



CRITICAL PERSPECTIVES: CHILD SEXUAL EXPLOITATION APPROACHES AND PRACTICE

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Critical Perspectives: Child Sexual Exploitation Approaches and Practice

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Overview of this resource

This resource contains critical discussions of current approaches to child sexual exploitation prevention, intervention and practice in the UK.

It has been written in an accessible tone but also contains academic in-text references for those who would like to explore existing literature or research discussed in this report. The citation for this report is 'Eaton, J. (2019) *Critical Perspectives: Child Sexual Exploitation Approaches and Practice*', VictimFocus Publications, UK'.

The intended audience for this resource includes:

- Professionals, practitioners and volunteers working in child sexual abuse or exploitation
- Academics and students exploring topics of child sexual abuse and exploitation
- Leadership of child sexual exploitation services and teams
- Policymakers, lawmakers and those working in the rights of the child
- Anyone with an interest in the critical approaches to this topic including members of the public, survivors and victims of child sexual abuse and exploitation

Introduction

Child sexual exploitation (CSE) is a topic that has featured heavily in media, policy, procedure, research and practice for almost a decade. However, whilst much has been invested into the field, this essay will argue that there are fundamental misunderstandings about victims of CSE that have led to ineffective and punitive preventative and intervention approaches. This essay will critically discuss three underpinning assumptions in child sexual exploitation theory and practice related to prevention and practice:

- (a) That children take risks which lead to being sexually exploited
- (b) That vulnerability of the child leads to sexual exploitation; and
- (c) That education of children can prevent sexual exploitation.

Why is the definition of CSE important?

There have been several definitions of child sexual exploitation over the years, and whilst it has continued to evolve, the definition has still not reached a form that is accepted by everyone. Before 'child sexual exploitation' became a term in common usage, children being sexually exploited by adults were generally called 'child prostitutes' (Hallett, 2017). The term was written into law, with the Sexual Offences Act (2003) containing offences pertaining to 'child prostitution' and 'child prostitutes' until it was amended in 2015.

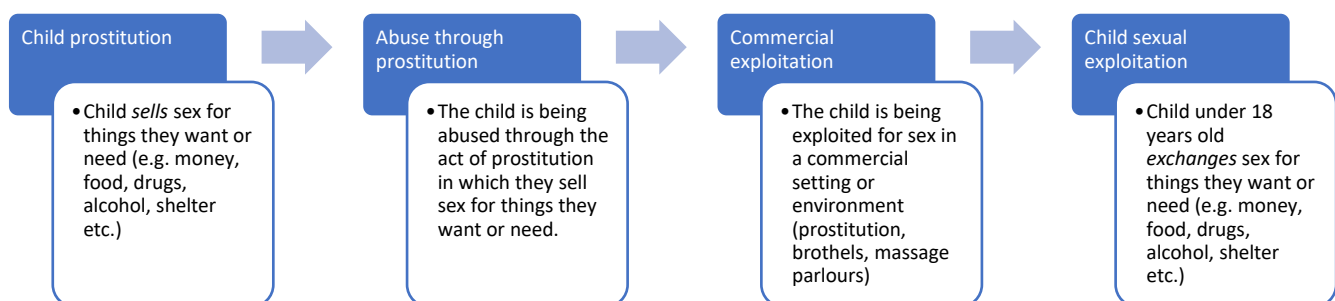
Campaigners including individual professionals, politicians, feminist groups and child rights activists argued that children could not be 'prostitutes', and if they were being sold for sex, or found 'selling sex', they were always being sexually abused and exploited by adults. They argued that the act of

calling them ‘prostitutes’ conveyed a level of choice, agency and knowledge that they did not and could not have as minors. Ann Coffey MP was particularly instrumental in the removal of the term ‘child prostitution’ from the Sexual Offences Act (2003).

Over time, the term was changed to ‘abuse through prostitution’ and then ‘commercial exploitation’. Whilst these terms signalled a shift away from perceiving children as choice-making individuals ‘selling sex’ within the context of prostitution; there was still a lack of focus on the fact that the victims were children being abused, assaulted, raped and harmed by adults.

Finally, the term ‘child sexual exploitation’ and commonly used acronym ‘CSE’ was adopted into common usage around 2009, positioning the victim firmly as a child, and the crime as the sexual exploitation of the person. However, whilst the improvement from ‘child prostitute’ to ‘child sexual exploitation’ was something to celebrate, the definition of child sexual exploitation continued to remain in flux for many years – and still contains remnants from the days of ‘child prostitution’.

Figure 1 – The evolution of the term ‘child sexual exploitation’ versus the definition



The diagram shows that whilst the terminology changes slightly, the most recent definition published in 2017 by the Department for Education (the fourth boxes) uses the concept of children ‘exchanging’ sex and sexual acts for things they want or need.

It can be seen in the diagram that the concept of child prostitution is not dissimilar from the concept of CSE, in which the definitions focus on children exchanging sexual acts for things they ‘want or need’. This remains problematic, as it positions the child as having agency and choice.

Recently, women who were subjected to sexual exploitation in childhood from Rotherham have challenged the notion of 'exchange' by arguing that the concept is offensive to victims and survivors because it reframes the violence and abuse as reciprocal and 'it positions us as little business women making an exchange' (Woodhouse, 2017).

The definition of CSE has also been raised by Gladman and Heal (2017) who argued that the term 'child sexual exploitation' had become hygienic and abstract, whereby the current DfE (2017) definition does not represent the true harm, violence, injuries and death of children, but describes a vague process of exchange with no reference to harm or trauma to the child:

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

(Department for Education, 2017)

Gladman and Heal (2017) raise an important point, and one that can be seen with ease when we contrast the definition of child sexual exploitation with the definition of child sexual abuse; one that is explicit, detailed and clear in its description of the harm and crimes committed against the child:

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually

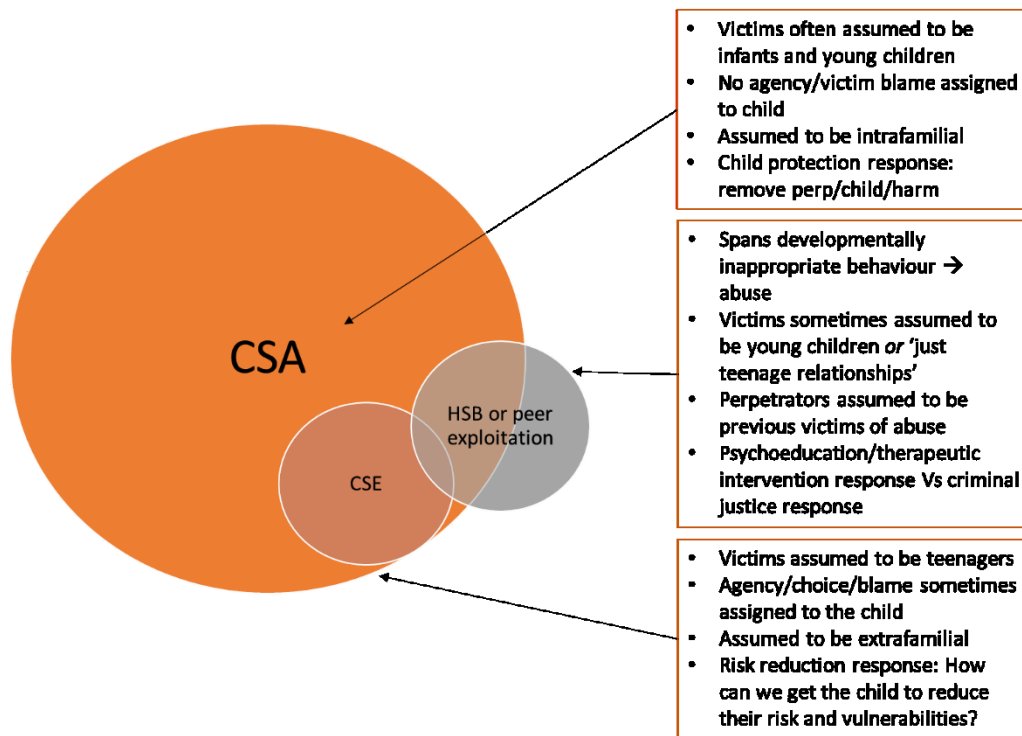
inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

(Working Together to Safeguard Children, HM Government, 2018)

The difference between the two definitions is clear: child sexual exploitation (whilst described as a form of child sexual abuse) is still being defined as a process of exchange in which children are getting something in return for performing sex acts – whilst the definition of child sexual abuse positions the child as a victim of violence, harm and sexual crimes. There is no mention of the words ‘rape’, ‘assault’, ‘grooming’, ‘trafficking’, ‘violence’ or ‘harm’ in the definition of child sexual exploitation.

The definition of child sexual exploitation is central to critical discussions of preventing sexual violence against children and protecting them from abusers. Whilst the definition still positions the child as having the agency to perform an exchange, prevention approaches will focus on changing the behaviours and decision making of the child, rather than protecting the child from adults who are raping, trafficking and abusing them. Arguably, this assertion can be seen in the approaches, prevention methods and responses to victims in recent years, including the higher level of victim blaming of girls who had been ‘sexually exploited’ when compared to victim blaming of children who had been ‘sexually abused’. This was first presented by Eaton & Holmes (2017) in the diagram below.

Figure 2 – Definitions of abuse change the perception of the victims



'Definitions change perceptions: Child sexual abuse, child sexual exploitation and harmful sexual behaviour' Eaton (2017) in Eaton and Holmes (2017, p.12)

In the diagram, Eaton argued that children were assigned different victim stereotypes and victim agency depending on the terminology used to describe what was happening to them – which in turn influenced the intervention or preventative approach they were subject to. Children being subjected to child sexual abuse were likely to be perceived to be infants and small children without agency or choice in the abuse, but children being subjected to child sexual exploitation were likely to be perceived to be teenage girls with some level of choice and agency to 'take risks' (Eaton & Holmes, 2017).

Generally, child sexual abuse still fits within a traditional child protection response, but child sexual exploitation has developed an alternative 'risk reduction' response, in which children who are being raped and abused in exploitation are given educative 'awareness raising' sessions and support to change their behaviours to 'reduce their risk' of being sexually exploited. This could be considered a

form of victim blaming that places responsibility on the child to change rather than the adult to stop harming the child.

What is victim blaming?

The term ‘victim blaming’ or ‘blaming the victim’ was first coined in a book discussing the way Black people were blamed for suffering injustice and racism from white people in the ruling class (Ryan, 1971); but became applicable to many other forms of crime, including sexual offences. Victim blaming is defined as the act of transferring blame away from the perpetrator of a crime and towards the victim of the crime (Eaton & Paterson-Young, 2018). Examples of victim blaming vary widely, from what the victim was doing or saying right through to their ethnicity or upbringing to ‘blame’ them for what a perpetrator did to them. However, most victim blaming can be categorised into behavioural blame, characterological blame and situational blame, as in the table below.

Type of victim blaming	Description	Example
Behavioural blame	Blaming the behaviours and actions of the victim before, during or after the offence	“He should have fought him off! He should have kicked him or bit him, but he didn’t!”
Characterological blame	Blaming the character and personality of the victim before, during or after the offence	“She is quite a flirty, confident person – she probably likes the attention.”
Situational blame	Blaming the victim for being in a ‘situation’ that led to being raped.	“I’m not saying these kids are to blame, but they were in a dangerous situation in that house party, they should have known not to be there.”

Victim blaming is a complex psychological and social phenomenon. Previous theories focussed on cognitive biases such as the Just World Hypothesis (also called the Just World Belief), in which people believe in a just and fair world (Lerner, 1970). In a just and fair world, good things happen to good people, and bad things only happen to bad people. Lerner (1970) argued that many people believe in this balancing force in the world, that would mean that if someone experienced something bad, such as rape or abuse, they must have done something bad to deserve it. There is ample evidence of Just World Belief in all major religions, cultures and countries around the world, but when researchers attempted to measure Belief in a Just World (BJW) with psychometric measures, to compare with victim blaming attitudes – results were inconsistent (Eaton, 2019).

Victim blaming is likely to be more complex than a simple cognitive bias and belief of a just and balanced world, and many other theories have been suggested including the theory of attribution biases, theories of rape myths, theories of self-preservation and feminist theories of misogyny and sexism (Eaton, 2019).

Rape myths have been explored and researched since Burt wrote about cultural myths and support for rape in 1980. The problematic and stigmatising myths about rape and sexual violence include assertions that women want to be raped, ask to be raped, that revealing clothing causes rape, that women lie about being raped, that men who rape have an uncontrollable sex drive and that women who have no injuries were not really raped (Payne, Lonsway & Fitzgerald, 1999). Whilst many of these rape myths appear outdated, the impact of rape myths is still seen today in both professional practice and the public understanding of sexual violence. In 2005, Amnesty international found that just over a third of people in the UK believed that women who flirt were at least partially to blame for being raped and in 2010, McMahon found that over 50% of university students believed that a girl's actions 'led to her sexual assault'. In 2019, Eaton found that between 6% and 68% of the British public sample would blame women for being subjected to sexual violence depending on the situation or type of offence committed against them.

Rape myths are used in CSE practice

As many rape myth studies and victim blaming studies tend to focus on the actions and characters of adult women, it would be reasonable to expect that rape myths and victim blaming would not apply to children being raped, trafficked and sexually exploited, especially as many of them cannot legally consent to sexual activity. However, several serious case reviews, inquiries and even published policies and risk assessment toolkits used in child sexual exploitation practice actively reference or employ rape myths with children who are being sexually exploited.

In the table below, common rape myths used against women are compared with current CSE practice in the UK. In the left column are items from the Updated Illinois Rape Myth Acceptance Scale (2011). In the right corresponding column are examples from current practice with children subjected to sexual violence, that support the rape myth.

Rape myth U-IRMAS (2011) McMahon & Farmer	Operationalisation of the rape myth in CSE practice
Subscale 1: She was asking for it If a girl is raped while she is drunk, she is at least somewhat responsible for letting things get out of hand	This rape myth is most often seen when girls are being given alcohol and/or drugs as part of grooming offences and sexual exploitation, but instead of the alcohol and drug use being recorded as part of the offence committed by the adult, girls are criticised and stigmatised for being intoxicated. Girls who are raped whilst under the influence of alcohol or drugs are perceived to be unreliable witnesses or problematic victims in a prosecution. Girls who are being actively sexually exploited using drugs and alcohol can be given 'alcohol and drug awareness sessions' instead of safeguarding them from sexual violence. The concept of exchange also compounds this rape myth, in which CSE is defined as children 'exchanging sex for items such as alcohol and drugs'. This positions the children as having more agency and responsibility than the offender, who is not mentioned.
Subscale 1: She was asking for it	This rape myth appears on most of the risk assessment toolkits under the heading 'wears provocative dress' or 'oversexualised attire/makeup/clothing'.

When girls go to parties wearing slutty clothes, they are asking for trouble	These items are used as ‘risk indicators’ that a child may be sexually exploited, but they only apply to girls which presents two problems. The first being the presence of sexism, that clothing causes rape and the second being that the tool is also used to assess boys, who would not be categorised as wearing ‘provocative dress’ as boys’ bodies are not policed in the same way as girls’ bodies. Therefore, girls are being assessed against sexist stereotypes and rape myths; and boys are being assessed against a harmful, female-centric tool with items not culturally or socially relevant to them.
Subscale 1: She was asking for it When girls get raped, it’s often because the way they said “no” was unclear Subscale 3: It wasn’t really rape If a girl doesn’t say ‘no’, she can’t claim rape	These rape myths are prevalent in CSE due to the way preventative measures focus on teaching children about consent and saying ‘no’ when they do not want sexual activity with others. Sessions with children who are already being raped and abused often include lessons on giving consent, healthy and unhealthy relationships and boundaries. This perpetuates the myth that the reason the children are being sexually exploited is because they didn’t understand enough about consent and relationships to be able to say ‘no’ clearly.
Subscale 4: She lied A lot of times, girls who say they were raped agreed to have sex and then regret it A lot of times, girls who say they were raped often led the guy on and then had regrets A lot of times, girls who claim they were raped have emotional problems	This subscale contains three rape myths which feature heavily in CSE practice, especially when considering the failings of authorities and police forces who perceived girls to be lying, exaggerating or making malicious complaints. Whilst many children never disclose abuse, rape and exploitation, there were many cases of CSE in which girls repeatedly disclosed or were found in premises with the men who were harming them – but they were not believed. In serious case reviews from Rotherham, Telford and Oxford, girls were found to have been called liars and their disclosures were ignored as they were positioned as consenting, promiscuous teenagers who led men on. Girls who have been subjected to sexual violence are also very likely to be diagnosed with psychiatric disorders and mental health issues, rather than being acknowledged as victims of complex and multiple traumas; displaying natural and rational trauma responses rather than symptoms of a psychiatric disorder.

Three assumptions that affect CSE practice and theory

Child sexual exploitation practice and theory has developed based on three core assumptions. The first is that sexual exploitation happens to 'vulnerable' children. The second is that children who engage in 'risky behaviours' will be sexually exploited and that children increase and decrease their own 'risk level' to sexual violence. The third is that prevention of this form of sexual violence is based on educating the child about sexual exploitation and teaching them not to 'take risks' that would lead to being sexually exploited. This preventative method is assumed to protect them from child sexual exploitation and abuse, by raising their knowledge and awareness of sexual exploitation and therefore giving them the power to exit abuse or the knowledge to spot a perpetrator early on in a grooming process.

All three assumptions are problematic and have heavily influenced the preventative approaches taken by local authorities, police and national children's charities in the UK. Currently in child sexual exploitation practice, prevention involves changing something about the child for the abuser to stop abusing them, or not to target them in the first place. Generally, this is confined to two main preventative approaches: stopping children from 'taking risks' and 'reducing vulnerabilities' of children.

Stopping children from 'taking risks'

One of the most common methods of identifying and responding to children who are, or are suspected of, being sexually exploited is to measure factors known as 'risk indicators' and by changing or reducing the 'risk level' of the child by modifying their behaviour or character in some way. Professionals in multi-agency teams measure the risk of child sexual exploitation happening to

the child using a matrix of 'CSE risk indicators' on a toolkit adopted by each local authority, police force or larger strategy area. Notice, that they do not measure the risk of the offender as standard, but the 'risk' of the child.

The items on the CSE toolkits have a central focus on the child, their behaviours, their backgrounds, upbringing, character and appearance. Professionals are required to tick or score the indicator on the toolkit to raise concerns or make referrals for children to safeguarding teams or specialist CSE teams (Brown et al., 2016;2017). CSE toolkits vary from authority to authority but are generally based on original or hybrid versions of the SERAF Tool from Barnardo's and the NWG CSE Toolkit. Both toolkits contained long lists of 'risk indicator' items, which when scored, give a calculated outcome of the 'risk' the child is at.

Brown et al. (2016) found over 110 individual indicators being used to assess children despite the items having never been validated or evaluated empirically or in practice. Further, the authors concluded that the CSE toolkits were perpetuating victim stereotypes in CSE and causing professionals to focus on the characters and behaviours of the child, rather than where the risk was really coming from: the perpetrator.

Brown et al. (2016;2017) published a second report about the use of CSE toolkits with children which explored the way social workers and other professionals understood and employed the CSE risk toolkits and indicator lists across the UK. The authors concluded that CSE risk toolkits were unreliable and should not be used to make decisions about children.

CSE risk toolkits are generally understood to be a preventative measure, in which professionals calculate the 'risk level' of children (usually 'low', 'medium' and 'high') and then act to protect the child. However, as Brown et al. (2016;2017) pointed out, many of the items that measure risk are evidence of sexual abuse or are current sexual offences, not risk indicators that the child may be sexually abused in the future.

Examples of ‘risk indicators’ that are evidence of abuse already occurring

Risk indicator	Risk level
‘Superficial self-harm as a consequence of CSE’	Low risk
‘Associating with young people who are also being sexually exploited’	Low risk
‘Being groomed online or offline by perpetrators over 18 years old’	Medium risk
‘Offering to have sex for money or other payment and then running before sex takes place’	Medium risk
‘Being involved in CSE through being seen in hotspots i.e. known houses, recruiting grounds or parties’	Medium risk
‘Child under 13 involved or coerced into sexual activity’	High risk
‘Pattern of street homelessness and staying with an adult believed to be sexually exploiting them’	High risk
‘Child under 16 meeting different adults and exchanging or selling sexual activity for goods or a roof overnight’	High risk
‘Being bought/sold/trafficked’	High risk

(Risk indicators taken from current CSE toolkits in UK, based on NWG CSE Toolkit)

In support of the argument by Brown et al. (2016;2017) the table above demonstrates a gross misuse of the word ‘risk’ in preventative practice. Indicators that describe actual abuse and harm to children, are categorised as low, medium or high ‘risk’.

When used correctly, the word ‘risk’ means the probability or chance that something negative may happen. In CSE the word ‘risk’ is used to describe harm that has already occurred or is actively occurring *and* the risk that may occur. Current CSE risk toolkit outcomes lead to children who are being trafficked, raped and sexually exploited being labelled as ‘medium risk’ or ‘high risk’ rather than being acknowledged as a victim of sexual offences and serious crime.

The focus on measuring risk also leads to children being framed as ‘risk takers’ or ‘displaying risky behaviours’ rather than the perpetrators being framed as the risk. When it comes to prevention, this

has influenced the way children are supported and protected. Rather than the offender being risk assessed and changed, stopped or apprehended, CSE strategies focus on changing the 'risk level' of the child.

At professionals meetings, children are assessed based on the CSE risk toolkit and given a 'risk level'. Based on the risk level they fall within; each child will then be prescribed general interventions and support based on reducing their own risk level in an attempt to stop or prevent the sexual exploitation from occurring or continuing. This approach essentially erases the perpetrator from the crimes against the child, leaving the child as the cause and the solution to the sexual harm they are being subjected to. Interventions can include stopping the child from going to certain places, seeing friends, walking to school alone, wearing certain clothing and makeup, using the internet, having a mobile phone, having a games console or even living in their hometown.

Case example

Fifteen-year-old Max talks to unknown men when playing Call of Duty. They ask him to send photos of himself. He sends photos, mainly silly ones but a couple with his top off and his jeans undone. Workers and parents stop him from playing on the Xbox, disconnect his internet access and report that he is now at low risk of CSE because they have changed his behaviours. The accounts are not investigated, and Max is left feeling like it was his fault.

Examples like the one above are common in CSE practice across the UK. In an attempt to protect a child or prevent CSE, the child is assessed for 'risks' they are 'taking' which may lead to being sexually exploited or groomed – and then changes are made to reduce those risks.

In Max's case, his parents were told to stop him from playing on the Xbox and disconnect his access to the Wi-Fi internet in the house. Despite many older teens playing online and talking to strangers, this was perceived as a 'risk-taking behaviour'. It was reported that because he was no longer able

to game online, his risk level decreased. A child like Max may well have also received education on 'risk taking online', to change his online behaviours to 'reduce his risk' of being sexually exploited.

However, an approach focussing only on changing the child and placing responsibility on their actions and behaviours, is not truly preventative and is often perceived as punitive by children who were targeted by a potential perpetrator, disclosed to an adult and then had their belongings or freedom limited or reduced as a consequence.

In serious case reviews, it has been reported that approaches such as these leave a new gap for a perpetrator to fill: a child who suddenly has no access to the internet, games console or mobile phone will seek one out – and a perpetrator can be the person who supplies that access.

Unwittingly, professionals can create an opportunity for a perpetrator that did not exist before the intervention to 'reduce the risk'; meaning that the intervention increases the risk of the offender targeting or controlling the child.

Another argument is that changing the behaviour of one child does not prevent sexual violence but means it will happen to another child instead – because the perpetrator was never confronted or stopped and was free to continue abusing other children.

Risk levels originating from the CSE risk toolkits also cause preventative work to be conducted, even when the child is already being sexually abused or exploited. Children at 'medium' or 'high' risk of CSE, which as we have seen, often means the child is already being harmed – still results in direct case work in which children are educated on topics of consent, healthy and unhealthy relationships, reducing risk taking behaviours, risks of alcohol and drugs and sexual health. Whilst children have a human right to access education and information on the topics that concern them and affect them, and children should have comprehensive relationships and sex education – it is arguably not appropriate to deliver this education whilst the child is being actively sexually abused, trafficked or

exploited, as a preventative method or intervention; especially where the education is being used to attempt to reduce 'risk levels' of the child instead of stopping the offender (Eaton, 2019a).

The concept of risk is currently misused in CSE practice. Risk is perceived as belonging to and originating from the behaviours, background and characteristics of the child. This leads to ineffective or punitive preventative approaches to CSE as a form of sexual violence, that focus on changing the child and reducing their 'risk level', rather than assessing the risk of the offender committing crimes against children.

'Reducing vulnerabilities' to CSE

The second core assumption in CSE practice is that children with specific vulnerabilities are more likely to be sexually abused than other children with little or no vulnerabilities. This assumption is not specific to CSE, however, and many studies have been published that seek to discover the vulnerabilities of the victim that make rape, sexual abuse and domestic abuse more likely. Despite the ongoing search for vulnerabilities that lead to sexual violence, findings are highly contested and variable (Eaton & Holmes, 2017; Brown et al., 2016). When it comes to child sexual exploitation, for example, there is very little evidence that any 'vulnerabilities' are linked to a higher chance of being sexually exploited (Brown et al., 2016).

To begin, it is important to define what is meant by 'vulnerabilities to CSE'. Society tends to perceive children as inherently vulnerable, due to being children (James & Prout, 1997), however, if we did truly see all children as vulnerable to sexual abuse and exploitation, there would not be specific lists of vulnerabilities that children are scored and measured against.

Lists of vulnerabilities to CSE are widely used in practice, with many lists of vulnerabilities attached to the previously discussed CSE risk toolkit. The lists of vulnerabilities vary widely from toolkit to

toolkit and have not been validated or evaluated to show causation or correlation yet (Brown et al., 2016;2017). Vulnerabilities include having a learning disability, being a looked after child and witnessing domestic abuse at home. Generally, the lists of vulnerabilities include adverse experiences from throughout the lifespan of the child, however, some are vaguer and include items such as moving to secondary school, illness of a family member, a change in appearance or fashion and having low self-esteem.

It is thought that the more vulnerabilities the child has, the more likely they are to be sexually exploited. This approach to working with children represents a deficit model of children, rather than a strengths-based model of understanding their lives and potential. In a deficit model of prevention and support in sexual violence, negative and adverse childhood experiences increase the likelihood of sexual abuse and exploitation.

The problem with this approach is two-fold. The first is that it positions children with trauma histories or adverse experiences as 'predisposed' to be continually abused and exploited, with little hope of positive outcomes and safety. Rather than focussing on the many strengths the child has, the risk assessment and interventions become focussed on the vulnerabilities and experiences of the child, ignoring their strengths, desires, skills and talents. In this approach, children become 'CSE cases' and all interventions become focussed on the CSE and not the whole person (Eaton & Holmes, 2017).

The second problem with the vulnerabilities approach to CSE, is that measuring the risk of being abused or exploited by how many vulnerabilities the child has, erases the actions, decisions and motivations of the sex offenders that choose to target children of all ages, sexes, ethnicities, backgrounds and life experiences. This leads to a narrow, stereotypical view of which children would be sexually exploited (those with existing vulnerabilities) and which children would not (those without existing vulnerabilities). Sex offenders are therefore excused from the narrative, from assessments, practice and prevention.

One example of the way vulnerability approaches to CSE perpetuate stereotypes is the way younger children are seen as more vulnerable; but become less and less vulnerable to sexual violence as they get older. Once over the age of 16 years old, there is a markedly different response to children who are being sexually abused and exploited. This was first reported in a publication by The Children's Society in 2015 which explored the way 16 and 17-year-old children in the UK who were being sexually exploited were being failed by organisations and professionals. It was argued by the authors that this failure was due to older teenagers being perceived as less vulnerable, less susceptible to harm and 'old enough to know better' (which became the title of the report).

If children did become less and less vulnerable as they aged, the prevalence of abuse would dramatically reduce as the child reached adulthood, but this is not the case. A meta-analysis of over 9000 cases by Cockbain et al. (2015) showed that the sexual abuse and exploitation of girls appears to increase significantly as she ages and peaks between 13 and 16 years old. The decrease after 16 years old may be related more to the issues raised by Pona and Baillie (2015) in The Children Society report rather than being a true decrease in prevalence.

Another argument would be that if vulnerability to sexual abuse and violence did reduce with age, the prevalence of adult rape, abuse and exploitation would be much lower than that of children, which is also incorrect.

In Eaton & Holmes (2017), a diagram from Eaton separates vulnerabilities from the act of sexual violence against children, placing the offender in the centre of the process.



Diagram from Eaton & Holmes (2017, p38) arguing that the experiences of a child are separate from the abuse, with the central factor being the offender's motivations and opportunities to abuse

Children's experiences may or may not be relevant or known to a sex offender, but research has only identified three that have any correlation with experiencing CSE – previously experiencing sexual abuse (Ullman and Vasquez, 2015; Gagne et al, 2005), having a disability and being in looked after care (Brown et al, 2016). These are included in section 1 of the diagram. It is currently taught that vulnerabilities of children are detected by intelligent sex offenders who only target children with multiple vulnerabilities and then utilise those vulnerabilities as opportunities or leverage. However, there is little to no evidence of this.

Whilst children who are sexually abused may have experienced other issues in their lives before the sex offender targeted them, it would be inappropriate to link these as causal, or in some cases even correlational. Studies such as the Adverse Childhood Experiences (ACE) Study frequently find that over 70% of adults report at least one adverse childhood experience and over 12% report more than four. However, only around 5% of adults report being sexually abused or exploited in childhood

(NSPCC, 2017). This means that, statistically, a large majority of children in the population have experienced harm or trauma (which would be perceived as vulnerabilities in CSE practice) but have not gone on to be targeted by an offender.

In the diagram by Eaton, the previous or current experiences of the child stand independently from the abuse process unless the child is being targeted by a sex offender. A child might experience multiple harms or vulnerabilities but will not be sexually exploited unless a sex offender targets them. If there is no sex offender, there will be no sexual offence against the child.

Vulnerabilities, therefore, do not lead to CSE – sex offenders lead to CSE.

The sex offender operates independently on their own motivations coupled with the utilisation or creation of an opportunity to abuse, which may or may not include the child's existing experiences. This means sex offenders may know and choose to use the child's adverse experiences to groom or control them – or they may not know (or not need to know) about any previous or current experiences, because they aim to create a new experience, such as offering drugs or alcohol, that was not already a feature of the child's life.

This more nuanced view of vulnerabilities has implications for current CSE practice, which not only employs the vulnerabilities of the child as a predictive measure of CSE, but also views those vulnerabilities as changeable or able to be reduced with education and support. Much direct preventative work in CSE involves efforts to 'reduce vulnerabilities' of children in order to protect them from a sex offender, who is assumed to only target children with vulnerabilities.

'Education is preventative'

Both risk reduction and vulnerability reduction are argued to be achieved via education – and in CSE practice, education is viewed as a preventative measure to being sexually abused or exploited.

Much work has been conducted in the UK to develop educational films, resources and session plans with the aim of increasing the awareness of CSE with children and the claim of being able to reduce risks, reduce vulnerabilities and even enable children to identify and leave sexual violence. Whilst education is welcomed – and all children should have access to education which informs and empowers them, education is not preventative and cannot protect a child from an adult sex offender who wields power and control over them in a myriad of ways (Eaton, 2018).

Despite education being used as a preventative method for several years, there is very little evidence of impact or success. In a meta-analysis by Bovarnick and Scott (2016), the authors concluded that education did not influence experiences of sex, abuse or relationships later on – and new information was rarely retained longer than a few months by the children. Much preventative education has no evidence base and longitudinal studies exploring the impact of education on prevention of sexual violence are rare. Studies of longitudinal impact of education are also methodologically complex due to the high level of variables that would affect the interpretation of findings. High quality education covering topics such as sex, abuse, relationships and health are vital for children, but it is not the solution to CSE and cannot be considered preventative in nature.

In 2018, Eaton published the first report documenting the harm caused by preventative CSE films in which children watch scenes of other children being raped and abused. Whilst the method has been used with hundreds of thousands of children in recent years, there is no evidence that showing traumatic imagery of child rape and abuse would prevent children from being sexually exploited by powerful and controlling offenders.

For practitioners, education is a well-established intervention to use with children who are being subjected to sexual exploitation. The showing of films and educational resources is often built into care plans, action plans and strategies for individual children and even entire schools or local authority areas.

The real case example below was provided by an adult who was shown educational resources when she was being sexually exploited and trafficked in the UK as a child.

Case Example: Faye*

As a child I worked with an organisation in (area name) and was shown the film 'Sick Party.' I remember the worker coming to my home, she brought her laptop and set it up on the dining room table. We began to watch the DVD. I remember it being approximately half an hour long, during this time I became very upset and panicky. She paused the film several times so I could 'compose myself until we could continue.' At the end of the film I was extremely upset, and the worker seemed shocked how upset I was. She ended my visit earlier to 'leave me to calm down' and said she'd come see me next week, then she left.

I vividly remember feeling so confused, embarrassed and ashamed. At that time what I had just seen made me feel so angry at myself that I'd not kept myself 'safe.' I felt stupid that I hadn't 'seen the signs.' I know I self-harmed that night, the shame felt unbearable.

I specifically remember being told I would see a worker for 6 weeks and each week we would have a specific 'topic' to work on. This was set in stone with no negotiation. It was a set plan they worked from with children they supported. One week, she brought some cards. Each card had a 'scenario' on it, I then had to match up whether I thought this was 'okay' 'maybe okay' or 'not okay'.

One scenario that I remember was along the lines of 'I'm going to take and send a nude photograph' another was 'I am going to meet an older man after school.' The point of the exercise was to look at ways of 'keeping myself safe in the future' - like it was my responsibility as a child that had already been abused to prevent it happening again.

This same organisation documented in my notes on discharge that I was 'low risk' of future CSE as I had 'built resilience in sessions'... 'I now understood the dangers and can make more informed choices in the future.' It also states that because I came from a good family home, that my parents both had good jobs and that I didn't present as 'over sexualised', I was low risk. Unfortunately, my abuse continued.

The passage from Faye* contains all the assumptions discussed in this essay. The child received specialist CSE services that positioned her as risk-taking, vulnerable and in need of six sessions of education. Despite the view of the professionals that the education had prevented her from being abused in the future, her abuse continued because the education was not enough to protect her from adult sex offenders. She was not in control of the abuse.

Herein lies the assumption – that an educated child who is taught about abuse, grooming and violence can use the education to protect themselves from abuse, grooming and violence. Whilst education is important, it is not protective when a child is being assaulted, abused, raped and trafficked.

It is not common practice in any other form of child harm to educate the child about the form of harm and then expect them to be able to exit the harm or reduce their own harm. For example, educative approaches are not used in intrafamilial child sexual abuse, physical child abuse or neglect. Children who were being neglected, physically abused or sexually abused would not receive six sessions of education on those topics to ‘reduce their risk’ of being neglected or abused.

Abuse of children is a form of oppression. Therefore, it is interesting to draw parallels with other forms of oppression to consider whether we would utilise the educative approach in other areas. Consider, for example, if we decided to educate Black children about racism and then proclaimed that those children could now protect themselves from racism and racially aggravated assaults, because they had the knowledge they needed to identify racism and stop it. Most people would agree that this approach is not only ridiculous, but harmful. It would leave the child in an oppressive or abusive situation whilst the onus was on them to learn more about protecting themselves.

It would not be ethical or effective to educate an oppressed or abused group of children about the concept of the abuse or oppression and then expect them to protect themselves from it. These approaches ignore the power dynamics in society and those created by the offender. Instead, educative approaches focus on upskilling and teaching the child about the form of harm they are being subjected to with the hope that they will either escape, disclose, identify it or acknowledge it.

Conclusion

The protection of children and the prevention of CSE as a form of sexual violence has been hindered by issues of definition, the conceptualisation of risk and vulnerability, the positioning of the child as the problem and the solution to CSE – and the misunderstanding of the use of education as a preventative method.

All these problems serve to erase the actions, decisions and motivations of sex offenders and cause professionals to focus on the behaviours and characteristics of the child, leading to the acceptance and utilisation of rape myths and victim blaming in practice.

Whilst focus remains on what the child could have done differently, how the child could behave better, how the child could reduce their own vulnerabilities and how the child could be educated more about relationships and grooming – the action of the offender who chooses to abuse, rape and traffic children is ignored.

Children subjected to CSE are victims not only of serious crime, but also of breaches of their human rights. Instead of positioning the child as the cause and solution to CSE, the child should be regarded as an innocent victim of a serious crime that was deliberately perpetrated by sex offenders to harm the child. This shift in thinking would also require a dramatic shift in definitions and conceptualisations. Specifically, it would require the removal of the concept of ‘exchange’ from all definitions, theory and practice in CSE. At no point should the rape, abuse, assault, grooming and trafficking of children be framed as ‘a form of exchange in which the child gets something they want or need’. Further, radical change in practice and assessment would need to occur to remove the assumptions that children can control their own ‘risk’ and ‘vulnerability’ to sexual violence perpetrated by others against them.

Together, theory, practice and policy need to reflect on the messages we give to children when we ask or force them to change their own character or behaviour - and tell them that this will protect them from sexual violence.

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