

Section A		
Institution: Durham University		
Unit of Assessment: 21, Sociology		
Title of case study: Children and young people with HSB: improving policy and professional practices		
Period when the underpinning research was undertaken: Between January 2000 and November 2020		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s): 1. Simon Hackett 2. Sarah Phillips 3. Josie Phillips 4. Evgenia Stepanova	Role(s) (e.g. job title): 1. Professor of Child Abuse and Neglect 2. Research Associate 3. Research Associate; Assistant Professor 4. Research Associate	Period(s) employed by submitting HEI: 1. 1999-2005; 2006-present 2. 2003-2008 3. 2008-2013; 2014-present 4. 2015-2016
Period when the claimed impact occurred: Between August 2013 and July 2020		
Is this case study continued from a case study submitted in 2014? No		
Section B		
1. Summary of the impact		
<p>A ground-breaking programme of research into children and young people with harmful sexual behaviour (HSB) has transformed policy and practice in the UK and shaped international responses to this issue. Through the generation and translation of research evidence and insights into a range of unique policy tools and practice-facing resources, the research has: (1) underpinned the development of the first ever national-level public health guidelines on the topic of HSB, published by the National Institute for Health and Care Excellence (NICE); (2) co-produced an innovative operational framework with the National Society for the Prevention of Cruelty to Children (NSPCC) on this issue, leading to more consistent inter-agency structures and policy and practice responses across child protection and health agencies in the UK and beyond; and (3) led to the establishment of a screening tool and assessment framework that have been adopted as recommended models throughout the UK and internationally by a wide range of professionals working with this issue. Through the extensive uptake of core concepts and evidence, this work has led to a paradigm shift in professional responses towards this group of children, as well as significant developments in policy and service delivery frameworks throughout the UK, Europe and Australia.</p>		
2. Underpinning research		
<p>Sexual abuse affects significant numbers of children globally. Although the dominant image of those who commit acts of sexual violence is of adult men, indicators show that up to half of all sexual abuse is perpetrated by children under the age of 18 years (Radford et al., 2011). Durham University's (DU) Centre for Research into Violence and Abuse has undertaken a long-term programme of research, led by Simon Hackett, into the issue of children with HSB [R1, R6]. The research identified significant gaps in policy and services for this group of children and has provided evidence about the needs of children and families affected [R2, R3, R6]. The research developed across three phases (outlined below) has comprised one of the most sustained programmes of research undertaken to date on this topic, contributing significantly to the international evidence base upon which the impact case study is based.</p> <p>The initial phase of research (to 2006) produced the first comprehensive study into the policy and practice landscape with regard to sexually abusive behaviour in childhood across the UK and the Republic of Ireland and set the benchmark for policy makers and practitioners to understand the field. In particular, the research [R1] highlighted the inadequacy of official guidance and policy responses to the issue and revealed worrying gaps in service and inconsistencies in how young people with HSB were managed across localities and regions. Of specific concern was the variability of assessment practices. Many areas lacked assessment services and the absence of a</p>		

standardised model led to unassessed and unmanaged situations of significant risk to children [R1]. Having highlighted gaps in policy and practice, this research provided evidence on the development of principles and best practice approaches, emphasising the need for a shift away from 'abuse specific' approaches to developmentally sensitive and holistic models of practice. Given the absence of a national strategy on this issue, the research provided the basis and impetus for a number of key drivers of impact as discussed in Section 4 below, with Hackett engaging systematically and deliberately with strategic partners to address the gaps in policy and practice identified.

ESRC funded research (2010-2014) complemented the first phase of Hackett's research's focus on policy and practice responses through incorporating enhanced understandings of the experiences and needs of children and young people with HSB, the experiences of their families, and the effectiveness of interventions offered to families. The study comprised an innovative long-term outcome study of children with HSB, carried out between 10 and 20 years after the end of professional interventions in childhood, which identified risk and protective factors associated with developmental and lifecourse outcomes [R2]. The study provided the first international empirical data on desistance in this group into adulthood, with findings highlighting the importance of long-term professional support, stable partner relationships, educational success and employment as factors most positively influencing the lifecourse of this group. This work included the largest published British demographic study of the individual, family and abuse characteristics of 700 young sexual abusers which found particularly high rates of sexual and non-sexual victimisation in the backgrounds of the children and young people referred [R2 and R3], as well showing the disrupted nature of young people's personal histories of trauma and abuse [R6]. The research outputs, therefore, underscored the need for a shift in the field towards more trauma-focused and lifecourse models of intervention.

Hackett's (2014) book [R4] drew together this empirical work to provide a concise overview of the evidence base designed specifically for those working in the field. Distributed widely by Research In Practice (a leading provider of training and resources in the sector that bridges academic and practitioner knowledge) to 1625 teams and member organisations across the UK, the book provided the basis for the development of a further research partnership (in 2016) between Durham University, Research in Practice and NSPCC to use the key elements of the book to develop a structured operational framework to guide and support a step-change in inter-agency practice nationally and, increasingly, internationally. At the same time, Hackett was commissioned by NICE to produce two systematic reviews of the qualitative and quantitative evidence on assessment and interventions for children presenting with HSB [R5], and alongside expert testimony, these then underpinned the development of NICE guidelines on this topic.

3. References to the research

Hackett's research has been published in the leading journals in the field and the outputs below have been cited a total of 198 times.

- R1: Masson, H. & Hackett, S. (2003) A decade on from the NCH report (1992): Adolescent sexual aggression policy, practice and service delivery across the UK and Republic of Ireland. *Journal of Sexual Aggression* 9(2): 109-124. DOI: [10.1080/13552600310001632084](https://doi.org/10.1080/13552600310001632084)
- R2: Hackett, S., Masson, H., Balfe, M. and Phillips, J. (2013) Individual, family and abuse characteristics of 700 British child and adolescent sexual abusers. *Child Abuse Review* 22(4): 232-245. DOI: [10.1002/car.2246](https://doi.org/10.1002/car.2246)
- R3: Smith, C., Allardyce, S., Hackett, S., Bradbury-Jones, C., Lazenbatt, A. & Taylor, J. (2014) Practice and policy in the UK with children and young people who display HSB: an analysis and critical review. *Journal of Sexual Aggression* 20(3): 267-280. DOI: [10.1080/13552600.2014.927010](https://doi.org/10.1080/13552600.2014.927010)
- R4: Hackett, S. (2014) *Children and Young People with HSB*. London, Research In Practice
- R5: Campbell, F., Hackett, S. & Booth, A. (2018) Young people who display harmful sexual behaviors and their families. A qualitative systematic review of their experiences of professional interventions. *Trauma Violence and Abuse* 21(3): 456-469. DOI: [10.1177/1524838018770414](https://doi.org/10.1177/1524838018770414)
- R6: Balfe, M., Hackett, S., Masson, H. and Phillips, J. (2019) The disrupted sociologies of young people with HSB: a qualitative analysis of 117 cases. *Journal of Sexual Aggression*, 25(2): 177-192. DOI: [10.1080/13552600.2019.1589003](https://doi.org/10.1080/13552600.2019.1589003)

4. Details of the impact

Hackett's body of research on children and young people with HSB has impacted on policy, practice and services from 2013 onwards (to present) and enhanced awareness in three main areas. This has been achieved as a result of the research:

1) Leading to the UK's first public health guidance on HSB in childhood; 2) Producing evidence-based tools and products that have enhanced child protection professionals' screening and assessment practices in the UK and internationally; and 3) Strengthening the integration of inter-agency practices through the provision of an operational framework adopted widely by child protection agencies across the UK and NHS England to audit and improve services.

Improved public policy and official guidance into HSB

NICE (2016) published the UK's first national public health guidelines on HSB in childhood and described these as being 'based on the best available evidence'. Hackett's (2016) definition of HSB has been foundational to these guidelines [E1a], which are further underpinned by two funded systematic reviews [E1b, E1c] undertaken for NICE by Hackett and Campbell. These reviews represented the first appraisal of the quality of existing quantitative and qualitative evidence on HSB, leading to challenges to orthodox thinking in the field. Hackett gave evidence [E1d, E1e] to the NICE Public Health Advisory Committee on the nature and epidemiology of HSB in childhood drawing on research findings on the long-term outcomes for this group of children. The NICE guidelines have had significant impact in the UK, helping to reframe and move practice in health and social care settings towards assessment and early intervention approaches for both children with problematic sexual behaviours and adolescents who have sexually offended. The impact Hackett had over NICE has, in turn, had broader influence in informing policy development in the UK with the NSPCC [E2b] and internationally where, for example, Dale Tolliday, Advisor Sexual and Violent Behaviour, New South Wales Health (Australia), [E3a] describes the systematic reviews [E1b, E1c] as vital for the Australian Royal Commission into Institutional Child Sexual Abuse's understanding of the best international evidence-base. Hackett's research was cited 140 times by this Commission. Hackett has also given expert testimony on HSB (in 2018 and 2019) to the ongoing Independent Inquiry into Child Sexual Abuse (IICSA) in England and Wales and to the Council of Europe's high-level conference on the Strategy for the Rights of the Child (2016-2021).

DU research is now used as the key reference point across the major UK national organisations and stakeholders working in this field (all of whom shape and influence grassroots practice in, for example youth justice, youth work and social work) including NSPCC [E2a], Barnardo's [E4a] and the Home Office. For example, the Home Office funded Centre of Expertise on Child Sexual Abuse (2018) [E4b] cites Hackett's publications 29 times and an NSPCC [E2b] briefing does so 10 times. Hackett's research (cited 8 times) is built into the 2018 '*Toolkit for professionals working with children and young people presenting with HSB*' published jointly by the Children's Society, Victim Support and the National Police Chief's Council. This research now underpins most existing local authority guidance on this issue (e.g. policies of the safeguarding partnerships in Yorkshire, Wiltshire, Calderdale, Merton, Birmingham, Devon, Brighton) [E2a and E5], ensuring a consistent approach to young people displaying HSB. This step change in consistency and practical understanding materially addresses the policy gaps identified in R1.

Evidence based tools that have enhanced assessment practices

R1 identified a postcode lottery in relation to the availability of services and significant inconsistencies in assessment approaches which led to concern about fairness, justice and effective risk management of cases across different geographical areas and sectors. DU research has therefore produced a number of evidence-based specific resources in order to enhance professional responses and improve consistency of approach. Hackett's 2010 *Continuum of Sexual Behaviour* model and his subsequent 2014 research review [R4] were written to support professionals to differentiate between normal, problematic and harmful sexual behaviours at different stages of children's and young people's development. The continuum model has been widely adopted as a core theoretical model in the field throughout the UK, Europe and internationally. For example, the Durham research [R2] is embedded into '*Part five: Child on Child Sexual Violence and Sexual Harassment*' of the Department for Education's statutory guidance (September 2020) *Keeping children safe in education*, contributing to a more consistent approach

and reframing of attitudes and support towards young people [E6]. The NICE guidelines and Australian Royal Commission also recommended the continuum model for use as a screening tool to support professionals in determining responses to children. Tolliday [E3] describes the relationship between the Australian Royal Commission, the uptake of Hackett's continuum model and the NICE systematic reviews as a "brilliant alignment" that allowed Australian researchers to advocate for a common approach across different cultural contexts. This has led directly, according to Tolliday, to recommendation 10.3 in the Australian Royal Commission final report for proportionate and supportive interventions for all children affected by HSB, leading to a complete overhaul and restructuring of services across Australia [E3].

For children and young people who require a professional response as a result of their sexual behaviour, an in-depth holistic assessment is recognised as a key element. The AIM project provides sector-leading training in the field of HSB, and has developed an original suite of assessment tools rooted in DU research. R4 provided the underpinning evidence-base for the development of the latest (2019) version of an assessment tool (AIM3) relating to young people with HSB. Developed by Hackett (with Leonard) AIM3 [E7a] provides a new approach to assessment and a comprehensive tool and manual that is one of the most used globally, in the field [E7b]. AIM3 represents more than simply 'AIM2 plus'. Commenting in the foreword to the new assessment tool, Pat Branigan describes it as a "powerful and intuitive way to develop bespoke safety plans and targeted interventions...this clear link between assessment, analysis and intervention is a huge and welcome step forward...this excellent tool will play a key role in ushering in the holistic, integrated and more timely HSB risk assessment response that is so much needed" (E7a, page 3). The Director of AIM, states [E7b], "the people we're training,...they love the model, they love its simplicity...that it's holistic and...that they are taking into account different aspects of the young person, so therefore, Simon's work is having a massive impact on practice." The Director of AIM, further describes how the implementation of the new AIM3 assessment tool across the UK, New Zealand, Australia, Norway, USA, Canada and Spain is a step change in international understandings of assessment on HSB, providing a more dynamic, strengths-based and developmentally-sensitive model of assessment that sees the child and their behaviour in context. [E7c]. This widespread use of AIM3 across all parts of the UK and beyond has, in large part, reversed the inconsistencies in assessment practices and approaches first highlighted in R1.

Strengthening of interagency structures and practices

DU [R1 and R3] identified significant problems in the co-ordination between agencies at national and local levels with resultant inconsistencies and weaknesses in interagency responses to HSB. In the absence of a national government strategy on this topic, Hackett worked in partnership with NSPCC to develop an evidence-based national operational framework to act as a platform for changing interagency practice and for supporting local areas to improve their services [E2a]. The framework and audit tool was piloted in 2016 across 8 local areas and was extended in 2017 to a further 10 local areas. The framework is now used by agencies throughout the UK including all five health trusts in Northern Ireland (backed by a judicial review which recommended its use), all 30 child protection committees in Scotland, all 22 North Wales local authority areas and approximately 50 local child protection partnership areas throughout England [E2a]. The framework [E2c], first authored by Hackett, is substantially underpinned by R4, citing DU research 34 times. The freely accessible resource provides a multi-agency continuum of responses, tools, practical examples, key principles and an audit checklist that draw on the latest evidence to support practice and decision making in the field. Central to the model is the repeated use of the audit tool so that each local area can measure impact and progress over time. The first edition of the framework was published in 2016 with a second, updated edition published in 2019 as a collaborative project between DU, NSPCC, NHS England, and Research in Practice. Hackett has presented on the framework at key international conferences in the UK, Australia, USA and at the Council of Europe. In 2018, the framework was shortlisted for a *Children and Young People Now* award in recognition of its impact on partnership working across the sector.

More generally, interest in the (2019) second edition of the framework shows an exponential spread of the resource, totalling 3,226 agency downloads from 11 Feb 2019 to 11 Nov 2020 and audit launch events undertaken in over 50 areas [E2a]. As a set of conceptual and practical tools, the framework has now saturated the UK child protection landscape with broad and profound impact

upon local area systems and practices. For example, in testimony for NSPCC, Sarah O'Brien, Strategic Director for St Helen's Council comments [E5]: "I would absolutely say to any other local authority area that the framework...has been a really, really powerful tool for St Helens. It was a framework that we could galvanise all the partners on and it wasn't just that the framework and filling in the audit, all the supporting materials that came with it and some of the videos....has been really, really useful in St Helens". The impact of the framework has been widespread. It has, for example, been central to Nottinghamshire Council's response to its historical failure to protect children in care from sexual abuse, as investigated by IICSA, through the commissioning of an independent audit of its service by NSPCC using the framework [E2a]. The framework has been recommended as a model of best practice for Australia by the Australian Royal Commission and Hackett has worked with the state government in New South Wales to support their own development of a version of the framework as a central plank in their response to the Australian Royal Commission recommendations [E3].

Finally, the framework has considerably enhanced both the scope and scale of NSPCC's work on HSB. In 2019, NHS England officially adopted the framework and Hackett worked with NSPCC to produce additional guidance and resources for NHS staff which integrate his own continuum model with the well-known Brook traffic light tool. These NHS resources have been disseminated widely in the health sector, with 18,701 downloads between 19 February 2019 and 30 September 2019. Pat Branigan, the NSPCC's HSB Lead [E2a] explains how transformative the framework has been for the NSPCC itself, as a model of how the organisation can contribute to systemic change across other agencies. He says that the framework has been "A game changer. If you have a local area talking and using the same language, all of a sudden they are recognising and responding in the same way. It just makes sense.... So, it's a cultural change mechanism as well. And it's certainly helped us as an organisation have a much more consistent and coherent response." He concludes that "the framework and the success of it has given the organisation confidence to be more upfront and open about how we work with HSB" [E2a].

5. Sources to corroborate the impact

E1 National Institute for Health and Care Excellent (NICE) use of Hackett's research to inform the first national public health guidelines on HSB in childhood:

- a) NICE Guideline 55 "*HSB among children and young people*", 20 September 2016.
- b) Harmful sexual behaviour evidence review 1
- c) Harmful sexual behaviour evidence review 2
- d) Expert testimony one (informs NICE guideline development), '*Definitions, epidemiology and natural history of HSB*'
- e) Expert testimony two (informs NICE guideline development) '*An Overview of policies and procedures*'

E2 NSPCC collaboration with Hackett to enhance awareness, policy, practice and services for children and young people with HSB:

- a) Testimonial from Pat Branigan, Theme Lead Child Sexual Abuse at NSPCC
- b) NSPCC (2017) *Research Briefing: Harmful sexual behaviour*, NSPCC Research Briefing
- c) NSPCC (2019) Harmful sexual behaviour framework, NSPCC

E3 Testimony from interview with Dale Tolliday, Advisor Sexual and Violent Behaviour, New South Wales Health (Australia) and member of Australian Royal Commission, 19 May 2020.

E4 Barnardo's and Home Office integration and implementation of Hackett's research:

- a) Barnardo's *Harmful Sexual Behaviours Identification and Responses*
- b) Centre of Expertise on Child Sexual Abuse (2018) *Key messages from research on children and young people who display harmful sexual behaviour*

E5 Transcript of video testimony for NSPCC by Professor O'Brien, Strategic Director of People's Services and CCG Clinical Accountable Officer at St Helens Council, 5 February 2019

E6 Department for Education (2020) *Keeping children safe in education*.

E7 Aim3 Assessment Model (2019) training materials and testimony from The AIM Project.

- a) Aim3 Assessment Model (2019) Foreword by Pat Branigan.
- b) Phone interview with Carol Carson, Manager at AIM.
- c) Phone interview with Marcella Leonard, Co-Author AIM3.