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Safeguarding in SIX

Learning from Auditing – Intra-Familial Child Sexual Abuse

1. Definition

Child Sexual Abuse (CSA) is defined as ‘...forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts, such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.’

Working Together to Safeguard Children 2023

2. National and Local Prevalence

- Data from the Home Office and Department for Education indicates that in 2021/22 there were 2,700 children in England and Wales on a child protection plan due to Child Sexual Abuse.
- 50,000 children were assessed at risk of Child Sexual Abuse (includes Child Sexual Exploitation) in England.
- 103,000 child sexual abuse offences were recorded by the police in England and Wales.
- Locally, 3% of Child Protection Plans (at the end of 2022/23) were under the category of Child Sexual Abuse in Hackney.
- There were no cases for the same period in the City of London.

3. Auditing of Local Practice

- In March 2023, the CHSCP commissioned an external auditor to examine practice involving 23 children from 15 families in Hackney where CSA was a known factor. This audit concentrated on records held by Hackney CFS.
- A multi-agency case audit (MACA) was later undertaken on several of these cases.

4. Good Practice

Identification, Referral, Assessment and Planning

- Audited cases evidenced that risks relating to CSA were being identified and appropriately referred.
- Threshold decisions were accurate and the triggering of section 47 enquiries timely.
- Strategy discussions were being held when needed and attended by key agencies.
- Information sharing at strategy discussions was effective and decision making was focused in identifying next steps.
- CP medicals were considered routinely as part of the strategy discussion process.
- There was effective practice in the arranging and undertaking of CP medicals. Decision making and action planning was prompt, with records clearly detailing findings and decisions.
- Statutory assessments evidenced the input and information from key agencies.
- There was evidence of specialist assessments being commissioned and work with male perpetrators of sexual abuse featuring in some plans.



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- There was good liaison between practitioners in developing plans and through 'internal' mechanisms such as GP link meetings.
- There was evidence of effective management oversight, supervision and concerns being escalated during periods of professional differences.

Voice of the Child and Family and the Provision of Support

- Assessments were generally strong and there was evidence of practitioners taking time to understand children and their families – their circumstances, identities and thoughts and feelings.
- Children were seen and spoken to on their own and in a variety of settings / under a variety of circumstances.
- Practitioners from a range of agencies constructively engaged with families, seeking to work in partnership with them.
- Where appropriate, services were engaged to provide practical and therapeutic support.

Active Anti Racist Practice

- In several cases, there was active exploration by practitioners about issues relating to ethnicity, culture and diversity. This helped practitioners better understand the family's background and how these issues might have an impact on needs and the support required.

Criminal Justice

- There were positive examples of the police using disruption tactics, such as Child Abduction Warning Notices and other strategies to deter perpetrators.
- There was an extremely robust, collaborative response concerning a case of Forced Marriage; the young person was safeguarded via the court and a Forced Marriage Protection Order (FMPO).

5. Learning

Identification, Referral, Assessment and Planning

- Where concerns relating to CSA are identified for one child (for example via a disclosure), the potential risks to all children need to be routinely considered and recorded as part of the child protection process. This includes the stages of referral, strategy discussion, investigation / assessment and planning.
- Where a concern is raised about possible CSA and this does not progress to a strategy discussion, the rationale and decision making process need to be clearly recorded on file by Hackney CFS.
- For cases that are 'stepped-down', information shared with the early help network needs to explicitly identify the potential risks of CSA. Early help plans should be clear about how risk will continue to be mitigated and cover the circumstances when a re-referral might be required.
- For all agencies, the consistent use of coding / alerts on records (on both open and closed cases) is required to ensure that practitioners are sighted on any reported concerns, the family history and connections with the perpetrator / alleged perpetrator.
- The oversight of offenders and which agencies / bodies are involved could be improved by emphasising links to MAPPA and MARAC as appropriate. This will be further explored in the CHSCP Case T report (to be published in 2024).
- Minutes and the written outcomes from multi-agency meetings need to be routinely shared by Hackney CFS with those agencies engaged with the family.



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Voice of the Child and Family and the Provision of Support

- When working with children and families, extended family members should be routinely engaged to establish their capacity to help and protect the child.
- As part of ongoing work with children, families and non-abusing parents, practitioners should focus on helping children and parents understand the nature of risk and ways in which this can be mitigated. Practitioners need to develop a clear view on the non-abusing parents capacity to protect.
- Practitioners should be mindful of the terminology used in their recording (i.e. such as families being 'open and honest'). These judgments have the potential to skew the perception of risk and be misleading. There is a special need for professionals to maintain healthy scepticism and professional curiosity.
- Practitioners need to consistently document the voice of both verbal and non-verbal children in a meaningful way based on the context of the child's lived experience.

Active Anti-Racist Practice

- Multi-agency practice (such as when making a referral, undertaking an assessment or developing a plan with children and families) should always include details about a family's ethnicity, their lived experience and the impact of factors such as stereotyping, profiling, biases, racism, discrimination.

Escalation

- Where an offender / alleged offender is known to probation services, they should be fully engaged in all steps of the child protection process.
- Records of the ABE video interview process and updates about police action need to be routinely shared by the police with Hackney CFS.
- Practice between the police and Hackney CFS would also benefit from more joint planning such as through scheduled follow up meetings / discussions to monitor progress and actions.

6. Further Learning

- CHSCP Case T (to be published in 2024)
- [CHSCP Case FC](#) - Sexual Abuse of Children by a Foster Carer
- [London Safeguarding Children Procedures](#)
- [CHSCP webpage](#) on CSA including local Practice Guidance, Non-Recent Disclosures and local pathways
- [CHSCP Training](#)
- [The CSA Centre](#) including resources such as:
 - [Communicating with children: a guide for those working with children who have or may have been sexually abused](#)
 - [Helping education settings identify and respond to concerns](#)
 - [Supporting parents and carers: a guide for those working with families affected by child sexual abuse](#)

