SHEF Policy

Child-on-Child (Peer-on-Peer) Abuse

POLICY STATEMENT

- This Policy is the Group 's overarching policy for any concern of Child-on-Child or Peer-on-Peer abuse. It should be read alongside the settings Safeguarding and Child Protection Policy and any other relevant policies, including but not limited to, the Therapeutic Approach Policy (Behaviour Management), Anti Bullying and Incident Management Policies.
- Sets out our strategy for improving prevention and identifying and appropriately managing instances of Child-on-Child or Peer-on-Peer abuse.
- Applies to all Team Members.
- Is compliant with the statutory guidance on Child-on-Child or peer- on-peer abuse as set out in legislative government documents for England and Wales.
- Does not use the term 'victim' and/or 'perpetrator'. This is because our Group takes a safeguarding approach to all individuals involved in concerns or allegations including those who are alleged to have been abused, and those who are alleged to have abused their peers. Research has shown that many individuals who present with harmful behaviour towards others, in the context of Child-on-Child or Peer-on-Peer abuse, are themselves vulnerable and may have been victimised by peers, parents or adults in the community prior to their abuse of peers.

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1. Introduction

1.1 Overview

1.1.1 It is the policy of Phoenix to ensure that our environments promote the safety and wellbeing of the People we support. This policy provides a framework for safe practice by Phoenix Team Members. It is the responsibility of the Manager/Headteacher/Principal of the setting to ensure compliance with legislation, guidelines from applicable bodies, and guidance from the relevant regulator as applicable.

1.1.2 Phoenix recognises that the People we support are vulnerable to and capable of abusing their peers, this may occur in childrens or adult's settings. We take such abuse seriously. This includes verbal as well as physical abuse. Child-on-Child or Peer-on-Peer abuse will not be tolerated or passed off as part of "banter" or "growing up".

1.1.3 This policy uses the term 'People we support' to define all children, young people and adults who access our settings. Our approach under this policy and of our wider safeguarding responsibilities is that they apply to all, regardless of age. We recognise that there may be some additional considerations in relation to an individual aged 18 or over in terms of how local agencies and or our partners respond. Similarly, the settings response to incidents involving the exchange of youth produced sexual imagery will need to differ depending on the age of the People we support

1.1.4 This policy should be read in conjunction with setting specific legislation and the Local Safeguarding Partnership's Safeguarding Policy and Procedures.

1.1.5 Phoenix recognises that Child-on-Child and Peer-on-Peer abuse is preventable. Early identification, therapeutic intervention and evidence-based support can reduce the likelihood of harmful behaviours escalating and support positive outcomes for all People we support.

1.1.6 In particular, we:

- take a Contextual Safeguarding approach to preventing and responding to Child-on-Child or Peer-on-Peer abuse
- believe that to protect the People we support, all settings should be aware of the nature and level of risk to which their individuals may be exposed, and a clear and comprehensive strategy should be in place for each individual which is tailored to their specific safeguarding context.
- regard the introduction of this policy as a preventative measure. We do not feel it is acceptable to just take a reactive approach to Child-on-Child or Peer-on-Peer abuse in response to alleged incidents and believe that to tackle Child-on-Child or Peer-on-Peer abuse proactively, it is necessary to focus on all four of the following areas:
    - systems and structures
    - prevention
    - identification
    - response/intervention

- recognise the national increasing concern about this issue and wish to implement this policy to mitigate harmful attitudes and Child-on-Child or Peer-on-Peer abuse in our settings, and encourage Parents, Carers, and professionals to hold us to account on this issue and take prompt action in the event of a concern being raised.

2. Identifying Child-on-Child or Peer-on-Peer Abuse

2.1 What is Contextual Safeguarding?

2.1.1 This policy encapsulates a Contextual Safeguarding approach, which is about changing the way that professionals approach safeguarding, thereby requiring all those within a Local Safeguarding Partnership to consider how they work alongside, rather than just refer into, social care, to create safe spaces for People we support who may have encountered Child-on-Child or Peer-on-Peer abuse.

2.1.2 It also adopts a group Contextual Safeguarding approach, which means:

- being aware of and seeking to understand the impact that these wider social contexts may be having on the People we support,
- it looks to create a safe culture in our settings by, implementing policies and procedures that address Child-on-Child or Peer-on-Peer abuse and harmful attitudes; promoting healthy relationships and attitudes to gender/ sexuality; identification of risky areas in the locations of our settings; training on potential bias and stereotyped assumptions for example,
- being alert to and monitoring changes in the behaviour and/or engagement of the People we support, and contributing to local safeguarding agendas by, for example, challenging poor threshold decisions and referring concerns about contexts to relevant local agencies (see section entitled 'multi-agency working').
- being alert to times and locations where risks may be heightened, such as travel to and from the setting, community locations and periods immediately before or after e.g. school or college.

2.2 What is Child-on-Child and Peer-on-Peer Abuse

2.2.1 Child-on-Child abuse is any form of physical, sexual, emotional, and financial abuse, and coercive control, exercised within the relationships (both intimate and non-intimate), friendships and wider peer associations of the People we support.

2.2.2 Peer-on-Peer relates to adults in our settings. Abuse is any form of physical, sexual, emotional, and financial abuse, and coercive control, exercised within the relationships (both intimate and non-intimate), friendships and wider peer associations of the People we support.

2.2.3 All Team Members should understand, that even if there are no reports in their setting it does not mean it is not happening; it may be the case that it is just not being reported. As such it is important if Team Members have any concerns regarding Child-on-Child or Peer-on-Peer abuse, that they speak to their designated safeguarding lead/person.

2.2.4 Child-on-Child abuse is a safeguarding concern for both the individual who has experienced harm and the individual displaying harmful behaviour. Both may require safeguarding support, assessment and intervention

2.2.5 It is essential that all Team Members understand the importance of challenging inappropriate behaviours between the People we support that are abusive in nature. Downplaying certain behaviours, for example dismissing sexual harassment as "just banter", "just having a laugh", "part of growing up" or "boys being boys" can lead to a culture of unacceptable behaviours, an unsafe environment for People we support and in worst case scenarios a culture that normalises abuse leading to People we support accepting it as normal and not coming forward to report it.

2.2.6 All Team Members should be aware that People we support can abuse other People we support, and that it can happen both inside and outside of our settings, online and offline. Some examples of how this can manifest itself include, but are not limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying).
- abuse in intimate personal relationships between peers.
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse).
- serious physical assault, significant physical harm, or threats involving weapons.
- sexual violence, such as rape, assault by penetration and sexual assault; (this may include an online element which facilitates, threatens and/or encourages sexual violence).
- sexual harassment, such as sexual comments, remarks, jokes, and online sexual harassment, which may be standalone or part of a broader pattern of abuse.
- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.
- consensual and non-consensual sharing of nudes or semi-nudes, including photographs, videos, livestreams, digitally altered images, AI-generated imagery and deepfake content
- up skirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm; and
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element)

2.2.7 Some of these behaviours will need to be handled with reference to other policies in the setting, including for example, Safeguarding and Child Protection, Therapeutic Approach Policy (Behaviour Management), Anti Bullying, Incident Management and Exclusions.

2.3 Vulnerable Groups

2.3.1 It is important to be aware that any person we support can be at risk of Child-on-Child or Peer-on-Peer abuse and that abusers can be younger than those they are abusing. All the People we support are vulnerable.

2.3.2 Research suggests some groups may be more at risk. The Safeguarding Network identifies the following as particularly vulnerable:

- Those aged 10 and upwards (although children as young as 8 identified).
- Girls and young women are more likely to be subjected to Child on Child and Peer-on-Peer abuse and boys and young men more likely to be abusers.
- Children with intra-familial abuse in their histories or those living with domestic abuse are more likely to be vulnerable.
- Children in care and those who have experienced loss of a Parent, sibling, or friend through bereavement.
- Children who have been abused or have abused their peers.

2.3.3 In line with KCSIE guidance, we recognise that both children and adults and children with Special Educational Needs and/or Disabilities (SEND) are three times more likely to be abused than their peers without SEND, and additional barriers can sometimes exist when recognising abuse in children with SEND.

2.4 Recognising Child-on-Child or Peer-on-Peer Abuse

2.4.1 Signs that an individual may be suffering from Peer-on-Peer abuse can also overlap with those indicating other types of abuse and can include, but are not limited to:

- Disengagement and struggling to carry out tasks to their usual standard
- Physical injuries/unexplained injuries
- Experiencing difficulties with mental health and/or emotional wellbeing,
- Becoming withdrawn and/or shy; experiencing headaches, stomach aches, anxiety and/or panic attacks; suffering from nightmares or lack of sleep or sleeping too much
- Broader changes in behaviour, such as alcohol or substance misuse, self-harm
- Changes in appearance and/or acting in a way that is not appropriate for the individual's age
- Abusive behaviour towards others.
- Increased absence and lack of general engagement
- A change in friendships or relationships with older individuals or groups
- A significant decline in performance at school or college

- Unexplained gifts or new possessions could also indicate that People we support have been approached by, or are involved with, individuals associated with criminal networks or gangs.

2.4.2 This list is not exhaustive, and if an individual displays these signs, it does not necessarily indicate abuse. We must be alert to behaviour that might cause concern and think about what the behaviour might signify. People we support should be encouraged to share with Team Members any underlying reasons for their behaviour and, where appropriate, Team Members might need to engage Parents/Carers/professionals to understand the context more fully.

2.5 When Does Behaviour Become Problematic or Abusive?

2.5.1 All behaviour takes place on a spectrum. Understanding where an individual's behaviour falls on a spectrum is essential to being able to respond appropriately to it.

2.5.2 When dealing with alleged behaviour which involves reports of, for example, emotional and/or physical abuse, Team Members with the support of the Integrated Therapies Team can draw on aspects of Hackett's continuum to assess where the alleged behaviour falls on a spectrum and to decide how to respond. This could include, for example, whether it:

- is socially acceptable,
- involves a single incident or has occurred over a period of time,
- is socially acceptable within the peer group,
- is problematic and concerning,
- involves any overt elements of victimisation or discrimination e.g., related to race, gender, sexual orientation, physical, emotional, or intellectual vulnerability,
- involves an element of coercion or pre-planning,
- involves a power imbalance between the individual allegedly responsible for the behaviour and the individual allegedly the subject of that power and involves a misuse of power.

2.5.3 In this policy we recognise the importance of distinguishing between problematic and abusive sexual behaviour (Harmful Sexual Behaviour HSB).

2.5.4 We are adopting the NSPCC definition of HSB as: -

"Sexual behaviours expressed by children…that are developmentally inappropriate, may be harmful towards self or others, or be abusive towards another child…or adult."

2.5.5 We will also use Simon Hackett's continuum model to demonstrate the range of sexual behaviours. Hackett's continuum relates exclusively to sexual behaviours and is not exhaustive. Please refer to supplementary documentation, "Sexual Behaviours Traffic Light Tool" on Universal SharePoint or on https://www.brook.org.uk/education/sexual-behaviours-traffic-light-tool/

2.5.6 The Brook Sexual Behaviours Traffic Light Tool can help professionals working with People we support to distinguish between three levels of sexual behaviour – green, amber, and red, and to respond according to the level of concern. Please refer to supplementary documentation, "Hackett Continuum of Harmful Behaviour" on Universal SharePoint or on www.icmec.org

3. Preventative Strategies

3.1 Oversight

- The Group actively seeks to raise awareness of and prevent all forms of Child-on-Child or Peer-on-Peer abuse by:
- Effective governance oversight etc procedures to ensure that the senior leadership team, the People we support, and Parents/Carers have up to date relevant knowledge.
- Work as part of effective governance, senior leadership team, and all Team Members, People we support and Parents/Carers/professionals to address equality issues, to promote positive values, and to encourage a culture of tolerance and respect amongst all members of the setting.
- Actively challenge sexism, misogyny, misandry, racism, homophobia, biphobia, derogatory language and other discriminatory behaviours which may contribute to harmful or abusive cultures.
- Ensuring that all Child-on-Child or Peer-on-Peer abuse issues are tracked centrally so that any concerning trends are identified.

3.2 Education and Training

3.2.1 This includes training teams on the nature, prevalence, and effect of child or child or Peer-on-Peer abuse, and how to prevent, identify, and respond to it. Including:

- contextual safeguarding,
- the identification and classification of specific behaviours, including digital behaviours,
- the importance of taking seriously all forms of Child-on-Child or Peer-on-Peer abuse (no matter how 'low level' they may appear) and ensuring that no form of Child-on-Child or peer-on- peer abuse is ever dismissed as horseplay or teasing, and
- social media and online safety, including how to encourage People we support to use social media in a positive, responsible, and safe way, and how to enable them to identify and manage abusive behaviour online,
- educating the people, we support about the nature and prevalence of Peer-on-Peer abuse, positive, responsible and safe use of social media, and the unequivocal facts about consent, via PSHE, RSE, 'Chat Withs' and the wider curriculum. People we support are frequently told what to do if they witness or experience such abuse, the effect that it can have on those who experience it and the possible reasons for it, including vulnerability of those who inflict such abuse.

3.2.2 Team Members and People we support are regularly informed about the Group's approach to such issues, including its zero-tolerance policy towards all forms of Child-on-Child or Peer-on-Peer abuse missing.

3.3 Involvement of Parents and Carers

3.3.1 Engaging Parents/Carers/Professionals on these issues by:

- talking with Parents/Carers/Professionals, both in groups and one to one,
- asking Parents/Carers/Professionals what they perceive to be the risks facing the person they support and how they would like to see the setting address those risks,
- involving Parents/Carers/Professionals in the review of settings lesson plans/ care plans, and;
- encouraging Parents/Carers/Professionals to hold the setting to account on this issue, in part because of visibility of this policy.

3.4 Establishing Safe Environments

3.4.1 Support the on-going welfare of the People we support by drawing on multiple resources that prioritise mental health, and where possible provide in-setting counselling and therapy to address underlying mental health needs.

3.4.2 Creating conditions in which the People we support can aspire to, and realise, safe and healthy relationships.

3.4.3 Support individuals to build and maintain safe and positive relationships and help to create a safe environment in which violence and abuse are never acceptable.

3.4.4 All settings will promote a culture of zero tolerance towards abuse, harassment, discrimination, harmful sexual behaviour, sexual violence, sexual harassment and violence. Team Members are expected to challenge inappropriate behaviour, in line with our Therapeutic Approaches policies, at the earliest opportunity

3.4.5 Develop trusting relationships with the People we support and in which Team Members understand, through regular discussion and training, the importance of these relationships in providing the People we support with a sense of belonging, which could otherwise be sought in problematic contexts.

3.4.6 Promote an environment where the People we support feel able to share their concerns openly, in a non-judgmental environment, and have them listened to which:

- proactively identifies positive qualities in the People we support;
- nurtures these qualities;
- teaches and encourages People we support to think about positive hopes for the future; and
- encourages People we support to develop small-scale goals that enable realistic ambitions.

3.4.7 Provide supervised activities to People we support that give them the experience of having their needs met that might otherwise apparently be met in abusive circumstances. These can include experiencing:

- status;
- excitement;
- a degree of risk.

3.4.8 Responding to cases of Child-on-Child or Peer-on-Peer abuse promptly and appropriately.

3.5 Multi-Agency Working

3.5.1 All settings within the Group actively engage with their Local Safeguarding Partnership in relation to Child-on-Child or Peer-on-Peer abuse, and work closely with, for example, social care, OFSTED, CQC, Estyn, CIW, the police, the local Safeguarding Partnership's (or equivalent), and/or other relevant agencies in accordance with the Local Safeguarding Partnership's procedures.

3.5.2 The relationships settings build with these partners are essential to ensuring that the setting can prevent, identify early, and appropriately handle cases of Peer-on-Peer abuse. They help the setting to:

- develop a good awareness and understanding of the different referral pathways that operate in its local area, as well as the preventative and support settings which exist;
- ensure that its People we support are able to access the range of settings and support they need quickly;
- support and help inform the setting 's local community's response to Child-on-Child or Peer-on-Peer abuse;
- increase the setting 's awareness and understanding of any concerning trends and emerging risks in its local area to enable it to take preventative action to minimise the risk of these being experienced by its People we support.

3.5.3 The setting actively refers concerns and allegations of Child-on-Child and Peer-on-Peer abuse where necessary to their relevant Safeguarding partners.

3.5.4 This is particularly important because Child-on-Child or Peer-on-Peer abuse can be a complex issue, and even more so where wider safeguarding concerns exist. It is often not appropriate for one single agency (where the alleged incident cannot appropriately be managed internally by the setting itself) to try to address the issue alone – it requires effective partnership working.

4. Management

4.1 What to do if you have a concern about Child-on-Child or Peer-on-Peer Abuse?

4.1.1 If a Team Member thinks for whatever reason that an individual may be at risk of or experiencing abuse by their peer(s), or that an individual may be at risk of abusing or may be abusing their peer(s), they should discuss their concern with the DSL/P without delay (in accordance with the safeguarding policy) so that a course of action can be agreed.

4.1.2 Where an individual is suffering, or is likely to suffer from harm, it is important that a referral to social care (and, if appropriate, the police) is made immediately.

4.1.3 Anyone can make a referral. Where referrals are not made by the Designated Safeguarding Lead (DSL) or Designated Safeguarding Person (DSP), the DSL/P should be informed as soon as possible that a referral has been made.

4.1.4 If an individual speaks to a Team Member about Child-on-Child or Peer-on-Peer abuse that they have witnessed or are a part of, the Team Member should listen to the individual and use open language that demonstrates understanding rather than judgement.

4.1.5 Concerns must be reported regardless of whether the incident is believed to have occurred within the setting, in the community, online or during travel to and from the setting.

4.2 Risk Assessment

4.2.1 When there has been a report of Child-on-Child or Peer-on-Peer abuse, the designated safeguarding lead (or a deputy) will make an immediate risk and needs' assessment. The risk and needs' assessment should consider:

- The individual who has been alleged to be harmed, especially their protection and support.
- The individual allegedly responsible; and
- all the other People we support (and, if appropriate, Team Members) at the setting, especially any actions that are appropriate to protect them.

4.2.2 Risk assessments will be recorded kept under review.

4.2.3 A Child-on-Child or Peer-on-Peer Safety Plan must be implemented to ensure that any ongoing or potential risks are effectively identified, managed, and mitigated.

4.2.4 The Designated Safeguarding Lead/Person (or a deputy) will ensure they are engaging with the Local Safeguarding Team or equivalent and that appropriate notifications are made to the relevant regulator(s).

4.2.5 The risk assessment must be shared with the police (where requested), local authority, setting leads and Operations Directors.

4.3 Responding to concerns or allegations of sexual abuse

4.3.1 If a person we support alleges that they have been raped, or sexually assaulted, this must be reported in line with the settings Safeguarding procedures. The individual's Parents/Carers/professionals should normally be informed unless there is a risk of greater harm to the individual.

4.3.2 It is essential that all concerns and allegations of Child-on-Child or Peer-on-Peer abuse are handled sensitively, appropriately, and promptly. The way in which they are responded to can have a significant impact on the outcomes for the individual and the setting as a whole.

4.3.3 All reports of Child-on-Child or Peer-on-Peer abuse will be made on a case-by-case basis with the designated safeguarding lead/person or their deputy taking a leading role using their professional judgement and supported by other agencies such as social care or the police as required.

4.4 The Immediate Response to a Report

4.4.1 The setting will take all reports seriously and will reassure the individual that they will be supported and kept safe.

4.4.2 The Team Member must be able to reassure the Person we support that they are being taken seriously and that they will be supported and kept safe. An individual should never be given the impression that they are creating a problem by reporting abuse, sexual violence, or sexual harassment. Nor should an individual ever be made to feel ashamed for making a report. All Team Members will be trained to manage a report.

4.4.3 Listen, ask open questions, and write down as much as possible. Language must be used that is not blaming, they must be non-judgemental and reassure the individual that they have not caused a problem by disclosing.

4.4.4 The Team Member will not promise confidentiality as the concern will need to be shared further; the Team Member will however only share the report with those people who are necessary to progress it.

4.4.5 A written report will be made as soon after the disclosure as possible recording the facts as presented by the individual.

4.4.6 Where the report includes an online element, the setting will follow advice on searching, screening and confiscation. The Team Member will not view or forward images unless unavoidable and only if requested to do so as part of the safeguarding investigation.

4.4.7 The Team Member will report the concern to the DSL/P at the earliest opportunity.

4.5 Following an Incident, We Will Consider

4.5.1 The wishes of the person we support in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment.

4.5.2 The nature of the alleged incident(s), including whether a crime may have been committed and consideration of harmful sexual behaviour.

4.5.3 The ages of those involved.

4.5.4 The developmental stages of the People we support.

4.5.5 Any power imbalance between the People we support. For example, is the individual alleged to be responsible significantly older, more mature, or more confident? Does the individual alleged to have been harmed have a disability or learning difficulty?

4.5.6 If the alleged incident is a one-off or a sustained pattern of abuse.

4.5.7 If there are there ongoing risks to the individual other People we support, or Team Members Team Member; and other.

4.6 Following up Action for People we support who are Educated or Living Together

4.6.1 In some cases, it may be necessary to consider whether it is appropriate for the People we support to continue attending or living in the same setting.

4.6.2 Whilst the setting establishes the facts of the case and starts the process of liaising with social care and the police:

- It will be decided how to appropriately separate those involved.
- We will consider how best to keep the People we support a reasonable distance apart.

4.6.3 These actions are in the best interests of both People we support and should not be perceived to be a judgment on the guilt of the individual alleged to be responsible.

4.7 Response to the Individual Alleged to Have Done Harm

4.7.1 Any allegation is likely to be traumatic for the individual alleged to be responsible. In cases of Peer-on-Peer abuse the individual alleged to be responsible must also be treated as vulnerable and may require specialist support, which should be organised by the DSL/P. This can only be done once approval from police/social worker is given. Team Members must be aware that the individual alleged to be responsible may have suffered or be suffering abuse and/or trauma.

4.7.2 The DSL/P must ensure that the individual's age and understanding is considered, as well as trying to understand the reasons why the individual may have harmed a peer.

4.8 Police Involvement

4.8.1 Where a crime has been committed the DSL/P must immediately contact the police.

4.8.2 Whilst the age of criminal responsibility is ten, if the individual alleged to have caused harm is under ten, the starting principle of reporting to the police remains. The police will take a welfare, rather than a criminal justice, approach.

4.8.3 Where a report has been made to the police, the setting will consult the police and agree what information can be disclosed to Team Members and others, the individual alleged to have caused harm and their Parents/Carers/professionals. They will also discuss the best way to protect the individual alleged to have been harmed and their anonymity.

4.8.4 Where there is a criminal investigation, the setting will work closely with the relevant agencies to support all involved (including potential witnesses). Where required, advice from the police will be sought to help manage the situation sensitively.

4.8.5 Whilst protecting those involved and/or taking any measures against the individual alleged to be responsible, the setting will work closely with the police (and other agencies as required), to ensure any actions the setting take do not jeopardise the police investigation.

4.8.6 If an individual is convicted or receives a caution for a sexual offence, the setting will update its risk assessment and ensure relevant protections are in place for all People we support.

4.8.7 The outcome of the criminal process will determine the actions carried out within the setting. This may lead to an individual moving to an alternative setting.

4.8.8 Where cases are classified as "no further action" (NFA) by the police or Crown Prosecution Service, or where there is a not guilty verdict, the setting will continue to offer support to both individuals for as long as is necessary.

4.9 Information Sharing, Data Protection and Record Keeping

4.9.1 When responding to concern(s) or allegation(s) of Child-on-Child or Peer-on-Peer abuse, the setting will:

- always consider carefully, in consultation with relevant agencies (where they are involved), how to share information about the concern(s) or allegation(s) with the individual(s) affected, their Parents/Carers/Professionals, Team Members, and other People we support
- record the information that is necessary for the setting and other relevant agencies (where they are involved) to respond to the concern(s) or allegation(s) and safeguard everyone involved,
- keep a record of the legal purpose for sharing the information with any third party, including relevant authorities, and ensure that the third party has agreed to handle the information securely and to only use it for the agreed legal purpose, and
- be mindful of and act in accordance with its safeguarding and data protection duties.