

**Drake and Morice Town Primary Academies**

**Sexually harmful and problematic behaviour policy**

**The NSPCC (2018) suggest harmful sexual behaviour include:**

* Using sexually explicit words and phrases
* Inappropriate touching
* Using sexual violence or threats
* Full penetrative sex with other children or adults.

**Technology assisted HSB**

Technology assisted HSB (TA-HSB) is sexualised behaviour which children or young people engage in using the internet or technology such as mobile phones. This might include:

* viewing pornography (including extreme pornography or viewing indecent images of children)
* sexting / sharing nudes / semi nudes

Children and young people who develop harmful sexual behaviour harm themselves and others

1. Children who display harmful and/or problematic sexual behaviour

Whenever a child has been sexually harmed by another child, all staff must be aware of their responsibilities to both the alleged victim and the young person who is alleged to carry out the sexually harmful behaviour. The multi-agency management of both cases must reflect this. Children who harm others may pose a risk to children other than their present victim and the safety of their victim and other children is of paramount importance. However, children who behave in this way are likely to have considerable levels of unmet need themselves. Evidence suggests that children who harm others may have suffered considerable disruption in their lives, been exposed to violence within the family, may have witnessed or been subject to physical abuse or sexual abuse, have problems in their educational development and may have committed other offences. Such children are likely to be children in need; some will have suffered significant harm and may be in need of protection themselves. Children who harm others should be held responsible for their harmful behaviour while being identified and responded to in a way which meets their needs as well as protecting others.

Children and who display harmful sexual behaviour are often developing their own sexuality and understanding of relationships. Research clearly indicates that good assessment and early intervention, which addresses risk and builds resilience for the child or young person, produce the best outcomes for this kind of worrying behaviour.

Considerable diversity exists among children and young people who have harmful/problematic sexual behaviours. This diversity applies to their own backgrounds and experiences, the motivations for and the meanings of their behaviours and needs. It is not inevitable or highly likely that children with sexual harmful behaviours will go on to perpetrate sexual abuse in adulthood. A number of factors indicate a higher risk and for this reason it is preferable that appropriate assessments are carried out on children to target resources at those most likely to present the highest risk.

2. Principles of working with children who have harmful or problematic sexual behaviour

* When we work with children who harm others, we must 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 and young people;
* The needs of the children and young people who sexually harm should be considered separately from the needs of their victims;
* Evidence suggests that children who abuse 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.
* The reasons why young people sexually abuse are multi-faceted and to explore these further, **a full risk assessment and an assessment of need must be carried out in every case;**
* Children who sexually harm others should be held responsible for their abusive behaviour;
* Early and effective, intervention with children and young people who sexually harm others may play an important part in protecting children, by preventing the continuation or escalation of abusive behaviour;
* Children who sexually harm others have a right to be consulted and involved in all matters and decisions that affect their lives. Their parents have a right to information, respect and participation in matters that affect their family;
* The complex nature of the problem requires a co-ordinated, multi-disciplinary approach, which addresses both child protection and criminal justice issues.

3. A Continuum of Sexual Behaviours from Healthy to Harmful

Not all sexual behaviours displayed by children are healthy; some are harmful and some fall within a mid-range (problematic) which are not the most worrying but nevertheless cause an issue. The term problematic is used to indicate that the behaviour is problematic for someone whether for the child themselves or someone else who is uncomfortable with the invasion of their personal space by a child/adolescent with little sense of boundaries.

The following behaviours give a general indication of categories and are more applicable to younger children:

Healthy sexual behaviours are:

* Mutual;
* Consensual;
* Exploratory and age appropriate;
* No intent to cause harm;
* Fun, humorous;
* No power differential between participants.

Problematic sexual behaviours are:

* Displaying behaviours not age appropriate - e.g. invasion of personal space, sexual swear word in very young children;
* Some ‘one off’ incidents of low-key behaviours such a touching over clothing;
* Incidents where there is peer pressure to engage in the behaviour e.g. touching someone’s breast, exposure of bottom;
* Behaviours are spontaneous rather than planned;
* They may be self-directed such as masturbation;
* There are other balancing factors such as lack of intent to cause harm, or level of understanding in the young person about the behaviours, or some remorse;
* The child targeted may be irritated or uncomfortable but not scared and feel free to tell someone;
* Parental concern and interested in supporting the child to change.

Harmful sexual behaviours are:

* Not age appropriate;
* Elements of planning secrecy or force;
* Power differentials between young people involved such as size status and strength;
* Targeted children feel fear anxiety discomfort;
* Negative feelings are expressed by the young person when carrying out the behaviour e.g. anger aggression;
* The child does not take responsibility for the behaviour and blames others or feels a strong sense of grievance;
* Incidents are increasing in frequency and the young person’s interest in them is disproportionate to other aspects of their life;
* They are not easily distracted from the behaviour, it appears compulsive and is persistent despite intervention.

There are often difficult behaviours such as conduct disorder, problems with anger management, anxiety, clingy, aggression, disruption, poor peer relationships in evidence alongside sexually inappropriate behaviours. Neglect emotional abuse and poor attachments with parents and siblings, little empathy, disrupted patterns of care and loss of significant person and lack of role models are often features in harmful sexual behaviours.

*(The Brook Sexual Behaviours Traffic Light Tool should be used as guidance to assess sexual behaviours. This, alongside any information that the school hold and professional judgement.*

4. Action to take if Academy staff believe a child is displaying or has displayed sexually harmful or problematic behaviour

Report to the designated safeguarding lead **Pauline Donnellon (MT) or Susie Carroll (D)** or in their absence **a member of the safeguarding team** immediately, who will follow the mandatory Child protection reporting process after completing the Brook Scale Screening tool.

In addition, assess completion of a risk assessment of the child (in conjunction with other agencies) and/or a specific risk assessment to develop a risk management plan to support and safeguard all stakeholders. These assessments will be constantly under review as and when new information is acquired.

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