75% of diagnoses in the UK (Aitken and Logan, 2004). Teenagers may be referred to as having 'personality traits' or

'emerging personality disorder'. However, given that this is a contested and stigmatized 'disorder' (Wilkes and Warner, 2001) there should be considerable pressure to evaluate the effectiveness of DBT interventions with an adolescent population. There is a serious 'gap' in our understanding of attachment in adolescence (Alan and Land, 1999). While there is compelling evidence for abuse, neglect and disrupted attachments in the childhoods of adults with a Borderline diagnosis, the characteristic preoccupation with attachment and unresolved trauma may have specific presentations and meanings during adolescence (Fonagy et al, 1996). Therapeutic approaches to children and parents with attachment disorders have been developing since the 1960s – although outcome research has been minimal – but there has been no parallel development of work with unattached adolescents during the years normally characterized by gradual detachment from parents and increased attachment to peers.

- 6.25 In the UK DBT has been adapted for use in secure adult services. (It has been evaluated in the treatment of ten women at Rampton Hospital, and a longer term evaluation is underway (see Low et al (2001)). A highly valued feature of its introduction here was the development of a consistent approach amongst staff in the girl's unit:

'But (DBT) wasn't just a programme it was a completely different way of working with people, working with young people and their daily work practice, it really needs to come through everything that they do in the unit...'

Secure unit manager

Respondents were generally enthusiastic about the introduction of DBT, although it was acknowledged that some staff were more resistant to it. It was thought to have reduced staff anxiety and increased their confidence in the management of self-harm, as well as reducing the incidence of self-harm on the unit. A less 'crisis-focussed' unit was also a place where more positive relationships were possible.

- 6.26 Elsewhere doubts were expressed concerning the longer term value of an abbreviated DBT intervention, in relation to its ability to address underlying vulnerability factors:

'It's a useful approach if it's patient chosen, patient driven. The Deliberate Self-Harm team [in Glasgow] offers it to young people if they *want* to stop their self-harm, if they're ready for that.... It doesn't in itself address the underlying issues, abuse histories, attachment difficulties etc – so anywhere that was delivering it you'd want to know what psychotherapy was available alongside.'

Mental health professional

- 6.25 In contrast to the therapeutic work with young women involved in sexual exploitation at some units, there was very little evidence of

such interventions in relation to young men. This was a cause of concern for one member of staff, who suggested that it related to a gendered approach to responding to young people's experiences and needs:

'Again we tend to think they are different from the girls, but they may be doing it for similar reasons to the girls, getting involved and I think sometimes there is that, we don't do enough for boys who have been in that situation.'

Residential social worker

- 6.26 Secure unit staff in both large and small units were seriously concerned about the lack of appropriate accommodation for any kind of therapeutic work. One unit manager expressed dismay that the only private space for individual work might be the young person's bedroom.

'We are very restricted physically for this building, we don't have private space.'

Secure unit manager

'You plan a school like this and you would think to have therapeutic rooms, but not a single therapeutic room. The only way one of the units have managed to have a therapeutic room is by taking what is a family room and using it as a therapy room. So what we tend to do is just go into the family room and use that, or if the games room use that. The teachers are also quite generous in letting me use any of the rooms if they are empty. So it is just a matter of finding a space really which is a bit of a limitation.'

Mental health professional

This lack of therapeutic space within purpose built – and relatively new – secure units, highlights how recent is the articulation of therapeutic intervention as a core purpose of secure adolescent services in Scotland (**See Recommendation 7**).

7. The secure experience

Routes to secure units

- 7.1 In common with most other young people placed in secure units, many young people for whom sexual exploitation is a factor are likely to have a history of multiple placements which have broken down. These may have included children's units, residential schools, and foster placements. Local authority interviewees commonly reported that the young people they had referred to secure units had been 'through the system' and 'all other avenues' had been exhausted. The decision to place them in secure was considered to be a last resort to keep them safe, often where it was believed that no other institution could hold them because they had repeatedly absconded. Some had already had a previous admission to secure.
- 7.2 The decision to place them in secure was therefore seen by their local authority to be in their best interests. It was recognised by respondents that any decision to place a young person in secure accommodation presented children's panels with a difficult set of checks and balances to manage. However, there were circumstances where it was considered necessary because they were perceived to be out of control, and particularly in the case of young women, in danger and a risk to themselves.

'We'll have horrendous absconding patterns, we will have an awful lot of self-harm issues. That actually came to the fore I would say in the last year. The majority is the referrals we are getting in they are for self-harm to some degree and also we have had quite a few mental health issues that are coming to the fore whereas when we opened up at the very beginning it was more absconding and the company of the older boyfriends abusing them but actually the cases the are coming in now are more complicated. You are having self-harm, you are having absconding, you have a history of sexual abuse you could also have tied into that the drug problem, because the pimps will get them in that way, they will get them and feed them the drugs and then they have to go out and work the streets to supply the pimps and themselves with the drugs that they need.'

Secure unit manager

Involvement in sexual exploitation was not usually *the* defining behaviour triggering the consideration of a secure disposal by social work departments or a children's panel, although children's reporters described instances where prostitution is a significant known factor. More often however, the defining behaviour is absconding, drugs, alcohol and even physical aggression. For young women however, actual involvement in sexual exploitation or the perceived risk of involvement (especially in relation to absconsion) was described by

respondents as being 'regularly' or 'very frequently' an underlying factor in their secure referral and admission.

- 7.3 There is a lack of data on the specific grounds for referral in relation to secure admissions. However, local authority respondents commonly referred to the use of 'falling into bad associations or exposed to moral danger' as the grounds for referral most often used in relation to young women in such cases (**See Recommendation 4**). The gendered use of this ground of referral was also suggested by secure unit respondents:

'I think the girls tend to get referred for those sorts of reasons [more] than young men, so sexual exploitation would be part of, in Scotland, we refer to moral danger or being at risk and this is what they are talking about really when you look at it closely.

Mental health professional

Local authority respondents referred to placements which had resulted from *accelerated* escalation of risk taking behaviour amongst some young women previously unknown to social work departments, as well as those for whom the escalation had been more *gradual*.

- 7.4 Young women placed in secure on these grounds often have histories characterised by neglect, abuse, family dysfunction and breakdown and the attachment and relationship difficulties associated with these. As a consequence of their experiences they are vulnerable and they are often easily manipulated. Self-harm is extremely common. Staff often experience them as 'attention seeking', 'manipulative' and 'hard work': terms often used in relation to adult women in mental health services who are labelled as having a Borderline Personality Disorder.

The value of secure units

- 7.5 Almost all our respondents considered the fact that secure units could be 'a place of safety' to be the most important thing they had to offer to sexually exploited, or at risk, young people. Physical containment could provide safety during a period of crisis, and ameliorate the immediate effects of a chaotic lifestyle. Secure care was described as providing 'respite from bad relationships and providing a means of meeting previously unmet health needs' including those resulting from drug misuse and poor diet. Secure unit staff said that young people themselves 'felt safe', sometimes in a way that they had not previously experienced. However, concerns that secure units were not *always* safe were also expressed by staff, community based agency and local authority interviewees: 'a sanctuary with razor wire is a bit of a funny idea [.....]...there's sexual harassment, bullying [...]. One young woman I worked with said her time in secure was the most terrifying time ever she had in her life'.

- 7.6 It was argued by secure unit staff that there were benefits in placing young people in a unit with physical boundaries in addition to providing clear behavioural and emotional boundaries. It was suggested that limiting their physical freedom could provide them with the opportunity to focus on their own needs and could 'break the cycle' of running away.

'I think initially just the physical security which then broaches into a more emotional security. I think for the first time sometimes they can just go "phew", or sometimes just relax and I know it seems strange they need to come to a secure unit to relax but I think sometimes the secure unit in some ways gives them the freedom just to concentrate on themselves, and just to let things relax and maybe give them the time and space to think about something. I think that does happen and it does give them time to think about themselves, to bond and at the same time they don't have to think about all those other impinging things on them, they don't have to think about running away and feeling overwhelmed and running away, they learn how to deal with it here and how to learn how to deal with it and they cannot do the normal things they would do to try and hide from all the pain and hurt that has been going on around them.'

Secure unit manager

'I think they are hoping to provide a safe environment for the young person to enable the young person to get their physical and emotional well being back on track and then try to get them in a safe place where people can then try to pick away at what are these issues, what is the underlying [problem]. And they're away from people who are perhaps coercing them into this kind of activity that they wouldn't normally do by choice. [...] but that depends on the young person totally because ultimately they will only share what they feel safe or comfortable in doing.'

Residential social worker

- 7.7 Secure care was commonly considered to provide those caring for the young people with a 'captive audience'. Staff believed that young people being physically contained allowed them to 'do some work' which workers in the community or in open institutions had found impossible because of a lack of consistent engagement or absconsion.
- 7.8 Secure care only provides 'respite' for a very short period, and it was regarded as a very limited opportunity to 'turn things round' given the scale of the problems being experienced by the young people. It might only provide an opportunity to begin a process of change and staff accepted that there were severe limitations in what could be achieved.

'I mean my view of secure is that it is 'stop', that that is what it is saying, 'stop and we will hold you for a bit' but it doesn't have the time, they are not here long enough to effect the change and it is about beginning a process. You have usually got young people's attention, you see, in a way that maybe other services haven't got, so that it is very important to be saying 'stop', and it is very important to be saying, let's think about this before you leave.'

Secure unit manager

'I think realistically a lot of the work has to involve be[ing] realistic, and accepting there are some limitations to what we can do. And if we can give a young person knowledge about how to keep themselves safer, or how to do it [prostitution] in a safer fashion, without condoning it, sometimes we have to accept that that is what we can do. We are not going to reinvent young people, and I think sometimes that's the misconception about services like ours, is that from parents, from social workers and other professionals, we are going to package somebody up and send them back, they are going to be totally new and different and never going to put a foot wrong again in the future, it's never going to happen.'

Residential social worker

- 7.9 Most secure unit staff considered that secure care could be helpful for a small number of sexually exploited young people. However, the extent to which this was the case depended to a large extent on the reasons for, and timing of, their placement (i.e. the age of the young person and the extent and history of their involvement).

'We are getting a lot of admissions just now, about the 12/13 age group. We've got one coming in today [] that's a good age because the programmes now that we can put them through and try and get benefits that way, so I think if we can get them a wee bit younger instead of the 15/16/17 (year olds) which we got when we first opened, because at 16/17 they think their life is made and it is difficult to break the cycle at that age whereas at 12 we can show them positive options for their life and try and help them.'

Residential social worker

Whether there were any other positive factors in their lives that the placement could build upon and strengthen (e.g. relationships with responsible and caring adults) was also considered to be relevant. It was most likely to be considered harmful when used simply as a means of eliminating immediate risk.

The necessity of forging longer-term therapeutic alliances with these young people was illustrated by one manager's description of the nature and challenge of the work:

'If you are talking about a child that has been involved in drugs, and the supplier has been involved in sexual exploitation, then to get them to see that there are other things they can do is sometimes very difficult, and I think sometimes staff feel a bit frustrated that all this young person talks about is these people, who we know have exploited them, but who they see as being a support to them....[With] the kind of long term belief that they are not worth much anyway. Getting them to see how they have been abused is pretty difficult.'

Secure unit manager

Case illustration four

Caitlin was 15 and placed in a secure unit on the other side of the country. Her mother was a single parent. She had been involved in petty offending, though there were no prostitution related charges. She was basically shoplifting to fund a drug habit. Then she started taking heroin and moved into prostitution. She was failing to attend school and considered to be 'out of control'. She was going into a known red light area and taking lifts in cars. She was considered to be in moral danger and spent 18 months in secure. She completed a drugs programme whilst in secure. Her involvement in prostitution appeared to stop after her secure placement. After leaving secure she remained under supervision with support from a social worker and a criminal justice worker. There was no further evidence of involvement in prostitution, but her addiction to drugs remained a problem.

- 7.10 Some secure unit staff did question whether secure accommodation was ever really necessary, believing that it is 'relationships not walls' that vulnerable and exploited young people need in order to gain self-esteem and build better lives for themselves. They did not believe that secure units were able to offer anything that could not equally well be provided in the community with the right resources. This view was echoed by one respondent working in a community based agency:

'There are two young women [...] who had been sexually abused by various people at a very young age, had then become involved in a range of behaviours, parental control and all that kind of stuff, were accommodated, got moved around from place to place, they became involved in heroin issues and sexual exploitation and ended up in secure. Now neither of those young women, having spoken to them, felt that secure at that time did anything for them, other than keep them off the streets and the reality is that they are going to come back at some point, so it is about if we are sending young people to secure, we have to be quite clear about what we are expecting

from secure accommodation [...] and we need to get much better at the community stuff, either to prevent young people going into secure at all or to have services for them when they come out.'

Community agency worker

Case illustration five

Jocelyn was 13, with a boyfriend of 16 or 17. She'd abscond from her residential school to see him. They were very concerned about her. Her mum had been a prostitute and people thought well 'it's a life she knows'. She had some learning difficulties, and it was hard to imagine her ever holding down any kind of job. On top of that she looked incredibly vulnerable, very child-like and naïve. However, she was stubborn and determined and they couldn't contain her. Her school panicked really, and that's why she came into secure. She was obsessed with this boyfriend, madly in love and nothing would convince her there was any problem, or that she shouldn't see him, or that he was too old for her. She couldn't cope in secure – she was bullied and picked on because she was such an easy target.

In the end someone thought to visit the boyfriend. It turned out he also had moderate learning difficulties and was equally besotted with Jocelyn. Of course they were having unprotected sex and they needed some sex and relationship education, but she didn't need to be locked up.

The cultures of secure units

7.11 A claim was made by a range of respondents that the culture of the older secure units is gradually changing in a therapeutic direction. Concern was expressed by local authority respondents that the staff culture had traditionally been 'over controlling' and characterised by 'macho attitudes'. However, there was evidence of a shift in philosophy and practice within the larger units from an offending-focused culture, where young people were perceived primarily as 'troublesome', to a welfare culture where young people were perceived primarily as being 'troubled'. The consequence of this was the need to create a therapeutic, as opposed to punitive, environment; a change which posed challenges for how control was exercised:

'It's how staff display the control that they have over the young person because young people will pick up on that, you know the 'key jangling' person and 'I have got all the control' [types], I mean that is just another form of abuse isn't it really? But I think there are ways of dealing with that and explaining things to the young person.'

Mental health professional

- 7.12 While evidence of a push in the direction of a more therapeutic approach was clear, particularly for young people who were perceived to have been abused or exploited, the task of dealing with increasing numbers of young people who were placed in secure accommodation as a result of committing serious offences presented a new challenge. This was particularly true for the small (local units) where practice had always been more childcare oriented. These more serious offenders were typically young men, and their presence in the secure units was recognised by secure unit staff as having an effect on the dynamics between young people.

‘You have to remember we work in a culture where young people come through residential and at some point the majority of them have met each other in a previous residential so they have an awareness of where they have come from, where they have been and why they are here. You have to remember that we are now encountering young people with more serious offences so if you have a 16 year old murderer and a 15 year old car thief, who is going to be higher in the pecking order?’

Secure unit manager

- 7.13 Within the increasingly diverse population of young people placed in secure units, young women with a history of sexual exploitation, particularly those who had become addicted to drugs were perceived by secure unit staff as being at particular risk of bullying and intimidation from other young people (especially, though not exclusively, sexually aggressive young men):

‘So the girls have to be really tough to take all the bullying from, ‘cos some of these young men have come in with fairly serious charges some of them, so for a girl who has just been running around...in the city centre, it can be very frightening.’

Mental health professional

‘The stigmatising and the bullying comes when their peers want to bring them down, or undermine them, or make them angry, and they will call them rude names or obscene names. But you have to remember our client group are in some ways survivors who have a greater understanding of what is acceptable at street level and in that sub-culture than you or I ever will. Some boys and girls can understand why some people become involved, they have a greater understanding of the need, affectionate and financial. What they have an extremely low tolerance of is young people who finance a drug habit through that means, through prostitution, they see the people who inject as the lowest of the low. They don’t take the time to say, well they didn’t start out that way, they just judge them on what they are and they have very low opinion of young people

that inject. They are less able to express an understanding to young people who become involved in prostitution to finance an IV habit.'

Secure unit manager

- 7.14 Local authority and secure unit respondents shared a concern that a period in secure accommodation could promote dependency, and that some young people could even become 'institutionalised'. Secure accommodation might be effective in dealing with their behaviour in the short term, but would not necessarily help them to 'make it in the community'.

'These young people come to expect there to be somebody there to do things for them, which is wrong. We should be enabling them. In a way we disable them, because it is a locked environment there are a lot of things you have to do for young people. So we disable them to a degree and then we put them out there. They must look about and think 'who am I going to get to do that for me'. You hear the young people here who are going home on leave saying, "I lay in my bed last night and went to look for the buzzer to go to the toilet, not realising that I can get up and walk out the door and go to the toilet." We are expecting them to live within two different structures because they have got the structure in here and [then] go home to their family, while there may be no change in their family circumstances, so we expect them to adapt to a different environment.'

Residential social worker

Such views are similar to those articulated by Rose (2002), who has argued, that making a transition from 'chaos to culture' is not achieved by the 'rigid imposition of rules and regulations' and that the chaos evident in the lives of young people placed in secure care will not be eliminated by control.

- 7.15 Secure unit staff differed in their views on the desirability, or appropriateness of mixed gender secure units. One view was that young men and young women could benefit from being placed together, and that they could learn from each other. It was also suggested that having a mix of young women and young men could make it easier to manage behaviour. There were two elements to this. First, that the presence of girls was a bit of a 'civilizing' influence on boys, and second, that girls were difficult and demanding en masse, but were 'easier' when there were boys present.

'It does raise issues because we get that normal 'boy-girl' sort of scene going on, and girls do have, and boys, they do have very different needs, but I think you've got to be very careful about helping the young women develop their own female identity and equally allowing the males to identify their own

male identity, but I think the interface between them is a learning process for adolescents, the interface between males and females.' **Secure unit manager**

'I am not convinced that all girls together [is better], that is largely because I have managed an all girl's unit which, the behaviour in which was frequently far more difficult than a boy's unit and consequently it is very difficult to get the work done, whereas it is actually helpful, the balance...there is a degree of harmony at the moment and I am sure part of that is because we have a high ratio of girls, and I don't just think it benefits the boys, I think it benefits the girls as well.'

Secure unit manager

However, a contrary view was that it created problems of disclosure and sexual tensions that were difficult to manage:

'It is difficult to manage when it is mixed because a lot of the time children trade secrets with each other and...it goes against them when they leave us... the word is out on the street about what has happened...I am not sure that mixed provision is a good thing, and there is all that sexual tension between adolescents anyway...as well as young people who have been sexually abused. [...] I am not sure that it does work and it takes an awful lot of managing.'

Residential social worker

- 7.16 It was also pointed out that mixed units posed a particular problem in relation to sexually exploited young women if they were placed in the same unit as sexually aggressive young men.

'Obviously for a lot of the young males that come to us [...] they can display quite a lot of sexually aggressive behaviour towards other residents, towards male and female staff, and that again is another difficulty in working in environments like this, is that we can at times have the sexual aggressor and the person who has been a victim living under the same roof.'

Secure unit manager

'There are a lot of young people presenting with different types of things. Their experiences are different. For example, a young girl can be brought into a secure unit because she is vulnerable and then there could be a young man brought into secure because he is displaying sexually harmful behaviour to others. There is a bit of a mis-match there.....There's a bit of a conflict.'

Mental health professional

This range of views, as well as the extremely gendered characterizations of behaviour and coping styles, duplicates the findings

of research with staff working in secure adult mental health settings (Scott and Parry-Crooke, 2001; Scott and Williams, 2004). It also emphasises the need to exercise care about the combinations of young people looked after together within institutions when dealing with young people with experience of sexual exploitation (Melrose et al, 1999).

- 7.17 One of the larger secure units had developed a separate girl's only unit as a specific response to the risks posed by placing young women, with a history of sexual abuse and involvement in prostitution, in mixed settings, and the need to target resources more effectively to meet their needs:

'Well when they looked at all the referrals that came in it was things like there was abuse, there was enough of history of sexual abuse, there was enough of many young people being referred because of [being on the] periphery of prostitution - and it would not have been appropriate to put them into a boys unit. The major problem was the safety aspect. First of all there was the continued abuse because they were in with sex offenders, they were in there and they might have been raped. Actually I had a girl in secure in the boys unit who had been raped, and our anxiety levels used to go up through the ceiling. She had a hatred of somebody who had done the rape so that [with] the policing of that, her needs were not getting met, his needs were not getting met, and we were wanting to do good work with them. We were basically care and control and that was about it. [...] But also the senior management had decided we need to offer these young people more resources, we need to target this market and get in the people externally, train up the staff internally to deal with the specific problems in this client group and that is how it came about.'

Secure unit manager

- 7.18 It was widely acknowledged that working with abused young women provided a particular challenge, and could be 'emotionally draining' for secure unit staff. The unit was noisier, arguments between the girls were more embedded in relationship conflicts and therefore took longer to resolve, and the demands on staff for attention and emotional engagement was far higher than was experienced with boys. (Some staff discussed this in terms of the girls displaying 'borderline traits', others as a gender difference which would be seen in any institutional context). However, the girls' unit was seen to have been beneficial in providing a space where young women could explore their own needs, and engage in activities without 'acting up to' young men or being inhibited by them:

'They have make-up nights, beauty nights, things that these young girls have maybe never had promoted in their lives, proper how to look after themselves, hygiene, hair and all

these sort of things and space to do all that [...], it is good for that. Even such things as playing out, childish games, having a 'beach' party with a paddling pool, things that they have never done, whereas if they were in a mixed unit they would not get themselves involved in that because they would be putting on this front for the males. They would not want to be seen as doing playful, childish things. I think it has been a long time coming and has been overdue, the girls' unit, and I think they develop better relationships and feel more comfortable in talking about certain things.'

Residential social worker

In the secure mental health sector an increasing number of services now have women-only units. The development of these follows from the recognition of many of the same issues as those identified by informants in this research (See National Women's Mental Health Strategy England and Wales, DoH, 2002).

Aftercare

- 7.19 It is evident from this research that the provision of aftercare for young people leaving secure units is a major concern for secure unit staff and presents a considerable challenge for local authorities (**See Recommendation 5**). This was an issue for all young people placed in secure and young people who have experienced sexual exploitation were no exception. Indeed, it was recognised that they are amongst the most vulnerable in the secure population and as such have complex aftercare needs which could be difficult to meet.
- 7.20 Local authority respondents described various strategies for providing aftercare. Recognising that these were amongst some of the most vulnerable looked after children, this involved the use of a range of external agencies to provide packages of intensive and specialist support. Some authorities had been able to develop more sophisticated aftercare packages using resources from the Intensive Support Fund. However, some authorities outwith the central belt expressed concern that their ability to provide effective aftercare was compromised by lack of funding and a dearth of locally accessible specialist services.
- 7.21 Local authorities across the country reported problems with co-ordinating services for young people leaving secure accommodation. For local authorities which were a long distance from secure units, these problems were compounded. On the other hand local authorities that were able to place young people closer to home, particularly in smaller units, appeared better able to co-ordinate the transition to the community, although there was still considered to be a problem with care planning and co-ordinating input from different services.

7.22 Both secure unit staff and local authority managers expressed concern that some young people's placements in secure accommodation were being extended in order for them to complete programmes which were not available outside the units. It was also suggested by staff from both large and small secure units that young people were staying in secure units longer than was appropriate, or necessary, because of problems with organising aftercare provision. This echoes concerns raised in the Interim Report of the Secure Accommodation Advisory Group (Scottish Executive, 2001).

'Increasingly we seem to be having young people who are staying longer just purely because of the lack of other resources to meet their needs so it used to be quite time limited, and for some young people it is if there is quite a robust plan in place, but sometimes there is nowhere else for them to go.'

Secure unit manager

'I would want to say that aftercare is a concern because we [...] take young people from all over Scotland, it can be very difficult to have any picture of what aftercare is. We are also finding ourselves in the position where not only do we not have an exit address sorted when the young person arrives [...] (and we have got every sympathy with that); but we can find ourselves at the end of a placement where our perspective is that the young person no longer meets secure criteria, but there isn't anywhere for the young person to go. And such is the risk of sending someone out to a wrong placement that panels will make decisions and continue to place a young person in secure.'

Secure unit manager

7.23 The challenge of providing effective aftercare highlighted two further problems, the continuity of care required in order to maximise the helpfulness of an intervention in the lives of vulnerable young people, and the very large gap between the quantity and nature of interventions in secure units and what is available in the community. Secure unit staff were aware that their interventions were by definition short term and, at best, only one stage in a much longer process. They appreciated that the effectiveness of their interventions did not exist in a vacuum but depended on the young person's needs being adequately addressed once they left the unit:

'I think that's an area that [...] in residential settings is very poor, and it is never what we want: because again the focus is what you are doing at this particular time but you are very well aware that you are only one step in the process of this young person's life. You know, a very short time [...]. And again it depends how able social work departments are then to link into you, to listen to what you are proposing in terms of

aftercare and throughcare. And I think we try to be very precise.[...] [But there are times when you have great difficulty in seeing a young person going out, seeing as we know what that young person needs but it's not likely [to happen].'

Secure unit manager

Concern was expressed about the considerable gap between the security and safety provided by secure care, and life in the outside world, in particular the risk of vulnerable young people panicking, falling back into old associations and resorting to doing what they were doing before placement:

'I think while we're in secure, that's fine and we have a captive audience in the young people, but when they move out of secure, you feel as if they are just cut adrift and there is nobody there to pick it up. It is good that we give them loads of support to help them through issues, to deal with issues, but then cut them adrift because there is a big, big gap, a massive gap.'

Residential social worker

'You have no control after they leave. You can identify a place but you have to remember the longer a child is in secure the more attached they become to secure and in a lot of instances a place of safety provides security, reduces their anxieties, give them an environment they can thrive in. You are then asking them to leave that type of environment and move in and re-establish in a different environment. For the young people who have spent a period of time packing their bags and moving in, re-establishing, at some point it is difficult to start re-engaging and therefore are they going to fall back on people that they do, that they feel, comfortable wouldn't be the right word, but sort of accepted by and if they have a hiccup in the new environment is it easier to turn back to the old where there is going to be an acceptance so there is a number of factors that you have to consider.'

Residential social worker

- 7.24 Secure unit respondents (and some reporters) expressed particular concerns about the position of those aged 16-plus leaving secure care. Their situation was considered to be even more problematic because supervision requirements were being terminated and they were expected to cope with the transition to independent living with insufficient support:

'Sometimes young people get to the age of 16 and rather than there being any real planning for the young person's aftercare, it is about 'we don't have to deal with them anymore, bye-

bye'. That is very concerning to us, because we have put so much effort into them.'

Secure unit manager

'We are putting young people at 16 loose with all their troubles and difficulties and expecting them to cope and there is nothing except a massive black hole and the ideal...would be to be able to go that little bit further with them but we don't.'

Residential social worker

Case illustration six

Maggie was 14 when secure care was authorised. She had caused a breach of the peace and assaulted a police officer. Just a year before that she'd approached social services of her own volition and made allegations of extreme abuse involving a number of perpetrators - which were dismissed. She got involved in soft drugs and drink and was thought to be putting herself at risk. She was absconding when on supervision. She had no family support (there were suspicions that they had been involved in the abuse that had been dismissed) so family rehabilitation was not an option. She had an older boyfriend, but it was not clear whether he was 'pimping'. She was being seen in a known red light district and it appeared she was using hotels as places to sell sex. Whilst in secure she went through various programmes, but she was 16 when she left the unit and her supervision requirement was terminated.

Evaluation and outcomes

7.25 The research revealed no evidence of systematic follow-up or tracking of young people who had been in secure accommodation. At the smaller units there was some limited follow up for a period of two to three months after discharge. However, whilst this practice enabled some continuity of care it was not used to monitor young people's progress, and was in any case somewhat sporadic and dependent on the availability of resources:

'No, once the young people leave here and they move on, unless we have got any ties here. Some young people do leave - depending on how a care plan has been going - sometimes we think well maybe this young person could do with contact, and if that happens then obviously we would still keep in touch for maybe another couple of months to try and help them to settle in. But that is not always possible because of this being a secure unit they have to free people up to do it, but we have done it.'

Residential social worker

- 7.26 The lack of follow up or tracking meant that secure units had very little knowledge of outcomes. At smaller units there was some information - though this was largely anecdotal, and either based on young people keeping in touch by telephone, or through general conversations with other social workers.
- 7.27 The picture with regard to the evaluation of programmes and interventions was also mixed (**See Recommendation 10**). Whilst young people's progress and behaviour were monitored to some degree at all the secure units, at the smaller units there was little systematic evaluation of the care that was being provided. Some local authority respondents also expressed concern that programmes were not adequately evaluated.
- 7.28 At the larger units programmes were monitored internally but there was limited external quality control or evaluation of effectiveness. At one unit, research was being conducted to assess risk and protective factors, and to compare levels of risk, between sexually aggressive young people and another group with mixed offences. This included following up the young people once they have been discharged from secure accommodation.
- 7.29 There is currently very limited information about the outcomes for young people in relation to the care provided in secure accommodation. However, the Scottish Executive is currently funding a three year study conducted by researchers at the universities of Glasgow, Stirling and Strathclyde which aims to provide a clearer understanding of the purpose and effectiveness of secure care in meeting the needs of young people, their families and communities (Social Work Research Centre, University of Stirling et al, 2004).

8. The needs of sexually exploited young people

- 8.1 In Chapters Five and Seven we discussed respondents' perceptions of the experiences of young people in relation to sexual exploitation and their routes to secure accommodation. In this chapter we will summarise the evidence from this research about the needs of such young people.
- 8.2 In doing so it is necessary to make a distinction between the needs of young women and young men for two reasons. First, this study offers considerably more evidence about the experiences of young women involved in sexual exploitation. Second, the limited evidence about young men involved in sexual exploitation suggests that whilst their experiences are similar to those of young women in some respects they differ in others.

Sexually exploited young women

- 8.3 Figure 3 describes the common features of experiences of sexually exploited young women in secure accommodation revealed by this study. These are drawn from the descriptions and perceptions of local authority managers, secure unit staff, reporters and voluntary sector staff.

Figure 3: Sexually exploited young women in secure accommodation

EARLY LIFE PHASE		ADOLESCENT PHASE	
Underlying vulnerability factors	Outcome of underlying vulnerability factors	Immediate vulnerability factors/indicators	Involvement in sexual exploitation
<p><i>Family dysfunction factors</i></p> <ul style="list-style-type: none"> parental relationship breakdown domestic violence parental drug/alcohol misuse or addiction parental mental health problems placement breakdown <p><i>Family abuse factors</i></p> <ul style="list-style-type: none"> physical and emotional neglect and abuse sexual abuse 	<p><i>Creation of window of vulnerability</i></p> <ul style="list-style-type: none"> alienation from family life lack of significant attachment to a caring adult premature drift away from family life and towards older peers poor educational attainment and dissatisfaction/difficult with school life 	<p><i>Opening of window of vulnerability</i></p> <ul style="list-style-type: none"> drugs alcohol going missing <p>(parental involvement in prostitution)</p>	<p><i>Sex as currency</i></p> <ul style="list-style-type: none"> for drugs, alcohol or accommodation for money <p><i>Connection to adults</i></p> <p>Varies from complete control i.e. pimped through force or threat to low control i.e. operating independently or with peers</p> <p><i>Evidence of involvement</i></p> <ul style="list-style-type: none"> direct i.e. certainty/knowledge indirect i.e. suspicion/concern

- 8.4 The interplay between these features is complex, and care should be taken not to assume straightforward causal relationships between them. However, this research confirms the findings of previous studies that the journeys of young women who become involved in sexual exploitation typically share a number of distinct phases and characteristics.
- 8.5 The early life phase frequently creates a level of vulnerability resulting from family dysfunction and/or abuse. This often results in alienation and a drift away from family life, combined with poor educational attainment and difficulties with school. Thus, when these young women reach adolescence, a specific 'window of vulnerability' to sexual exploitation may open (see Scott, 2001). Unhappy, unprotected, lacking in self worth, and often desperate to accelerate their journey to adulthood, they more easily fall victim to drugs and sexual exploitation.
- 8.6 The 'window of vulnerability' in adolescent women in this study was characterised by various factors including drug and alcohol misuse and repeated episodes of going missing. It is these factors that were most commonly linked to, or indicators of, their involvement in sexual exploitation.
- 8.7 In Scott's (2001) case study evaluation of a service working with sexually exploited young women in Wolverhampton, there were a small number of cases of young women where the early life phase had *not* involved family abuse or neglect, but where parents, peers and school had somehow failed to meet their needs for attention and identity. These young women were often isolated, had poor social skills, or some learning difficulty, and were desperate to belong to whatever sub-culture would accept them. This may be pertinent to our understanding of the young women described by respondents in this study whose route to a secure placement had been accelerated rather than gradual, with little or no previous involvement with social work departments.
- 8.8 It is worth reiterating here that the connections between drug misuse and sexual exploitation are not uni-directional. Previous research has suggested that vulnerable young people are very likely to discover opportunities to use drugs earlier than they become involved in 'sex work', but opportunities to use drugs do not inevitably introduce opportunities to 'sell sex'. However, involvement in prostitution will sooner or later lead to drug misuse because the two are co-occurring phenomena in the easy to access/illicit markets in which young women sell or exchange sex (Cusick et al, 2003).
- 8.9 The evidence provided by respondents in this study suggests that an appropriate model of care to meet the needs of sexually exploited young women will consist of five key elements, early intervention, safe

accommodation, continuity of care, intensive support and multi-agency co-ordination (see Figure 4) **(See Recommendations 5 and 6)**.

- 8.10 The involvement of young women in sexual exploitation is a process which relates to a constellation of underlying and immediate vulnerability factors. In that sense, though it may escalate very quickly in some cases, it is unlikely to be a completely unforeseen development. The placement of girls as young as 12 or 13 in secure accommodation, where there is either direct or indirect evidence of involvement in prostitution, combined with the challenges and difficulties of working with young women once they reach the age of 16, underlines the importance of *early intervention* as soon as risk factors are identified.
- 8.11 For young women involved in sexual exploitation the provision of *safe accommodation* is vital. However, the 'safe accommodation' of first choice should, whenever possible, be their family home, or where they are unable to live at home, their current placement. Making their current home a place of safety may involve providing considerable parent/carer support, and undertaking intensive family work to build or re-build age appropriate boundaries, trust and communication.
- 8.12 There will be cases where family life has broken down to such an extent that alternative safe accommodation in the community must be provided. Such placements need to provide a high level of relational security, involving intensive one-to-one input, if they are to keep a young woman safe from 'associations dangerous to her health and welfare'. An out-of-area placement may sometimes be necessary in such instances. However, the benefits of physical distance from an abuser need to be weighed against the potential loss or damage to potentially helpful ties which can be built upon in the young woman's family or community.
- 8.13 Where the provision of physical security in a locked environment is considered the only possible means of stabilising and engaging with a young person, secure accommodation may be the placement of choice. Secure accommodation could be used for a limited period at any point in the process where extreme vulnerability indicates the need for a high level safety which cannot be met by other resources, rather than as a last resort where all other avenues have been explored and failed. It should be embedded in a throughcare plan focussed on the provision of longer term security being built through the repair or creation of positive relationships in a young person's life.
- 8.14 Young women who are involved in sexual exploitation are amongst the most vulnerable young people. Their high level of vulnerability often leads to multiple placements and interventions which in turn results in discontinuity in their care. The need to place them outside the community, either for reasons of their own safety or because of the absence of local resources can be particularly disruptive. Providing

continuity of care is critical to prevent drift, and if necessary should involve the provision of resources to enable local services to maintain relationships with a young woman wherever she is placed.

- 8.15 Some young women involved in sexual exploitation may have had little or no experience of support from a reliable or trustworthy adult. Safe accommodation and continuity of care therefore need to be combined with *intensive support*, wherever the young woman is being accommodated, to ensure a level of relational security that can 'hold' her through a transition period in her life. This may involve workers and carers adopting assertive outreach methods such as daily phone calls, text-messaging and 'door stepping'. Such are the methods utilized by Barnardo's sexual exploitation services with young people in crisis and at high risk.
- 8.16 The cases of young women involved in sexual exploitation are invariably complex and give rise to a range of needs which cannot be readily met by a single agency. Thus the need for *multi-agency coordination* is paramount to enable the delivery of a coherent package of support. This may involve social work, health, education and specialist services in the voluntary sector.

Figure 4: Model of care for sexually exploited young women

Early intervention	When first indication of risk is identified.
Safe accommodation	At location and level of security appropriate to need, and maximising the possibilities for relational security.
Continuity of care	Taking services to the young woman and focussed on building reliable, long-term support relationships.
Intensive support	Daily contact and assertive outreach combined with input to family/carers.
Multi-agency co-ordination	Delivery of coherent interventions.

Sexually exploited young men

- 8.17 The evidence from this study does not provide the same level of understanding of the histories and experiences of young men exploited, or at risk, who enter secure accommodation (**See Recommendation 13**). It does suggest that there may be similarities in the underlying and immediate vulnerability factors. However, young men's apparent unwillingness to discuss their experiences (particularly in the context of secure units), and the lack of knowledge held by service providers, means that it is difficult to elaborate the relationship between these factors and how a corresponding window of vulnerability is created.
- 8.18 From the few cases discussed by respondents it seems likely that the level and nature of involvement in sexual exploitation may vary in ways that are similar to young women's experiences. However, the anecdotal evidence suggests that young men are less likely to be 'pimped' in the traditional sense. At a younger age they are more likely to be targeted and groomed by abusers for their own gratification and sold/shared/filmed within an abusive network. Other young men are more likely to be organising their own activities or to have been co-opted into prostitution by peers. Moreover, it was suggested that whereas some young men may be involved in sexual exploitation with older men purely for some form of payment, for others the window of vulnerability may be connected to their exploration of an emerging gay sexuality. This is not to say that young men necessarily fall into one category or the other, though the fear of being labelled as gay may be common to all those who have been involved in sexual exploitation.
- 8.19 A fuller discussion of the sexual exploitation of boys and young men is provided in Barnardo's 2001 report: *No Son of Mine!* (Palmer, 2001).

Case illustration seven

Mark was 14 and had emotional and behavioural problems. He was being found by the police in areas known for prostitution and he had been taking lifts in cars. He had a mobile phone which contained an extensive contact list. He had no understanding of the level of risk he was running and would not discuss what had been happening. He was regularly absconding from home. The authority could not find an appropriate secure placement for him, so a package of intensive support was put in place using various agencies and co-ordinated by his social worker. This included befriending contact seven days a week. His mother was involved and supportive. Intensive support appeared to work well and there were no further referrals.

9. Secure care and alternative interventions

9.1 In any decision about appropriate interventions with young people experiencing, or at risk of, sexual exploitation, the following principles should inform the process (**See Recommendation 5**).

- Intervention should occur as soon as possible after concerns have been identified.
- Intensive contact with the young person addressing the key areas of vulnerability is vital.
- Continuity and stability of care should be prioritised, and risk managed within the young person's home/community context wherever possible.
- Parents and carers should be actively involved in planning and decision making about interventions, with additional support and guidance provided for them.
- Safe accommodation should be provided at the lowest level of physical security necessary; and incorporate the highest level of relational security possible.

9.2 Appropriate interventions may include specialist fostering, intensive intervention in the community, close support and secure care (**See Recommendation 5**). It is important to recognise that these interventions are not mutually exclusive, and in practice young people may experience more than one. However, every effort should be made to avoid discontinuity of care by minimising movement between placements, maximising the co-ordination of interventions and providing meaningful, joined-up throughcare when placement moves are unavoidable. Central to providing continuity of care will be the active involvement of parents and carers in planning and decision making where this is possible and appropriate. The nature of interventions will range from preventative to crisis. Preventative interventions offer the best opportunities for maximising the efficacy of care and minimising risks to young people.

Secure care

9.3 Respondents in this research suggested that secure care works best in the short term (i.e. to manage immediate risk and stabilise the effects of a chaotic lifestyle) but discussion of specific cases suggested that long term outcomes are often poor. Where young people are involved in sexual exploitation it may be necessary to provide physical safety when vulnerability is particularly high. Secure placements may not be available in the local area – making continuity of care more challenging. If temporary removal from their own community is felt to be necessary in order to provide protection from dangerous/violent adults a non-secure out of area placement with additional support should be considered as a preferred alternative to secure. Removing a young person from their own community runs counter to the

aspiration of most of our informants, but in some circumstances a short term placement may be the only way of breaking contact with abusive adults.

- 9.4 Evidence from the implementation of Protocol 13 in the Netherlands (a project run by the Bureau of Youth Care in Utrecht) suggests that moving a young person out of the area is vital when dealing with a young person who has developed a close relationship with a 'pimp'. Protocol 13 also suggests that the period in secure should be used for a 'psycho-diagnostic assessment', but not necessarily for the delivery of therapeutic programmes. The underlying rationale for Protocol 13 is that therapeutic interventions can be better provided with appropriate support in other residential placements or in the community. Following an evaluation of Protocol 13's work, the project has formed a partnership with Pretty Woman, a community based agency to provide a community based support programme. (Barnardo's UK and Stadavies, Netherlands, forthcoming 2004). Research on the effectiveness of interventions with young offenders would strongly endorse this view (Utting, Vennard and Scott, 2002).
- 9.5 When placing young people who have been involved in sexual exploitation in secure care it is necessary to ensure that they are placed with others who have similar, or compatible, needs. Placements should avoid exposure to further risk or intimidation. For young women, this may be best achieved through placement in a single sex unit.

Close support

- 9.6 There is no reason why programmes and interventions to meet the needs of sexually exploited young people cannot be delivered in a close support context. Whilst the risk of running away will be higher, the evidence from this study and from other research suggests that secure care only reduces absconson for a limited period, and does not necessarily break the pattern. A close support setting may therefore provide a better environment to provide intensive support and deliver therapeutic interventions when neither a young person's family home nor specialist fostering is an appropriate option.
- 9.7 However, in order to be effective an intensive level of relational support needs to be provided. Whilst close support in Scotland has largely been developed as a step-down or an alternative to secure care (located in a specialist unit usually linked to a secure unit) this need not be the case. 'Close support' could be provided within any children's unit with appropriate additional planning and resources (see Intensive Intervention below).

Specialist fostering

- 9.8 Evidence from the evaluation of the Community Alternative Placements Scheme (CAPS) (Walker et al, 2000) confirms that specialist foster carers can provide an effective service for young people who might otherwise be in secure care. Whilst the study population did include young people involved in sexual exploitation, it did not focus specifically on their experiences and did not identify particular types of young people who were likely to benefit. However, it was less likely to be effective where young people did not wish to be placed with a family. It works best where the carer operates in partnership with the young person rather than as an 'expert'. It was generally effective in reducing self harming behaviour and helped some young people to stop running away.
- 9.9 Specialist foster care does entail the risk that the young person may continue to go missing. Evidence from the evaluation of CAPS underlines the importance of addressing the anxieties which may result in running away early in the process. The evidence from this study suggests that it may be an appropriate short term intervention for young people whose involvement in sexual exploitation has accelerated quickly, but for whom return to their family home is a viable option (i.e. to provide a breathing space from immediate family problems). For young people whose relationship with the family has completely broken down it may be an appropriate longer term intervention provided that they can buy into the concept of an alternative family placement as a bridge to independent living.

Intensive intervention in the community

- 9.10 It is possible to care for young people who are absconding, and at risk of involvement in sexual exploitation, with intensive intervention in a community context. This may involve intensive family support to enable the young person to remain at home, or increased support in a residential setting. Intensive family support may need to include mediation services between young people and their parents as advocated by Melrose et al (1999) and by respondents in this research. This is the approach co-ordinated by CAMHS in East Glasgow for whom 'providing community alternatives to secure and in-patient admissions' is a core objective. Success relies upon thorough assessment of need and of the resources and relationships available to each young person, accompanied by a high level of multi-agency co-operation and co-ordination.
- 9.11 Early intervention is vital where young people run away. Where a young person is 'going missing' and at risk of involvement in sexual exploitation, a proactive approach to maintaining contact with them is vital. Assertive outreach is more likely to provide an effective means of maintaining contact and responding to immediate risks. This combined with support and guidance for parents/carers, education concerning

risks and providing alternatives to running away is the mode of intervention of Barnardo's sexual exploitation and 'missing' services (Palmer, 2002).

- 9.12 None of the respondents in this study advocated 'tagging' as an effective means of responding to the needs of young people involved in sexual exploitation, given that the young people were considered to be at risk rather than a risk to others. Indeed some were concerned that it might place them at greater risk, particularly given that current technology enables knowledge of where the person is not, but not where they are.

'Carers should know when a young person has disappeared from their home or unit without a tag to tell them! It's what they are able to do with them when they're there [that matters]. That's what'll make any difference.'

Community agency worker

'The concern we have about if you have to stay in was about who you had to stay in with, and what checks about where they were living and whether it was safe and all that kind of stuff. If you are a young woman and you are having to stay in the house who is in the house with you? Are you being kept in there with your abuser?'

Community agency worker

10. Recommendations

Policy

1. The Scottish Executive should take appropriate steps to promote awareness of and the use of existing guidance (Vulnerable Children and Young People: Sexual Exploitation Through Prostitution, Scottish Executive, 2003).
2. As recommended in the guidance, Child Protection Committees should develop and promote inter-agency protocols on working with children and young people who are vulnerable to sexual exploitation.
3. The Scottish Executive should consider engaging in consultation with local authorities and secure units in order to commission a feasibility study on the development of a co-ordinated approach to the management of secure placements.
4. Grounds for referral to a Children's Hearing should include specific reference to the involvement of young people in sexual exploitation in order to ensure that decisions are appropriate to their needs and that the effectiveness of interventions can be monitored and reviewed. Existing training for panel members should be refined to assist them in responding to the needs of sexually exploited young people.

Practice

5. The models of care and intervention for sexually exploited young people identified in this research should be used to inform the monitoring and evaluation of services provided by all relevant agencies, in order to identify and promote best practice in relation to the design and delivery of appropriate interventions and programmes.
6. Local authorities should be encouraged to establish working groups to review the impact of their practice on young people known to be sexually exploited, at risk or absconding. These should be used to develop effective early intervention, assertive outreach and intensive support in the community and foster good multi-agency practice.
7. Secure units should be encouraged to work in partnership to develop a consistent and coherent model of provision for young people who have been involved in sexual exploitation. This should cover placement needs, assessment procedures and options for programmes and intervention.
8. Secure units should be encouraged to ensure that appropriate accommodation and resources are provided for therapeutic work with young people who have been involved in sexual exploitation.

9. Secure units should be encouraged to take steps to ensure that a consistent level of CAMHS input is provided across all units. This should include the provision of training, clinical supervision and consultation for all care staff involved in direct work with young people who have been involved in sexual exploitation.
10. Local authorities and secure units should be encouraged to ensure that the impact of programmes and direct interventions delivered for young people involved in sexual exploitation are rigorously monitored and where appropriate externally evaluated. Steps should be taken to involve young people directly in these processes.
11. The Scottish Executive should consider working in partnership with the Scottish Institute for Residential Childcare (SIRCC) to promote and support the development of training programmes targeted at non-specialist staff in secure settings. Such training should cover, working with sexually exploited young people, mental health (particularly self-harm), sexual health and relationships work with young people.

Research

12. The Scottish Executive should consider commissioning research with a wide range of stakeholders (e.g. local authorities, children's reporters, children's panel members, community based agencies, the police and young people themselves) to enable a more rigorous understanding of the extent of sexual exploitation of young people in Scotland. The findings of this study suggest that this may best be achieved by commissioning researchers with expertise in extrapolating prevalence estimates from partial secondary data.
13. The Scottish Executive should consider commissioning a small scale qualitative study to explore the experiences and service needs of young men involved in sexual exploitation. The study should involve a range of stakeholders including selected local authorities, community based agencies and young men.

References

- Aitken, G. and Logan, C. (2004) 'Dangerous women? A UK response', *Feminism & Psychology* 14: 2: 262-269.
- Allen, J.P. and Land, D. (1999) 'Attachment in Adolescence' in J. Cassidy and P.R. Shaver (Eds) *Handbook of Attachment* New York: The Guildford Press.
- Barnardo's (2000) *Sexual Exploitation in Lambeth, Southwark and Lewisham*. Barking: Barnardo's.
- Barnardo's UK and Stadavies, Netherlands (2004) 'What works in child sexual exploitation - sharing and learning' Funded by the Daphne Programme of the European Commission 2002-03.
- Buckley, R. and Brodie, S. B. (2000) 'Child Prostitution: A Scottish Perspective' in D. Barrett (Ed) *Youth Prostitution in the New Europe: The Growth in Sex Work*, Lyme Regis: Russell House.
- Cusick L (2002) 'Youth prostitution: A literature review', *Child Abuse Review*, 11: 230-251.
- Cusick, L., Martin, A. and May, T. (2003) *Vulnerability and involvement in drug use and sex work*, London: Home Office.
- Department of Health (1998) *Children Accommodated in Secure Units, year ending 31 March 1998: England and Wales*.
- Fonagy, P., Leigh, T., Steele, M., Steele, H et al (1996) 'The relationship of attachment status, psychiatric classification, and response to psychotherapy' *Journal of Consulting and Clinical Psychology*, 64: 22-31.
- Goldson B (2002) *Vulnerable Inside: Children in secure and penal settings*. London: The Children's Society.
- Harter, S. (1988) *The self-perception profile for adolescents*, University of Denver.
- Hayes, C. and Trafford, I. (1997) 'Issues for voluntary sector detached work agencies' in David Barrett (Ed) *Child Prostitution in Britain: Dilemmas and Practical Responses*. London: The Children's Society.
- Heron, G. and Chakrabati, M. (2003) 'Exploring the Perceptions of Staff towards Children and Young People Living in Community-based Children's Homes', *Journal of Social Work*, 3: 1: 81-98.
- Hicks, L., Archer, L. and Whitaker, D. (1998) 'The Prevailing Cultures and Staff Dynamics in Children's Homes: Implications for Training', *Social Work Education*, 17: 3: 361-373.

Hughes, D. (1997) *Facilitating Developmental Attachment*. New Jersey: Jason Aronson.

Joseph N (1997) *Diversions Tactics out of prostitution for young women*. National Youth Agency. Occasional Paper no.12.

Lee, M. & O'Brien, R. (1995) *The Game's Up: redefining child prostitution*. London: The Children's Society.

Liebling, A., Price, D. and Elliot, C. (1999) 'Appreciative inquiry and relationships in prison', *Punishment and Society*, 1: 1: 71-98.

Low, G., Jones, D., Duggan, C., Power, M., & MacLeod, A. (2001). 'The treatment of deliberate self-harm in borderline personality disorder using dialectical behaviour-therapy: A pilot study in a high security hospital' *Behavioural and Cognitive Psychotherapy*, 29: 85-92.

Madden, T. (2004) 'Women and Risk' in N. Jeffcote and T. Watson (Eds) *Working Therapeutically with Women in Secure Mental Health Settings* London: Jessica Kingsley.

May T., Harocopos A. & Turnbull P.J. (2001) *Selling sex in the city: an assessment of an arrest-referral scheme for sex workers in Kings Cross*. Home Office. Drugs Prevention Advisory Service.

Melrose, M., Barrett, D. and Brodie, J. (1999) *One Way Street: Retrospective on Childhood Prostitution*, London: Children's Society.

National Children's Bureau (1995) *Safe to let out? The current and future use of secure accommodation for children and young people*, London: National Children's Bureau.

National Women's Mental Health Strategy: Into the Mainstream (2002) London: Department of Health Publications.

O'Connell Davidson, J. (1998) *Prostitution, Power and Freedom*, Cambridge: Polity Press.

O'Neill T (1999) 'Locking up children in secure accommodation: A Guardian ad Litem perspective', *Representing Children*, 11: 4: 289-298.

O'Neill T (2001) *Children in secure accommodation: a gendered exploration of locked institutional care for children in trouble*. London: Jessica Kingsley.

Palmer, T. (2001) *No son of mine! Barkingside*: Barkingside: Barnardo's.

Palmer, T. (2002) *Stolen Childhood: Barnardo's work with children abused through prostitution* Barkingside Barnardo's.

Pearce, J, Williams, M & Galvin C (2003) *'It's someone taking a part of you': A study of young women and sexual exploitation*. London: National Children's Bureau.

Phoenix, J. (2003) Working with prostitution: A database.
http://www.regard.ac.uk/research_findings/R000223916/report.pdf (27/02/04)

Ritchie, J and Lewis, J. (2003) *Qualitative Research Practice: A Guide for Social Science Students and Researchers*, London: Sage.

Rose, J. (2002) *Working with Young People in Secure Accommodation: From Chaos to Culture*, Hove: Brunner-Routledge.

Scott, S (2001) PHASE: A Case Study Evaluation. Barkingside: Barnardo's.

Scott, S. (2004) 'Opening a can of worms? Counselling for survivors in women's prisons' *Feminism & Psychology* 14: 2: 256-262.

Scott, S. and Williams, J. (2001) 'Closing the gap between evidence and practice: The role of training in transforming mental health services' in N. Jeffcote & T. Watson (Eds), *Therapeutically with Women in Secure Settings*, London: Jessica Kingsley.

Scott, S. & Parry-Crooke, G. (2001) Gender difference matters, *Mental Health Today* October pp.18-22.

Scottish Children's Reporters Administration (2003) Annual Report 2002-03.

Scottish Executive (2001) Secure Accommodation Advisory Group Interim Report, July 2001.

Scottish Executive (2002) *Vulnerable Children: Young runaways and children abused through prostitution*, Edinburgh: HMSO.

Scottish Executive (2003a) *Vulnerable children and young people: sexual exploitation through prostitution*, Edinburgh: HMSO.

Scottish Executive (2003b) *Children's Social Work Statistics 2002-03*, www.scotland.gov.uk/stats/bulletins/

Scottish Executive (2003c) *The Need for Secure Accommodation in Scotland*, 27 June 2003.

Shaw I. & Butler I. (1998) *Understanding young people and prostitution: a foundation for practice?* *British Journal of Social Work* 28: 177-196.

Silbert, MH and Pines, AM (1981) 'Sexual abuse as an antecedent to prostitution' *Child Abuse and Neglect* 5, 407-11.

Social Work Research Centre, University of Stirling et al (2004) *Evaluation of Secure Accommodation: Survey of Secure Authorisations*, Unpublished paper

Social Work Services Inspectorate (1996) *A review of the role, availability and quality of secure accommodation for children in Scotland*. Edinburgh: HMSO.

Spencer, L., Ritchie, J., Lewis, J. and Dillon, L. (2003) *Quality in Qualitative Evaluation: A framework for assessing research evidence*, London: Cabinet Office.

Taylor-Browne J (2002) *More than one chance! Young people involved in prostitution speak out*. London: Epkat UK.

Utting, D., Vernard, J. and Scott, S. (2002) 'What Works with Young Offenders' in D. McNeish, T. Newman & H. Roberts (Eds) *What Works? Effective Social Care Services for Children and Families*, Milton Keynes: Open University Press.

Walker, M., Hill, M. and Triseliotis, J. (2000) *Fostering and Secure Care: An Evaluation of the Community Alternative Placement Scheme (CAPS)*.

Walker, M., Hill, M. & Triseliotis, J. (2002) *Testing the limits of foster care: Fostering as an alternative to secure accommodation*. BAAF, London.

Wilkins, T.M. and Warner, S, 2001 'Women in Special hospitals: understanding the presenting behaviour of women with borderline personality disorder'. *Journal of Psychiatric and Mental Health Nursing* 8: 289-297.

Williams, J & Scott, S. (2002) Service Responses to Women with Mental Health Needs, *Mental Health Review* 7: 1: 6- 14.

Secure Accommodation Research Project – interview guide for local authority contacts

A. Admissions to secure accommodation

What is the overall pattern of admissions for the period 2000 -2003?

How are admission patterns monitored by the authority?

What is known about admissions in relation to abuse/risk of abuse through prostitution?

What other factors are most frequently linked to this, e.g. mental health/ drug use/absconding?

Which units have admissions been made to?

B. Level and nature of their involvement in prostitution

What kinds of activities are those involved in prostitution engaged in?

Are there different levels of involvement?

What are the differences between young men and young women?

C. Other interventions/services

What other interventions have been used/considered?

Have there been any changes in intervention during the period 2000-03?

What community services are available?

What is known about the effectiveness of those services?

D. Use of secure accommodation?

What are the needs of young people when admitted to secure accommodation?

What kind of programmes do they receive?

How effective are these programmes?

How long do these young people spend in secure accommodation?

What kind of after care support is provided when they leave?

Interview schedule: Secure unit staff

The purpose of these interviews is to:

- Explore young people's pathways to secure accommodation so that common features can be examined and analysed.
- Examine the characteristics and practices of secure accommodation units including outcome objectives, the nature of therapeutic interventions, organisational culture, the content of psycho-social education and planning for after care.
- They will also provide some data on staff perspectives on numbers of young people admitted to secure accommodation between 2000 and 2003 where sexual exploitation is a significant factor and the duration of their admissions. Harder data on this is being collected from CP Co-ordinators/Children's Hearing Chairs.

Staff should have already seen the summary sheet describing the research, some may also have seen the ethical protocol provided to their unit manager. Spare copies of both should be taken and offered to interviewees at the outset. A short verbal introduction to the research should be followed by discussion of anonymity and confidentiality and completion of the consent form. All interviews should be tape-recorded unless the interviewee refuses consent.

1. Name, occupation, how long worked at this Unit? How did you come to work here/what did you do/where did you work previously?
2. No of places in unit, level of occupancy, length of stay, catchment area?
3. Balance of referrals between criminal justice and social welfare routes?
4. No of boys and girls?
5. Most common reasons for entering this secure unit? Is this different for boys and girls?

Introduce subject of sexual exploitation:

"In this study we will use a broad definition of sexual exploitation in order to encompass the range and complexity of young people's experiences. Thus the category may include those known to have sold sexual services to strangers or adults (i.e. young people abused through prostitution), those who have been abused in other kinds of exploitative relationships involving the exchange of sexual activities or the promise of sexual activities, for cash or kind, and those at risk of abuse through prostitution. We will include young people where all, or any, of these issues has been a significant factor in the decision to admit them to secure accommodation."

6. During the last 3 years (2000-2003) how many young people admitted to this unit do you think had previously been sexually exploited in some way?
7. How many were referred specifically because a) they were known to be sexually exploited b) there was concern that this was likely to be the case?

8. How many girls and how many boys?
9. Amongst young people referred for other reasons how often do issues of sexual exploitation emerge in the course of their time here?
10. Thinking about the sexually exploited girls you have worked with during this period: are there other commonalities in their experiences? Are there other issues which often accompany sexual exploitation mental health issues/ drug use? (Prompt for anecdotal case study: 'Does a particular young woman come to mind?')
11. And thinking about the boys? (Prompt for anecdotal case study)
12. What previous services have been used/interventions made and why have they been insufficient/unsuccessful?
13. What kind of alternatives may have been considered prior to secure placement? If so, why were they not considered appropriate?
14. What are the intended outcomes of these young people's period in secure accommodation?
15. Are there particular difficulties/challenges in looking after at risk/sexually exploited young people in a unit like this? (prompt re mixed provision/victims/perpetrators.)
16. How are the needs of these young people assessed at the point of entry to secure accommodation? What kinds of need are often identified? Can these be addressed in the unit? (Prompt for whether they think secure accommodation meets some of the needs of some young people who have been sexually exploited or involved in prostitution? If so, which needs and which young people?)
17. Are specific issues around attachment, 'borderline' personality traits or post-traumatic stress specifically identified? How are they treated?
18. What kind of therapeutic input do young people receive whilst they are in secure accommodation? Are outcomes evaluated? How effective are the interventions?
19. Does the unit provide psycho-social education on issues of sexual abuse, domestic violence, substance use, relationships/sexual health?
20. Do you think the physical security of the unit is a necessary component in successful interventions with some sexually exploited young people? Could effective intervention be provided in conditions of lower security/intensive support/community settings?
21. What kind of after care support is provided when they leave? Is this effective in helping them to sustain a different and safer life style?

Many thanks for your time and very helpful contribution.

Ethical Protocol: The use of secure accommodation as a response to young people's sexual exploitation and the feasibility of alternative provisions

This protocol sets out the ethical framework that will guide the conduct of the study of the use of secure accommodation as a response to young people's sexual exploitation in Scotland. It has been developed in line with Barnardo's Statement of Ethical Research Practice (Appendix 1).

The purpose of the study

In order to deliver an ethically responsible study, this statement systematically considers the study rationale, methods and procedures and the steps that will be taken in response to ethical considerations.

The core task of the study is to provide information which can inform policy, service planning and delivery.

The study will focus on the following research questions:

- How many young people are admitted to secure accommodation in Scotland where risk of sexual exploitation is a significant factor?
- What is the level and nature of their exploitation/ involvement in prostitution?
- What other factors are most frequently linked to this, e.g. mental health issues/ drug use?
- What previous services have been used/interventions made and why have they been insufficient/unsuccessful?
- Have other disposals been considered prior to secure placement? If so, why were they not considered appropriate?
- What are the needs of these young people at the point of entry to secure accommodation?
- What kind of programmes and therapeutic input do young people receive whilst they are in secure accommodation, and how effective are these?
- How long do these young people spend in secure accommodation?
- What kind of after care support is provided when they leave? Is this effective in helping them to sustain a different and safer life style?
- Does secure accommodation meet some of the needs of some young people involved in prostitution? If so, which needs and which young people?
- What alternatives to secure disposals are currently being provided in the UK and beyond? What evidence is available for their effectiveness?

The study is intended to be of direct or indirect benefit to children and young people, their parents/carers, secure services and local authorities in Scotland, the Scottish Executive and Barnardo's. It is anticipated that it will provide useful knowledge for both service providers and policy makers.

The study and the questions it poses are worthwhile for the following reasons:

- a) Over the last decade there has been an increased awareness of the sexual exploitation and abuse through prostitution of young people. However, there has been little research on effective interventions to support such young people and divert those at risk from becoming entrapped in an extremely risky and abusive lifestyle. The development of future provision should be based on good evidence of what is effective.
- b) The Scottish Executive is concerned to ensure that secure provision is used appropriately and to develop services to meet the needs of particular groups of young people. This research is therefore well-positioned to influence future service provision in the field.

The study will reflect the participatory approach of Barnardo's and will therefore involve young people as well as secure unit staff, workers in community/voluntary services, and those involved in the referral and ongoing care of young people who experience secure services.

Responsibilities towards research participants

The researchers undertaking the study are responsible for ensuring that the physical, social and psychological wellbeing of research participants is not adversely affected by the study. The following sections highlight the issues raised by the study and describe the researchers' steps to protect informants.

The researchers recognise the potential imbalance of power between the researchers and some of the respondents. Careful planning and the research design will go some way to address this. The guiding principle is that all those taking part should be viewed as equals and be treated with respect.

Young people

The study will involve young people who have experience of secure care and have been sexually exploited. We have decided not to involve young people who are **currently** resident in secure facilities. This decision was reached on the basis of the difficulties of ensuring that consent is truly free and informed when respondents are not in other respects free to make independent decisions about their own welfare, participation in activities and movements. We also considered that appropriate levels of privacy and confidentiality would be very difficult to achieve and that this could influence young people's expression of their views in a research interview with an unknown researcher. This study will therefore seek the views of young people who have previously been resident in secure units. Access to young people will be sought through community/voluntary services with which they are involved on an ongoing basis. The researchers will work closely with service managers and staff to identify appropriate young people to invite to contribute their views and experience to the research. Contact with young people will be established through a designated key worker who will be briefed to assist a young person in making an informed decision about participation, and who is able to provide ongoing support in relation to the issues explored in the research interview.

The researchers recognise that some of the participants will suffer from multiple disadvantage including poverty, educational disadvantage and the impacts of racism and sexism. Some may be coping with severe stress within their home or community setting. The research team will take careful account of these issues in the design of the methodology and in their analysis of data collected. Particular sensitivity to gender issues will be shown in the selection of interviewers/observers, the issues attended to and the questions asked.

The researchers will provide a non-judgemental, supportive, friendly and empathic response when conducting interviews. The researchers will be clear as to the nature and limits of their role. They will ensure that they are well informed about relevant local and national services/sources of support . Where appropriate young people will be informed about/or referred to other services.

All research participants

▪ Voluntary, informed consent

Steps will be taken to ensure that all participants are able to give voluntary, informed consent. In order to give their full consent, all participants will be provided with **information** about the study in advance. This will contain an explanation of the study process: including information on what the study is about, who is undertaking and financing it, why it is being undertaken, what to expect when taking part and what will happen to the information. All information will use language that is accessible, appropriate and relevant to young people and will contain the researchers' contact details. All participants will be encouraged to ask questions and discuss the study with the researcher before deciding to consent. All information will be reiterated at the start of any interview.

All participation in the study process is **voluntary**. Potential participants will be reassured that not taking part in the study or withdrawing consent will in no way impact on their employment or placement. Participants will be able to withdraw from the study process at any stage. In an interview the researcher will rehearse with how to indicate if the participant does not want to answer a question or if they no longer wish to take part.

Young people are potentially more vulnerable to pressure to participate in a particular process. Pressure may come from adults or peers, therefore care must be taken to provide young people with the time, support and information to make an informed choice as to whether or not to take part in the study. In addition to being a specific agreement about the conditions of participation in the study, **consent** is viewed as an on-going, two-way communication process between the researcher and participants.

The researchers will ensure that there is a person to contact if a respondent is unhappy with any aspect of the study process.

▪ Confidentiality, anonymity and privacy

The limits of **confidentiality** will be explicitly communicated to all participants taking part in the study as follows: "Whatever you have to say in this interview is confidential unless you disclose that you, or someone else, is in immediate danger of

serious harm. In such a case I would need to report that to someone who might be able to help." If a participant does disclose a matter of concern the researcher will discuss the steps they must take with the participant and offer to support them in telling someone else. This is in line with Barnardo's child protection policies.

The **anonymity** and **privacy** of those who participate in the study will be respected. All material which relates to the experiences of individuals will be anonymised (with identifying features such as names and locations removed/replaced with fictional versions). Quotations used in reporting the research will not be attributed to individual sites or persons.

The researcher team is aware that some of the young people involved in the study may be mistrustful of confidentiality policies and have heightened concerns over privacy based on their lifestyle choices or previous negative experiences with professionals and agencies. It will be made clear to them that their accounts will not be made available informally or formally to workers, ex-workers or carers or anyone outside the research team itself.

Recording data

When making notes or recording for research purposes, researchers will make clear to participants the purpose and as precisely as possible, with whom findings will be shared. The researchers will always seek permission from the respondents before recording any information.

Where a tape is used, participants will be shown how to indicate that they wish the researcher to switch off the recording equipment if they wish to say something but do not want it to be recorded. In addition, the researcher will always come prepared to take notes if participants do not feel comfortable about being recorded.

All data will be anonymised for analysis and publication purposes. This again will be communicated to the respondents. Only the research team will have access to the information collected. Participants will be able to obtain a copy of their transcript on request.

In accordance with the Data Protection Act, data will be stored in a secure manner and all research records will be destroyed 6 months after the study is completed.

▪ Selection, inclusion and exclusion

Participants will be selected to take part in the study because of their knowledge and experience of secure provision and they will have consented to take part. As discussed earlier, all participation in the study is voluntary and care will be taken to ensure that any request for participation is not coercive.

▪ Feedback and dissemination

The study is participative – questions, discussions and feedback are integral to the process. The researchers will negotiate with participants how they would like feedback on the study findings. The researcher team is committed to providing feedback on the study findings to all participants and others who may benefit from

the results. If written feedback is requested by young people materials will be produced in a way that is appropriate and accessible.

▪ **Payment or reward**

The researchers' feel that it is important to thank young people for their time. A £10 gift token will be given to young people participating in this study.

Competent researchers

The researchers involved in the study are skilled and experienced in involving children and young people, parents and carers in research. They have postgraduate degrees in research methods and they have received specific training in research with children/researching sensitive issues/child protection. They will be working within Barnardo's child protection policies. The researchers have access to experienced colleagues in the R&D team for consultation and support.

Hoped-for benefits

- Immediate Benefits for Individual Young People

It is hoped that the experience of taking part in the study will have immediate benefits to the young people involved. Alongside the opportunity to voice their opinions, participating in the study may increase self-confidence.

- Benefits to the Services involved

The learning from the study process and findings will help develop services for young people who experience sexual exploitation in Scotland. Whatever is learnt from interviews with decision makers, staff and young people will be fed back into planning and development. The underlying hypothesis is that careful research can inform decision making, promote best-practice and increase efficacy.

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Barnardo's Policy, Research and Influencing Unit

August 2003

Appendix 1

Barnardo's Statement of Ethical Research Practice

This statement sets out the ethical guidelines that should guide the conduct of all research undertaken by, or on behalf of, Barnardo's. The values and purpose of the organisation provide the overall framework within which ethical research practice is defined. These values are:

- Respecting the unique worth of every individual
- Encouraging people to fulfil their potential
- Working with hope
- Exercising responsible stewardship

Barnardo's purpose is:

- To provide services to children and young people in greatest need
- To demonstrate effective good practice and to promote developments in practice widely
- To influence social policy for the benefit of children
- To promote good childhood experiences for all children

Barnardo's acknowledges that ethical practice is necessarily rooted in ongoing reflection and discussion. The statement does not, therefore, provide a set of rules, adherence to which will avoid ethical choices or dilemmas, but recognises that it is often necessary to make such choices on the basis of principles and values, and the - sometimes conflicting - interests of those involved (see Alderson, 1996 for a comprehensive discussion of relevant ethical issues).

Core Principles

Barnardo's researchers, and those undertaking research on behalf of Barnardo's will:

- safeguard the interests of those involved in or affected by their work
- report their findings accurately and truthfully
- consider the consequences of their work or its misuse for those they study and other interested parties
- acknowledge the boundaries of their competence
- ensure that the research they undertake is worthwhile and that the methods of investigation are appropriate.

Responsibilities towards research participants

Researchers undertaking work for, or on behalf of, Barnardo's are responsible for ensuring that the physical, social and psychological well-being of research participants is not adversely affected by the research.

Research undertaken by and on behalf of, Barnardo's is frequently characterised by disparities of power and status between researchers and participants. It is expected that such disparities should be addressed in relation to research design, methods and dissemination and that researchers should strive to develop relationships with research participants on a basis of equality, trust and partnership.

Research should be based on the freely given **informed consent** of those studied. This involves providing full explanations of research projects: including information on what the research is about, who is undertaking and financing it, why it is being undertaken, and how it is to be promoted. Such explanations should be provided in terms and language, which are accessible and meaningful to participants.

- Research participants should be made aware of their right to refuse participation whenever and for whatever reason they wish.
- Research participants should understand how far they will be afforded anonymity and confidentiality and should be able to reject the use of data-gathering devices such as tape recorders and video cameras.
- Where there is a likelihood that data may be shared with other researchers, the potential uses to which the data might be put may need to be discussed with research participants.
- When making notes, filming or recording for research purposes, researchers should make clear to research participants the purpose of the notes, filming or recording, and, as precisely as possible, to whom it will be communicated.
- In situations where access to a research setting is gained via 'gatekeepers' (e.g. Project Leaders and their managers) researchers should adhere to the principle of obtaining informed consent directly from the research participants to whom access is required, while at the same time taking account of the gatekeepers' interests.

Since the relationship between the research participant and a gatekeeper may continue long after the researcher has left the research setting, care should be taken not to disturb that relationship unnecessarily.

The **anonymity and privacy** of those who participate in research should be respected. Personal information concerning research participants should be kept confidential. In some cases it may be necessary to decide whether it is proper or appropriate even to record certain kinds of sensitive information. Where possible threats to the confidentiality and anonymity of research data should be anticipated by researchers.

Appropriate measures should be taken to store research data in a secure manner. Researchers should have regard to their obligations under the Data Protection Act. Wherever appropriate methods for preserving the privacy of data should be used. These

will include the removal of identifiers and the use of pseudonyms. Researchers should particularly guard against data being published or released in a form which would permit the actual or potential identification of research participants

Guarantees of confidentiality and anonymity given to research participants must be honoured, unless there are clear and overriding reasons to do otherwise. However, research data given in confidence do not enjoy legal privilege and may be liable to subpoena by a court. In relevant circumstances research participants should be made aware of this fact.

Barnardo's is committed to providing feedback on **research** findings to participants. In addition to making copies of full reports readily available, summaries, presentations and young people's reports should be produced as appropriate.

Research involving children and young people

The majority of research conducted by, and on behalf of, Barnardo's involves children and young people. The responsibilities detailed above apply equally to children and young people, however, there are specific issues arising from children and young people's legal status, their knowledge and experience of the world and their relative lack of independence/autonomy that require specific attention in order to ensure appropriate and ethical research practice. Research conducted by, and on behalf of, Barnardo's is committed to addressing these issues in the context of an organisational commitment to maximising the participation of children and young people at all levels of planning, study and influencing.

Research intending to involve children and young people as respondents should begin with a consideration of the **potential costs and hoped-for benefits** of such participation.

- In order to ensure that such issues are central to the research design young people should be involved/consulted in the planning and piloting of research whenever possible.
- Safeguards to minimise any inconvenience, intrusion, embarrassment, coercion or distress should be written into the research protocol.
- Attention should be paid to ensuring that participation in research is a positive and rewarding experience. Where there is no direct benefit likely to ensue from the time and expertise contributed by young people consideration should be given to appropriate gratuities.
- Feedback on research findings should be routinely provided to children and young people as part of acknowledging their contribution and seeking their views on outputs and dissemination.

The **informed consent** of children and young people to participation in research should be actively and explicitly sought.

- Information about the proposed research and the optional nature of participation should be provided in both oral and written form and presented in accessible language.

- Attention should be paid to minimising possible coercion from parents, teachers and other adults, and to minimising the influence of peer pressure.
- Young people should be encouraged to question researchers about the aims and methods of the research.
- Written, or explicit, recorded consent should be obtained from research participants whenever possible. (For children aged 5-12 the recommended procedure to be followed is Sieber, 1992ⁱ)
- The option of withdrawing from the research at any stage should be clearly communicated and reviewed at intervals in the research process.

The **consent of parents**, or guardians should be routinely sought except:

- where it is clear that participation in the research involves minimal risk (i.e. risks no greater than those in everyday life) and will not infringe the rights or impact on the welfare of participants
- where parental/carer permission is impossible or would not protect the child or young person (i.e. where relations have broken down)
- where the young people concerned are resistant to parental/carer consent being sought on the grounds of their right to privacy and confidentiality, **and** where the emotional and social maturity and particular vulnerabilities of the young people have been evaluated and the risks of participation are considered to be low.

At risk and particularly vulnerable children and young people

Barnardo's recognises that young people involved in risky or illegal activities (under-age sex for example), who are incarcerated or have run away from home or care will have heightened concerns over privacy and may be mistrustful of the confidentiality of their participation. In this context:

- Ethical dilemmas should be anticipated and advice sought from those working with the relevant population of young people.
- Where possible young people from the relevant population should be involved in research design and piloting consent procedures.
- Special precautions - such as the collection of anonymous data - may be used to protect confidentiality.
- Researchers should be cognisant of services relevant to the possible support needs of research participants. A fact sheet detailing services should be prepared.
- Where participation in research is liable to be stressful young people should be asked if they would like to have a friend or advocate with them.
- Arrangements for optional de-briefing after interview/focus group participation should be considered.
- The limits to confidentiality should be explicitly communicated as follows: "Whatever you have to say in this interview/focus group/questionnaire is confidential unless you disclose that you, or someone else, is in immediate danger of serious harm. In such a case I would need to report that to someone who might be able to help."

Responsibilities towards sponsors and/or funders

Research that is unlikely to contribute to Barnardo's purpose, or is in contradiction with the organisations values, will not be undertaken or commissioned. Research will be undertaken with a view to providing information or explanation rather than being constrained to reach particular conclusions or prescribe particular courses of action.

When Barnardo's is commissioning research, or being funded to undertake research on behalf of a third party there should be a written contract detailing the central research questions, methods, time-frame, outputs and dissemination plans.

- Researchers have a responsibility to notify the sponsor and/or funder of any proposed departure from the terms of reference of the proposed change in the nature of the contracted research.
- Researchers must make every reasonable effort to complete the proposed research on schedule, including reports to funders.

Alderson, P. (1996) 'Ethics and research directed towards effective outcomes' in A. Oakley and H. Roberts (eds) *Evaluating Social Interventions* Barking: Barnardo's
Sieber, J.E. (1992) *Planning Ethically Responsible Research* Newbury Park, CA: Sage.
Stanley, B and Sieber, J.E. (1991) *Social Research on Children and Adolescents: Ethical Issues*. Newbury Park, CA: Sage

¹ Hi [child's name]

My name is [your name], and I am trying to learn about [describe project briefly in appropriate language].

I would like you to [describe what you would ask the child to do. Don't use words like "help" or "cooperate", which can imply a subtle form of coercion].

Do you want to do this? [If the child does not give clear affirmative agreement to participate, you may not continue with this child.]

Do you have any questions before we start? [Answer questions clearly.]

If you want to stop at any time, just tell me. [If the child says to stop, you must stop.]