Executive Summary

Background

In September 2013, a Ministerial Summit was held on the theme of child sexual exploitation (CSE) in Northern Ireland. The Police Service of Northern Ireland (PSNI) referred to Operation Owl, an investigation of allegations of CSE in Northern Ireland, which had resulted in a number of adults being interviewed and some being arrested.

Two weeks later, the then Minister for Health, Social Services and Public Safety, Edwin Poots, announced three actions to address this issue: an ongoing PSNI investigation focusing on 22 children and young people; a thematic review of these cases by the Safeguarding Board for Northern Ireland (SBNI); and an independent, expert-led inquiry into CSE in Northern Ireland, to be commissioned by the Minister for Health, Social Services and Public Safety and the Minister of Justice. The Minister for Education agreed that the Education and Training Inspectorate (ETI) would enjoin the Inquiry in relation to schools and the effectiveness of the statutory curriculum with respect to CSE.

The Inquiry was to focus on both children and young people living at home in the community and those living in care. This is an executive summary of the report of this Inquiry.

On 5 November 2013, Kathleen Marshall, former Commissioner for Children and Young People in Scotland, was appointed to lead the Inquiry and chair an Inquiry Board to which five other members were appointed: Sheila Taylor, Chief Executive of the National Working Group (NWG) for Child Sexual Exploitation in the United Kingdom; Fiona Smith, Children and Young People’s Adviser from the Royal College of Nursing; Glenn Houston, Chief Executive, The Regulation and Quality Improvement Authority (RQIA); Noelle Buick, Chief Inspector, Education and Training Inspectorate (ETI); and Derek Williamson, Inspector, Criminal Justice Inspection (CJI).

The Inquiry was managed and supported by the Senior Project Manager and Administrative Team Supervisor from the Reviews Directorate in RQIA.

Terms of Reference

The Terms of Reference of the Inquiry were to:

- Seek to establish the nature of child sexual exploitation (CSE) in Northern Ireland and a measure of the extent to which it occurs.
- Examine the effectiveness of current cross sectoral child safeguarding and protection arrangements and measures to prevent and tackle CSE.
- Make recommendations on the future actions required to prevent and tackle CSE and who should be responsible for these actions.
- Report the findings of the Inquiry within one year of its commencement.
In addition, the Inquiry should:

- Consider specific safeguarding and protection issues for looked after children, taking into account the ongoing thematic review by the Safeguarding Board for Northern Ireland (SBNI).
- Seek the views of children and young people in Northern Ireland and other key stakeholders.
- Engage with parents to identify the issues they are facing and seek their views on what needs to be done to help them keep their children safe from the risk of CSE.

Exclusions:

The Inquiry was not to focus on the circumstances and/or responses to the 22 children who were part of the ongoing police investigation known as Operation Owl. This would be the focus of a separate Thematic Review being undertaken by the SBNI. However, available learning generated from this Thematic Review would be taken into account.

Methodology

In November 2013, initial meetings were held with relevant agencies to discuss the proposed methodology and identify key issues. A Call for Evidence was issued on 11 December 2013, with a closing date of 18 March 2014. A total of 50 submissions were received from organisations and individuals. Oral evidence was heard from some individuals and follow-up meetings were held with a number of agencies. The Youth Panel of the Commissioner for Children and Young People in Northern Ireland (NICCY) met Kathleen Marshall to discuss how best to communicate with young people.

The Inquiry commissioned consultations with young people and parents:

- Children in Northern Ireland (CiNI) - to consult groups of young people through its Participation Network
- Voice of Young People in Care (VOYPIC) - to consult looked after children/young people
- Parenting NI - to consult parents

Include Youth was later commissioned to form a group of young people to reflect on issues that had arisen as the Inquiry moved towards formulating recommendations. Many of the young people had been involved in earlier groups.

RQIA, CJI and ETI undertook three workstreams:

1. RQIA issued self-assessment questionnaires to five health and social care (HSC) trusts, which was followed by meetings within each trust area: senior management, managers and frontline workers from gateway, family support, looked after children (LAC) and 16 plus teams were represented. Further meetings and focus groups were held with health professionals and professionals working across health and social care.
2. ETI undertook a thematic survey of 20 post primary schools and four special schools. Children from years 10 and 11, and their parents or carers were involved. Cluster group meetings were held with professionals working across the education and training sector.

3. CJI conducted semi-structured interviews and focus groups with frontline and management staff from organisations such as PSNI, Northern Ireland Prison Service, Northern Ireland Probation Service, Northern Ireland Courts Service, Youth Justice Agency and the Department of Justice (DOJ).

Taking into account the commissioned consultations and the ETI survey, the Inquiry consulted 580 young people and 795 parents. The Inquiry paid ongoing attention to the equality categories set out in Section 75 of the Northern Ireland Act 1998. The Inquiry report includes an analysis of human rights issues relating to children and young people.

The Nature of CSE in Northern Ireland

CSE can range from the planned or systematic exploitation of young people, to worrying relationships between young people under 16 and adults who are a few years older. It includes party houses where drugs and/or alcohol may be provided free in the first instance, but the young people enticed to the venue are later expected to pay for it with sex. It can be a relationship that starts off looking like a consensual one, but develops into an expectation that the young person has sexual activity with the partner’s friends and associates. It may involve the young person being transported from place to place. Money may also change hands.

Increasingly today, children and young people can be exploited through the internet and social media; through grooming that may or may not lead to face-to-face contact; or through the generation and sharing of indecent images of the young person (sexting), which can become the focus of bullying and/or blackmail. CSE can affect males and females, but males are less likely to disclose or be identified as victims.

Many of those consulted by the Inquiry expressed the opinion that Northern Ireland was not experiencing the type of organised exploitation seen in Rochdale or Rotherham.

Nevertheless, the Inquiry received accounts of organised gangs linked with trafficking and drug dealing. Trafficking into, out of, or within Northern Ireland, can be a form of CSE, and drug dealing is often associated with CSE. Northern Ireland does not have the type of street gang culture identified in reports by the Office of the Children’s Commissioner for England, as being associated with some forms of CSE.

The particular Northern Ireland dimension reported to the Inquiry was the involvement of powerful individuals with purported links to paramilitary organisations. Reports about this came from individuals, organisations and professionals. No-one suggested that CSE was a targeted activity of paramilitary groups. It was a case of individuals using the authority of their paramilitary links and the fear it engendered, to exploit children and young people. The Inquiry was told that there were bars dominated by members of paramilitary groups, where there were lock-ins after hours and sexual exploitation took place. It is important to state that no-one identified names or locations in relation to these events. Some told us that they feared for their lives if they were suspected of having done so.
The party house scenario featured highly in discussions with agencies and young people. It is difficult to estimate the extent to which these are occasions for CSE because young people do not consider themselves as victims, even when they can acknowledge the vulnerabilities of friends and peers.

Parties are sometimes attended by, or organised by, adults. These were described as being mostly individuals or groups, rather than organised gangs, who coalesce around vulnerable children.

Alcohol and drugs render the young people vulnerable. Many adults reported their concerns about the extent of underage drinking and their experience that licensing laws were not routinely enforced. There was repeated reference to the increasing problem of legal highs. These are substances that produce effects similar to other drugs, but they are not subject to the same regulation. Their composition changes frequently to avoid them falling into restricted categories.

Developments in communication technology, while bringing many benefits, have increased the vulnerability of children. Even very young children have accessed pornography and tried to act it out. Young people’s views about what is normal are affected by this and by other messages from the media. This has helped shape what some refer to as a new normality amongst young people, involving an expectation of multiple sexual partners, and sexual activity in circumstances where the existence of consent is often questionable.

Social media allows young people to extend their networks very easily and communicate with a wide range of people unknown to their parents. This vulnerability can be exploited by adults with malicious intent. Sexting is reported to be widespread in schools. Often these images will remain private to the sender and recipient, but they can be easily shared, with serious consequences for the young victim. Children with disabilities can be particularly affected by exploitation involving social media as many rely on this as a central and valuable tool for social engagement. Lesbian, gay, bisexual and transgender (LGBT) young people report deficiencies in relevant sex education. This, together with the limited opportunities for associating with other LGBT young people, due to cultural attitudes, renders them vulnerable to exploitation both online and in city venues.

The population profile of Northern Ireland is becoming more diverse. The Inquiry recognises it is difficult to engage with black and minority ethnic communities on this sensitive subject. Some of the new, immigrant communities bring cultural acceptance of relationships between young girls and older men.

**Vulnerability to CSE**

In 2011, Barnardo’s NI published a report, Not a World Away: The Sexual Exploitation of Children and Young People in Northern Ireland. The research on which it was based included application of a risk assessment tool for CSE. This was later adapted for use by HSC trusts in Northern Ireland. The tool identified a number of underlying vulnerabilities that can facilitate CSE, as well as risk indicators identified as moderate or significant.
Underlying vulnerabilities include: abuse or neglect within the family; breakdown of family relationships and the lack of any substitute positive relationship; family history of domestic abuse, substance misuse or mental health difficulties; low self-esteem; and isolation from peers or social networks. The issue of bereavement is also recognised as a potential vulnerability.

Moderate risk indicators include: staying out late; multiple, unknown callers; use of the internet or a mobile phone that causes concern; sexual health issues; having peers or siblings who have been sexually exploited; misuse of alcohol or drugs.

Young people might also exhibit expressions of despair and be disengaged from school. They may be living independently and failing to keep in touch.

Significant risk indicators include: relationships with controlling adults that may involve physical or emotional abuse; unexplained amounts of money or expensive items; frequenting party houses or areas known for sex work; or entering or leaving vehicles driven by unknown adults. Periods of going missing overnight or longer heads up the list of significant risk indicators.

The significance of going missing from care had been identified in a 2006 report by the Social Services Inspectorate in Northern Ireland. Incidents have been recorded since 2005, but the information was not collated or analysed. In 2008, Michelle McIlveen, MLA, asked a series of questions of ministers, seeking to identify the numbers going missing from each trust area. The inability of the authorities to give this information led ultimately to an agreement to monitor the figures and to put in place an associated action plan. The Inquiry has ascertained that some of the actions in the plan have been completed, but others remain outstanding. In particular, there is a lack of analysis and oversight to form a strategic overview. The Inquiry received figures from a number of sources relating to children missing from family homes and from care, but the figures have different criteria and it is difficult to reconcile them to obtain a clear picture.

The Inquiry concluded that the vulnerability factors for CSE are well known. There is a particularly significant link with episodes of going missing. There is already work being undertaken to address some of the matters identified as underlying vulnerabilities for CSE. It is important that whatever is done in response to CSE should build upon this, rather than be seen to be in competition for time and resources. The identification of CSE as an emerging, developing and growing threat to children should give extra impetus to these existing commitments.

The Extent of CSE in Northern Ireland

It is widely acknowledged that, because CSE is not yet a recognised category for most official purposes in Northern Ireland, there are few definite figures that can be relied on to give a measure of its extent. The Inquiry drew largely upon the risk assessments; CSE notifications made to RQIA by HSC trusts; figures held by Operation Owl; and the caseload of the Barnardo’s Safe Choices Service, which specialises in CSE issues. These showed that between 100 and 145 children are currently identified as at significant risk of CSE. However, the number actually experiencing CSE is likely to be significantly higher. In discussions about the extent of CSE in Northern Ireland with various stakeholders, including the education sector, the most common response was that what is known is likely to be the tip of the iceberg.
It was confirmed by respondents that, despite the fact that the Operation Owl cases involved children known to social services, CSE was a part of life for other children, and any child could be vulnerable to it. Agencies referred to increasing numbers of CSE cases relating to children from family environments, with no identified vulnerabilities.

The Inquiry concluded that, as awareness increases, it is likely that more cases of CSE will be identified. CSE must be regarded as a significant and growing threat to the welfare of children and young people. However, it is important to avoid a panic that leads to an unhealthy repression of and limitations on young people’s lives and expectations of human relationships. The Inquiry received several comments from parents and young people about the need to avoid scaring children about the possibilities of exploitation. Young people were adamant that the response should be largely about empowering young people, rather than giving adults more power to control them. The response to the growing threat of CSE must be targeted and proportionate.

**Safeguarding Looked After Children**

Looked After Children were not the primary focus of the Inquiry, but are recognised as a particularly vulnerable group. Experiences prior to entering care often make them vulnerable, but the experience of care, particularly residential care, can increase this vulnerability. They may meet other young people with a history of exploitation who introduce them to exploitative networks. Concern has been expressed about the ability of staff in residential care to control behaviour and protect young people. Police officers expressed frustration about the time spent returning young people who have left a care home without permission. Staff recounted the measures they adopted to dissuade young people from leaving and to follow them when they did. Management were adamant that their staff were well trained and supported, while acknowledging the difficulty of the task.

Young people discussed the dynamics in residential care and compared it with foster care and family life. There was consensus, amongst them and adults, that the most important protective factor was the existence of a trusting relationship with a caring adult. HSC trusts said they were committed to facilitating that. Some emphasised that good relationships can withstand an element of challenge. A professional working in a residential setting said, “We care enough to say no”. Mindful of the difficulties staff face in balancing the rights of young people regarding care and control, the Inquiry’s report includes an analysis of these issues in terms of children’s rights. It notes that a child’s right to be protected will be most effectively secured if their views are taken into account about how matters of care and control should be addressed.

Some believe there should be greater resort to physical restraint and secure accommodation in order to keep children safe. The Inquiry is firmly of the view that these must not be regarded as everyday responses to situations in children’s homes. There will be some situations in which these are justified. Some young people appreciate the feeling of safety within secure facilities. This sends an important message about what we need to provide to keep young people safe during vulnerable periods. Young people with experience of CSE should be involved in discussions about what a safe space would be like, drawing on models of good practice.
Preventing and Tackling CSE

There is a need for a comprehensive and well-resourced approach to awareness raising about CSE. It cannot be tackled by statutory agencies alone. Young people, parents, members of the public, those working in the community, such as taxi drivers, hoteliers and the entertainment and leisure industry, all need to be involved. SBNI has commenced an awareness raising campaign in line with their business plan in which CSE is identified as a priority. This is welcome, but many told the Inquiry that something more comprehensive, such as a public health campaign, was required. The language and approach need to be responsive to what young people and parents have said about how that message is communicated.

Northern Ireland’s existing commitment to early intervention and prevention should be reaffirmed and its implementation strengthened. Young people should be involved in a review of youth services, to promote provision of services that provide attractive and exciting alternatives to situations that could render them vulnerable to CSE.

Schools have been identified as having a key role in raising awareness, preventing, identifying and reporting CSE. Staff from the education and health sectors, and in particular the Northern Ireland Ambulance Service, say they need more training, and a simple tool to help them identify and report CSE. They need clear pathways for reporting 24 hours a day, seven days a week. Having feedback to let them know that their report was valued and acted upon will give them the confidence to make further reports.

In some communities, and amongst many of the young people, there remains distrust of the statutory authorities, particularly the police. Whilst the police and the criminal justice system have made improvements in recent years, victims are often reluctant to engage for fear that the system will not treat them fairly. There are few prosecutions and convictions for sexual offences against children and this exacerbates the reluctance to report and to engage.

There have been advances in methods of disrupting CSE by using mechanisms such as sexual offences prevention orders, risk of sexual harm orders and harbourers warning notices. Arrangements for statutory and voluntary agencies to share information about those who might pose a risk to children have been the subject of a recent judicial review, and there remains some uncertainty about the circumstances in which such information can now be shared.

There are some excellent recent examples of collaborative working amongst agencies in Northern Ireland relating to CSE. These can provide learning for a review of collaborative working. There are too many agencies and partnerships in Northern Ireland covering overlapping issues. When SBNI was established in 2012, there was a commitment to a planned review of the organisation, and such a review may provide an opportunity for a wider perspective.

At operational level, while there are examples of good joint working, this is often hampered by different perspectives from the organisations involved and lack of joint training on issues such as the response to children going missing.
Problems also arise from: the fact that the boundaries of HSC trusts and PSNI districts are not co-terminous (although the Inquiry understands this issue is being addressed); the lack of an information-sharing protocol for agencies; the difficulties of agencies having different systems, manual and electronic, to facilitate information sharing; lack of consistency in terminology, information gathering and analysis; and impressions that the contribution of voluntary agencies is undervalued.

There are a number of services to help promote recovery from CSE, but they need to be joined up in a strategic approach to ensure equality of access. Help should also be provided for adults abused as children, in part because the impact of this can impede their ability to support and protect their children from CSE.

The law should be strengthened in a number of ways, in particular, with a view to ensuring that protection is extended to all children up to the age of 18, in line with international standards. The definition of grooming should be strengthened, as well as some legal provisions about who has to prove the age of a child when a sexual offence has been committed.

Recommendations

The Inquiry made 17 key recommendations and a further 60 supporting recommendations.

The 60 supporting recommendations add substance and detail to the key recommendations listed, including the issue of children going missing from home or care. They address issues relating to disability, ethnicity and sexual orientation. They recommend a joint approach to the problem of underage drinking, including education and enforcement. A need for further collaboration with the Republic of Ireland is identified in terms of information sharing. There are particular recommendations directed at the issues of forced marriage and private fostering. A number of recommendations relate to the particular role of schools and one is aimed at strengthening child protection in non-statutory education settings. The recommendations promote further support for residential workers, foster carers and vulnerable young adults.

The key recommendations are:

**Key Recommendation 1:** In response to the reality of CSE identified in this report, the Department of Health, Social Services and Public Safety (DHSSPS) should direct the Public Health Agency to undertake a public health campaign on CSE-related issues. This should complement the work being undertaken by SBNI.

**Key Recommendation 2:** The Inquiry encourages the PSNI to pursue its commitment to strengthening relationships with communities and with young people as a priority in the context of the current climate of austerity.

**Key Recommendation 3:** The DHSSPS, in conjunction with DOJ, should develop guidance for parents and carers, including foster carers and residential workers, on how best to capture information and/or evidence when a child returns from a period of being missing or is otherwise considered to be at risk of CSE.
Key Recommendation 4: SBNI’s developing plan for data collection should include a commitment to collation and analysis of the data in a way that will facilitate a strategic response to CSE.

Key Recommendation 5: The DHSSPS should explore the benefits of amending or adding to standards for inspection of children’s homes to ensure that they:

a) promote a culture conducive to respect for the best interests of the child; and
b) take account of the specific needs of separated and trafficked children and those affected by CSE.

The DHSSPS should issue a circular and associated guidance stating how these issues should be taken forward.

Key Recommendation 6: The DHSSPS, along with the HSC Board and HSC trusts, should consider how “safe spaces” could be developed for children and young people at risk of, subject to, or recovering from CSE. This development should take account of models of best practice and the views of young people, and should respect international human rights standards.

Key Recommendation 7: The Northern Ireland Assembly, through the Office of the First Minister and Deputy First Minister, should re-affirm its commitment to strategic, long-term and sustained funding of services for prevention and early intervention.

Key Recommendation 8: The Department of Education (DE) should conduct a review of youth services that takes into account the views of young people and aims to ensure that such provision is attractive and appropriate.

Key Recommendation 9: The DOJ should establish an inter-agency forum, drawn from across the criminal justice sector and third sector stakeholders, to examine how changes to the criminal justice system can achieve more successful prosecutions of the perpetrators of CSE. This must be informed by the experiences and needs of child victims.

Key Recommendation 10: The DHSSPS should ensure that the forthcoming, planned review of SBNI should consider streamlining joint working arrangements to make them more realistic, efficient and effective.

Key Recommendation 11: The DHSSPS should ensure that there are clear reporting pathways, 24 hours a day, seven days a week, for reporting concerns about children and young people, including CSE, with appropriate feedback provided to the individual or agency making the report.

Key Recommendation 12: The protocol for sharing information amongst agencies being developed by SBNI should be concluded as a matter of priority.

Key Recommendation 13: SBNI and its member agencies should seek to ensure that there is delivery of professional training, both multi-agency and profession-specific, and that this is based upon a clear, agreed and shared definition of CSE.
Key Recommendation 14: The DOJ should lead on a project to examine legislative issues highlighted in this report and bring forward proposals for change. These include:

a) Ensuring compliance with international standards by extending protection to children up to the age of 18, specifically, the Child Abduction (Northern Ireland) Order 1985 and the Sexual Offences (Northern Ireland) Order 2008.
c) Replacing all references to child “prostitution” with “child sexual exploitation”.
d) Extending the offence of “grooming” to include “enticing”.
e) Reversing the rebuttable presumption in the Sexual Offences (Northern Ireland) Order 2008 in relation to “reasonable belief” as regards the age of a child.
f) Whether recent legislation in England and Wales relating to hotels, guest houses and bed and breakfast accommodation would be helpful in addressing CSE in Northern Ireland. These are contained in the Anti-Social Behaviour, Crime and Policing Act 2014.

Key Recommendation 15: The DHSSPS should lead the development of a regional strategy to prevent, identify, disrupt and tackle CSE. It should involve the DOJ and DE and should:

a) Be informed by the experiences and views of children, parents and carers.
b) Recognise parents and carers as partners in preventing and tackling CSE, unless there are strong indications that they are involved or complicit.
c) Recognise the support and training needs of frontline workers in all agencies in relation to CSE.
d) Reflect the particular role of schools in raising awareness and identifying concerns about CSE.
e) Acknowledge the role of health workers in early intervention, prevention and reporting of CSE, which should be made more explicit in policies, guidance and training.
f) Recognise agencies operating in the voluntary (non-statutory) sector as equal and valued partners.
g) Equip communities with the information, support and confidence to identify and report concerns about CSE.
h) Link into, and build upon, existing work in relation to child trafficking as well as strategies tackling known vulnerabilities for CSE, such as alcohol, drugs (including “legal highs”), sexual health and domestic violence.
i) Explore the potential contribution to this issue of strengthening a statutory duty to co-operate among stakeholder agencies.
j) Establish a process for promoting and monitoring implementation of the recommendations of this report.

Key Recommendation 16: The HSC Board should adopt a strategic approach to the provision of support services for those who have been subject to CSE, to ensure equality of access. This should build on current, good practice examples.

Key Recommendation 17: The HSC Board should ensure that accessible and appropriate support services are made available for adults who were abused as children.