**

**Child on Child Abuse Multi-agency Guidance**

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*A guide for all staff and frontline practitioners and volunteers of agencies and organisations within Herefordshire that support, care and work with children, young people and their families, to understand how to respond to child on child abuse.*

Contents

[1. Safeguarding 3](#_Toc93673544)

[2. Aims 3](#_Toc93673545)

[3. Status of the Guidance 3](#_Toc93673546)

[4. Who is this practice guidance for? 4](#_Toc93673547)

[5. Key Principles to Guidance in Herefordshire – Children who are harmed and children who cause harm (Victim and Perpetrator) 4](#_Toc93673548)

[6. Introduction - Understanding Child on Child abuse 6](#_Toc93673549)

[7. What should you do if you suspect either that a child may be at risk of or experiencing abuse by another child, or that a child may be at risk of abusing or may be abusing another child or children? 6](#_Toc93673550)

[8. Definitions 14](#_Toc93673551)

[9. Spotting the signs and symptoms 17](#_Toc93673552)

[10. Who are the vulnerable groups? 22](#_Toc93673554)

[11. Managing Child on Child abuse within an Education Setting 23](#_Toc93673555)

[Further Reading 28](#_Toc93673556)

# Safeguarding

1.1 The Herefordshire Safeguarding Children Partnership recognises that children are vulnerable to and capable of abusing other children. We take such abuse as seriously as we would abuse perpetrated by an adult.

1.2 We recognise that a child who is abused or witnesses abuse and / or violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.

* 1. We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn. We will ensure that Herefordshire safeguarding professionals are trained to respond to children and young people wherever they meet them on this continuum of the impact of such abuse, to ensure they get the right support, at the right quality at the right time.
  2. Our Partnership is committed to supporting all children and young people in all circumstances from this form of abuse and will ensure that strategies are in place to enable the prevention, early identification and appropriate management of child on child abuse within all settings for both the child who is harmed (victim) and the child who causes harm (the perpetrator) in order to break the cycle of abusive relationships.

# Aims

* 1. This is multiagency guidance to enable a consistent and informed approach to child on child abuse in Herefordshire.
  2. This document’s aim is to ensure that all frontline practitioners are able to recognise and respond to this form of abuse/ill-treatment and take a contextual multiagency approach to identify, prevent and respond to child-on-child abuse.
  3. The guidance and procedure will: -
* Set out our strategies for preventing, identifying and managing child on child abuse
* Promote a contextual approach to safeguarding all children and young people involved.
* Acknowledge that children who have allegedly abused other children or displayed harmful sexual behaviour are themselves vulnerable and may have been abused by other children, parents or adults in the community or sometimes their own home.

# Status of the Guidance

* 1. This multiagency practice guidance on child on child abuse is produced in line with statutory guidance from the DfE in Keeping Children Safe in Education under Section 175 of the Education Act 2002, the Children Act 1989 Section 11 and Working Together to Safeguard Children 2023.
  2. The HCSP is issuing the multiagency guidance to ensure that there is a collective responsibility to tackle this issue amongst the statutory safeguarding partners and all local relevant partners which form and are vital to the success of the multiagency safeguarding arrangements.
  3. This procedures can be accessed at the [West Midlands Procedures website](https://westmidlands.procedures.org.uk/)

# Who is this practice guidance for?

* 1. The practice guidance applies to all staff / frontline practitioners of agencies and organisations within Herefordshire (including the voluntary and community sector) that work with children, young people and their families. It should be read and followed by all volunteers/ frontline practitioners when carrying out their duties to safeguard and promote the welfare of children. For the purposes of this guidance children includes everyone under the age of 18.
  2. The practice guidance should be read alongside:
     + [Herefordshire Multiagency Child Protection Procedures](https://westmidlands.procedures.org.uk/local-content/zgjN/multi-agency-referral-reporting-concerns-marf/?b=Herefordshire)
     + statutory guidance [Working Together to Safeguard Children](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/942454/Working_together_to_safeguard_children_inter_agency_guidance.pdf)
     + departmental advice [What to do if you are Worried a Child is Being Abused](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf) - Advice for Practitioners
     + departmental advice [Sexual Violence and Sexual Harassment Between Children](https://www.herefordshire.gov.uk/schools-education/bullying-1)

[in Schools and Colleges](https://www.herefordshire.gov.uk/schools-education/bullying-1)

# Key Principles to Guidance in Herefordshire – Children who are harmed and children who cause harm (Victim and Perpetrator)

* 1. This practice guidance relates to all children under the age of 18, the language used, what we write and say about children is not neutral. Language frames and sets the tone for our interventions and relationships and by describing children in terms that that typically are used to describe behaviours by adults has meaning, and can negatively impact on the perceptions of the individual children involved by those required to keep them safe and promote their wellbeing.

* 1. It is for this reason that from this point of the document the term ‘Victim’ and ‘Perpetrator’ to describe children involved in child on child abuse will be replaced with the term *‘children who are harmed’* and *‘children who cause harm’*.
  2. This is a reminder of the duty and individual responsibility for all frontline practitioners, agencies and organisations that we must work together, to one goal, which is to keep all children safe and free from harm.
  3. This position is further underpinned by [**The United Nations Convention on the Rights of the Child**](https://www.unicef.org/media/60981/file/convention-rights-child-text-child-friendly-version.pdf)**.** This an important agreement by countries who have promised to protect children’s rights.
  4. The Convention on the Rights of the Child explains who children are, all their rights, and the responsibilities of governments. All the rights are connected, they are all equally important and they cannot be taken away from children, regardless of the circumstances in which they apply.
  5. The key message and principle to all frontline practitioners is that, *no child should be treated unfairly for any reason.*
  6. **The Human Rights Act** brings 16 human rights from the European Convention of Human Rights into our law, rights such as freedom from inhuman treatment, the right to life, to a fair trial and to respect for family life.
  7. The Human Rights Act should be given due consideration when assessing and planning for need and risk for children who are harmed and children who cause harm.
  8. Children who are harmed and children who cause harm should both be treated as children in need. The behaviour of children who cause harm should not be seen in isolation to their wider familial and socio circumstances, and frontline practitioners should bear in mind that a child who harms and may also be a child who is subject to abusive and harmful behaviour through adverse childhood experiences or contextual safeguarding.
  9. Children who cause harm to others should be held responsible for their abusive behaviour, while being identified and responded to in a way that meets their needs as well as protecting others.
  10. Three key principles should guide work with children and young people who abuse others:
* There should be a coordinated approach on the part of Youth Justice, Children's Social Care, education (including educational psychology) and health (including Child and Adolescent Mental Health (CAMHS) agencies;
* The needs of children and young people who abuse others should be considered separately from the needs of the children who are harmed. This should include both the risk posed to the child and the risk posed by the child;
* An assessment should be carried out in each case of abuse, appreciating that these children may have considerable unmet developmental needs, as well as specific needs arising from their behaviour.

# Introduction - Understanding Child on Child abuse

* 1. Young people's relationships can be hidden, less visible, and change rapidly, abuse can escalate quickly and the behaviours can be serious. Some children are vulnerable and are coping with a differing level of need or risk within their own families and therefore their attitudes to relationships/friendships and tolerance to inappropriate and abusive behaviours perpetrated by adults and consequently other children may be compromised.
  2. Children, particularly those living away from home, are also vulnerable to physical, sexual and emotional bullying and abuse by other children. Such abuse should always be taken as seriously as abuse perpetrated by an adult. It should be subject to the same safeguarding children procedures as apply in respect of any child who is suffering, or at risk of suffering, significant harm from an adverse source.
  3. Sexual violence and sexual harassment can occur between two children of any age and gender identity, or a group of children sexually assaulting or sexually harassing a single child or group of children. The impact of aggressive, violent misogynistic behaviours on children can be very distressing and have an impact on academic achievement, physical and emotional/mental health and wellbeing. These behaviours may occur online and offline (physically in particular settings and in the communities in which children live).
  4. Research tells us a significant minority of young people in the UK will be abused by another young person before they turn 18 (Barnardo’s, 2011; Barter et al., 2009, 2015; Corr, 2013; Firmin, 2015). A third of child sexual exploitation cases nationally are child-on-child and surveys of school-aged children have found that up to a third of young women report experiencing sexual violence from a partner before they turn 18, a quarter report physical abuse, and close to half report emotional and online abuse (Barter et al., 2015; Corr, 2013; Pearce and Pitts, 2011).
  5. The suggestion is that child-on-child abuse is one of the most common forms of abuse affecting children in the UK currently.

# What should you do if you suspect either that a child may be at risk of or experiencing abuse by another child, or that a child may be at risk of abusing or may be abusing another child or children?

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| Frontline practitioners should be familiar with and refer to [Herefordshire Safeguarding Children Partnership Right Help Right Time Levels of Need](https://westmidlands.procedures.org.uk/local-content/2gjN/thresholds-guidance/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent)  Think about whether you have the right level of intervention and services at the right time for the child. |

* 1. Where staff or a practitioner or volunteer becomes aware or thinks that a child may be at risk of or experiencing abuse by another child, or that a child may be at risk of abusing or may be abusing another child/ or children, they should on all occasions and without delay discuss the concern/allegation, with their organisation/agency senior officer (ie designated safeguarding lead / line manager / supervisor).
  2. There are four levels at which to manage allegations of child on child abuse in accordance with [Herefordshire’s Right Help Right Time levels of need guidance](https://westmidlands.procedures.org.uk/local-content/2gjN/thresholds-guidance/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent). The document is intended to enable practitioners:
     + - to make decisions about how best to respond to the needs of children and young people and families;
       - to give families access to the right help at the right time;
       - to provide children and families with access to the most appropriate services for their needs.
  3. The four levels of need are:
  4. **Level 1. Universal** - Children and young people making good overall progress in all areas of their development and receiving appropriate universal services such as health and education.
  5. At this level any allegation of child on child abuse is considered to be of low level of concern. The behaviour may be regarded as normal and developmentally acceptable and has no or low level of impact to the other child involved. The matter can be managed internally by a single agency.
  6. **Level 2. Additional** - Children, young people and their families are experiencing emerging problems, or have additional needs that require some targeted support. They are likely to require early help for a time limited period, to help them move back to Universal (level 1) and reduce the likelihood of needing level 3 more intensive support.
  7. At this level the behaviour of concern in the child who harms may be considered as inappropriate, the context of the behaviour may be inappropriate, an isolated incident and out of the ordinary and there may be indicators of additional needs or vulnerabilities. The impact on the child who is harmed is causing low level concern.
  8. It is assessed that under these circumstances the children involved do not require statutory interventions but may benefit from early help. Early help means providing support as soon as a problem emerges, at any point in a child’s life. Providing early help is more effective in promoting the welfare of children than reacting later. Early help can be particularly useful to address non-violent and inappropriate sexual behaviour and may prevent escalation to more serious and harmful sexual violent behaviours.
  9. **Level 3. Intensive** - Children, young people and families with identified vulnerabilities who are experiencing multiple and complex needs are likely to need intensive multiagency coordinated approach to address need and risk and are more likely to need longer term help.
  10. **Level 4. Specialist** – Children, young people and their families who are experiencing very serious or complex needs that are having a major impact on their expected outcomes or there is serious concern for their safety and welfare.
  11. At this level it is assessed that children who are harmed or who cause harm are considered as suffering or likely to suffer significant harm or are in immediate danger.

Referral

* 1. In these circumstances all frontline practitioners must make a **referral** to the MASH following locally agreed protocols. *This link will direct you to the* [*Herefordshire multi-agency referral form (MARF)*](https://westmidlands.procedures.org.uk/local-content/zgjN/multi-agency-referral-reporting-concerns-marf)
  2. *If you believe that a child/young person is at risk of significant harm always make an immediate referral to MASH or if there is an immediate risk of death or serious injury call West Mercia Police on 999. The Emergency Duty Team for MASH telephone number is (01905) 768020 (\*out of hours number for when MASH is unavailable).*
  3. Each child should be referred to the MASH in the local authority area where the child resides.
  4. The Police should always consult with MASH Services regarding cases that come to their attention in order to ensure that there is an assessment of the needs of child who is harmed and in all cases there is an child in need assessment of the child who harms.

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| **KEY PRACTICE STANDARDS**  **At all Levels of need , on all occasions and without delay:**   * It is essential that all concerns/allegations of child-on-child abuse are taken seriously, handled sensitively, appropriately and promptly * the parents or carer of the children involved should be informed of the concerns or allegations, be encouraged to engage and contribute to the assessment and be part of the planning to effect change, support, protect and promote the welfare of the children involved. * Children who cause harm to others should be held responsible for their abusive behaviour, while being identified and responded to in a way that meets their needs as well as protecting others. * support should be offered to the child in need who is harmed and the child who harms * it is important that information is shared between agencies, to ensure that a need or risk management plan is in place. Information should be shared in accordance with Herefordshire’s [Information Sharing Procedures;](https://westmidlands.procedures.org.uk/local-content/zgjN/multi-agency-referral-reporting-concerns-marf/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent) |

* 1. Where the threshold of significant harm is met for either child involved amulti-agency strategy meeting/discussion should take place **within one working day** of the referral to agree the action to be taken, including whether a criminal investigation should commence.

The purpose and value of a strategy discussion

* 1. The purpose of strategy discussions is to share information in order to decide whether to start an enquiry into concerns about significant harm (Section 47 Children’s Act 1989), to inform any criminal investigation and to agree any safety plans required to protect the child in the immediate. If a Section 47 is progressed the strategy discussion will plan the enquiry and monitor its progress. Strategy discussions should be thought of as a process rather than a one-off event. They are the means for keeping relevant professionals involved in a child protection enquiry.
  2. Where there is suspicion that the alleged child who causes harms is also a victim of abuse the Strategy Meeting must decide the order in which the interviews should take place.
  3. Care must be taken to ensure that the appropriate professionals attend the right meeting to ensure appropriate confidentiality. For example, school representatives should only attend for the pupil at their school. Representation from the Police and social worker who are investigating should attend both sets of Strategy Discussions. Where the child who harms is over 10 years a Youth Justice Service representative should be in attendance.
  4. The Strategy Discussion must plan in detail the respective roles of those involved in the enquiries and ensure the following objectives are met: Frontline practitioners should as a matter of course provide:
  + Information relevant to the protection and needs of the alleged child who is harmed is gathered;
  + Any criminal aspects of the alleged abuse are investigated;
  + Any information relevant to any abusive experiences and protection needs of the child who is the alleged to have caused harm is gathered;
  + Any information about the risks to self and others, including other children in the household, extended family, school, peer group or wider social network is gathered.
  1. If the children involved are the responsibility of different local authorities, each must be represented at the Strategy Discussion which will usually be convened by the authority in which the child who is harmed resides.
  2. When a child is aged 10 or over and is alleged to have committed an offence the Police must undertake the first interview under the Police and Criminal Evidence Act 1984
  3. If the child who is harmed is to be interviewed or a child is a witness to an alleged offence or the child who harms admits to these offences, these incidents should normally be the subject of a separate interview under the provisions of the Achieving Best Evidence (ABE) guidance

When is a complex strategy discussion required?

* 1. Where complex and organised abuse is identified including where there are a number of children who are harmed and children who cause harm or adult perpetrators the Team and Service Managers should coordinate investigation and convene a complex strategy meeting.
  2. A complex strategy discussion is of the same statutory status as a strategy discussion. If any professional identifies that there is complex or organised abuse, a complex strategy discussion should be undertaken.

Assessment

* 1. If it appears that the alleged abusing child is in need, suffering or is at risk of Significant Harm a Single Assessment process will be followed.
  2. A social worker from the MASH will be allocated to all new referrals or where the child(ren) are already open to Children’s services, the relevant assessment team will carry out a Single Assessment under [Section 17](https://www.legislation.gov.uk/ukpga/1989/41/section/17) to provide assistance to prevent impairment to health and development or through a Section 47 enquiry to protect a child from harm.
  3. Different social workers will be allocated to the child who is harmed and to the alleged child who harms through abusive behaviour, even if they live in the same household, to ensure that both are supported through the process of the enquiry and that both their needs are fully assessed.
  4. It should be recognised that disclosure of sexually inappropriate behaviour or abusive behaviour by a child can be extremely distressing for a parent/carer. The child and family should always be advised of their right to seek legal representation to support them through the process.
  5. Practitioners working with children who cause harm to others - including those who sexually abuse/offend - should recognise that such children are likely to have considerable needs themselves, and also that they may pose a significant risk of harm to other children.

* 1. Evidence suggests that children who abuse others may have suffered considerable disruption in their lives, been exposed to violence within the family, may have witnessed or been subject to physical or sexual abuse, have problems in their educational development, and may have committed other offences. Such children and young people are likely to be [Children in Need](https://www.legislation.gov.uk/ukpga/1989/41/section/17), and some will, in addition, be suffering, or at risk of suffering, significant harm, and may themselves be in need of protection.
  2. In assessing a child who harms another, relevant considerations include:
  + The nature and extent of the abusive behaviours. In respect of sexual abuse, there are sometimes perceived to be difficulties in distinguishing between normal childhood sexual development and experimentation, and sexually inappropriate or aggressive behaviour. Expert professional judgment may be required, within the context of knowledge about normal child sexuality. It may be appropriate to undertake a joint assessment with relevant health professionals;
  + The context of the abusive behaviours;
  + The child's development and family and social circumstances (if a child is Looked After and is at risk of sexual offending due consideration must be given to the child’s protection needs within their care plan and/or whether a Child Protection Conference /multi-agency plan is required);
  + Needs for services, specifically focusing on the child's harmful behaviour as well as the child's other significant needs;
  + The risks to self and others, including other children in the household, extended family, school, peer group or wider social network.
  1. This risk is likely to be present unless the opportunity for further abuse is ended, the child/young person has acknowledged the abusive behaviour and accepted responsibility, and there is agreement by the child/young person who causes harm and his/her family to work with relevant agencies to address the problem.
  2. If there is a balance of probability that nothing abusive or inappropriate took place, then this may be deemed as unsubstantiated and no further action may be required. However in cases of alleged child on child abuse, it is important to understand the difference between an allegations that is deemed unsubstantiated through balance of probability from the issue of denial.
  3. Strength of denial by the child and/or the family alone should have no bearing on any decision about further action.

Initial Child Protection Case Conference/Child in Need Planning Meetings

* 1. If there is a continuing risk of Significant Harm, an Initial Child Protection Conference should be held. If either child becomes the subject of a Child Protection Plan, the coordination of services will continue through the Core Group, which should address the child's needs and risks, and the issues which resulted in the need for a Child Protection Plan.
  2. Where there are insufficient grounds for holding a Child Protection Conference, or where a decision was reached at Initial Child Protection Conference (ICPC) that a Child Protection Plan was not needed, a multi-agency approach will still be needed if either child’s needs are complex.
  3. If the child is not considered as requiring a Child Protection Plan but is assessed to be a Child in Need a multi-agency planning meeting should be convened by Children's Social Care to pool information, allocate roles and set a time-table for an assessment of the needs of the child and the risk posed by them, as well as co-ordinate any other interim intervention within the context of early help.
  4. Those invited should include participants of the Strategy Meeting and representatives from health (including where relevant Child and Adolescent Mental Health Services), school, police, YOS and any other appropriate service provider, the child and their parents or carers.
  5. On completion of the assessment, the same forum will be reconvened to consider the outcome, to review and co-ordinate roles of relevant agencies in providing any identified intervention, including specialist input with regard to service users with special needs. Care must be taken to provide services culturally appropriate to the needs of the child and the family.
  6. Intervention should be reviewed at regular multi-agency meetings. At the point of closure, the review will consider the possible need for long-term monitoring and the availability of advice and other services.

Children Looked After

* 1. Children, particularly those living away from home, are also vulnerable to physical, sexual and emotional bullying and abuse by other children. Such abuse should always be taken as seriously as abuse perpetrated by an adult. It should be subject to the same safeguarding children procedures as apply in respect of any child who is suffering, or at risk of suffering, Significant Harm from an adverse source.
  2. A significant proportion of sex offences are committed by teenagers and, on occasion, such offences are committed by younger children. Safeguarding professionals and carers of children living away from home and all settings need clear guidance and training to identify the difference between consenting and abusive, and between appropriate and exploitative relationships.
  3. In both cases where the child who harms others or the child who is harmed is looked after by the local authority consideration should be given to the vulnerability of the children.
  4. It is important that there is a coordinated plan to respectively minimise risk of future reoccurrence of inappropriate or abusive behaviours and keep children safe. The Child’s Independent Review Officer (IRO) will need to consider the child’s need for protection and support in parallel with the review of the child’s statutory care plan.

Working Together

* 1. A prerequisite to collaborative work to address need and risk in children who cause harm is to empower them and their families to be engaged and contribute to assessment and intervention in doing so it is more likely that the child and family will accept responsibility and be invested in support an intervention to improve the areas of concern.
  2. It is also essential that in all circumstances and across all levels of need and intervention that the approach to identify and respond to child on child abuse is prioritised and given full commitment by all agencies and organisations involved with the child who is harmed and the child who harms. Support and intervention to children and their families is significantly compromised where there is not a multiagency collaboration to assessment, support and safety planning for children.

Criminal Proceedings

* 1. When the child is over 10 years, the Police will consult other agencies including the Crown Prosecution Service to decide the most appropriate course of action within the criminal justice system before any decision is made to issue a Youth Caution, Youth Conditional Caution ;
  2. In cases where criminal proceedings are taken against an alleged abusing child, the Youth Offending Service should be added to the list of possible attendees at any meetings. Both the compilation of the Youth Offending Service Asset Assessment and the preparation of a Single Assessment will be facilitated through this;
  3. When a case is going through the Youth Court or the Crown Court, the Youth Offending Service will provide information for the Single Assessment process. This may include plea, bail conditions and variations between adjournments;
  4. HSCP and Youth Offending Service should ensure that there is a clear operational framework in place, within which assessment, decision-making and case-management take place. Neither child welfare nor criminal justice agencies should embark on a course of action that has implications for the other without appropriate consultation.
  5. Children who have been harmed or cause harm may require services to support them through interviews in line with Achieving Best Evidence Guidance. The assessments undertaken may determine that there is a need for support services, such as counselling services, whether the child is in need of safeguarding or a Child in Need.
  6. Pre Trial Therapy should be considered in all cases progressing through the criminal justice system. Consideration should be given to both the child who is harmed and the child who harms.
  7. The UN Convention on the Rights of the Child states:
* Article 3. "When adults or organisations make decisions which affect children they must always think first about what would be best for the child".
* Article 12. "Children too have the right to say what they think about anything which affects them. What they say must be listened to carefully".
  1. Decisions for local agencies (including the Crown Prosecution Service where relevant) according to the responsibilities of each include:
     + The most appropriate course of action within the criminal justice system, if the child is above the age of criminal responsibility;
     + Whether the child who harms should be the subject of a Child Protection Conference;
     + What plan of action should be put in place to address the needs of the child / young person who causes harm, detailing the involvement of all relevant agencies?
  2. The social worker and police, CPS and those agencies working closest with the child, should at all times consider the child’s circumstance, emotional and mental health, the single assessment the wishes and feeling of the child before making a decision about the appropriateness, and types of therapy available for the child who is harmed and the child who harms.
  3. If a child who causes harm is convicted or receives a caution for an offence, all agencies/organisations will need to complete and update its risk assessment, ensure relevant protections are in place for all other children and where applicable vulnerable adults within any setting the child is engaged with.
  4. Where cases are classified as “no further action” (NFA’d) by the police or Crown Prosecution Service, or where there is a not guilty verdict, agencies and organisations will offer support to the child in need, who is harmed and the child who harms for as long as is necessary.
  5. A not guilty verdict or a decision not to progress with their case will likely be traumatic for the child who is harmed. The fact that an allegation cannot be substantiated within the criminal process does not necessarily mean that it was unfounded and that there is no risk. Risk will still need to be managed and there will be continued support and safety plans to all parties in this instance.

# Definitions

What is Child on Child Abuse?

* 1. Child on child abuse can and does happen in a whole range of settings that children attend, however it often goes unseen. All children have the capability to abuse others. Child on child abuse is any form of physical, sexual, emotional and financial abuse, and coercive control exercised between children, and within children’s relationships (both intimate and non-intimate), friendships, and wider associations. It includes but is not limited to the following:
* serious bullying (including cyberbullying),
* teenage relationship abuse or domestic violence
* physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm
* up skirting, which typically involves taking a picture under a person’s clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm;
* sexting (also known as youth produced sexual imagery)
* Initiation/hazing type violence and rituals
* child exploitation, ie gang related activity and serious youth violence, criminal and sexual exploitation, trafficking, modern slavery
* harmful sexual behaviour and/or
* prejudice-based violence including, but not limited to, gender-based violence
  1. Online child on child abuse is any form of technology facilitated child on child abuse; for example sexting, sexual abuse via social media and online technology, image based sexual abuse, coercion, exploitation, grooming, and technology facilitated threatening language and harassment.

What is Contextual Safeguarding?

It is important to recognise that children are vulnerable to abuse in a range of social contexts as they form different relationships in their neighbourhoods, schools and online and these can feature violence and abuse which is often hidden to adults. Peer influence and pressure is a major factor in decisions made by young people to join groups. Keeping Children Safe in Education highlights the importance of awareness of factors across a school’s local community so they understand where young people are living, who they come into contact with and the dynamics at play.

* 1. Understanding the power dynamic that can exist between children and young people is very important in helping to identify and respond to child on child abuse – there will be a power imbalance and this may be due to age or status – social or economic – and the child who causes harm in one situation may be the powerless child who is harmed in another so it is essential to try to understand the child causing harm and what is driving their behaviour before taking sanctions.
  2. In order to prevent and respond effectively to child on child abuse frontline practitioners need to recognise and understand this form of abuse through the lens of ‘Contextual Safeguarding’. This is an approach to keeping children safe that recognises their experiences of significant harm arises from beyond the child’s own family environment. To robustly respond to child on child abuse the multiagency response will include these contexts within its safeguarding approach to prevention, identification, assessment and intervention.

Sexual Harassment

* 1. This can be defined as ‘unwanted conduct of a sexual nature’ that can occur in person and via technology. In the context of this guidance this means in the context of child on child sexual harassment. Sexual harassment is likely to: violate a child’s dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment. It can include:
     + Sexual comments, such as: telling sexual stories, making lewd comments, making

sexual remarks about clothes and appearance and calling someone sexualised names

* + - Sexual “jokes” or taunting

Sexting

* 1. Sexting is when someone shares sexual, naked or semi-naked images or videos of themselves or others or sends sexually explicit messages. It can be facilitated by technology that allows sharing of media and messages. This is also known as youth produced sexual imagery.
  2. The UK Council for Child Internet Safety (UKCCIS) has published Advice for Schools and

Colleges on Responding to Sexting Incidents.

[Overview\_of\_Sexting\_Guidance.pdf (publishing.service.gov.uk)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/647389/Overview_of_Sexting_Guidance.pdf)

Up-skirting

* 1. This typically involves taking a picture under a person’s clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. "Up skirting" became a specific criminal offence under the Voyeurism (Offences) Act 2019 on 12 April 2019.
  2. Anyone, and any gender, can be a victim and this behaviour is completely unacceptable.
  3. ‘Up skirting’, is one example of child on child abuse of which all practitioners must be aware. Where ‘Up skirting’ is a cause of harm to any child or young person there is a mandatory requirement for this to be reported to the police.
  4. See [Upskirting: know your rights](https://www.gov.uk/government/news/upskirting-know-your-rights) link for more information.

Sexual Violence

* 1. In this guidance this refers to sexual violence in the context of child on child sexual violence. Children can and do abuse other children. Sexual violence covers a spectrum of behaviour. It can refer to sexual offences under the Sexual Offences Act 2013. This includes:
* Rape: A person (A) commits an offence of rape if: he intentionally penetrates the

vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.

* Assault by Penetration: A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.
* Sexual Assault: A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents.

Harmful Sexual Behaviour (HSB)

* 1. Children’s sexual behaviour exists on a wide continuum, from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage.
  2. A useful umbrella term is “harmful sexual behaviour”. The term has been widely adopted in child protection and is used in this advice. Harmful sexual behaviour can occur online and/or offline and can also occur simultaneously between the two. Harmful sexual behaviour should be considered in a child protection context. Useful guidance can be found in:
  3. NSPCC's and Research in Practice's Harmful Sexual Behaviour Framework: <https://learning.nspcc.org.uk/research-resources/2019/harmful-sexual-behaviour-framework>

Hazing/Initiation

* 1. The practice of rituals, challenges, and other activities involving harassment, abuse or humiliation used as a way of initiating a person into a group.

[Bullying](https://www.herefordshire.gov.uk/schools-education/bullying-1)

* 1. Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are:
* Physical (e.g. hitting, kicking, theft);
* Verbal (e.g. racist or homophobic remarks, threats, name-calling);
* Emotional (e.g. isolating an individual from the activities and social acceptance of their peer group).
  1. The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children, to the extent that it affects their health and development or, at the extreme, causes them Significant Harm (including self-harm). All settings in which children are provided with services or are living away from home should have in place rigorously enforced anti-bullying strategies.

Consent

* 1. Consent is about having the freedom and capacity to choose. Consent to sexual activity may

be given to one sort of sexual activity but not another, eg to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any

time during sexual activity and each time activity occurs. Someone consents to vaginal, anal

or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

* 1. It is important to know that:
* A child under the age of 13 can never consent to any sexual activity
* The age of consent is 16
* Sexual intercourse without consent is rape
  1. It is also important to differentiate between consensual sexual activity between children of a similar age and that which involves any power imbalance, coercion or exploitation. Due to their additional training, the Designated Safeguarding Lead should be involved to lead the agency’s or organisation’s response. If in any doubt, they should seek expert advice.
  2. It is important that schools and college consider sexual harassment in broad terms. Sexual

harassment (as set out above in 8.6) creates an atmosphere that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence and unsafe cultures of behaviour developing amongst children and young people.

# Spotting the signs and symptoms

* 1. All frontline practitioners should be aware of indicators, which may signal that children are at risk from, or are involved with serious violent crime. The signs of children being harmed by child on child abuse include:
* increased absence from school or disengagement from school activities
* a change in friendships or relationships with older individuals or groups,
* a significant decline in interest and performance,
* signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained physical injuries.
* mental or emotional health issues
* becoming withdrawn – lack of self esteem
* lack of sleep
* alcohol or substance misuse
* changes in behaviour
* inappropriate behaviour for age
* abusive towards others
* Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs
  1. Abuse affects children very differently. The above list is by no means exhaustive and the presence of one or more of these signs does not necessarily indicate abuse. The behaviour that children present with will depend on their particular circumstances. Rather than checking behaviour against a list, safeguarding professionals are trained to;
* be alert to behaviour that might cause concerns,
* think about what the behaviour might signify
* speak to children and encourage them to share with them any underlying reasons for their behaviour, and, where appropriate, to engage with their parents/carers so that the cause(s) of their behaviour can be investigated.
  1. Children with learning needs and disability may exhibit behaviour that is deemed out of character or is not considered in the range of development for his/her age. Frontline practitioners should always consider whether an underlying concern is contributing to their behaviour (for example, whether the child is being harmed or abused by other children) and, if so, what the concern is and how the child can be supported going forwards

[Domestic Abuse](https://herefordshiresafeguardingboards.org.uk/media/7693/domestic-abuse-referral-form-hfd3690.pdf)

* 1. Domestic abuse can have a devastating impact on children, resulting in emotional, social, psychological and behavioural difficulties with short and long-term implications. Children face increased risks of criminal behaviour, interpersonal difficulties in future intimate relationships and friendships, and risks of experiencing sexual abuse, sexual exploitation and other forms of violence and abuse in later life. Royal College of Psychiatrists (2017)
  2. [The Domestic Abuse Act 2021](https://www.legislation.gov.uk/ukpga/2021/17/contents) received Royal Assent on 29 April 2021, for the first time the law recognises children as victims of domestic violence. The Act will ensure that children who see, hear or are otherwise affected by domestic abuse (in other words, experience the domestic abuse themselves) perpetrated by one person aged 16 and over against another, are recognised within the statutory definition of domestic abuse.
  3. This amendment does not aim to lower or remove the age limit; instead it inserts an additional sub-section making it clear that children who see, hear or otherwise experience the abuse of one adult by another adult are also negatively impacted by that abuse, and so should be seen as victims of the abuse as well. It is within this context that safeguarding professionals are required to respond to children who cause harm using violent, abusive and coercive controlling behaviours. 1 in 5 children and young people are exposed to domestic abuse during their childhood and were affected by domestic abuse if they have grown up witnessing it those children can go on to continue the cycle of violent and abusive behaviours within their own relationships.
  4. Young people can be affected by domestic abuse if they have grown up witnessing it or they can experience abuse in their own relationships.
  5. The children’s referral pathway for responding to domestic abuse has been revised to account for children and young people aged 16 and 17 years old, who are experiencing child on child abuse.
  6. The [third SafeLives Spotlight](https://safelives.org.uk/sites/default/files/resources/Safe%20Young%20Lives%20web.pdf) focuses on young people aged 13 to 17 who experience domestic abuse in an intimate partner relationship, or demonstrate harmful behaviours towards a family member.
  7. The research undertaken by the charity SafeLives further found that:
* 67% of teenagers engaged with IDVA services experience strangulation, rape, broken bones and stalking;
* 88% of young people are in some form of an intimate partner relationship;
* 25% of girls experience physical partner violence, 11% of which is categorised as severe;
* 33% of girls experience sexual partner violence
* 75% of girls and 50% of boys report some form of emotional partner abuse.
  1. See the West Midlands Regional Child Protection Procedures local arrangements for [Domestic Abuse Tools and Pathways](https://westmidlands.procedures.org.uk/local-content/wQzN/domestic-abuse-tools-and-pathways/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent) guidance and [2.24 Domestic Violence and Abuse](https://westmidlands.procedures.org.uk/pkost/regional-safeguarding-guidance/domestic-violence-and-abuse) here.

**10 TOP TIPS RELATING TO PEER ON PEER DOMESTIC ABUSE**

1. Young people’s relationships can be hidden, less visible and change rapidly. Abuse can escalate quickly and violence can be serious.
2. If those involved are under the age of 18 they are still children legally and a referral to Children’s Services should be considered whether the young person is the person harmed or is the person causing harm.
3. If the child/young person is under the age of 16 years they much be referred to Children’s Services.
4. Where the young person is over 16 years a DASH should be completed and a referral to MARAC and IDVAs made if they are deemed to be high risk of suicide or homicide.
5. There may be cultural factors that make it more difficult for children and young people to disclose abuse or seek help due to shame, fear of repercussions in the family or their communities.
6. If a child or young person discloses abuse always take them seriously.
7. Children and young people may change their story and retract their statements due to pressure from the child or young person who is causing harm, their peers or their family members – this does not necessarily mean the incident did not happen.
8. With regard to sexual activity – think about the ages of the young people, the legal age of consent (which is 16 years) and their level of maturity, cognitive development, understanding, disability or learning needs, when thinking about whether the behaviour engaged in is appropriate.
9. Children and young people may be at risk of abuse both inside and outside of their home or where they live. Eg children living in alternative care arrangements from their birth family such as private fostering or at school within the community and neighbourhoods or within peer groups.
10. Experience of living with parental domestic abuse can make children and young people more vulnerable because abusive behaviours can be normalised. CYP may not want to be at home and therefore they may become more reliant on peer groups that engage in risky and abusive behaviours and, particularly for young men, there is an increased risk of gang affiliation.

[Sexual Behaviours in Children](https://www.herefordshire.gov.uk/schools-education/bullying-1)

[Understanding Sexual Behaviours in Children](https://www.nspcc.org.uk/keeping-children-safe/sex-relationships/sexual-behaviour-children/)

* 1. Simon Hackett (2010) has proposed a continuum model to demonstrate the range of sexual behaviours presented by children and young people, from those that are normal, to those that are highly deviant:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Normal** | **Inappropriate** | **Problematic** | **Abusive** | **Violent** |
| - Developmentally expected  - Socially Acceptable  - Consensual, mutual, reciprocal - Shared decision making | - Single instances of inappropriate sexual behaviour   * - Socially acceptable behaviour within peer group * - Context for behaviour may be inappropriate * - Generally consensual and reciprocal | -Problematic and concerning behaviour  -Developmentally unusual and socially unexpected  - No overt elements of victimisation  - Consent issues may be unclear  - May lack reciprocity or equal power  - May include levels of compulsivity | - Victimising intent or outcome    - Includes misuse of power  - Coercion and force to ensure compliance  - Intrusive  - Informed consent lacking or not able to be freely given  - May include elements of expressive violence | - Physically violent sexual abuse  - Highly intrusive    - Instrumental violence which is psychologically and/or sexually arousing to the child responsible for the behaviour  - Sadism |

* 1. Hackett, whilst supporting the concept of a continuum, does provide a pragmatic response to a child's behaviour and states, “it can change depending on the circumstances they are in, and sexual behaviour can move in either direction along the continuum, so it's important not to label all of a child's behaviour as belonging to one category”.
  2. Deciding if behaviours are healthy or age-appropriate is not always easy to distinguish, it is therefore important that all frontline practitioners or anyone who works with children and young people has a good understanding of how children develop sexually.
  3. The following illustration provides guidance on age appropriate sexual development in children.
  4. **Age appropriate sexual development in children**

|  |  |  |  |
| --- | --- | --- | --- |
| **From 0- to 4-years-old** | **5- to 9-year-olds** | **9- to 13-year-olds** | **13- to 17-year-olds** |
| At this stage, you might notice natural exploratory behaviour emerging for the first time like:   1. enjoying being naked 2. kissing and hugging people they know well, for example friends and family members 3. touching or rubbing their own private parts as a comforting habit 4. showing curiosity about or attempting to touch the private parts of other people 5. being curious about the differences between boys and girls 6. talking about private body parts and their functions, using words like ‘willy’, ‘bum’, ‘poo’ and ‘wee’ 7. role playing about different relationships, for example marriage. | As children get a little older they become more conscious of sex and their own sexuality. This can be displayed by:   1. becoming more aware of the need for privacy 2. asking questions about sex and relationships, such as what sex is, where babies come from and same-sex relationships 3. kissing, hugging and holding hands with a boyfriend or girlfriend 4. using swear words or slang to talk about sex after hearing other people use them. | During these ages, children begin to get more curious about sex. Examples of healthy sexual behaviour during this stage are:   1. having a boyfriend or girlfriend (of the same or different gender) 2. using sexual language as swear words or slang 3. wanting more privacy 4. looking for information about sex online (this might lead to accidentally finding sexual pictures or videos) 5. masturbating in private. | During adolescence, sexual behaviour becomes more private with young people and they begin to explore their sexual identity. They might be:   1. forming longer-lasting sexual and non-sexual relationships with peers 2. using sexual language and talking about sex with friends 3. sharing obscenities and jokes that are within the cultural norm 4. experimenting sexually with the same age group 5. looking for sexual pictures or videos online. |

# Who are the vulnerable groups?

* 1. There is growing evidence to suggest [societal norms can influence or normalise behaviours](https://safeguarding.network/content/safeguarding-resources/peer-peer-abuse/). Power, control and the way in which femininity and masculinity are constructed) rather than biological make-up can affect boys differently from girls.
  2. Barriers to disclosure will also be different. As a result, frontline practitioners need to explore the gender dynamics of child on child abuse within their settings, and recognise that these will play out differently in single sex, mixed or gender- imbalanced environments.
  3. Children with Special Educational Needs and/or Disabilities (SEND) are three times more likely to be abused than children without SEND, and additional challenges can sometimes exist for frontline practitioners to recognise abuse in children with SEND. This can be as a result of assumptions being made that indicators of possible abuse for SEND children are related to a child’s disability without further exploration. There is also a potential for children with SEND to be disproportionately impacted on by child on child abuse without outwardly showing any signs of harm due to language and communication barriers and other learning difficulties.
  4. There are factors that impede the safety and or response to children as a result of certain characteristics such as sexual orientation, ethnicity, race or religious beliefs
  5. It is important to remember that as with all safeguarding issues, child on child abuse can impact on children and young people with a range of vulnerabilities and characteristics including that listed below:
* Those aged 10 and upwards (although children who are harmed are identified as 8 yrs and younger)
* Girls and young women are more likely to be children who are harmed and boys and young men more likely to be the children who cause harm
* Black and minority ethnic children often under identified as children who are harmed and over-identified as children who cause harm
* Young people with intra-familial abuse in their histories or those living with domestic abuse are more likely to be vulnerable
* Young people in care and those who have experienced loss of a parent, sibling or friend through bereavement
* Young people who have been abused or have abused other children
* Children who cause harm can be younger than their victims
  1. The issue facing professionals is that these characteristics will often make the child / young person more visible, whilst those without any of the characteristics above may be less likely to come into contact with professionals. It is therefore important to look at interlinking factors and not isolated incidents.

|  |
| --- |
| **Example**  **A young person goes missing from care (even for a small amount of time) the professional network will know about it, whilst if a young person regularly returns home later than their curfew their parents may not necessarily tell anyone.** |

# Managing Child on Child abuse within an Education Setting

* 1. Schools and colleges in Herefordshire are required to adopt this policy and practice guidance and review any standalone child on child abuse policy and ensure it is in line with this multiagency policy and procedural guide.
  2. In cases where child on child abuse is identified all schools and colleges must follow [Herefordshire’s child protection procedures](https://westmidlands.procedures.org.uk/pkoso/regional-safeguarding-guidance/children-who-abuse-others), taking a contextual approach to support all children and young people who have been affected by the situation.
  3. All staff should familiarise themselves with the local thresholds guidance and the role they will play in the process.
  4. All staff should be aware of the process for making referrals to children’s social care and for statutory assessments to be undertaken under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) that may follow a referral, along with the role they might be expected to play in such assessments.
  5. It is important that the [Right Help Right Time Levels of Need guidance](https://westmidlands.procedures.org.uk/local-content/2gjN/thresholds-guidance/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent) is considered and appropriate referrals for child on child abuse should be made to the Early Help Hub for need Level 2 and Level 3 or to the MASH for need Level 4 in order that a record of each incident is captured and subject to report and scrutiny by the HSCP.
  6. From the data and intelligence from contacts and referrals into the Early Help Hub and the MASH, the partnership will be able to ensure prevalence is understood, and service provision can be reviewed, reengineered or commissioned to ensure that all children who are harmed and children who cause harm, receive timely and effective support - Right Help Right Time, at the right quality.
  7. Paragraph 27 of the [Keeping Children Safe in Education guidance](https://www.gov.uk/government/publications/keeping-children-safe-in-education--2) document requires all staff to be aware that children can be abused by other children and that all staff must be aware of and follow the policies and procedures to enable prevention, early identification and coordinated response to child on child abuse.
  8. The guidance also identifies the need for schools to extend their schools safeguarding policies to include up skirting, especially as more and more children and young people gain access to mobile phones and smaller recording technology.
  9. Ofsted has undertaken a rapid thematic [Review of Sexual Abuse in Schools and Colleges](https://www.gov.uk/government/publications/review-of-sexual-abuse-in-schools-and-colleges/review-of-sexual-abuse-in-schools-and-colleges), this was published on 10th June 2021. The report provided an insightful picture of children and young peoples lived experience of child on child abuse within education settings.
  10. School and college staff are particularly important as they are in a position to identify concerns early, provide help for children, and prevent concerns from escalating. It is for this reason there has been a focused and targeted campaign within schools across Herefordshire to develop robust arrangements to respond to child on child abuse in line with national guidance.
  11. Children and young people who attend school spend approximately 15% of their existence within an education setting. HSCP recognise that schools, colleges and other education settings play an important role in safeguarding and promoting children’s welfare and teaching children and young people about healthy ‘relationships, sex and health education’ (RSHE).
  12. Whilst all children may benefit from early help, all school and college staff should be particularly alert to the potential need for early help for a child who:
      + is disabled and has specific additional needs;
      + has special educational needs (whether or not they have a statutory Education, Health and Care Plan);
      + is a young carer;
      + is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
      + is frequently missing/goes missing from care or from home;
      + is at risk of modern slavery, trafficking or exploitation;
      + is at risk of being radicalised or exploited;
      + is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse;
  13. **The immediate response to an allegation**
      + The school or college will take all allegations seriously and will reassure the victim that they will be supported and kept safe.
      + All staff will be trained to manage an allegation of suspected abuse
      + Staff will not promise confidentiality as the concern will need to be shared further (for example, with the designated safeguarding lead or social care) staff will however only share the report with those people who are necessary to progress it.
      + A written report will be made as soon after the interview as possible recording the facts as presented by the child. These may be used as part of a statutory assessment if the case is escalated later or within the criminal process.
      + Where the allegation includes an online element the school or college will follow advice on searching, screening and confiscation. The staff will not view or forward images unless unavoidable and only if another member of staff (preferably the DSL) is present.
      + The DSL will be informed as soon as possible.

Risk Assessment

* 1. The risk and needs’ assessment should consider:
     + The child who is harmed, especially their protection and support;
     + The alleged child who harms; and
     + All the other children (and, if appropriate, adult students and staff) at the school or college, especially any actions that are appropriate to protect them;
  2. Risk assessments will be recorded (written or electronic say where these are filed) and be kept under review.
  3. The designated safeguarding lead (or a deputy) will ensure they are engaging with MASH to discuss the case, and make a formal referral where appropriate.
  4. If the allegation indicates that a potential crime has taken place the MASH will refer the case to the police. In certain circumstances it may be necessary for schools to contact the police directly to report a crime and prevent harm to a child in need.
  5. Parents of both the alleged child who is harmed and the child who harms should be informed, this should be discussed during the consultation with the MASH and the subsequent strategy meeting.

Action following a report of sexual violence and/or sexual harassment

* 1. Following an incident, schools should consider
  + The wishes of the child who is harmed in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment;
  + The nature of the alleged incident(s), including: whether a crime may have been committed and consideration of harmful sexual behaviour;
  + The ages of the children involved;
  + The developmental stages of the children involved;
  + Any power imbalance between the children. For example, is the alleged child who harms significantly older, more mature or more confident? Does the child who is harmed have a disability or learning difficulty?
  + If the alleged incident is a one-off or a sustained pattern of abuse;
  + Are there ongoing risks to the child who is harmed, other children, adult students or school or college staff; and other related issues and wider context?

Separating children

* 1. Every child has the right to an education, within child on child abuse schools and colleges need to ensure children who are harmed and children who cause harm are both encouraged to attend school.
  2. Where there is a criminal investigation the alleged child who harms will be removed from any shared classes with the child who is harmed.
  3. Consideration should be given to how best to keep the children at an appropriate distance apart on the school premises or on school transport. This action should be taken in the best interest of the children concerned and should not be perceived to be a judgement of guilt before any legal proceedings.
  4. Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, the school or college may take suitable action, if they have not already done so. In all but the most exceptional of circumstances, the rape or assault is likely to constitute a serious breach of discipline and lead to the view that allowing the child who harms to remain in the same school or college would seriously harm the education or welfare of the child who is harmed (and potentially other pupils or students).
  5. Where a criminal investigation into sexual assault leads to a conviction or caution, the school or college may, if action has not already been taken, consider any suitable sanctions using the organisations related behaviour policy, including consideration of permanent exclusion.
  6. Where the child who harms is going to remain at the school or college, the principle would be to continue keeping the children involved in separate classes and continue to consider the most appropriate way to manage potential contact on school and college premises and transport. The nature of the conviction or caution and wishes of the child who is harmed will be especially important in determining how to proceed in such cases.
  7. Reports of sexual assault and sexual harassment will, in some cases, not lead to a report to the police (for a variety of reasons). In some cases, rape, assault by penetration, sexual assault or sexual harassment are reported to the police and the case is not progressed or are reported to the police and ultimately result in a not guilty verdict. None of this means the offence did not happen or that the child who is harmed lied. The process will have affected both children involved.
  8. Appropriate support will be provided to child who is harmed and the child who harms as required and consideration will be given to sharing classes and potential contact as required on a case-by-case basis. All the above will be considered with the needs and wishes of the child who is harmed at the heart of the process (supported by parents and carers as required). Any arrangements should be kept under review.

Prevention

* 1. As well as having strategies for dealing with incidents schools and colleges should consider what they can do to foster healthy and respectful relationships between boys and girls including through Relationship and Sex Education and Personal Social Health and Economic education. The most effective preventative education programme will be through a whole-school approach that prepares pupils for life in modern Britain.
  2. The schools and colleges will have a clear set of values and standards, and these will be upheld and demonstrated throughout all aspects of school life. This will be underpinned by the school’s behaviour policy and pastoral support system, and by a planned programme of evidence-based content delivered through the whole curriculum.
  3. Such a programme should be developed to be age and stage of development appropriate (especially when considering SEND children and the cognitive understanding of children with learning needs or disability), and may tackle such issues as:
* Healthy and respectful relationships;
* What respectful behaviour looks like?
* Consent;
* Gender roles, stereotyping, and equality;
* Body confidence and self-esteem; • Prejudiced behaviour;
* That sexual violence and sexual harassment is always wrong; and
* Addressing cultures of sexual harassment. Schools often deliver this currently, through planned, high-quality, Sex and Relationship Education (SRE) and Personal, Social, Health and Economic (PSHE) education.
  1. The Department for Education has introduced compulsory Relationships Education for primary pupils and Relationships and Sex Education (RSE) for secondary pupils from September 2020. Also, from September 2020 it will be compulsory for all schools to teach Health Education.
  2. Schools and colleges in Herefordshire will find support and resources to progress the development of these issues

# Further Reading

* 1. Ofsted June 2021

[Review of sexual abuse in schools and colleges](https://www.gov.uk/government/publications/review-of-sexual-abuse-in-schools-and-colleges)

* 1. Centre of Expertise on CSA 2018 Di McNeish and Sara Scott

[Key messages from research on children and young people who display harmful sexual behaviour](https://www.csacentre.org.uk/resources/key-messages/harmful-sexual-behaviour/)

* 1. NSPCC Research and Resources

[Harmful Sexual Behaviour](https://learning.nspcc.org.uk/child-abuse-and-neglect/peer-on-peer-sexual-abuse)

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| 2 | January 2024 | Updated web links. Amended language to reflect “Child on Child” abuse instead of “Peer on Peer Abuse” | Routine review / update. |