

# Serious Case Reviews and Extra-Familial Harm: Missed and Emerging Opportunities to Develop Contextual Practices

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## Abstract

The interpersonal harms that young people experience beyond their families have been documented internationally as have the challenges of protecting those effected using existing child welfare systems. Concern about this in the UK has led to development of 'contextual' child protection systems—capable of targeting the peer group, school and community contexts where extra-familial harm (EFH) occurs. This study examined whether reviews of serious incidents (serious case reviews (SCRs)) provide an evidence-base for understanding the contextual dynamics of EFH and/or developing contextual responses. SCRs ( $n=49$ ) from 2010–2020, where adolescents were harmed in extra-familial contexts, were analysed over two stages. Stage 1 involved thematic coding under four research questions. Using a framework analysis, Stage 1 themes were grouped around according to: contexts associated with EFH; the nature of social work responses and case review recommendations. Findings suggest that SCRs provide a limited account of the contextual dynamics of EFH. Whilst reviews illustrate that social work responses rarely address the contextual dynamics of EFH, many reviewers have neglected to focus on this shortfall when recommending service improvements. For case reviews to inform contextual child protection systems, information provided to review authors and the design of review requires adaptation.

**Keywords:** adolescence, case reviews, contextual safeguarding, exploitation, peer-abuse

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## Introduction

In England and Wales, ‘serious case reviews’ (SCRs) are conducted when children (under-18) are fatally or severely harmed (Brandon *et al.*, 2020). Since 2015 these reviews have paid increased attention to extra-familial harm (EFH), in a context where policymakers, researchers and children’s services departments are reconsidering how child protection systems support young people in these situations (Office for Standards in Education, Children’s Services and Skills (Ofsted), 2011; Hanson and Holmes, 2014; HM Government, 2018). Part of this reconsideration has recommended child protection responses to the range of contexts where young people experience EFH—including in their peer relationships, schools and public spaces where they socialise (Firmin, 2017, 2020; HM Government, 2018; Scottish Government, 2020; Welsh Government, 2021). This study analysed all publicly available SCRs in England and Wales (published between 2010 and 2020) that related to EFH in adolescence ( $n = 49$ ) to explore whether they might further shape how the contextual dynamics of such harm are understood; and if so, whether SCRs might inform future developments of contextual social work responses to EFH.

## Background

### EFH and child welfare responses

The interpersonal-harms young people experience beyond their families has been well-documented internationally. From abuse in their first dating/intimate relationships (Foshee *et al.*, 2014; Barter *et al.*, 2015), and peer-violence within their schools and neighbourhoods (Foshee *et al.*, 2014; Brandon *et al.*, 2020), to exploitation (including the use of domestic trafficking) for sexual or other criminal purposes including drugs transportation (Sapiro *et al.*, 2016; Lefevre *et al.*, 2019; McKibbin and Humphreys, 2019; Turner *et al.*, 2019; Aussemsa *et al.*, 2020; Wroe, 2021), these harms pose a significant risk to young people’s welfare.

Despite these risks, policymakers and practitioners in North America, Australia and various European countries have struggled to offer a child-welfare-based response to EFH. Many young people affected by these issues straddle victim/perpetrator identities; committing offences in the context of their own exploitation or harming others to avoid being harmed themselves (Cockbain and Brayley, 2012; Gorin and Jobe, 2013; Musto, 2022). Blurred boundaries between ‘victims’ and ‘perpetrators’ are not well-accommodated into services that assume clear-water between those occupying these roles. Welfare-based responses to young people who sexually or physically harm peers are limited in places such

as North America and the UK (Stone, 2011; Hackett, 2013; Letourneau, 2017). Moreover, in both these countries, researchers have noted the challenges of pivoting systems traditionally designed to protect children from their caregivers, to be used in protecting young people from risks beyond their family/care settings (Fong and Berger Cardoso, 2010; Firmin, 2022; Musto, 2022).

Young people experiencing EFH will often act against the advice of professionals or carers within constrained (and often violent) contexts (Sapiro *et al.*, 2016; Beckett, 2019; Lefevre *et al.*, 2019) and/or gain (materially or otherwise) in the context of being abused (Cockbain and Brayley, 2012; McKibbin and Humphreys, 2019; Turner *et al.*, 2019). As such, efforts to decriminalise responses to young people affected by forms of EFH such as sexual and criminal exploitation have not been without challenge (Degani *et al.*, 2015; Wroe, 2021; Musto, 2022) and have introduced other control-based methods (including deprivation of liberty) as a means of protection (Ellis, 2018; McKibbin and Humphreys, 2019; Aussemsa *et al.*, 2020; Musto, 2022). Out-of-home care is used in a range of countries for young people affected by EFH—providing a means of removing them from contexts where they are at risk of harm (Farrell *et al.*, 2019; McKibbin and Humphreys, 2019; Aussemsa *et al.*, 2020). However, young people frequently go missing from these placements, either to run to those who are abusing them or back to families or peers (Sapiro *et al.*, 2016; Pullman *et al.*, 2020).

A range of practice interventions to support young people affected by EFH (Fagan and Catalano, 2013; Hanson and Holmes, 2014; Hickle, 2020), and/or address the contexts where such harm occurs (Perdue *et al.*, 2012; Miller, 2013; Foshee *et al.*, 2014), have shown promise. However, these interventions are not always held within, or coordinated by, wider child welfare systems capable of responding to EFH (Firmin *et al.*, 2022).

### The UK's developing response to EFH

A string of inquiries and reports surfaced the shortfalls outlined above in UK responses to sexual exploitation and peer-sexual abuse (Jay, 2014; Pearce, 2014; House of Commons, Committee, W.a.E., 2016; Ofsted, 2021), and more recently to: young people being exploited to sell and transport, drugs, often referred to as criminal exploitation (Turner *et al.*, 2019); radicalised (Langdon-Shreeve *et al.*, 2021); abused in their romantic/intimate relationships (Barter *et al.*, 2015) or being severely/fatally injured by peers in public places (Brandon *et al.*, 2020).

Although types of EFH have some qualitative differences, they all largely occur outside of young people's families and in interpersonal relationships that are not parent/carer-child (Gorin and Jobe, 2013;

Hanson and Holmes, 2014; Brandon *et al.*, 2020; Firmin, 2020). They also may be experienced simultaneously and/or share contextual drivers (Firmin, 2017). These commonalities were noted when the UK Government grouped various harms under a definition of ‘extra-familial’ harm in statutory safeguarding guidance and required that social workers respond (HM Government, 2018).

Since 2018, statutory guidance in England (HM Government, 2018), Wales (Welsh Government, 2021) and Scotland (Scottish Government, 2020) have been amended to recommend social work interventions with peer, school and neighbourhood contexts associated with EFH, rather than solely rely on out-of-home care to remove young people from extra-familial contexts. National inquiries and research reports have recognised the potential of using a ‘Contextual Safeguarding’ approach to refocus child protection response in this manner (Brandon *et al.*, 2020; Child Safeguarding Practice Review Panel, 2020; Langdon-Shreeve *et al.*, 2021). Contextual Safeguarding was developed in recognition of the international evidence on the contextual dynamics of EFH, and the individualised nature of UK child protection responses (Firmin, 2020). It provided a conceptual framework to expand the lens of social work assessments, and the reach of social work responses, into peer/school/neighbourhood contexts in which EFH occurs (Firmin, 2020; Orr, 2021; Wroe, 2021). The approach has been piloted in ten UK test sites and has been rapidly adopted by tens of children’s services departments in 2019 (Firmin, 2020; Lefevre, 2020; Firmin and Lloyd, 2022).

### SCRs and contextual responses to EFH

The SCR process was introduced in England and Wales in the 2004 Children Act. SCRs are initiated when a child experiences severe or fatal harm to identify practice and system failures and improve safeguarding responses (Brandon *et al.*, 2020). An independent review author collects information from professionals involved in the case subject to the review—this may be via paper-based reports, interviews or reflective workshops. Family members and/or young people may also be consulted. The nature of SCRs and the methods for undertaking them have changed over time. Since 2010, more SCRs authors have adopted a system approach, situating individual professional errors within wider organisational contexts (SCIE, 2019; Brandon *et al.*, 2020).

Macro-analysis of SCRs has been conducted on a triennial basis to identify themes for practice improvement (Brandon *et al.*, 2020). The 2020 triennial review concluded that, based on their analysis of SCRs involving adolescents:

... it is not enough to work with individuals when a whole peer group is participating in harmful behaviour. Contextual safeguarding promotes

awareness of vulnerability in the context of the spaces where adolescents spend their time, for example online, in parks or at school (Brandon *et al.*, 2020, p. 113).

However, the review did not detail what SCRs suggested about EFH cases collectively. It reported on different forms of EFH separately, and on findings for adolescents as a collective group. Consequently, the thematic conclusions reached did not illuminate how the contextual dynamics of EFH, or social work responses to extra-familial contexts, are understood. Whilst the review's focus on adolescence was critical for service development, brief references made about extra-familial contexts suggest that SCRs could inform contextual responses to EFH.

In 2020, Mason-Jones and Loggie published the results of SCR analysis focused healthcare responses to sexual exploitation. They took a socio-ecological approach to identify how SCRs documented individual, interpersonal, organisational, community and structural factors of sexual exploitation and associated responses. Like the triennial review, their findings indicated the importance of considering contextual factors. However, their conclusions focused more on neglect as a precursor to exploitation and the extent to which healthcare professionals took 'appropriate' action, rather than social work responses to contexts of harm.

Both the Mason-Jones and Loggie (2020) study and the triennial review indicate that SCRs contain data on contextual factors associated with EFH. However, neither detail the extent to which contextual responses were used, or were even possible, amongst featured social work teams.

## Methodology

In this study, we explore how SCRs evidence the contextual nature of EFH; asking whether responses recorded in SCRs addressed contextual dynamics. SCRs have not been analysed in this way previously. Given the limited knowledge on the contextual dynamics of EFH (Firmin, 2017) and the under-developed nature of contextual social work responses, and child-welfare responses to EFH more broadly (Lloyd, 2019; Firmin, 2020; Musto, 2022), data held in SCRs could support practice development. We analysed SCRs to identify findings about

- the contexts associated with EFH;
- the extent to which said contexts received a safeguarding response;
- whether recommendations made by authors provided a foundation for developing contextual practices.

## Data collection

SCRs were sourced via the National Society for the Prevention of Cruelty to Children (NSPCC) National Case Review Repository, a database covering a range of cases and the only public source of UK SCRs. We requested SCRs involving young people over ten years old and where EFH was the primary focus. The keyword 'Adolescent' facilitated this search, records featuring 'Infant(s)' were excluded. In total, 129 SCRs were provided; an additional 13 were highlighted as potentially relevant but publicly unavailable.

## Sampling

Abstracts for the 129 SCRs were numbered and screened against the following inclusion criteria:

- involved young people aged ten or above;
- published between 2010 and 2020;
- available in public domain;
- centred around or included a form of interpersonal harm that occurred in an extra-familial context. Suicide linked to these forms of harm was also included: for example, suicide following experiences of peer-victimisation.

Exclusion criteria were SCRs:

- centred around familial abuse or where no EFH was mentioned in the abstract;
- involving children under ten years;
- published pre-2010;
- involving trafficking from abroad;
- involving suicide as a result of longstanding mental health difficulties, rather than EFH;
- involving accidental drug overdoses.

Forty-nine SCRs remained after screening. Types of EFH in the abstracts were recorded.

## Analysis

We qualitatively analysed the forty-nine SCRs in two stages. Firstly, coding the SCRs in NVivo 12 under four primary nodes (created using the four research questions) and associated child nodes ([Table 1](#)).

Once data from the forty-nine SCRs were organised under these nodes, a framework analysis was used to group themes identified under each research question. Results from child nodes were selected for

**Table 1.** Stage 1 coding framework

Primary node	Child node
The 'Contextual dynamics' of harm (any evidence that the harm in question was associated to social or public contexts in a young person's life)	Family Peers School Public location (physical) Online space Unconnected adults Other accommodation/service Other context
'Contextual dynamics of protection and safety' (any evidence that a young person found safety/protection in associated to social or public contexts/relationships)	Family Peers School Public location (physical) Online space Unconnected adults Other accommodation/service Other context
'Professional responses' (how was EFH responded to; in terms of who responded and whether individuals or contexts were the target)	Social care intervention Criminal justice intervention Other intervention (i.e. health) Support to individual young person Family support Contextual intervention (beyond the family) Close of case (to statutory agencies)
'Approach of the case review' (where did the case review locate challenges and what did they perceive those challenges to be)	Poor local implementation (of an otherwise effective system) Local system not equipped to address EFH Local system not equipped to support adolescents National system not equipped to address EFH Local system not equipped to address EFH Local system not equipped to respond to extra-familial contexts National system not equipped to respond to extra-familial contexts

further thematic analysis if they; produced a high number of references; were coded across many files or required a manual review for clarity.

We exported the results of child nodes selected for further analysis and manually organised these into themes. Themes were identified and grouped in a spreadsheet (one per primary node). Each sheet was dedicated to the results for one child node and recorded: the overarching identified themes; the number of files and number of references associated to each theme and the text excerpt for each reference. This allowed the research team to cross-check excerpts and identify dominant themes relevant to each question. For example, as illustrated in [Table 2](#), within the node for Contextual Dynamics of Harm, further analysis aimed to identify which public space locations were recorded as associated with EFH in the SCRs:

We removed double-counted files or references that upon second review were irrelevant to a theme or primary node, amending overall figures accordingly.

**Table 2.** Example of framework analysis at Stage 2

Primary node	Child node for analysis	Themes identified	Number of files	Number of references
Contextual dynamics of harm	Public space location	Generic area/location	11	21
		'Hotspot'	2	2
		Route	4	4
		Bus stop	2	2
		Parks/green spaces	4	5

## Ethics and limitations

This study is based on secondary analysis of published reports and featured no human participants. The ethics panel of both the University of Bedfordshire and Durham University, therefore, confirmed no additional ethical approvals were required for its completion.

There are two key limitations to this study.

Firstly, our sample is not representative of all SCRs from 2010 to 2020. Safeguarding partnerships are not obliged to publish SCRs. Seventy-one SCRs listed on the repository were unavailable for download, of which thirteen were potentially relevant to this study based on abstract screening.

Secondly, our results reflect how SCR authors perceived EFH; these perceptions are largely reliant on professional accounts (albeit some SCRs also featured the views of parents and/or young people). There are thus likely dynamics of EFH, and professional responses, not documented.

## Findings

The forty-nine SCRs were published from 2013 to 2020, with most released between 2016 and 2017 (Figure 1).

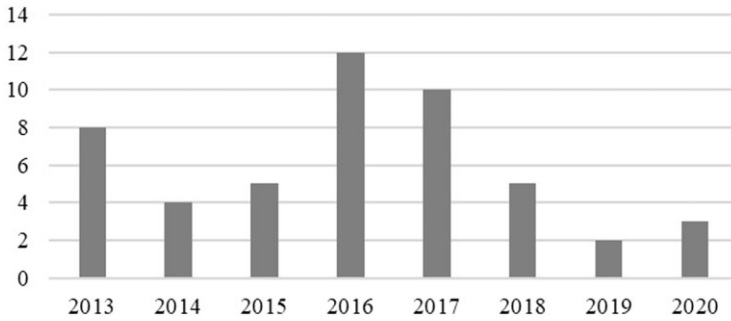
Sexual exploitation was the most common form of EFH found in SCRs, although many featured multiple forms of harm (Table 3).

Analysis of this sample produced findings on the contexts of safety and harm in cases of EFH, the nature of social work responses to EFH and the focus of SCR recommendations.

### Contexts of safety and harm identified in SCRs

Forty-six of the forty-nine SCRs identified social contexts which facilitated, exacerbated or hosted EFH. Twenty-eight SCRs also identified contexts where young people experienced safety.





**Figure 1:** Number of SCRs in the sample by year.

**Table 3.** Frequency of EFH types in the SCR sample

Harm type	Number of SCRs
Child exploitation via criminality	5
Child exploitation via sexual abuse	23
Drug misuse	2
Young people displaying harmful sexual behaviour	4
Peer-on-peer abuse	5
Radicalisation	1
Intimate partner abuse	3
Suicide	2
Serious youth violence	4

EFH was most readily associated with peer relationships ( $n=39$ ) and interactions with adults unconnected to families ( $n=31$ ). Most of these relationships formed in public space locations ( $n=18$ ) or schools ( $n=12$ ). Safety was most readily identified in the family homes/relationships of young people affected by EFH ( $n=15$ ). Safety was also reported in schools and other non-statutory services ( $n=13$ ). Safety in young people's peer relationships ( $n=10$ ) was noted but rarely explained.

### *Peer relationships and EFH*

Thirty-nine SCRs recorded harm in the peer relationships of young people affected by EFH. In thirty-one SCRs, young people were directly abused/harmed by a peer:

It is alleged that KA was a victim of a serious sexual assault after the youth club. The alleged perpetrator was a similar aged child to KA. (SCR 21, 2017)

In twelve SCRs, peer-abuse was the only form of EFH recorded; in nineteen SCRs, peer-abuse occurred alongside other forms of EFH.

Sexual harm featured in half the SCRs involving peer-abuse (sexual image-sharing and contact sexual assaults). Peer-abuse also involved bullying and verbal abuse, physical violence or threats of violence, or a combination:

The implications of the rape were very significant; the male was the boyfriend of a student at the same school as Child R, the crime became widely known and led to relationship difficulties and confrontations between Child R and peers. Child R was the victim of an assault by several other young people, (SCR 46, 2014)

Young people were abused by peers with whom they were in romantic or intimate relationships in six SCRs:

She also said that the abuse had started with shouting and Daniel had now become physically violent when he got jealous. (SCR 33, 2016)

In fifteen SCRs, authors described risks within young people's peer relationships as associated with the harm that they experienced, even if the EFH itself was not peer instigated. In eight SCRs, multiple young people were abused by the same adults ( $n=8$ ). In other instances, young people's peers were described as a 'negative influence' or facilitating their involvement in 'antisocial behaviour':

But he [Alternative Education provider] was also worried about U and the negative influence of older boys from a nearby estate. (SCR 35, 2016)

In six SCRs, young people's isolation from peers was noted as relevant to their experiences of EFH. Without same-age relationships, young people were vulnerable to coercion and sought belonging.

Peers were recognised as a source of safety in ten SCRs, although little detail was provided about the nature of these relationships and only one SCR interviewed a peer in the review process. Examples of safety included young people confiding to their peers, and peers reporting their concerns about their friends to professionals.

... it became clear that the friends of Child J who had tried to help her by disclosing the existence of the suicide letters and the fact that she was planning to kill herself. (SCR 54, 2013)

### *Non-familial adults and EFH*

Adults unconnected to young people's families were associated with EFH in thirty-one SCRs. Twenty-one SCRs did not state how a young person knew the adult(s). For example, eight offered no information other than summarising the nature of the harm:

The school had concerns about young teenage girls frequently visiting a local address, using illegal drugs and having sex with older men. (SCR 19, 2017)

In SCRs that described the circumstances of these interactions, nine reported that young people met, or were abused by, adults in public spaces:

Child M's parents now believe that Mr C originally came into contact with Child M when he was selling drugs in the vicinity of her school. (SCR 30, 2016)

Four SCRs identified adults using specific services/accommodation to meet young people:

Some of the children living at the YMCA were involved with this group and concerns were growing about them as they often returned distressed, intoxicated or with injuries. (SCR 1, 2016)

Seven SCRs reported adults contacting young people online, including grooming young people online before abusing them in-person, and using online platforms to threaten young people.

Nine SCRs documented abuse by organised groups of adults. In six SCRs, young people were sexually exploited with the abuse presented as a 'relationship':

It was noted that she was at increasing risk of exploitation, including from a new boyfriend who was in his 20s. (SCR 2, 2020)

### *EFH and family context*

In total, eighteen SCRs featured some form of vulnerability, risk or harm within the family of a young person who later or concurrently experienced EFH. Parents/carers did not instigate EFH in any of the SCRs featured, that is, parents/carers were not involved in exploiting their children. However, in three SCRs, young people met the adults who harmed them via a family relationship:

On 12th March 2012 Christine was murdered in her flat by her older sister's ex-boyfriend. (Case 49, 2013)

Victims of EFH also experienced harm within their families within the review timeframe ( $n = 10$ ), or prior to it ( $n = 8$ ), in eighteen SCRs. Some SCR authors suggested that abuse or wider challenges within families created conditions that pushed young people from their family homes and into unsafe contexts:

Within three months of her return to Rochdale there were reports that YP7 was being sexually exploited and she had left her mother's care saying that she had been physically abused by her. (SCR 48, 2014)

Non-recent familial abuse included 'physical abuse' ( $n = 1$ ), 'child abandonment' ( $n = 1$ ), 'neglect' ( $n = 3$ ) and domestic abuse between parents/carers ( $n = 2$ ); on three occasions, the harm was not specified. Harm that

occurred within a young person's family concurrently to their experiences of EFH included 'neglect' ( $n=5$ ) and 'physical abuse' ( $n=6$ ):

Bryony's boyfriend told the review that he and Bryony were arguing and that Bryony's father intervened and then assaulted him. Bryony retaliated and her father then assaulted her. (SCR 31, 2016)

Other forms of familial-harm that occurred in tandem with EFH included sexual abuse ( $n=1$ ), emotional abuse ( $n=1$ ) and domestic abuse between parents/carers ( $n=1$ ).

SCR authors associated challenges within family homes with young people's experiences of EFH. Five SCRs stated that 'family breakdown' increased a young person's vulnerability to experiences of EFH. Six described how families were unable to protect their children from EFH because parents were 'fearful' of their child, 'overwhelmed', 'minimised risks' or 'didn't understand' them.

In fifteen SCRs, a young person's family home, or their interactions with their parents/carers, created safety. Nine SCRs described how young people who experienced EFH benefitted from families who were supportive:

Records indicate her parents [sic] were considered to be caring, protective and supportive. In spite of tension between them, a real warmth of relationship had been observed between mother and daughter. (SCR 12, 2018)

Eight SCRs described the steps parents took to protect their children. In four, parents tried to create conditions of safety for their children by home-schooling, moving and/or spending increasing amounts of time with their child:

DE drew up a detailed timetable in an attempt to mimic a school day. She provided most of the education herself. (SCR 3, 2020)

Four SCRs also described how families worked with services to develop safety plans. In six SCRs, parents petitioned professionals to act, requesting support from Children's Social Care, Police and mental health services:

... Daniel's father ... detailed the events of the previous week and expressed concern that Daniel may have been subject to sexual exploitation. He asked the Local Authority to consider their duty under Section 47 Children Act. (SCR 53, 2013)

### *Locations and EFH*

SCRs described EFH occurring in, or associated with, public-space locations ( $n=18$ ), schools ( $n=12$ ) and online spaces ( $n=18$ ). Public-space locations were often generically described ( $n=11$ ):

... he was hit over the head with a bottle by a group of young men on his local estate. (SCR 35, 2016)

When SCR authors were more specific, they described EFH in ‘hotspots’ ( $n=2$ ), travel routes ( $n=4$ ); bus stops ( $n=2$ ) and parks ( $n=4$ ):

In May 2014, a 14-year-old girl said she was ushered away from friends and raped in a park by four youths at around 11 pm. (SCR 23, 2017)

When schools were identified as locations associated with EFH, peer-abuse ( $n=8$ ) or other harmful behaviour ( $n=4$ ) such as drug distribution, theft, grooming and weapon carrying, occurred on school premises. Beyond this, action or inaction of school professionals was characterised as exacerbating (or contributing to) EFH. For example, professionals investigated school-moves which destabilised young people affected by EFH ( $n=2$ ) and school staff struggled with young people’s behaviour further isolating them from services ( $n=2$ ). Like with families, whilst EFH didn’t occur within school, wider challenges in education left young people vulnerable beyond their school gates.

EFH occurred in online contexts, which facilitated harm in physical locations. In eight SCRs, young people were contacted online and exploited in-person:

The risk of sexual exploitation was recognised after two girls aged 15 years old went missing and travelled to other parts of the UK to meet males they had ‘met’ on Facebook. (SCR 26, 2016)

Five SCRs featured abuse via image sharing by young people ( $n=5$ ) and adults ( $n=4$ ):

It also became apparent that what is believed to be the video footage of the alleged sexual assault incident in 2014 had been passed around the school. (SCR 9, 2018)

Extra-familial locations were described as contexts of safety in twenty SCRs—this included thirteen schools and thirteen accommodation providers or support services. In these contexts, young people: formed positive peer relationships; accessed relationships with professionals who advocated for them and had a gateway for positive activities.

## Professional responses to EFH in the SCRs

All SCRs detailed social work responses to EFH. Most responses targeted individual young people and their families, with a smaller number targeting the extra-familial contexts.

### *Social work responses to extra-familial contexts*

Six SCRs reported professional responses to extra-familial contexts associated with EFH. In three, professionals identified connections between young people to inform decision-making:

Around this time children's social care were making links between the girls and the men at House A and a strategy meeting was planned. (SCR 1, 2016)

In five, professionals attempted to intervene with contexts associated with EFH:

Police and wardens conduct weapons sweeps (both routine and intelligence led) in various areas of the borough, including crime 'hotspots', parks, estates and streets. (SCR 35, 2016)

Interventions targeted locations by disrupting or increasing police presence in contexts associated with EFH. Similarly, except for one case, peer groups were disrupted (following mapping exercises). Interventions to promote the welfare of young people in contexts associated with EFH were largely absent. As such, the social work responses to extra-familial contexts appeared crime-focused, emergent and, in their infancy.

### *Social work responses to young people and families affected by EFH*

Forty SCRs detailed children's social work response to young people affected by EFH, over half of which ( $n=21$ ) were coordinated via a voluntary or statutory social work plan. In fifteen SCRs, plans involved social workers placing young people in out-of-home care, to move them away from contexts associated with EFH:

However, despite intervention by professionals, these problems escalated and in December 2007 Christine was accommodated by the Local Authority initially at a local children's residential unit and then in a foster home. (SCR 49, 2013)

In seventeen SCRs, social work plans featured 'casework' activities involving advising parents or young people affected by EFH, visiting young people to gain disclosures about the harm they experienced (and on some occasions causing others) or referring them to agencies for additional support:

The CIN [Child in Need] Plan created in January 2012 was about exploring his contact with the local gang culture, ensuring he had drugs and sex education, and supporting his mother. (SCR 23, 2017)

Participants agreed that the CSE pathway was a more appropriate approach than child protection enquiries, and that a Core Assessment should be completed. A referral was made to the specialist Barnardo's CSE team. (SCR 8, 2019)

When children's social care professionals referred young people on to external agencies their oversight/involvement sometimes ended. Twenty-six SCRs featured the closure of young people's cases to children's social

care. Support for a young person from professionals outside social care was used as rationale for ending social work oversight in twelve cases.

Twelve SCRs recorded that young people were closed to children's social care because their parents/carers were assessed as supportive and protective (even if this was insufficient for safeguarding them from EFH):

As Child M had been found in Reading, social care staff from that local authority liaised with colleagues in Surrey, convened a strategy discussion and then conducted child protection enquiries, interviewing Child M and her father. It was clear that there were substantial concerns about Child M's safety but the risks did not arise from the care she was being provided by her parents. (SCR 30, 2016)

Social work involvement stopped in a further five cases as a parent and/or their child did not consent to support:

At the time school had some concerns for KA of risk of possible sexual exploitation. A referral was made to Children's Social Care but Mother declined any further support for KA. After an assessment the referral was closed. (SCR 21, 2017)

And in fifteen SCRs, young people were assessed as not (or no longer) reaching a 'threshold' for social work oversight:

One week later, in response to the referral, MN [mother] was advised that the circumstances did not meet the threshold for a service by the Department but that she could self-refer to the Family Intervention Service. (SCR 39, 2015)

Children's social care responses to EFH documented in the SCRs, therefore, were largely characterised by case-work activities: advice, disclosure-management and onwards referral; coordinating activities to place young people into out-of-home care; as well as undertaking assessments and developing plans that provided a framework for these activities. SCRs rarely documented direct work with, or advocacy for, young people and families except when professionals challenged decisions to secure further support.

In fourteen SCRs, professionals challenged the decisions of colleagues in respect of young people affected EFH. In eight, professionals from education (three SCRs), police (two SCRs), health (one SCR—both sexual and mental health) and voluntary and advocacy services (two SCRs) challenged children's social care decisions to either end oversight of young people experiencing EFH or not commence an assessment following a referral from a partner agency:

When, shortly after case closure, YOUthink [sexual health service] contacted the children's social care manager [to explain that they were] uncomfortable in leading the response in such a high-risk case, and

thought that the matter should come under the lead of children's social care. (SCR 5, 2020)

In four of these SCRs, specific queries were raised about decisions to (or not to) place children in out-of-home care as a result of EFH. Six reviewers commented on the difficulties that professionals faced when challenging colleagues or partner agencies.

### Approach of the case reviewer

SCR authors recommended numerous ways to progress social work responses to EFH, overwhelmingly focused on improving local implementation of existing safeguarding procedures. Of the 1,742 references coded to reflect the case reviewer's approach, 965 (from forty-six SCRs) related to commentary on problematic local practices. When reaching such conclusions, reviewers implied that safeguarding responses would improve if existing national systems were better implemented locally. Far fewer SCRs recommended increased responses to extra-familial contexts associated with EFH; fewer still levelled these recommendations at national systems.

#### *Recommending responses to contexts associated with EFH*

Nineteen SCRs concluded that local systems were insufficient for addressing contexts associated with EFH. Three themes emerged in this respect. First, local information systems were not designed to record or identify, linkages between people or incidents ( $n=10$ ). Second, teams/individuals did not understand, or know how to intervene in, extra-familial contexts ( $n=9$ ). Third, local policies were insufficient for guiding responses beyond families ( $n=5$ ).

Fifteen SCRs concluded that national safeguarding systems required reform to respond to EFH (five of which made no comment on local systems). These SCRs were published from 2014 to 2019. Between 2017 and 2019, five of the seventeen SCRs published in this timeframe surfaced a need for national reform—three did not locate the need for change in local systems. Unlike commentary on local areas, national recommendations were rarely thematic. The only issue that appeared thematically (identified in seven SCRs) was that national safeguarding systems had not been designed to intervene in contexts beyond the family home:

In recent years, serious case reviews have started to consider cases involving abuse outside the home, with reviews of recent sexual exploitation cases and some organised abuse within establishments. However, the wider role safeguarding role has not been defined in terms



of the ‘public protection’ which was perceived largely as an issue for Police. (SCR 58, 2014)

Of the nineteen SCRs that identified local challenges in responding to extra-familial contexts, nine made no similar observation about national policy frameworks. The inability of systems to identify connections between young people or incidents was the most frequently identified local challenge ( $n = 10$ ):

What is clear is that referrals and concerns when they were raised with CSC were viewed as individual and singular episodes rather than emerging and escalating patterns of risk and consequently opportunities to view what was happening to Mark from a wider perspective were lost. (SCR 18, 2017)

Only three SCRs made a similar observation about the design of national child protection systems, all of which (SCRs 26, 47 and 58) had also observed the related local challenges:

Our current working methods and recording systems do not reliably identify patterns in individual and group behaviour. This reduces the chances of a timely response in the detection of victims and perpetrators of child sexual exploitation and leads to a more reactive rather than proactive approach. (SCR 26, 2016)

The dominant narrative in our SCR sample was that professionals were working in *local* systems incapable of identifying links between individuals and incidents—and it was this that impeded their responses to contexts associated with EFH; whereas wider research suggests that ‘national’ frameworks are yet to facilitate such local practices (Wroe and Lloyd, 2020). This variance was not unique to how SCRs examine system responses to the contexts associated with EFH. A focus on local reform also characterised other SCR recommendations to improve responses to EFH. Forty SCRs recommended changes to how local systems responded to various features of EFH; twenty-three recommended changes to national systems in which those local services operate. Similarly, thirty-nine SCRs recommended that local responses be redesigned to better engage with adolescents and twenty-three of them suggested similar improvements in national systems.

## Discussion

The data-set indicates that SCRs offer a limited insight into the extra-familial contexts associated with EFH—both as a source of safety and as a source of harm; reducing the extent to which SCRs further how the contextual dynamics of EFH are understood. Nonetheless, the data-set reinforces messages from international research into EFH, namely that

it: develops in young people's peer relationships and in contacts with adults unconnected to their families; occurs in public and school settings and may be exacerbated by challenges within families but also occurs without pre-existing familial vulnerabilities. Furthermore, whilst safety is frequently identified within families of young people affected by EFH, safety in extra-familial contexts is often under-explored or absent. Given this, one might expect professional responses in SCRs to have: targeted public space, school and online contexts where EFH occurred and the extra-familial relationships within them; and bolstered parental efforts to create safety for young people. Yet this was rarely the case.

Less than 15 per cent of SCRs in the sample documented professional responses to the contexts associated with EFH. Through casework activities, social workers targeted young people and their parents—reinforcing internationally established limitations of child-welfare responses to EFH in the UK, North America and Australia. Little about these responses created safety in contexts where young people had been harmed. Professionals discussed contexts but did not appear to take actions that created safety within them. It could be that SCR authors focused on how services monitored, rather than responded to, risks. However, the extensive information on awareness-raising to change the individual behaviour, onwards referrals and case closure, suggest these SCRs accurately documented service responses to EFH.

A mismatch between where EFH occurred and responses focused was stark; hence, we anticipated SCR recommendations to develop contextual practices. However, not all SCRs recommended that safeguarding responses better target contexts associated with EFH. Those that did frequently levelled those recommendations at local rather than national systems.

Consequently, this study identified a multilateral shortfall in the capacity of SCRs to advance contextual responses to EFH. SCRs could detail how EFH is contextual, note when practices (struggle to) address this dynamic, and explore whether responses to extra-familial contexts are possible within safeguarding structures; thus, contributing to both national and international debates about how to create child-welfare (and non-criminalising) responses to EFH. However, SCRs in the data-set underexplored the contextual dynamics of EFH, underacknowledged the absence of responses to extra-familial contexts and underestimated the national reforms required to facilitate this in the future.

The identified shortfall was not temporal. More contextually focused SCRs were published at different time-points throughout our sample and did not increase over time. Whilst England's safeguarding guidance has promoted contextual responses to EFH since 2018, it provides no detail about what this entails. If SCRs recommend that local practices target specific contexts associated with EFH, they may suggest responses above-and-beyond what national guidance requires. Instead, review authors could identify where local responses to EFH align with national guidance

but fall short in creating safety and thereby create an avenue for evidencing where national policy reforms are required concerning EFH.

## Conclusion

This study evidenced the potential for SCRs to improve understandings of contexts associated with EFH (and responses to them) and highlighted that this potential is yet to be realised. Given that England's safeguarding guidance recommended contextual responses to EFH in 2018, there may be merit in repeating this study in 2028 to establish if SCRs completed in the following decade increased consideration of contextual responses to EFH and/or national frameworks that would enable them.

For now, this study prompts us to consider where we level challenges to improve service responses to EFH. SCRs described situations where professionals challenged decisions that posed a risk to young people's welfare, such as decisions to end social work oversight in cases of significant EFH. These challenges generally targeted individuals—at most organisations—but rarely challenged the wider structures in which those organisations operated. Like many SCRs, professionals sought practice improvements by changing how individuals behaved within an unchanging system. Such an approach situates practice shortfalls in how professionals define/respond to EFH, rather than in how systems define/facilitate those professional responses—systems increasingly criticised by international social work scholars. By applying a contextual lens, we see that the systems in which professionals, and SCR authors, respond to EFH is where the shortfall lies; and where focused developments in coming years could assist international efforts to improve child-welfare responses to young people, and associated contexts, where EFH occurs.

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