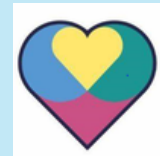


# FORTH VALLEY CHILD EXPLOITATION GUIDANCE

## HELPING TO KEEP YOUNG PEOPLE SAFE FROM HARM AND CONTROL



### What this document is about:

This guide is mainly for adults who work with young people.

It helps them spot when someone might be trying to control, pressure, or harm a young person, and explains how they can act quickly to keep people safe.

### It covers things like:

- What child sexual exploitation (CSE) and child criminal exploitation (CCE) mean – when someone uses power, trust, fear, or rewards (like gifts, money, attention, or protection) to get a young person to do things for them.
- How these situations can be linked with other types of abuse, like trafficking, online exploitation, controlling relationships, or gender-based violence.
- How adults can recognise the signs that something isn't right.
- What they should do to protect and support any young person affected.
- How services – schools, social work, health, and police – can work together to stop exploitation and help young people recover.

### What we want you to know

- If someone is making you feel scared, trapped, or pressured – it's not your fault.
- You have the right to be safe, respected, and treated with care.
- There are people who will listen, believe, and help you, no matter what has happened.
- You don't have to deal with it alone – talking to someone you trust is a brave and important step.

### If you're worried about yourself or a friend

- You can talk to:
  - A teacher, youth worker, nurse, or social worker you trust
  - Police Scotland – call 101, or 999 in an emergency
  - Childline – call 0800 1111 or visit [childline.org.uk](https://www.childline.org.uk) (free and confidential)

### Our message

Exploitation can happen to anyone. It's never your fault.

Everyone in Forth Valley is working together to keep young people safe from sexual, criminal, online, or any other form of exploitation.

You deserve to be safe, heard, and supported – with kindness, respect, and care.

**If you need help understanding any information in this document, you have the right to access advocacy services in your local area.**





# FORTH VALLEY

## Child Sexual Exploitation Guidance

Version	Date	Author	Changes
1.0	22/01/16	FV CSE Board	
2.0	Reviewed January 2017	FV CSE Board	
3.0	Reviewed July 2020	Policies, Procedures Subgroup	Updated
4.0	Reviewed March 2024	FV PP	Updated
5.0	Reviewed Nov 2025	FV PP	Significant changes to language emerging from recent research and inclusion of appendices

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## 1. Purpose and Scope

This guidance supports all practitioners across Forth Valley who work with or support children and young people to recognise, prevent, and respond to Child Sexual Exploitation (CSE).

It applies to everyone who may identify or respond to concerns including staff in education, health, social work, justice, housing, youth services, and the third sector. This guidance applies to any child or young person under the age of 18.

CSE is child sexual abuse. It involves manipulation, coercion, or control of a child or young person into sexual activity often in exchange for something they need or want, or for the benefit of another person.

This document aims to help practitioners:

- Recognise the dynamics, contexts, and indicators of exploitation.
- Respond safely and consistently using the Forth Valley Inter Agency Child Protection procedures.
- Apply trauma-informed, rights-based, and GIRFEC-aligned approaches.

This guidance complements, not replaces, statutory child protection frameworks. It should be used alongside:

- [National Guidance for Child Protection in Scotland \(2021, updated 2023\)](#)
- [Forth Valley Inter Agency Child Protection Guidance](#)
- [Forth Valley Adult Support and Protection Procedures](#)
- Forth Valley Gender Based Violence Practitioners Guidance
- [Equally Safe: Scotland's Strategy to Prevent and Eradicate Violence Against Women and Girls](#)
- [Human Trafficking and Exploitation \(Scotland\) Act 2015](#)
- [The Promise](#) and [UNCRC guidance](#)

### Practice insight

“You don't have to know everything to do something.” Early, proportionate action matters. Small, relational responses, curiosity, listening, and consistent care, can make a lasting difference to children and young people experiencing exploitation.

## 2. Understanding Child Sexual Exploitation

### What it is?

Child Sexual Exploitation is a form of child sexual abuse in which an individual, group, or network takes advantage of an imbalance of power to coerce, a child or young person under eighteen into sexual activity.

This can occur in person or online and involve an exchange - real or perceived - such as affection, attention, money, protection, accommodation, or substances. The exchange does not make it consensual.

Core features include:

- Power imbalance: based on age, gender, ability, status, access to resources, or emotional need.
- Manipulation and control: through grooming, violence, affection, or coercion.
- Exchange: something is given or taken- often to meet basic needs or create dependency.
- Deception: trust and attachment are built to mask exploitation.
- Exploitation, not choice: children may appear to participate but cannot freely consent.

### **Consent and control**

Children and young people cannot consent to their own exploitation. Even where a relationship appears consensual, or both individuals are under sixteen, coercion, fear, or manipulation remove genuine choice.

Avoid terms that suggest mutuality or romance, such as boyfriend, girlfriend, or relationship. Use neutral, descriptive language that focuses on behaviours and power dynamics.

Example: *“The young person describes being in a relationship with an older person who provides gifts and controls contact with friends.”*

Exploitation exists on a continuum, from grooming and manipulation to coercion and organised abuse. It can develop gradually, overlap with other forms of harm, and continue into adulthood. Children may not recognise they are being abused until much later.

- Exploitation can occur within or alongside:
- Criminal exploitation (including county lines and debt bondage)
- Human trafficking and modern slavery
- Technology-facilitated abuse
- Gender-based violence
- Missing episodes or unstable housing

### **Intersectional and structural vulnerabilities**

Any child can be exploited. Risks increase where poverty, discrimination, homelessness, care experience, disability, insecure immigration status, or previous abuse are present. CSE must be understood within its wider social and structural context not because of a child's behaviour or choices.

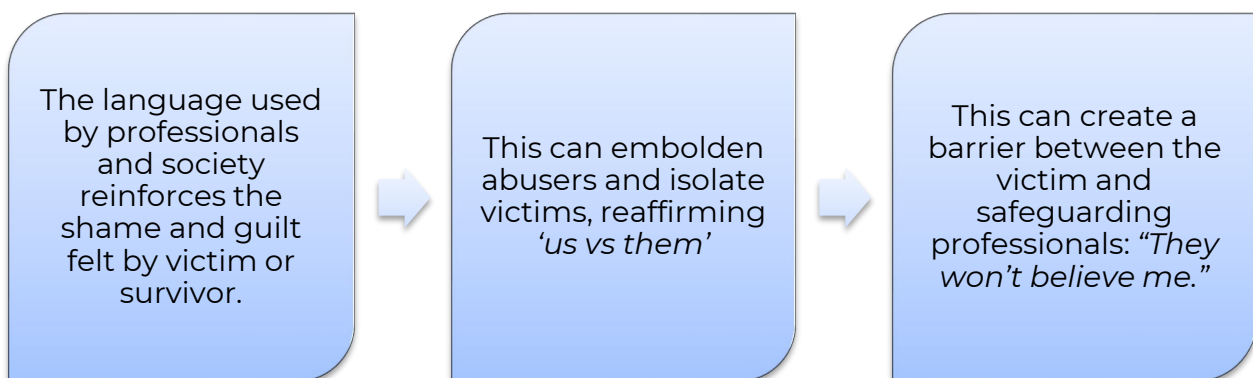
### Practice insight

Exploitation is not defined by a single act, setting, or “type”. It is a pattern of abuse that takes advantage of vulnerability and need. Practitioners should focus on what’s happening to the child. The child's behaviour should not be seen as a choice.

### Language and approach

The language used in assessment, recording, and discussion should place responsibility firmly on the perpetrator, not the child. It must acknowledge harm without judgement, reflecting uncertainty appropriately for example, referring to “concerns about grooming or control” rather than implying consent or choice.

Practitioners should use wording that encourages professional curiosity, empathy, and compassion, avoiding terms that stigmatise or blame. The way we speak and write about children directly shapes how they are heard, how others respond, and the protection and support they receive.



### Example

Instead of: “The young person continues to put themselves at risk.”

Write: “The young person is spending increasing time with older peers and appears fearful when asked about them. They report feeling that they ‘have to’ meet them.”

## 3. How Sexual Exploitation Happens - Contexts and Patterns

Child sexual exploitation does not follow a single pattern. It happens across different contexts, in person, online, within relationships, peer groups, families, or organised networks. Regardless of setting, it always involves an abuse of power and a form of exchange that benefits the perpetrator and harms the child.

### 3.1 Relationship and trust-based exploitation

Perpetrators may build what appears to be a caring or intimate relationship before introducing abuse.

They may offer attention, affection, gifts, accommodation, or protection, gradually gaining trust before introducing sexual activity, coercion, or control. The child may believe the relationship is genuine or mutual and feel emotionally bonded to the person causing harm. This attachment is part of the manipulation and can make disclosure extremely difficult.

Common dynamics used by perpetrators include:

- Grooming through affection, gifts, or attention.
- Gradual isolation from friends, family, or safe adults.
- Emotional dependency such as believing the abuser “cares” or “understands.”
- Fear of rejection, violence, or loss of status if they resist.

#### **Practice insight**

Avoid terms like boyfriend, girlfriend, or relationship when recording or discussing concerns. Use factual, neutral language that captures the imbalance of power and indicators of coercion.

### 3.2 Peer and social group exploitation

Exploitation can occur within or between peer groups. Children and young people may be pressured, coerced, or tricked into sexual activity or image sharing by peers, sometimes in exchange for belonging, protection, or popularity. Social media and messaging apps can amplify this.

Common dynamics include:

- Pressure to send or share sexual images.
- Sharing of private images without consent for humiliation or control.
- Sexual activity exchanged for belonging, protection, or attention.
- Harmful behaviour normalised as “banter” or “challenges.”

#### **Practice insight**

Do not minimise these behaviours as “mutual” or “typical teen” interactions. Where there is power imbalance, coercion, or fear - it is exploitation and requires safeguarding action.

### 3.3 Networked, organised, or location-based exploitation

Some CSE is organised or facilitated by groups, networks, or criminal enterprises. Children may be moved between locations, homes, hotels, cars, or party venues and abused by multiple individuals. They may be groomed to recruit others or to appear complicit; this is part of their abuse. This often overlaps with trafficking, criminal exploitation, or serious organised crime.

Common dynamics include:

- Abuse coordinated by two or more perpetrators.
- Planned or repeated movement between locations.
- Exchange of children between exploiters.
- Threats, debt, or violence used to enforce compliance.
- Use of substances or “debt” to entrap victims.

#### Practice insight

Where there are concerns about movement, multiple perpetrators, or organised activity, follow child protection procedures and initiate an IRD, police disruption activity, and a National Referral Mechanism referral where trafficking is suspected.

### 3.4 Technology-facilitated and online exploitation

Technology is used in most cases of CSE. For grooming, control, blackmail, or image sharing. Children can be exploited entirely online or via a mix of digital and in-person contact. The harm is no less serious than physical exploitation.

Emerging forms include:

- Sextortion: blackmail using sexual images or videos, often by offenders posing as peers or using stolen content.
- AI-generated and deepfake imagery: synthetic sexual images created without consent to threaten, shame, or humiliate.
- Live-streamed abuse: children coerced or tricked into performing sexual acts on camera.  
Image theft or account hacking, perpetrators accessing or manipulating private content.

#### Practice insight

Digital abuse can continue even after the child is physically safe. Support must include digital safety planning and, where possible, action to have content removed.

### 3.5 Familial and community exploitation

CSE can occur within families or communities. A family member or trusted adult may facilitate or condone abuse, linked to financial gain, trafficking, or control within community expectations.

Common dynamics include:

- Exploitation by relatives or family friends.
- Abuse justified by “honour,” family reputation, or tradition.
- Pressure, shame, or fear used to silence victims.
- Community involvement or organised abuse networks.

### **Practice insight**

Respond with cultural sensitivity but never allow culture or family expectations to override a child’s safety. Do not mediate with family members where exploitation or coercion is suspected.

## **3.6 Poly-exploitation and overlapping harms**

Children affected by CSE often experience multiple, interconnected harms, sexual, criminal, emotional, or financial. They may also experience neglect, domestic abuse, or go missing.

Common overlaps include:

- Criminal exploitation.
- Trafficking or modern slavery.
- Technology-facilitated abuse.
- Gender-based or domestic violence.
- Harmful sexual behaviour by peers.

### **Practice insight**

Assess the whole context, not just the presenting concern. Children affected by exploitation are victims, not offenders. Language should reflect harm, not “choices”.

## **4. Recognising Child Sexual Exploitation**

Child Sexual Exploitation can affect any child or young person. There is no single profile of a child at risk but there are patterns of vulnerability and behaviour that may signal exploitation.

Children rarely recognise what is happening as abuse and may fear the consequences of telling. Practitioners must look beyond behaviour and stay curious about what might be driving it.

Exploitation is a process rather than a single incident; practitioners should recognise patterns of power, exchange, and control, and act on the wider context rather than waiting for certainty.

### **Practice insight**

Ask not what's wrong with this child. Ask what's happened to them, who's around them, and what they need to feel safe.

## **4.1 Understanding vulnerability**

Vulnerability does not cause exploitation- perpetrators do. Some factors can make it easier for abusers to identify, target, or manipulate a child. These often overlap.

Child-centred vulnerabilities may include:

- History of abuse, neglect, or domestic abuse exposure
- Low self-esteem, trauma, or emotional distress
- Mental health difficulties or self-harm
- Substance or alcohol use (their own or within the family)
- Learning disability or additional support needs
- Being LGBTQ+ in an unsupportive environment
- Care experience
- Frequent missing episodes
- Poverty, food, or housing insecurity
- Online isolation, gaming, or heavy social media use

### **Practice insight**

These are signals of unmet need in the environment around the child. Building safety means strengthening connection, not control.

## **4.2 Environmental and situational indicators**

Possible indicators include:

- Regularly missing from home or school
- Found in areas far from home or staying with unknown adults.
- Unexplained money, gifts, new clothes, or technology
- Sudden changes in appearance, mood, or social circle
- Secretive online activity, friends, or locations
- High control within relationships for example someone always present or answering for them.
- Frequent contact with older individuals or groups
- Increased substance use, withdrawal, or aggression
- Mentions of parties or pressure to attend gatherings
- Multiple hotel bookings or short-term accommodation use
- Fear of certain people or places.

### **Practice insight**

A single indicator does not confirm exploitation, patterns, changes, and context are significant

### 4.3 Perpetrator and control indicators

Look for signs that:

- Someone else controls the young person's phone, money, or movement.
- They are always accompanied or monitored by an older person.
- They are pressured to meet, take photos, or share sexual content.
- They fear or protect a specific person or group.
- There is evidence of debt, threat, or blackmail ("you owe me")
- They express loyalty to someone who frightens them.
- They minimise or normalise harmful behaviour.
- They reference "helping out" or "doing favours."
- They are drawn into illegal or risky activity that benefits others.
- Online contacts ask for sexual content, live streams, or meetings.

### 4.4 Online and digital indicators

Possible signs include:

- Multiple or secret online profiles
- Gifts, game credits, or transfers from unknown sources
- Panic when device access is removed.
- Sudden deletion of accounts or content
- Disclosure or fear about images being shared.
- Mention of being tricked, blackmailed, or threatened online.
- Evidence or disclosure of deepfake or AI-generated imagery

#### Practice insight

Treat synthetic images and sextortion with the same urgency as other forms of sexual exploitation

### 4.5 Distinguishing indicators by context and severity

There is no single indicator that confirms sexual exploitation. Understanding the patterns, context, and using professional judgement are essential. Practitioners must stay alert to signs of control, isolation, fear, or exchange and recognise that children and young people may not see themselves as victims.

It is our professional responsibility to identify abuse even when they cannot, approaching every interaction with curiosity and compassion. Early concern is enough to act, do not wait for a disclosure before taking protective steps or sharing information in line with child protection procedures.

- **Emerging concern** - subtle behavioural change, secrecy, new contacts
- **Escalating risk** -repeated missing episodes, contact with older peers/adults, gifts, or pressure.
- **High or immediate risk** - clear evidence of control, coercion, threats, sexual activity, or injury

## 5. Responding and Intervening

### 5.1 Principles

Practitioners should act on concern and take timely action rather than waiting for certainty, recognising that early intervention can prevent further harm. All engagement must be trauma-informed, ensuring safety, trust, empowerment, and choice for children, young people, and families. Practice should be firmly rights-based, upholding every child's right to protection, participation, and recovery in line with UNCRC. Collaboration is essential, no single agency can address CSE alone. Meaningful protection depends on shared responsibility, open communication, and coordinated multi-agency action.

**Early assessment is essential to understanding the child's world, identifying risks and protective factors, and ensuring timely and proportionate support.**

Using the [National Practice Model](#), including the [Resilience Matrix](#), practitioners can explore a child's strengths, needs, and vulnerabilities in a structured way.

Early, collaborative assessment and planning through a [Team Around the Child \(TAC\) meeting](#) supports shared understanding across agencies, helps coordinate intervention, and reduces the likelihood of concerns escalating to the point of significant harm.

Early assessment aligns with the Getting It Right for Every Child (GIRFEC) approach and underpins effective Child Protection practice. It ensures that the Named Person or Lead Professional can coordinate information and action across agencies, drawing on the Wellbeing Indicators (SHANARRI) to assess need and inform proportionate next steps.

When risks are found that cannot be managed by one agency or through TAC, the assessment gives a clear, evidence-based reason to move the concern into Child Protection. This might mean making a Child Protection referral, having an Initial Referral Discussion (IRD), or arranging a Child Protection Planning Meeting if the child is deemed to be at risk of significant harm. This helps make sure decisions are consistent, well-informed, and focused on keeping the child safe and well.

### 5.2 Immediate steps

1. Ensure safety. If there is immediate danger, contact Police Scotland (999). Speak to the child or young person in safe and private space.
2. Listen and reassure. "You're not in trouble; you did the right thing by telling me."
3. Avoid investigation. Record what is shared in their own words - no leading questions.
4. Share promptly. Report to your Child Protection Lead or line manager; they will initiate an Inter-Agency Referral Discussion (IRD) if needed.
5. Document clearly. Include dates, times, direct quotes, and observed presentation.

### **5.3 Inter-Agency Referral Discussion (IRD)**

An IRD brings together Police, Social Work, and Health (and Education if relevant) to agree investigation and protection actions. Possible outcomes include:

- Child protection investigation with Forth Valley Interview Team.
- Comprehensive or forensic health assessment.
- Immediate safety planning which may include considerations of emergency legal orders such as a Child Protection Order
- Criminal investigation and disruption activity.
- Referral to the National Referral Mechanism (NRM)
- Decision to proceed to a Child Protection Planning meeting.

### **5.4 Role of the National Referral Mechanism (NRM)**

The NRM is the UK-wide framework for identifying and supporting victims of human trafficking or modern slavery, including children subjected to sexual exploitation, criminal exploitation, or trafficking.

Under Section 38 of the Human Trafficking and Exploitation (Scotland) Act 2015, professionals have a duty to notify the NRM if they have reasonable grounds to believe a child may be a victim of trafficking or exploitation.

#### **Referral to the NRM is required when:**

- A child is moved between locations (within or across borders) for the purpose of exploitation, including being:
  - Collected or transported to various addresses.
  - Placed in hotels, flats, or vehicles by exploiters.
  - Accompanied by adults who are not family or carers, with concerns about exploitation.
- There is evidence or concern the child is being controlled, coerced, or manipulated for sexual or criminal activity.
- It is suspected that child has been coerced into engaging in sexual activity in exchange for items or substances.
- It is suspected that the child has been coerced or groomed to exploit others or is part of a coordinated group/network.
- The child cannot remove themselves from a situation of exploitation due to fear, threat, or grooming.

#### **NRM Referral Process**

- All children under eighteen must be referred via a First Responder agency (e.g. Police, Local Authority, Health).
- Child consent is not required for referral.
- The referral should be made at the point of concern, and first responder should be agreed at the IRD, reasons not to refer to the NRM should be

clearly recorded.

- Use the [NRM online portal](#) and select child-specific pathway.
- A multi-agency approach should inform the referral and support plan.

## 5.5 Levels of concern and proportionate response

Level	Indicators	Example Actions
<b>Emerging</b>	Early vulnerabilities; secrecy; low-level risky contact.	Hold a Team Around the Child (TAC) meeting; provide education on healthy relationships and online safety; engage parents/carers if safe.
<b>Medium / Escalating</b>	Repeated missing episodes; involvement with risky adults; evidence of exchange.	Notify Child-Protection Coordinator; share information multi-agency; consider IRD; initiate targeted intervention.
<b>High / Immediate</b>	Confirmed exploitation; coercion, threats, or violence.	Emergency police or health action; IRD; child-protection investigation; safety planning; disruption of perpetrators.

## 5.6 Intervention at different stages

### Early intervention

Early intervention is essential in preventing exploitation and reducing risk. Practitioners should focus on building trust through consistent and dependable contact, recognising that engagement often develops gradually. Work should include providing clear, age-appropriate information about rights, consent, and healthy relationships, helping the child or young person to recognise and respond to risk.

Practitioners should also support the identification of safe adults and safe spaces within the child's network and address any unmet needs that may increase vulnerability to exploitation.

### Medium to high risk

Any concern that a child or young person is at risk of, or has experienced, sexual exploitation must be referred to Social Work or Police in line with the [Forth Valley Inter-Agency Child Protection Procedures](#)

A multi-agency response should involve Social Work, Police, Health, Education, and where relevant Third Sector partners, ensuring a coordinated and trauma-informed approach.

Interventions should focus on trauma-focused work addressing grooming, boundaries, and safety planning, alongside engagement with families and carers to strengthen protective capacity where it is safe and appropriate to do so.

An Inter-Agency Referral Discussion (IRD) should consider whether a Child Protection Planning Meeting is required, or a Care and Risk Management (CARM) meeting where a young person's behaviour poses a serious risk of harm to others.

Practitioners should also consider a referral should be the Children's Reporter (SCRA) when there are concerns that a child may need protection, guidance, treatment or control, and that compulsory measures of supervision may be necessary.

## **5.7 Safety planning**

Safety planning must be a collaborative and adaptable process developed with the child or young person, their family, or carers (where safe to do so), and key professionals involved in their care.

Plans should prioritise immediate safety, identifying who the child can contact and where they can go if they feel unsafe. They should set out safe methods of communication, including any necessary changes to phones, social media, or online accounts, and checks for spyware, location sharing, or tracking apps.

Arrangements for contact and supervision within schools, care establishments, or community settings should be agreed clearly among staff and recorded. Plans must also include agreed actions and key roles in response to missing episodes; alongside contingency measures should risk escalate.

Safety plans should enhance the child's sense of safety, control, and connection and not punish or isolate them.

A consideration of actions that could be considered in Children's plans were there are CSE indicators present can be found in [Appendix 1](#)

## **5.8 Supporting recovery**

Recovery from exploitation is rarely a linear process. Children and young people may continue to experience emotional distress, ambivalence, or contact from exploiters even after intervention. Support should focus on stability, ensuring safe and consistent housing, daily routines, and relationships with trusted adults. Promoting choice and autonomy is essential. Children should be actively involved in shaping their plans and decisions that affect them.

Recovery also depends on connection, helping young people rebuild safe peer relationships, community belonging, and positive identity.

Support must prioritise continuity, ensuring services remain available as young people transition to adulthood and that planning for post-eighteen support begins early to prevent disruption or loss of safety.

## 5.9 Practitioner reflection and wellbeing

Practitioners working with children affected by exploitation face complex emotional and ethical challenges. Regular supervision and debriefing are vital to maintain reflective, safe, and effective practice. Staff should share concerns promptly, using professional curiosity to explore uncertainty or risk. Awareness of your own emotional responses is key. Reflective practice should be used to process impact, manage stress, and prevent secondary trauma.

Practitioners should seek peer or managerial support if exposure to trauma becomes overwhelming, recognising that personal wellbeing directly supports safe and compassionate work with children and families.

## 6. Strategy Meetings and Multi-Agency Enquiry

### 6.1 Purpose and context

A Strategy Meeting is distinct from an Inter-Agency Referral Discussion (IRD) or a Child Protection Planning Meeting. It is convened when intelligence or emerging information indicates wider, organised, or networked risk associated with CSE that extends beyond an individual child. Its purpose is to enable multi-agency analysis, information sharing, and coordinated disruption activity at an early stage.

### 6.2 Aims

- Identify all children and young people at risk.
- Share intelligence across agencies.
- Develop a shared understanding of patterns (who, where, how).
- Coordinate protection actions for each child.
- Agree disruption tactics for perpetrators, networks, or locations.
- Assign roles, responsibilities, and timescales.
- Plan for review and evaluate effectiveness.

### 6.3 When to convene

A multi-agency strategy meeting should be convened when concerns indicate wider or organised risk beyond an individual case. This includes situations where there are two or more victims linked to the same perpetrator, group, or location or where there are multiple perpetrators or activity spanning different local authority areas; or where there is a systemic risk to a peer group, neighbourhood, or community setting.

Where there is any uncertainty, practitioners should seek early consideration by Police Scotland or Social Work to determine whether a coordinated meeting is required.

The Strategy Meeting will be arranged within **7 days of the Inter-agency Referral Discussion.**

## 6.4 Chairing and attendance

The Strategy Meeting will be arranged and chaired by Police Scotland (Detective Inspector or above)

Core attendees include:

- Senior Manager Social Work Children's Services
- Service Manager Education Children's Services
- Nurse Consultant Child Protection
- Consultant Paediatrician for Child Protection
- Service Manager, Housing Service

Additional attendees may include:

- CAMHS/psychology, Justice/Youth Justice, Sexual Health Services, Third Sector specialists, Legal Services, external care providers, Licensing/Community Safety, CPC/Public Protection leads, cross-boundary partners.

## 6.5 Preparation and information sharing

Agencies should collate relevant records and intelligence, identify links, prepare a short factual summary, share information securely, and ensure the child's voice is represented.

## 6.6 Discussion and decision-making

Structure the meeting to review information, identify children and perpetrators of concern, analyse locations (including online platforms), agree safeguarding and disruption actions, and decide whether large-scale enquiry is required.

## 6.7 Outcomes and actions

Agreed outcomes should be specific, measurable, and time bound. Examples include:

Area	Example Actions
Safeguarding	New child protection investigations, updates to Child's Plan, safety plans for peer groups or siblings.
Disruption	Closure of identified premises; enforcement visits; monitoring of known vehicles or addresses; bail condition reviews.
Investigation	Coordinated evidence gathering, digital forensics, joint interviews.
Health & Wellbeing	Sexual health referrals, trauma counselling, mental-health support, substance misuse support.
Intelligence & Learning	Cross-case mapping; data recording for CPC; trigger review for learning themes.

Every action must identify:

- Who is responsible.
- By when.
- How progress will be monitored.
- When the next review will occur.

## **6.8 Large-scale or complex enquiry**

Where organised, multi-perpetrator, or multi-victim sexual exploitation is identified the chair of the Strategy Meeting should take the lead in coordinating a robust and well-supported response.

Key responsibilities include:

- Developing the terms of reference for the enquiry/investigation including timeframes.
- Appoint a strategic lead and an investigation team with appropriate expertise.
- Ensure separation from any implicated services/staff.
- Resource legal/forensic/admin/therapeutic support.
- Maintain communication with Chief Officers Group and CPC.
- Manage media and political communication safely.
- Provide wellbeing support to staff, victims, and families.

## **6.9 Recording and confidentiality**

A minute taker should be appointed for every Strategy Meeting to ensure accurate, concise, and secure documentation. Records must include the date, attendees, summary of discussion, key analysis, agreed actions (with responsible leads and deadlines), and the date for review.

All information should be stored securely and circulated only to those with a legitimate role in the process. Highly sensitive or operational intelligence should be summarised rather than transcribed verbatim to reduce risk and maintain confidentiality.

## **6.10 Review and escalation**

Review at agreed intervals (typically 4–6 weeks or as risk dictates) to assess impact, update intelligence, and plan further action or de-escalation. Re-convene or extend if risk increases or new networks emerge.

## **6.11 Learning and accountability**

Following any large-scale or complex enquiry, a learning summary should be prepared for the Child Protection Committee (CPC), highlighting both strengths in practice and areas for improvement. Senior managers should consider whether the circumstances may meet the criteria for a Learning Review, in line with national guidance.

## 7.Recovery, Support and Practitioner Wellbeing

### 7.1 Purpose

Recovery requires stability, choice, connection, and trust. This section sets out how to plan and sustain recovery support and protect practitioner wellbeing.

### 7.2 Principles of recovery

1. Safety first, then stability.
2. Trust and consistency.
3. Choice and participation.
4. Connection to family, peers, school, and community.
5. Non-linearity relapse to risk signals a need for support, not failure.
6. Cultural safety.

### 7.3 Planning for Recovery

Recovery should sit alongside the Child's Plan and include:

Area	Practice focus
<b>Safety and Stabilisation</b>	Safe accommodation, protective routines, clear contact boundaries, consistent adults.
<b>Health Needs</b>	Physical health check-ups, sexual-health screening and treatment, trauma-informed GP, and paediatric follow-up.
<b>Mental Health and Emotional Wellbeing</b>	Early referral to CAMHS or third-sector trauma services (e.g. Rape Crisis, Barnardo's, SAY Women). Offer grounding, coping skills, and safe spaces rather than intensive therapy too soon.
<b>Education and Engagement</b>	Work with education partners to reintegrate safely; ensure anti-bullying support and flexibility with attendance.
<b>Family and Care Relationships</b>	Assess safety of family involvement. Support safe reconnection and additional family support.
<b>Social Connection and Meaningful Activity</b>	Re-establish positive peer networks, youth clubs, volunteering, or hobbies that build confidence.
<b>Practical Needs</b>	Housing, finance, transport, digital access, benefits, or immigration support. Meeting these needs reduces vulnerability to re-exploitation.

Plans should be co-produced with the child or young person and reviewed regularly.

Progress should be measured by tangible improvements in the child's day-to-day life and their sense of safety, belonging, and empowerment. Progress should reflect improved lived experience for the child or young person across the SHANNARI indicators and monitored using the Child's Plan.

#### **7.4 Transitions and continuing support**

Plan early for transitions (ideally at least 6 months ahead). Identify an adult-services lead, ensure continuity of counselling/mentoring, share key safeguarding information proportionately, and recognise that CSE trauma may have long-term effects.

#### **7.7 Supporting families and carers**

When concerns arise about child sexual exploitation or other forms of harm taking place in the community, online, or through peer networks, parents and carers are key partners in promoting safety and recovery. Engagement should reflect the principles of *Getting It Right for Every Child (GIRFEC)*, *The Promise*, and Forth Valley's trauma-informed approach to practice.

- Provide clear, accessible information about grooming, coercion, and trauma responses, using language that helps parents and carers understand that exploitation is a form of abuse not a lifestyle choice or "risky behaviour."
- Encourage calm and compassionate responses that prioritise understanding and relationship repair, rather than blame or punishment. Emphasise that the young person's behaviour may reflect fear, shame, or trauma, and that consistent support helps recovery.
- Offer opportunities for peer support through trusted networks, family support groups, or local initiatives reducing isolation and helping carers share experiences safely.
- Facilitate open communication between families and professionals through regular, planned contact. Ensure parents and carers are part of the Team Around the Child (TAC) or multi-agency discussions wherever it is safe and appropriate.
- Where family involvement may increase risk, for example due to ongoing conflict, or association with individuals of concern, develop safe alternative support arrangements such as identifying a trusted extended family member, advocate, or allocated professional to provide consistent support to the young person.
- Ensure that all engagement with parents and carers in Forth Valley aligns with the Trauma-Informed Practice Framework, promoting empathy, empowerment, and trust as foundations for effective partnership.

## 7.8 Practitioner wellbeing

Safeguarding children and young people affected by exploitation can be emotionally demanding and complex. Ensuring that practitioners are supported, valued, and able to reflect safely is a core element of effective safeguarding practice.

Regular reflective supervision focused on emotional impact, decision-making, and maintaining professional curiosity is integral to all Child Protection practice. Offer peer debriefs and multi-agency reflection after complex or distressing incidents to promote learning and mutual support.

Where there is disagreement between agencies the [Forth Valley Multi-Agency Guidance for Escalation](#) should be referred to.

Where staff have concerns about the behaviour or conduct of a member of staff, they can raise concerns or seek support with confidence using their own agencies whistleblowing policy.

## 7.9 Reflective questions for practice

1. What helped this child feel safe enough to engage?
2. Have we balanced safety with empowerment?
3. Who else needs to be connected to sustain recovery?
4. How am I noticing and responding to my own emotional responses?
5. What learning from this case should inform our wider practice?

## 7.10 Key takeaways

Children and young people recover best when they experience stability and trust, supported by small, consistent actions that reinforce safety and predictability. These moments of reliability matter more than grand gestures; they build the foundation for healing.

Support must extend beyond immediate crisis intervention and bridge into adulthood. Exploitation can leave long-lasting impacts, so planning for continuity, through transitions to adult services, education, and community networks, is essential to prevent gaps that could lead to renewed vulnerability.

Finally, practitioner wellbeing is not an optional extra. It is a core component of child protection. When professionals feel supported, reflective, and resilient, they are better equipped to offer the empathy, curiosity, and consistency that children need.

**Further resources can be found on the practitioner pages: [Child Sexual Exploitation and Child Criminal Exploitation – Forth Valley Practitioner Pages](#)**

## Appendix 1 Example actions to address CSE concerns.

<p><b>Disrupt contact with any person who poses a risk and / or is suspected of being involved in violence, drugs, or sexual exploitation.</b></p>	<ul style="list-style-type: none"> <li>• Monitor relationships and social connections that may place the young person at risk and help them recognise unsafe or exploitative behaviour.</li> <li>• Work with agencies such as Licensing, Fire and Rescue, Housing, and Community Safety to reduce opportunities for exploitation.</li> <li>• Where peers or adults may be recruiting or coercing the young person, use safety planning to limit home visits, manage phone contact, and screen communications.</li> <li>• Maintain a visible presence and conduct outreach in identified hotspot areas.</li> <li>• Secure and preserve evidence (e.g., mobile phones or SIM cards) linked to coercion or control, collaborating with Police Scotland as needed.</li> <li>• Support carers to put safe digital practices in place, such as removing devices overnight, using parental controls, and monitoring online activity appropriately.</li> <li>• Use MARAC or other multi-agency risk processes when required.</li> </ul>
<p><b>Raise awareness of exploitation, including relating to the young person's specific circumstances.</b></p>	<ul style="list-style-type: none"> <li>• Provide age-appropriate, trauma-informed education on online safety, sexting, consent, coercion, capacity, and risk-taking, ensuring the young person has a safe space to learn and ask questions.</li> <li>• Deliver healthy-relationships and rights-based work (individually or in groups) to strengthen the young person's understanding of relationships, self-worth, and trust.</li> <li>• Offer peer-friendly resources, such as articles, booklets, videos, or podcasts, to encourage reflection and self-directed learning.</li> <li>• Share trusted online resources for young people (e.g. Thinkuknow, CEOP, Childline, Fearless, Stop It Now) to build awareness of online and in-person exploitation.</li> <li>• When appropriate, link the young person with peer mentors or youth participation programmes so they can learn from others' experiences and coping strategies.</li> <li>• Collaborate with schools, colleges, and youth services to promote risk awareness, resilience, and consistent safety messages.</li> <li>• Ensure the young person has a consistent, trusted key worker (Named Person, Lead Professional, or another agreed practitioner) to provide continuity, build trust, and coordinate support.</li> </ul>
<p><b>Empower parents and carers.</b></p>	<ul style="list-style-type: none"> <li>• Provide clear, accessible information about child sexual exploitation, including signs, impacts, and where to seek support, along with resources outlining parents' and carers' rights and responsibilities.</li> <li>• Offer family support to strengthen home stability: helping with routines, communication, and consistent boundaries and involve the young person where possible to promote shared understanding.</li> <li>• Collaborate with parents, carers, and foster carers as key safeguarding partners, supporting them to recognise and respond calmly to indicators of exploitation.</li> <li>• Encourage parents and carers to share relevant information (e.g., names, places, vehicle details) with social work or Police Scotland to</li> </ul>

	<p>support safety planning.</p> <ul style="list-style-type: none"> <li>• Use Family Group Decision Making (FGDM) to involve extended family and trusted adults in identifying protective solutions and widening the young person’s support network.</li> <li>• Support parents and carers to manage online safety at home by setting Wi-Fi or app limits, using parental controls, and maintaining open conversations about digital risk.</li> <li>• Increase awareness of local hotspots or risk locations and agree safe, realistic travel arrangements and curfews focused on protection, not punishment.</li> <li>• Promote proactive safety responses, if a young person does not return home or respond to contact, carers should attempt to reach them promptly and, if unsuccessful, contact Police Scotland without delay.</li> </ul>
<p><b>Reduce the risk of missing episodes.</b></p>	<ul style="list-style-type: none"> <li>• Explore and address both <i>push</i> and <i>pull</i> factors influencing the young person going missing, using the National Practice Model and Resilience Matrix to understand needs, motivations, and relationships.</li> <li>• Support the young person and their family to strengthen relationships through restorative discussions, mediation, or family support, aiming to reduce conflict and increase connection.</li> <li>• Encourage predictable, nurturing routines—such as shared meals, consistent sleep patterns, and positive time together—to build stability and belonging.</li> <li>• Identify and respond sensitively to domestic abuse or family conflict, ensuring appropriate supports are in place for all affected and recognising the impact on the young person’s safety and wellbeing.</li> <li>• Address substance use through compassionate conversations and referral to specialist services for help and advice.</li> <li>• Consider temporary respite or extended family care where a change of environment may reduce risk and provide space for the young person to feel safe and supported.</li> <li>• Ensure all decisions are multi-agency and child-centred, guided by the young person’s voice and best interests.</li> </ul>
<p><b>Promote physical safety</b></p>	<ul style="list-style-type: none"> <li>• Work with the young person to identify triggers and early warning signs and agree trauma-informed de-escalation strategies so professionals and carers respond consistently and calmly.</li> <li>• Set clear intervention plans for situations where de-escalation does not work, prioritising safety and dignity.</li> <li>• Seek legal advice where needed to ensure the most appropriate protective measures are used, in line with legislation.</li> <li>• Work jointly with Police Scotland to determine whether police powers or disruption tactics are required to prevent harm or remove the young person from immediate danger.</li> <li>• Consider a National Referral Mechanism (NRM) referral where there are indicators of trafficking or exploitation, ensuring prompt information-sharing with partners.</li> <li>• Promote sexual health and wellbeing sensitively and without judgment, helping the young person make informed choices.</li> <li>• Encourage access to specialist sexual health services for screening,</li> </ul>

	<p>contraception advice, and relationship support.</p> <ul style="list-style-type: none"> <li>• Ensure relevant health alerts are in place (e.g. school nursing, sexual health, emergency departments) so key professionals are notified if the young person presents with injuries or seeks sexual health care.</li> <li>• Obtain informed consent and support the young person through medical examinations or investigations, ensuring they understand the purpose and have a trusted adult for advocacy.</li> <li>• Maintain a strengths-based, wellbeing focus, recognising that supporting physical health and safety helps the young person rebuild control, trust, and stability.</li> </ul>
<p><b>Raise awareness of risks of alcohol and substance misuse</b></p>	<ul style="list-style-type: none"> <li>• Refer to appropriate substance use services to provide advice, information and support about alcohol and substance misuse.</li> <li>• consider messages that can be delivered to cohorts of children in education</li> </ul>
<p><b>Improve school / college / training attendance</b></p>	<ul style="list-style-type: none"> <li>• Work proactively with education providers to address bullying, peer pressure, and non-attendance in a supportive, restorative way, recognising these may signal distress or exploitation.</li> <li>• Ensure the young person is safe within their learning environment, with trauma-informed safeguarding and anti-bullying measures applied consistently.</li> <li>• Deliver learning that promotes understanding of consent, healthy boundaries, online safety, and respectful relationships.</li> <li>• Identify a trusted key contact in school, college, or training who maintains a consistent, positive relationship with the young person.</li> <li>• Support flexible or alternative learning options that reflect the young person's interests and strengths, keeping education meaningful and achievable.</li> <li>• Promote participation in after-school or community activities, offering funding or practical help where needed to build connection, confidence, and belonging.</li> <li>• Maintain continuity of learning during absences through outreach, home learning, or contact with a trusted adult.</li> <li>• Ensure education providers maintain regular communication with parents/carers and the social worker when the young person is absent or disengaging, enabling early, coordinated support.</li> </ul>

# Appendix 2 Process map one – Identifying and responding to children at risk of, or being sexually exploited – vulnerabilities

