

A decorative graphic in the top right corner of the cover. It consists of a grid of colorful squares in shades of red, orange, yellow, and purple. Each square contains a smaller, slightly offset square of a different color, creating a layered, pixelated effect. The graphic is partially obscured by a dark grey diagonal shape that runs from the top right towards the bottom left.

Child sexual exploitation

A child protection guide for assessing,
preventing and responding

Child sexual exploitation

A child protection guide for assessing,
preventing and responding

To receive this publication in an accessible format phone 9096 9999
using the National Relay Service 13 36 77 if required, or email
officeofprofessionalpractice@dhhs.vic.gov.au

Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

© State of Victoria, Department of Health and Human Services, December 2017

Where the term 'Aboriginal' is used it refers to both Aboriginal and Torres Strait Islander people.

ISBN 978-1-76069-122-6 (Print)

ISBN 978-1-76069-123-3 (pdf/online)

Available at www.dhhs.vic.gov.au

Printed by Sunnyland Offset, Mildura (1711006)

Contents

Foreword	iv
Child sexual exploitation – overview	1
Child sexual exploitation defined	1
What has informed this guide?	1
What and who else should inform practice?	1
Structure of this guide	2
Section A: Roles in response to child sexual exploitation	4
Department of Health and Human Services	4
Community service organisations	4
Aboriginal community-controlled organisations	5
Victoria Police	5
Section B: What we know about child sexual exploitation	7
Child sexual exploitation – who, how and why	7
Persons of interest	7
Models of child sexual exploitation	7
Stages of child sexual exploitation	8
Preconditions for child sexual exploitation	9
Child sexual exploitation – risks, reactions and protective factors	10
Relationships	14
Collaboration	15
Lens of age	16
Lens of gender and sexuality	16
Lens of culture	17
Section C: Five elements of effective practice in response to child sexual exploitation	19
1. Prevention	20
2. Detection	26
3. Disruption	31
4. Intervention	36
5. Recovery and reconnection	44
Section D: Outcomes and case studies	50
Safety, permanence and development	50
Case studies	50
Section E: Practitioner and carer safety and wellbeing	54
Appendix: Victorian legislation	55
Sex Work Act (previously known as the Prostitution Control Act)	58
Glossary	59
References	62

Foreword

Children known to child protection can be identified as more at risk of child sexual exploitation than children in the general community. This guide is for Victorian child protection practitioners, community service organisations staff and the Victoria Police who work together to identify and prevent child sexual exploitation. Over the past five years, the collaboration between services and departments has resulted in developing a comprehensive knowledge about the way adults target children in order to sexually exploit them. We have become better at recognising the indicators of risk, better at identifying and deterring those intent on harming children and more committed to work collaboratively to stop further harm to children.

As we gather more information about sexual offences and offending we understand there are significant myths that are held about the exploitation of children. Exploitation occurs when an older person, an adult uses power and influence over a child and engages them in sexual activity. It is a form of sexual abuse and it is not the child's fault.

National and international studies identify the incidence of sexual abuse is much higher than the numbers reported to authorities. Of incidents reported, many do not result in prosecutions and those incidents that are might not result in a conviction.

It is hard for children to tell their stories which makes it more important that we act on what we see and focus on disrupting perpetrators. It is important we notice and respond to children by educating and supporting them.

With social media becoming an increasingly everyday part of even very young children's lives, we have many challenges to intervene and disrupt perpetrators who use social media as a means of contact and grooming children. We need to invest in innovative and more sophisticated responses to prevent harm to children. As a community and as a service system within our community, we continue to learn more each year about the risks and harms associated with the sexual exploitation of children. We are gathering and sharing data; we are researching and developing systems-wide, coordinated approaches.

I hope that when you read this resource guide, you will further develop your knowledge of child sexual exploitation and be supported to develop your case practice to work with children to prevent this form of child abuse. You will also find valuable information on the important role practitioners play in assisting children to recover from the impact of being sexually exploited.

Tracy Beaton

Chief Practitioner

Office of Professional Practice

November 2017

Child sexual exploitation – overview

This guide assists the crucial work of the Victorian Child Protection program, community service organisations (CSOs) and Aboriginal community-controlled organisations (ACCOs) in preventing and responding effectively to child sexual exploitation. It is a reference tool to assist problem solving, help generate ideas and support consultation, supervision and training.

While children in the general community may be at risk of child sexual exploitation, this guide is for those working with children known to Child Protection.

Child sexual exploitation defined

Child sexual exploitation involves children being forced or manipulated into sexual activity for something – money, gifts, drugs, alcohol or something less tangible such as affection, status or love.

What has informed this guide?

Resources that have informed this guide include:

- research and other literature
- legislation and policies, including the Department of Health and Human Services' Best interests case practice model
- the Child Safe Standards, with particular reference to embedding a system and organisational culture of child safety and strategies to identify, reduce or remove risks of child abuse, including child sexual exploitation
- the Human Services Standards, which focus on children's wellbeing and safety, and include:
 - services adopting a strengths-based and early intervention approach to service delivery that enhances children's wellbeing (3.1)
 - children actively participating in an assessment of their strengths, risks, wants and needs (3.2)

- the importance of assessments, plans and reviews (3.3 and 3.4)
- services are provided in a safe environment for all people, free from abuse, neglect, violence and/or preventable injury (3.5).

What and who else should inform practice?

Child protection, CSO and ACCO practitioners should refer to the department's *Child Protection Manual* at <www.cpmanual.vic.gov.au> for detailed guidelines and procedures relating to child sexual exploitation. The manual is regularly updated to reflect current policy and procedures. If there is any contradiction between this guide and the online manual and procedures, the latter takes precedence.

This guide should be read in conjunction with other practice resources, in particular the department's *Best interests case practice model* resources available on the Child Protection Manual website at <www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model>:

- *Children and their families* (Robinson et al. 2012)
- *Adolescents and their families* (Robinson & Miller 2012)
- *Families with multiple and complex needs* (Bromfield, Sutherland & Parker 2012)
- *Cumulative harm* (Bromfield & Miller 2012)
- child development and trauma resources.

The Department of Health and Human Services employs sexual exploitation practice leaders (SEPLs). SEPLs have a pivotal role in consulting with and training workers within Child Protection, CSOs and ACCOs. They are a valuable resource, and this guide does not replace consultation with them and others as required.

Structure of this guide

This guide is divided into five sections:

- **Section A** describes the roles in response to child sexual exploitation
- **Section B** outlines the core knowledge and perspectives that inform the child sexual exploitation framework
- **Section C** describes the key elements of the framework: prevention, detection, disruption, intervention and recovery
- **Section D** discusses outcomes and illustrates practice through case studies
- **Section E** discusses practitioner and carer safety and wellbeing.

A glossary of key terms and acronyms is provided, and the appendix outlines some of the relevant legislation.

Section A

Roles in response to child sexual exploitation



Section A:

Roles in response to child sexual exploitation

Our professional frontline response to child sexual exploitation typically is a combination of Child Protection, CSOs, ACCOs and Victoria Police. Sexual assault, education, health, mental health, emergency relief, homelessness, disability, youth justice and other services also directly or indirectly support children at risk.

This guide is primarily for those with case management responsibility in Child Protection (including all aspects of the protective intervenor role), CSOs or ACCOs, but will also be useful for those who provide out-of-home care, family services, youth justice, Aboriginal Child Specialist Advice and Support Service (ACSASS) and other workers involved in preventing or responding to child sexual exploitation.

Department of Health and Human Services

Child protection practitioners

Child protection practitioners receive and investigate reports of child at risk. The child may primarily be at risk of child sexual exploitation or the risk of child sexual exploitation may emerge as a protective concern during the course of Child Protection's assessment. Child protection practitioners play a key role in identifying when a child may be at risk of child sexual exploitation and then intervening to eliminate or reduce that risk.

Sexual exploitation practice leaders

SEPLs are employed in each departmental division. They provide expert advice and leadership to support and develop child protection practitioners and also practitioners in CSOs and ACCOs. They keep up to date with the latest research to inform their work and the work of others, and track data to inform practitioners and policy development. SEPLs work closely with police to detect and deter people identified as actually or potentially sexually exploiting a child.

Principal Practitioners

Each departmental division employs Principal Practitioners. Along with the sexual exploitation practice leaders, Principal Practitioners provide expert advice, guidance and support to child protection practitioners in relation to children at risk of sexual exploitation.

Children, Families, Disability and Operations division

The Children, Families, Disability and Operations division leads the policy and programmatic direction for responding to children at risk of sexual exploitation. New ways of working with children at risk are identified and trialled, policy and procedures are reviewed and professional development is led by the Child and Family Policy branch and the Office of Professional Practice.

Community service organisations

CSOs in Victoria provide a wide range of services to support children identified by Child Protection. They provide out of home care, including foster care and residential care. They also provide therapeutic and support services for children and their families including counselling, education, family support, mental health, drug and alcohol and sexual health services.

CSOs may be the primary case manager for a child on a child protection order.

CSO workers, whether a residential care worker, a therapist or a family support worker, are a critical member of the team to prevent, identify, disrupt or assist in the recovery of child sexual exploitation.

Aboriginal community-controlled organisations

Like CSOs, ACCOs provide a wide range of services to support children identified by Child Protection. They support out of home, primarily kinship, care. They also provide therapeutic and support services for children and their families including cultural support, counselling, family support, mental health and drug and alcohol support.

ACCOs may be the primary case manager for a child on a child protection order.

ACCO workers are a critical member of the team to prevent, identify, disrupt or assist in the recovery of child sexual exploitation. They are vital to building and sustaining connections to culture and to promoting culturally appropriate practice for children and their families.

Victoria Police

Victoria Police has a major role in preventing and responding to child sexual exploitation. This is particularly, but not only, in relation to detection and disruption.

Sex Offences Child Investigation Team

The primary responsibility for responding to child sexual exploitation within Victoria Police is the Sex Offences Child Investigation Team (SOCIT). This team receives information about children who are believed or confirmed to be, or have been, sexually exploited and plays a central police coordinating role in responding to child sexual exploitation. This is not the role of uniformed police members. SOCIT must be the first point of police contact where child sexual exploitation is suspected or confirmed. SOCIT will collect the evidence prior to making a decision about whether or not to proceed to charge the person of interest. The Office of Public Prosecutions will then decide if there is sufficient evidence to proceed to court.

The Sexual Crimes Squad is responsible for the statewide investigation of serious sexual crimes and offences. The squad also maintains intelligence on individuals or groups involved in child sexual exploitation, child abuse images, other online offending and sexual abuse. As the primary response to child sexual exploitation is through the local SOCIT, the Sexual Crimes Squad usually only becomes involved when there is a systemic and highly organised operation where children are being targeted, groomed or exploited by one or more perpetrators.

Section B

What we know about
child sexual exploitation

Section B:

What we know about child sexual exploitation

Child sexual exploitation – who, how and why

Child sexual exploitation is a form of child abuse.

Evidence tells us that children who have been sexually exploited have been found to have more significant difficulties compared with children who have experienced other forms of sexual abuse. They report more mental health issues, trauma symptoms, going missing, functional impairments and engage in at-risk behaviours (Cole et al. 2016).

It is difficult to even begin to capture the many ways in which an experience of sexual exploitation negatively impacts upon a young person's life. It affects his/her health – physical, sexual and mental. It reinforces an inadequate sense of self and compounds existing vulnerabilities. It shapes future relationships, social integration and general life prospects. This is particularly the case when appropriate support is not received, both at the time and on an ongoing basis.

(Beckett 2011, p. 70)

Child sexual exploitation cannot occur without one or more people taking advantage of children for sexual gratification for themselves or others, or for other gains such as money, drugs, power and control over others.

Persons of interest

In this guide, any person known or suspected to be sexually exploiting a child is called a 'person of interest'.

Knowledge of these persons and details of the exploitation they are suspected or known to be involved in varies considerably. For this reason, persons of interest are not given an immediate classification of 'perpetrators' because this term may imply their identity is known and court actions have resulted in a finding of guilt.

As information materialises to confirm that an identified person of interest is exploiting a child, and after consultation with a SEPL, practitioners may classify them as 'person of interest – known – confirmed perpetrator'. The child protection practice manual guides practitioners in how to consult with SEPLs. Consultation may occur in the absence of a child sex offence or generalist court proceeding, or following it (see glossary).

Sexual offender profiles generally identify men as the people who sexually exploit children. Adult men and women, including a child's parents, and other children, however, may be involved in different aspects of exploitation such as grooming, harbouring or in other ways recruiting the child to be exploited (Jimenez, Jackson & Deye 2015; Jordan, Patel & Rapp 2013).

Persons of interest who are known or suspected to exploit children may use a range of techniques such as deliberate confusion, mixed messages, flattery, overt power, threats, promises and sympathy. They can be opportunistic or use planned approaches; they may operate on their own or as part of a group.

Models of child sexual exploitation

Barnardo's is a United Kingdom and Australia-based child-focused community service organisation. Barnardo's has documented three models of sexual exploitation (Barnardo's 2011). Table 1 provides an adaptation and expansion to six models. Frequently, children are subjected to sexual exploitation through multiple models, either simultaneously or consecutively.

Table 1: Barnardo's models of child sexual exploitation (adapted and expanded)

Model	Characteristics
'Inappropriate relationships' model	This usually involves one person who is using inappropriate power over a child (physical, emotional and/or financial). This is commonly someone who is significantly older than the child and whom the child believes loves and protects them.
'Boyfriend/girlfriend' model	The person of interest befriends and grooms the child into a 'relationship' and then exploits this relationship to coerce, trick or force them to have sex with others. This model is sometimes called the 'loving relationship' model.
Trusted 'friend' or other peer	The child may know the 'friend' through placement, school or broader community. The 'friend' may persuade or lure the child into sexual exploitation. They may be other girls or boys, gangs or other peer groups.
'Organised/networked' model	Children are forced or coerced into sexual activity with multiple men. This may occur at 'sex parties', and children may be used to persuade or recruit others. This can be ad hoc or associated with organised crime. It may be associated with a legal brothel.
Online model	Children may be accessed for sexual exploitation via the internet. This model shares commonalities with the other models and can be used as part of those models. However, it can also be used to target different populations, including younger children and children living within intact families. Social media is a mechanism by which children are becoming more accessible to persons of interest. Children may engage more quickly in sexually explicit language, images and behaviours online and then have this used against them (Barnardo's 2015).
Betrayal model	Someone who the child trusts, such as a parent, a parent figure, carer or teacher, promotes or organises the child to be sexually exploited by others, usually for profit, drugs, gratification or power.

Stages of child sexual exploitation

Child sexual exploitation can be described in incremental stages. The Barnardo's (2011) four stages of the behaviour and intention of persons of interest towards a child is a way of understanding the stages of exploitation.

These four stages show that, as the person of interest's dominance and control increases, the child's social relationships and autonomy decreases. The child, however, may perceive that the opposite is true.

Stage 1: Targeting and traps (ensnaring)

A person of interest wanting to sexually exploit children will attempt to ensnare or lure children into their sphere of influence. Children can find themselves in situations that they do not initially see as problematic or dangerous. They may think they are engaging in an innocent or playful conversation, a potential romance, or attending an ordinary event with a friend. However, once there, they are flattered, teased or coaxed by their friends or older people into new experiences. They may be given presents and treated as an adult, such as given access to driving a car, alcohol, drugs or 'cool' friends.

Examples of the child's thinking:

- *My friends think he's okay.*
- *I wonder if he'll give me a ride.*
- *That looks awesome.*
- *I think he likes me.*
- *Who would have thought he would talk to me?*

Stage 2: Fake friendship (creating dependency)

A child often spends increasing amounts of time with the person of interest before realising any danger. The person of interest can present as fun, easy to be with, non-judgemental and always available. He may take on responsibilities usually attributed to a parent or carer such as driving the child around, providing money, credit and clothes, and inviting them to 'fun' events.

Individual attention provided by the person of interest can be particularly compelling for children who are in residential care or who are bullied or neglected by others. The child usually becomes increasingly isolated from friends, schools and social networks, as well as family and carers. This isolation is a major mechanism to increase dependency on the person of interest in material and psychological ways. Persons of interest may be disdainful of other people, describing them as 'stupid', uncaring or unimportant.

Examples of the child's thinking:

- *He is treating me like an adult.*
- *He understands me.*
- *I can trust him more than others.*
- *He thinks I'm special.*
- *Who would have thought I could find someone I can rely on?*

Stage 3: Love and control

By the time the person of interest has significant control over the child, the child is isolated from others and is often disdainful of people they previously relied on for care and support. The person of interest may have assumed full control of the child's means of communication (for example, providing a mobile phone and phone credit) and movements (such as picking them up and driving them around). The pretence of boundaries between the person of interest and child break down. The person of interest often makes promises and presents as being totally committed to the child. At this stage sexual abuse by the person of interest may have begun, although the child may perceive this as part of a loving or fun relationship. Inconsistencies, such as giving praise and hope and then punishing the child, are a powerful form of control.

Examples of the child's thinking:

- *I owe him.*
- *I can't afford to lose him.*
- *This is what being loved feels like.*
- *He is all I have.*
- *This is not wrong – they just don't understand.*

Stage 4: Total dominance and abuse

By this stage, the child is under the control of the person of interest. The person of interest becomes directive, having the child explicitly do what he wants, potentially including the child having sexual contact with others. If resistance occurs, the person of interest may threaten to reject or harm the child or someone they care about. They may use any information they have learnt against the child. The person of interest may have convinced the child they have no choice but to comply ('No one will believe you', 'How do you think your mother will cope when she finds out what you have done?', 'They will arrest you', 'They will lock you up', 'They will kick you out of the placement'). The isolation can lead to children feeling trapped.

Examples of the child's thinking:

- *This is my life now.*
- *I deserve this.*
- *I've lost everyone.*
- *I have no choice.*

Preconditions for child sexual exploitation

David Finkelhor's (1984) model identifies four preconditions necessary for an adult to sexually abuse children, including sexual exploitation.

Motivation

There is motivation to sexually harm children. Someone who exploits children has made a choice to do so. Examples of motivation include sexual gratification, meeting emotional needs, compensating for poor social skills, opportunity to exert power and control, and financial gain.

Overcoming internal inhibitors

To sexually abuse or exploit a child, an adult has to overcome internal inhibitors that would otherwise act against the motivation to sexually exploit or harm children. To sexually assault or exploit a child, the person needs to internally

overcome the 'taboo' of sexually hurting a child and normalise and rethink the meaning of their behaviour. Examples of thoughts that lead to exploitative behaviour include 'She wants it', 'He needs me', 'She is getting something from it', 'He's worthless so it doesn't matter'.

Overcoming or insufficient external inhibitors

The models of sexual exploitation are examples of strategies used to overcome external inhibitors, including reducing the influence of others and interfering with their capacity to protect the child. Persons of interest can also take advantage of children living in situations where there are insufficient protections or inhibitors. For example, **if a child is inadequately supervised, neglected by their family or carers or given little response if they go missing, this constitutes an insufficient inhibitor.** Accessing children through the internet has provided additional means of overcoming external inhibitors, such as bypassing vigilant parents and carers.

Overcoming the child's resistance

This is often referred to as 'grooming'. Some children are already vulnerable; they may have experienced previous trauma and neglect, have compromised decision-making such as a cognitive impairment or are isolated and marginalised. Often these children are sought out because of their vulnerability. The internet provides a powerful means by which adults can gradually overcome a child's misgivings as the 'virtual' online environment can feel unreal and so may not be thought to have negative consequences. As described earlier in the stages of sexual exploitation, grooming often begins with acceptable interactions and turns these into increasingly unacceptable and inescapable interactions. Grooming is an insidious, deliberate set of behaviours that an adult may deliberately and actively engage in over weeks, months or years once they have identified a child or children they seek to exploit.

Child sexual exploitation – risks, reactions and protective factors

Although some children are at particular risk of exposure to sexual exploitation, it can happen to any child, anywhere and we need to be vigilant. Children at risk of exploitation can be from any type of living arrangement. Children known to Child Protection who are at risk of sexual exploitation can be in out of home care, living with one or both parents or living with other relatives (Department of Health and Human Services 2017b).

Indicators of risk

Recognising risk indicators of child sexual exploitation is important because:

- Risk indicators are signs to look for in order to help prevent children being at increased risk of sexual exploitation.
- Risk indicators can be causal or contributing factors leading to sexual exploitation, although this is not always the case.
- Risk indicators may become goals for intervention; in other words, by reducing the risk indicators we may prevent or stop sexual exploitation.
- Risk indicators are not predictive.

Risk factors for child sexual exploitation

Applying Finkelhor's (1984) model, children with few protective adults are more at risk. A particularly high-risk group for sexual exploitation is children involved in the child protection and out-of-home care systems.

Factors that increase the likelihood of being exposed to sexual exploitation include:

- family breakdown
- past or current child abuse and neglect and exposure to other types of trauma
- poverty
- homelessness
- social isolation
- exposure to family violence, parental mental health problems and/or parental drug abuse
- experience of multiple placements
- poor or disrupted experiences of attachment
- missing from care
- earlier than normal sexual experiences (including sexual abuse and consensual sexual activity)

- living in residential care
- lack of access to health services
- not attending school or being excluded from school
- being known to youth justice custodial services
- being known to secure welfare services
- alcohol or other drug use (can precede or follow exploitation)
- mental health issues
- developmental delay or disability (including learning problems, communication problems, physical and intellectual disability)
- contact with other children being sexually exploited
- connection to a street subculture or negative peer group
- lack of positive safe friendships.

Missing from care and sexual exploitation

Research demonstrates one of the most consistent risk factors for sexual exploitation is when a child has a new or escalating pattern of being missing from placement or home. There are multiple possible links between going missing and sexual exploitation, including the following:

- Reasons that may lead children to be missing from placement may be similar to those that expose them to sexual exploitation. For example, if a child feels rejected and unwanted where they live, this may push them to run away from placement and pull them towards people who offer false promises of love and affection.
- A lack of supervision and spending time 'on the streets' increases a child's exposure to danger, such as to persons of interest, access to illicit drugs and to other children being sexually exploited.
- Running away from home is likely to mean a child needs money to meet their daily needs, making them vulnerable to being sexual exploited.
- If children are running towards someone, such as a parent or a boyfriend, this person may be someone who involves them in sexual exploitation or, at least, fails to protect them.
- Going missing from home or placement has been found to be a strong indicator of sexual exploitation whether or not the child is using alcohol or other drugs (Jackson 2014).

The reasons why a child may begin to run away or be absent from their placement may change over time. Running away from home or placement can become an entrenched pattern that is difficult for practitioners and caregivers to change (Biehal & Wade 2000).

The Department of Health and Human Services' literature review regarding children missing from care (Centre for Human Services Research

and Evaluation 2017) highlighted the cumulative nature of harm to children over time from being missing, but concluded that there is no consistent pattern of behaviours or experiences that result in children being missing from care. The risk factors for going missing were numerous (as outlined in Figure 1) and not always clearly articulated in the literature (Centre for Human Services Research and Evaluation 2017, p. 13).

Figure 1: Risk factors for going missing



** This figure contains some examples of possible risk factors that require more evidence to confirm a relationship with going missing.*

Factors that contribute to children going missing include:

- detachment from significant relationships and positive social relationships
- difficulty with their placement environment
- lack of routine
- lack of engagement with education
- chronic exposure to family violence.

When children run away from placement or home, they are often trying to reconnect with their family or other networks as an attempt at returning to what is normal and familiar. They may be trying to regain control of their lives or to express their feelings, such as grief and stress (Karam & Robert 2013). Running away can be a literal 'flight' reaction to stress and trauma and needs to be understood as an attempt at coping and surviving even when it leads to the opposite for the child.

Push and pull factors for child sexual exploitation

Child sexual exploitation requires two elements: someone who exploits children and access to children. Considering factors that push children away from safety or pull them towards being exploited is an important aspect of practice.

Push and pull factors are the personal and situational factors that contribute to increased risk of sexual exploitation. They are a useful way of reflecting on the issues confronting a child and the behaviour and model of exploitation used by the person of interest.

A push factor is something or someone that 'pushes' the child away from safety and towards exploitation. One of the major factors in pushing a child away is when their care environment provides limited or no safety. They may feel threatened, rejected or in actual danger. Being or feeling pushed away often translates into going missing from home or placement. It may directly push someone towards a person of interest or make them more accessible and less protected and, therefore, more at risk. A pull factor is something or someone that 'pulls' (or attracts) the child towards sexual exploitation (Jackson 2014). Pull factors can be explicitly used by persons of interest as part of the model of exploitation and can be reinforced by them and by community or society factors, such as how exploitation is portrayed in the media and entertainment industries. Even children in relatively safe care environments may be persuasively influenced by pull factors.

These are important factors to consider in any response to preventing or directly responding to child sexual exploitation.

Push factors (pushing away from 'supposed safety' such as home, placement, school)

- Bullied at school or home/placement by peers or siblings
- Overt or implied rejection by family, friends, carers or teachers; this can be the absence of affection
- Lonely, looking for someone who notices them
- Threats of or actual physical, sexual or emotional abuse and neglect
- Exposure to violence, including family violence and violence by others in placement
- People at home using alcohol or other drugs

- Hunger, cold and need for shelter
- Being labelled and stigmatised by others (for example: 'you're a resi kid', 'slut', 'loser'); labels given by the system, such as 'high risk' or 'complex', can also be stigmatising
- Poor-quality care in placement
- Changes of placement
- Lack of positive culture in placement
- Shame and low self-esteem
- Poverty and 'going without'
- Avoiding an event such as court cases or a difficult conversation

Pull factors (attracting or coercing into child sexual exploitation)

- Alcohol and/or other drugs – direct access or funds to purchase them
- Access to money and other resources
- Someone says he will love and protect me and that I can trust him (counterfeit attachment)
- Being coerced, lured or enticed by a boyfriend, girlfriend, friends or family members
- Sense of belonging and having a shared identity
- Involved with peers in committing crimes
- Perceived glamour and excitement
- Parties and other opportunities to be with others
- Illusion of power and control
- Illusion of safety

Protective factors that can mitigate or reduce push and pull factors

- Parental or carer supervision and support
- Being engaged in therapeutic work (for example, life story work)
- Secure attachment to safe adults
- Healthy boundaries
- Active engagement with school
- Healthy friendships
- Adults supporting healthy friendships
- Sense of belonging to culture and community
- Positive self-esteem
- Feeling cared for
- Employment
- Stable placement
- A positive and friendly care environment
- Active disruption of the models of exploitation
- Hearing about legal action taken in relation to persons of interest
- A sense of hope and belief in self and their future

Signs of resilience

Just as we consider risk indicators to inform intervention, we also need to consider signs of strength and resilience. These are not just the absence of risk factors but positive signs that the child can draw on internal and external resources. Internal resources include an age-typical capacity to self-regulate emotions and behaviours, and the ability to:

- form and have faith in positive relationships
- understand cause and effect
- self-reflect
- detect deceit and illogical claims
- call out for help
- put words to feelings for themselves and communicate these with others.

No one is born with these abilities. We develop them through the love, care and attention of adults. Even when children have not had opportunities to develop these and other skills, new opportunities can increase their safety. A predictable and trustworthy adult in a child's life makes a substantial difference.

Common reactions

Roland Summit's Child Sexual Accommodation Syndrome (Summit 1983) is a useful model for understanding the child's experience of sexual exploitation and how this interacts with the methods used to exploit them. This model adds to our understanding of grooming, where children are lured by the adult and trust and fear are intertwined. The model highlights that the behaviours of children in these circumstances can be best understood as efforts to survive threats and trauma.

Common reactions to child sexual exploitation include the following:

- **Secrecy:** The child is encouraged to keep the abuse a secret. Direct threats, promises or other enticements may be used to ensure the child 'keeps our secret'.
- **Helplessness:** The child begins to fear they are in a situation they cannot escape. They may withdraw from others or dissociate (internal withdrawal).
- **Entrapment and accommodation:** The child feels trapped and accepts the situation in order to survive.

- **Delayed, conflicted and unconvincing**

disclosure: Children who disclose do so with high levels of anxiety and, due to the traumatic nature of the abuse, may have fragmented memories (Goodman-Delahunty, Nolan & van Gijn-Grosvenor 2017). With sexual exploitation, a distorted mixture of shame, pride and threats can make disclosures especially problematic. A child may believe they have committed a criminal offence, and this may be reinforced by the person of interest and the public discussion in the media about youth in our society.

- **Retraction:** Due to feeling guilt, fear, betrayal, anxiety and confusion, the child may retract or refuse to disclose.

These reactions are not linear nor are they applicable to all children in all circumstances.

Relationships

The vast majority of children who are sexually exploited have experienced trauma through relationships, such as abuse, neglect and exposure to family violence. Effective practice by child protection practitioners, CSOs and ACCOs provides opportunities to form genuinely positive, safe and respectful relationships with children and reset the norm about what to expect from others. This is in contrast to the counterfeit offer of being special and trust that is used by those who exploit children.

Relationships are the key to actually making a difference – at prevention, detection, disruption, intervention and recovery. Often it is not about knowing the right thing to say or being an expert; it is about sitting with a child, being comfortable in their presence and being genuine, transparent, kind and safe.

Research illustrates that regardless of the theoretical model or approach, it is the relationship between the practitioner and the child that is most likely to affect outcomes (Bachelor & Horvath 1999). **We need to focus on establishing and maintaining relationships with children, which can be complicated.** The child's concept of relationships has often been distorted through the exploitative process, so practitioners and carers need to be mindful about how to approach relationships and need to:

- communicate genuinely and honestly
- maintain boundaries
- demonstrate care and concern within their role
- not make promises that cannot be kept
- not offer or do something they cannot tell others about
- be unambiguously kind – be kind and caring without overtones of wanting something back or treating the child as special
- use supervision, team meetings and care teams to discuss how to respond consistently and predictably.

Winnicott (1957) describes the need for children to receive 'ordinary devotion'. This is easier to ensure when a child is living with a well-functioning family or in home-based care. However, if a child does not get this from someone, they may seek it elsewhere or give up on ever having it. Both options place the child at high risk of exploitation.

The models of sexual exploitation aim to isolate a child from others. Practitioners, as much as possible within the boundaries of role, should support and enable the child to connect and attach with others who will offer safety and 'ordinary devotion'.

Collaborating reduces risks

Multiple systems and services are needed to prevent and respond to the sexual exploitation of children. These include Child Protection, CSOs, ACCOs, police (particularly SOCIT), sexual assault services, the court system, family services, youth justice, health services, mental health services, therapeutic services and education. Information sharing and joined-up approaches are imperative if we are to successfully combat sexual exploitation and effect positive change for children. As noted throughout the five elements model described in Section C, information sharing and planning are key activities that rely on collaboration of effort and intent.

To be effective in any response to child sexual exploitation we must collaborate with all the professionals and the child's carer(s), be they family, residential, foster or kinship. Carers not only hold the key role with the child, they are the ones most likely to see evidence of increasing risk.

Constraints for achieving and maintaining effective collaboration can include:

- a lack of recognition of others' expertise and knowledge
- competing tasks and priorities
- role confusion
- the complexity of the client group
- lack of interdisciplinary training
- unrealistic and incompatible expectations of others
- territorial disputes
- demand management and tight gatekeeping
- insufficient and irregular contact among professionals
- historical differences of opinion
- unchallenged beliefs about each other (Frederico, Jackson & Black 2006).

It is useful to consider if any of these constraints are present and to work together to resolve them.

Strategies to support effective collaboration include the following:

- **Care teams** – regular meetings with a key small group of people to reflect, discuss, share and coordinate roles in supporting the child, carer and/or family. Care teams may make decisions about day-to-day practice, but they are not a formal decision-making body. Because of the frequency of planned meetings, care teams do not need to be reactive to a crisis but can be proactive and acknowledge positive changes as well as giving attention to ongoing risks (Downey 2009). Care teams need to input into safety planning for the child because they have the greatest exposure to the child and will be actively involved in risk management.
- **Case conferences** – a range of professionals and carers (and sometimes the child and their family, depending on the purpose) meeting to share information and discuss issues such as risk. A case conference may include consultants who are not part of the child's care team.
- **Networking** – another means of professionals meeting across organisations and disciplines, such as shared training and consultation that enables them to become more familiar with each other and each organisation.

Lens of age

Children can be at risk of sexual exploitation at any age, although 13 to 16 year olds are at the greatest risk.

(Department of Health and Human Services 2017b)

The use of the term 'children' throughout this document is consistent with the legislation and reinforces the concept that child sexual exploitation is inclusive of children of all age – up to their 18th birthday. Although data shows that adolescents are more likely to be sexually exploited than younger children, it can occur at any age, including children as young as toddlers. Adolescence, particularly between the ages of 13 to 16 years, is also a risk factor for being missing from placement (Kim, Chenot & Lee 2015).

We must not assume a child is too young to be at risk if there are other indications of sexual exploitation. For example, younger children are more likely to be exploited through the betrayal model of exploitation by families or carers. Older children are more likely to be exploited through other models.

We must consider how the child's age and developmental stage influences the information we gather, the plans we make and how we involve the child, the actions we take and how we review outcomes. Expectations of children vary according to age. For example, taking risks is a part of normal, healthy adolescent development. A challenge for most parents and carers is balancing the protection of their child while allowing them increased choice and autonomy. This typical parenting dilemma needs to be considered when planning prevention or responding to child sexual exploitation.

Lens of gender and sexuality

Girls are more likely to be sexually exploited than boys, but it happens to boys too.

Although both boys and girls can be subject to sexual exploitation, it is more prevalent amongst girls. Research indicates that the risk may be up to six times higher for girls than boys, and that transgender children are also at increased risk (Farley et al 1998; Leichtentritt & Arad 2005). The key message is to not make assumptions about gender and risk of sexual exploitation. It is important to recognise gendered stereotypes may view sexual exploitation more as a female issue when this may not be the case.

Some aspects of the experience of child sexual exploitation are likely to differ depending on the child's gender. Girls are more likely to be lured through an older 'boyfriend', whereas boys are more likely to be 'befriended' by an older man. With boys, the person of interest may encourage him to do things parents or carers would not allow, such as use alcohol and drugs, access pornography and child abuse images and stay out late at night. With boys, there is a stronger correlation between low-level criminal activity and sexual exploitation.

A further aspect about gender relates to the person of interest. As noted, those paying or organising sexual exploitation are substantially more likely to be men. However, girls and young adult women may participate in the grooming process (Jimenez et al 2015; Jordan et al. 2013). Sometimes boys of similar or younger age may be used by others to entice the girls because this can lower their guard and confuse their perception that it is exploitation (Bowmar 2014).

Sexual preference and identity may become confused as a result of exploitation. As many children at risk have had sexual activity earlier in life than most (Wilson & Widom 2010), the exploitation may confirm or challenge their experiences and assumptions about self, sex, love and others.

Children who are developing their sexual identity as lesbian, gay, bisexual, transgender or intersex (LGBTI) may feel isolated and judged. This may increase their vulnerability to exploitation. For example, they may be more likely to explore their sexuality and gender online, which may make them susceptible to online grooming (Bovarnick, Scott & Pearce 2017).

We need to be careful not to reinforce gender stereotypes or judgements and to check our own and others' assumptions about what girls or boys 'should' do.

Lens of culture

Applying the lens of culture is important in all aspects of practice. We all have a cultural background, even though some are more aware of their cultural identity than others. Our background influences our view of the world, others and ourselves, often without realising it. Those with a strong cultural identity are more likely to be able to describe this influence in their life.

Aboriginal peoples are the First Nations in Australia with their own customs, languages and traditions. Their connection and commitment to identity, family, kin and land is a source of strength and resilience (Zubrick et al. 2010). Yet for too many, much of this has been lost or stolen – but not all. The Stolen Generations legacy continues to affect children and families today, as well as other past policies and practices.

Aboriginal children are significantly over-represented in the child protection and out-of-home care populations across Australia, including in Victoria (AIHW 2017). Building connections to culture and community can help buffer children and families in the face of adversity including sexual exploitation (Bamblett et al. 2012). We each hold a responsibility to provide a culturally respectful response in all our work with Aboriginal children, their families, carers and community.

Aboriginal children are over-represented in all phases of child protection intervention.

A cultural lens includes, but is not limited to, the following perspectives:

- recognising we see and interpret the world through our own cultural lens
- realising we can cause further harm if we are not respectful of each person's culture
- understanding that strong links to culture builds resilience
- different cultures have different understanding, rituals and beliefs about issues such as sexuality, health and development.

We cannot be an expert in someone else's culture and so we need to seek cultural consultants.

We must also apply a cultural lens for children from culturally and linguistically diverse backgrounds and identities. Depending on the child's culture, history and whether or not they were born in Australia, there may be issues of language, isolation from their country and people, trauma from their country of origin, trauma through the journey to Australia, and the impact of public discussion about refugees, citizenship and religion that can exacerbate isolation and disconnection. These children may have additional fears of the police and legal system, depending on their families' experience in their country of origin. Alternatively, children from culturally and linguistically diverse backgrounds may not present with any significant differences but still have strong influences from their culture and community, all of which need to be acknowledged and understood. The key message is not to make assumptions but to be open to learning from them about what is important and what is helpful.

Section C

**Five elements of
effective practice
in response to child
sexual exploitation**

Section C:

Five elements of effective practice in response to child sexual exploitation

The five elements, in summary:

1. Prevention

We all want to prevent, and are responsible for preventing, the sexual exploitation of children. This is a public and a professional responsibility. We do not need to wait until there is evidence that a child is at risk of sexual exploitation before we implement prevention strategies.

2. Detection

Knowing what to look for and how to detect signs that a child is being sexually exploited are pivotal. This requires all those involved with the child to work together to identify these signs and to respond accordingly.

3. Disruption

People who exploit children sexually may also be committing other crimes such as drug trafficking and harbouring children who have gone missing. By applying laws to persons of interest, police can disrupt patterns of behaviour associated directly or indirectly with sexual exploitation. However, police rightly rely on Child Protection, CSOs, ACCOs and others to provide relevant, accurate and timely information.

4. Intervention

The nature of direct work with children who are sexually exploited depends on our role and the stage of Child Protection's involvement. Being effective requires ongoing efforts to engage the child; marshal the support of family, carers, friends and others; provide education that increases safety; respond to behaviours of the child that increase their risk of exploitation; and participate in regular care team meetings. Intervention usually involves strategies to reduce push and pull factors for going missing as well as for being sexually exploited.

5. Recovery and reconnection

Given the traumatic and destructive nature of sexual exploitation, we need to support the child to make sense of their experiences, to develop a positive sense of self, and to connect or reconnect with healthy, safe and trustworthy relationships. In addition to referrals to sexual assault, mental health or therapeutic services, we need to support carers and family to interact with the child in non-judgemental and accepting ways. Even when a child is no longer considered to be at active risk of sexual exploitation, efforts should continue to prevent exploitation recurring.

1. Prevention

Social media gives potential persons of interest substantially easier access to more children.

Research shows that children in the child protection and out-of-home care system are at particular risk of sexual exploitation. Factors that precede their involvement with Child Protection, including abuse, neglect and exposure to family violence, contribute to their vulnerability and risk.

Additionally, factors such as inconsistent attachment figures, multiple placement changes and increased contact with other children at risk and their networks, and a perception by some that they are unwanted and not cared for, all contribute to increased risk of child sexual exploitation.

Best interests case practice model cycle – prevention

The following outlines the Best interests case practice model cycle for preventing child sexual exploitation. Prevention aims to avoid the child being harmed from sexual exploitation in the first place. Workers across all organisations share the role of preventing child sexual exploitation. Prevention is more likely to be achieved when professionals work together.

Prevent child sexual exploitation

Information gathering

Preventing child sexual exploitation requires **seeking and recording information** about:

- indicators of risk leading to greater likelihood of exploitation (such as missing from care, alcohol and other drug use, not attending school, overuse of social media or gaming sites, increased secrecy)
- indicators of vulnerability (such as mental health problems, age, experience of abuse and/or neglect, disability, isolation)
- potential sources of danger (for example, persons of interest, peer group, older boyfriend)
- potential and actual sources of strength and protection (for example, positive relationships, stable placement, cultural connection, engagement in school).

Analysis and planning

Preventing child sexual exploitation requires **determining if the child is at risk** and identifying possible protective factors:

- determine if the child is at risk of sexual exploitation. If there is a known person(s) of interest who have contact with the child, then assume that the child is at risk
- if the child is at risk, consider strategies to reduce the likelihood of exposure to persons of interest
- consider strategies to deal with sources of exploitation and environments that can foster danger (for example, disruption)
- consider strategies to reduce vulnerability and increase resilience
- consider strategies that marshal relationships and other positive supports and protection
- design a plan through consultation with others (for example, Child Protection, CSOs, ACCOs, SEPLs, SOCIT, sexual assault service). Where possible, plan with the child directly.

Actions

Preventing child sexual exploitation requires **effective and sustained implementation** of the plan informed by analysis of information and in collaboration with others:

- engage the child in meaningful, safe and trusting relationships
- support the child to have loving relationships that meet their emotional, physical and developmental needs, including conversations about positive safe touch and transparent boundaries
- educate and support the child in prosocial and safe choices and actions, including sex education, safety planning and consent
- engage and enlist the child's informal and formal social networks to provide a safe and supportive environment
- implement the plan as agreed
- make referrals to therapy, mental health or alcohol and other drug services as required and tailored to child's needs.

Reviewing assessments, outcomes, plans and actions

Preventing child sexual exploitation requires ensuring information, plans and actions are **regularly reviewed** in terms of whether the child continues to be at risk:

- review and continue to collect new information (including when it contradicts other information).
- identify what has changed
- review the analysis and plan
- review the actions (for example, Has the plan been implemented? What has worked? What has not worked?)
- design a new plan or adapt the existing plan as needed.

Strengthening relationships – offering ordinary devotion

People who care for the child on a day-to-day basis are at the centre of any strategy to prevent sexual exploitation. Whether they are family members, foster parents or a residential care team, they need to be supported and given information so they know what to look for, what to listen for and how to respond. They are the child's greatest opportunity to have a close, caring relationship with someone who is not intending to exploit or harm them. That type of relationship is the essence of the most powerful prevention strategy. However, this cannot be guaranteed, as shown in the betrayal model, because family or carers may be part of the exploitation. Nonetheless, there are strategies to mitigate and reduce risks by considering what all children need.

Children need to know they are loved

A child knowing that she or he is loved is the 'ordinary devotion' mentioned earlier. The work of integrated family services, family preservation services and therapeutic services can help parents express love and care to their child in ways they may not realise are necessary. Children should not have to guess who loves them or search for love from strangers. Additionally if they have been harmed from those who love them they need experiences of not being harmed by significant others.

When children are in out-of-home care, parents can be supported to show the child they are loved. In our society, we expect brothers and sisters, aunties, uncles, grandparents and other family members and family friends to provide unconditional love. Children in out-of-home care require no less.

Case managers in Child Protection, CSOs and ACCOs can be the go-between to reform or retain important connections. Central to our work is being proactive about which people in the child's family and broader network can develop or maintain a lasting, caring and devoted relationship (this is expanded on in the best case practice guides on *Children and their families* (Robinson et al. 2012) and *Adolescents and their families* (Robinson & Miller 2010)).

A more vexed question is whether carers can and should provide unconditional love as a parent should. While kinship carers and foster carers have made a long-term commitment to care for a child, and have presumably formed a loving attachment with the child, they may need support from services to develop and express their care and support of the child. The role of any carer is to show unconditional positive regard and respect for the young person.

When forming a positive relationship with a child, some ideas to consider are:

- A carer is expected to respond to the child's physical, emotional, psychological, social and developmental needs, including attention, nurturance, comfort, encouragement, shared laughter and praise
- It is essential to recognise that professionals can not replicate the love a child's family or social network provides
- In many biological, kinship and foster care families, and in residential care in general, there is more than one person responsible for meeting the child's needs. They often have different roles with the child, including who provides the more nurturing and emotionally responsive relationship
- Boundaries of care and respect will provide a sense of emotional security for a young person.

We know that all children need to feel cared for. We know this has sometimes been misconstrued and manipulated by those in a caregiving role as part of a grooming process for sexual abuse. We also know that if person(s) of interest offer an uncomplicated message of love, this will be a sharp contrast for a child who is only offered a 'positive working relationship'; therefore they need unconditional positive regard. Rather than suggesting what should or should not occur, this question should be considered in terms of what each child needs.

Exploitation is not love. But if it looks like it, sounds like it and feels like it and there is no genuine example of love in their life to compare it with, it is not surprising that children can fall for this counterfeit version.

Children need boundaries

Teaching children about healthy boundaries is a part of parenting. This can be complex when caring for children in out-of-home care, especially when the child's own boundaries have been violated through sexual abuse. Children need to learn what is personal and private in a non-judgemental and matter-of-fact way. Using teachable moments as situations arise can help them become aware of a boundary and why it exists. This may be a boundary about some types of touch, personal questions, intrusive behaviours, and about what is private for them or others. These boundaries are what they should be able to expect from others and what is expected of them.

As many children who are sexually exploited have experienced neglect, they may have experienced few boundaries in their early childhood. Therefore, it may be difficult for them to respond to healthy consistent boundaries, which underlines the importance of boundaries.

One of the main ways we teach children about boundaries is through modelling them. Examples include:

- Always work as a team rather than encouraging a child to think we are the only one who understands or can help them.
- If there are differences of opinion in the care team, these are resolved in the team process and not talked about outside the team in a way that splits (makes the child choose who is on their side).
- If the child seeks permission for an activity – such as going on a camp, staying at a friend's place or going to a party – the organisational processes are followed and in accordance with relevant government procedure.
- If the child is taken for an activity outside their normal routine (such as taking them away overnight), this must be endorsed by the care team and line management and the child made aware of this.
- Be transparent in everything we do (for example, if it cannot be written in a case note or communications book, it should not be done). This includes engaging the child on social media and the need for honesty and transparency.
- The care team should identify who will talk to the child about safe boundaries and relationships.

If boundaries are not modelled by the practitioner or carer, they may unwittingly contribute to the efforts of the person of interest to overcome internal and external exhibitors and the child's resistance.

Modelling and teaching boundaries supports the child's capacity to resist grooming or other strategies used by persons of interest. Similarly, boundaries demonstrate to potential persons of interest that there are external factors that inhibit access. In other words, maintaining and modelling boundaries helps reduce or avoid two of the four preconditions in Finkelhor's (1984) model needed for children to be sexually harmed.

Understanding consent

Having conversations with children about the meaning of consent is useful. For example, explain that when someone agrees to do something it is because they want to, not because there is pressure to do so. Silence is not consent.

Under Victorian law, to give consent, a person must not be under the influence of alcohol or other drugs and must be mentally able to make a decision and physically able to communicate the decision.

No one is allowed to have sex with a child who is under the age of 12 years, regardless of whether the child agrees. Nor is this developmentally appropriate. This includes touching them sexually, showing them sexually explicit images or performing sexual acts in front of them. Children between the ages of 12 and 15 (up to their 16th birthday) can consent to sex as long as the person is not more than 24 months older than them. Under state law, people in a caring or supervision role (including teachers and health professionals) cannot have sex with children, including 16 and 17 year olds. (For more information see the appendix and the Victorian Legal Aid website <www.legalaid.vic.gov.au>.)

Strategies for children who go missing from placement

Identification and intervention with children going missing from home or care is a major strategy in preventing child sexual exploitation. The Department of Health and Human Services produced a missing from care literature which outlined a number of strategies:

- Conduct return to care conversations with the child upon return to placement. This includes talking to the child about issues such as identifying and responding to harm before or while the child was missing, discovering and addressing reasons for going missing, and exploring other options with the child.
- Forge positive and supportive relationships with the child while at placement. This includes listening to the child and being available and responsive.
- Continue to engage with the child if they are placed in secure welfare.
- Empower the child through structure and opportunities. Examples include setting clear boundaries, respecting and supporting age-appropriate autonomy, offering fun activities and encouraging the child's interests.
- Develop individualised strategies through a functional analysis approach. An assessment is undertaken of the child's motivations for going missing (involving the child) and then interventions are implemented to enhance positive reasons for staying in the placement. The aim is to understand the functions that being missing achieves and explore positive and safe alternatives. This type of analysis requires specific training.
- Create stable placements through individualised care packages and therapeutic approaches.
- Provide coordinated and collaborative, strong multi-agency responses. This includes having the same definitions about 'missing' children to enable effective collection and sharing of information, and reviewing or developing protocols outlining responsibilities and information-sharing procedures. This emphasises the involvement of Child Protection, CSOs, ACCOs, police and education providers (Centre for Human Services Research and Evaluation 2017).

Return to care conversations – suggestions

- 'I was worried about you while you were gone.'
- 'We missed you around here.'
- 'Is there anything that makes you want to leave?'
- 'Is there anything I (we) could do that would make you want to stay?'
- 'How do you stay safe (look out for yourself) while you're gone?'
- 'Who would you call for help if you needed it?'
- 'What did you do while you were away? Was that safe?'
- 'Did you hang out with anyone? (If adults) Do you think they should be hanging out with people their own age?'
- 'How would you like us (or me) to help you return in the future?'
- 'Are you OK?'

Looking for children when they go missing is a key aspect to preventing sexual exploitation. Complete missing person reports and seek warrants for children when they are missing.

A missing person is anyone who is reported to the police where her or his whereabouts are unknown *and* there is reason for concern about their safety and wellbeing. There is no rule that says the person must be missing for 24 hours or another time period, nor is there a rule that a Safe Custody Warrant is required before a Missing Person's Report can be completed.

If messages from a local police station are contrary to this, it should be managed within the station and within Child Protection or the CSO/ ACCO. The SEPLs can provide advice.

Practitioners and carers need to be aware of the difference between a child being absent from placement without consent but their location is generally known and a child being missing with no known location that can be provided to police. See the Missing from care practice advice in the *Child protection manual* for further details.

In addition to the police, several non-government and government search organisations can assist in locating missing children, especially when they have been missing for a considerable time and there is reason to believe they have left the area. Examples of search organisations are (Centre for Human Services Research and Evaluation 2017):

- The Salvation Army Family Tracing Service
- Australian Red Cross Tracing Service
- Link-Up Aboriginal Corporation (note there is a Link Up in each state and territory and the Victorian Aboriginal Child Care Agency (VACCA) auspices Link Up in Victoria)
- National Missing Persons Coordination Centre
- International Social Service Australia
- Department of Foreign Affairs.

Other prevention strategies

The push and pull factors discussed earlier suggest helpful ideas for preventing sexual exploitation. Prevention strategies should aim to negate factors that are pushing a child away from safety as well as factors that are pulling a child towards sexual exploitation. Examples of such strategies, depending on the child, include:

- engaging the child in education or employment programs
- providing a proactive and timely response through the school if the child is being bullied
- purposeful strategies to support the child to develop and maintain prosocial friendships
- avoiding labelling and stigmatising the child by the language we use
- ensuring a high quality of care
- ensuring the child has access to age-appropriate sex education
- supporting the child if they are fearful and anxious about pending events such as court cases
- teaching cyber safety.

2. Detection

We all have a potential role in detecting if a child is at risk of being sexually exploited. Our ability to disrupt, intervene and help a child recover rests on our ability to detect that a child is being sexually exploited (Rafferty 2016).

Asking questions

When you receive information to suggest a child may be being sexually exploited, it is important to ask questions about the child, the person(s) of interest, and who else may have information. These questions can include the following:

Questions about the incident(s):

- What is the exact nature of what is alleged to have occurred – that is, what is the incident?
- Is the child safe? Is there a plan for the child to be supported to remain at placement?
- How long has it been known or suspected something is happening?
- When and where is the exploitation said to have occurred?
- What happened in the lead up to these events?
- Who spoke to the child? What did the child say to that person?
- When was the child last seen?
- Is there a pattern of missing? Can the pattern be described? (Frequency, duration, where the child is going to).

Questions about the person(s) of interest:

- How does the child know the person of interest and for how long?
- What is known about the person of interest? Note down their name, age, address and any other details to pass on to SOCIT.
- Is the person of interest likely to be violent and can the level and type of violence be described? Do they have a criminal history? (if details are known)
- Is the person of interest already known to Child Protection? What other clients are they known to associate with?

Suggest further information that can be obtained about the person of interest in future, such as numberplates or descriptions of the person of interest, if safe to do so.

Other information:

- Are there other children or adults said to be involved or who knows more about the situation?
- Who else in the child's care team can shed light on the situation?
- Who is the child associating with who may also be at risk?

Signs of possible child sexual exploitation

Many risk indicators mentioned earlier can be translated into signs of possible child sexual exploitation. A number of signs have multiple possible explanations, not all of which are directly related to sexual exploitation. These signs are a combination of what may be seen in the child's behaviour and their exposure to persons of interest attempting to exploit the child. Looking for patterns, comparing what the child has said to the practitioners' or carers' observations, and being curious and open-minded to different possibilities, are necessary aspects of detection.

Table 2 identifies signs of possible child sexual exploitation and things practitioners and carers should consider.

Table 2: Signs of child sexual exploitation

Signs of possible child sexual exploitation	What to consider
The child discloses some aspect of sexual exploitation	- The child may describe some activity that the carer or worker recognises as sexual exploitation (even if the child does not use that language). - Follow up that conversation with curious and open questions. - Develop a safety plan.
Other children or family members provide information about the child being sexually exploited	- Other children, family members and others in the child's informal network are unlikely to use the language of sexual exploitation, but may disclose that the child is being sexually exploited to a third party, such as other children, teachers, carers and family members. - Be aware of the signs of sexual exploitation and ask curious and non-judgemental questions. - Develop a safety plan – both immediate and longer term.
Having unexplained gifts or new possessions	- The child has a new phone, extra credit on their phone, new clothes, games and other possessions. - The child's response to curiosity about new possessions. - The child says it is a gift from someone unknown to the carer or worker.
Current abuse or neglect and other trauma	- If the child is currently subjected to trauma or neglect where they are living or at school they are more likely to seek apparent safety and comfort elsewhere. - Does the child have a sense of safety and security with people who offer genuine safety?
Missing from care	- Has there been incident(s) of missing from care, especially when the child is not going to a place or person known by workers or carers as a safe person. - A new or escalating pattern of missing from care.
Lack of memory of where the child has been	If the child cannot remember where they have been this may reflect their unwillingness to discuss it or it may reflect that they have been under the influence of drugs. It can also be a result of trauma.
Regularly not attending school or being excluded	- Not attending school can be a risk factor that contributes to the child being targeted by a person of interest. - Not attending school may reflect the child feeling unwanted and isolated, and these feelings may increase their vulnerability to those looking for children to exploit. - Changes in school attendance can be a sign; therefore, regular communication with education staff is useful.
Alcohol and/or other drug use	- Substance use is a sign of many risks, including sexual exploitation. - Consider how the child is paying for or accessing the drugs.
Mental health problems	- Mood swings. - Changes in mental state, for example, more depressive, more elevated and manic mood. - Major changes in behaviours including unusual behaviours.

Table 2: Signs of child sexual exploitation continued

Signs of possible child sexual exploitation	What to consider
Increased use of social media and other online activities	- When the child is spending more time online it is important to understand what they are doing. - The child is not willing to show a carer or worker their online activities.
Access to pornography and child abuse images	- Images on social media, such as sexually explicit photos of the child or other inappropriate material (carer or worker may see this accidentally as it will rarely be disclosed by the child). - The child is using sexually explicit language online. - The child is providing private information about self and others online (Barnado's 2015).
Contact with other children being sexually exploited	The child may access pornography and child abuse images from a person of interest.
Having older boyfriends	Use high risk youth forums and SEPL roles to share information about other children identified as at risk of sexual exploitation. Note when they connect with each other. Link charts can also be useful (see <i>Disruption</i>).
Sexually transmitted infections and pregnancy	When the child has an older boyfriend it is important to ascertain as much information about him as possible.
Inappropriate sexualised behaviours	- Any sign of sexual activity, including unprotected sex, is a sign of possible exploitation and a strong indicator of the need for someone to talk to the child about sex education. - Seek general practitioner support if infection is suspected or confirmed. - Seek general practitioner support if pregnancy is suspected or confirmed.
Connection to a street subculture or negative peer group	If the child is showing sexually concerning behaviours, one of the issues to consider is whether they are being sexually exploited.
Lack of positive safe friendships	- Association with peers or older people involved in criminal activities. - Being seen on the streets in areas frequented by persons of interest. - Being seen with person(s) of interest or with others known to be associated with person(s) of interest.
Increased secrecy	- The child has no positive friendships or has been disconnected from positive friendships. - The child becomes secretive, including about topics they were previously happy to discuss (be aware this can be part of typical transitions in adolescence).
Indications of any of the models of child sexual exploitation	Discussions with the child, observations or information from other workers or carers regarding grooming or other aspects of the models of exploitation.

Although there is value in recognising signs of possible sexual exploitation, it is also important to be open-minded to the less usual indicators. For example, although more girls are sexually exploited than boys, we need to be mindful that boys are also at risk (Rafferty 2016).

Consulting with SEPLs and SOCIT

When there is an indication that a child is being sexually exploited, consult with a sexual exploitation practice leader both initially and at critical points where new information is obtained. SEPLs assist in outlining processes, formulating risk assessments, consulting with management and care teams, liaising with police and establishing and reviewing safety plans.

Incident reports

Incident reports are a useful source of information about sexual exploitation and other possible signs such as missing from care, substance use and other risk factors. They are informative when tracking patterns of behaviours or other indicators and can inform case management and care teams. Remain open to the possibility of sexual exploitation when analysing the content of incident reports.

Information sharing

Detection and identification rely heavily on information sharing. Information-sharing provisions with Child Protection, registered CSOs and ACCOs are privileged under the *Children Youth and Families Act 2005*. The CYFA 2005 works on the premise that information can be shared if it is in the best interests of the child.

The reasons for sharing information relate to our responsibility to care for and protect children. The CYFA 2005 states the best interests of a child must always be paramount when making a decision or taking action. When determining whether a decision or action is in a child's best interests, consider the need to:

- protect a child from harm
- protect the child's rights
- promote the child's development (taking into account their age, stage of development, culture and gender).

The department's *Child protection manual* describes in detail the information-sharing requirements and processes.

Information sharing between Child Protection and Victoria Police is also protected under the *Protecting Children – Protocol between Department of Human Services child protection and Victoria Police* (State Government of Victoria 2012) and the *Addendum Protocol – Preventing sexual exploitation of children and young people in out-of-home-care*. The protocol established between the department and Victoria Police requires both organisations to share responsibility in preventing and assertively intervening in the sexual exploitation of children residing in out-of-home care. The sexual exploitation information template (SEIT) described in the next section aids information exchange between Child Protection, police, CSOs and ACCOs. Note that protocols and templates are updated so always check the Child Protection manual for the most up to date version.

Best interests case practice model cycle – detection

The following outlines the Best interests case practice model cycle in terms of detection and identification of children at risk of or being sexually exploited.

Detect and identify child sexual exploitation

Information gathering

Detecting child sexual exploitation requires **seeking information**:

- about signs of possible sexual exploitation in the child's behaviour
- about signs of possible or actual exposure to persons of interest
- from multiple sources and comparing notes (think about who may have this type of information in the child's formal and informal social network)
- from SEPLs and SOCIT – they can provide useful tips on how to gather relevant information and provide information directly.

Analysis and planning

Detecting child sexual exploitation requires interpretation and **analysis of the information gathered**, including the following:

- analyse incident reports, sexual exploitation link charts and other documents
- determine if the child is at risk or is confirmed to be sexually exploited; if there is a known person(s) of interest who has contact with the child, then assume that the child is at risk of exploitation
- consult with a supervisor, the care team and a SEPL
- if the child is deemed at risk or being exploited, use other elements of disruption and intervention
- consider strategies to directly deal with sources of exploitation and environments that can increase risk
- consider strategies to reduce vulnerability and increase resilience
- consider strategies that marshal relationships and other positive sources of support and protection
- design a plan through consultation with others (for example, CSOs, ACCOs, SEPL, SOCIT, sexual assault service)
- Wherever possible, plan with the child directly.

Actions

Detecting child sexual exploitation requires proactive efforts to gather information from multiple sources, for example:

- engage the child in meaningful, safe and trusting relationships
- engage and enlist the child's informal and formal social networks
- convene regular care team meetings

Reviewing assessments, outcomes, plans and actions

Detecting child sexual exploitation is not a static action; practitioners and carers must remain vigilant to changes over time, for example:

- review information and continue to collect new information (including when it contradicts other information)
- ask, 'What has changed?'
- review the analysis and plan
- review actions (for example, has the plan been implemented? What has worked? What has not worked?)
- design a new plan or adapt the existing plan as needed.

3. Disruption

Ceasing or disrupting the behaviours of persons of interest and their access to children is an essential part of any strategy to protect children from sexual exploitation. While there will be continued attempts to criminally charge and prosecute those who sexually assault or exploit children, this has not been the most successful method of disrupting sexual exploitation.

Gathering evidence for potential criminal conviction

Relying on criminal prosecutions for alleged offenders is often insufficient to protect children, particularly given the difficulties in obtaining evidence to support a successful prosecution of one of the sexual offences relating to sexual exploitation (see the appendix).

Police have alternative avenues to remove persons of interest from the child's circle of influence, which more efficiently and successfully stop the exploitation than attempting sexual offence charges. To be most effective, police need accurate and timely information from a range of sources, including Child Protection, CSOs, ACCOs, family members, carers and schools.

Police, Child Protection, CSO and ACCOs can experience frustration and barriers when attempting to gather information and tangible evidence regarding child sexual exploitation to support successful prosecution of suspected perpetrators. It can be difficult to encourage a child who has made a disclosure of sexual abuse to make a formal statement to police. Children, particularly those involved with the care and protection system, are often unwilling to attend a police station to make a formal statement, even if they are willing to discuss their experiences in less formal settings. Also, some children may not want to formalise their disclosures because they have been threatened or manipulated into keeping quiet.

SOCIT investigators are the primary police contact regarding child sexual exploitation.

They will vet the information and level of evidence obtained before asking the child to attend the police station for a formal interview or a video audio recorded evidence (VARE) interview. It is best practice for the child to be supported by a child protection practitioner, a CSO or ACCO case manager or a carer or family member during this interview because it is often a difficult experience.

If there is sufficient collateral evidence, with or without a disclosure by the child, police may proceed with criminal investigation. It is up to the Officer in Charge (OIC) of the SOCIT to authorise briefs to proceed to the Office of Public Prosecutions. The Office of Public Prosecutions will then decide if there is sufficient evidence to proceed to court.

When a child is over the age of 16, the ability for police to investigate and prosecute without the child's formal statement is complicated by law, which allows children over 16 years of age to 'consent' to sexual activity (within some limitations) without specifying the age difference between the child and the partner. The practitioner may form a view that, despite chronological age, the child does not and cannot conceivably 'give consent', for example, due to trauma affecting their executive reasoning skills and emotional regulation or if the child has a cognitive disability. The child may deny and minimise, contradict and retract informal

disclosures when the time arrives to make formal statements. This complicates and impedes the capacity of the SOCIT investigator to pursue the allegations. This is common in relation to all types of sexual abuse, not only sexual exploitation (Goodman-Delahunty et al. 2017).

SOCIT will provide information and guidance in relation to evidence thresholds to progress to prosecution. When practitioners understand why matters do not proceed to court, it assists in discussions with the child and their family. It is important to help the child and family understand that the care team believes the child's disclosure but there are legal and systemic processes that may impact on criminal prosecution. This is especially relevant for children who have made formal statements under highly stressful, anxiety-inducing and traumatic circumstances.

If SOCIT determines that the evidence threshold for progressing a child sex-related criminal matter has not been met, alternate joined-up means to protect the child and hold the person of interest to account must occur.

Assisting SOCIT investigations

The *Child protection manual* provides detailed procedures for how Child Protection, CSOs and ACCOs can work with SOCIT to investigate child sexual exploitation. It is the practitioners' responsibility to seek up-to-date advice as the manual can change over time.

Sexual exploitation information templates

In the Victorian child protection program, the sexual exploitation information template (SEIT) is the mechanism for SOCIT investigators to receive information about child protection clients at risk of sexual exploitation. Child Protection, CSOs and ACCOs can greatly enhance the capacity of police to respond to child sexual exploitation by providing well-documented information in SEITs, initially and at regular intervals. The SEIT should contain all relevant information about a child believed or confirmed to be subject to sexual exploitation. It contains questions for the case manager and other professionals involved to consider. When completed, the SEIT is provided to SOCIT within five business days.

Sexual exploitation evidence tier ratings

Sexual exploitation evidence tier ratings articulate the severity of risk of exploitation and strategies to protect the child. The tier rating does not describe or articulate the severity of the exploitation, only how we understand the evidence.

Tier 1

There is confirmed information of exploitative activity, including dates, times and locations. For example:

- the identity of person(s) of interest is known or being established
- the child discloses sexual acts with an adult (sexual exploitation) or an incident of sexual assault (such as rape). In this example the identity of the person of interest is not required.

Tier 2

The child's behaviour or actions suggest they are being sexually exploited; however, further investigation is required to confirm this or identify the person(s) of interest with assistance of police.

Active monitoring

Children assessed at high risk of sexual exploitation and where there is limited information to confirm this will be 'actively monitored'. Carers and professional team members must implement enhanced measures to monitor safety and support the child.

Sexual exploitation link charts

A sexual exploitation link chart provides a visual overview of sexual exploitation networks between children and person(s) of interest. The link chart can be created for an individual child or for groups of children. It can be created by Child Protection, CSOs or ACCOs and relayed to police to potentially inform multiple investigations or inquiries.

Turning information into intelligence

All professionals involved in the care and protection of children at risk of sexual exploitation should gather, record and share information purposefully and with the best interests of the child in mind.

Teams will need to work through information in order to understand the information they have and what is required to identify child sexual exploitation and, critically, pursue measures to hold the person(s) of interest to account. Small pieces of information, when analysed, can often be turned into intelligence and greatly enhance the ability of police to stop the exploitation. Some useful questions to consider were described earlier in this guide (see Detection).

Redefining success through disruption

Success can be defined in many ways and is not always contingent on an offender being charged and convicted for a sexual 'higher order' offence. Success for the young person can be the exploitation stopping and result from the culmination of potentially non-sexual, 'lower order' offences that may result in the most effective intervention. This can include breaches of an intervention order (IVO), drug possession or dangerous driving offences. The aim is for police to have a persistent presence in the person of interest's life, so that the feeling of being 'watched' encourages them to not attract further attention. In some situations, such lower order offences may result in the offender receiving a sentence period longer than the period for conviction in relation of a higher order offence, such as sexual penetration. The use of multiple and creative means to cease or disrupt the person of interest's behaviour must always be considered.

Disruption through harbouring notices and personal safety intervention orders

Evidence thresholds for criminal charges leading to prosecution, especially for sex crimes, are high. Anecdotally, this leads to victim disengagement and dissatisfaction and persons of interest not being held to account. More importantly, victims may not feel believed or vindicated when the measure of success is criminal prosecution. This is amplified by the often overwhelming emotional journey experienced by those who have suffered sexual exploitation and other types of assault.

Success, therefore, needs to be redefined and clear messages sent to persons of interest that their behaviour is unacceptable and to stay away from victims or potential victims.

Police in international and Victorian jurisdictions have employed 'disruption' tactics to interrupt or end the activities of those involved in the sexual exploitation of children.

Disruption can be defined as police applying laws to a person in relation to matters other than sexual exploitation, such as traffic or drug offences, when intelligence suggests that the person is perpetrating acts of sexual exploitation upon children. This approach is undertaken when the child is unwilling or unable to make a statement and will vary according to the information available (Department of Health and Human Services 2017a).

Legal options for Child Protection and police to consider to mitigate the risk of sexual exploitation include:

- Serving the person of interest with a ss. 495 and 497 CYFA 2005 'harbouring notice' or 'loitering letter'. The harbouring notice is served on persons of interest who are 'harbouring' or concealing a child or counselling or inducing a child to be absent from placement. The loitering letter is for persons of interest entering, lurking or loitering where a child is placed.
- Applying for a family violence or personal safety IVO on behalf of the child against the person of interest. The *Family Violence (Protection) Act 2008* has a broad definition of family members that can be considered when applying that legislation.

CSOs and ACCOs may suggest that Child Protection or police directly apply for IVOs or issue harbouring notices on behalf of a child. IVOs and harbouring notices are the main mechanism by which persons of interest are put on notice. However, further disruptive measures or legal actions may be required if the child or person of interest do not comply. This must only occur following consultation with SOCIT and child protection managers, including the SEPL.

Examples of other disruption activities include:

- police visiting persons of interest at their homes to search (via a warrant) for the missing child
- police reminding persons of interest of the age of consent or other laws (an active IVO has been obtained against them)
- actively pursuing known drug trafficking or other illegal activity by the person of interest
- generally ensuring the person of interest knows they are being watched closely.

The aim of these activities is to communicate to persons of interest that police, Child Protection, CSOs and ACCOs are aware of their activities and to provide a clear message of deterrence.

Victoria Police Sex Offender Register

Since 2004, a person convicted of sex offences against children and other serious sex offences is placed on the Sex Offender Register and monitored by police via compliance managers under the obligations of the *Sex Offender Registration Act 2004*.

If a person suspected of being involved in child sexual exploitation is a registered sex offender (RSO), child protection practitioners can contact the SOCIT to confirm their status as an RSO.

If they are on the register, you can obtain the name of the Victoria Police compliance manager and, consistent with departmental protocols with Victoria Police, inform the compliance manager of the RSO's contact with the child.

Best interests case practice model cycle – disruption

The following outlines the Best interests case practice model cycle in terms of disrupting the mechanisms that enable child sexual exploitation to occur.

Disrupt child sexual exploitation

Information gathering

Disrupting child sexual exploitation requires the following actions to **gather and provide information**:

- child protection, CSOs and ACCOs provide SOCIT with timely, accurate information about any indicators that the child is being sexually exploited and about the behaviour of person(s) of interest
- other useful information may include licence plate numbers, physical descriptions, names and nicknames, the time of day when the child was not at the placement and their known whereabouts
- complete a SEIT
- **complete a link chart**
- principal Practitioners, **SEPLs and SOCIT provide useful tips on how to gather relevant information as well as providing information directly**

Analysis and planning

It is the role of SOCIT to determine if there is sufficient evidence to recommend laying charges.

SOCIT, Child Protection, CSOs and ACCOs may consider other means of disrupting persons of interest activities.

Actions

Disrupting child sexual exploitation requires **proactive efforts**, such as:

- issuing harbouring notices
- issuing personal safety intervention orders
- charging a person of interest with sexual offence crimes and/or other crimes, such as breaching a harbouring notice, breaching an IVO and drug trafficking
- active monitoring by SOCIT of the person of interest's activities
- continuous information sharing by Child Protection, CSOs and ACCOs (and other services) of new information to SOCIT.

Reviewing assessments, outcomes, plans and actions

- review and continue to collect new information and forward it to SOCIT, including what has changed
- review the analysis of evidence (by SOCIT) and plans
- review disruptive activities (for example, what has worked? What has not worked?)
- **design a new plan or adapt the existing plan with SOCIT as needed.**

4. Intervention

This guide focuses on the safety and wellbeing of children and the imperative to prevent and effectively respond to issues of risk or actual child sexual exploitation. Intervening directly with the child usually occurs concurrently with the other elements of effective practice. Case management (whether it be by Child Protection, CSOs or ACCOs) is not just about case coordination and responding to incidents; it is also about the day-to-day work with the child towards achieving short- and long-term goals and positive outcomes.

To be effective, we need to actively engage the child's carers (residential care workers, kinship carers or foster carers) and, wherever possible, their family. For Aboriginal children, we need to engage with the community and support the child to remain, or become, connected to their cultural identity and their sense of belonging. For children from other culturally and linguistically diverse backgrounds, we need to be mindful of potential language and other differences and, where possible, seek cultural consultation.

These points are instrumental to effective intervention:

- engagement and relationship building – enabling access and providing time and attention; building trust
- support and stability – meeting priority needs such as placement stability and supporting existing safe relationships
- providing advocacy – being on the child's side and enabling them to have a voice that is heard; representing their needs and views to other agencies and the police
- reducing risks and building resilience – increasing understanding of rights and risks; developing safety strategies and building on strengths and enhancing self-worth
- making sense of the experience of being sexually exploited
- addressing underlying issues – trauma and attachment; dealing with feelings
- enabling growth and moving on – creating positive opportunities and growing aspiration.

The effective interventions identified have been adapted from Barnardo's (2011) model of direct work with children who are sexually exploited (Boyarnick et al 2017). The last three points are discussed in the following section on recovery and reconnection.

Engagement and relationship building

Engagement is not only relevant at the beginning of a relationship with the child. It is vital to continue to engage and re-engage, especially after an escalation of incidents, when the child has gone missing or has been placed in secure welfare. Re-engaging is also important when a practitioner returns from leave or after some other interruption to the working relationship.

A goal of engagement is for the child to be sufficiently comfortable to invite the practitioner into their view of self and their experiences, thoughts and feelings. Having an understanding of what the child thinks, feels and believes, provides important insights in order to assist the child. It helps guard against relying on assumptions and generalisations and it helps build trust. While we are learning about the child, the child is learning about us, our role, what we can and cannot do, and how to use that role to assist them.

Engagement can be assisted by seeing the child where they are most comfortable, such as in their placement, in the car or somewhere else in the community. The key message is to find out from

the child where they want to meet, try different approaches and be proactive and flexible. After hours' work is often important to see the child when they need to be seen.

Using technology to engage with children can raise or change expectations. Text messaging or other means can provide 24/7 access. At the same time, we need to maintain boundaries and ensure we do not mislead the child into thinking we can always respond. Use of social media should only occur in the context of organisational policies.

Support and stability

Placement instability is a risk factor for child sexual exploitation; therefore, intervention should focus on strengthening the quality and viability of the placement or planning for a permanent or long-term placement. A number of children at risk of sexual exploitation are in residential care, which is typically a short-to-medium term option. The case planning goal may include locating a longer term placement. Changes of placement are not always negative; for it to be experienced as positive, the child needs to understand the reason for the change and participate in the planning.

It is important to engage the child's family, whether or not the child is living with them. The goals may be placement prevention so the child can remain with family, reunification so the child returns to family, or maintaining and strengthening family connections.

Parents of children in care have often lost (or never had) hope that their child will return to their care. Interventions with parents must be based on the same transparency, consistency and strengths-based approaches as our work with children. We may be the bridge between the child and family developing a safer and more trusting relationship.

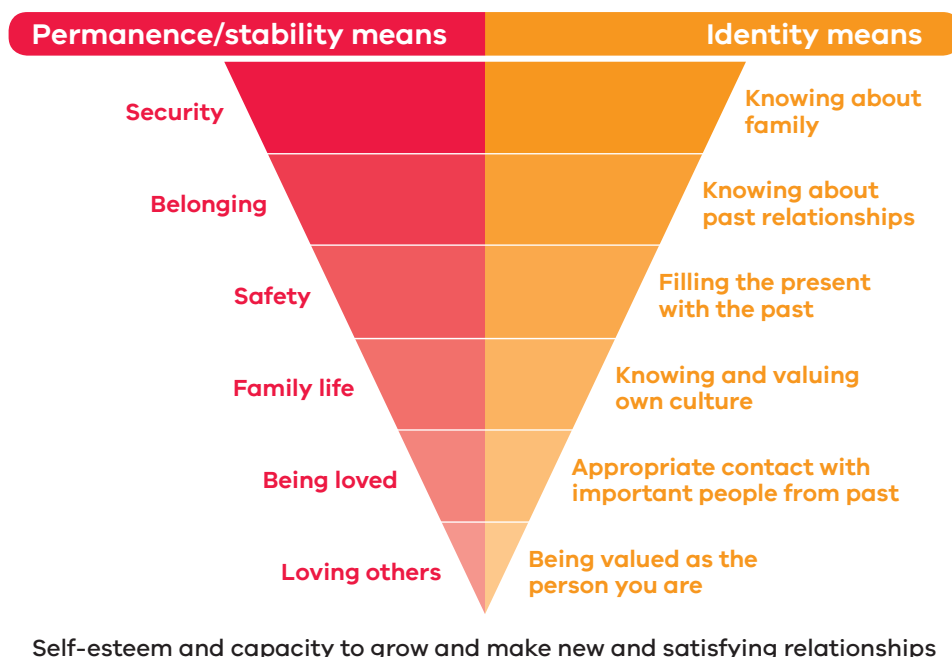
Even when the child's family is a potential risk factor, such as with sexual exploitation or other active risks, the more that is known about the family and the child's relationship, the more risks can be mitigated and other difficulties managed.

These practice principles (Scott & Honner 2004) support work with children in care and their families:

- Practitioners and carers believe in the importance of families and their involvement with their children for better outcomes.
- Practitioners and carers hold attitudes such as respect, trust, honesty, empathy, having positive regard and being non-judgemental.
- Parents need opportunities to participate in their child's lives wherever possible.
- Parents need information and regular feedback about what is happening with their child, such as through regular contact with practitioners and carers and through reports.
- Parents and children need to be active partners in decision making. This means they not only have a voice, but that their voice is heard.
- Practitioners need to be available, accessible, honest and supportive with families.
- Parents and children need a clear understanding of roles and responsibilities, with clear channels of communication.
- Practitioners strive for a clearer understanding of the parent's situation and the emotional impact of having a child removed.
- Practitioners need to acknowledge and work with parents' and children's loss and grief.

A child's view of who they are and what is important often stems from their family identity. Identity and belonging are intertwined and are usually primary goals of work with children at risk. Children in care have the same needs as all children, along with some additional needs. They cannot take identity and stability for granted, which they need in order to develop a positive self-esteem and form and sustain meaningful relationships. This is more complex when the child's identity is jeopardised by losing connection with their past or identity, such as if disconnected from culture, place and people. Figure 2 portrays the needs of children in care.

Figure 2: The needs of children in care



Source: Thorburn 1994, adapted by Jackson 2010

The concept of attachment is crucial when thinking about relationships and identity. One aspect of attachment theory relevant to the push and pull factors for child sexual exploitation is that children need a safe haven and a secure base.

Safe haven: Children are born with the instinct to seek physical proximity to those older and bigger than them as a means of survival. 'Safe haven' describes children's perception of their attachment figure as someone they can turn to in times of distress, tiredness or for comfort and reassurance (Cassidy 2008).

Secure base: To develop and grow, children need to learn, to explore and to take new steps. 'Secure base' describes the child's confidence that the attachment figure will encourage exploration and certain risks, whilst providing a safety net. When children explore to discover what is new and different, to experiment, to take risks and learn, they are showing confidence that they have a secure base to provide a foundation without needing to be physically close all the time. As children grow older, their exploration and risk-taking increases in style and degree (Cassidy 2008).

Attachment signals or behaviours: When distressed, a child shows certain signals that they need to be close to an attachment figure, such as crying, lifting up their arms and moving closer (Cassidy 2008). These signals change as the child grows older but the essence remains the same as they meet their needs for survival.

- Faced with danger, the child seeks safety
- Faced with distress, the child seeks comfort
- Faced with isolation, the child seeks proximity to others
- Faced with chaos, the child seeks predictability.

(Baim & Morrison 2011)

Children in the child protection and out-of-home care system are particularly vulnerable because they are less likely to have experienced their parents providing a safe haven or a secure base in their early years. They may have been able to find this through a kinship or foster parent, but when they have multiple placement changes, this suggests they are probably still seeking these necessities in life.

Persons of interest can give messages to the child such as, 'I'll let you take risks, trust me – don't trust others' (a counterfeit secure base) and/ or 'I'll look after you. Others have let you down, trust me – don't trust others' (a counterfeit safe haven) (Jackson 2014). The main defence against counterfeit attachment is the opportunity to develop genuine attachments. This emphasises the importance for the child to develop and maintain enduring relationships with family, carers and friends.

Applying strategies to prevent or reduce the amount of time and frequency a child goes missing from placement is both an intervention and prevention strategy (see Prevention). Working directly to reduce patterns of being missing from care supports the stability of placement.

Children who are at risk of, or who are sexually exploited, need a relationship with a 'key, consistent professional who is on and by their side'. Research suggests that children at risk want honesty and transparency and 'need the consistent, reliable support of a worker who does not give up on them but who persists and shows them that they genuinely care and will be there for them' (Bovarnick et al. 2017, p. 18).

Stability is not just about placement; it is also about stability of workers. Changing workers is a frequent experience in the child protection and out-of-home care system, which can erode trust and predictability. Although this is often unavoidable, it is a reminder to reduce the need to change workers wherever possible and, when it does occur, to provide the child with as much information as possible.

Providing advocacy

We need to hear what the child is saying and show we have been listening. We also need to help the child be heard by others. Instead of their behaviour needing to be a megaphone to make people listen, we need to show them other ways of being heard.

Children whose parents were not able to meet their needs will tend to be less confident in others meeting their needs. They often develop strategies for meeting these needs in ways that appear

'frightening, dangerous, bizarre, self-defeating or mystifying' (Baim & Morrison 2011, p. 15). We need to show genuine interest and demonstrable efforts to have their needs met.

As described earlier, children who have been sexually abused have often learnt the need for secrecy, and have experienced helplessness and entrapment. We need to show them in everyday ways that they are not helpless or trapped.

Advocacy often means providing a bridge so that the child develops understanding of the system and services and the rationale behind decisions, and the service system hears the child and responds accordingly.

The role of the advocate is to navigate multi-agency involvement and to establish which the most beneficial intervention is for the child at the time – and to find out what young people want. Advocacy can reduce young people's anxiety and help them gain the confidence and skills to eventually advocate for themselves.

(Bovarnick et al. 2017, p. 25)

Children should be told that they can access independent advocates such as the Commissioner for Children and Young People and the Create Foundation. They may also need access to legal advice such as through the Victoria Legal Aid.

Reducing risk and building resilience

Children learn to take risks during childhood. This is what helps them try new activities, meet new people, develop new skills and experiment with the unknown. Risk taking is a part of healthy adolescence, so it is important not to pathologise the behaviours. However, the degree of risk taking by some children can place them directly in harm's way. Whether it is through alcohol and drug use, unsafe sexual activity, being missing from placement/home, driving a vehicle, criminal offending or being with people despite feeling they are not safe, children in out-of-home care are more likely to take these risks more often, to a greater degree of danger and with less support.

Judging risk is a dynamic and challenging aspect of all phases of child protection and case management. Effective and timely information sharing is important, as is a shared understanding of risk. Wherever possible, the child needs to be engaged in discussions about risks and behaviour. Children may not be able to identify behaviours and relationships as abusive and therefore may not recognise themselves or their situation as being at risk or exploited.

Helping young people to gain a better understanding of what constitutes a 'healthy' or 'unhealthy' relationship is crucial in building their capacity to manage risks independently and to make more informed choices about their own safety.

(Bovarnick et al. 2017, p. 30)

Educating children about the risks associated with some of their behaviours and the behaviours of others is an important strategy. SEPLs can assist in developing strategies. Education may be part of an informal conversation when the opportunity arises (such as by a residential care worker) or a more formal conversation. Possible topics include consent, grooming, signs of exploitation, safe relationships, cyber safety, sexual health strategies, discussions when they return to care after being missing and discussions about substance abuse (Bovarnick et al. 2017). Part of being a good parent is assisting a child to make good decisions to ensure their safety and wellbeing.

Resilience is not born but made. It is influenced by relationships that start in infancy. We know that being there for children is the most effective way of building resilience (Coleman & Hagel 2007). It is often not about knowing the right thing to say, but sitting alongside someone and sharing the experience. It is not a coincidence that deeper conversations often happen in a car or in other situations where there is no eye contact but a quiet shared experience.

Consider these factors when aiming to strengthen the child's resilience:

- Is there at least one trusted adult who the child knows cares about them and who is there for them throughout life? This person does not need to be a carer or family member.
- Does the child have access to safe, age-appropriate activities that are fun and exciting?
- Does the child have age-appropriate opportunities to practise problem solving in different situations?
- Does the child have places and spaces where they feel safe and can be themselves?
- Does the child have support to understand and manage their feelings? This includes learning how to recognise and name feelings.
- Does the child have the chance to find out what they are good at and can feel proud about?
- Does the child have opportunities to help others?
- Does the child receive support that recognises their whole life including identity, home, placement, school, friends and community?
- Does the child have a sense of hope and ambitions for the future? (Bovarnick et al. 2017)
- Does the child have exposure to moderate stress that they can deal with, along with support, without being overwhelmed? (National Scientific Centre on the Developing Child 2005; Perry & Szalavaitz 2017).

Best interests case practice model cycle – intervention

The following outlines the Best interests case practice model cycle for interventions with children who are at risk of or who are being sexually exploited.

Intervene with children at risk of sexual exploitation

Information gathering

Intervening with children who are at risk of or have been sexually exploited requires:

- similar information to what has been described in the prevention and detection elements of this guide
- potential and actual sources of strength and protection
- an understanding of how the child engages with others
- an understanding of the child's history of dealing with stress
- stability in the child's current placement and other relationships.

Analysis and planning

Intervening with children who are at risk of or who have been sexually exploited means considering:

- factors that may increase the child's resilience
- risk management and safety planning
- who is likely to be the best person(s) to have more personal conversations with the child.

Actions

Intervening with children who are at risk of or who have been sexually exploited requires effective and sustained implementation of the plan informed by analysis of information and in collaboration with others:

- engage the child in meaningful, safe and trusting relationships
- educate and support the child in prosocial and safe choices and actions, including safety planning and understanding the risks
- engage and enlist the child's informal and formal social networks to provide a safe and supportive environment
- provide support to the child, family and placement to increase stability
- provide advocacy
- develop strategies to reduce risk and build resilience
- implement the plan as agreed
- refer to sexual assault services, therapy and mental health services if required.

Reviewing assessments, outcomes, plans and actions

Intervening with children who are at risk of or who have been sexually exploited requires ensuring information, plans and actions are regularly reviewed, considering if positive outcomes are being achieved.

Risk management planning

Often risk management planning for children believed to be sexually exploited occurs at times of crisis once the risks have been identified. It is best practice and useful to review and improve risk management plans throughout the case as well as at key incidents. Ask these questions:

- Have the appropriate and relevant parties been notified of a new incident, such as SOCIT or ACSASS?
- Is there a risk management plan in place and what are the recommendations?
- If relevant, what happened the last time the risk management plan was enacted?
- Who and what are some of the protective factors in the child's life?
- Is clear action being taken in relation to the child being missing?
- Is it appropriate to plan for the child to have some time out with a respite carer or other activity away from the potential areas of risk?
- Is a planned circuit breaker for the child required, including the child going away with family or carers, culturally-specific experiences or secure welfare (if risk level is immediate and warrants this)?
- Is there a member of the child's care team who has a close rapport with the child and may be able to obtain further information?
- Who will the child best feel supported by if they agree to participate in a VARE?
- Is isolation a factor in increasing risk for the child and, if so, what can be done about that?
- Is this situation coinciding with a particularly vulnerable time of year, such as a reminder of loss or trauma, and is there a need to increase support at this time?
- How can the child's distress be heard and responded to, reminding them they are not alone?

Child Protection, CSOs and ACCOs should focus on ensuring management plans for children in care are robust, practical and individualised to the child's needs and risk profile, and are regularly reviewed.

A robust risk management plan ensures all professionals and family members involved in the care and protection of at-risk children are consulted and contribute to decision making. Involving the child in decisions, wherever possible, will increase the likelihood that decisions are appropriate, relevant and achievable.

When working with Aboriginal children identified as being at risk of sexual exploitation, the child's care team needs to:

- consider circuit-breaker activities that may involve a referral to a return to country program, connection with an Elder or other cultural support person, or respite with protective extended family or community members
- consult with ACSASS for input into risk management and planning
- consult the relevant Aboriginal cultural advisor responsible for the child's cultural support plan
- consider a referral to an Aboriginal Family Led Decision Making (AFLDM) meeting.

Responding to a child when sexual exploitation is believed to have occurred

When tangible evidence of sexual exploitation of a child is identified, a number of strategies are required (see *Disruption*).

If the child agrees to make a formal statement, SOCIT needs to be contacted to conduct the interviews. Interviewing the child after returning from an episode of missing must occur within 24 hours in accordance with current practice advice. The child may or may not make disclosures under these circumstances; however, it is important to touch base with the child and clarify any health needs including if a health assessment is required. When in doubt a health assessment should be considered if the child agrees.

Children who are sexually exploited often do not identify as victims and do not believe they have been exploited. They may refuse to identify or report their abusers due to their emotional connection, perceived 'relationship', 'gifts' and other inducements being offered, threats of violence or other forms of manipulation used by persons of interest.

When authorities take action to reduce exploitation, children may become upset that their private lives are being interfered in. There needs to be ongoing, open dialogue with children about their safety, and transparency about why specific actions are being taken.

When interviewing a child in relation to sexual exploitation, pitch the questions to the child's developmental age and level of cognitive capacity. If the child's mood is heightened or dysregulated this can impact on their current state and impede their normal capacity to take in and respond to information. When interviewing children in relation to sexual exploitation:

- Ensure the conversation is in a quiet and private place
- Listen without judgement, shock or critical comments
- Be prepared for expression of emotions such as crying and anger
- Help the child understand they are not to blame and they are not in trouble
- Tell the child you are worried about them and want them to be safe
- Help the child understand what healthy and safe relationships look like, and depersonalise this from the child; for example, say 'Young people sometimes wonder about ...'
- If the child has a cognitive disability, seek advice from disability services to maximise the child's ability to understand the process and the workers' ability to understand the child
- Ask the child how they can keep themselves safe and how they can let their care team know they are okay – for example, being able to send a text to one or more of their workers or carers
- Seek participation from a cultural support worker when applicable
- Help the child explore and name their feelings
- If the child is about to say something and then hesitates, encourage them to continue
- Be comfortable with silence
- Avoid doing most of the talking if possible
- Be realistic and don't make promises that cannot be kept
- Help the child identify protective people in their lives who can be part of a safety plan.

In devising a safety plan, always prioritise the child's safety and inform the care team and SOCIT about reasons for decisions.

Safety and risk management plans should be successful in increasing safety, and this needs to be acknowledged with the child and the care team. However, plans do not always work or may need refinement and adjustments. In accordance with the Best interests case practice model, review decisions and outcomes and consider how effectively a plan has ensured safety.

Ask the following questions:

- What happened the last time the risk management plan was enacted?
- What worked for the child? What did not work?
- Are there new members of the care team who appear to have better rapport?
- Have the causal or risk factors changed over time?
- What triggers continue to place the child at risk?
- What disruption activities have been used and what else can be done? Has SOCIT been recently consulted?
- Is it worth completing an updated SEIT and further consulting with the SEPL?
- Are there better ways to support a child who returns from missing?
- Was the Repeat Missing practice advice followed on the last occasion and how can this information be more efficiently relayed to police?
- Can there be better information gathering by the residential care or other carers, as well as by all services?
- Is there anything we can do differently?

5. Recovery and reconnection

This element is about helping children recover from the trauma and distorted perceptions associated with child sexual exploitation.

Following intervention, the remaining three tasks relate to recovery: making sense of the experience, addressing underlying issues such as trauma and attachment, and enabling growth and moving on.

Three considerations throughout this topic of recovery and reconnection are:

- conversations that case managers and other key workers can have to assist the child in their process of recovery
- referrals to services – such as sexual assault, mental health and other therapeutic services – that work directly with the child on their trauma experiences
- the power of carers in building recovery and reconnection.

Carers, whether they are parents, foster parents, kinship carers or residential care workers, can have the most powerful impact by providing the child with a secure base and safe haven. This can be challenging, especially when the child is angry or scared. However, if no one is providing this for the child, other therapeutic outcomes are very difficult to achieve.

Making sense of the experience of being sexually exploited

The goal is to help the child understand the experience of sexual exploitation and how it relates to them and to others.

A common strategy is to refer the child to a sexual assault service or other services with experience in providing therapy for children who have been sexually abused. This guide does not discuss specific therapeutic interventions used by these services. Making a referral to a sexual assault service or other service is rarely sufficient in itself. You need to help the child understand the need for the referral and develop practical and emotional strategies to increase the likelihood that they will participate. For example, a sexual assault service

may help explore the child's questions about their experience and about themselves. Information provided to the service about the child's history, their current situation, trauma history, relationships, difficulties and strengths can inform the therapeutic approach.

Although much of this work occurs in the context of therapy, there is a role for those who hold the child's trust to support them to think about different parts of the experience. For example, Finkelhor's (1984) preconditions of abuse can usefully inform our conversations with children.

It can begin with finding shared language so you and the child are talking about the same thing. A major step towards recovery is helping children understand the experience of being controlled, intimidated, tricked and sexually exploited (Rafferty 2016). The language to describe the sexual exploitation needs to have been worked out with the child. The child may call it 'abuse' or 'being paid for sex' or use some other terminology. With some children it may be helpful to explain the term 'exploitation', particularly if they have heard or read that term. Exploitation means the adult is trying to use the child to do what he wants and that this is not the child's fault. (Note the child may change the language they are comfortable with over time.)

Asking hypothetical suggestions about 'other' children can be helpful, for example:

- 'Some children I work with ask questions such as "Why did it happen to me?" and "How did it happen?"'
- 'Some children find this difficult to talk about.'

The conversation can move on to explore 'why me?' (This may be code for 'what did I do wrong?')

- 'Have these been questions you have ever asked or wondered about?'
- 'What answers did you come up with?'

There may be opportunities for testing new ideas:

As previously described, before someone exploits or in any other way sexually assaults a child, there are usually a number of preconditions:

- The person wants to perpetrate the abuse.
- They have overcome their own thoughts that tell them 'no'.
- They work hard to get the child alone and to get in the way of others protecting the child.
- They then perpetrate the abuse (Finkelhor, 1984).

There are more direct questions you can ask the child if they are 'staying' with the topic. If they change the topic, let them. Conversations such as this may happen in stages or over time; it must be at the child's pace.

Each of these steps by the adult can be unpacked with the child in terms of what they mean and what they can look like for children in general. Then, if the child is willing, you can explore what the experience looked like from the child's point of view.

The key message is that the exploitation or abuse is about the adult's behaviour, not the child's. If a child refuses to participate in therapy but seems interested in exploring these questions, seek consultation with a sexual assault service or other therapeutic service.

When children have to give evidence in a court proceeding, attend medical appointments or participate in police interviews, it can be helpful to offer them strategies to reduce their anxiety and stress. Sometimes these events can be a trauma trigger, so caution is important. A memory aid for emotional first aid strategies to assist with this is PAIN relief, which stands for:

- **P** – Prepare and predict with the child – help the child know what to expect, such as where they will be going and who will be with them (some courts have witness support programs that can be used to help witnesses understand the process before giving evidence).
- **A** – Acknowledge – help the child find words to fit their feelings such as 'Many people are worried when they go to court', 'Some people feel sick in the stomach when they are upset'.
- **I** – Inform – give the child information they need, such as the purpose of the medical and what their options are (such as who can go with them). Suggest strategies to help calm the nerves, such as breathing techniques or visualisation strategies, or messages such as 'I'll be with you'. Sometimes this information needs to be repeated if the child forgets what has been said to them. If the child is distressed or dysregulated, they will take in minimal information, so keep the information practical and provide it in stages rather than overloading them.
- **N** – Notice and nurture – assure the child that they are not on their own and give them the positive attention and quiet companionship needed (Dwyer et al. 2010).

Addressing underlying issues – trauma and attachment, dealing with feelings

Children need the opportunity to reflect on and learn about other aspects of their trauma and attachment experiences – the way this has affected their decisions, behaviour and wellbeing and what they can do to make sense of it. Again, it is important to consider therapeutic services for this detailed work, such as a sexual assault service, a therapeutic service (for example, Take Two or Australian Childhood Foundation) or a mental health service (for example, a child and adolescent mental health service – CAMHS).

The timing of therapy is important. If the child is currently unsafe it may be counterproductive and premature to refer them to therapy about their trauma experiences. Similarly, if a child is too dysregulated in their emotions and behaviours, other types of work may be needed before they can sit in a room with a therapist. For example, outreach work focusing on engaging the child, somatosensory interventions that help the child feel more comfortable in their own skin, or alcohol and drug treatment may be good places to start.

Trauma-specific service providers are trained to provide direct therapy to help a child work through their experiences and memories so they no longer intrude on their present (Fallot & Harris 2006). Some therapeutic services incorporate these strategies into their model of intervention. Consult with the therapeutic service to assist in planning the timing and type of interventions.

Practitioners need to be trauma-informed. This means learning about how trauma can impact on children and on practitioners, and how this looks on a day-to-day basis. Being trauma-informed can also ensure we are not judgemental or in other ways re-traumatise a child.

To help address the underlying issues with the child, practitioners and carers need to understand trauma, including the following:

- The impacts of trauma can be pervasive and affect multiple areas.
- A person can be traumatised without having all the symptoms that meet the criteria for post-traumatic stress disorder.
- Children's (and adults') behaviours after trauma experiences are often best understood as survival or adaptive behaviours. In other words, they are doing what they can to survive an unsafe, untrustworthy world. Behaviours can be adaptive and harmful at the same time (Jackson & Waters 2014).

The overarching principles of trauma-informed practice aim to ensure (Fallot & Harris 2006):

- safety – physical and emotional safety
- relationships and trustworthiness – maximising trustworthiness through relationships, task clarity, consistency and interpersonal boundaries
- collaboration – maximising collaboration and genuine sharing of power
- choice – maximising authentic choice and control
- voice – prioritising the person's voice being heard and heeded.

Best interests case practice model cycle – recovery and reconnection

The following outlines the Best interests case practice model cycle in terms of helping children to recover from the experience and impacts of sexual exploitation and to make positive reconnections.

Recovery and reconnection after child sexual exploitation

Information gathering

To support recovery and reconnection we need to know:

- the child
- if they are still at risk of sexual exploitation
- what they want to do
- what information needs to be provided to the sexual assault service, therapeutic service or CAMHS.

Analysis and planning

- the sexual assault service, therapeutic service or CAMHS will form their own assessment and intervention plan; this will be informed by information provided by others
- what can be done to support the carers and others to provide a secure base and safe haven?
- what conversations can assist with analysis? .

Actions

- continue to engage the child in meaningful, safe and trusting relationships
- educate and support the child in prosocial and safe choices and actions
- engage and enlist the child's informal and formal social networks to provide a safe and supportive environment
- provide support to the child, family and placement to increase stability
- provide advocacy
- develop strategies to reduce risk and build resilience
- make sense of the experience of sexual exploitation
- address underlying issues
- enable growth and hope
- support cultural connections
- implement the plan as agreed
- refer to sexual assault services, therapeutic services and CAMHS if appropriate.

Reviewing assessments, outcomes, plans and actions

Supporting the child's journey to recovery needs to be regularly reviewed with the child, carer, family and all the services involved to ascertain if positive outcomes are being achieved.

Enabling growth and hope – creating positive opportunities and growing aspiration

Once a child knows they are safer and have people in their lives who will care for and protect them, there is opportunity for growth. As they no longer need to devote all of their energy to survival and defence, they may have energy for new experiences. It is vital to build on the child's resilience and help them reconnect or connect with others.

The older the child, the more likely they will be working towards independence and self-reliance. Independence should not lead to isolation.

It should mean that the child has a sense of their own abilities, their own voice and their own power. They can try new things and take new challenges without being 'at risk'.

Moving on for some children may mean moving back to community, such as an Aboriginal child reconnecting with their cultural identity and regaining or finding a sense of belonging. For any child, moving on may mean returning to school or finding a new form of education. The key is creating and building a genuine sense of hope in a safer and kinder world.

Section D

Outcomes and case studies

Section D:

Outcomes and case studies

Safety, permanence and development

The Best interests case practice model seeks to ensure children's safety, permanence and development, all of which are compromised when a child is sexually exploited. Some of the many harmful consequences associated with sexual exploitation have been discussed, as well as goals to redress these harms. Specific outcomes need to be tailored to the individual child and their situation.

Safety

Safety is about physical, emotional, social and cultural safety. Sexual exploitation is physically, emotionally and psychologically dangerous. It cannot be made safe. It directly and indirectly causes children multiple harms. Effective practice that prevents or ceases sexual exploitation contributes to increased safety.

Some consequences arising from sexual exploitation include children developing behaviours that place them at risk, such as self-harming, suicide, substance abuse and going missing. Outcomes need to be considered that also deal with these risk factors for the child.

Stability and permanence

Stability refers to both stability of placement and stability of relationships. Sexual exploitation distorts a child's view of relationships and trust. Changes to the Children, Youth and Families Act 2005 emphasise permanence, not just stability. Effective practice that leads to the child establishing lasting, trustworthy relationships is a key intervention and an outcome.

Development

Sexual exploitation poses major risks to a child's identity and to their emotional and sexual development. Effective practice aims to build a child's positive sense of self, age-appropriate capacity for problem solving, engagement in education, and healthy understanding of sexuality and love.

Case studies

The following case studies illustrate different aspects of practice and possible outcomes. Questions are posed to encourage discussions at team meetings and in other forums.

Note that the names of the people involved have been changed to protect their identities.

Recalling sexual exploitation processes for practitioners

Vanda is a 14-year-old girl who has been in a relationship with her 21-year-old boyfriend, Casey, for six months. Child Protection had several conversations with Vanda's mother about allowing this relationship to continue. Vanda's mother maintains that the pair do not have a sexual relationship.

- Is this relationship sexually exploitative? What factors make it exploitative or not? What more information will you need?
- What are some of the questions you would ask Vanda's mother and what information would you give her?
- Would you interview Vanda about her relationship and, if yes, what questions would you ask her? What would you tell her?
- Would you consult with the SEPL and would you make a recommendation that SOCIT be notified?
- Which of the five elements to respond to child sexual exploitation could be informative at this stage (multiple options are possible)?

Over time, Vanda was removed from her mother's care and placed in foster care and then residential placement. Vanda started to go missing from placement, which led to a number of Missing from Care Incident Reports.

- What do you understand about the link between missing from care and sexual exploitation?
- Using the Best interests case practice model, how would you gather information, plan and manage risk? Outline your plan.
- What intelligence would you want to provide SOCIT?
- What are some of the disruption activities you think SOCIT could engage in and how would these occur?
- What are some of the intervention strategies the care team might use?

Strong collaborative practice and information sharing

Gina is a 16-year-old girl who lived in residential care. The residential staff noted that Gina was regularly missing from care overnight and returning to placement with money. Gina made no disclosures about where this money came from. Child Protection was concerned that Gina might be being sexually exploited by a person (James) who had previously sexually exploited her and had been served an IVO. Without current evidence, SOCIT was unable to assist Child Protection.

- What information would you need to influence SOCIT's capacity to respond?
- What are some of the tasks you would engage in to gather more information?
- Would you complete a SEIT at this point?

As time went on, Child Protection continued to raise concerns with SOCIT and convened a care team meeting with Gina's residential care provider and therapeutic service. SOCIT attended the meeting because of new allegations that Gina had been coerced by James to work in the adult entertainment industry. Because Gina declined to make a formal statement regarding a breach of the IVO, police could not engage in traditional methods of disruption.

Together, the care team was able to agree to a joint response plan where police would use alternate disruption techniques. Via a warrant, surveillance footage was obtained from the venue and Child Protection was able to correctly identify

Gina. The owners of the venue were breached for illegally employing a minor and were served with harbouring notices. They provided information about how they had come to employ Gina through James. James, however, went into hiding. Police employed their surveillance officers to locate him.

- What best practice case management activities would you do with Gina at this point?
- Would you consider a secure welfare service placement at this time?
- What recommendation would you make to the case planner?
- How would you feel best supported by the residential care agency at this time and what are some of the best practice tasks they could engage in?
- What other aspects to assist recovery and reconnection might the care team consider?

After a period of time in secure welfare, Gina was returned to placement. She subsequently engaged well with her therapeutic service and the residential care provider.

An enhanced service delivery response

Vicky is a 14-year-old girl in residential care. She is Aboriginal, has a long history of abuse and trauma, and has developed an addiction to intravenous heroin use. You are her child protection case practitioner. Her residential care provider has raised concerns that she may have been sexually exploited online.

- What are some of the best practice case management tasks that could be used?
- What would you ask the residential care workers to say to Vicky?
- Who would you consult with?

Vicky's care team consists of an alcohol and other drugs worker, VACCA, an education provider, a mental health worker, SOCIT and the Police Youth Resource Officer. Vicky did not engage well with any of her care team members.

The SEPL was invited to the care team for some short-term, joint allocation work and consultation. Over time, Vicky's care team identified 34-year-old Jacob as sexually exploiting her online.

Jacob was served with an IVO; however, there was insufficient evidence that a criminal sex offence had occurred. The deterioration in Vicky's presentation and increase in intravenous heroin use led to a decision for Vicky to enter secure welfare. All members of the care team agreed to a schedule of visiting Vicky in secure welfare. A plan was developed for Vicky to experience a different care environment to develop her connection to country and culture and to act as a 'circuit breaker' to her pattern of behaviour.

- During a 'circuit breaker', how would you engage a disengaged child to talk about sexual exploitation?
- What specifically would you say to help the child gain insight? What tools or strategies might you use?
- How do you consider Vicky's cultural support plan will enable greater safety?
- For all children, but specifically Aboriginal or Torres Strait Islander children, what is the role of family connection? How would you make decisions around family connection?
- With this level of input and resource intensity, how would you look after yourself?

As a result of the dedicated and proactive efforts of her care team, and positive and consistent messaging, six months later SOCIT was able to obtain a statement from Vicky and Jacob was charged with criminal offences.

Working with boys

Tommy, a 12-year-old male, and his brother, Sammy, 14 years old, had been extensively involved with Child Protection throughout their lives. Three years prior, both boys were removed from their parents' care. In accordance with the best interests principle regarding sibling placement, they had been placed together in foster care; however, after a number of placements broke down the boys were moved into separate residential care placements. This decision was made because of the negative influence the boys had on each other; however, their relationship with each other was an important part of their identity.

Child Protection became aware of a 30-year-old female, Jacinta, harbouring children known to Child Protection. Jacinta's own children had been removed from her care some years prior and she had numerous drug-related charges and associations in criminal networks. Child Protection had intelligence that up to 20 children, mainly boys, routinely attended Jacinta's home and some made disclosures of being supplied drugs by Jacinta. Tommy and Sammy were returning to placement either substance-affected or with new clothing or other items. When safe sex and healthy relationship discussions were held with the boys, they presented as cagey and quiet.

- With the information at hand, and given no disclosures of a sexual nature, what would be your concerns for these two boys?
- Would you consult with the SEPL at this point or gather more information first? What more information would you want to gather? Would you consider a harbouring notice or warrant at this stage?
- What other signs of risk would you be looking for?
- What are some issues to be considered for boys and how would you engage in best practice with boys at risk of sexual exploitation?

Given the number of clients identified as involved, Child Protection called a meeting with the local SOCIT. An intensive plan was devised and SOCIT committed to a risk management plan that included:

- uniform police attending the home daily
- consultation with their drug squad to serve repeat drug charges on Jacinta
- knocking on neighbours' doors with Child Protection to obtain further information.

Child Protection committed to regular liaison and information sharing with youth justice and housing services. All care team members agreed to continue to work on developing rapport and relationships with the children. While Tommy and Sammy never made disclosures of sexual exploitation, the other children at the home made statements, which were sufficient to apply for IVOs.

Section E

Practitioner and
carer safety and
wellbeing



Section E:

Practitioner and carer safety and wellbeing

To be effective in our work to prevent and respond to child sexual exploitation, practitioners, workers and carers need to be resilient (Bovarnick et al. 2017). Resilience is not only an individual attribute; it reflects the organisation and supports around individuals. As with all our work, we must pay attention to:

- worker and carer safety
- the impact of trauma and vicarious trauma
- self-reflection, self-care and team reflection opportunities
- supervision
- management oversight
- access to employee assistance programs or external supports.

All workers working with children who are at risk of or who are being sexually exploited should consider the following:

- Use the care team and other professionals to help make sense of what is happening.
- It is not usually about knowing the right thing to say but being authentic and transparent and present.
- You cannot keep a child safe if you are not safe – so ask for help.
- Employee assistance programs, the Foster Care Association of Victoria and other supports are available.
- Supervision can help make sense of the inexplicable; even when there are no answers it is helpful when someone else asks similar questions.
- Boundaries are there to protect us and the child.

When working with child sexual exploitation, consider the following:

- Wherever possible, work with colleagues in your team.
- Work with colleagues in other organisations as part of a virtual team.
- Invest in collegial relationships – they can provide necessary practical and emotional support.
- If you do not know what to do, ask.
- This can be emotionally draining and personally confronting work. The PAIN relief memory tool can help us as well as children (Prepare/Predict – Acknowledge our feelings into words – Information that we need for ourselves as well as for the work – Nurture and notice our own reactions and be kind to ourselves).

Children do not need heroics. They need adults who stand together to protect them and provide genuine support and hope for the present and the future.

Appendix: Victorian legislation

Crimes Act 1958

Crimes (Sexual Offences) Act 2006

Crimes Amendment (Sexual Offences and other Matters) Act 2014

Crimes Amendment (Grooming) Act 2014

Crimes Amendment (Protection of Children) Act 2014

Crimes Amendment (Sexual Offences) Act 2016

It is a criminal offence to sexually abuse children or to allow or enable others to do so.

Consistent with the detail and severity of the behaviours for which information is provided, police can undertake a number of law enforcement responses to deal with those who sexually exploit children. These involve the identification, investigation, arrest and prosecution of persons of interest for offences under the *Crimes Act 1958*. The Act includes when sexually abusive or otherwise exploitation activities involve electronic communication.

Examples of crimes relating to sexual exploitation under the *Crimes Act 1958* and its subsequent amendments include:

- incest
- sexual penetration of a child or other forms of sexual abuse
- causing or allowing someone else to sexually penetrate a child
- allowing sexual touching of a child or by a child to someone else contrary to community standards of acceptable conduct
- sexual activity in the presence of a child contrary to community standards of acceptable conduct
- encouraging the child to be engaged in sexual activity
- causing a child to be present when there is sexual activity
- grooming for sexual conduct with a child
- abduction or detention of a child for sexual purposes
- intentionally causing or allowing a sexual performance involving a child (under the age of 18 years) where someone receives payment, reward or other benefit
- inviting or offering a sexual performance involving a child
- facilitating a sexual offence by someone else against a child and gaining benefit to self or another adult
- causing or allowing a child to enter or remain on a premises to facilitate a sexual offence by someone else
- involving a child in the production of child abuse material (including images of physical abuse, sexual abuse)
- producing child abuse material
- distributing child abuse material
- possessing child abuse material
- using force or threat to cause another person to be sexually exploited
- failure to disclose a sexual offence against a child
- harbouring a child (child stealing) – by force or fraud leads, takes away, decoys or entices a child under age of 16 years away from a parent or carer.

Some of these offences have a defence if the sexual act was by someone of a similar age (less than two years difference).

Informed by the Victorian Parliament's Betrayal of Trust Inquiry and the National Royal Commission into Institutional Responses to Sexual Abuse (Parliament of Victoria, Family and Community Development Committee 2013), an amendment was made to the *Evidence Act 2016* stating that failure by a person in authority to protect a child from a sexual offence by someone connected to that organisation is a criminal offence. This is when there was a known risk and the potential to prevent such an offence. Relevant organisations include government departments and out-of-home care services. This means that if an employee or a carer or other form of volunteer associated with an organisation commits a sexual offence against a child, consideration needs to be given as to whether someone in authority in that organisation had the knowledge and the ability to prevent such an offence.

Table 3: Sections of the *Crimes Act 1958* related to child sexual exploitation

Crime	Section of the Act	Characteristics
Sexual penetration of child under the age of 16	45	The age of consent for sexual interactions is 16 years. If a person is charged with engaging in sexual activities with a person under the legal age, a legal defence is the accused believed on reasonable grounds that the child was aged 16 or older, was not more than two years older than the child or the accused satisfies the court on the balance of probabilities that he or she believed on reasonable grounds that he or she was married to the child. If the child is under the age of 12, the perpetrator is liable to a level 2 imprisonment, with 25 years maximum imprisonment. If aged 12–16 and in the care of the defendant, 15 years maximum imprisonment. If aged 12–16 years, 10 years maximum.
Facilitating sexual offences against children	49A	Anyone involved in making travel arrangements, aiding, facilitating or contributing to the commission of a sexual offence is guilty of an indictable offence and liable to level 3 imprisonment (20 years maximum).
Grooming for sexual conduct with child under the age of 16 years	49B	A person of or over the age of 18 years must not communicate, by words or conduct, with a child under the age of 16 years or a person under whose care, supervision or authority the child is (whether or not a response is made to the communication) with the intention of facilitating the child's engagement in or involvement in a sexual offence with that person or another person who is of or over the age of 18 years. 'Communication' includes electronic communication. 'Sexual offence' includes an attempted offence as well as actual. Level 5 imprisonment (10 years maximum)
Procuring sexual penetration by threats or fraud		A person must not by threats or intimidation procure a person to take part in an act of sexual penetration. A person must not by any fraudulent means procure a person to take part in an act of sexual penetration. Level 5 imprisonment (10 years maximum)
Procuring sexual penetration of a child		It is illegal for a person aged 18 or over to solicit or procure a child (aged under 16) under his or her care, supervision or authority outside of marriage to take part in sexual penetration or an indecent act outside of marriage with him or her, or another person. Level 5 imprisonment (10 years maximum)

Table 3: Sections of the *Crimes Act 1958* related to child sexual exploitation (continued)

Crime	Section of the Act	Characteristics
Sexual servitude	60AB	A person who, by the use of force; or threat; or unlawful detention; or fraud and misrepresentation, including by omission, or a manifestly excessive debt causes another person to provide or continue providing commercial sexual services is guilty of an offence. This includes inducing another to provide commercial sexual services and conducting a business that involves the provision of commercial sexual services or and knows, or is reckless as to whether the other person providing services will not be free to stop providing those services because of fraud and misrepresentation, including by omission, or a manifestly excessive debt. Penalty is level 4 imprisonment (15 years maximum). Conducting a business includes taking part in business management, exercising control or direction over the business or providing finance for the business.
Deceptive recruiting for commercial sexual services	60AD	A person who, intending to induce another person to enter into an engagement to provide commercial sexual services, deceives that other person about the fact that the engagement will involve the provision of commercial sexual services is guilty of an offence and liable to level 6 imprisonment (5 years maximum).
Production of child pornography	68	A person who prints or otherwise makes or produces child pornography is guilty of an indictable offence punishable on conviction by level 5 imprisonment (10 years maximum). This includes a film, a photograph or a computer game.
Sexual performance involving a minor	70AC	A person must not (a) invite a minor to be in any way concerned in a sexual performance; or (b) procure a minor for the purpose of being in any way concerned in a sexual performance; or (c) cause a minor in any way to be concerned in a sexual performance; or (d) offer a minor to be in any way concerned into a sexual performance – in circumstances where there is payment or reward to the minor or to any other person in respect of the performance. Level 5 imprisonment (10 years maximum)
Procurement etc. of minor for child pornography	69	A person who (a) invites a minor to be in any way concerned in a sexual performance; or (b) procures a minor for the purpose of being in any way concerned in a sexual performance; or (c) causes a minor in any way to be concerned in a sexual performance; or (d) offers a minor to be in any way concerned into a sexual performance – is guilty of an indictable offence punishable on conviction by level 5 imprisonment (10 years maximum).

Source: St Kilda Gatehouse 2014

Sex Work Act (previously known as the Prostitution Control Act)

One of the objectives of the *Sex Work Act 1994* is to protect children (anyone under 18 years of age) from sexual exploitation and coercion (S4(a)).

The Sex Work Act 1994 states that paying a child for sex (s. 7) or receiving payment from someone else paying a child for sex (s. 6) carries a maximum sentence of 15 years. Causing or inducing a child to be sexually exploited is punishable by 10 years (s. 5). Payment can be in money or drugs.

It is not a defence if the adult states they did not know the young person was under 18 years. The exception is if the young person was 17 years old and the adult took reasonable steps to believe the young person was an adult, such as if they used false identification.

Glossary

Term or abbreviation	Description
Absconding	See 'missing'.
ACCO – Aboriginal community-controlled organisation	This is a registered Aboriginal organisation under the <i>Children Youth and Families Act 2005</i> .
ACSASS – Aboriginal Child Specialist Advice and Support Service	Service that provides expert advice and case consultation to Child Protection about culturally appropriate intervention in respect of all reports regarding the abuse or neglect of Aboriginal children and regarding significant decisions in all phases of Child Protection intervention.
Child abuse images	Any photography or film, online or in other formats, of physical or sexual abuse of children. The term 'child pornography' is no longer used (<i>Crimes Amendment (Sexual Offences Act) 2016</i>).
Child sexual exploitation	'Sexual exploitation' refers to a young person being coerced to perform sexual acts, or have acts perpetrated upon them, by adults or other third parties for 'gifts' or under duress from threat of harm to themselves or other's known to them. The definition also includes situations where a young person, under duress or other means, procures other young people to perform sexual acts with an adult. 'Child sexual exploitation' involves children being forced or manipulated into sexual activity in exchange for something – money, gifts or accommodation or less tangible goods such as affection or status. The sexual activity and exchange may be seen as consensual but is based on an imbalance of power, which severely limits the victim's options. Child sexual exploitation can occur through the use of technology without the child's immediate recognition – for example, being persuaded to post sexual images on the internet or mobile phones without immediate payment or gain. Violence, coercion and intimidation are common features of an exploitative relationship, which is also characterised by the child's limited availability of choice resulting from their social, economic and/or emotional vulnerability (Barnardo's 2012).
Child Protection	Child Protection is a program that is part of the Victorian Department of Health and Human Services. The program specifically targets those children and young people at risk or harm or where families are unable or unwilling to protect them.
CSO – community service organisation	This is a registered community service under the <i>Children Youth and Families Act 2005</i> .
Department of Health and Human Services	Victorian Government organisation that delivers policies, programs and services that support and enhance the health and wellbeing of all Victorians. The department's structure provides for integrated work across health and human services and provides many services directly to the community.

Term or abbreviation	Description
Grooming	Grooming behaviours may include the provision of or attention paid to the child, including: exposing the child to sexualised talk or pornography; providing drugs, alcohol, money or mobile phones; or manipulating the child through threats or the misuse of authority (Department of Health and Human Services 2017a).
Missing	'Missing' refers to missing from home or from care. It can involve a range of situations including children being absent from placement without permission, children's whereabouts being unknown and children running away. It can be a one-off event for a few hours, happen multiple times or the child could be missing for days or weeks. Missing refers to all forms of absences and incidents where the child has gone missing from their place of residence. The term 'absconding' is also often used when a child from out-of-home care is absent from placement; however, this term is seen to criminalise children so 'missing' is the preferred term. The term 'missing' is also used in regard to police missing persons' reports.
Perpetrator	The term 'perpetrator' in this guide refers to persons confirmed, charged and convicted of sex crimes against children. This is similar to the term 'offender'. See 'persons of interest' for the generic term used for someone considered to be involved in the sexual exploitation of children, with or without conviction.
Persons of interest	'Persons of interest' is a police term used to denote someone who is believed to be involved in some criminal offence. They may or may not yet be charged or convicted, which is why the term 'offender' or 'perpetrator' is not used. A person of interest refers to any adult known or believed to be sexually exploiting Child Protection clients and includes persons with or without prior child sex offences. 'Persons of interest' in this guide refers to people who seek to sexually exploit children. Police are interested in gaining evidence against these persons to commence investigations of illegal activity with a child. When police investigate sexual exploitation as a crime, the person of interest cannot be charged with 'sexual exploitation'; however, they can be charged with a number of other classifications. The Sex Crimes Act provides more detail in this regard and is outlined in the appendix.
Pornography (child)	See 'child abuse images'.
SEIT – sexual exploitation information template	This departmental template is a primary tool to support collation of information concerning persons of interest and young people at risk of sexual exploitation and the sharing of this information with Victoria Police. The template is structured to collect all relevant information held by child protection about persons of interest and children and young people who might be party to abusive and exploitative relationships. This template is accessible through CRIS and FAC.

Term or abbreviation	Description
SEPL – sexual exploitation practice leader	SEPL positions were established in 2015 to improve the response of the Child Protection and the CSO workforce to child sexual exploitation. They are located in each division and supported centrally by the Department of Health and Human Services Office of Professional Practice and divisionally through operational management. Their appointment has led to improved collaborative practice with Victoria Police in addressing child sexual exploitation and the inception of an enhanced response to child sexual exploitation.
SOCIT – Sex Offences Child Investigation Team	SOCITs are staffed by experienced and qualified Victoria Police detectives specially trained to respond to and investigate sexual offences and child abuse.
VARE – video audio recorded evidence	If the police determine that a criminal proceeding is likely, then in order to strengthen the probability of criminal prosecution, the police must record the child's formal statement of complaint. The VARE is the formal statement of the child's evidence for criminal prosecution. It is in the form of an audio or video recording of the child answering questions asked by a trained police member. The VARE interview occurs separately from the disclosure interview.
Vicarious trauma	This is a transformation in a worker or carer as a result of being with someone who has been traumatised. It is a cumulative effect of working with trauma, which can affect many aspects of a person's life. It may consist of short-term reactions or longer term effects that continue after the work has finished. Some effects of vicarious trauma parallel those experienced by the trauma survivor and can lead to a person experiencing the symptoms of post-traumatic stress disorder (Mental Health Coordinating Council 2013, p. 65).

References

- Australian Institute of Health and Welfare (AIHW). (2017). *Child Protection Australia 2015–2016*. Child Welfare Series, Number 66. Canberra.
- Bachelor, A., & Horvath, A. (1999). The therapeutic relationship. In: M.A. Hubble, B.L. Duncan & S.D. Miller (eds), *The heart and soul of change: What works in therapy*. Washington, DC: American Psychological Association.
- Baim, C., & Morrison, T. (2011). *Attachment-based practice with adults: Understanding strategies and promoting positive change – A new practice model and interactive resource for assessment, intervention and supervision*. Brighton: Pavilion Publishing Ltd.
- Barnardo's. (2011). *Puppet on a string: The urgent need to cut children free from sexual exploitation*. Essex: Barnardo's.
- Barnardo's. (2012). *Cutting them free. How is the UK progressing in protecting its children from sexual exploitation?* Essex: Barnardo's.
- Barnardo's. (2015). *Digital dangers: The impact of technology on the sexual abuse and exploitation of children and young people*. Ilford: Barnardo's.
- Beckett, H. (2011). 'Not a world away'. *The sexual exploitation of children and young people in Northern Ireland*. Belfast: Barnardo's Northern Ireland.
- Biehal, N., & Wade, J. (2000). Going missing from residential and foster care: Linking biographies and contexts. *British Journal of Social Work*, 30(2), 211–225.
- Bovarnick, S., Scott, S., & Pearce, J. (2017). *Direct work with sexually exploited or at risk children and young people*. University of Bedfordshire, DMSS & Barnardo's.
- Bowmar, A. (2014). *The response to 'localised grooming' in the United Kingdom*, Master of Arts, Social Work (unpublished).
- Bromfield, L., & Miller, R. (2012). *Cumulative harm: Best interests case practice model – specialist practice resource*. Melbourne: Department of Health and Human Services.
- Bromfield, L., Sutherland, K., & Parker, R. (2012). *Families with multiple and complex needs: Best interests case practice model – specialist practice resource*. Melbourne: Department of Health and Human Services.
- Cassidy, J. (2008). The nature of the child's ties. In: J. Cassidy & P.R. Shaver (eds), *Handbook of attachment: Theory, research, and clinical applications* (pp. 2–22). New York: Guilford Press.
- Centre for Human Services Research and Evaluation. (2017). *Missing from care*. Melbourne: Department of Health and Human Services.
- Cole, J., Sprang, G., Lee, R., & Cohen, J. (2016). The trauma of commercial sexual exploitation of youth – A comparison of CSE victims to sexual abuse victims in a clinical sample. *Journal of Interpersonal Violence*, 31(1), 122–146.
- Coleman, J., & Hagel, A. (2007). *Adolescence, risk and resilience: Against the odds*. Chichester: John Wiley.
- Department of Health and Human Services. (2017a). *Child protection manual*. Melbourne: State Government of Victoria.
- Department of Health and Human Services. (2017b). *DHHS quarterly data reports on child sexual exploitation* (unpublished).
- Downey, L. (2009). *From isolation to connection: a guide to understanding and working with traumatised children and young people*, Melbourne: Child Safety Commissioner.
- Dwyer, J., Jackson, A., McKenzie, R., & Frederico, M. (2010). Emotional PAIN relief for traumatised young people: Description of a tool for providing 'first aid plus'. *International Journal of Child and Family Welfare*, 13 (1–2), 81–97.
- Fallot, R.D., & Harris, M. (2006). *Trauma-informed services: a self-assessment and planning protocol*. Washington DC: Community Connections.
- Farley, M., Baral, I., Kiremire, M., & Sezgin, U. (1998). Prostitution in five countries: violence and post-traumatic stress disorder. *Feminism & Psychology*, 8(4), 405–426.

- Finkelhor, D. (1984). Child sexual abuse, Challenges facing child protection and mental health professionals. In: E. Ullmann, & W. Willweg (eds) *Childhood and trauma – separation, abuse, war*, (pp.101–115). Aldershot: Ashgate.
- Frederico, M., Jackson, A., & Black, C. (2006). *‘Give Sorrow Words’ – a language for healing: Take Two second evaluation report 2004–2005*. Bundoora: La Trobe University.
- Goodman-Delahunty, J., Nolan, M.A., & van Gijn-Grosvenor, E.L. (2017). *Empirical guidance on the effects of child sexual abuse on memory and complainants evidence*. Sydney: Royal Commission into Institutional Responses to Child Sexual Abuse.
- Jackson, A. L. (2010). Stability – The dilemmas of providing a secure base for children who are on very shaky ground. *Children Australia*, 35(2), 21–27.
- Jackson, A. (2014). *Literature review: Young people at high risk of sexual exploitation, absconding, and other significant harms*. Melbourne: Berry Street Childhood Institute.
- Jackson, A.L., & Waters, S.E. (2014). *Taking time: A trauma-informed practice framework for supporting people with intellectual disability*. Richmond: Berry Street.
- Jimenez, M., Jackson, A.M., & Deye, K. (2015). Aspects of abuse: Commercial sexual exploitation of children. *Current Problems in Pediatric/ Adolescent Health Care*, 45, 80–85.
- Jordan, J., Patel, B., & Rapp, L. (2013). Domestic minor sex trafficking: a social work perspective on misidentification, victims, buyers, traffickers, treatment and reform of current practice. *Journal of Human Behavior in the Social Environment*, 23, 356–369.
- Karam, R. & Robert, M. (2013). Understanding runaway behaviour in group homes: What are runaways trying to tell us? *Journal of Community Positive Practices*, XIII(2), 69–79.
- Kim, H., Chenot, D., & Lee, S. (2015). Running away from out-of-home care: A multilevel analysis. *Children & Society*, 29(2), 109–121.
- Leichtentritt, R.D., & Arad, B.D. (2005). Young male street workers: Life histories and current experiences. *The British Journal of Social Work*, 35(4), 483–509.
- Mental Health Coordinating Council (MHCC) 2013. *Trauma-informed care and practice: Towards a cultural shift in policy reform across mental health and human services in Australia – a national strategic direction*. Position Paper and Recommendations of the National Trauma-Informed Care and Practice Advisory Working Group, Authors: Bateman, J. & Henderson, C. (MHCC) & Kezelman, C. (Adults Surviving Child Abuse, ASCA).
- National Scientific Council on the Developing Child (2005). Excessive Stress Disrupts the Architecture of the Developing Brain, Working Paper #3.
- Parliament of Victoria, Family and Community Development Committee (2013). *Betrayal of Trust – Inquiry into the handling of child abuse by religious and other non-government organisations*. Melbourne: Victoria Parliament.
- Perry, B.D., & Szalavitz, M. (2017). *The boy who was raised as a dog and other stories from a child psychiatrist’s notebook: What traumatized children can teach us about loss, love, and healing*. Updated and revised edition, New York: Perseus Books Group.
- Rafferty, Y. (2016). Challenges to the rapid identification of children who have been trafficked for commercial sexual exploitation. *Child Abuse & Neglect*, 52, 158–168.
- Robinson, E., & Miller, R. (2012). *Adolescents and their families: Best interests case practice model – specialist resource guide*. Melbourne: Department of Human Services.
- Robinson, E., Miller, R., Price-Robertson, R., & Carrington, A. (2012). *Children and their families: Best interests case practice model – specialist resource guide*. Melbourne: Department of Human Services.

Scott, T. & Honner, J. (2004). *'The Most Enduring of Relationships': Engaging families who have children in substitute care*. South Melbourne: Mackillop Family Services, Practice and Policy Unit. Presentation at 'Knowledge into Action' 2004 Session #20 Summary.

State Government of Victoria. (2012). *Protecting children: Protocol between Department of Human Services – child protection and Victoria Police*. Melbourne: State Government of Victoria.

St Kilda Gatehouse (2014).

Summit, R.C. (1983). The child sexual abuse accommodation syndrome. *Child Abuse & Neglect*, 7, 177–193.

Thoburn, J. (1994). *Child placement: principles and practice*, 2nd edn. Aldershot: Arena.

Tucker, R. G. (2008). *Staying safe: Focused intervention for children and young people who live in families who have been affected by sexual abuse: Facilitators manual* (unpublished).

Wilson, H.W. & Widom, C.S. (2010). The role of youth problem behaviors in the path from child abuse and neglect to prostitution: a prospective examination. *Journal of Research on Adolescence*, 20(1), 210–236.

Winnicott, D.W. (1957). *The child and the outside world: Studies in developing relationships*, London: Tavistock.

Zubrick, R. R., Dudgeon, P., Gee, G., Glaskin, B., Kelly, K., Paradies, Y., Scrine, C., & Walker, R. (2010). Social determinants of Aboriginal and Torres Strait Islander social and emotional wellbeing, in N. Purdie, P. Dudgeon, & R. Walker (eds). *Walking together: Aboriginal and Torres Strait Islander mental health and wellbeing principles and practice*. (pp. 75–90). Canberra: Australian Council for Educational Research, the Kulunga Research Network and Telethon Institute for Child Health Research.

