PhD FS FOI Request Questions

Technology-facilitated sexual abuse is sexual abuse where any element of the abuse can occur online. This includes when a child is forced to make, view or share child abuse images or videos. It can also refer to a child engaging in a sexual relationship online, where the relationship involves the coercion/manipulation/encouragement of a child to perform sexual acts in front of a webcam or smartphone. Technology-facilitated sexual abuse is an umbrella term for the following abuse:

A child is anyone under the age of 18.

1. **Online child sexual exploitation (colloquially referred to as 'online grooming'):**
   a. **This means identifying and/or grooming a potential child online (e.g., communicating with them through social media) with the intention to cause harm. Online grooming often involves encouraging/manipulating/threatening the child to perform sexual acts in front of a webcam, and/or distribution and dissemination of sexual images or videos. Online grooming can also involve an offline meet or knowing the person offline prior to making contact online.**
2. **Youth-produced sexual image (also referred to as 'sexting'). This can also involve:**
   a. **Sextortion: blackmailing a person with self-generated images to extort sexual favours. It is also often done for money or other threats. This is commonly found in a grooming relationship, but it is not bound to one; for example, it is also common in intimate partner violence.**
   b. **Non-consensual re-sharing of youth-produced sexual images: either the non-consensual sharing or re-sharing of sexual images. Currently, sending and taking sexual images has become a norm in peer circles. However, while the initial taking of a sexual image is consensual, it can often be the case that peers re-share the image non-consensually.**
3. **Live streaming:**
   a. **This involves child sexual abuse that is 'streamed' live online to other viewers. This means viewing live contact sexual abuse or indecent images of children with other offenders. In addition to, coercing a child to perform sexual acts for a live stream. These viewers are often located globally. It is an instantaneous abuse, where a viewer can also not only watch but also engage with the individual 'hosting' the live.**
4. **Abuse through production, dissemination or possession of child sexual abuse material (videos or images):**
   a. **This abuse can often occur concurrently with online child sexual exploitation. An abuser will manipulate or coerce a young person to produce sexual images or videos either by forcing self-production or the abuser will take the image (this can involve an offline contact or images done through screenshots on webcams). These images are often shared and disseminated online either on the open or dark web.**

Child and Adolescent Mental Health Services (CAMHS)

1. **How many safeguarding referrals have been made in the past 12 months?**
   a. **How many referrals are related to online harms or technology-facilitated sexual abuse?**

The Trust is unable to provide a response to your query this is because the requested information is not routinely asked unless there is some suspicion around this relating to the patient. In addition to this, technology-facilitated sexual abuse is not captured within the NHSE referral form as its own criteria and will be only picked up during an assessment or in session.

To obtain this information will require exhaustive and manual measures that exceed the threshold of carrying out this task.

The Trust therefore rely on exemption Section 12 of the Freedom of Information Act 2000 to deny your request

2. **Between 1ˢᵗ of January and the 31ˢᵗ of December 2021, how many young people in the service case load reported (in clinician notes) having experienced technology-facilitated sexual abuse?**

1

3. **When sexual abuse is disclosed (at any point in assessment/treatment) is there a local policy or a standard way in which this should be recorded (e.g., description within case notes)?**
   a. **Do these policies refer to sexual abuse that occurs online (e.g., social media, internet contact made, sharing images)?**

Yes, there is a standard way in which documented: Eclipse - Risk Assessment - Progress Note

Professionals can review the Safeguarding children's policy regarding record keeping and disclosures made and the safeguarding pathway/process to follow.

However, it is not specific in relation to Sexual abuse disclosures how this should be documented.

Practitioners would also be expected to document on clinical records in line with their professional registration bodies i.e. NMC, GMC etc.

Practitioners can also contact the safeguarding advice line Monday – Friday 9-4pm if they required support.

The safeguarding children policy explains sexual abuse and highlights that practitioners should consider abuse via the internet also.

4. **List all assessment tools that make references to a patient's online life (i.e., assessment mentioning young people engaging with social media, frequency of use of the internet)**
   a. **Indicate if assessment tools ask about:**
      i. **Online child sexual exploitation (colloquially referred to as 'online grooming') Y/N**
      ii. **Youth-produced sexual image**

1. Sextortion Y/N
2. Non-consensual sexual images Y/N
   iii. Live streaming Y/N
   iv. Abuse through production, dissemination, or possession of child sexual abuse material (videos or images) Y/N

The Trust does not have any specific assessment tools or interventions for technology-assisted sexual abuse.

The Trust does deliver trauma informed care and we offer counselling for those children and young people (CYP)who have witnessed or experienced domestic violence, and those who have experienced sexual abuse.

Each piece of trauma informed counselling work is different and individual to each CYP, based on their presenting needs. Counsellors come from different training backgrounds, some specialising in specific modalities such as person centred work, and some who work in an integrative way, mixing different skills and techniques that may include systemic, solution focused and cognitive behavioural therapy, or draw from the unconscious such as play or art techniques. Furthermore we have a transpersonal arts counsellor who offers trauma informed work through art.

All counsellors draw from knowledge around common mental health difficulties, developmental stages, ACE's and social theories. Counsellors do not diagnose CYP but will use a formulation-based approach. Trauma counselling often involves an element of stabilisation prior to the undertaking of therapeutic work, and this can draw from DBT/ emotional regulation strategies. Additionally, there is usually an element of care co-ordination for trauma focused counselling in service, as the nature of the trauma can often dictate the need for other professionals to be in place. There can often be points where the CYP may tip into crisis due to the process of working through their trauma.

There is not a current set number of sessions which are offered to each CYP as each intervention is tailored, regular reviews are in place for the work.

Standard ROMS are utilised in sessions where appropriate to track progress.

We do not have specialisms such as ISVA's within Solar and will refer to RSVP if there is a need for an ISVA or if there is specific pre-court work which is needed for a sexual assault/abuse legal case. If there is a legal case ongoing and therapy is being provided to the CYP who has been assaulted/abused then there are recommendations of good practice such as informing the court of the therapy, keeping detailed and factual records, and focusing on the impact rather than the actual events.

5. **What support and interventions do you offer to a service user who has experienced technology-assisted sexual abuse?**
   a. **Is the support or intervention offered specific to technology-facilitated sexual abuse?**

Psychology Interventions

EMDR

Sexual Safety Sessions

Appropriate Relationships groups

Assertiveness training/ CFL also do sessions with YP about this

6. **Is training provided to staff on online harms and the impact of technology-assisted sexual abuse young people?**
   a. **If yes, what does the training cover?**

We do not currently provide specific online harm training within our inpatient staff training package. However, we can confirm our new training package will include one page about this which will be launched within the next few months.

7. **Any further comments.**

N/A

SARC

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   a. **How many referrals are related to online harms or technology-assisted sexual abuse?**

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3. **Are there policies or a standard way to record technology-assisted sexual abuse when it is disclosed (at any point in assessment/treatment)?**
   a. **If yes, please list the policies.**

No - these would be recorded as narrative within an assessment process

4. **Are there assessment methods that are used to assess for technology-assisted sexual abuse?**
   a. **If yes, list the assessment methods that reference the following:**
      i. **Online child sexual exploitation (colloquially referred to as 'online grooming')**
      ii. **Youth-produced sexual image**
         1. **Sextortion**
         2. **Non-consensual sexual images**
      iii. **Live streaming**
      iv. **Abuse through production, dissemination, or possession of child sexual abuse material (videos or images)**

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5. **What support and interventions do you offer to a service user who has experienced technology-assisted sexual abuse?**
   a. **Do these support or interventions involve referral to mental health services?**
      i. **If yes, are these mental health services located outside or within the NHS system?**

Please refer to the answer for question 4.

In addition, any young person who has disclosed experiencing technology assisted sexual abuse would be provided with relevant psychological interventions as part of their treatment pathway- as we are an inpatient NHS unit we would be providing these within the service

6. **Is training provided to staff on online harms and the impact of technology-assisted sexual abuse young people?**
   a. **If yes, what does the training cover?**

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