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# **Families and Communities Against Child Sexual Exploitation (FCASE)**

## **Final Evaluation Report**

**University of Bedfordshire**

International Centre: Researching child sexual  
exploitation, violence and trafficking ([www.beds.ac.uk/ic](http://www.beds.ac.uk/ic))

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Any errors are the responsibility of the research team.

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# 1 Executive summary and key messages

This is the final evaluation report for the Barnardo's Families and Communities Against Sexual Exploitation project (FCASE), produced by the International Centre, researching Child Sexual Exploitation, Violence and Trafficking at the University of Bedfordshire. The programme was launched in April 2013, funded by the Department for Education (DfE) and concluded in March 2015. The evaluation was undertaken during the same period.

The FCASE model has been piloted in three sites, which for the purposes of this report have been anonymised and will be referred to using pseudonyms. It consists of the following elements: a structured programme of six to eight weeks direct work with young people and families where a risk of child sexual exploitation (CSE) has been identified; delivery of CSE training with professionals; and undertaking community awareness raising. The evaluation has been informed by a range of qualitative data. The report identifies the elements that work well and some of the challenges in its implementation. This had been done in order to determine good practice in supporting families and communities and embed more effective practice on protecting children and young people, including those in foster care, from sexual exploitation, harnessing the protective factors within a child's family and/or foster home. The learning from the project is intended to help other agencies to implement the FCASE model. An on-line learning resource is to be produced in order to facilitate this process<sup>1</sup>.

## Direct work

The original target for the direct work across the three sites was to work with 210 cases of young people affected by CSE. At the end of the pilot a total of 227 cases were completed. Thirty-nine young people were removed from the first year's data because they were assessed as high risk or were disengaged from services, thus were not counted officially. Nevertheless, they required substantial support from staff and are therefore reflected in the overall targets within this report.

Findings from the evaluation confirm that a unique benefit of FCASE is that it is a positive model, which legitimises work with parents and families. To affect this positive outcome, separate workers are provided for the parent/carer and young person. This enables families to build on their strengths in order to prevent and support those affected by, and at risk of, CSE.

## Community awareness raising events

The original target for the delivery of community awareness raising events was 36. At the end of Year 1, 28 community awareness raising events had been completed; a further 29 took place in Year 2 – totalling 57. Teams have showed real initiative in developing this part of the FCASE programme with target populations and community groups within their areas. Secondary analysis of FCASE evaluation data confirmed that each site delivered a wide range of community awareness raising events which have reached over 1800 people.

## Training sessions

The objective in regards to training was to provide awareness raising training to a minimum of 1800 members of the multi-agency teams working with children in order to recognise the

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<sup>1</sup> Please contact Barnardo's for more details.

risk indicators / vulnerabilities factors associated with CSE. Although the research team was not responsible for evaluating the training events it is worth noting that a training element was delivered to a total of 2353 participants. All three sites recorded a wide variety of training events. Data collected through interviews, two roundtable events and secondary analysis of the training evaluation feedback suggests that the training component not only raised awareness of FCASE but also led to referrals. This gave Barnardo's FCASE teams an increased awareness of the level of understanding of CSE among professionals and in communities and helped support their development of community awareness raising.

## **Key messages – Direct work**

*FCASE legitimises work with parents and families and is an important and innovative project which demonstrates the value of:*

- *Working with parents and carers alongside young people using a strengths-based approach.*
- *Equipping families with the knowledge and information to help them safeguard their children.*
- *Promoting the role and value of the voluntary sector in developing working relationships with families and 'building bridges' between families and statutory services.*
- *Engaging workers with specialist knowledge, relational skills, and family centred / victim centred working.*
- *Assigning separate key workers to parents/carers and young people.*
- *Providing continuity of workers in building trusting and productive relationships.*
- *Providing effective training that makes appropriate and accurate referrals more likely.*
- *Ensuring flexibility of meetings and sessions with families and young people.*
- *Providing adaptability of programme materials which are localised, needs-based and developed as required.*
- *Promoting 'Safer You' family meetings as important spaces for resolving conflicts, improving communication and devising action plans that increase protective factors.*
- *Having wider CSE support within the service. This can include:*
  - *Accessing other CSE services so that inappropriate referrals or those that do not meet the criteria can be channelled towards more appropriate intervention.*
  - *Referring young people (or even parents and carers) on to support groups which can help to sustain the learning or manage overarching push factors such as low self-esteem, bullying and attachment difficulties.*
  - *The use of tried and tested materials for the sessions and access to more diverse materials which might include localised case scenarios.*

## **Key messages – Community awareness**

The component of the FCASE programme which aims to raise community awareness of CSE demonstrates the value of a process which:

- *Has clear aims and objectives and is incorporated alongside the direct work.*
- *Includes scoping exercises (for example Equality Assessments and analysis of existing work) in order to identify which groups are accessing services and which are under-represented.*

- *Evaluates community awareness raising to better understand how knowledge and awareness can be raised effectively among different communities and groups.*
- *Builds long term relationships and partnerships with groups, communities and sectors.*
- *Makes use of a multitude of spaces, places and resources.*
- *Invests resources and embeds good service planning.*
- *Recognises the complexity of the dynamics of community awareness raising.*
- *Considers careful selection of routes into work with communities, taking into consideration child protection and children's rights.*
- *Develops appropriate strategies (such as single-sex groups) to enable the positive and open discussion of CSE, sex and sexuality with a wide range of communities.*
- *Incorporates co-work and support through FCASE staff training and through working alongside CSE champions in different communities.*

## 2 Introduction

FCASE is funded by the Department for Education (DfE) via their National Prospectus Grants Programme 2013-2015. This programme sits under National Priority 3 – 'To develop and reform safeguarding services that protect and support children at risk from harm'. The evaluation undertaken by the University of Bedfordshire's International Centre: Researching child sexual exploitation, violence and trafficking<sup>2</sup>, was initially commissioned by Barnardo's in April 2013 and work began in late summer 2013. The evaluation ended in March 2015.

The evaluation has found FCASE to be an important and innovative project. Barnardo's has been at the forefront of raising awareness of the issue of child sexual exploitation nationally, and has spearheaded many projects throughout the UK<sup>3</sup>. FCASE combines several elements of work in the area of CSE that have not previously been brought together in a structured programme. This includes CSE training, awareness raising and direct work with children and their families and carers. Evaluation of this is important and timely in the light of widespread interest in the development of policy and practice in this area.

This final report provides an overview of all the evaluation outputs produced by the International Centre: Researching child sexual exploitation, violence and trafficking, which include:

- Year 1 report (D'Arcy et al, 2015 forthcoming).
- Literature review (Bostock, 2015 forthcoming): Effective approaches to community awareness raising of child sexual exploitation: a review of the literature on raising awareness of sensitive social issues.
- Case-studies report (D'Arcy et al, 2015 forthcoming).
- Literature review (D'Arcy, 2015 forthcoming) Exploring effective approaches to support the parents of adolescents who have been affected by CSE: mapping and reviewing the literature<sup>4</sup>.

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<sup>2</sup> [www.beds.ac.uk/ic](http://www.beds.ac.uk/ic)

<sup>3</sup> [http://www.barnardos.org.uk/what\\_we\\_do/our\\_work/sexual\\_exploitation.htm](http://www.barnardos.org.uk/what_we_do/our_work/sexual_exploitation.htm)

<sup>4</sup> All documents will be on the International Centre's website following the final report launch

## 3 The FCASE project

The FCASE project emerged out of the experience of Barnardo's work with sexually exploited young people. This has included a range of evaluated projects which have demonstrated the value of CSE intervention and support for young people (Department of Health and Chanon Consulting, 2014; Smeaton, 2013; Barnardo's, 2012). At the same time, this practice experience has drawn attention to gaps which exist in provision for sexually exploited young people and their families – specifically, the absence of preventative services and support for families. These issues have also been highlighted in other research (see, for example, Barnardo's, 2011; Jago et al, 2011; PACE/Virtual College, 2013; Scott and Skidmore, 2006; Berelowitz, et al 2013). The FCASE project is both designed to build on existing expertise and to fill these gaps. FCASE is delivered as a component of Barnardo's services as they sit within existing local authority structures and processes for the safeguarding of children and young people.

## 4 The FCASE aims and model

The specific aim of FCASE is to embed more effective practice on protecting children and young people, including those in foster care, from sexual exploitation, through harnessing the protective factors within a child's family and/or foster home.

The model seeks to achieve this aim by building on existing processes such as the Common Assessment Framework (CAF)<sup>5</sup>, the Team Around the Child (TAC) and the principles of Family Group Conferencing<sup>6</sup> (FGC). It emphasises the need for work with parents/carers as well as young people in order for the early signs of child sexual exploitation to be identified, and for preventative strategies to be put in place. In doing so it aims to help processes for the sharing of intelligence and the disruption of abuse. The project has been piloted in three sites where there are existing Barnardo's projects working with sexually exploited young people. For the purpose of this report these are referred to as Oakhill, Holmoak and Blackthorn (see overview of these areas on page 11).

The three key objectives of the FCASE project were to provide:

- Awareness training to 1,800 professionals working with children.
- A six to eight week direct work programme with young people and their parents/carers (this includes the introduction of FCASE, initial assessment and incorporation of additional materials).
- Support and information to representatives from different communities to develop understanding of CSE via 36 community events.

The desired outcomes of the FCASE model were:

- Enhancement of parent/carer-child relationships.
- Reduction in family conflict.
- Reduction in the level of risk/harm for children.
- Children/parents/carers contributing to planning and decisions.
- Adults/children able to identify abusive/exploitative behaviour.

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<sup>5</sup> <http://www.protectingchildren.org.uk/cp-system/child-in-need/caf>

<sup>6</sup> [http://www.barnardos.org.uk/compass/compass\\_what\\_we\\_do/compass\\_family\\_group\\_meetings.htm](http://www.barnardos.org.uk/compass/compass_what_we_do/compass_family_group_meetings.htm)

## 5 The Evaluation

In light of the innovative nature of the FCASE project, evaluation of this pilot is important not only to the development of Barnardo's work in this area, but in contributing to the evidence base relating to practice in the area of child sexual exploitation. This evaluation is particularly significant as, despite the pioneering work undertaken by Parents Against Child Sexual Exploitation (PACE) UK, there is very little research on the effectiveness of parenting support in the field of CSE and in relation to the safeguarding of adolescents more generally.

The evaluation set out with the following aims:

- 1 To evaluate the outcomes of the FCASE model in relation to its aims and objectives in the three areas of training, direct work and community awareness.
- 2 To identify the key mechanisms of change through which these outcomes were achieved.
- 3 To explore the experiences of a sub-sample of 30 FCASE cases<sup>7</sup> as part of the direct work component of FCASE [the detail of this work can be found in a separate case study report (D'Arcy et al, 2015 forthcoming)].

These aims have been achieved.

### Methodology

This evaluation represents a thematic review of the FCASE programme supported by qualitative and some quantitative evidence<sup>8</sup> gathered using mixed methods. The design has been informed by a realist approach to evaluation (Pawson and Tilley, 1997) which aims to identify which programme interventions work in what ways and in what conditions to produce specific sets of intended and unintended outcomes. A realist approach focuses attention on three key features as follows:

**Context** – those features of the condition into which programmes are introduced that are relevant to the operation of programme mechanisms. The fact that FCASE has taken place in three different sites and aims to effect change amongst different groups – professionals, young people, parents/ carers and wider communities, makes the realist approach especially appropriate for the evaluation. Contextual factors have included geography and demography; national and local policy contexts regarding safeguarding and CSE; Barnardo's national strategy; professional expertise and local voluntary sector relationships; the services available to vulnerable young people and their families and the Barnardo's services within which the FCASE teams are located. The contextual features are reported in more detail in the Year 1 Report, although an overview is provided on page 11 of this report.

**Mechanism** – by addressing mechanisms the evaluation looks at what is it about programmes and interventions that bring about any effects. For FCASE, this has included the knowledge, skills and attitudes of the project staff in working with young people, families and communities; the ways in which different issues are prioritised as well as the ways in which young people and families have engaged with the programme. The key mechanisms of change through which the outcomes were achieved are expanded on in section 8 and 9 of the report which concentrate on the direct work and community awareness elements of the pilot.

**Outcome patterns** – these include the intended and unintended consequences of programmes. These outcomes relate chiefly to young people, their families and communities. However, there are also unexpected outcomes relating to influencing/informing FCASE staff and outcomes which may relate to other Barnardo's services and the training of professionals.

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<sup>7</sup> Although the aim was to complete 30, 31 case studies were actually included.

<sup>8</sup> Reference is made to the Outcome Monitoring Data which is used by Barnardo's for capturing progress on key outcome indicators. This data is independent of the evaluation but useful in illustrating the kinds of outcomes the FCASE programme sets out to achieve.

## 6 Ethics and Methods

The evaluation received ethical approval from the University of Bedfordshire's Institute of Applied Social Research Ethics Committee and the University of Bedfordshire's Ethics Committee. Ethical approval from Barnardo's Research Ethics Committee was also granted (March 2014). The ethical process follows the requirements for ethical approval as outlined by The Economic and Social Research Council (ESRC) and The British Sociological Association Ethical Guidelines. The International Centre: Researching child sexual exploitation, violence and trafficking places a high priority on ethical, child and young person centred applied research in the area of child sexual exploitation and the FCASE evaluation seeks to build on this. Participation in the evaluation was voluntary and all participants were asked for written consent. Information was confidential unless information was disclosed that indicated a young person was at risk of serious harm to themselves or others. An agreed protocol was established for managing this event if it were to occur. All data were collected and stored securely and will be destroyed following publication. Pseudonyms have been used for both young people and practitioners throughout the report.

In order to meet the evaluation aims, and in line with a realist approach, a multi-method approach was utilised, involving the collection of a mix of qualitative and quantitative data. To capture and understand the development of the programme, and experiences of this within the different sites, the following methods were used:

- Interviews with the team leaders in the three pilot areas.
- Two focus group discussions via twice-yearly roundtable events with project staff, which took place on 31 January and 31 October 2014.
- Thematic analysis of project documentation.
- Research team attendance at evaluation board meetings and project manager attendance at selected strategic board meetings.
- In-depth examination of 31 cases across the three sites, which included referral processes and interagency working. The 31 case studies have involved, where possible and appropriate, interviews with young people, a parent or carer, the relevant project worker(s), and analysis of relevant outcome monitoring data.
- Interviews with 20 key professional stakeholders (from agencies other than Barnardo's), who were involved with the direct work or community awareness raising.
- A literature review to establish the extent and nature of existing research and evaluation relating to 'community awareness raising' on child sexual exploitation and other, similarly sensitive issues. The review has informed the authors' approach to evaluating the effectiveness of such awareness raising. A summary of the literature review is found in the Year 1 Report available on [www.beds.ac.uk/ic](http://www.beds.ac.uk/ic) and [www.barnardos.org.uk](http://www.barnardos.org.uk)
- Three direct observations and nine reflective accounts produced by FCASE staff following community awareness raising events, interviews with FCASE staff and professional stakeholders and notes from the roundtable meeting in October 2014.
- A literature review exploring effective approaches to supporting the parents of adolescents who have been affected by CSE: mapping and reviewing the literature (D'Arcy, 2015 forthcoming).

## The use of Barnardo's data

The evaluation team collated information relating to the outcomes of the training element but were not directly responsible for evaluating this element; the evaluation of the training was completed by Barnardo's and this report refers to this data on page 40. It should also be noted there is no analysis of costs in this evaluation.

## 7 Context

This section expands on the contextual features or conditions under which the FCASE programme was introduced. This is relevant to its delivery [the importance of scoping the local area] and evaluation outcomes. It is important as the contextual features can be both positive and negative and are significant in terms of the application of the findings of this report in the development of similar projects.

**Geography and demography:** While both Blackthorn and Oakhill are operating in mainly urban contexts, the Holmoak project is working across a large rural area. Blackthorn is a large city and metropolitan borough and one of the most deprived cities in the UK. The city council has been facing major challenges and inadequacies in child protection. This context contributes greatly to a complex and challenging environment for the Blackthorn FCASE team. The Blackthorn FCASE Team has been running a specialist CSE service since 1998.

Oakhill is a large industrial town and is one of the most deprived local authorities in the UK. Barnardo's CSE service has been running since 1998 and works to enable young people to exit and recover from sexual exploitation, a number of projects are provided to support this work, including outreach work and the FCASE project.

Holmoak is one of the largest shire counties in the UK. Levels of deprivation are not as low as in the other sites; however the FCASE team has to cover wide geographical areas, meaning that they rely a great deal on outreach. The CSE service in Holmoak has been operating since 2000. Further detail about the key characteristics of the sites can be found in the Year 1 and Case Study report. Explanations of the mechanisms and outcomes across the three research sites are expanded upon in the sections on the direct work and community awareness.

The composition and turnover of the local population is an important context for community awareness raising. For instance, Oakhill has a particularly high number of adults seeking asylum. The levels of vulnerability of their families have increased because of the fast tracking of immigration claims and changes to social care provisions for those seeking asylum. This posed a challenge for those involved in training these adults as community champions to raise awareness of CSE. The short term nature of residency meant that the same exercise needed to be replicated when families left or new families moved into the locality.

**The national and local contexts regarding safeguarding and CSE:** Over the past year a series of high profile police operations, court cases and ongoing investigations into the sexual exploitation of children have drawn attention to the extent of CSE across the UK. As a result there has been increasing political and media attention on Local Safeguarding Children Boards' (LSCBs) safeguarding policies and statutory responses to the identification of abuse. This context has affected FCASE teams in different ways. A notable example of this is the extent to which some schools, statutory services and other organisations have

been able to engage with FCASE staff. Two effects of this changing context are particularly striking. Firstly, in some schools, increased awareness has led to a greater willingness to engage. Secondly, this increased awareness has also led to nervousness within some schools that undertaking CSE prevention work may be seen as a declaration that 'there is a problem here with CSE'.

The impact of these two effects was evident in each of the three localities. For example, Holmoak needed to raise the profile of its CSE service in the community and to address the assumption that CSE is not an issue in the locality. The CSE service here also had to respond to referrals while they received limited CSE support from other services. Blackthorn was operating in a context of 'high risk' referrals although the FCASE programme is intended to support young people at low risk of CSE. Oakhill has well-established CSE services but did experience challenges in working with schools and received very few referrals from secondary schools in their area. They received zero referrals from primary schools despite contacting every head teacher via telephone, email and attending parent evenings.

**Barnardo's national strategy:** Barnardo's have, for the past two decades, been supporting children who have been affected by sexual exploitation, and is one of the largest Non-Government Organisation (NGO) providers of CSE related services. In the UK, voluntary sector services have been key players in the prevention and support of CSE (Scott and Skidmore, 2006; Pearce, 2009). FCASE builds on Barnardo's wider work with sexually exploited young people, developing a unique feature within the work with parents/carers. The FCASE programme therefore complements and develops their national strategy in supporting CSE prevention by drawing on other areas of work, such as family group work, influencing and awareness raising strategies.

**Professional expertise and voluntary sector relationships:** The staff teams across all three sites are highly skilled professionals in the field of CSE work and have significant relevant experience to bring to the project. In Oakhill all staff work full time on FCASE, whereas in Blackthorn and in Holmoak there are part-time workers and staff who work on other projects during their working week. Whether staff were part-time or full-time the majority were able to deliver the FCASE work programme as soon as it was implemented due to the fact that FCASE was located within the broader Barnardo's service. This provided access to other skills and expertise and, importantly, the potential for cases to be 'referred on' to other services as necessary. FCASE staff are appointed and trained to have the necessary skills for undertaking this complex work. They demonstrated a flexible approach to the programme delivery to meet the needs of young people and their parents/carers whilst simultaneously undertaking complex assessments and recognising where additional expertise was necessary. This is further evidenced in the case study report (D'Arcy et al, 2015 forthcoming) and the findings of the direct work in section 8 of this report.

**The services available to vulnerable young people and their families and the Barnardo's services in which FCASE are located:** Two sites have long established services, and the third team operates in an area where there are limited CSE services. At the first roundtable event participants emphasised the importance of FCASE being located within wider CSE services so that young people could be referred on to other aspects of the centres, such as group work activities. Wider services also facilitated appropriate 'exit' strategies for those young people who had been referred. This meant that each site was operating within different possibilities and limitations for processing referrals and for

referring young people on to higher risk service provision if required. Having access to wider Barnardo’s CSE services facilitates the processing of referrals, channelling inappropriate referrals to other sections of the organisation and providing ongoing support (e.g. Oakhill young people support groups) as evidenced in the following section of the report. It is important to stress that all teams needed to raise awareness of the FCASE project quickly, develop relationships and build networks with relevant partners and communities to ensure appropriate referrals for the direct work.

## 8 Findings: Direct work

**Targets:** Over the duration of the project, FCASE aimed to work with 210 cases (70 per site), however findings confirm this target was exceeded.

**Table 1: Numbers of cases worked with across the time period of the FCASE project**

Year 1	Year 2	Target	Total achieved
111 (72) <sup>9</sup>	116	210	227(118)

At the end of the pilot a total of 227 cases had been completed. Thirty-nine young people were removed from the first year’s data because they were assessed at high risk or were disengaged from services, thus not counted officially. Nevertheless, they required numerous staff hours and are therefore reflected in the overall targets within this report.

**Process:** The process for FCASE direct work follows specific steps:

- A referral,
- Allocation of workers by the FCASE Lead Practitioner,
- Introductory meeting(s),
- Delivery of the direct work programme involving regular (separate) meetings between parents/carers and their worker and the young person and their worker. These meetings are intended to run parallel with each other,
- A ‘Safer You’ family meeting with parent(s)/carer(s), the young person, both workers and sometimes other relevant professionals present. This usually takes place a few weeks into the direct work programme.

The direct work programme contains a series of introductory sessions covering:

*For Parents:* Understanding and living with risk; what is CSE; abusive relationships and grooming; the Internet; consent and a review of learning session.

*For Young People:* Relationships; risk; abusive relationships; grooming in relationships; consent, law and E-Safety and a review of learning session.

Data relating to the direct work element of the programme has been collected via:

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<sup>9</sup> The numbers in brackets are the official figures (excluding the 39 cases explained above)

- Interviews with site team leaders.
- Information from all key workers<sup>10</sup> (total 15) from each site.
- Roundtable discussions with all three FCASE teams.
- Interviews with 25 young people.
- Interviews with 25 sets of parents<sup>11</sup>.
- Interviews with 5 carers.
- Interviews with 20 stakeholders.

Findings from this data suggest that FCASE has exceeded its targets in direct work with families. As explained previously, the realist methodology has meant that the evaluation sought to understand ‘what works, for whom, in which circumstances and why’ (Pawson and Tilley, 1997). The next section will expand on the actual impact of these targets by concentrating on the key mechanisms of change through which the aims and outcomes of FCASE were achieved. As noted under ‘ethics’ in the methods section, pseudonyms have been applied to all quotes from FCASE workers, young people, parents, carers and stakeholders to protect their identity.

## 8.1 The key mechanisms of change through which outcomes from direct work were achieved

**Staff as experts and advocates:** The FCASE staff teams across all three sites are highly skilled professionals with strong relational skills and they brought significant knowledge, skills and experience to the project. This meant a relatively short start-up time for staff to be equipped to deliver the FCASE work programme as skilled professionals were already at hand, although some new workers were recruited. As there was a lot of mediation and conflict resolution work involved in FCASE work, one of the workers was specifically recruited for her mediation skills. Discussion at the first roundtable revealed that staff valued the team based approach and having FCASE located within the broader Barnardo’s service.

The experience and skills of the FCASE team were key to engaging parents, carers and young people in the work and for being able to assess the needs of the young person, parent/carer and their family situation. The workers were able to assess quickly whether or how the programme needed to be adapted to meet the needs of any particular family’s circumstances:

*We have to find a way to connect, so engagement is an important skill, and also have to be able to assess someone at the first meeting...got to have some experience, in some or form, of how people think and develop, when people get stuck and how to help them become unstuck...we had to tighten our skills because we’d all been used to doing long term work and [with FCASE] had to know at the beginning how to be most effective with the sessions (Ruth, FCASE worker).*

Parents, carers and young people praised the FCASE workers for their communication and

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<sup>10</sup> This number depicts the overall number of staff interviewed, rather than number of interviews as multiple interviews took place depending on case-load of worker.

<sup>11</sup> This number relates to the number of interviews that took place rather than the number of parents, in some cases two parents were present, in others just one parent was interviewed.

interpersonal skills and made distinctions between some of their problematic experiences of some statutory services. Comments in praise of the FCASE staff noted:

*Working with [name of FCASE worker] was like talking to your best friend, I could tell her my deepest fears and I trusted her, a trust that I'd never felt with an outside worker before (Caroline, carer).*

*Me and my husband felt these are people that genuinely care (Caroline, carer).*

*Barnardo's are more relaxed and low key than the police, I have not felt comfortable with the police. But [with] Barnardo's even my son is talking. The police come to enforce but Barnardo's come to reason, it's the difference between enforcement and reasoning. Also young people have an attitude towards the police of "what now, are you nicking me?" (Tabitha, parent).*

**Flexibility:** The voluntary nature of FCASE engagement with families combined with the support and skills of staff was highly valued by families. This appeared to be because of a strengths-based approach: identifying and building upon families' strengths (see quotes from parents/carers in this section). Findings from the literature review on parenting support indicates that the most effective way to support parents with troubled adolescents is through strengthening the families' protective factors and reducing their risk factors. The literature review findings suggest that the strength of any intervention is dependent on understanding individual families' needs and on having the flexibility to make adaptations (D'Arcy, 2015 forthcoming). However, Oakhill interviews also revealed that this could be culturally or ethnically specific. The practice of the threat of forced marriage within some Asian families, for instance, meant that strengthening protective forces could have the adverse effect by strengthening the control exercised by parents. In these cases more emphasis in the direct work undertaken was placed on supporting the independence of young people concerned.

FCASE staff discussed and shared the skills necessary for undertaking this complex work. During the roundtable events staff highlighted the need to work flexibly, carry out complex assessments and recognise where additional expertise was necessary. For those managing FCASE teams, the ability to use staff skills flexibly was also valuable to parents:

*The sessions took place on different days of the week depending on the school timetable; the young person liked this because it was different from school and felt less like a classroom format (Julie, parent).*

*It [the programme] was driven by what we needed (Tariq and Laura, parents).*

*We did not follow the programme week by week; it was tailored to our needs and Darrell's needs. His needs were not quite the needs of others; he was not running away, he was not in that deep (Angela and Matt, parents).*

**Work with parents:** FCASE staff noted in interviews and roundtable evaluation exercises that the best thing about the FCASE model was the work with parents. FCASE was seen as a real opportunity to deliver early intervention work; it enabled staff to have the capacity and space to do family work. FCASE also facilitates educational and safety work with low risk cases. The programme 'skills-up' parents/carers and this is evidenced by the quotes

reflecting the educational value and reduction in risk which are covered on pages 16, 18, 19 and 23. New learning enables carers and parents to be involved in safeguarding processes and raises awareness of CSE among their own communities.

There was a strong sense that parents and carers greatly appreciated the service because they spoke of the way in which FCASE workers listened and responded to them. Nevertheless, among the 30 parents and carers interviewed there were four who recommended ongoing support, beyond the eight weeks and three who felt the focus on the young person was important but found the parental aspect time to be too intensive and to be unnecessary.

The process of working with the parent(s) in particular provides an important opportunity to ensure their voices are heard. Listening to concerns and advising on actions in keeping their children safe were factors which could improve partnership work between families and statutory services to raise awareness and disrupt CSE:

*I never had respect for the police but now I see that I can contact them and say that I am worried and show them the evidence. It made me change my opinions in life (Rose, parent).*

*One day I was upset but the worker put everything into perspective and it helped me voice my opinion in a way I probably would not have done, I wrote a letter, I find it hard to put things down on paper but I put it all down in a letter to the school which helped me say what I had wanted to in the meeting with the school but could not (Tamsin, parent).*

**Special role of the voluntary sector:** The fact that FCASE workers operate in the voluntary sector and focus on holistic family-based CSE support emerged as an important factor, evidenced through interviews with stakeholders (see page 19). This enabled FCASE to be delivered as a strengths-based model. As noted above, the focus is on working in partnership with families to maximise the capacity of parents and carers to safeguard their children, intervene early and prevent further risk and harm to young people. The scope for the voluntary sector to 'reach out' proactively into the community was appreciated, and evidenced by interviews with families, workers and stakeholders who perceived the relationship between families and workers to be of central importance:

*FCASE was the only agency that has been consistent and done what they had said they would do. They were honest and kept in contact and returned your calls (Karen, parent).*

The nature of the FCASE programme facilitated support for families which was different to other services:

*I can voice my fears. Social care and social workers are concerned with procedure, they don't deal with me – if I am scared (Joanne, carer).*

*Basically it being less formal, you don't feel that you're being spoken down to – the worker is talking to you on the same level. It's not so 'authoritarian'. I've dealt with lots of different agencies. A lot of them make you feel talked down to; they can make you feel a little bit like you're out of the circle (Ava, parent).*

*The staff are brilliant, makes you feel welcome, gives you that confidence (Maggie, carer).*

*FCASE workers had a different way of speaking, they weren't condescending (Laura, young person).*

**Educational value and reduction in risk:** The programme is delivered to young people and parent(s) /carer(s) over a six to eight week time period. The aim was to deliver the programme at a similar time with the parents/carers and the young person. Evidence from the interviews with parents and young people suggests that this was effective because their learning from the programme was complemented by discussions with each other in the home following the sessions. This parallel structure was found to be beneficial as parents/carers and young people were learning about the same things simultaneously. This made it easier to discuss what were often challenging subjects:

*I used to feel on edge but now I feel much more confident. Now I know what is safe/unsafe, right and wrong so I can say 'no'. But she also knows her mum is there to support her if things go wrong. I would not have realised this person was grooming - that is the word she used - and it shocked me, we did the same session and we were both able to discuss it afterwards (Jan, parent).*

The educational value of the programme was evidenced by the young people's ability to speak knowledgeably in interviews at the end of the intervention about key themes and issues including risk, healthy and unhealthy relationships and internet safety. Comments from young people included:

*I got more information, what to do and what not to do and how to keep myself safe as well (Harriette, young person).*

*I use the internet more safely and don't put inappropriate pictures up because I won't have control of it once it's up there, and I keep my profiles private so only my friends can access it (Charlene, young person).*

And,

*She (the worker) made it clear what grooming was, all the stages of grooming. I had heard of grooming but I didn't understand what it was. Everything made sense (Lena, young person).*

A young person who had previously been sceptical about starting the programme because she did not want to re-live past events found the programme to be highly beneficial:

*It made me see clearly that it (previous exploitation) was not my fault and I understand now where I've gone wrong (Lizzie, young person).*

Similarly workers reported that parents had benefitted from the programme and were more knowledgeable as a result:

*So where her children are on the internet now, she ensures they are never out of sight (Josie, worker).*

*She goes through their bags, their photographs, their Facebook and is alert to changes in their moods for an indication of what is going on (Josie, worker).*

## 8.2 The views of young people, parents, carers and stakeholders about the direct work

### Parents and carers

Miller and Sambell (2003) proposed that the kind of support parents generally look for is located within at least one of three distinct categories below. It is also important to stress that their research is based on general parenting support rather than specific support for CSE, which can be particularly challenging to address.

**Dispensing:** The majority of parents who reach out for support want a dispensing model of support: they want to know what they can do to change or 'fix' their child. They might look for information on-line, in books or seek expert advice from a professional who they feel is best placed to deal with child related problems and can give them a solution.

**Relating:** Although parents initially reach out for a dispensing model of information, it is the relating type of support they value most; where parents are facilitated to consider how they feel about their situation. This model of support addresses parents' emotional needs and enables them to make changes to improve their situation; it also validates their role as a parent. Parents value environments in which they feel listened to and where they can communicate their views, anxieties and feelings and are not judged in this process.

**Reflecting:** This support goes beyond 'what parents can do' to 'why they should do it' and involves providing information and training to enhance parents' understanding of their children.

These three features might all be described as mechanisms. Interviews with parents and their workers suggest that the FCASE programme provides all three categories of support and it provides information about CSE. One parent said that the programme had:

*Given us a framework to build on. We know where to go and what to look for on the internet (Kim, parent).*

Importantly FCASE also works with parents to use and reflect on the information they receive to inform future decisions and actions in the family. This maximises the capacity of parents and carers in decision making, and contributes to the disruption of abuse and conviction of perpetrators. The vast majority of families interviewed suggested that the direct work programme is highly beneficial, although some recommended further support beyond the programme could be beneficial if new issues occurred. No parts of the direct work programme were identified in case study interviews as unnecessary or too challenging:

*It's been marvellous, our eyes have been opened. We've spread the news to family members (Jan, parent).*

### Young people

Young people commented positively on the FCASE programme and process in their interviews. Young people were asked specifically about their learning as part of the programme (see interview schedules). Their interview responses noted above and the three specific responses below evidence how young people had made specific changes to their lifestyles (detail and evidence is further expanded upon in the case study report, D'Arcy et al, 2015 forthcoming). The interviews with young people highlighted three overall key outcomes, all of which align closely with the aims and objectives of the programme.

## **Knowledge and confidence about keeping safe:**

*I know how to keep safe on the Internet (Darrell, young person).*

*I was a bit shy...I did not know if I should say stuff but I did because my dad said it could help in the future. Now I don't meet people I don't know. I walk home with friends in the evening, not alone. I don't accept friend requests if I do not know them (Jessica, young person).*

*I went out and I was safe (Rosie, young person).*

*I learnt about types of abuse, how to avoid arguments, about internet safety... and I learnt more about myself... it gave me peace of mind because they were working with my family (Louise, young person).*

These young people had previously experienced risks on the Internet and were involved in risky behaviours with their peer groups including drug abuse and risky, sexual relationships. FCASE had helped them reconsider their risks. Nevertheless we know that the situations of young people change on a daily basis and further longitudinal evaluation is needed to observe behaviour changes to conclude whether or not FCASE had been effective in making life time changes.

## **Self-awareness and self-esteem:**

Three young people below highlight specifically that their self-esteem and self-awareness was improved through FCASE, others referred more generally to feeling more confident and in control of their situation:

*It has made me a better person. Mum and Dad can tell me what I need to do to stop it and I know what to do to stop it too. It is very helpful. I have changed my behaviour and what I do on the internet. I feel better about myself (Darrell, young person).*

*I have learnt to think twice. If you go and do something. Think about it again to make sure it is the right decision to make (Jodie, young person).*

*It has changed the way that I am – when I'm talking to people on the internet; I make sure that it's them because I know that people on the net are making fake accounts. I also learnt to watch out for who pulls up next to you. I am more careful now (Bobby, young person).*

## **Relationships at home:**

Improved relationships between parents/carers and young people's increased self-esteem facilitated changes in behaviour which reduced risk taking behaviour:

*We don't fight anymore. I have learnt a lot and it changes my life. I think there should be more services for mums and daughters...it did help. All her stress was leaving and all mine so we didn't argue (Jodie, young person).*

## Stakeholders

Professional stakeholders such as the police, LSCB chairs and other professionals working with Barnardo's to prevent CSE, knew about FCASE due to their professional involvement with Barnardo's. All 20 stakeholders understood the intended benefits of the programme i.e. to reduce risk factors of families on the ground or strategically. Jamilla noted that multi-agency working was an important part of FCASE as it enabled effective information sharing to prevent CSE:

*FCASE facilitates a model of multiagency working around early help and safeguarding, to embed principles and tools for professionals working with parents – especially around helping confident parenting and developing principles of safe based parenting (Jamilla, Learning & Development worker).*

Some referred to the essential role FCASE in delivering family based work as it was simply not being provided by other services:

*It's changing practice within the Family Support team, enabling them to tailor their direct work. If we didn't have FCASE delivering, some of this work would be stuck (Paul, CSE lead).*

Stakeholders also commented on the positive support process from project workers. Lisa is a missing person police officer:

*I have never had anything negative about Barnardo's, some kids I have difficulty in engaging but they always engage with Barnardo's. It is their approach. I have not had a child say they don't like the worker or that they do not get the work. Parents and carers are very positive. Find it beneficial – makes you stop and think, or I did not realise that that was happening to my daughter/son (Lisa, Police).*

Stakeholders in Oakhill valued the additional expertise and capacity of the Barnardo service. Paul, the CSE lead for the Local Authority confirmed that the work with both parent/carer and young person was central in their view to the development of coordinated informed practice. Lisa (Police) felt that that learning about CSE creates mechanisms of change among families:

*Through the work of FCASE parents/carers realise that their child does not always have a choice, and they feel they have not got a choice and I think that (it) is important for them to realise that so that they can deal with the situation differently than probably how they were dealing with it before. When they feel that they have more of an understanding of what is going on with their child. In terms of (the) child the aim is for them to be able to identify risks, to make informed choices about how to deal with the situation they might find themselves in the future and put into practice what they have learnt with the support worker (Lisa, Police).*

*FCASE offers more than existing services. We can only go so far having dedicated staff who are established and who have expertise, it makes you feel confident that the person you're working with has the expertise (Jamilla, Learning & Development worker).*

*The work in tandem with parents and young people is crucial. FCASE is getting it right (Paul, CSE lead for local authority).*

Evidence from these stakeholder interviews shows they valued the expertise of FCASE workers and the process of working in partnership with parents/carers and young people to reduce risk taking behaviour.

### 8.3 The challenges in delivering the direct work

Delivering a short pilot scheme of work is challenging and teams worked very hard to get work of the ground (the details of the first year of the project can be found in the Year 1 report). The mechanisms that affected the work and made it less effective overall are listed below and were evidenced through interviews with FCASE staff and roundtable discussions:

#### **i Referrals and inter-agency support:**

Firstly it is important to remind ourselves that the target number of cases that the sites worked with were exceeded, and this is in itself a significant achievement. Nevertheless, the information received at the point of referral is important in ensuring that FCASE can 'work' for the family. Accurate referrals ensure that the young person is placed on the right programme. Yet at the outset of the programme, when information about FCASE was still developing, many teams received inappropriate or incomplete referrals. Whereas incomplete referrals can delay the start of the programme, inappropriate referrals (for example, which may relate to young people at higher risk), mean that other support services need to be found. There were 39 cases in Year 1 which reflected these different scenarios so could not be counted officially in the figures. However, given that these cases nevertheless required numerous staff hours it is important to register them as comprising part of the FCASE teams' workloads.

While the FCASE programme is clearly positioned as a short-term, specialist intervention designed to work as part of the child protection system, in a number of cases FCASE work appeared to be perceived by other agencies as a reason either to withdraw or dilute their own services for families. This was sometimes felt to be inappropriate because the family might need other support to continue to complement the FCASE programme given that FCASE could not address the wider family problems. As a worker explained:

*As is often the case when other professionals are involved, once FCASE become involved professionals want to step away. Whereas it's much better if there is a package of support around the child (Moira, FCASE worker).*

Other more basic principles also affected inter-agency working, such as the need to offer sessions to families in the evenings, this meant that many statutory services were simply not available.

#### **ii Time and inter-agency pressures:**

Effective working depended on building trusting and open relationships with children, young people and their families and this requires time. The proposed delivery timescale of 6-8 weeks could be challenging when there was a delay between the point of referral and starting the direct work. The overall time to complete work was shortened by this delay. Where the duration of the programme overlapped with school holidays, this could also cause a delay. It was also problematic when one party (parent/carer or young person) started the intervention later than the other. These are key contexts that affect the triggering of programme mechanisms. The direct work programme is intended to progress in parallel sessions with each party to complement learning for parents/carers and young people. However, different circumstances can affect this process. In several cases the parent's or young person's sessions were delayed, partly through operational reasons (such as staff sickness), and therefore scheduled to complete later. In such a case the young person's worker observed:

*The family meeting may have run more smoothly if the young person's and Mum's sessions had been done in parallel. It's easier to use materials shared and used as part of the way forward (Tamsin, FCASE worker).*

### **iii. Escalation of risk factors:**

High levels of risk and rapid escalation of risk for individual cases presented a challenge to all three FCASE teams. However, there were differences in the risk levels experienced by the respective FCASE sites. For example, the wider child protection context in Blackthorn meant that high risk referrals were the norm. Amongst the cases evaluated there was also a young person who left halfway through the programme due to an escalation of risk factors. Paul commented on the challenge in terms of wider interagency support in such circumstances:

*There are potentially issues around escalation, when FCASE try to escalate there is a question as to whether people listen and take them seriously. Do people listen? If this does not fit with the assessment of the statutory organisations then how much clout have they got? (Paul, CSE lead).*

This suggests that there can be a limitation arising for voluntary sector services working to tight time lines. Teams needed to work flexibly and have wider support services and resources available, as even in a 6-8 week timeframe circumstances can change dramatically.

### **iv. Sustaining and embedding the learning:**

During the interviews, it emerged that one young person in Oakhill who had previously been through the FCASE programme had a repeat incident where they were exposed to risk (such as sexting). This suggests that young people might benefit from repeated interventions or refresher sessions in order to embed and sustain learning from the programme. In Oakhill a young person's support group had been set up with this purpose in mind. Some parents, in cases where there were complex needs, also suggested a need for longer term work and this is therefore proposed as a recommendation at the end of this report.

## **8.4 Mechanisms: What 'works' about FCASE direct work**

### **Non-judgemental strength based approaches**

FCASE concentrates on the strengths of families. It does not focus on what is lacking in families. Research (D'Arcy, 2015 forthcoming) and FCASE worker discussions at the roundtable events highlight that the ability to build relationships in a short space of time is key to assessing strengths and enables workers to challenge a parent/carer without them feeling that they are being talked down to or judged.

The review (D'Arcy, 2014) which explored effective approaches to support the parents of adolescents who have been affected by CSE suggested that an ideal model of support contains:

- Helping relationships based on voluntary participation and trust.
- Strength based provision focussed on positive aspects of parenting (not their failings).
- Flexibility of provision to address the needs of families.
- Time and resources to undertake initial assessments and deliver necessary support.
- Engagement with parents and young people in the design, delivery and evaluation of support/intervention.
- Training and supervision for those supporting parents and young people.

These criteria are all clearly visible within the FCASE model and the mechanisms that bring about change in families to reduce risk behaviours, include most importantly, the holistic process of working with the family which facilitates positive outcomes.

### **A process of identifying shared experiences**

The 'Safer You' meetings were really valued by young people, parent/carers and workers as evidenced in the quotes below. Reflecting on this process at the roundtable event, workers spoke of the opportunity to create a space where conflicts could be resolved and mutually supportive rules could be established. As Ruth said

*'these are good for getting everyone into one room and putting it all up on to flip chart paper and often parents/carers and young people realise that they have the same objectives' (Ruth, FCASE worker).*

It is striking that this had often been the first opportunity for parents/carers and young people to do this.

*They'd listen to us and take note of what we wanted as a family (Naomi, parent).*

*I found [FCASE worker] funny [that was also the reason she engaged with the programme]... I thought the Safer You meeting was good because it got me back into school, I was frustrated to not be attending school. At the Safer You meeting we talked about harm – I'd probably be in jail now if I hadn't done this programme (Melissa, young person).*

## **8.5 Outcomes**

The FCASE programme emerged out of the experience of Barnardo's work with sexually exploited young people. The aim of FCASE was to deliver a programme including therapeutic intervention and family support to prevent CSE and support CSE intervention work. At the outset of the FCASE pilot the following outcomes were set in the operational manual:

- Enhance parent/carer - child relationships.
- Reduction in family conflict.
- Reduction in the level of risk/harm for children.
- Stable and secure accommodation.
- Children/parents/carers contribute to planning and decisions.
- Adults/children to identify abusive/exploitative behaviour.

The data collected as part of the evaluation showed that some changes appeared for some children in terms of family conflict and enhanced relationships:

*I understand that I can go and talk to them (my parents) if I did have any concerns (Bobby, young person).*

*I'm getting on better with my sister and my parents (Sharon, young person).*

*My relationship with my daughter has improved – my daughter is becoming more honest with herself (Christine, parent).*

The FCASE work showed particular strength in developing both sides' ability to make compromises:

*I don't complain about my curfew of 7pm, before I thought it was too early but now I realise 8pm is too late and I can still have fun and come in earlier (Lena, young person).*

*The programme has made us more self-aware, more flexible, previously (we were) very strict as this was the only way we knew how to keep her safe. We listen to her and that's made a difference to her (Tariq & Laura, parents).*

The changes young people made to their lifestyles has been highlighted earlier in this report. Parents also spoke about being much more knowledgeable about warning signs, assessing risk and protecting their young people:

*Knowing what my daughter was going through and the literature gave me knowledge. What I learned gave me the reasons for my daughter's changes in behaviour (Lila, parent).*

*Knowledge has made us more aware of what changes to look out for in the way our daughter behaves and what actions to take. (We) have been given knowledge of how to assess risk (Len and Marcia, parents).*

And,

*You have to be aware without being frightened. We've got knowledge now (Joanne, parent).*

Further examples of change can be found in the Case Study report which documents the work with the 31 case study families in more depth.<sup>12</sup>

## **Quantitative findings: Outcome Monitoring tools**

The research team drew on Barnardo's Outcome Monitoring Framework, in which practitioners assess clients at the start, middle and end of the FCASE intervention against specific outcomes which they select, on a five point scale. The Outcome Monitoring Framework is Barnardo's process for capturing progress on key outcome indicators and this data is routinely completed by all Barnardo's caseworkers. It is important to stress that it is based on their subjective judgement. The 6 categories used for FCASE relate to the programme's aims and outcomes and include *1) enhanced parent/carer – child relationships; 2) reduction in family conflict; 3) reduction in the level of risk/harm for children; 4) stable and secure accommodation; 5) children /parents/carer contribute to planning and decisions; 6) adults /children to identify abusive /exploitative behaviour.* For the purpose of the evaluation, we only considered young people's data for 30 case-studies<sup>13</sup> (not all 227 cases) and only drew on 3 of the 6 categories as they correlated most with qualitative findings. Although this data is independent of the evaluation it is useful in illustrating the kinds of outcomes the FCASE programme sets out to achieve.

In order to warrant the use of this data to support other findings it is necessary to explain the process for assessing progress on key outcome indicators. The example provided below is

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<sup>12</sup> This report will be available on [www.beds.ac.uk/ic](http://www.beds.ac.uk/ic) and [www.barnardos.org.uk](http://www.barnardos.org.uk) shortly.

<sup>13</sup> 30 cases were considered, rather than 31 as one young person dropped out of programme half way through

drawn from a case file and illustrates how risk can be scored at the beginning and end of the programme. The scoring is done on a five point scale where for example '1' shows significant understanding of risk and '5' indicates that risk is not yet acknowledged. This case was one of the very few where unfortunately the situation deteriorated, but is used to highlight the complexity of some cases and commitment by FCASE teams to ensure that continued support was available.

<b>Criteria</b>	<b>Initial Score</b>	<b>Initial assessment – case notes</b>	<b>End Score</b>	<b>FCASE Case closure – case notes</b>
<b>Enhanced parent/carer - child relationships</b>	3	Boundaries have been put in place and have not been previously adhered to. Some mutual understanding but poor communication between parents and young person.	2	Conflict in the family home due to no structure, young person has been removed from school but is now accessing a part time timetable and will continue until until fulltime, however if young person does not adhere to boundaries she will be removed from school permanently.
<b>Reduction in the level of risk/harm for children</b>	3	Young person is associated with risky peers. Young person remains at risk in some areas but both child and parents are engaging well and risk is reducing.	2	Young person associated with risky peer. They remain at risk in some areas but both young person and parents engaging well and risk is reducing. Young person has accessed all direct work sessions and has been offered a place in group.
<b>Adults/children to identify abusive / exploitative behaviour</b>	4	Young person is very vulnerable, low self-esteem and at risk of sexual exploitation. Limited recognition of exploitive / abusive behaviour from parent/child.	3	Young person is very vulnerable, low self-esteem and at risk of sexual exploitation. Limited recognition of exploitive / abusive behaviour from parent/child. Young person has now completed all her direct work sessions and is happy to contribute to further work.

Analysis of the Outcome Monitoring Tool data, which records the level of risk of a young person at the beginning, middle and end of the work substantiated that their level of risk was reduced. In the few cases where risk was not reduced, as highlighted in the example above, great care was taken to ensure that continued support was available.

**Table 2: Reduction of risk in the case studies**

	<b>Risks reduced</b>	<b>Risks escalated</b>	<b>No change</b>
<b>Enhanced parent/carer - child relationships</b>	70%	3.3%	26.7%

<sup>14</sup> Care has been taken to ensure there are no identifying features in the data presented.

<b>Reduction in the level of risk/harm for children</b>	80%	6.66%	13.3%
<b>Adults/children to identify abusive/exploitative behaviour</b>	84%	N/A	16%

**Unintended outcomes:** The outcomes which may not have been planned specifically at the outset include:

- *The educational benefits for young people, their families and communities, but also the learning about family work which has influenced and informed FCASE staff. As a result of this pilot, FCASE teams are keen to sustain the work with parents and carers and the training of professionals in their locale.*
- *The adaption and innovation of the programmes materials by FCASE workers. Materials were localised and added to, for example: workers developing resources for children and young people with learning difficulties or Autism, using material at different times depending on the issues and priorities of the family; introducing localised examples helped engage young people and parents/carers recognised that CSE is not an issue that happens elsewhere but one that happens locally.*
- *Longer-term support and learning for young people: Young people’s learning about different aspects of CSE during the FCASE programme should be embedded. Oakhill set up a young people’s support group which provided ongoing contact to ensure risk did not escalate after FCASE had finished, although it is recognised that this is resource intensive.*

In interviews parents also spoke of the need for some follow up, such as a contact number to call if risk-factors increased. As suggested previously, a support group can sustain learning and support the attachment needs of young people at risk of CSE and provide support for parents who are trying to protect their children from CSE.

## 8.6 Key messages: Direct work

The evidence provided above suggests that FCASE legitimises work with parents and families and is an important and innovative project which demonstrates the value of:

- *Working with parents and carers alongside young people using a strengths-based approach.*
- *Equipping families with the knowledge and information to help them safeguard their children.*
- *Promoting the role and value of the voluntary sector in developing working relationships with families and ‘building bridges’ between families and statutory services.*
- *Engaging workers with specialist knowledge, relational skills, and family centred/victim centred working.*
- *Assigning separate key workers to parents/carers and young people.*

- *Providing continuity of workers in building trusting and productive relationships.*
- *Providing effective training that makes appropriate and accurate referrals more likely.*
- *Ensuring flexibility of meetings and sessions with families and young people.*
- *Providing adaptability of programme materials which are localised, needs-based and developed as required.*
- *Promoting 'Safer You' family meetings as important spaces for resolving conflicts, improving communication and devising action plans that increase protective factors.*
- *Having wider CSE support within the service. This can include:*
  - *Accessing other CSE services so that inappropriate referrals or those that do not quite meet the criteria can be channelled to something more appropriate*
  - *Referring young people (or even parents and carers) on to support groups which can help to sustain the learning or manage overarching push factors such as low self-esteem, bullying and attachment difficulties.*
  - *Tried and tested materials for the sessions and access to more diverse materials which might include localised case scenarios.*

## 9 Findings: Community awareness raising

This element of the pilot was especially innovative as for some teams it was the first time they had a chance to extend and reach out into local communities. The evaluation strategy for the community awareness raising was informed at the beginning of the evaluation process by a commissioned literature review (Bostock, 2015 forthcoming). The review explored effective approaches to community awareness raising of sensitive social issues and its aims were to identify:

- Different models of community awareness raising.
- Evidence of their effectiveness, with focus on outcomes achieved.
- Factors promoting and hindering the success of these models.
- The perspectives of children, young people, parents/carers and the wider community.

The literature review highlighted a significant gap in research regarding raising awareness of CSE in the community. Research (Jago and Pearce, 2008) identified that gaps exist in knowledge and understanding of CSE amongst parents and different communities as well as key professionals. This is reinforced by recent studies including Jago et al (2011), Berelowitz et al (2014) and Jay (2015). According to Jago et al (2011) young people, their families and carers receive awareness raising in less than half of the country. Bostock (2015 forthcoming) reported that there is no published evaluation of CSE community awareness raising activities; for this reason the scope of the review itself concentrated on evidence of effective approaches to community awareness raising of sensitive social issues more generally. Topics included: child protection, including children at risk of online grooming; the National Evaluation of Sure Start (NESS); health promotion initiatives including improving take up of Chlamydia testing; programmes intended to increase organ donation among BME groups; and community-led safety awareness raising initiatives around gun and knife crime.

Findings suggested that the factors that promote effective community awareness raising include:

- Having clear aims and objectives.
- Understanding the needs of the target audience.
- Engagement with wider stakeholders.
- Use of designated workers to promote awareness and access to services.

These factors were all incorporated in the FCASE approach to raising awareness. The review also highlights that while there is growing awareness of CSE, further investigation is needed to understand what works best to promote awareness of CSE in the community. There is a significant gap in the CSE knowledge base regarding community awareness raising (CAR). This is therefore an area that requires further investigation to ensure future effectiveness of such activities.

The FCASE pilot is innovative because it considers the effectiveness of a range of awareness raising activities. This is important as awareness raising is viewed as a key means for preventing CSE, achieving early intervention and support for children and young people vulnerable to exploitation. As CSE is a growing area of policy and practice and there is no published evaluation of community awareness raising of CSE (Bostock, 2015 forthcoming), this evaluation represents an important contribution to knowledge about how communities can be empowered to prevent CSE and how professionals can support communities in this. Data relating to the CAR element of the programme has been collected via a similar process to the direct work:

- Interviews with FCASE staff.
- Interviews with 25 parents, 5 carers and 25 young people.

- Information from staff gathered during roundtable events.
- Analysis of monitoring and evaluation data.
- 4 observations and 9 reflective accounts produced by FCASE staff following community awareness raising events.
- Interviews with 20 stakeholders.

Findings from this data have allowed us to assess the following features which this section of the report will focus upon:

- The aims and objectives of community awareness raising.
- The scope and range of community awareness raising.
- Which approaches FCASE staff considered to work well.
- The nature and extent of young people's, parents', carers' and wider communities awareness and experiences regarding CSE.
- The challenges around effective awareness raising.
- Mechanisms: What 'works' about community awareness raising.
- Outcomes: Evaluating effectiveness in community awareness raising.

## 9.1 The aims and objectives of community awareness raising

**Aims:** One of the main challenges in setting aims for this work has concerned the definition of 'community', a term with diverse meanings which are contested both politically and in the academic literature. Individuals' sense of belonging or community can operate at different levels namely: social location as determined by one's relationship with multiple axes of power; emotional and interpersonal; and shared moral and political value systems (Yuval-Davis, 2006). In effect, this means that 'community' can never be a uniform whole as every sense of the term is inevitably cross-cut by different interests, layers, and relations of power (Dhaliwal, D'Arcy and Thomas, 2015 forthcoming).

FCASE staff adopted a wide definition of 'community' which might include communities of friendship, of ethnicities, of support, of geography/region. Overall their definitions of community can be described as *a group of people who share common interests/purpose and set of values* as FCASE workers recognise that people came together over a common cause, and they consist of groups of people from all communities and sectors.

Nonetheless, the aims of the community awareness raising element were to educate and raise awareness in a meaningful way. FCASE teams spoke about working in partnership with local groups in order to identify and fulfil needs in a diverse range of communities. Although the aims were broadly similar for different community groups, the objectives for the work needed to be different for each site and FCASE teams identified the diversity of local populations and their specific needs (for example, in terms of ethnicity, religion, social class, education, disability, Lesbian, Gay, Bisexual and Transgender (LGBT)). They identified the various challenges in engaging different communities. Plans were informed by the Equality Impact Assessments and by existing networks/partnerships in each site. A number of community events also arose from the direct work and the delivery of training as this process facilitated the development of local relationships which then led on to a community awareness event. All three FCASE teams delivered a wide range of activities to promote understanding of CSE amongst children, young people, families, carers and the wider community.

## 9.2 The scope and range of community awareness raising

**Targets:** Over the duration of the project, FCASE aimed to deliver 36 community awareness events. The findings confirm that this target was exceeded.

**Table 3: Number of community awareness raising events as part of FCASE**

Year 1	Year 2	Target	Total achieved
28	29	36	57

**Total people reached: 1800**

FCASE teams also assisted in the delivery of Chelsea's Choice, a theatre production on the subject of CSE. The impact of this production was reflected in the interviews with the young people. This has not been included in the evaluation data but, with the addition of Chelsea's Choice, a further 2,500 CAR beneficiaries were reached in the Oakhill area alone.

The community awareness raising element is the most developmental area of the FCASE work and encompassed a range of activities including:

- Conference event 'Running from hate to what you think is love'.
- Community training course.
- Conference aimed at preventing violence towards vulnerable groups.
- Community events in schools focussing on healthy relationships.
- Stalls at events such as 'Violence against Women', Pride events, Black History month, community safety partnerships event.
- Input / information sharing at a LGBT forum.
- Input / information sharing at a Muslim Youth club.
- Internet safety workshops for parents/carers.
- Parenting workshops for Romanian, non-English speaking parents.
- Presentations / information events for different voluntary groups working in communities.
- Sexual health promotions training for community workers working with young people from 'hard to reach' communities.
- CSE training to Faith leaders.
- Youth conference.

Data collected by Barnardo's about the community events indicated that most group events were small scale (up to and around 10 participants); the events which had larger attendance included the youth conference and stalls at large scale community events (where not all attendees would necessarily access the stall). In order to provide a 'flavour' of the work, five detailed examples of different events have been described below:

### **Six week refugee training course**

This awareness raising work was organised in a partnership between a local umbrella organisation for new and emerging communities and the FCASE team. FCASE worked closely with this voluntary sector organisation (which specifically supports refugees and asylum seekers) to develop a training series that would help them. The training was

delivered to small, mixed gender groups and the evaluation team observed two sessions during two different courses. Participants were self-selecting: the umbrella body distributed information about the courses and each of the community associations that make up its membership was encouraged to put forward two participants who could then go back and share the information with the wider membership of their community associations. The project was working towards a community champion model whereby information and knowledge gained through the training would be cascaded into communities by those who attended the training.

The training covered child protection and safeguarding in general and included one day on sexual exploitation. Evaluation forms completed by attendees were generally very positive. Most evaluation forms noted the demeanour of the facilitators [friendly, helpful] and the learning – ‘*learnt a lot*’, ‘*the course was an eye opener*’, ‘*helped me to learn how people are being misled*’, ‘*the session is very educative*’. Participants suggested that they found the course very useful because they learnt about the law in the UK; they specifically referred to Female Genital Mutilation (FGM) and child marriage as assumed to be more common in their countries of origin. Experience from the first course revealed that women felt they could not talk freely without feeling judged by their male peers. There were visible issues of unequal power and control. Hence a women-only training course was set up with women who were seen as community champions and could disseminate the learning to their communities.

Evaluations from these women were positive:<sup>15</sup>

*I have learnt how to handle situation and where to go if you have a problem, especially in any kind of abuse.*

*I have enjoyed the sessions because I now know how to protect kids around me and in future.*

*We need to continue with our project and go out there and teach people.*

Such feedback highlights the value of accessing and supporting women within communities and drawing on their experiences to continually improve participants’ experience and the effectiveness of CAR.

## **A youth conference / school event: ‘Preventing violence against vulnerable people’**

This event took place in October 2014 but planning started from the outset of the FCASE project between Barnardo’s, the Local Authorities’ Social Care service and the Multi-Agency Safeguarding Hub (MASH) coordinator. The day took place on a week day and consisted of a series of activities and workshops for around 180 secondary aged school pupils. Two pupils per school attended with one member of staff. In the morning four workshops were provided and included addressing questions such as:

**CSE:** ‘What are the risks of sexual exploitation for young people?’ This involved a series of activities and showing young people ‘Real Love Rocks’ DVD clip<sup>16</sup>.

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<sup>15</sup> All quotes from evaluation forms have been anonymised.

<sup>16</sup> Real Love Rocks is a programme developed by Barnardo’s Safer Futures West Child Sexual Exploitation Service to promote healthy, consensual, safe, relationships amongst children and young people. It seeks to raise awareness of grooming, child sexual exploitation and online safety (see <http://www.barnardosrealloverocks.org.uk/>)

**On-line identities:** 'How can I protect my on-line identity?' This was introduced via PowerPoint presentation by the police security partnership.

**Counter-terrorism:** 'What are the risks of radicalisation to young people?' This was introduced via PowerPoint presentation by the police security partnership.

**Domestic violence:** 'How real is the risk of domestic violence to teenagers?' involving a series of scenarios which young people discussed. This session was delivered by Women's Aid.

In the afternoon pupils were also asked to highlight their learning from the day and take messages of their learning back into school. Young people summarised their learning as follows:

*I felt angry at some situations and that this is going on.*

*I feel motivated from what I heard today and will share it.*

*Even though things are happening, it is good to share and do something.*

*Quite surprised these things are not discussed and raised more often, they should be shared.*

Young people also summarised to the audience what they had learnt about protecting themselves as well as their learning from individual workshop sessions. At the end of the day a competition was launched inviting pupils to come up with innovative ways of sharing the information they had learnt and demonstrating how their school/college could work to protect its students and staff. These would be assessed and winners announced in March 2015. The intention here was important with regards to community awareness raising as the organisers did not want this to be a one-off event, but wanted an ongoing learning opportunity for young people and their schools.

## **LGBT awareness raising session**

This event emerged from a request from the workers at an LGBT young person's group, who had done some previous work into the links between issues affecting LGBT young people and CSE. This previous event had highlighted a need for support and training for staff working with these groups. The aims of the session were to establish networks with the LGBT community, raise awareness of CSE and its links with LGBT issues, and to empower such organisations to recognise CSE so they can record concerns and generate referrals if necessary. FCASE staff were informed about the groups' needs and previous issues relating to CSE in advance of the session. The session with young people was structured to allow for whole group information sharing as well as working in smaller groups to enable safe and personal discussions to take place. Feedback from participant evaluation forms to FCASE staff suggest that the resource used (a DVD) was effective; young people found the content interesting and felt that other young people should see it to understand how grooming happens:

*I learnt what a rent boy and streetwise is.*

*It gave a better view of sexual exploitation.*

*I learnt about how not to get sucked into sexual exploitation.*

Workers felt that the session was effective as they had been invited into the space by the members so they had an engaged audience. The feedback forms from participants demonstrated that the DVD was very interesting and powerful. Workers felt that it would be good to have a future opportunity to follow up this work with the group to explore the issues in more depth, again highlighting the importance of evaluating and following up community awareness events.

### **An awareness raising session in a special needs school: Going Missing**

The request for this event came from a teacher at a special needs school, who was covering the topic of running away. The school did not want to cover CSE directly as they felt it was 'too strong'. Staff therefore designed and delivered a very specific session for the pupils which covered two different classes. One class had pupils with more severe physical and learning difficulties while the other had pupils with moderate physical and learning difficulties.

Four different activities were delivered. The first activity was a quiz exploring pupils' understanding about children who go missing. The second looked at different scenarios of CSE cases and assessed the levels of risk present in each. The third considered content for a young person's 'toolkit' to keep them safe. Finally FCASE workers asked each young person to identify five different people that they could talk to if they were in a difficult situation or if they were in danger.

A formal evaluation form was not appropriate with this group of children, however verbal feedback was positive and the teacher expressed a desire to deliver the training again in the future.

### **CSE training for Faith based engagement**

This work was delivered in partnership by the Local Authority, the FCASE team, the police, refugee organisations and religious groups. The need for the work was identified through many discussions with Local Authority managers about the need for honest dialogue and raising awareness of CSE among potential victims and perpetrators. Several planning meetings were held and the objective was to work with people to help them understand the issues and concerns about CSE within BME communities. One outcome was a training session in a mosque which was open to all and attended by the mosque's congregation, including women and youth workers who run Saturday sessions at the mosque. The organisers decided to host separate gender groups on the basis that this could open up discussions. Women only groups were effective as feedback from a female participant highlighted that while she had previously closed down any discussion of sex and relationships because this topic had been regarded as 'no go', she had learnt a great deal in the single sex session. She noted that she needed to be alert to such issues and encourage young people to discuss these. Other comments from the evaluation of this event included:

*I now understand that it is better to talk with my children and explain things rather than not tell them anything or the wrong thing.*

*Today I have learnt the good way to give out information to my own child and the young people I work with.*

***Evidence from the evaluations from those attending suggests that the mechanisms that 'worked' for these examples included:***

**Addressing need:** The events that gave 'space' for discussion allowed participants to relay information about their own communities and contexts. An example was facilitating single-sex groups to allow women to speak more freely about CSE. Using local stories and case study examples also worked well in raising awareness of CSE as something that does happen locally.

**Flexibility and adaptability:** As with the direct work it is important to be flexible about the planned programme and make adaptations. One good example came from the six week training course where trainers put up a flipchart paper (called Parking List) onto which participants could add issues that they would like to cover during the course of the six weeks. This was a rolling list so that if something came up, it would be added at that session and trainers would try to find a way to discuss this in following sessions. By the fourth session, the Parking List had FGM, exploitation and prostitution added.

**Venue:** Planning events at places which were accessible and well known to communities and groups is important. Some buildings, such as council or police headquarters could put people off attending. Events that took place at premises that the participants were already familiar with and had refreshments available worked well.

**Learning:** Feedback is important in order to evaluate what worked well. The qualitative data from evaluations suggest that participants overall did gain information about who to call if they have concerns. Trainers' reflections also highlighted their own learning. For example the participants on the six week training course linked CSE discussions with particular issues within some of their own African communities e.g. FGM and trafficking. These participants also identified the following areas of learning for themselves: different 'cultural' or 'national' understandings of issues – something apparently considered acceptable in one country which would be seen as child abuse in another; awareness of rights and of the law; increased understanding of how violence and abuse impacts on the well-being of the child; grooming and CSE; how to be better parents.

***Evaluations also suggested that the mechanisms that required improvement to be more effective were:***

**Resources:** Although good use was made of local stories and examples across the sites, there is a need for resources which provide more diversity – many case examples and resources refer to 'white' victims. Flyers, DVDs and other awareness raising tools are consequently being developed for a range of audiences, including young people with special education needs, LGBT young people, BME and Traveller communities. These should incorporate family-friendly messages and be produced in different languages and for different age ranges.

**The circumstances of participants** can be challenging, for example the transient and uncertain circumstances of those seeking asylum (as also noted on page 10) did disrupt attendance and the long-term benefits of the six week training course. Although there was the possibility of high engagement because they could not legally work, the limitation was that the turnover of the local population was quite high so there was a need to re-run courses regularly. This meant that FCASE workers could not always rely on one set of 'community champions' for a long period of time.

### 9.3 Which approaches FCASE staff considered to work well

The community awareness aspect of the work was incorporated in the FCASE pilot to empower and strengthen communities in regards to preventing and tackling CSE.

Evidence from interviews and roundtable events with FCASE workers suggest that what works well is:

- Adopting a similar strengths-based approach as with the direct work which focussed upon the communities' strengths and identifying relevant opportunities to raise awareness in a relevant and meaningful way.
- Involving the community/group/organisation in the entire process to reflect an equal partnership between Barnardo's and those involved. This allows the community to 'own' their responses to community awareness raising and give space to explore the subject and empower communities to discuss sensitive subjects.
- Having the opportunity to explain and give a presentation of the FCASE work.
- The 'community champion' or 'children's champion' models whereby a group of people are trained up and supported to raise awareness and cascade information into their own communities.

### 9.4 The nature and extent of young people's, parents, carers and wider communities awareness and experiences regarding CSE

Interestingly, although teams were working hard in communities to raise awareness the majority of parents/carers and young people interviewed about the direct work programme were not able to name specific awareness raising activities in their communities. They felt that general awareness of CSE among parents and young people was low. Research (Jago et al, 2011) confirms that there are generally poor levels of awareness raising and training on child sexual exploitation, particularly with young people, families and carers. Jago et al (2011) proposed that an 'urgent need for LSCBs, through schools and health practitioners, to extend awareness raising to young people, to their families and to communities overall' (p.4). This was reiterated by parents/carers in FCASE interviews.

Nevertheless there were exceptions, as several young people referred to Chelsea's Choice in school and said that they covered abusive and caring relationships in PSHE. A parent who worked in school had received E-safety training which was to be shared with parents via the school website. Parents/carers were aware of CSE through news/media, yet this does not provide a source of detailed information about risk factors and CSE signs and risk reduction strategies. This highlights the challenge of effectively raising awareness across whole Local Authority areas. Most parents/carers felt there was a lack of awareness in society as a whole and this might be through ignorance or because people are not aware of the signs:

*They do not realise how sophisticated this gets, most people would think 'this won't happen to me because I keep my kid safe' (Paula, parent).*

Parents and young people felt that there was a real need for more community awareness raising to help them to be more informed about CSE. Some had been 'shocked' about its extent from what they had learnt. *'So many people round here that need eyes opening' (Jan, parent)*. Most parents felt their understanding of the issues was limited. One carer felt that this was because the term child sexual exploitation was not understood by teenagers. An FCASE worker explained how FCASE staff overcome this – they initially describe CSE using terms like 'risk', 'vulnerable' and 'people being worried about you'. Once young people have

completed the entire programme, workers can introduce the term CSE as young people can then make the link between risky behaviours they are aware of, such as going missing from home, and CSE.

Feedback from parents and carers suggests that despite the national attention, CSE remains a relatively taboo and challenging issue and much more work will need to be done to engage young people and their families in identifying the associated problems.

Nevertheless, interviews with parents/carers and young people highlighted that the process of the direct work had also raised their own awareness of CSE. Parents were referred to appropriate websites<sup>17</sup> for information and this had a knock-on effect as parents, and some young people were sharing this information with friends and relatives. Jan, a parent, felt very strongly that FCASE should be continued as it helped young people, parents and professionals to take the risks of CSE seriously. Interviews with parents/carers and workers also suggested that the direct work intervention led to community awareness as they were sharing their learning with friends and relatives and in community settings such as schools.

Half of the young people and parents interviewed suggested that schools were the best place for awareness raising to take place. They suggested that there needed to be more openness and recommended a sensitive approach to ensure that children and young people's awareness was improved without children, or their parents or carers being frightened.

Interviews with other families revealed other suggestions such as a need to raise awareness in the wider community at community centres, using leaflets and doing outreach work to connect with young people. One young woman who was not in school suggested that the wider community would be better reached through events such as fun days. Munro (2010) has argued that children who go missing and who are vulnerable in other respects, including those in care, are characterised by 'detachment' from a whole range of key institutions. As young people who are missing and/or disengaged from school are at greater risk of CSE it is important to consider multiple places to reach out to them. FCASE community awareness events did take place in various settings including schools, youth clubs and directly within other community activities or events. Ongoing evaluation and follow-up work for these events is needed to identify gaps and ensure all young people are reached. This was confirmed by other parents' and carers' suggestions. Joanne (foster carer) suggested the need to raise awareness of high drug use issues in combination with CSE. Interviews with parents also highlighted the challenges in raising awareness, such as finding suitable venues because some local areas no longer have a youth or community centre. A central finding from the work with parents was that ultimately parents felt that they needed to engage with questions about CSE in order for community awareness to 'work'.

## **Feedback from stakeholders**

Aeesha (community cohesion lead in the Local Authority) spoke of the complexity and importance of community awareness raising. She hoped that this evaluation would begin to inform the debate by capturing what works for different groups as the area is under-

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<sup>17</sup> Such as Parents Against Child sexual Exploitation (PACE)- <http://www.paceuk.info/>

researched and practitioners would welcome evidence-based guidance. Hazel (LSCB manager) recognised the importance of a holistic approach:

*Having the remit to deliver family and community work is important, especially a lot of services have remit to engage with or deliver to individuals but very few will work with family/ community. It helps thinking about how we can engage and get in early before they go missing...early indications of risk being flagged by families and communities is really important. Working to a holistic approach rather than individualistic thing is what works (Hazel, LSCB Manager).*

Matthew, a locality community worker also emphasised the importance of awareness raising to be undertaken in partnership, as a process that does things with communities, not to communities, and that this is a long-term commitment.

Overall, feedback from stakeholders suggests that FCASE has identified important opportunities which could be further developed across more communities to reach women and men in all BME and LGBT communities, religious congregations, and young people's groups [ including those young people in care and those with a range of disabilities].

## 9.5 The challenges around effective awareness raising

**Definitions of community:** As the literature review (Bostock, 2015 forthcoming) suggests, it is hard to define community and set clear aims as communities are diverse. The term will mean many different things to individuals and groups. As there is currently no evaluation of 'what works' there is little evidence base for good practice. FCASE workers confirmed at the final roundtable event that getting underway with the community awareness raising was challenging. They were essentially dealing with a 'blank sheet' in terms of what might work, or not. This contrasts with other aspects of the programme such as the direct work, where there is a reasonably strong evidence base about the kind of services that are accessible and acceptable to young people and parents. Thus the issue of defining community is an important consideration in this field at the outset of the work and can be seen as a learning point from the FCASE pilot.

Community work involves different skills and resources and some workers initially felt that they lacked the contacts, skills, and resources to do this work. This was especially the case in communities where workers had no previous relationships. Evidence of the range of community events (see page 29) delivered and positive feedback testifies to the success of this aspect of the project.

**Time:** Workers at the roundtable event spoke about the need to give community awareness raising time through a long-term approach. They noted that this was difficult when they had to balance these elements with direct work and training in the short time span of the pilot. As Bostock (2015 forthcoming) suggests 'raising awareness with BME groups was dependent on engagement with local community leaders and adopting a grass-roots approach to activities'. Building new relationships in communities clearly does take time and a recommendation for effective awareness raising therefore needs to include a long-term approach and resources.

**Resources:** Community awareness raising was highlighted by workers at the roundtable event as an opportunity to work in partnership, for sharing ideas with partners and coming together to plan events that meet different organisations aims and objectives. They also highlighted a current challenge around appropriate resources for awareness raising in different environments, for both groups and individuals.

**Evaluation:** FCASE teams and stakeholders recognised that it can be difficult to gauge existing levels of awareness and increases in awareness. Furthermore, they described the difficulty in identifying whether the community awareness initiative can be credited for this increased awareness. As noted at the start of this report, a number of contextual factors have brought CSE into public consciousness and actively keep it there – notably criminal convictions and media coverage. These other influences impact on community awareness.

Feedback from the roundtable events with FCASE workers highlighted how awareness activities would work for some, but not for others depending on circumstances. For example, stalls can be a great opportunity to display FCASE information and material and to speak to people in the community. They also provide a referral route into the project. However, their effectiveness depends on people’s engagement on the day, what the events are focussed on and whether people can grasp the purpose of the stall in the fleeting moments when they pass it. One stall event resulted in a number of people coming forward to volunteer for Barnardo’s – but not to raising awareness of CSE. Bostock (2015 forthcoming) suggests that this is not uncommon and therefore there is a need for a ‘rolling programme’ that recognises the different needs within a community and begins to build up an evidence-base and key questions for planning effective events including:

- Advertising and promotion.
- Accessibility and inclusivity of venue.
- Suitability of the resources.

## **9.6 Mechanisms: What ‘works’ about community awareness raising**

The intended outcomes for community awareness raising were to use designated workers to engage with relevant community stakeholders and get information to communities so they can protect themselves and be better informed. Qualitative evidence from interviews with young people, parents/carers, workers, stakeholders and feedback from community events suggests that this outcome has been met.

Considerable effort has been made to work with different communities and understand their needs and how best to support them. Examples include the gender-based work and the creation of spaces where people can come together to access information in a non-threatening way. FCASE teams spoke about becoming more aware about what is happening in their communities and in some areas this new learning has been shared amongst FCASE workers as well as the wider Barnardo’s team in that site. It can be concluded that the process of community awareness raising also enhances learning for FCASE staff.

FCASE workers felt it was important to highlight that community awareness raising is most effective when it is thought of as a process rather than simply an event. This involves creating a safe space for discussions to take place and providing relevant and accessible materials and resources which may give rise to disclosures and referrals. The community awareness raising process is most effective when it involves building, learning, then embedding and refreshing knowledge, and providing ongoing support for learning. Interviews and roundtable events with workers identified specific mechanisms which supported the delivery of effective community awareness raising:

***Analysis of the needs of local communities and identify vulnerable groups, which can further inform community awareness raising*** – Although a number of specific groups were targeted from the start – BME, Special Educational Needs (SEN), new and emerging communities, and LGBT – many sites learnt much more about who was in their local communities by analysing the needs in their localities. For example, delivering gender specific activities was helpful to enable conversations and discussions to address and support the specific needs of girls and adult women.

**Relationship building** – most sites began by contacting local networks as a starting point and consulting with existing partners about how they might approach the work. Staff also need to build relationships with community groups and organisations in order to tailor events to the specific needs of communities and work at the same level.

**Pro-active outreach work** enabled staff to ‘reach’ communities. Outreach work – whereby workers engaged with community members in the places they were located – was more effective than simply focussing on delivering a community awareness event and expecting people to attend. Outreach was also valuable in strengthening relationships with organisations and other professionals in order to maximise effectiveness.

**Embedding the community awareness raising element** of the work in wider CSE strategy and practice. Communities need a consistent presence and initial events need following up to be effective. It is also important to recognise some of the support needs resulting from raising awareness such as a potential increase in referrals from young people and parents/carers who may have been abused in the past themselves and require specific support to enable them to respond and protect their own children.

**Reciprocity** – locating community awareness raising in holistic support can help to address the wider needs of the group /community in order to protect them.

**Flexibility** – being able to adapt activities according to groups/community’s needs.

**Reflective learning, monitoring, evaluation and follow up** of the activities which work and for whom and using this information to build community awareness.

## **Unintended Outcomes**

The unintended outcomes might well be described as the unexpected learning from community awareness raising, as no one could anticipate exactly what this might look like at the start. Findings from interviews with FCASE workers, observations and participants’ evaluation has highlighted that it is:

- More appropriate to have gender-based training for adults in some communities.
- Important to work with and appreciate the needs of the ‘community’ you are going in to, to ensure the input is appropriate.
- Necessary to provide training and support for workers to develop community work as this element of CSE prevention looks quite different from direct CSE work with families.
- Important to embed the community awareness work alongside direct work and training to empower families to raise awareness in their communities.

The last point was considered a significant unintended outcome – interviews with parents and young people who had received the direct work highlighted that they were raising awareness themselves. Parents were informing family, friends and colleagues about what they had learnt as a natural part of information sharing. One young person suggested that the poster he designed to capture his learning could be shared with school peers. In Oakhill the week training course was also developing as a community member was being trained up to deliver the course in future. This is a sustainable model which naturally ‘grows’ community awareness raising and action.

## **9.7 Outcomes: Evaluating effectiveness in community awareness raising**

It must be recognised that the outcomes of effective community awareness raising are hard to measure and the impact for different groups will vary.

It was not possible for any worker or stakeholder to evidence a direct link between community events and an increase or decrease in the number of referrals. As Elena (missing person coordinator) confirmed this is because there is simply no direct measurable link that can be made between a person attending an event and consequently making a referral to a service for support. Nevertheless other outcomes from community awareness raising included:

- Development of relationships with stakeholders with whom there was no previous engagement.
- Improved partnership working and networks.
- Increasing general and specific knowledge about CSE in different community groups, other than professionals.
- Increased calls from public for advice and consultancy.

Some events were evaluated with feedback forms; others were evaluated via informal, anonymised feedback or recorded learning captured on the day. This information is really important as it allowed teams to evaluate the outcomes and learn how to improve practice. Continuing to develop and collect such data would begin to address the gap in literature and provide an evidence base of effectiveness.

## **9.8 Key Messages: Community awareness raising**

Within the original proposal it was thought that community awareness might well be the most innovative element of FCASE and demonstrates the value of a process which:

- *Has clear aims and objectives and is incorporated alongside the direct work.*
- *Includes scoping exercises (for example Equality Assessments and analysis of existing work) in order to identify which groups are accessing services and which are under-represented.*
- *Evaluates community awareness raising to better understand how knowledge and awareness can be raised effectively among different communities and groups.*
- *Builds relationships and partnerships with groups, communities and sectors.*
- *Makes use of a multitude of spaces and mediums.*
- *Embeds good planning and investment to produce the most positive service outcomes.*
- *Recognises the complexity of the dynamics of community awareness raising.*
- *Considers careful selection of routes into work with communities taking into consideration child protection and children's rights .*
- *Develops appropriate strategies to enable positive and open discussion of CSE, sex and sexuality with a wide range of communities.*
- *Incorporates co-work and support through FCASE staff training and the importance of working alongside CSE champions in different communities.*

## 10 CSE training for professionals and organisations

The objective in regards to training was to provide awareness raising training to a minimum of 1800 members of the multi-agency teams working with children. This was to encourage team members to recognise the risk indicators / vulnerabilities factors associated with CSE. Although the research team were not responsible for evaluating the training events it is worth noting that a training element was delivered to a total of 2353 participants, indicating there is demand and need for such training.

**Table 4: Number of training events**

	<b>Year 1</b>	<b>Year 2</b>	<b>Total achieved</b>
<b>Courses delivered</b>	<b>80 (target was 60)</b>	<b>21 (target was 16)</b>	<b>101</b>
<b>Number of participants</b>	<b>1407</b>	<b>946</b>	<b>2353</b>

The training was felt to be a very important part of the FCASE project. Participants completed pre- and post-training questionnaires in order to measure learning gained across four areas:

- CSE as a child protection issue.
- How children become sexually exploited and the support they need.
- How children and young people are affected by CSE and the behaviours they may present.
- The need for multi-agency working and additional support needs for children/young people and their families.

Secondary analysis of evaluation data found that the average post-training scores were consistently higher than pre-training across all sites. There were times where professionals marked their pre-assessment higher than their post assessment. FCASE workers reported this could be for two main reasons:

- 1 Participants thought they knew more than they did until they received the training.
- 2 Participants did not want to admit how unconfident they were at the start of the course.

The data confirm that training did improve awareness and understanding of child sexual exploitation amongst professionals. Feedback from participants also suggested that the content of the course was well received as was the expertise of staff delivering the course:

*Was very interesting and trainers were very knowledgeable.*

*Excellent training I gained a lot of knowledge and more understanding.*

*Delivered a difficult subject with confidence.*

*Fantastic trainer one of the best trainings I've been on.*

*Excellent – I would recommend to everyone.*

In addition the training component of FCASE has been viewed as performing the additional functions of raising awareness about FCASE as a project; ensuring more accurate understanding of what constitutes appropriate referrals to the project; and opening up opportunities for new contacts in different communities for community awareness events.

It is clear from the training evaluation data that professionals' knowledge of CSE and the surrounding issues continues to be underestimated. Continued training of all professional groups is required in order to ensure more victims are identified and offered support.

## 11 Conclusion and Next Steps

FCASE is a unique programme which is innovative in its support for parents and young people affected by CSE. FCASE is distinctive because it links direct work with young people and their families, with the training of professionals and awareness raising among different communities. In the UK work with young people affected by CSE is developing at a rapid pace, yet work with parents/carers and communities are less frequently found. FCASE offers parents/carers and communities support and the opportunity to discuss their concerns and needs. As recipients of the programme, it is the voices from parents, carers and young people themselves who have truly informed this evaluation. Findings from the 31 cases across the three sites to date confirm that FCASE is an effective CSE prevention programme. The flexibility and adaptability of the programme means it can and is delivered differently in different areas. FCASE 'works' because there is:

- Early intervention and prevention.
- Clear educational value for young people, parents, carers and the wider communities. They become more knowledgeable and confident about keeping children and young people safe and this maximises their capacity to safeguard their children, contribute to the prevention of abuse and the disruption and conviction of perpetrators.
- Partnership and networks with families and communities based on voluntary participation and trust.
- A strength based focus on positive aspects of parenting and care in communities.
- Strong relational skills, flexibility and in-depth of knowledge of CSE in the staff delivering the intervention.
- Improvement in family and community relations and consequently a reduction in risk.
- Clarity regarding the target group and the ability to stick to objectives.
- Skilled and experienced staff with the confidence to work with complex issues, and with young people, families and professionals and a range of communities.
- Effective community awareness raising and understanding in communities and groups but also among staff.
- Improved understanding about CSE and an increased number of practitioners who are now able to identify CSE risk and vulnerability.

**Next Steps:** FCASE pilot teams are keen to sustain work with families and communities as a result of this pilot. An on-line learning resource will be produced by Barnardo's to enable the roll out of this programme to other Local Authorities and organisations who would like to adopt this model of working. It is important to recognise that FCASE works best when delivered by staff who have significant CSE experience, draw on existing child protection processes such as the Common Assessment Framework (CAF) and use a partnership approach with families, communities and organisations. In supporting families with complex

needs, it may be necessary to draw on longer term support beyond the 6-8 week duration of FCASE and being linked to wider CSE services can facilitate this process.

## 12 Three summary suggestions for ongoing work

It is vital to recognise that services like FCASE cannot exist without financial and political investment in the areas they operate in. Specific recommendations include:

### 1 Embedding the community focus alongside the direct CSE work and training

The ultimate aim of linking family and community CSE work together is to ensure that families, people in the local community and professionals can recognise, prevent and report CSE. It is also important that the families involved in the direct work reflect the diversity and make up of these communities. At present this is not the case, as the majority of referrals for FCASE involved white British young people<sup>18</sup>. Thus to establish effective early intervention and prevention across all communities there is a need to ensure that both community awareness raising and professional training are embedded in direct work with young people and their families in the wider CSE strategy.

### 2 Building up the evidence of effectiveness

There is little data and research on the effectiveness of parenting support regarding CSE. FCASE has provided evidence of the effectiveness of parenting support, which teams recognise as an important factor in the development of CSE prevention and support. Continuing the evaluation of the work which may take place post the FCASE pilot would be an important contribution in enabling families to build on their strengths and prevent and support those affected by and at risk of CSE.

There is also little data on effective community awareness raising concerning CSE. FCASE begins to evidence what does works in regards to community awareness raising, which must be recognised as an important starting point. It is imperative to continue to collect data on community awareness raising as this will further close the gap in literature and provide evidence of effectiveness to support future funding and practice developments to strengthen communities in keeping children and young people safe.

### 3 Sustaining and embedding the learning from the FCASE pilot for young people and their families in the future

During the interviews, it emerged that a few young people that had previously been through the FCASE programme had repeat incidents where they were exposed to risk (such as sexting) and were able to be referred on to a young people's support group. In order that learning from the FCASE model is not now lost and is embedded and sustained it may be worth considering how young people and their parents/carers might access and benefit from a refresher session, a repeat intervention, or access to a support group. One response, which emerged from the FCASE work in Oakhill but was not evaluated, was the development of a young people's group.

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<sup>18</sup> For example, data collected by sites suggests that in Blackthorn, an ethnically diverse city, 29 out of 50 were White British. In Oakhill only 5 out of 63 referrals were not White British.

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