



Young People who Sexually Abuse

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Contents

Background	3
Key indicators of quality	6
Young people who sexually abuse	8
Guidance on delivery	9
Guidance on operational management	17
Guidance on strategic management and partnership working	20

Background

What are the *Key Elements of Effective Practice*?

The Youth Justice Board for England and Wales (YJB) has identified effective practice as a key element in developing and improving youth justice services. We are committed to identifying and promoting effective practice across the whole of the youth justice system to ensure that work with young people is as effective as possible, and based on research evidence and promising practice.

The *Key Elements of Effective Practice* (the ‘*what to do*’) describe the features of effective interventions, using the best evidence available. They are intended to be used as the primary tool by youth justice services for evidence-based self-assessment and quality assurance, providing the benchmark for effective practice.

These guidance notes are derived from the evidence presented in the corresponding source document available on the YJB website. The source documents have gathered the latest international evidence in accordance with the YJB’s research standards and identify what is proven to be effective practice, or where robust evidence is not available, what is emerging as promising practice in the field. The *Key Elements of Effective Practice* are summaries condensing the evidence from the source documents into key messages for practice.

The following *Key Elements of Effective Practice* titles and the accompanying source documents are available from the YJB website (www.yjb.gov.uk):

- *Accommodation*
- *Assessment, Planning Interventions and Supervision*
- *Education, Training and Employment*
- *Engaging Young People who Offend*
- *Mental Health*
- *Offending Behaviour Programmes*
- *Parenting*
- *Restorative Justice*
- *Substance Misuse*
- *Young People who Sexually Abuse*

Since the *Key Elements of Effective Practice* were originally published in 2002/03, two new titles have been added to take into account the most recent research evidence and policy or legislative developments in these areas of intervention. The *Key Elements of Effective Practice* will continue to be updated in the future, in line with the YJB’s effective practice strategy, as additional research becomes available.

These updated *Key Elements of Effective Practice* have been produced with the intention of them being complemented by the *Case Management Guidance* for youth offending teams (the ‘*how to*’), and the revised *National Standards for Youth Justice Services* (the ‘*must do*’), due for publication in 2009. Together, the *Key Elements of Effective Practice*, standards and guidance will provide holistic guidance for youth justice services.

Who are the *Key Elements of Effective Practice* for?

The *Key Elements of Effective Practice* are simple manuals that can be used by anyone working in the community and the secure estate with young people who offend. They describe the features of effective youth justice services and interventions, allowing delivery to be shaped by need and local context. They are intended to support consistent practice across youth justice services.

They do not provide specialists such as teachers, health care professionals or police officers in mainstream services with descriptions of how to work, nor do they detail the processes needed to deliver a service.

The *Key Elements of Effective Practice* have been structured to provide guidance to three main audiences:

- those involved in delivery, e.g. youth offending team (YOT) practitioners and prison officers
- those involved in operational and first-line management
- strategic managers in their role as service managers and partnership brokers.

How should the *Key Elements of Effective Practice* be used?

The key indicators of quality have been identified from each of the *Key Elements of Effective Practice* as particular elements to put in place to promote effective practice and the delivery of good quality services. Anyone working in the community and secure estate with young people who offend should note that these indicators are not a comprehensive list of quality issues and they are not an end in themselves. They are designed for use within a wider framework of evaluation of service practice and performance, and they will enable a wider and continuous process of evaluation to take place.

It is important that the *Key Elements of Effective Practice* are not used in isolation. The key messages for practitioners, operational managers, and strategic managers and their partners are derived from the corresponding source document; the *Key Elements of Effective Practice* should therefore be used in conjunction with their source document to ensure full understanding of the key elements of effective practice. This is not to say the *Key Elements of Effective Practice* on their own are not useful for the intended audience and purpose, but rather that the audience will have a better understanding of the evidence behind the guidance summaries if they are read and understood alongside the source documents.

Information is cross-referenced from the *Key Elements of Effective Practice* summaries to the source documents, and relevant page numbers of the corresponding source document are identified in brackets in the *Key Elements of Effective Practice*.

Using the *Key Elements of Effective Practice* in YOTs

Youth justice services are responsible for owning performance improvement and self-assessment and planning. Self-assessment against the *Key Elements of Effective Practice* has previously been a mandatory requirement of YOTs, however, from 2008/09, YOTs will be free to use the revised *Key Elements of Effective Practice* and accompanying self-assessment toolkit in line with their local priorities. The *Key Elements of Effective Practice* are intended to be used as evidence-based self-assessment tools to help identify improvement priorities and actions. The resulting action plan should enable YOT managers to monitor progress in the delivery of the priorities for the YOT.

Using the *Key Elements of Effective Practice* in the secure estate

Managers and practitioners within the secure estate should consider the guidance contained within the *Key Elements of Effective Practice* summaries when developing and reviewing their practice and approaches to working with young people. The key messages will help to inform the development of effective practice and should be helpful in achieving their desired outcomes for young people. Establishments should also consider completing self-assessments against the *Key Elements of Effective Practice* to assist in identifying priority areas for development and improvement.

Key indicators of quality

Assessment

Asset should be used as the primary assessment tool, and it should be fully integrated with local inter-agency procedures that include a common assessment model for young people who sexually abuse.

The assessment of young people who sexually abuse should be a cyclical and ongoing process.

Individual needs

When planning interventions, practitioners should be mindful of the complexity of young people's needs and should base interventions on how these needs are interrelated.

To avoid minimisation or exaggeration of their offence, fully consistent attitudes to all young women who abuse should be promoted by practitioners.

Communication

Inter-agency communication is vital to ensure that interventions are effectively co-ordinated.

Practitioners should establish good professional relationships with the young person and their family to allow specialist interventions to take place.

Service delivery

Practitioners should recognise that young people are still developing, and address sexual knowledge, patterns of abuse, learning needs, care and support in interventions.

Practitioners should recognise that intervention goals will vary for each individual young person and will develop as needs change, and so should be flexible in their approach.

Transition

The issue of transition between custodial establishments and community settings should be addressed at both the assessment stage and at the first sentence planning meeting for young people.

Planning for a young person should anticipate transition to adult services and between custody and the community, and contact should be made with the appropriate services at the appropriate times.

Training

Training for practitioners should be developed to reflect the varying levels of need and types of interventions available.

Appropriate ways of working with young people and families should be an aspect of ongoing professional development for all who work with young people who sexually abuse.

Management

Managers should ensure that staff working with young people who sexually abuse receive regular clinical supervision and support.

Consideration should be given to developing clear responsibilities at management level so that managers have a complete overview of all effective practice issues for young people who sexually abuse.

Service development

Continuing to develop a shared understanding, effective partnerships and strategies for joint working between agencies is a vital aspect of service development.

A tiered approach to the development and delivery of services for young people who sexually abuse should be established to provide a range of levels of intervention that reflect individual need.

Monitoring and evaluation

Service evaluation in relation to effective service delivery is an urgent priority that should be built into service planning.

Service users and their families should have the opportunity to provide feedback in monitoring and evaluation exercises.

Young people who sexually abuse

Sexual abuse by young people is a comparatively recent field of knowledge in which interventions and practice have been exploratory and evolving. Youth justice services and other agencies providing services to this group of young people must do so within the defined legislative parameters.

Sexual abuse is regulated in law by a number of statutes, chiefly the Sexual Offences Act 2003, which protects children and young people by creating age boundaries that affect the seriousness of the offence. The law places a strict interpretation on the responsibility of those who engage in sexual activity, which means that young people over the age of 10 years who abuse are expected to take responsibility for their actions.

The significance of abuse by young people and the resulting interventions can be misinterpreted by seeking a simple 'one-size-fits-all' label. There is no clear mental health diagnosis for young people who sexually abuse, and agencies involved in the resulting interventions, be they in the secure estate or within community settings, must be mindful of the specific developmental factors and individual circumstances of this group of young people.

Guidance on delivery

Assessment

Asset – Core Profile and *Asset – Risk of Serious Harm* (ROSH) should be used as the primary assessment tool for children and young people who sexually abuse. The purpose of assessment is to ensure that accurate decisions have been made in relation to the needs of young people who sexually abuse, and to inform the planning of interventions and supervision to address these needs. The most effective assessments are those which identify the clear risks and needs that become the subject of relevant and effective interventions.

The assessment of young people who sexually abuse should be seen as a cyclical and ongoing process with five key goals (p.10):

- **problem explanation:** understanding the sexual behaviour within the context of the individual young person's overall psychosexual, emotional and social functioning
- **risk formulation:** identifying those features that are relevant to considering the level of risk of harm
- **risk management:** identifying the degree of control, restriction or supervision required to manage assessed levels of risk of harm
- **intervention planning:** identifying areas where change is needed and identifying how this change can be achieved to support the young person to live a non-abusive lifestyle
- **evaluation:** assessing how change will be evaluated and progress measured.

Practitioners should revisit this process as new information is made available and previously unknown offences are brought to light.

Practitioners undertaking assessments for young people who sexually abuse should give particularly careful consideration to the emotional and mental health section of *Asset* to determine if an assessment by a professional service specialising in emotional or mental health is required.

Asset must not be used in isolation and should be fully integrated with local inter-agency procedures that should include a common assessment model for young people who sexually abuse. Having a common assessment model will help to ensure that the maximum valid information is known which, when integrated, will help to shape an informed and graduated inter-agency response. Additionally, there will be a greater likelihood that discrepancies and disagreements are identified and, as far as possible, resolved.

AIM and AIM2

An example of a common assessment model is AIM (Assessment, Intervention, Moving-on), which has now been revised and is referred to as AIM2. This model is used to assess young people who display sexually harmful behaviour. It incorporates key components for an initial assessment, and involves:

- assigning a lead agency to identify co-assessors, consultants and a date for completing the assessment report
- applying the assessment to assist in decisions about the identification of services and where to place the young person
- covering four domains of assessment:
 - sexual behaviour
 - development
 - parents/carer
 - environment.
- applying the assessment to construct an outcome matrix that provides a framework within which to structure decision-making.

The model considers indicators of concern that focus on:

- the individual (e.g. early onset of severe behavioural problems, unresolved trauma, non-compliance with supervision)
- the family (e.g. witnessing domestic violence, experience of abuse or neglect, negative family attitudes to the victim)
- the environment (e.g. local community hostility to the young person, previous exclusion from work or school, lack of structure in daily life).

It also considers strengths that focus on:

- the individual (e.g. ability to reflect and understand consequences of offending behaviour, willingness to engage in treatment)
- familial factors (e.g. parents demonstrating good protective attitudes and behaviours, family having clear and positive boundaries)
- other factors (e.g. living in a supportive environment, an available network offering support and supervision, having a good relationship with school or employer).

In addition to the above, AIM2 also (p.15):

- sources updated research
- has ‘medium’ concern and strengths classifications

- introduces both static and dynamic factors
- uses a clinical judgement framework with a simple scoring system
- is linked to YJB *Asset* and the Department of Health Core Assessment Framework
- is focused on protecting victims.

Assessment in the secure estate

The main goal of assessment in the secure estate should be to strengthen findings from *Asset*, ROSH and the common assessment model (i.e. AIM2), and to guide the first sentence planning meeting. With a shared assessment, multi-disciplinary work can be promoted so that the risks and needs of the young person are monitored during their sentence and reassessed prior to release or transfer to another establishment, residential unit or the adult estate.

Particular assessment needs

Practitioners should be particularly mindful of the specific assessment needs of certain sub-groups. For example, those from minority ethnic communities, young people with a learning disability, those who have been, or are, looked-after children, those with mental health problems and young people who abuse younger children. Where the offence is within the family, the assessment needs will be different (p.18).

Individual needs

Practitioners should acknowledge that, as a group, young people who sexually abuse differ in many ways. For example, they vary according to victim and abuse characteristics, types of abusive behaviour, histories of child maltreatment, sexual knowledge and experience, academic and cognitive functioning and mental health issues.

When planning interventions, practitioners should therefore be mindful of the complexity of young people's needs and should base interventions on an understanding of how several domains (e.g. sexuality, family, education, non-sexual offending, etc.) are interrelated.

Needs of groups identified as sexually abusing

Although the needs of young people who sexually abuse cannot be formulated into a 'one-size-fits-all' approach, certain general observations should be borne in mind by practitioners when planning interventions for this group of young people (p.20):

- these young people may have frequently experienced sexual, physical or emotional abuse themselves
- a significant proportion show poor social competence and high impulsivity

- a significant proportion have educational difficulties or learning disabilities
- they are often coping with disrupted and neglecting family backgrounds.

Young people with learning disabilities

Practitioners should be aware that a significant number of young people who abuse have a learning disability or very poor educational attainment. However, this does not mean that young people with learning disabilities are generally more likely than others to sexually abuse. Assessments and intervention planning for young people with learning disabilities need to take account of social and cognitive functioning and its implications, such as shorter attention spans, experience-based learning and repetition of messages (pp.21–22).

Young people with co-morbid conditions

There is evidence to suggest that a substantial proportion of young people who sexually abuse also have other disorders (or ‘co-morbid’ conditions).

Practitioners should therefore ensure their assessments and intervention plans account for co-morbid conditions among young people who sexually abuse (pp.22–23).

Young women who sexually abuse

Psychiatric co-morbidity, including substance misuse and post-traumatic stress disorder, has been found to be common among young women who sexually abuse. Young women with psychiatric co-morbidity feel very vulnerable; holistic approaches that recognise the full extent of these needs are therefore recommended.

To avoid either minimisation or exaggeration of their offence, practitioners should promote consistent attitudes to all young women who sexually abuse as they would do to young males who sexually abuse (pp.23–24).

Young people from minority ethnic communities

Practitioners should apply cultural awareness and sensitivity to assessment and treatment interventions, and avoid assumptions about the beliefs, needs and practices of particular minority ethnic groups (p.23).

Communication

Communication between agencies

Effective interventions for young people who sexually abuse and their families are likely to be provided by a range of agencies and professionals; the nature of support offered is also likely to vary over time. Communication between agencies is therefore a vital aspect of effectively

co-ordinating interventions and enabling young people to gain the maximum possible benefit from the interventions offered.

Multi-Agency Public Protection Arrangements (MAPPAs)

Multi-Agency Public Protection panels (MAPPPs) have been established to manage offenders in the community. The role of MAPPPs is to share relevant information, to assess the level of risk and recommend suitable action, and to monitor the action plan.

Practitioners will be expected to work together with Crime and Disorder Reduction Partnerships (CDRPs), Local Safeguarding Children Boards (LSCBs) and Criminal Justice Boards to support MAPPAs (pp.25–26).

Communication with the young person and their family

While undertaking assessments, it is important that practitioners establish good professional relationships with the young person and their family. This will require consideration of the young person's individual needs, such as those related to developmental stage, disability or ethnicity. These considerations will be important in assessment meetings and sentence planning, in which the young person and their parents/carer should be encouraged to take part.

Both young people and their parents/carer value being able to talk, being heard and feeling understood. They may also value the opportunity to gain insight about the nature of sexual abuse and how the child protection and criminal justice processes operate. Parents also find it beneficial to communicate with, and learn from, other parents who have been through a similar process. Practitioners should encourage this where appropriate (pp.26–27).

Service delivery

Practitioners should recognise that young people are developing emotionally and physically, and therefore have complex needs that call for multiple intervention components. For young people who sexually abuse, these components should address sexual knowledge, patterns of abuse, learning needs, care and support.

Interventions should be delivered by practitioners who have received specialist training. Practitioners who have not received specialist training should form good links with specialists, be involved in setting goals and targets and linking the outcomes of this back to sentence planning and resettlement.

Intervention goals and targets

Setting intervention goals is important both from the perspective of planning interventions and for evaluating effectiveness. Such intervention goals can be framed as contributions to strengthening protective factors and reducing risk factors. Key goals include:

- **helping young people understand and accept responsibility for their behaviour and develop skills to avoid offending in the future**

- promoting physical, sexual and emotional well-being
- ensuring community safety
- supporting carers to acknowledge their child's behaviour and take responsibility for changing the context of the family.

Within these core intervention goals, further intervention targets should be developed that seek to achieve a balance between addressing protection and welfare issues. Intervention goals will vary for each individual and develop as needs change; practitioners should therefore be flexible in their approach (p.35).

Intervention components

The key elements of intervention programmes will have strong links with intervention goals. Components may include work around:

- emotional competence skills, including management of anger and distress
- general developmental assessment
- changing cognitive distortions about sex and relationships
- pro-social, emotional, cognitive and behaviour skills
- risk assessment
- gaining an understanding of the child's cycles/pathways to sexually harmful behaviours
- sex education
- life-space work (e.g. boundaries, interaction, social skills)
- relapse prevention work
- family work
- consequences of further abuse/behaviour
- the development of empathy (p.35).

Intervention according to type of abusive behaviour

Varied provision or interventions are appropriate for young people who sexually abuse, depending on the type of abusive behaviour they display. For example, interventions for the 'experimenter' cases (i.e. young people who appear to have been 'sexual experimenters' and show few signs of being disturbed) should focus on sex education, self-esteem, social skills and family support. A more long term approach is likely to be needed for cases with more abusive behaviour and will

include a focus on the impact of victimisation on these young people. The cases with severe disturbance will require long term intervention and will often need 24-hour supervision (p.24).

Matching needs to levels of intervention

Needs are multi-dimensional and complex. Young people who sexually abuse often show needs in the areas of sexuality, learning, care and family relationships, as well as co-morbid conditions. There are comparisons in terms of need between young people who sexually abuse and the population of young people who offend as a whole. Service needs that are common to both groups should therefore be clearly identified and appropriate interventions should be identified and delivered by practitioners (p.36).

Interventions for young women who sexually abuse

Work with young females who sexually abuse should recognise patterns of experience that echo those of young men, but should take account of girls' different maturation paths and views about relationships (p.24).

Transition from the community to custody

The issue of transition needs to be addressed at the outset of the assessment and planning process for young people entering new placements and custodial settings, and prior to the end of an order, to help ensure appropriate after-care is in place.

There is a need for interventions that help young people adjust from custodial/residential interventions, return to the community and provide ongoing support. Effective co-ordination of services is as important on release as it is for assessment and treatment, and there is a need to provide ongoing support to parents when young people have completed the intervention or are discharged from treatment. Practitioners should ensure that multi-disciplinary work continues while a young person is in a specialised placement.

Liaison between YOT practitioners and staff in the secure estate or residential treatment facilities should take place on a regular basis to sustain the implementation of agreed plans, and to help make effective transitions back into the community.

Practitioners should be aware of the issues in relation to transition, which should be identified at the assessment stage and reinforced at each review. These are:

- continuing effective involvement and multi-disciplinary work after a placement has been made
- sharing sensitive information at times of transition to make sure that assessment and planning are effective
- co-ordinating information collation in cases where there have been several agencies and organisations involved and many professional interventions have taken place

- disagreements among professionals about levels of risk should be openly discussed and resolved
- agencies assigned responsibility for continuing supervision or services should be given all the relevant information they need to address risks
- an effective after-care plan should be produced in time for it to be implemented
- all statutory review requirements should be adhered to
- treatment outcomes should be adequately monitored
- accurate recording practices should be maintained
- ongoing support to the parents/carer and young people should be provided to the young person after they finish a period of specialised intervention.

Guidance on operational management

Communication

Operational managers should help ensure that pathways for communication between YOTs, secure establishments and other agencies exist. This may include:

- referring child protection and children in need concerns to Local Authority Child Protection teams and contributing to s 47 child protection enquiries and subsequent plans on a case-by-case basis as appropriate
- attending LCSB meetings
- forming links with Child and Adolescent Mental Health Services and Primary Care Trusts
- sharing, through the MAPPA process, information on children and young people who pose a risk to other children and young people and the local community (p.25).

Service delivery

Case management

Managers should ensure case managers are in a position to organise the process whereby assessment of risks and protective factors leads to planned intervention goals, targets, and components with outcomes that are periodically measured. They should (p.36):

- establish an agreed inter-agency framework for referral, investigation, assessment, case planning and review of all cases
- allocate a key-worker, or equivalent lead worker, to each young person receiving a specialist service, to co-ordinate the case management process
- offer outreach work to carers and others working with young people who are awaiting a specialist service.

Training

Interventions for young people who sexually abuse should be delivered by practitioners who have received specialist training.

It is recommended that training for practitioners should be developed to cover the varying levels of need and types of interventions. Training should be designed to give both practitioners and managers the necessary skills to deal with the demands of each tier of provision (see the ‘Guidance on strategic management and partnership working – Service development’ section for more information on the tiered level of services).

Greater access to training should be afforded to professionals and volunteers who come into contact with young people who sexually abuse.

Appropriate ways of working with clients and families from minority ethnic communities should be an aspect of ongoing professional development for all who work with young people who sexually abuse.

Training should therefore (p.40):

- build on basic introductory or awareness-raising courses and look at issues in more depth than a refresher course
- focus on intervention approaches as well as assessment
- provide input on working with sub-groups of service users, such as those from minority ethnic communities or with mental health problems.

Management

Managers should be fully trained and have adequate experience in working with young people who sexually abuse.

The responsibilities of managers include:

- developing effective inter-agency assessments
- working towards effective inter-agency structures
- developing effective services to address different forms of sexually abusive behaviour
- promoting effective communication at all levels
- ensuring that effective training and supervision is delivered
- ensuring that services are effectively monitored and evaluated.

Managers should ensure that staff working with young people who sexually abuse receive regular clinical supervision and support (p.41).

Service development

Developing professional cultural awareness and sensitivity will enable all staff, irrespective of their own background, to provide an effective service to this group of young people.

Guidance on strategic management and partnership working

Assessment

The process of inter-agency identification and assessment of young people who sexually abuse is important to ensure that cases are brought to the attention of the criminal justice system appropriately, and that this group of young people are given the opportunity to access appropriate services. Strategic managers should therefore ensure there are good links with external agencies, in particular LCSBs, to facilitate this process (p.12).

Communication

Strategic managers should ensure there are pathways in place for inter-agency working, and should ensure that YOTs and the secure estate are regularly liaising with each other and external partners in order to sustain the implementation of agreed plans, and to help make effective transitions (p.25).

MAPPAs

Strategic managers should ensure services are able to work together with CDRPs, LSCBs and Criminal Justice Boards to support MAPPAs. In larger areas, routes for initial referral to the MAPPAs should be agreed to ensure that the central co-ordinating function is not overloaded.

YOT and secure estate attendance at meetings of the Strategic Management Boards, LSCBs and MAPPAs is vital if the agencies are to share information and make effective and accountable decisions. Attendees from both YOTs and the secure estate should have the capacity and authority to allocate resources and be responsible for decisions (pp.25–26).

Transition

In due course, a young person with continuing needs will become an adult, and so planning for that young person should anticipate a transition to adult services by contacting, at an appropriate time, those who will be responsible for assessing the needs of the adult (p.39).

Service development

Development of multi-agency working

There is an overlap when addressing the needs of young people who sexually abuse between youth justice, social and welfare services. The co-ordination of services and interventions is, therefore, fundamental to the identification and comprehensive assessment of individual needs and to the delivery of treatment that addresses the range of identified needs.

Looked-after children remain the responsibility of their home local authority. YOT and secure estate practitioners should explore how they can work in partnership with the local authority to appropriately meet the assessment and intervention needs of individual young people.

Continuing to develop a shared understanding, effective partnerships and strategies for joint working between agencies is therefore a vital aspect of service development.

It is recommended that partnership working and co-ordination of services for young people who sexually abuse should include the following (pp.42–43):

- development of regional strategies specifically for the assessment and treatment of young people who sexually abuse
- appointment of a lead agency to co-ordinate partnership working across agencies
- appointment of a lead professional to co-ordinate assessment and treatment interventions to individual young people
- ensuring the availability of assessment services to professionals in youth justice and child protection systems who work with this group
- development of a common assessment tool that facilitates the gathering of information from the range of agencies and social systems relevant to the young person
- agreeing referral routes and funding of places in treatment programmes
- developing a database of services that can be accessed by professionals
- ensuring that young people who sexually abuse gain access to interventions that are best suited to meeting their specific needs and that are delivered by trained practitioners
- addressing drop-out from treatment by matching interventions to address identified individual needs (p.41).

Developing local policy and guidance

Local area policy and guidance documents are useful when they (pp.43–44):

- make specific reference to specialist services available in the locality and include agreed criteria for referral to them

- are supported by more extensive protocols between social services, the voluntary sector, YOTs and secure/residential providers
- supplement national guidance by addressing relevant local issues
- are supported by current research findings
- address the needs of sub-groups, such as young people with learning disabilities and looked-after young people who sexually abuse
- offer guidance regarding the principles underpinning placement practice
- provide an indication of the availability of placements in the locality
- include the views of children, young people and parents regarding service provision.

Tiered framework of provision

There is increasing recognition of the case for applying a tiered approach to the development and delivery of services for young people who sexually abuse. There is already an established acceptance of this framework for young people with mental health needs, for example. With reference to service development for young people who sexually abuse, this is described in terms of:

- **primary prevention:** reducing the incidence of a disorder/behaviour occurring in the first place
- **secondary prevention:** case identification and provision of standard treatment for an established disorder/behaviour
- **tertiary prevention:** activities aimed at reducing the recurrence of a disorder/behaviour and any complications arising from it.

This structure supports the location of services into four tiers. With reference to service delivery, this approach provides a structure for allocating the level of intervention to the level of need, from prevention to treatment and after-care.

In relation to service development, a tiered approach can assist in mapping provision at different levels of intervention, identifying gaps, informing priorities and commissioning strategies.

The four-tier approach is well-established in the field of Child and Adolescent Mental Health Services and some substance misuse services. In relation to young people who sexually abuse, it is described as (pp.45–46):

- **Tier 1:** the provision of education and support regarding ‘normal’ sexual behaviour in children and adolescents
- **Tier 2:** the provision of advice to parents and schools regarding sexually abusive behaviour and dealing with low-risk concerns, without criminalising the behaviour
- **Tier 3:** the provision of interventions through specialist community-based projects if the sexually abusive behaviour persists

- **Tier 4:** the provision of intensive support for those assessed as being too high risk for community-based intervention or whose behaviour indicates a need to protect the public.

Monitoring and evaluation

Service evaluation in relation to effective service delivery is an urgent priority that should be built into service planning for both YOTs and secure establishments.

If services are provided by external specialist providers, YOTs and secure establishments should ensure they are also monitored and evaluated.

Areas suggested for monitoring and evaluation in relation to individual young people include (p.48):

- **changes in non-offence related conduct**
- **developmental level and functioning**
- **persistence and pattern of sexually-abusive behaviour**
- **strengths, support and resilience factors, involvement in networks**
- **relapse and self-regulation, support efficacy and inter-dependence**
- **general community access and quality of life.**

Service users and their families should be encouraged to provide feedback in monitoring and evaluation exercises.

In evaluating interventions, youth justice services should adhere to the research standards jointly produced by the YJB and the National Offender Management Service's Research, Development and Statistics directorate.

The full report on which this summary is based
is available on the Youth Justice Board website.

Further copies of this summary can be obtained from:

Telephone 0870 120 7400

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