



Safeguarding, CSA and Covid 19 update

15 April 2020

Over the last couple of weeks, the CSA Centre has been in regular contact with frontline professionals and strategic leads to gather their experience of the safeguarding challenges currently presented by Covid-19. In addition, we took the opportunity of our Advisory Board meeting last week to seek further feedback from members on their particular areas of expertise.

The table below considers the implications of the restrictions in place in response to Covid 19 on increased vulnerability of children and limiting the ability of safeguarding professionals to respond to those concerns. Given the hidden and unseen nature of CSA in 'normal' times, we expect this to be exacerbated even more in light of these restrictions and the increased pressure on services. As such, we have reflected experiences of wider safeguarding children concerns as well as specific issues in relation to CSA.

We will continue to provide a regular update of this nature to colleagues at the Home Office, and will also include an overview of any queries that come through to us once we launch our offer of CSA Centre support to practitioners with particular concerns about CSA in the context of Covid 19 later this week. This will enable us to provide real-time insight into the concerns of practitioners on the ground.

Summary of information received by the CSA Centre	
<p>Increasing Vulnerability - how do social distancing measures increase the risk of children experiencing abuse?</p>	<ul style="list-style-type: none"> • A member of our advisory board who is involved in a number of strategic safeguarding roles reflected that primary concerns in Wales include an increase in domestic abuse (DA) referrals, but overall a fall in referrals to children’s services. They reported that the Ask and Act process is not really happening in Wales at present, as resources are diverted to responding to Covid-19 need. They also reported initial indications of a fall in numbers accessing DA helplines. • Our Advisory Board overall were encouraged that DA is being talked about more than ever. However, they were keen to emphasise that DA is not caused by Covid 19 restrictions; it is exacerbated, and victim’s options are further restricted by it, but the problem pre-existed Covid-19 and will continue beyond. Solutions therefore need to continue beyond the immediate lockdown period. • Barnardo’s colleagues noted reports from their services that there is a 20-40% decrease in safeguarding referrals across local areas. This is perhaps unsurprising given the fact that schools would generally account for a large proportion of referrals, but does further highlight the increase isolation of children from services. • Specific concerns highlighted included online harms, and a concern that many children experiencing abuse and exploitation will not have an option of complying with lockdown, so we need to ask where they are and who they are with. • Voluntary sector partners highlighted the increasing financial difficulties they are encountering within families and the impact this is having on children. • The Children’s Society have published a briefing setting out their concerns about the impact of Covid-19 on children and young people. Their concerns focus on: the impact of poverty which will be exacerbated by restrictions and illness and those families who do not have recourse to public funds; the impact of the restrictions on children who are already vulnerable in some way, and the mental health and well-being of all children. • One of our academic advisory board members undertakes considerable research in the field of harmful sexual behavior, and noted a significant increase in direct approaches from families regarding harmful sexual behaviours (HSB) and a real sense of desperation that the options available to them have apparently become increasing punitive and extreme rather than the best practice of family support.

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	<ul style="list-style-type: none"> • Advisory board members from academic institutions highlighted a number of other specific concerns: <ul style="list-style-type: none"> ○ There are particular communities of students who are vulnerable and at risk: there are reports of Chinese students experiencing racism and physical and verbal assaults ○ The message that students must return to their homes assumes that they have safe family homes to return to, and there has been pressure on universities to send students home or move them. This is causing mental health and safety concerns, and those students who remain at university will also have very limited support available to them. ○ There has been a push from some universities for staff to provide teaching online, which inevitably means students get less support. Our academic partners also reported a reduced focus on research as a result. Capacity to undertake research in the short term is severely dented, and may be impacted in the longer term.
<p>Restricting key protecting activities – how are/will social distancing measures restrict services abilities to respond to concerns?</p>	<ul style="list-style-type: none"> • Colleagues at The Children’s Society flagged some concern from their practitioners that statutory agencies are engaging with voluntary sector professionals less than usual, which means that important perspectives on the needs, experience and well-being of some children and young people are lost. • Colleagues at Barnardo’s noted that they are revising guidance for practitioners working with CSA, guiding them to refocus on safety and well-being work when engaging with young people via digital and phone contact as it is not appropriate to be seeking to continue recovery work during lockdown. • Several members flagged the need to remember that staff who work with children and families are also worried and frightened for themselves and their families with regards to the virus. • Our advisory board member representing Rape Crisis highlighted a number of specific issues: <ul style="list-style-type: none"> ○ The shift of support services to online means a significant reduction in privacy – Rape Crisis practitioners highlighting concerns that recipients often do not have the private spaces they need to engage in support. ○ The usual coping strategies used by victims (child and adult) are significantly disrupted. E.g. a lot of survivors use physical exercise or meeting with friends and family to manage emotions and they can no longer do this in the same way. ○ Rape Crisis has seen an increase in online abuse and harassment reported to them.

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- Not all practitioners are comfortable working and delivering support remotely. This is a particular issue for volunteers when their training managers are not confident that they are ready to support individuals in this way.
- The Rape Crisis national helpline initially experienced a fall in calls, but this is now increasing again. The assumption is that victims are finding 'work arounds' for their situations to seek support.
- In general, Rape Crisis reported that they are stopping their outreach work and focusing on providing face to face online support where appropriate. But this does mean there will be significant gaps in terms of people accessing support.
- Lesser heard communities
 - Our Advisory board member who delivers a service based in a BME community in Rotherham noted that there is likely to be greater pressure on victims to remain silent, as they are at home with more family members who may be reluctant for them to report.
 - Greater public health messaging in community languages, ideally including the voice of community leaders, is needed.
- Policing
 - We are hearing reports of significant staffing absence, ranging from 12-30%. This is apparently resulting in many investigation teams being diverted to frontline policing, leaving limited staffing for investigations.
 - Training has been reported as presently on hold. Our contacts are telling us that CSA will remain a priority once training restarts, but we also recognise that it will be competing for time with other training.
 - We have heard reports from voluntary sector colleagues that there is evidence of frontline policing reverting to 'punitive' responses to vulnerable children and young people they encounter. One example given was of police called to a young girl considering suicide beside a bridge, and responding with admonishment that they don't have time for this right now and suggesting parents give her 'a talking to'. There are also reports of CAWN's being used on young people who have been identified as being trafficked themselves.
 - Colleagues have different perspectives on why this reported regression to more 'punitive' approaches may be occurring. Some believe it reflects a long standing lack of sufficient

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investment in direct training for frontline policing on working with children and young people and recognising signs of vulnerability and abuse; while there has been good progress at strategic and management levels, this is less embedded at frontline level and practice will therefore slip without robust management oversight. Other colleagues feel this is simply a reflection of the stresses that stretched services are working under. However, there is a concern that these issues may well increase as trainee staff are fast-tracked to become operational and it is worth considering whether and how quick accessible training could be given to new officers.

- Our Advisory Board member from the College of Policing reported that the College is not being specifically tasked in relation to children. They highlighted that the initial policing focus is on DA, based on evidence of a significant increase in China following lockdown measures, and the NPCC have therefore asked the College to develop DA resources. Regionally they are not yet seeing an increase in DA reporting, but because of a fall in other crimes there is a sense that those who do report are receiving a better response. Children are being considered in the context of DA, particularly because Operation Encompass cannot operate as schools are not operating. There is a particular challenge for DV Protection Orders, which often requires the perpetrator to leave the home and therefore presents difficulties in the current context. However, DVPOs are still able to be obtained.
- It was also reported that vulnerability hubs are reporting increased child deaths which are not related to Covid 19, though we have not substantiated this - we are currently following up for more information.
- Extra familial CSA
 - One of our team heard from a colleague working in trafficking and exploitation that there has been an increase in CSE cases reported to their services. Their view was that this may be a result of neighbours being more likely to notice large numbers of people living in properties, or the comings and goings of young girls, for example, whereas before they would have been out at work, or too busy, rather than there being a material increase in CSE. There is currently insufficient evidence to draw a clear conclusion on this however.
- Our LGA Advisory Group member highlighted the low numbers of vulnerable children accessing school provision, ranging from 5-18% across different LA's. This means that a lot of vulnerable children are still not being seen. The LGA also reported significant staffing capacity issues for children's services. Work is underway to bring social workers from Ofsted and Cafcass back into direct practice, but this does present training needs. There are also concerns regarding staffing and

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	<p>PPE in secure accommodation and children's homes, with reports that some children's homes are refusing to take children if they are not tested regardless of whether they are symptomatic. There is also an increasing use of unregulated placements, which is very concerning. LA's are also reporting increased presentation of trafficked children and young people in cases where practitioners suspect that traffickers have sent them to children's services to be cared for during lockdown and expect 'recall' once restrictions lift. Online harms concerns are presently focused on extremist content and activity, rather than CSA.</p> <ul style="list-style-type: none"> • Thinking ahead to when children return to schools and services <ul style="list-style-type: none"> ○ There is agreement across colleagues we have spoken to that many children will be emerging from lockdown having experienced considerable pressure on their general mental health and well-being, and this may well be reflected in their subsequent behaviour. This raises a particular concern in relation to CSA, as we know that there are already considerable challenges in identifying sexual abuse and a lack of confidence in naming it without a clear verbal disclosure. We already see that if an alternative hypothesis for signs and symptoms of abuse is available, practitioners will often prioritise that and fail to pursue the alternative sexual abuse hypothesis. ○ There will be a particular need to support those groups and communities who do not traditionally disclose abuse to do so. ○ Recognition that there will be many things to think about in relation to children's wellbeing in the recovery phase, but there is a need to ensure that CSA is proactively considered otherwise it will continue to be missed. • Our Advisory Board members also flagged general concern about reported variability in practice, advice and support re. safeguarding children for the various local mutual support groups.
<p>Finding solutions – how might alternative measures be taken to overcome the social distancing barriers?</p>	<ul style="list-style-type: none"> • Barnardo's have made an offer to some police forces for their practitioners to do detached work with officers encountering young people out of lockdown, so that young people's needs can be identified and responded to. • Questions to consider: <ul style="list-style-type: none"> ○ How can we provide information for children about where to get help (for a whole range of things but including CSA) when the usual support networks they turn to are not available to them? The small everyday protections that keep children safe are not there – peers, friends

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mum, teachers, dinner ladies... This is particularly relevant for younger children who don't have phones or computers.

- The Children's Society have launched an online form to allow professionals working to provide children's services to highlight the issues arising in the course of this work. A number of organisations from across the children's sector are working in partnership on this form, – including The Children's Society, Action for Children, Barnardos, Children England, UNICEF UK, Become, Family Rights Group, Children's Rights Alliance England and Just for Kids Law - and will feed responses back to local and national decision makers, in order to help inform systemic responses to this crisis.
- Positive examples of practice emerging in Wales of organisations beyond the immediate statutory agencies with safeguarding responsibilities being proactive. E.g. Housing Associations using the period to update welfare and well-being checks and seeking to speak to different people in the household and having an opportunity to get mobile phone contacts for multiple household members.