



Harmful Sexual Behaviours Protocol

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Contents

- [Introduction](#) Page 03
- [Definitions](#) Page 03
- [Principles and Linked documents](#) Page 04
- [Key Considerations](#) Page 05
- [Responses to Harmful Sexual Behaviours](#) Page 07
- [Referral and Assessment](#) Page 09
- [Appendix 1 – HSB Referral Pathway](#) Page 12
- [Appendix 2 – Strategy Discussion Flowchart](#) Page 13
- [Appendix 3 – Further Information and Resources](#) Page 14

Introduction

Children and young people who display harmful sexual behaviour should be identified at the earliest opportunity and their behaviour addressed in order to both meet their needs and to protect other children.

It is important to remember that children and young people who display harmful sexual behaviours may themselves have considerable unmet needs. For some the manifestation of harmful sexual behaviours may be as a direct result of suffering abuse themselves.

This protocol is about supporting young people and their families when sexual behaviours become problematic and harmful and providing professionals with guidance about how to identify such behaviours and how to respond to them.

Definitions

Harmful sexual behaviour by children and young people includes a range of behaviours in a variety of situations and can be defined as: –

“Sexual behaviours expressed by children and young people under the age of 18 years old that are developmentally inappropriate, may be harmful towards self or others, or be abusive towards another child, young person or adult” (Hackett 2014)

Statistically, young males are most likely to be perpetrators of sexual violence and sexual exploitation and young women are most likely to be at risk of or experience sexual exploitation (*Children’s Commissioner’s study, Berelowitz et al, 2012*). However, the situation is more complex as young men can experience sexual exploitation including violence and coercion to pressurise them into performing acts as part of a group or gang. This may include coercion in sexually exploiting others. Additionally, young women can become involved in recruiting other young women to be sexually exploited or be involved in acts of sexually exploiting others as part of their own experiences of being sexually exploited or as part of a pattern of violent offending. Currently there is likely to be a significant under-reporting of young males who have experienced sexual exploitation (*Research on the sexual exploitation of boys and young men – A UK scoping study, Barnardos, August 2014*). This will need to be part of the consideration of vulnerability and risk factors within each professionals meeting.

Professor Simon Hackett’s research review, published by NSPCC Research in Practice in 2014, showed that:

- Children and young people account for about a quarter of all sexual abuse convictions against victims of all ages (Vizard, 2004) and a third of all sexual abuse coming to the attention of the professional system in the UK (Erooga and Masson, 2006)
- In many cases, children and young people occupy dual identities as perpetrator of abuse and victim of harm

- The average age of children being referred for therapeutic interventions as a result of their sexual behaviour is dropping: a significant proportion of referrals concern children in their pre-adolescent years
- There is a recorded increase in sexual behaviours online (Technology-Assisted HSB) but young people with these behaviours may not share the backgrounds and risk profiles of those who commit sexual offences involving direct contact
- Young people with learning disabilities are a particularly vulnerable group and young people with Autism Spectrum Disorder are over-represented in internet enabled sexual offences

Hackett proposed a continuum model to demonstrate the range of sexual behaviours presented by children and young people from those that are normal to those that are “highly deviant”

| Appropriate | Inappropriate | Problematic | Abusive | Violent |
|--------------------------------|---|---|--|--|
| Developmentally expected | Single instance of inappropriate sexual behaviour | Problematic and concerning behaviours | Victimising intent or outcome | Physically violent |
| Socially acceptable | Socially acceptable behaviour within a peer group | Developmental unusual and socially unexpected | Includes misuse of power | Highly intrusive |
| Consensual, mutual, reciprocal | Context for behaviour may be inappropriate | No overt elements of victimisation | Coercion and force to ensure victim compliance | Instrumental violence which is physiologically and/or sexually arousing to the perpetrator |
| Shared decision making | | Consent issues may be unclear | Intrusive | Sadism (getting enjoyment from hurting or humiliating others) |



A continuum of children and young people's sexual behaviours

Problematic sexual behaviour may not include overt victimisation of others but can be developmentally disruptive, cause distress, rejection or increase the victimisation of the children/young people displaying the behaviour.

Harmful sexual behaviour (HSB) is characterised by behaviour involving coercion, threats or aggression together with secrecy or where a participation relies on an unequal balance of power. Such a power imbalance may be due to age, intellectual ability, status, physical size and/ or strength, gender or race. HSB may or may not result in criminal conviction or prosecution.

Both problematic and harmful sexual behaviours may involve aspects of physical and / or emotional abuse. Such factors require consideration within the wider context of bullying and for older young people teen domestic abuse.

Chaffin et al (2002 p208) suggest a child's sexual behaviour should be considered abnormal if it:

- Occurs at a frequency greater than would be developmentally expected
- Interferes with the child's development
- Occurs with coercion, intimidation or force
- Is associated with emotional distress
- Occurs between children of divergent ages or developmental abilities
- Repeatedly recurs in secrecy after intervention by caregivers.

[Principles and Linked documents](#)

This document is designed to focus on the needs of the child or young person who is or may be causing harm. Whenever a child or young person may have harmed another, all agencies must be aware of their responsibilities to both children (or indeed adult if the victim is over 18) and multi-agency management of both cases must reflect this. While the focus will be on the child committing the harm separate consideration should be given to the support of the victims and their safeguarding needs in accordance with local procedures. Where the victim

is over 18, Safeguarding Adult Procedures should be utilised. It should also be kept in mind that it is possible that children with sexually harmful behaviours may pose a significant risk to their own siblings and close family members.

Many children and young people who carry out harmful sexual behaviours have themselves been victims of abuse, neglect or other forms of traumatic experience. It is vital that professionals do not lose sight of the fact that they are children first and foremost and their needs should be met in a holistic way at the first available opportunity. This may include a trauma informed approach.

Professionals must be aware of the legitimate concerns about the inappropriateness of placing labels upon children and young people, given their developmental status, for example, referring to a child or young person as a **'young sex offender'** or **'young abuser'** is not appropriate. The use of the term **'a child / or young person who displays problematic or harmful sexual behaviour'** is more appropriate and accurate, as it emphasises the child or young person's developmental status first and foremost whilst acknowledging the behaviours that require attention.

The purpose of this procedure is to provide an operational framework in respect of children and young people who display HSB and young people who suffer the effects of HSB.

Three core principles should guide work with children and young people who display harmful sexual behaviour:

- The need for a co-ordinated approach across agencies and with families
- The needs of children and young people who abuse others should be considered separately from their victims. Agencies should be alert to the fact that children who harm others may pose a risk to children other than any children currently known to have been harmed and/or be at risk of significant harm themselves
- An assessment should be carried out in each case, appreciating that these children may have considerable unmet developmental needs, as well as specific needs of children who experience it
- Children and young people who sexually harm others are in need of help and may themselves be victims of abuse or neglect and are entitled to appropriate services
- A medical assessment may be necessary at the sexual assault referral centre (SARC)

Additional information is contained in the West Yorkshire procedures for harmful sexual behaviour. See link below.

[West Yorkshire Procedures HSB](#)

When considering this document reference should be made to the Bradford Continuum of Need document [Continuum of Need](#) and to the Bradford Child Exploitation Protocol, [Child Exploitation Protocol](#).

Other useful documents are the Brooks Traffic Light assessment tool [Brook Traffic Light Tool](#) and the NSPCC Harmful Sexual Behaviour Framework [NSPCC HSB Framework](#).

All responses to Harmful Sexual Behaviour Concerns should be child focussed and must take full account of the lived experience and voice of the child.

Key Considerations

When considering whether specific behaviours by a child or young person could be classified as harmful or not, professionals should assess each case on its' merits. There are certain factors that could assist with the decision making process and some of these are listed below:

- I. What is the relative chronological difference in age between the two parties? The greater the difference in age the more likely the behaviour should be defined as abusive. (N.B. Professionals should consider situations where a child's developmental age and chronological age have a large gap. In these situations it may be more appropriate to consider the developmental age rather than their chronological age when calculating the relative gap in ages)
- II. Is the alleged abuser supported or joined by other children or young people?
- III. Is there a degree of physical aggression, intimidation or bribery/blackmail involved?
- IV. How often has the behaviour been displayed and how long has it lasted for?
- V. What is the actual behaviour being displayed (both verbal and physical factors should be considered)?
- VI. What is the difference in power or authority? (this can be related to race, age, gender, physical or emotional or intellectual vulnerability of the victim)
- VII. Could the behaviour be described as age appropriate or does it involve inappropriate sexual knowledge or motivation?
- VIII. Has there been any attempt to secure secrecy for the behaviours?
- IX. What is the experience of the victim of the behaviour and how does that impact on their routines and lifestyle?

a) Vulnerability

Victims of harmful sexual behaviours can be of any age both child or adult. Where there is an imbalance in power between the parties involved, coercion is used or there is a lack of consent vulnerability is increased. There are other factors that can also be present:

- Experience of domestic abuse
- Previous family breakdown
- Parental substance misuse

- Being a looked after child
- Having learning difficulties, either diagnosed or undiagnosed
- Speech, language, social, emotional or communication issues or difficulties for example someone on the Autistic Spectrum
- Previous experience of abuse, physical, sexual, emotional or neglect
- Experience of bullying
- Gender identity issues

b) Imbalance of Power

In abusive situations there is usually an imbalance in relative power between the victim and perpetrator. The perpetrator will use this to deny the victim free choice in the activity taking place. When assessing this in sexual relationships some of the key elements to consider are:

- Differences in age, gender and culture
- There are significant differences in the level of cognitive functioning and understanding (learning difficulties or autism for example)
- Difference in physical size and strength
- Self confidence and self-esteem
- Invested authority (e.g. baby-sitter)
- Arbitrary labels (e.g. best fighter, cock of the school, best footballer etc.)

c) Coercion

There are various forms of coercion that can be displayed. Some of these are:

- Manipulation, trickery, peer pressure or bribery
- Threats of force, intimidation or harm
- Physical restraint, force, weapons or violence
- Threats of loss of esteem, privilege or relationship.

d) Consent

Consent is defined in Section 74 of the Sexual Offences Act 2003 as *“if he agrees by choice, and has the freedom and capacity to make that choice”*.

Bearing this in mind when considering issues related to harmful sexual behaviours we have to therefore consider two fundamental questions:

1. Does the victim/complainant have the capacity (i.e. age and understanding) to make a choice about whether or not to take part in the sexual activity at the time in question? (It should be noted that The Sexual Offences Act 2003 stipulates that children under 13 years of age are given extra protections. The Act states that it is **never** acceptable for sexual activity to take place with a child under 13 and that,

regardless of the circumstances, **children below the age of 13 can never legally give their consent.**)

2. Was he/she in a position to make that choice freely, which is not constrained in any way?

Assuming that they had both capacity and freedom to consent the final, and most crucial, question is whether they agreed to the activity **by choice**.

- Consent is about choice and is therefore linked to action as opposed to passivity.
- True consent is only possible where power is shared. “Consent” to fit in or to avoid negative consequences is not consent.
- Consent requires that both parties fully understand
 - What is being asked, suggested or proposed
 - Awareness of the possible consequences of the activity
 - Understanding that the choice will not carry with it negative repercussions
- If a victim does not have the capacity to say “no” comfortably then “yes” has no meaning. Equally if a person is unwilling to accept “no” then likewise “yes” has no meaning.
- Any sexual behaviours between children and young people which does not have mutual consent is abuse. When considering this the children or young people involved must be of similar age and/or development and able to choose without any form of coercion or manipulation.

Responses to Harmful Sexual Behaviours

a) Child Centred

Professionals should be aware of the importance of using the correct language when dealing with concerns around HSB. Terminology such as “young sex offender” or “young abuser” for example should not be used as they place labels upon children and young people which given their levels of development are not appropriate. A more appropriate term would be “a child/young person who displays problematic or harmful sexual behaviour” as it is more accurate and reflective of the young persons’ developmental status while still at the same time acknowledging that the behaviours require attention and a response.

There is evidence to suggest that children and young people who display these behaviours towards others may themselves have suffered considerable disruptions in their lives, been exposed to violence within the family setting, may have witnessed or been subjected to physical or sexual violence, have problems with their educational attainment and development and have committed other offences. It is likely that these children or young people will be children in need or indeed may be at risk of significant harm and in need of protection themselves.

It is vital to view children and young people involved with harmful sexual behaviours as children first and offenders second.

b) Links with CSE and Peer on Peer Sexual Exploitation

Through national work around CSE and Peer on Peer exploitation there is a greater understanding about where Harmful Sexual Behaviours sits within the wider context of child sexual exploitation and Peer on Peer sexual abuse. It is important to understand that each of these terms describes a wide range of behaviours and experiences and they are not easily defined or differentiated. That said as far as is possible it is important to try to highlight where these concerns differ and try to clarify how the different terms are related.

Child Sexual Exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity

(a) In exchange for something the victim needs or wants, and/or

(b) For the financial advantage or increased status of the perpetrator or facilitator.

The victim may have been sexually exploited even if the sexual activity appears consensual. Child Sexual Exploitation does not always involve physical contact; it can also occur through the use of technology. (Home Office 2017)

While there is an age limit for the victims of CSE there is no mention of age restrictions for perpetrators. It is clear that some young people who display HSB are committing acts that would fit the definition of CSE in particular those that commit sexual acts against other young people within the context of a relationship, so called “peer on peer” abuse.

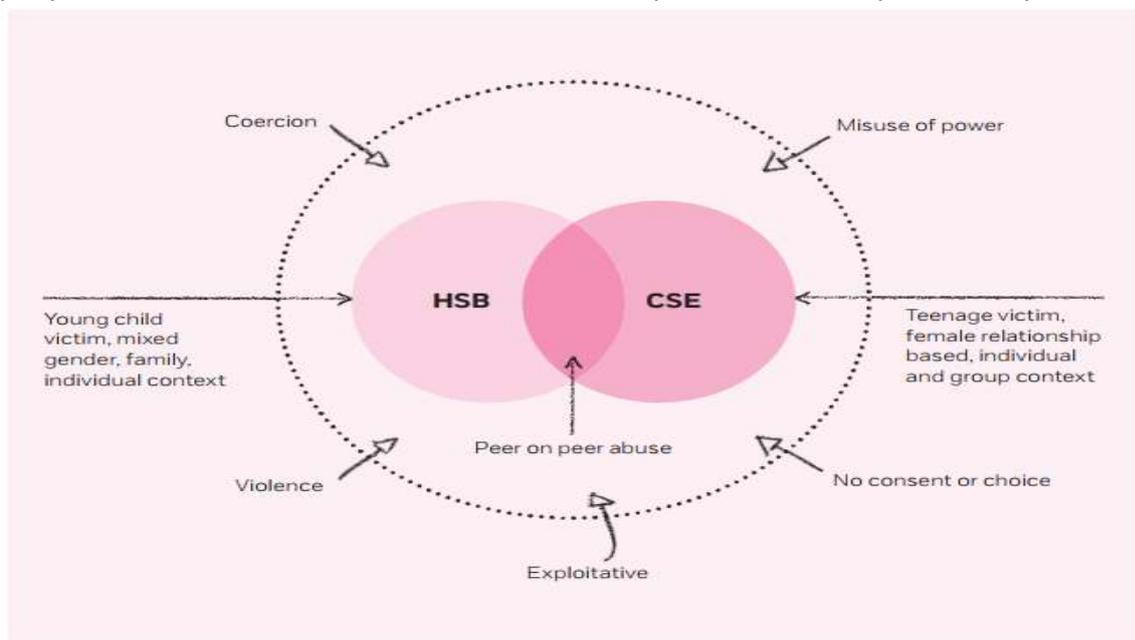


Figure 1: The distinct and interlinked nature of CSE and HSB - Hackett and Smith (2018)

In this model, CSE and HSB are seen as separate yet interlinked phenomena, with some distinct elements but the potential for overlap. CSE is more likely to be represented by sexual violence towards teenagers, often in a relational context, and frequently where young women are sexually exploited by either individuals or group offenders (adults or juveniles). HSB is envisaged as abuse that more often involves young people harming younger pre-pubescent victims of both genders in family or community contexts. Young people who sexually abuse other young people within the context of relationships, often described as ‘peer-on-peer’ abuse (Firmin, 2015), fit the definitions of both HSB as sexual behaviour which victimises others and CSE as exploitative, exchange-based abuse. Hackett et al (2016) therefore argue that it is appropriate to view HSB and CSE as distinct but overlapping forms of sexual abuse, as both share the elements of coercion, misuse of power, violence and lack of consent and choice. (Hackett and Smith – 2018 [Young People who Engage in Child Sexual Exploitation Behaviours \(Hackett and Smith -2018\)](#)).

Peer on Peer abuse concerns should be taken as seriously as those where the perpetrator is an adult.

c) Link with Online and Social Media Bullying

Children and Young people can also engage in Harmful Sexual Behaviours on-line or via various technologies. Such behaviour may include:

- Grooming
- Sexual Abuse
- Extortion
- Threats
- Malicious Conduct
- Creation of or showing of sexual images (sometimes without the knowledge or consent of the person concerned)

These procedures should be used when a child or young person has downloaded, distributed or produced sexual images which involve a criminal or abusive element **beyond** the creation, sending or possession of the images themselves, without adult involvement.

Youth produced sexual images that were experimental or sexual attention seeking, with no intent to harm another person or reckless misuse resulting in actual or likely harm caused to another person

[Referral and Assessment](#)

Any person with a concern that a child or young person under 18 has displayed or committed problematic or harmful sexual behaviours should have a consultation with the Bradford Children’s Integrated Front Door (01274 435600 or childrens.enquiries@bradford.gov.uk using the Multi Agency Referral Form [Bradford MARF](#)).

In addition a referral for medical assessment may be required at the Sexual Assault Referral Centre. The SARC can be contacted for advice, and to arrange an assessment if indicated on 03302231154

Any professional who is unsure of the need for such a consultation must seek the advice of their agency Safeguarding Lead. Anyone who has a concern that a child or adult may have been the victim of harmful sexual behaviour should report their concerns to the Police. Any information that indicates that a crime has been committed **must** be reported to the Police. The Police must decide whether to commence a criminal investigation and a discussion should take place to plan how parents are to be informed of concerns without jeopardising police investigations. The Police, when made aware of a case involving the allegation of a child or young person displaying problematic or harmful sexual behaviours will always consult with Children's Social Care to ensure that there is an assessment of the needs of the child or young person victims and perpetrators and their needs are fully assessed.

After the initial discussion a decision will be made about the need for referral to Children's Social Care for further assessment or if this is decided as not required sign-posting will be offered to alternative services that may assist in meeting the needs of the children or young people involved. In making this decision the [Brook Traffic Light Tool](#) assessment should be utilised. In cases where an assessment of Amber or Red is arrived at the process utilising the Flowchart at **Appendix 1** should be followed.

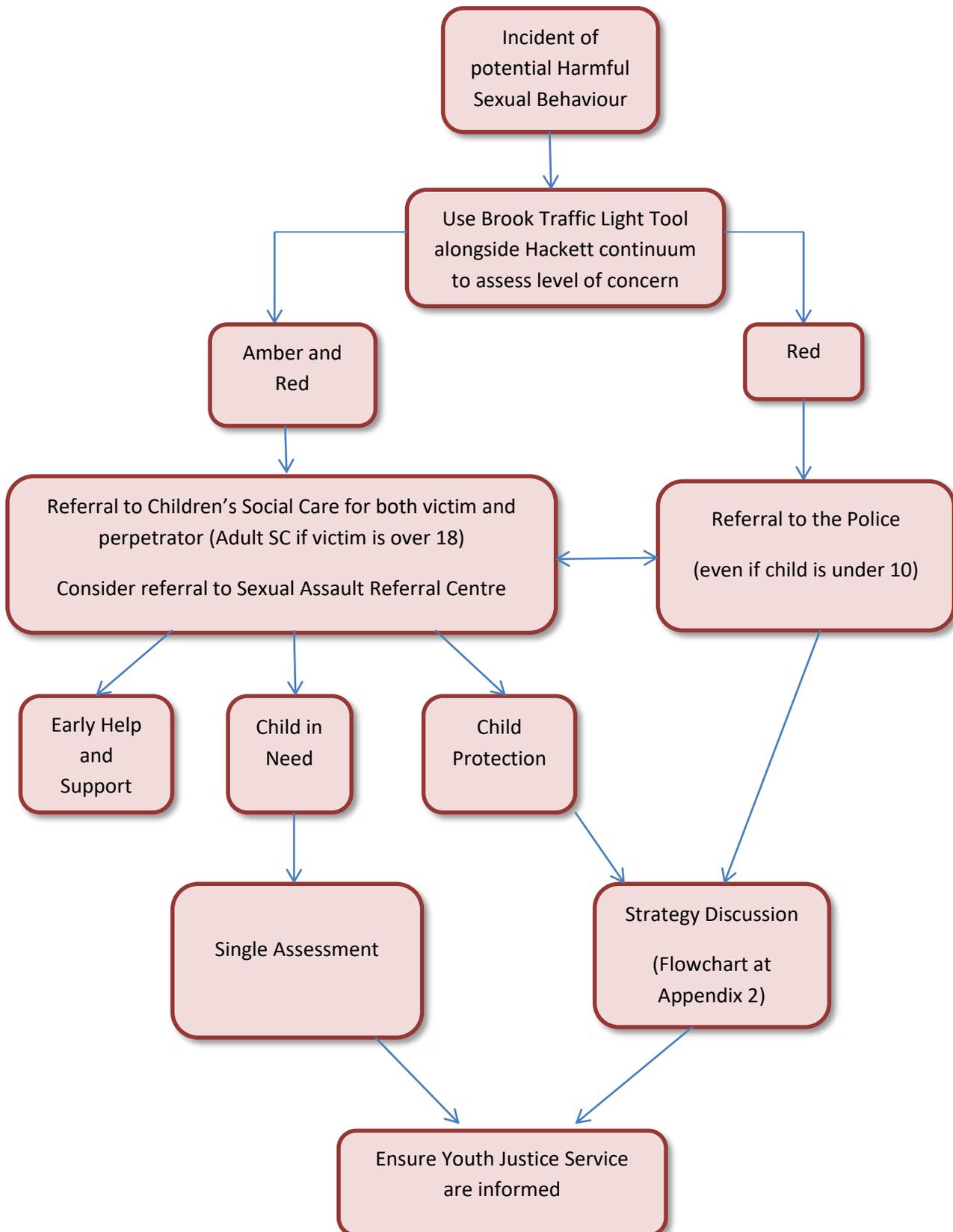
When conducting a Strategy Discussion for an HSB concern the Flowchart at **Appendix 2** should be followed. Where a child perpetrator is 10 years of age or older Youth Offending Team should be involved in these discussions.

a) Assessment Guidance and Risk Management

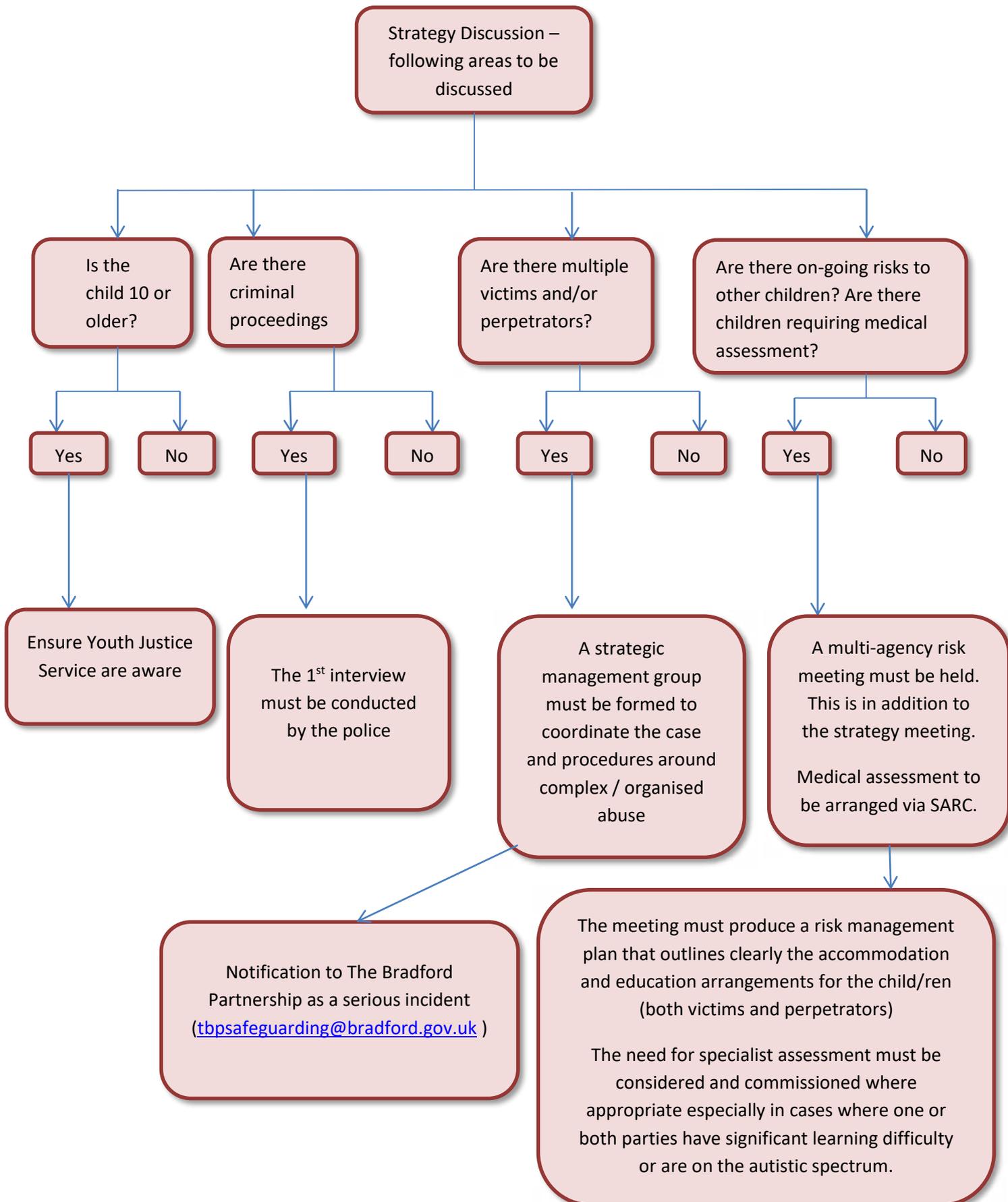
- There should be separate Social Workers for the victim and perpetrator even if living in the same household.
- All assessments should include:
 - Details of the incident/s (including the impact on the victims)
 - Details of any previous incidents
 - The context of the abusive behaviour
 - The age of the children or young people involved, both chronological or learning developmental.
 - The nature of the relationship between the children or young people involved
 - The child or young person's development, family and social circumstances
 - Whether the "perpetrator" child or young person acknowledges the alleged behaviour
 - Whether there are grounds to suspect that the child or young person ("perpetrator") has been abused or that adults have been involved in the development of the behaviours.

- Assessment of the child's need and the need for any specialist assessments (including capacity / learning difficulty)
- Accommodation and Education arrangements (during the assessment wherever possible the child should be helped to continue their school attendance/education)
- If during the Assessment there are concerns about any on-going risk to other children posed by the child or young person under assessment for HSB a multi-agency risk meeting should be convened as per **Appendix 2**. This meeting should:
 - Develop a written risk management plan in relation to any child or young person identified at potential risk.
 - This should include educational and accommodation arrangements for both the child at risk and the alleged perpetrator.
 - Agree appropriate arrangements for continuation of the assessment and the need for any specialist assessments
 - Agree how the service to be provided will be coordinated.
 - Identify the **Lead Professional** and set a review timescale.

Appendix 1 – HSB Referral Pathway



Appendix 2 – Strategy Discussion Flowchart



Appendix 3 – Further Information and Resources

To explore further the below links may be useful.

a) Advice for Young People

- Think U Know – Education programme for CEOP with advice and videos [thinkuknow](#)
- Brook Advisory Service – sexual health services - <https://www.brook.org.uk/>
- Family Planning Association – contraceptive and sexual health advice www.fpa.org.uk

b) Advice for Parents and Carers

- Think U Know – as above
- Parents Protect – advice for parents regarding sexual exploitation etc. www.parentsprotect.co.uk
- Healthy Bodies Toolkit (Vanderbilt University) for parents of children with disabilities [healthybodies](#)
- Contact – guide for parents about Growing up, sex and relationships for young disabled people - [parent guide growing up sex and relationships a booklet to support parents of young disabled people](#)

c) Sexual Behaviour and Development

- Brook Traffic Light Tool - [Brook Traffic Light Tool](#)
- Stop it Now! – Childs Play? Lucy Faithful Foundation. Preventing Abuse among children and young people - www.stopitnow.org.uk
- NSPCC guide to healthy sexual behaviour in children - www.nspcc.org.uk
- Childline – healthy and unhealthy relationship - www.childline.org.uk
- NSPCC – PANTS sexual harm prevention resources - learning.nspcc.org.uk/research-resources/schools/pants-teaching/
- Strathclyde University – Child Protection and the Needs and Rights of Disabled Children (Stalker & MacArthur et al) - [Abuse and Children with Disabilities](#)

d) Online safety and pornography resources

- CEOP – Child Exploitation & Online Protection Command www.ceop.police.uk
- Parents Protect Online advice - www.parentsprotect.co.uk-internet-safety
- NSPCC Online safety - [www.nspcc.org.uk – keeping children safe online](http://www.nspcc.org.uk-keeping-children-safe-online)
- Internet Watch Foundation – report concerns regarding online content - www.iwf.org.uk
- Sexting in schools and colleges – government guidance - [NCA Sexting In Schools](#)
- Searching, screening and confiscation – advice for schools - [Searching screening and confiscation](#)

e) NICE Guidance for Professionals

- NICE guidance on Harmful sexual behaviours www.nice.org.uk – guidance

f) Peer on Peer abuse – Guidance for Schools

- Advice for governing bodies, proprietors, head teachers, principles, senior leadership teams and designated safeguarding leads (DfE) - [Sexual violence and sexual harassment between children in schools and colleges](#)

g) Local Resources

- NSPCC Turn the Page Service

NSPCC practitioners are skilled in working with children and young people who display harmful sexual behaviour (HSB), their families and carers. Our teams are also experienced in delivering HSB related training, which help organisations respond appropriately to incidents involving this type of behaviour. Through our consultation and intervention offers, we support both professionals and families to implement effective strategies for managing and reducing ongoing concerns around HSB.

HSB risk assessment

HSB risk assessment consists of meeting the young person, their parents or carers and other professionals involved, to produce a multi-disciplinary report. The purpose of the assessment is to understand the young person’s HSB, provide analysis of the strengths and concerns currently in the young person’s life, and provide recommendations on supervision risk, case management and treatment options.

Off site or out of area

consultation

The NSPCC teams can offer advice and recommendations about managing HSB cases on a one-off basis or through ongoing consultation.

Therapeutic support for children displaying harmful sexual behaviour.

Change for Good

Change for Good is a manualised treatment programme for young people (without learning difficulties) aged 12 to 18 years old, who are displaying harmful sexual behaviour.

Good Way

The Good Way model is for young people who have mild to moderate intellectual or learning difficulties, who also display harmful sexual behaviour. The model is adaptable to a wider range of adolescents, including young people without intellectual or learning challenges.

Safe Home

The NSPCC can offer a service called Safe Home which is a psycho-educative and therapeutic programme for parents/foster carers who have/care for children who have displayed harmful sexual behaviour. Safe Home includes:

1. Exploring and reflecting on the area of harmful sexual behaviour
2. Working with the parent to develop their knowledge and understanding of harmful sexual behaviour
3. Discussing the warning signs and consequences of harmful sexual behaviour, making sense of why young people might display harmful sexual behaviour
4. Developing a personalised safety plan that includes practical steps to prevent or minimise the impact of future abuse within the home.

Based in Bradford at:

NSPCC LEEDS BRADFORD SERVICE CENTRE

Eastbrook Hall

59 Leeds Road

BD1 5AE

Contact on **01274 381440**

➤ **Family Action in Bradford**

<https://www.family-action.org.uk/what-we-do/children-families/bradford/childrens-trauma-therapy-service/>

Specialist recovery-focussed therapy for children / young people aged 5-18 who have experienced sexual abuse or a traumatic bereavement. Our offer of therapy usually includes work with the whole family, though we also welcome self-referrals from individual young people.

We welcome discussions with young people, parents and professionals about referrals into our service. You can call on: **01274 651652** and ask for a member of the Children's Trauma Therapy Service or send an email to CTTS@family-action.org.uk.

Independent Sexual Violence Advocacy Service (ISVA)