Gwent Safeguarding 7 Minute Briefing

Recognising and Responding to Child Sexual Abuse - Child Practice Review (Child J)

What to do Learning Opportunity

Reflect on the case discussed and think of how this situation could have presented in your work with vulnerable individuals?
Ask are there any similarities in cases you have worked or situations you have encountered?
What would you have done in a similar situation when working with vulnerable individuals? And what are the barriers to practice in your organisation?
Identify key support for yourself in your team.

Context

An historical Child Practice Review was commissioned by SEWSCB in accordance with Protecting Children in Wales: Guidance for Arrangements for Multi-Agency Child Practice Reviews (Welsh Government, 2013). This historical review concerns the steps taken to safeguard Child J from birth in 1992 up until late 2007. The aim of an historical review is to examine what can be learned from past practice to ensure that current practice and organisational systems are strengthened and improved. This briefing will highlight the key learning from the review.

Background

Child J was convicted in 2008 at (15 years and 7 months) for the rape of a male under 18. He received a 6 year custodial sentence.
In early 2013 prior to his release he made a disclosure to the police of further sexual offences. He also disclosed that he himself had been a victim of historical sexual abuse by his father and father's partner. A major investigation was launched in which Child J was seen as both victim and perpetrator. In 2015 Child J pleaded guilty to 29 sexual offences against children. In 2015 he received a life sentence for the same.
The victims ranged in age from 16 months to early adolescence and were both close family and strangers.
Child J's father was convicted of 15 counts of sexual physical offences. His victims included his son, daughters, step son and grandson. He was sentenced to 19 years imprisonment

Cognition of Child Sexual Abuse: including a Failure to consider a Child protection medical.

The Review identifies a key missed opportunity:
When Child J was 5 years old his father tried to put a plastic bottle into Child J's bottom.

The review found no evidence that this was considered in the context of sexual abuse, or that it had been considered that Child J be referred for a Child Protection Medical

It is of note that later in the criminal investigation the above incident was considered to secure a conviction for Child Sexual Abuse. It is also of note that Child J exhibited a number of behaviours and issues over the years that could have been indicative of sexual abuse

It is important that practitioners do not wait for disclosures but are able to recognise childhood behaviours that communicate non verbal indicators of such abuse.

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Childline, police and social services were all contacted by family members

Concerns raised included:

- Sexual abuse, self harming and aggressive behaviour.
- Assaults between siblings and toward mother.
- Overdosing and suicide attempts,
- Frequent moves with no stability for Child J.
- Sexually inappropriate behaviour by father.
- Poor school attendance.
- Documented report from one child that father had thrown hot tea over them.

Reviewers felt that the Child Protection Conference Minutes did not reflect the child's life at the time: There was lack of narrative and analysis and no underpinning chronology. This resulted in a loss of core focus on actual safeguarding risks. This was coupled with a failure to explore behaviours in respect to ongoing neglectful parenting and consideration of the context of sexual abuse.

Failure to see the whole lived experience

The family had been known to agencies for a period of 15 years.

During this time a number of incidents had occurred that appeared to be viewed in isolation. Reviewers felt that had these incidents been viewed together and contextualised they may have resulted in a clearer assessment of events and subsequent planning.

The following issues were highlighted:

- Children running away from home and going missing,
- Over use of health resources(averaging monthly attendance at GP over a 9 year period, along with frequent A&E attendance
- 12 domestic abuse incidents over 9 years
- Attempts by family members to alert authorities to concern

Key Learning Themes:

The importance of the voice of the child

It was identified in this review that despite Child J and his sibling giving sufficient information during a video interview with the police and social services to suggest sexually abusive behaviour immediately after the initial allegations were received, agencies were quick to accept the retraction of this by other family members. As a result issues of possible abuse became lost. Professionals did not appear to consider the possible influence that parents had over Child J and of the controlling nature of J's father.

The following web link provides you with access to the full Child Practice Review report:http://www.sewsc.org.uk/fileadmin/sewsc/documents/Published_SCR_CPR/SEWSCB_1-2015_Child_Practice_Review_Case_J_Report.pdf