



Safer Caring: A New Approach supplementary resources (2017)

Chapter 1: Where is the harm?

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Introduction

The information on the sources of harm and reasons why children in foster care can be particularly vulnerable outlined in Chapter 1 of Safer Caring: A New Approach are still relevant today. However, in the past five years, awareness of risks faced by some young people has changed, and new guidance has been issued in relation to specific areas, some of which carries with it a duty to report any concern.

Staff and foster carers will need to develop an awareness of such issues in order to inform their approach to safer caring, both generally and in relation to children identified as being at risk in specific ways. The following gives a brief introduction to these areas. Further resources and sources of help are listed in the [updated appendix](#).

Modern slavery

Modern slavery, in particular human trafficking, is an international problem and victims may have entered the UK legally, on forged documentation or clandestinely, or they may be British citizens living in the UK. Modern slavery takes a number of forms, including sexual exploitation, forced labour and domestic servitude, and victims come from all walks of life and are of all ages. Victims are often unwilling to come forward to law enforcement or public protection agencies because they don't regard themselves as victims, or they fear further reprisals from their abusers.

The [Modern Slavery Act 2015](#) and subsequent guidance outlined the response expected from those running our public services, and introduced the 'duty to notify' (using the [National Referral Mechanism](#)) of any child victim of modern slavery. As foster carers, you are expected to work within these systems for the protection of these vulnerable children and adults.

Many forms of slavery have more than one element. While foster carers need first and foremost to be alert to any such issues involving children in their care, they may also become aware of issues affecting the child's family or wider community which they should share with the child's social worker and their supervising social worker.

Definition of slavery

Someone is in slavery if they are forced to work (through coercion, or mental or physical threat), owned or controlled by an 'employer' (through mental or physical abuse or the threat of abuse), dehumanised (treated as a commodity or bought and sold as 'property'), or physically constrained or have restrictions placed on their freedom of movement.

Forms of exploitation include the following:

- **Forced labour:** any work or services which people are forced to do against their will under the threat of some form of punishment.
- **Debt bondage or bonded labour:** the world's most widespread form of slavery, when people borrow money they cannot repay and are required to work to pay off the debt, then losing control over the conditions of both their employment and the debt.
- **Human trafficking:** involves transporting, recruiting or harbouring people, for the purpose of exploitation, using violence, threats or coercion.
- **Descent-based slavery:** where people are born into slavery because their ancestors were captured and enslaved; they remain in slavery by descent.
- **Child slavery:** child slavery is often confused with child labour, but is much worse. Whilst child labour is harmful for children and hinders their education and development, child slavery occurs when a child's labour is exploited for someone else's gain. It can include child trafficking, child soldiers, child marriage and child domestic slavery.
- **Forced and early marriage:** when someone is married against their will and cannot leave the marriage. Most child marriages can be considered slavery.

These definitions are from Anti-Slavery International, see antislavery.org.

Children from other countries

Children come to the UK from other countries for a number of reasons, but most commonly they will have left their country due to fears for their safety, or be brought to the UK as victims of modern slavery, including child trafficking. While caring for unaccompanied children seeking asylum is not new to fostering, the numbers of children travelling unaccompanied to Britain in recent years has increased, and areas of the country that are less experienced in caring for these children are being encouraged to do so as part of the government's National Transfer Scheme. Better awareness, new legislation and guidance around a number of risks potentially facing children mean that foster carers must have an awareness of a range of issues, many of which do not exist in isolation.

Child sexual exploitation (CSE)

Child sexual exploitation is a type of sexual abuse. Children in exploitative situations and relationships receive something (for example, gifts, alcohol, drugs, money, affection and/or status) as a result of performing sexual activities or others performing sexual activities on them. Child sexual exploitation doesn't always involve physical contact and can happen online.

One of the challenges for those caring for children who are being exploited or who are at risk of child sexual exploitation is that the young person often trusts their abuser and does not recognise the situation as abusive. When caring for 16 and 17-year-olds, the issue of consent is complex. For example, it can be incorrectly assumed that informed consent has been given when, in reality, the young person has been tricked into believing they are in a loving, consensual relationship. They may depend on their abuser or, where they have been threatened, be too scared to tell anyone what is happening.

Any carer who suspects that a young person they are caring for is or may be at risk of child sexual exploitation should share their concerns with their supervising social worker and the child's social worker.

Whilst it is always preferable to share information with consent, the complexity of child sexual exploitation requires people to work together as identified in the Department for Education's non-statutory guidance for England [Child Sexual Exploitation: Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation](#) (2017). In Scotland, there is guidance about child sexual exploitation in the [National Guidance for Child Protection in Scotland](#) (sections 572-584). In Northern Ireland, see [Child Sexual Exploitation: Definition and Guidance](#) and [Child Sexual Exploitation: A Guide for those Working with Children and Young People](#). The protocol for Wales is contained within [Safeguarding and Promoting the Welfare of Children who are at Risk of Abuse through Sexual Exploitation](#).

New definition of child sexual exploitation (2017)

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

From [Child Sexual Exploitation: Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation](#) (2017).

Child trafficking

Child trafficking is child abuse where children are recruited, moved or transported and then exploited, forced to work or sold. Children are trafficked for:

- child sexual exploitation
- benefit fraud
- forced marriage
- domestic servitude (for example, cleaning, cooking and/or childcare)
- forced labour
- criminal activity (for example, theft, begging, and/or transporting drugs).

Many children are trafficked into the UK from abroad, but children can also be trafficked from one part of the UK to another. It is important that foster carers are familiar with and can recognise the signs and symptoms of child trafficking so that appropriate steps can be taken to support the child and to address the issues impacting on them and others who may also be involved.

Further information can be obtained from the [NSPCC Child Trafficking Advice Centre](#) which also runs an advice and information line for professionals. Further details are provided in the appendix.

Female genital mutilation (FGM)

Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. It is sometimes referred to as 'circumcision', 'cutting' or 'sunnah' rather than FGM.

FGM is not advocated by any religion, and is mostly carried out by traditional circumcisers, who often play other central roles in communities, such as attending childbirths. However, in some settings, health care providers have performed FGM due to the belief that the procedure is safer when medicalised.

FGM has no health benefits, and it harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and interferes with the natural functions of girls' and women's bodies. Generally speaking, risks increase with increasing severity of the procedure.

Legislation introduced in 2003 and amended in 2015 (in England, Northern Ireland and Wales) introduced a duty on teachers, health and social care staff to inform the police if they observe physical signs of, or are informed by a girl under 18 that they have undergone, an act of FGM. FGM Protection Orders exist as a means of protecting actual or potential victims. In Scotland, legislation was introduced in 2005 to prohibit FGM.

Any carer who suspects that a young person they are caring for is or may be at risk of FGM should share their concerns with their supervising social worker and the child's social worker.

Further information about FGM can be obtained from the [National FGM Centre](#) and from the [NSPCC website](#).

Forced marriage

Forced marriage is a marriage in which one or more of the parties is married without his or her consent or against his or her will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of their parents or a third party (such as a matchmaker) in identifying a spouse.

In England, Wales and Scotland forced marriage is a criminal offence under the [Anti-social Behaviour, Crime and Policing Act 2014](#). In Northern Ireland, forced marriage is a criminal offence under the [Forced Marriage \(Civil Protection\) Act 2007](#).

Successful application for a Forced Marriage Protection Order forbids families, in relation to the person who is the subject of the forced marriage, from taking them abroad for marriage, removing their passport or intimidating or using violence against them. It can also require them to reveal where they are.

Couples aged 16 to 18 years in England, Wales and Northern Ireland are free to marry with the consent of those with parental responsibility. In Scotland, 16 and 17-year-olds can get married without parental consent. Marriage involving boys and girls under 18 years old remains a widely culturally accepted practice in many communities. There has been growing awareness about the negative consequences of child marriage, especially for girls, including the impact of marriage on children's education and risks to their physical and psychological health. Child marriage can, on occasions, obscure what are actually cases of slavery or slavery-like practices.

Foster carers, through the relationship they form with the children they care for, are potentially able to support children at risk of forced marriage to share their experiences and help them to seek appropriate support.

When is child marriage considered slavery?

Child marriage can be referred to as slavery if one or more of the following elements are present:

- If the child has not genuinely given their free and informed consent to enter the marriage.
- If the child is subjected to control and a sense of 'ownership' in the marriage itself, particularly through abuse and threats and is exploited by being forced to undertake domestic chores within the marital home or labour outside it, and/or engage in non-consensual sexual relations.
- If the child cannot realistically leave or end the marriage, leading potentially to a lifetime of slavery.

Gangs

One of a foster carer's roles is to support a sense of belonging, not only within the fostering family but also through encouraging children to develop friendships with others at school and in the wider community. 'Hanging out' with friends can be a good way to get to know others with whom they share hobbies and interests.

Being in a gang is not against the law, but some gangs are involved with illegal activities. Children involved with gangs might be victims of violence or bullying. They may get pressured into bullying or intimidating others, or doing illegal things like stealing or carrying drugs or weapons. This can lead to incidents of abuse and exploitation, and will almost certainly put them into dangerous or risky situations.

There are lots of reasons why children feel the pressure to join gangs: they might be bored and looking for excitement, or feel attracted to the status and power it gives them; it may be a response to peer pressure, money or family problems; it may provide feelings of protection and belonging.

If being part of a gang makes them feel part of a 'family', they might not want to leave. For those who do want to leave, they can be frightened about what will happen to them, their friends or their family, especially if threats and violence are part of the gang culture.

Foster carers can help by making young people aware that they do, in fact, have choices, and by supporting them to seek help to leave a situation with which they are no longer comfortable.

Support and information is also available from organisations such as [Childline](#) and [Gangline](#). It is important to consider the impact that being part of and/or choosing to leave a gang has not only for the child who is fostered, but also the wider foster care family and household. This will need to be considered within any safer caring plan with agreed plans to manage any risks identified.

Lesbian, gay, bisexual and transgender (LGBT) children and young people

As children mature, they develop greater awareness of themselves, their bodies and their feelings and begin to explore this in relation to how other people experience them and the expectations of those around them. Foster carers are critical in helping children and young people to find a safe space in which to explore these issues.

The acronym LGBT is used to describe people who are lesbian, gay, bisexual or transgender.

- Lesbian refers to women who are attracted to women.
- Gay refers to anyone who is attracted to others of the same sex.
- Bisexual people are attracted to men or women regardless of their anatomy.
- Transgender refers to people whose identity does not match the sex assigned to them at birth.

Additionally, the term 'questioning' is how some young people identify themselves when they start to recognise that they may be part of the LGBT community.

Lesbian, gay, and bisexual describe a person's sexual orientation – their emotional, romantic or sexual feelings toward other people. Transgender refers to a person's gender identity – their internal understanding of their own gender. Sexual orientation and gender identity are separate aspects of a person's identity. A transgender person may be bisexual, gay or straight (or experience their sexual orientation in some other way).

Sexual orientation or gender identity is not a choice. Young people in foster care may need time to think through what being LGBT means for them. They may have internalised anti-LGBT stereotypes which can lead to feelings of self-doubt and low self-esteem.

A foster carer who communicates clearly that they accept people for who they are can enable young people to confide these thoughts and feelings, and seek support whilst deciding if, when and how they should identify themselves as lesbian, gay, bisexual or transgender to others. Freedom to express themselves in ways that do not fit with society's expectations for someone of their sex can be easier if foster carers recognise that such expectations are cultural, not biological, and change over time. Not all young people who question their sexual orientation or gender identity will continue to express themselves in this way into adulthood and may never identify as gay, lesbian, bisexual or transgender.

Respecting young people's self-identification is very important and foster families should, through their safer caring plans, ensure the foster home is a welcoming place to all. The environment into which a young person comes can give the message that you are willing to listen and talk about anything. To encourage young people to feel comfortable in relation to issues to do with sexual orientation or gender identity, you can:

- have no tolerance of jokes or slurs based on gender, gender identity or sexual orientation in your house and express your disapproval if you encounter this elsewhere.
- indicate your home is an LGBT-friendly environment, for example by displaying a rainbow flag.
- celebrate diversity in all forms and provide access to a range of materials such as books and movies, including those that positively represent same-sex relationships.
- acknowledge LGBT celebrities and role models who stand up for the LGBT community and against prejudice.
- use gender-neutral language when asking about relationships. For example, instead of asking "Do you have a boyfriend?", ask "Is there anyone special in your life?"
- support the young person's self-expression through choices of clothing, jewellery, hairstyle, friends and room decoration, and participation in activities that interest them, regardless of whether these activities are stereotypically male or female.
- be aware of and challenge any conscious or unconscious attitudes or assumptions you may have and educate yourself about LGBT history, issues and resources.

There are ways to access to further information and support listed in [the appendix](#) which include organisations such as LGBT Foundation, Stonewall, The Albert Kennedy Trust, and New Family Social. Being open to new ways of viewing things is one of the challenges and rewards of fostering but, being open-minded and investing in relationships with the children and young people you care for is one of the fundamentals of safer caring.

Mental health and well-being

Looked after children share many of the same health risks and problems of their peers, but often this can be to a greater degree due in part to the impact of poverty, poor parenting, chaotic lifestyles and abuse or neglect.

There is much that foster carers can do to understand and support children and young people to understand their own mental health needs and to improve their emotional well-being: improved self-esteem, consistency of relationships and a sense of achievement are important ingredients in positive mental and emotional well-being. All of these can be promoted through developing a positive approach to safer caring (see Chapter 7: Creating a secure base). However, carers and children may also need support from specialist mental health services, such as child and adolescent mental health services (CAMHS).

The Department for Education and the Department of Health jointly published statutory guidance for England called [Promoting the Health and Well-Being of Looked-After Children](#) (March 2015). This states that all looked after children and young people who enter care should have an initial health assessment by a registered medical practitioner leading to development of a health plan, and a Strengths and Difficulties Questionnaire (a brief emotional and behavioural screening tool) should be completed annually for every child in care. The House of Commons Education Committee report, [Mental Health and Well-Being of Looked-After Children](#) (April 2016) included a number of recommendations, to which the [government responded](#). There is ongoing work which aims to improve access to mental health services for looked after children.

The impact on foster carers of caring for traumatised children has also become more widely acknowledged and understood. High levels of stress can be experienced and foster carers need support to manage the demands of their role. This further highlights the need to recognise that safer caring is a shared responsibility between all those involved in the care of the child.

The University of Bristol published a report called [Compassion Fatigue and Foster Carers](#) in November 2016 which called on fostering services to review their support and understanding of the impact on carers and many services have established networks of support and/or training. These vary widely, but include peer support, evidence-based interventions (such as [Multi-dimensional Treatment Foster Care](#), recently renamed as Treatment Foster Care Oregon for Adolescents (TFCO-UK), [Keeping Foster and Kinship Carers Supported](#) (KEEP), and [Fostering Changes](#), which is currently being offered by The Fostering Network's [Confidence in Care](#) programme in Wales), or other training programmes aimed at supporting carers' emotional well-being.

The Fostering Network's programmes [Head, Heart, Hands](#) and the [Mockingbird Family Model](#) also offer new approaches to supporting carers to develop positive relationships both with the children they care for and others who can support them.

Missing from care

Children who go missing are particularly vulnerable and present challenges to foster carers who are trying to keep them safe. There are links between those children who go missing, and those who are at risk of child sexual exploitation, child trafficking and other forms of modern day slavery discussed in this chapter.

In 2014, the Westminster government updated its [statutory guidance for England regarding children who run away or go missing from home or care](#). This introduced the Runaway and Missing from Home and Care (RMFHC) protocol which sets out the key elements of the agreed response between local authorities, police and partner agencies. Foster carers are expected to work with others under this protocol to take steps to safeguard children who are at risk of going missing and to respond appropriately when they do not know a child's whereabouts and are concerned for their safety.

In Scotland, the [National Missing Persons Framework for Scotland](#) sets out roles and responsibilities of agencies for children and adults who are at risk of going missing and who go missing. Police Scotland's well-established Young Runaway Scheme includes a return home welfare interview.

The [All Wales Protocol on Missing Children](#), published in 2011, is currently being revised. Return interviews are not a requirement in Wales, unlike in other countries.

In Northern Ireland, agencies must follow the [Missing Children Protocol](#).

Foster carers must be fully informed of their fostering service's missing from care policy. They must maintain a relationship with children and young people and try to understand the push and pull factors that can lead some young people to go absent or missing. Return home interviews – in England, Scotland and Northern Ireland – are a key part of ensuring that these are better understood and help to inform the risk assessment and management plan which should be kept under regular review.

Occasionally, there may be issues within the foster placement that are contributing to the young person going missing and foster carers need to be open to hearing their concerns. Should an allegation be made, a process of investigation will follow which can be particularly stressful for foster carers. However, the provision of clear information, independent support and good communication can do much to help foster carers through this experience. There is further information about allegations available on The Fostering Network's [website](#) and in our [Signpost publication on Allegations](#).

Radicalisation and the Prevent agenda

Radicalisation is the process by which people come to support terrorism and violent extremism and, in some cases, take part in terrorist groups and activities. The threat from terrorism can involve the exploitation of children, young people and vulnerable adults to involve them do things in support of terrorism or actively engage in terrorism. This is a form of exploitation and should be viewed as a safeguarding concern. As such, it should be approached in the same way as safeguarding children from other risks.

Children and young people can be exposed to extremist messages in many ways: through the influence of family or friends, content on the internet and social media and/or direct contact with extremist organisations. The process of radicalisation is different for every individual and can take place over a short or long period of time. During that time, it is possible to intervene to prevent vulnerable young people being drawn into terrorist-related activity.

The Prevent Strategy, published by the government in 2011, is part of an overall counter terrorism strategy called CONTEST. The aim of the Prevent Strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. The Prevent duty is the duty in the Counter-Terrorism and Security Act 2015 on certain authorities (including schools and child care providers) to take action when they observe behaviour of concern. Fostering services should be clear about their procedures for protecting children at risk of radicalisation as part of their overall safeguarding policies

[Channel](#) is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. The programme uses a multi-agency approach to protect vulnerable people by:

- identifying individuals at risk.
- assessing the nature and extent of that risk.
- developing the most appropriate support plan for the individuals concerned.

- An individual's engagement with the programme is entirely voluntary at all stages.

Young people get radicalised for different reasons which might include seeking answers to questions about identity, faith and belonging, a need for 'adventure' and excitement, low self-esteem and/or being influenced by a sense of injustice or grievance about world events. As a result, they are drawn to a group or individual which offers them a sense of identity and belonging.

Most individuals, even those who hold extreme radical views, do not become involved in violent extremism and holding extreme views is not illegal. However, the risk of radicalisation for young people in foster care requires foster carers to be able to spot the signs: these are many and varied and the carer's knowledge and relationship with the child or young person will be what enables them to spot subtle changes in presentation, views or behaviour.

Indicators that a young person is being radicalised may include:

- Out of character changes in dress, behaviour and peer relationships.
- Use of inappropriate language or expression of extremist views.
- Secretive behaviour.
- Showing sympathy for extremist causes or having extremist literature and/or visiting extremist websites.
- Losing interest in friends and activities not associated with the extremist ideology.
- Advocating violent actions and means.
- Associating with known extremists and/or seeking to recruit others to an extremist ideology.

Fostered children may have different ethnic and cultural backgrounds from their carers, with their identity based around a range of personal experiences, values and norms developed with their birth families and local communities. Valuing diversity is at the heart of positive and confident care giving, so having the confidence to know when to raise concerns over a child or young person's safety in relation to radicalisation is something that carers may need support with.

Any concerns about a child or young person in foster care should be discussed as with any safeguarding concerns and the authorities should take the necessary actions. As with any other safeguarding concern, it is important to keep records, discuss concerns with the supervising social worker and the child's social worker, and follow procedures if a child is absent or missing, or poses an immediate risk to themselves or anyone else.

The [Educate Against Hate](#) website gives practical advice on protecting children from extremism and radicalisation.

Unaccompanied asylum seeking children (UASC)

Unaccompanied children seeking asylum in the UK, often referred to as unaccompanied asylum seeking children or UASC, are children who are outside their country of origin to seek asylum in the UK, are separated from parents and relatives, and are not in the care of someone who is responsible for doing so.

The responsibility for providing care to unaccompanied children rests with the local authority in which they first become known. In response to increasing numbers in the care of certain local authorities, the government introduced an [interim national transfer scheme](#) in July 2016 to enable the safe transfer of children from one UK local authority to another.

The ADCS website hosts some [frequently asked questions](#) regarding the scheme in England. The expected demand for foster placements has not materialised for various reasons, including the fact

that in England many are young people of 16 and 17 years old who move to supported accommodation rather than a foster placement.

Revised statutory guidance for England called the [Care of Unaccompanied Migrant Children and Child Victims of Modern Day Slavery](#) was published in March 2017.

When offering placements to unaccompanied asylum seeking children, foster carers, alongside the task of caring for these children on a day-to-day basis, will also need to support them through the process of applying for permission to stay in the UK or possibly to prepare for a return to their country of origin. Many unaccompanied asylum seeking children will also have particular emotional, practical, language and cultural needs that their foster carers will have to consider. These should be fully considered in developing the safer caring plan.

Children's experiences may be hard for carers to comprehend. Establishing a trusting relationship can be particularly challenging where there are language and cultural barriers to overcome, where access to appropriate health and education support may be more complex to arrange, and where uncertainty around legal status can create fears and anxiety which carers cannot alleviate. Children need care and support in such circumstances, as well as understanding that they may have been reliant on their own resources for many months.

Foster carers looking after unaccompanied children will require support to offer them the stability and the help they need; fostering services must ensure that their carers are trained, equipped and supported to deal with the particular challenges of meeting the needs of unaccompanied children.

Further information for carers can be found on our [website](#) and in [Supporting Unaccompanied Asylum Seeking Children](#) (one of The Fostering Network's Signpost leaflet series) from our website.