**STRATEGIC APPROACH FOR**

Young People

(including Care Leavers) at

**RISK**



1. **Introduction**

The purpose of this strategy is to ensure that there is a co-ordinated and consistent approach when considering and responding to the level of vulnerability of an individual child who is deemed to be at high or severe risk of harm.

This strategy recognises that any person aged up to 18yrs is a child. However the purpose of this strategy is to consider how risk is managed for children who are at the age and stage of development coincident with adolescence and in recognition that children and young adults with additional vulnerabilities require additional guidance to ensure it maintains the recognition that adolescents are children and that they have additional needs because of their age and stage of development.

Young people need to be treated equally, with respect and dignity irrespective of their ethnicity, religion, culture, gender identity, sexual orientation or care status. Any professional contact or response to need and risk must take into account the young person’s context, their individuality and own perception of their circumstance. It must be recognised that factors exist which increase a young person’s vulnerability for example if they have a learning or physical disability, experience of living with adversity and past trauma, being brought up in the ‘care system’, living away from parents, experience of being a carer throughout their childhood, emotional and / or behavioural needs.

For young people risk is normal and natural, but for some, the risks that they face or take and the harms that can come with these, are not good. In fact, some of these harms are greater than those experienced by younger children (RiP, 2014).

A young person’s risk can take three forms:

a) Risks from their families.

b) Risks to themselves (from themselves and/or others in their wider network).

c) Risks that they may pose to others (e.g. through offending, harmful sexual behaviours, abusive relationships, etc.)

This guidance starts from the understanding that risks to children exist and the requirement of partner agencies is to understand and manage that risk effectively. Risk management does not mean risk taking, which exposes young people to avoidable injury and harm whilst developing resilience; nor does it mean risk aversion which can lead to an overly interventionist role in the lives of young people and their families. Risk management means understanding and analysing the risks older children face and actively managing them to reduce their impact.

This guidance raises the current dilemmas in practice that exist, explores the complexity of safeguarding and young people as a specific group and highlights the added dimensions to working with and managing risk with them. It concludes by setting out the way agencies within Gloucestershire will respond to ensure older children are protected and safeguarded as best they can be.

1. **Current dilemmas in practice**

As identified in the RiP paper ‘That Difficult Age’ (2014) [[1]](#footnote-1) the current child protection process does not fit easily with the risks experienced, and engagement challenges posed, by vulnerable older children. This has been felt in Gloucestershire with enduring confusion about which is the best risk management process/forum for young people.

Historically vulnerabilities have been considered in silos for example Children who go Missing, Child Sexual Exploitation, substance misuse, emotional and mental ill health, radicalisation, children at risk of trafficking, domestic abuse. This resulted in young people and their families being at risk of receiving multiple processes, different responses and inconsistency of approach. The impact of this is that young people may not have been robustly and consistently safeguarded. This strategy sets out to consider the context of each individual, and all elements of harm irrespective of where they come from, that an older child experiences to ensure that they remain central to the thinking and planning and the statutory ‘system’ and response adapts around their needs rather than the other way round.

Working Together 2018[[2]](#footnote-2) provides clear guidance about the child protection process however the local issue is more about how this is interpreted in relation to young people when risk is external to their family home and how agencies do or don’t adapt the traditional responses accordingly.

The statutory guidance is notably unclear on safeguarding expectations for children in care and care leavers. Nevertheless, some of the young people at highest risk are to be found in these cohorts. There has not been a nationally recognised framework of risk management for these groups resulting in a number of unsatisfactory and sometimes unsafe practices. Although the introduction of a contextual safeguarding framework is helping to address this (further information about contextual safeguarding appears later in the document).

We do not yet have a sufficiently rigorous and reliable means across services of assessing and managing risk for vulnerable young people. This can lead to considerable differences in view that complicate safeguarding efforts.

1. **Risk Assessment and young people**

*Risk-taking Adolescents and Child Protection* (RiP 2014[[3]](#footnote-3)) is a strategic briefing that looks at the “concept of ‘risk-taking’ and outlines some recent research on developmental aspects of adolescence – in particular, emerging knowledge relating to the adolescent brain. It considers research and policy material on the impact of maltreatment on

adolescents, the effective safeguarding of older children (including messages from Serious Case Reviews), and managing risk and promoting resilience” (p 1). Key messages from this Strategic Briefing are added below

**Risk-taking is a normal part of adolescent development**. Most young people will experiment with the increased opportunities for risk that their growing independence allows. However, for young people whose lives have exposed them to risk factors – such as the ‘toxic’ confluence of neglect, maltreatment, parental substance misuse and parental mental health issues – there is increased likelihood that their own risk-taking may raise safeguarding concerns.

**Maltreatment in the early years** can affect brain development *‘producing a brain that is*

*focused on survival*’ at the expense of the more advanced thinking that happens in the brain’s cortex (Child Welfare Information Gateway, 2009; Brown and Ward, 2013). This impulsivity may lead young people to increased risk-taking as they get older, while remaining in a home environment in which maltreatment has featured can increase opportunities to do so.

**Maltreatment experienced in adolescence** has a strong effect on later adjustment, including criminal behaviour and substance use. Young people’s situations are often complicated by issues such as their own substance misuse, running away or being thrown out of home, as well as violence and conflict with parents, which make their case histories distinct and often more complex than those of younger children.

**Adolescent brain development**

Adolescence is a period of huge developmental change. Practitioners have long been familiar with the hormonal changes and physical developments of puberty, but in recent years magnetic resonance imaging (MRI) has cast new light on the workings and development of the living brain, providing neurological evidence for why risky behaviours increase in adolescence. Research into brain development is too complex a body of literature to cover in detail here (references for research review articles are given below), but we can extract some key points:

* The brain lags behind the body in adolescent development, ‘especially in the areas that allow teenagers to reason and think logically’ (Child Welfare Information Gateway, 2009).
* Increased dopamine release to subcortical reward centres encourages attraction to new and immediately exciting experiences. This ‘sensation seeking’ behaviour is ‘strongly associated with the initiation of a wide range of adolescent risk behaviours such as use of drugs’ (Romer et al, 2010). Levels of sensation-seeking behaviour are greater in males than in females.
* There is a period of growth in the limbic system of the brain, which governs emotional responses. ‘Teenagers may rely on their more primitive limbic system in interpreting emotions and reacting – “gut reactions”, since they lack the more mature cortex that can override the limbic response’ (Child Welfare Information Gateway, 2009).
* This makes them ‘more prone to engage in dangerous risk-taking behaviour’ and ‘not sufficiently able to interpret emotions, particularly if there is no secure attachment figure available to help them negotiate these tasks’ (Brown and Ward, 2013).
* Studies scanning the brain at regular intervals have shown that the brain continues to develop into at least the mid-twenties (Child Welfare Information Gateway, 2009).

1. **Principles of good practice**

Young People rely on professionals working with them to know and agree with the level of risk and vulnerability that exists, have a plan in place to help build their resilience to mitigate against future adverse factors, co-ordinate interventions to manage existing risk, focus on increasing their safety and have clear lines of communication

**Relationships –** Prevailing research and practice guidance is clear on the importance of Engagement and relationship-based practice as the primary vehicle of protection and positive change for vulnerable young people**.**

**Language –** it is important to consider the language that is used to describe behaviours. Descriptions such as ‘promiscuous’, ‘putting themselves at risk’, ‘manipulative’ and ‘anti-social behaviour’ are judgement laden, place responsibility for risk on the young person and can affect the responses and approach to managing risk. Professionals working with young people need to recognise that behaviours exhibited are a result of some underlying emotion or unfilled need and are often communicative in nature. This is what needs to be understood and remain the focus of intervention. (Practitioner Guidance –produced by The Childrens Society et al 2018[[4]](#footnote-4))

**Asking the right questions**: Professor Eileen Munro, in her work, ‘Effective Child Protection’ 2008 states that in order to manage risk, there is a need to identify:

What has been happening?

What is happening now?

What might happen?

How likely it is?

How serious it would be

A combination of seriousness and likelihood leads to an overall judgement of risk

**Appropriate and proportionate interventions:** An assessment should underpin professional judgements to inform and agree the level and type of intervention that is most appropriate for children at risk.

**Risk on a continuum:** Assessment of risk can only be comprehensive if it considers both past and present in order to identify future risks to a younger or older child. An assessment is an ongoing process, not a one-off event.

**No delay:** Interventions should not be delayed until the end of an assessment, but should be determined according to what is required to ensure a child’s safety, taking account of any indications of accelerated risks and warning signs.

**Risk Assessment Tools - not ends in themselves:** Risk assessment matrices and checklists can be helpful in guiding understanding but they cannot be absolutely relied upon to provide definitive answers to levels of risks faced by children.

**Effective risk assessments -** They construct a coherent story about the child’s circumstances; they appreciate that there will be ambiguity and uncertainty about some matters; they have been constructed through the testing of hypotheses and a curiosity that sees older children in their contexts; they are considered and thoughtful and finally they allow for and enable change.

1. **Contextual Safeguarding[[5]](#footnote-5)&[[6]](#footnote-6)**

When young people are subjected to risk outside of their family the traditional methods and systems of intervention are not sufficient enough to safeguard them fully. Contextual safeguarding is an approach to understanding and responding to an older child’s experience of significant harm beyond their families for example, threats from organised crime groups such as County Lines Drug Networks, online abuse, radicalisation, trafficking, exploitation through gang affiliation, Female Genital Mutilation etc.

Contextual Safeguarding recognises the different relationships young people have in their neighbourhoods, in school and online that can feature violence and abuse. It recognises that parents have limited influence over these contexts and that the older child’s experience of extra familiar abuse often undermines the parent – child relationship for this is what it depends upon.

Young people exposed to violence or exploitation at school, community or peer group may fracture their family relationships and this undermines their parents or carers ability to keep them safe.

Young people exposed to harm at home impacts on their behaviour at school / community, for example, and they learn to adopt harmful social norms which inform their peer relationships.

Given the contextual nature of safety and vulnerability during adolescence, systems and services designed to keep children safe need to engage with the dynamics at play in extra familial, as well as familial, settings.

The existing Child Protection system, legislative and policy framework which underpins it, was designed to protect children and young people from risks posed by their families and / or where families had reduced capacity to safeguard those in their care. As noted, extra familial risks can undermine or reduce the capacity of parents / carers to safeguard older children so a refreshed approach is required.

By considering contextual safeguarding aspects professionals, young people and their carers will in crease their understanding of how a young person’s safety can be compromised in the different parts to their life and take proactive action to increase their safety in a range of environments.

1. **Consent and capacity**

Young people have been described as ‘imperfect victims’ because the harms that they suffer, or may cause others to suffer, can seem the result of their own decisions. But the question of a young person’s choice and responsibility is fraught. On one hand their faculty for choice may be minimised and ignored because they are still ‘children’; on the other hand, like adults, they are perceived as responsible for their behaviours and ‘lifestyle choices’.

The Fraser guidelines around consent, and the legally defined age of criminal responsibility also blur the age distinctions around independent decision-making for older children. Moreover, young people tend to still be in flux in developing their consequential thinking, their medium to longer term thinking, their understanding of safe/tolerable risks, and being able to assert themselves to others.

Then, amongst the most vulnerable, we see difficulty in forming and upholding choices. This can be worsened by communication, learning and emotional difficulties and disorders, impairment through substance misuse, and sometimes dependency on coercive and controlling relationships that erode choice and decision-making – all of which are over-represented amongst vulnerable older children.

In addition to the complexities around their capacity for choice, young people can be seen (by others and themselves) as more, or less, resilient than they really are. Which when related to presenting risks can powerfully distort objective assessment and management of risk. Complexities around ‘Choice and Responsibility’ and ‘Adolescent Resilience and Risk’ are therefore central to re-thinking our position on safeguarding vulnerable older children.

1. **Relational and Restorative approaches**

As the ability to exert external controls over young people becomes increasingly limited we become increasingly reliant on the working relationship as the means to engage directly with older children. This building of relationship becomes the primary route through which we can enact successful interventions to minimise risk and vulnerability, and therefore needs to be prioritised in thinking about safeguarding and support.

Professionals and services using a restorative practice becomes a priority, the approach is about building and maintaining relationships. It’s about working ‘with’ people at every opportunity and in doing so it provides positive challenge and the setting of clear ‘bottom lines’ i.e. holding people to account in a meaningful and constructive way and agreeing clear boundaries to work within. This is called ‘high challenge’. Secondly it provides the right support and encouragement to enable others to reach agreed goals. This is called ‘high support’.

Restorative Practice is a way to be, not a process to follow or a thing to do at certain times. It’s a term used to describe principles, behaviours and approaches which build and maintain healthy relationships and a sense of community and can resolve difficulties and repair harm where there has been conflict. It is a way of being with people, essentially to work with and alongside others to create sustainable change.

Working ‘with’ young people in a restorative way enables relationships to develop and build trusts between young people and practitioners which is needed when managing risk. It is vital that professionals ensure that they approach all contacts and connections with each other, communities and older children and wider family members in a restorative manner. Responding to safeguarding as a contextual issue requires relationships across the ‘system’ to be effective, productive and responsive.

1. **Risk management response**

Taking into account the need to understand the context to the risks a young person faces whether this is within the family contexts or extra- familial threats the existing guidance set out in Working Together 2018 is the primary legislative framework and must be adhered to. The policies and procedures of Gloucestershire Safeguarding Childrens Executive (GSCE) support and are aligned with this strategy.

Appendix one shows the agreed risk management framework for young people who are considered to be at high or very high risk within Gloucestershire.

1. That Difficult Age: Developing a more effective response to risks in adolescence: Research in Practice; Nov 2014 [↑](#footnote-ref-1)
2. Working Together to Safeguard Children – Statutory guidance on inter-agency working to safeguard and promote the welfare of children: Department of Education: 2018 [↑](#footnote-ref-2)
3. Risk-Taking Adolescents and Child Protection Research in Practice 2014 Strategic Briefing [↑](#footnote-ref-3)
4. Appropriate Language: Child Sexual and / or Criminal Exploitation – Guidance for professionals 2018 The Childrens Society, NSPCC and Victim Support. [↑](#footnote-ref-4)
5. Contextual Safeguarding - University of Bedfordshire 2017 [↑](#footnote-ref-5)
6. Working Together to Safeguard Children – Statutory guidance on inter-agency working to safeguard and promote the welfare of children: Department of Education: 2018 [↑](#footnote-ref-6)