

# Keeping it together

*A parent's guide to  
coping with child  
sexual exploitation*

**Pace**  
Parents against  
child sexual exploitation

**This booklet contains general legal information.**  
**The legal information is not advice and should not be treated as such. The legal information in this booklet is provided without any representations or warranties, express or implied. You must not rely on the legal information in this booklet as an alternative to legal advice from a lawyer or other professional adviser.**

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# Introduction

This booklet is written for parents whose children are being sexually exploited by an individual or group of adults outside of the family unit. It was written in consultation with parents who have witnessed the sexual exploitation of their own daughters or sons. Although every parent's situation is unique, we hope that this information can be interpreted in a way that is useful to you, and helps you to remain positive.

Child sexual exploitation (CSE) is sustained sexual abuse and threatened or actual violence against children. It involves serious crimes and should be reported to the police. The Pace publication *Working with the Police* [Pace: 2014] details how parents can assist police investigations. This guide is more concerned about how you, the parent, copes with the day-to-day stress of witnessing sexual exploitation and how to maintain a job, run a home, manage finances and look after your whole family.

### **Who are Pace and how can we help?**

Parents Against Child Sexual Exploitation (Pace) works alongside parents and carers of children who are - or are at risk of being - sexually exploited by perpetrator(s) external to the family. We are a registered charity and network of affected parents, whose expertise is central to our mission. Pace offers free, confidential and regular telephone support with a designated support worker, who can explore possible courses of action for you and your family. Your Parent Support Worker can also liaise with agencies on your behalf.

Pace holds regular Parent Network Days, where you can meet other parents experiencing child sexual exploitation for mutual support. You can also join our secure online forum to contact other parents over the web for additional solidarity. We also offer face-to-face support via a volunteer befriending scheme.

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# 1

## Finding out and seeking help

## Finding out and seeking help

Child sexual exploitation cannot, and should not be tackled by parents alone. It encompasses serious crimes and should be reported to the police. The Pace guide *Working with the Police* explains how to report your child missing, how to gather, log and pass on information and explains the different sections of the 2003 Sexual Offences Act. You can order a free copy online at [www.paceuk.info](http://www.paceuk.info) or over the telephone on **0113 240 3040**.

As soon as you become aware of the exploitation of your child, you should try to keep a daily diary. Records of car registration numbers, frequented addresses or nicknames of associates may prove vital to a police investigation (see *Working with the Police* pages 18-19). But it is also important that you record other aspects of your child's activities, behaviour and mood, as this information may help ensure your child's case is prioritised by agencies who can help keep them safe. As a general guide, you should notify the following bodies if you suspect or know your child is being exploited:

- The police.
- Your child's GP.
- Their school.
- Children's social care.

### The role of social care

Many parents feel discomfort and even shame or fear at the prospect of contacting social care. Involving safeguarding professionals may feel like an admission of failure on your part as a parent, but they will have access to a far broader range of resources than you can access as an individual. It may help to talk through your fears first with a Pace Parent Support Worker, or with other parents via the Pace forum.

Before contacting social care, you may find it beneficial to familiarise yourself with their procedures and terminology. For example, an initial step may involve them undertaking an **Assessment of Need**. This may take one of three forms:

- 1. A CAF (Common Assessment Framework).** This is a shared assessment between you and the professionals working with your child. One person may be appointed as a 'lead professional' to keep you informed, listen to your views and coordinate services. If you do not feel that you are being properly consulted, a pace parent support worker may speak to the lead professional and explain your position on your behalf.
- 2. Initial Assessments** look at the needs of your child and your ability to manage them. They should be performed within 10 working days to help decide if any further support is needed.
- 3. A Core Assessment of Need** is a more in-depth assessment of the needs of your family and child and is usually done within 35 working days.

There are a number of possible outcomes which depend on the Assessment, which include:

- No further action (your Pace parent support worker will advise you on what to do if this is the case).
- A referral to another agency to provide support.
- A planning meeting or more in depth assessment.

In cases where a child is deemed to be at risk, a **Child Protection Conference** is called. This requires a **Section 47 enquiry**, which reflects that there is suspected actual harm or likely significant harm to the child and orders that the conference should be held within 15 working days.

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A child protection conference is a meeting attended by a number of professional people, including you and your partner and possibly your child (depending on their age). Participants may include a police officer, a health professional and a teacher from your child's school. There should be an independent chair and you are entitled to bring a friend, relative, solicitor or advocate (an independent person who argues your case on your behalf).

If the child protection conference feels that there is a risk of significant harm to your child, they will draw up a **Child Protection Plan**, which will detail and record all agreed interventions. This involves establishing a core group of professionals who attended the conference to follow through the steps of the plan, led by your child's **Key Worker**. The plan should be reviewed every six months at a **Review Child Protection Conference**.

Many parents find the related administration and 'chasing up' of social care procedures causes an additional layer of stress to their already difficult lives. A Pace parent support worker may be able to relieve some of this burden by liaising with agencies on your behalf.

### Parents' voices:

**“**As I read more about child sexual exploitation, I came across Pace. From the moment they answered my call, I felt a huge burden lifted. The shame of what had happened to my daughter had stopped me confiding in anybody – especially my parents, as my father had recently had a stroke. Finally, I could talk to somebody about the nightmare my life had become. I met other local parents whose sons and daughters had been sexually exploited. I was no longer alone. **”**



# **Understanding what's going on with your child**

## Why didn't my child tell me?

Many parents tell Pace they feel particularly upset that their child had been suffering abuse for some time before it was discovered or disclosed. The obvious question is: why didn't they tell me?

### The grooming process and the parent-child bond

Perpetrator(s) of child sexual exploitation are both skilled and strategic. They aim to drive a wedge between you and your child. Part of this is achieved through giving your child a 'good time.' The early stages of grooming can be exciting and your child will naturally want to conceal experimentation with sex, drugs and alcohol from you. Perpetrator(s) will then isolate them further from you by telling your child they weren't really loved or 'understood' at home, or even convince them you were cruel and abusive. This is inevitably followed by threats and coercion, which ensures your child is firmly under the perpetrator(s)' control.

### Children may blame themselves

Sexually exploited children may also feel that they have brought the exploitation on themselves, especially if most of the abuse occurred when they were intoxicated on drugs or alcohol. They may feel they could get into trouble from the police for accepting or handling drugs, or may even have developed a dependency on them. The perpetrator(s) may be telling them that they still 'owe' them for any gifts or substances they have received. It is also likely that your child will be threatened with retaliation if they told anybody. This may not necessarily be threats to themselves, but towards you, their parents, or their brothers or sisters.

### Indecent images and blackmail

Children who are blackmailed by indecent images which they have either self-generated or which have been taken without their consent may be unable to disclose out of shame and embarrassment. No child wants their parent to see indecent pictures or films of them, but it is important they know they are not trapped by the images and that they can be removed by authorities such as the Internet Watch Foundation [www.iwf.org.uk](http://www.iwf.org.uk).

The child may also fear criminal action following self-posting of indecent images. However the Association of Chief Police Officers' Child Protection and Abuse Investigation group does not support the prosecution or criminalisation of children who take and share indecent photographs.

## **Why does my child keep going back to their abusers?**

Many parents express bewilderment at the way their child defends the perpetrator(s) or denies that the relationship is abusive. This may be due to your child experiencing 'trauma bonding', which causes them to respond to physical or psychological threats by developing an intense emotional bond with the perpetrator(s) and denying their bond with you.

### **Stockholm Syndrome**

Trauma bonding is also known as Stockholm Syndrome, after the experience of four bank cashiers who were kidnapped and held hostage for six days by two robbers in Sweden. When the hostage crisis ended, it was clear that the captives had developed loving feelings towards their captors. One captive later told the media she thought her captor was 'very kind' for allowing her to crawl on the bank floor with a rope around her neck. Psychologists have observed that trauma bonding usually occurs when:

- Victims are threatened with, and believe that they are in real danger.
- Victims suffer harsh treatment interspersed with small kindnesses (such as the giving of gifts or acts of affection).
- Victims are isolated from all perspectives other than that of the abusers. This is a way of the victim psychologically defending from their pain and fear by subconsciously seeing the worldview of the person who is hurting them.
- Victims believe there is no escape.

Once trauma bonding has occurred, victims then develop negative feelings towards potential rescuers (such as parents) and refuse to engage in efforts to assist their release and detachment from the

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abusers. The trauma bond between child and the exploiters may be so strong that the child seeks comfort from the very people who inflict pain on them. Even when the child has been isolated from the perpetrator(s), the risk of re-bonding is high as even a phone text or Facebook message can reignite the victim's feelings. This may be seen as the child having been 'conditioned' to respond in this way.

### **'Freeze and endure'**

Another theory for explaining your child's return to the abuse is the way in which the human brain responds to dangerous situations. Psychotherapist Zoe Lodrick suggests that the 'logical' part of the brain - which exercises choice, reason and thought - is suppressed by survival and fear chemicals when a person is faced with extreme danger. Many people expect the sexually exploited child to think from the logical part of their brains when they are abused and assume the child has made a choice to enter a risky situation. In reality, fear has activated a more primitive part of the brain called the amygdala, which is responsible for immediate survival as opposed to weighing up the long-term psychological impact and disadvantages of engaging with perpetrator(s). When confronted with sexual violence, a child may subconsciously think: 'this won't kill me, so freeze and endure it'. The problem is that the more a child endures sexual violence and 'freezes' (or dissociates), the more likely that this will become an automatic response and the cycle of abuse continues.

Disrupting brain behavioral patterns and/or trauma bonding is not easy, but a parent's constant presence and assurance of love can help prevent the child developing sole dependence on the abuser (which is what the abuser wants). By managing to isolate the child from the abuser and help them come to terms with their trauma through therapy and being surrounded by healthy relationships, it is possible for the child to heal and reshape the nature of their future relationships.

# Maintaining day-to-day life

### You and your partner

Witnessing the sexual exploitation of your child can create tension and conflict between couples or co-parents who live apart. Parents may have different perceptions of the abuse and ideas about how best to respond to it. Some parents report that their partners become effectively groomed by the perpetrator(s) as well and constantly defend their child's new 'friends' to the parent with anxieties and concerns.

Difficult it as it may be to reach a unified approach, it is advisable to try to listen to your partner or co-parent when their instincts tell them something is wrong. It is especially important to form a shared plan in managing your child's behaviour or missing from home episodes. This may be deciding that one parent stays at home trying to contact the child and liaising with the police while the other parent continues to search the local area. Parents who are separated but share custody may be eligible for funded mediation sessions to help achieve a shared plan. Perpetrator(s) of sexual abuse will seek to exploit any vulnerability within the family, so the more you can work together, the less chance the perpetrator(s) have of capitalising on your disagreement.

#### Parents' voices:

**“**It took a while for my husband and me to understand that our strength lay in our different approaches to the situation. We got through because we knew each other's hearts, so even when we were angry or disagreed, we remembered the heart behind them. My individual feelings weren't important. Our family was. **”**

It is normal for relationships between parents and teenage children to fluctuate between mothers and fathers, so if one of you has a closer relationship with your child at this time then be sure to talk to them about what's going on in their life. This doesn't mean the other parent is excluded or has no part to play, as you both share the same goal of keeping your child safe.

Dealing with child sexual exploitation may be doubly hard for the single parent, who has to manage missing from home episodes and the needs of other children by themselves. This is where seeking support from other parents in the same situation may be especially useful, either via the Pace online forum or during our Parent Network Days. It may be possible for Pace to find a befriending volunteer who can visit you to offer you a listening ear and time for you to offload.

## **You and your other children**

The effect of child sexual exploitation on other siblings is overlooked by many professionals working in the field. But Pace has learnt first-hand that older and younger siblings also suffer during their brother's or sister's abuse - not least because they are witnessing the same disruptive and out-of-character behaviour that you are as a parent.

You could help your other children by trying to be aware of how you react to them during a crisis with your exploited child. For example, some parents say that siblings exhibit strong attention-seeking behaviour because they are jealous of the attention directed at their exploited sibling. Some feel they always have to be the 'good' child as they can see the stress that is being inflicted on their parents by their sister or brother. It might be useful to recognise and reward your other children's normal behaviour. This may be through praising their school attendance and achievements, rather than constantly focusing on the exploited child's negative behaviour. Many parents also feel it is important to aim to spend quality time with each child on their own.

Other parents have reported that they became excessively controlling of their other children, and disciplined them more strictly than usual, out of fear that they will be targeted by the same perpetrator(s). It is true

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that siblings of exploited children are at greater risk of being exploited themselves, as the perpetrator(s) have a clear path of communication and association with them. A key strategy is therefore to be honest about what is going on in the affected child's life. You may worry that much younger siblings will not understand – or should not be made to understand – child sexual exploitation. But the reality is that younger siblings probably know more than you think they do. It is also better that they hear it from you than in the school playground. Older siblings may feel they want to help their exploited sibling exit the abuse, but parents caution against over-relying on them, advising that other children should be entitled to live a normal teenage life. This doesn't mean that an exploited child's relationship with an older sibling can't have a positive effect however.

### Parents' voices:

**“** Give time and energy to other children.  
All our energy had gone on our daughter  
– and we're paying the price for that now. **”**

## You and your health

Many parents find that the toll of seeing their child suffer sexual exploitation can affect their physical health, as well as their mental health. They may experience physical reactions such as headaches, insomnia and anxiety-related symptoms, such as heart palpitations. If your child is repeatedly going missing at night time, then you are obviously going to experience sleep deprivation, which can make you run-down and more susceptible to illness.

If you feel able, it can be useful speak to your GP about your situation. They may be able to refer to you to a counsellor, who will be able to advise you on coping strategies for these symptoms. Additionally, many parents are understandably reluctant to tell their employer about their difficulties, so it is important your GP has a record of the levels of stress you are experiencing. You may need to take time off work to look after your health, so having your GP on board may be crucial (see You and Your Work overleaf).

It may sound obvious, but parents who work with Pace constantly reiterate the importance of ‘me time’, even if it’s about finding one hour a week to do something to take your mind off the situation. ‘Protected’ time for exercise and relaxation may be instrumental to preserving your health until things become more stable again.

Some parents have found it particularly useful to contact their local carers’ support group. You can find out if there is such a service in your area at [www.carers.org/carers-services/find-your-local-service](http://www.carers.org/carers-services/find-your-local-service)

### You and your work

There is little doubt that the chaos caused by child sexual exploitation will filter through to you and your partner's work lives. Parents report difficulties such as their child making aggressive phone calls to the office or even charging into the workplace to demand money. Parents find it difficult to concentrate if they are spending most nights looking for their child and may have to take time off for meetings with their child's school, social worker or CSE specialist police team. Some parents report having to take a stream of telephone calls from the police, their child's social worker or school - which can be difficult in the modern open-plan office environment.

Yet parents also report that maintaining a job was a crucial part of managing their stress, with the workplace providing respite from conflict in the home and the opportunity to turn their mind to other things. Many have reported that they felt obliged to tell their managers or HR departments about their child's situation, and that they found it easier to juggle the demands and pressures once their employers knew what was going on. While many parents reported that they were treated sympathetically by management staff, there is always a risk that sharing information will bring more negative judgement.

Before you decide whether or not to talk to your employer, it is worth equipping yourself with a few basic employment rights. These include:

#### The right to ask for flexible working

If you are the parent of a child, you have the right to ask for flexible working if your child is:

- under 17
- under 18 and disabled

You must also have worked for your employer for at least 26 weeks and must be responsible for your child on a day to day basis.

Flexible working can include working part time, working school hours, working flexitime, home working, job sharing, shift working, staggering hours and compressing hours (when you work your total number of agreed hours over a shorter period). So if your child is going missing more frequently at weekends, you could request to work your usual hours Tuesday – Friday, leaving Monday free for you to deal with the repercussions of the weekend. Although you have the right to **ask** to work flexibly, your employer doesn't have to agree to it. However, they must give your request serious consideration and have a good business reason if they decide not to agree.

It is also important to know that you can only make one request to work flexibly per year. Your request must be in writing and should specify how you think the change in your working pattern will affect your employer's business and how this might work in practice.

Your employer must also follow a standard procedure for considering your request. This includes having a meeting with you. If your employer wants to turn down your request for flexible working, they must give their reasons in writing. You have the **right to appeal** if your request is turned down. You must do this in writing, within 14 days of getting your employer's decision. You should give your reasons for appealing and make sure your appeal is dated.

The other important right to be aware of is the right to ask for unpaid time off to deal with unexpected problems with the care of dependants. This may come in useful if you have a prolonged missing from home episode or particularly acute crisis.

### **Statutory sick pay**

If your own health is suffering from the stress of your child's exploitation, you may need to take time off work to recover. Most people will be eligible for statutory sick pay (SSP) from their employers. At the time of writing, the SSP award was £87.55 per week. In order to receive SSP you need to earn more than £111 per week (before tax) and be off sick for up to 28 weeks. Self-employed people do not qualify for SSP. Some employees will be entitled to more than this amount under contractual sick pay, which will be specified in your contract.

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Employees do not receive (SSP) for the first three days of sick leave, unless you had received it during the previous eight weeks. If this is the case then you qualify for SSP from the first day you are off work without having to wait for three days.

SSP is paid for up to 28 weeks. If you are off sick with gaps of eight weeks or less, your days off sick are added together to count towards the 28 weeks. If you are off sick more than once with more than eight weeks in between, the periods you were off sick are not added together and the 28 weeks starts being counted again each time. SSP also stops three years after you first become entitled to it, even if you have not had 28 weeks of the benefit. If your employment ends while you are on SSP, then your sick pay will stop too.

# Managing a crisis

### The boundaries dilemma

Sometimes it can feel like nothing is working. Your child is missing night after night, the police and social services don't seem to be doing anything to help and your home can feel like a war zone.

The singular most repeated thing that parents say to each other at our Parent Network Day is 'Don't give up' and to keep telling your child that you love them.

There may be occasions when safeguarding professionals advise placing 'boundaries' between you and your child, so the child knows that you find their association with the perpetrator(s) unacceptable. For example, some parents have been advised to lock up the house after a certain hour to signal that they will not tolerate their child staying out all night. But this may mean that your child is at greater risk of harm and that his or her last refuge has been taken away from them. So trust your own instincts as a parent, and do what you consider to be best for your child.

One of the most common queries our Parent Support Workers receive is what legal rights they have to stop their child leaving the home to meet the perpetrator(s). Unfortunately, this is a grey area and parents tend to receive conflicting advice from the police, depending on individual officers. One thing to bear in mind that physically restraining your child may well lead allegations to abuse against you - which plays straight into the hands of the perpetrator(s).

### **Parents' voices:**

**“** Many parents ask me why I didn't simply lock up my daughter and ground her. But it's far more complicated than that. The groomers had deliberately driven a wedge between us. Breaking the parental bond is a crucial part of their strategy. So if I came down heavy and punished her, I was simply being the evil, callous parent the groomers had portrayed me to be. **”**

**“** We tried locking the doors and hiding the keys. Once, when she started scrambling out of a window, I even called the police and had her arrested. It was the hardest thing I have ever done in my life, but I was desperately trying to keep my daughter safe. The men had manipulated her so successfully, that she only saw us as the enemy. **”**

### **The importance of a daily routine**

Many parents try to keep things as normal as possible by serving meals at the same time and watching usual family TV programmes together. They advise identifying shared activities you can do one-to-one with your child, for example taking out dual gym membership, or having a joint pedicure session. One parent spoke about the time she took her daughter on a surprise trip to the seaside. Despite grumbling that she wasn't a child any more all the way there, mum and daughter had a great day out on the beach and were able to put all their tensions to one side for the day. So try to stay persistent, even when your child resists.

# Practical strategies for missing from home episodes

Many parents report that their children repeatedly go missing at night time. Here are some suggestions to help you manage their absence and keep them as safe as possible: These are practical suggestions that may be amended according to your own resources:

- If your son is being sexually exploited, be sure to report him missing as early as possible. Anecdotal police evidence suggests that parents of boys wait longer than parents of girls before notifying the authorities.
- Always ensure that you, your partner and your child have enough battery life and credit in your mobile phone.
- Keep cash hidden in a drawer to pay for any emergency taxi fares.
- Make sure you have half a tank of petrol in your car for night-time searches.
- Make it clear to your child that they know what time you want them back home and where they have your permission to go. But tell them that no matter where they go, they must pay attention to street names, road signs or landmarks. That way they can always alert you to their whereabouts in an emergency.
- Agree on a ‘safe word’ they can text you if they feel they are in serious danger.
- Report your child missing to the police as soon as they fail to come home at the designated time and continue to report their absence throughout the night (see Pace booklet *Working With the Police*). Keep an up-to-date printed and also electronic photograph of your child in the home to pass on to police and try to make a note of the clothes your child left the house in each time you suspect they are meeting the perpetrator(s).

Try not to be angry with them when they come home after a missing episode. It's important for them to know that home is a safe place and that they are loved there. It may be more useful to have a conversation once they have had some sleep.

## **Practical toolkit for disrupting online abuse**

- Implement an internet curfew in your home and disconnect your router after a certain hour.
- Insist that all mobile phones and tablets are placed in a locked safekeeping box between certain hours.
- Make it clear that your child must not take their phone or any handheld device into the bathroom at any time.
- Talk openly about the risks of social networking and make sure your child understands privacy settings and how virtual identities are not the same as real life. This is especially important in the context of gaming.

Make it clear that your child must tell you if an indecent photograph of them has been circulated on the internet. Children who are blackmailed by intimate images quickly feel backed into a corner and are prevented from seeking help through shame and embarrassment. Report the image immediately to CEOP [www.ceop.police.uk/Ceop-Report](http://www.ceop.police.uk/Ceop-Report) or the Internet Watch Foundation at [www.iwf.org.uk](http://www.iwf.org.uk)

# If it becomes unsafe for your child to remain at home

Placing your child in temporary care in order to remove them from the abuse may sound like a drastic option, but with holistic support and a comprehensive return-home plan, it can break the child's attachment to the perpetrator(s) and help them begin their journey towards recovery. In cases where your child is at severe risk of harm, it may be the only option available.

## Care orders and parental responsibility

Children's social care can accommodate your child in the care system with your agreement or the agreement of anybody else with parental responsibility under section 20 of the Children Act. If you do not agree for your child to be accommodated in the care system, then social care may seek an interim care order or an emergency protection order from the court. If the court grants this without your permission, then the local authority will have parental responsibility over your child, which they share with you. If you do grant permission, then you retain full parental responsibility.

If your child is 16 or 17 years old, they may request to go in to care themselves, as they can agree to being accommodated under section 20. Be aware that a child's request to go into care requires some caution, as it may be that the perpetrator(s) have coerced them to seek a placement in order to maximise the abusers' access, or expose your child to a wider network of perpetrator(s). You should evidence your concerns to social care in order to ensure that this risk is mitigated as much as possible in your child's care plan.

### **Types of accommodation**

There are three types of accommodation that may be available, depending on resources. These are:

- A foster placement with a local authority foster carer in the carer's own home (this could be a family member or friend who the local authority will then assess as a foster carer)
- A residential children's home, from which the child may exit and enter freely within certain hours.
- A secure residential children's unit, with full restrictions on the child's liberty. This requires a special kind of application to the court.

There are two factors that play a significant role in influencing the effectiveness of a care placement: (i) whether or not the placement is 'out of area', thereby physically removing the child from the perpetrator(s), and (ii) whether or not the foster carers have undertaken specialist training in the care of sexually exploited children, or the residential home is designated a specialist CSE unit. Specialist status should indicate a high level of understanding of the issues faced by exploited child and indicate a more therapeutic approach.

### **Making the decision**

Best practice by social care should involve both the parents and the child in the decision making process when exploring a temporary placement. It is certainly advisable for you to listen to your child's views as much as possible, though this can be challenging when your child has been groomed to see you as the 'enemy.' If your relationship with your child is under severe strain, ensure that social care consult with you in your child's care plan. It is particularly important that their care plan has a detailed section on managing their return home (sometimes called an 'exit plan') and rebuilding their relationship with you.

It is strongly recommended that you seek legal advice when discussing temporary care placements and drawing up a care plan. The Family Rights Group can direct you to a solicitor dealing in such issues and also publish a series of useful guides on care procedures and your rights as a parent at [www.frg.org.uk](http://www.frg.org.uk). They also operate a free helpline on 0808 801 0366.

## Pros and cons of types of accommodation

There are so many variables in the types of accommodation available and the individuals involved, that a simple list of pros and cons provides only a very rough guide. Local authority budgetary constraints will also play a large factor in finding a placement for your child. The following guidance is therefore more explanatory than advisory. You may be able to talk to other parents about their experiences of placing their child in care on the Pace forum at [www.paceuk.info/forum](http://www.paceuk.info/forum), or at our Parent Network Days.

### Foster care

Key points for immediate consideration:

- Is there an available placement with a specialist foster carer, who has undergone training on sexual exploitation and receives support from the local CSE specialist multi-agency team? (You might be able to suggest that any identified carers agree to attend training provided by Pace, if they are taking place in your area within your timeframe).
- Will the foster placement be accompanied with a broad range of therapeutic interventions conducted by other agencies and specialists?

#### Pros

- Where it is successful, a foster placement can replicate the routine and warmth of family life.
- More consistency of care. Unlike residential care, the same person fulfils the caring role 24 hours a day, creating the potential for a lasting, trusting relationship.
- Carers should be fully supported by their key worker in children's social care with the opportunity for respite, should they require it.

#### Cons

- Carers may lack resources to disrupt contact with abusers or cope with missing episodes. Unless they have received specialist training, they may not grasp the complex psychology of grooming and the cycle of abuse. A carer with little or no experience in CSE may be unable to identify risks of renewed or new exploitation.

- Placements are more likely to be available in urban environments, where there is a higher incidence of CSE.
- If the placement is out-of-area, education will most likely be provided through local schooling. This may mean there is a delay until a local place becomes available, increasing anxiety and uncertainty for the child. Children who are placed in their own area would not move schools and the foster parent would be responsible for transporting them to and from their original school.
- Your child may be introduced to other children being exploited or/and the people abusing them, which may link them to a wider network of perpetrator(s).

### **Residential care**

Recent years have witnessed an increase in the number of residential units offering specialist care and facilities to sexually exploited young people. This brings obvious benefits such as staff trained in recognising and responding to CSE, as well as the opportunity for young people to bond with (and hopefully heal alongside) young people who have had similar experiences. A specialist unit in an area removed from the perpetrator(s) combines the benefits of the two factors highlighted on page 25.

#### **Pros**

- Smaller units (that only accommodate up to three young people, for example) may be similar to foster care in that they replicate family life in a domestic setting.
- Rural and remote locations may help disrupt contact with perpetrator(s).
- Larger units may provide in-house schooling and therapeutic support, reducing risk of contact with perpetrator(s).

#### **Cons**

- Changing staff personnel and shifts patterns may distress or destabilise your child, or create weak points in security.

## Keeping it together

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- Your child may come into contact with other exploited children and possible risk from their abusers.
- Parental visiting policies will vary between institutions - be sure to enquire when and how visits are facilitated and managed by staff.

### Secure residential unit

The most important thing to be aware of when seeking a secure placement is that your child may come into contact with children who are placed there because they present a risk to others. However this is the most effective option in terms of breaking contact with existing perpetrator(s) and preventing missing episodes, due to obvious constraints of movement.

#### Pros

- Child is physically unable to leave the institution or be accessed by anybody outside.
- All education and therapeutic services are conducted on-site.

#### Cons

- Secure children's residential units are very expensive. Local authorities usually prefer young people to be accommodated in foster placements and non-secure residential options first. Your child's needs would have to fulfil strict criteria in order to receive a placement.
- Secure accommodation orders can only be made on children who are under the age of 16. They cannot be made for a child who is over 16.
- Telephone calls and visiting hours will be subject to designated lengths and times and may be supervised by a member of staff.
- Your child may feel that they are being punished for being abused (especially in a non-specialist unit that accommodates young offenders).

## **Checklist for items on a care plan for temporary placements**

- Will my child be safer at this placement? Can they make the break from the abuse here?
- What are the risks of my child going missing here? How will these risks be mitigated?
- How will my child be supported? What sort of therapy will be available to them? Will it be group or peer therapy or one-to-one counselling? Is there any provision for music, drama or art therapy? How much mental health support will be available to my child?
- How I can maintain a relationship with my child during their placement? What are the visiting policies? Can I claim financial support for travel expenses?
- What happens if my child discloses the abuse when in care? What process is there for alerting other agencies in the event of disclosure? Will I be notified?
- Will the police continue/instigate an investigation once my child is taken into care? Who will keep me informed on any police/CPS decisions?
- Are there any other children in the placement? What kind of needs do they have? (NB other children's cases will be strictly confidential, but your social worker should be able to ascertain if your child is at risk of other children who have been exploited or have committed sexual offences).
- Does the foster carer/residential unit have a history of children going missing from it? (This may also be confidential, but your social worker should be able to ask for statistics and historical trends). What is the rate of staff retention or turnover?
- Can your child leave the accommodation easily? Is it located near known perpetrator(s) or CSE 'hotspots'? Where is the nearest train or bus station?
- Will my child be allowed unsupervised access to the internet or phones?

## **Keeping it together**

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- What provision is there for supporting my child with their education? How does the placement impact on any examinations they may be due to sit?
- What training have the carers received on CSE? How connected are they to other agencies responding to CSE in the area?
- If my child breaks their relationship with the abusers, how will the carer/unit support me in rebuilding my relationship with my child?
- How will my child's return home be managed? Would an intermediary placement, or bridging placement, be beneficial before they fully return home?
- How is my child's confidence being built up during the placement? How will I as a parent be supported?
- What happens if my child is unhappy in their placement? How can the risk of large amounts of movement between carers be minimised?

### **From a child's point of view**

Parents will be aware that the removal of your child from their family home and community into a new environment may cause more distress and trauma to your child, in addition to the trauma they have already suffered from the abuse. Whilst your resources will undoubtedly be stretched in dealing with social care, the police and your child's school - not to mention any other children or people you have to care for - it is worth remembering to tell them as often as possible that you are not rejecting them or sending them away out of anger. Placing them in care may be a last resort to keep them safe. You are doing so because you love them and want a better, safer future for them. Ultimately, they are going away in order to find a way to come back home.

# **Finding the right support for your child**

# Your child's sexual health

Child sexual exploitation brings inevitable risk of exposure to sexually transmitted infections (STIs). Should your child contract a STI it may prove vital for their future health that they receive the right treatment. There are specialist sexual health services available to young people that operate in strict confidentiality, so you should be prepared for your child to receive contraceptive advice or medication without you being consulted. For details of your nearest NHS young person's sexual health provider, please see [www.nhs.uk/Livewell/Sexualhealthtopics/Pages/Sexual-health-hub.aspx?WT.mc\\_id=110903](http://www.nhs.uk/Livewell/Sexualhealthtopics/Pages/Sexual-health-hub.aspx?WT.mc_id=110903)

Brook is a national provider of confidential sexual health services for young people which also has local branches. You can find out where your nearest one is via [www.brook.org.uk](http://www.brook.org.uk)

## Sexually transmitted infections

It is very important that parents of sexually exploited boys encourage their sons to engage with sexual health services too. The Yorkshire-based project BLAST works exclusively with boys and young men on sexual exploitation and can be contacted on **0113 244 4209** and [www.mesmac.co.uk/blast](http://www.mesmac.co.uk/blast)

Ideally, your child should be tested regularly by a young person's sexual health advisor at a specialist clinic. This will ensure your child is best supported in the event of being diagnosed positive and that treatment is carefully monitored. Specialist sexual health workers will reinforce the importance of regular check-ups and treatment, as young people constantly exposed to symptomless carriers are at risk of repeated re-infection.

However, many parents find it difficult to persuade their child to engage with such services. In this case, you may choose to purchase home tests for sexually transmitted diseases, such as chlamydia. It is possible a child may be more willing to test in privacy and then agree to seek medical treatment.

## **Contraception, pregnancy and abortion**

Your daughter may be reluctant to discuss any contraception with you, but it can be worth explaining to her that an unwanted pregnancy would bring her a great deal of stress. It may be a good idea to keep a pregnancy test at home, as your daughter will have more options the earlier a pregnancy is discovered. For example, should your daughter request an abortion, it is possible to terminate a pregnancy through medication rather than surgery, but only before the ninth week of pregnancy.

It is important that the doctors and nurses know about the circumstances of the conception, as abortion records may be used as evidence in a police investigation.

## **Pregnancy and multi-agency intervention**

If your daughter continues a pregnancy while she is still being sexually exploited, then there is likely to be an escalation in social care intervention throughout the pregnancy. Social care will almost certainly conduct an assessment into the safety of the unborn child remaining with your daughter after the birth, so you may consider seeking legal advice on your rights as parents and potential grandparents. Whilst an unplanned teenage pregnancy can be difficult for parents to come to terms with, many parents who come to Pace have helped their daughters raise happy, healthy grandchildren, despite the circumstances of their conception. You will be able to access a unique support system through them.

### **Parents' voices:**

**“** Our daughter went through with the pregnancy and kept the child, which forced her to break contact with the groomers. Our grandson is truly a joy and she is a fantastic mother. But we believe that if early intervention was given then she may not have missed out on an education and a normal teenage life. **”**

# Your child's mental health

As a parent, you will be one of the first people to notice when your child seems particularly disturbed, distressed or depressed. Your first point of contact should be your GP, who can refer you to the local Child and Adolescent Mental Health Services (CAMHS). It is important to ask for help as early as possible as services are very much in demand and waiting lists are long.

## Understanding the four tier system

CAHMS services are organised in a four tier strategic framework. The first three tiers are commissioned by local clinical commissioning groups, while tier four is commissioned nationally by NHS England. Tier one refers to services offered by universal service providers such as school nurses and GPs, rather than specialist mental health workers. Tier two and three involves assessment and treatment from a group of people from a wide range of backgrounds, including psychologists, psychiatrists, social workers, nurses, occupational therapists, counsellors, art therapists and family therapists.

Tier four encompasses specialised day and inpatient units for children with severe mental health problems. However, provision at this level is extremely scarce and because services are commissioned nationally, may mean that your child has to be treated outside of your home county. Note that severe mental health problems may be treated at secure mental health units, which are different to secure children's homes (see page 28).

Although CAMHS are expected to work with children and young people up to the age of 18, some services will only see young people aged 16-18 if they are in full-time education. You will need to ask your GP at what age your local CAMHS service stops. If it stops at 16, your child will need to be seen by the adult mental health team.

The charity YoungMinds, which works to improve the emotional wellbeing and mental health of children and young people, has a specialist telephone helpline for parents who are worried about their children's mental health available Monday to Friday 9.30am-4pm on **0808 802 5544**  
[www.youngminds.org.uk/for\\_parents](http://www.youngminds.org.uk/for_parents)

## **Private provision**

If you can afford to pay for private provision, try to find a private practitioner who specialises in child mental health and sexual abuse recovery. They should be registered with a professional body such as the British Association for Counselling and Psychotherapy ([www.bacp.org.uk](http://www.bacp.org.uk)). Some counsellors or mental health professionals may be relatively unfamiliar with the damaging effects of child sexual exploitation upon a child or young person and also upon family dynamics. It may be helpful to refer them to an article written specifically for counsellors on this topic at [www.paceuk.info/counselling](http://www.paceuk.info/counselling)

### Your child's education

Children who are sexually exploited often go missing regularly from school, causing attainment levels to decrease and subjecting them to disciplinary measures. However your child's school has a legal duty to safeguard your child and should be made aware that their behaviour is a symptom of sexual exploitation and therefore requires a safeguarding response rather than a disciplinary response. Most schools have a pastoral care or family liaison team who can hold meetings with you to keep you aware of any safeguarding decisions around your child.

If the perpetrator(s) are accessing your child through school or on their route to and from school, then you have the right to withdraw your child from school and temporarily home-educate them. However you must inform both your child's school and local authority. This decision will also impact severely on your own employment (see *Flexible Working Rights* page 16).

If your child has been excluded from school on a fixed term or permanent basis due to the effects of exploitation, you are legally entitled to challenge the head teacher's decision. The Coram Children's Legal Centre publish information on the appeal procedures at [www.childrenslegalcentre.com/index.php?page=school\\_exclusions](http://www.childrenslegalcentre.com/index.php?page=school_exclusions)



# **Responding to long-term CSE**

### For acute cases of CSE

Sadly there are parents in the Pace network whose children have been exploited for a very long period of time. Despite the difficulty of witnessing your child in such an adverse situation, you mustn't give up hope that a different future is possible. Be persistent and determined. Ensure all the professionals who come into contact with your child - GP, sexual health services, schools, police and social care - are aware of your concerns.

It is still important to keep rigorous diaries and notes of all incidents, as they will be invaluable in any future investigations. Even if your child seems a long way away from acknowledging their abuse, take courage from the fact that 2012 saw the first ever 'victimless' trial, in which a man was found guilty of sexual offences against a child without the child having to give a statement or attend court - thanks purely to the strength of forensic evidence.

Taking care of your own mental health is also important. Being the parent of a sexually exploited child can place you under enormous emotional stress, and may lead to feelings of anxiety, depression, or to flashbacks of traumatic incidents. Psychological support can be accessed through your GP, for example by referral to a counsellor via the Improving Access to Psychological Therapy (IAPT) scheme, which is a government funded NHS programme. You may be able to access family therapy, through Child and Adolescent Mental Health Services (CAMHS), in order to help you try to come to terms with your shared experiences and to begin to put your family back together again. Alternatively, you may be able to access free counselling through your employer, or, if you can pay, through a private counsellor (preferably one familiar with the effects of child sexual exploitation and one registered with a professional body).

## **Where can I find out more about Pace?**

You can download all of our booklets and leaflets from the website or order them by contacting us at [info@paceuk.info](mailto:info@paceuk.info)

Pace (2013) **Supporting Families Through The Court Process.** Leeds: Pace.

Pace (2014) **The Relational Safeguarding Model: Best Practice in Working With Families Affected by Child Sexual Exploitation.** Leeds: Pace.

Pace (2014) **Working with the Police: A guide for parents whose children are sexually exploited.** Leeds: Pace.

Emma Palmer and Peter Jenkins (2014) **Parents As Partners in Safeguarding Children: An Evaluation of Pace's Work in Four Lancashire Child Sexual Exploitation Teams.** October 2010–October 2012. Leeds: Pace.

Irene Ivison (1997) **Fiona's Story: a tragedy of our times.** London: Virago.

Emma Jackson (2010) **The End of My World: The Shocking Story of a Young Girl Forced to Become a Sex Slave.** Reading: Ebury.

You can also download our **2012/13 Annual Review** at [www.paceuk.info](http://www.paceuk.info)

## **We're here to help**

Parents Against Child Sexual Exploitation (Pace) is the leading charity for parents and carers whose children are sexually exploited.

We're working with and for parents to help them help their children exit damaging and exploitative relationships. We do this by forming partnerships with police and local safeguarding children boards, providing training for safeguarding professionals and campaigning for greater recognition of parents' needs and rights to safeguard their children.

## **Keeping it together**

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Everything we do is underpinned by the experience of affected parents and evidence-driven research.

We offer a free, confidential telephone support service for parents, as well as a secure on-line forum where parents can contact each other anonymously for advice and information. We hold a number of Parent Network Days throughout the UK during the year for affected parents to meet and share coping strategies.

Please let us know if you'd like to sign up to our newsletter, which keeps you up to date with current research and news, highlighting new research and projects.

### **Tell us what you think of our booklet**

Please send your views and feedback to [info@paceuk.info](mailto:info@paceuk.info) or write to us at **Pace, Unit 10, Waverley House, Killingbeck Drive, Leeds, LS14 6UF**.

This booklet was written by Louise Vaughan, Pace Communications Manager. It was written in consultation with parents whose children have been sexually exploited, and the author is deeply grateful for their time and amendments. It was approved by the trustees.

## **Get involved**

You can help other parents bring an end to the misery of child sexual exploitation by:

- Volunteering as a befriender.
- Supporting our campaigns.
- Taking part in a fundraising event.
- Making a donation.
- Recommending our training to an organisation.

To get more actively involved, please call us on **0113 240 30 40**

or email us at [info@paceuk.info](mailto:info@paceuk.info)

or go to [www.paceuk.info](http://www.paceuk.info)

# **Useful contacts**

## **Pace**

**Switchboard** 0113 240 3040  
**Parent Referral No** 0113 240 5226  
**Website** [www.paceuk.info](http://www.paceuk.info)

**Crimestoppers** 0800 555111 [www.crimestoppers-uk.org](http://www.crimestoppers-uk.org)

**Victim Support** 0845 30 30 900 [www.victimsupport.org.uk](http://www.victimsupport.org.uk)

**Rape Crisis** 0808 802 9999 [www.rapecrisis.org.uk](http://www.rapecrisis.org.uk)

**CEOP** 0870 000 3344 [www.ceop.police.uk](http://www.ceop.police.uk)

**Childline** 0800 1111 [www.childline.org.uk](http://www.childline.org.uk)

**Missing People** 116 000 [www.missingpeople.org.uk](http://www.missingpeople.org.uk)

**NSPCC** 0808 800 5000

**BLAST**  
(for boys and young men) 0113 244 4209

**YoungMinds** 0808 802 5544

**Family Rights Group** 0808 801 0366

**£4**

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# Pace

Parents against  
child sexual exploitation

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