

Appendix

Child Protection Policy – Additional Information

This document will provide additional information about:

1. Radicalisation, Extremism and Terrorism
2. Female Genital Mutilation
3. Forced Marriage
4. Child Sexual Exploitation
5. Private Fostering

This is to complement the Child Protection Policy and support the information in the last Annual Safeguarding Training.

In general, we can safeguard the children who are at risk of harm by ...

1. educating children about their rights and working to shift attitudes related to the topic area
2. listening to children and their families
3. understanding our professional duties, both lawfully and professionally
4. knowing the risks and those at risk
5. reviewing the vulnerability register frequently and evaluating the impact of support
6. managing confidential information within the staff team
7. working with professional agencies and share information appropriately within the Pan Cheshire Guidelines
8. escalate our concerns if we have them
9. forensic monitoring of attendance, performance and eSafety systems
10. fostering good relationships with children and their families
11. providing high levels support (and specialist where necessary) for the children and families who need it
12. keep simple and timely records

Radicalisation, Extremism and Terrorism

Definitions

The UK Government defines **extremism** as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. Extremism also includes calls for death of members of the armed forces. (Revised Prevent Duty Guidance for England and Wales (originally issued on 12th March 2015 and revised on 16th July 2015, paragraph 7)

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. (Revised Prevent Duty Guidance for England and Wales, issued on 12th March 2015 and revised on 16th July 2015, definition)

Terrorism is defined as an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes with or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing political, religious or ideological cause (Section 1 of the Terrorism Act 2000).

Vulnerabilities to Radicalisation, Extremism and Terrorism

1. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.
2. Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.
3. Indicators of vulnerability include:
 - Identity Crisis – the student / pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
 - Personal Crisis – the student / pupil may be experiencing family tensions;
 - A sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;

- Personal Circumstances – migration; local community tensions; and events affecting the student / pupil's country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
- Unmet Aspirations – the student / pupil may have perceptions of injustice - a feeling of failure; rejection of civic life;
- Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
- Special Educational Need – students / pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

Reporting Radicalisation, Extremism and Terrorism

1. Follow the BCHS protocols for reporting a concern or a disclosure from a child
2. Pass this to the Designated Safeguarding Lead (DSL)
3. The DSL will contact the Education Safeguarding Team contact on 01925 442928 and consider the advice
4. The DSL may make immediate contact with the Police via [Andrew McIntyre prevent@cheshire.pnn.police.uk](mailto:Andrew.McIntyre.prevent@cheshire.pnn.police.uk)
5. Written referral to the Prevent Team may follow
6. A referral to Children's Social Care may be considered by the DSL
7. Mentoring, support and counselling may be offered following advice

**If any member of staff thinks that a child is at risk of immediate, significant harm, they can call the Police or Social Care (01925 443400)*

Female Genital Mutilation

<http://safeguardingchildren.co.uk/admin/uploads/one-minute-guide/fgm-one-minute-guide.pdf>

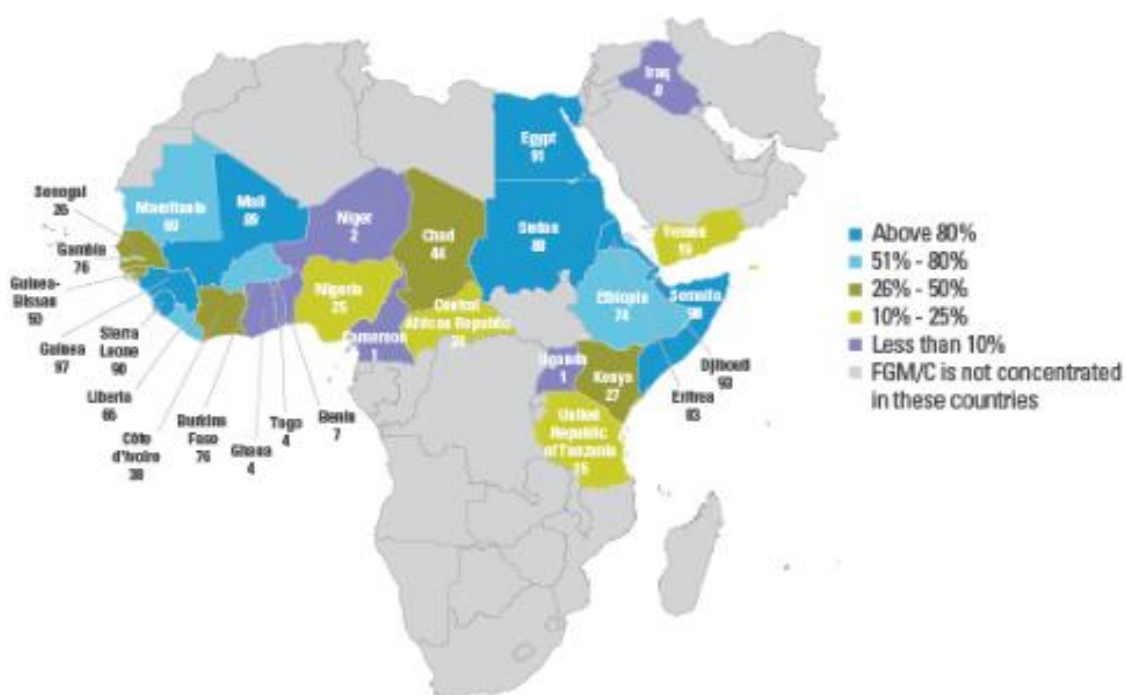
Definition

Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. ... **FGM** is recognized internationally as a violation of the human rights of girls and women.

WHO

Vulnerabilities to Female Genital Mutilation

The first and a significant factor is that a girl comes from a community that is known to practise FGM:



FGM has existed for centuries in all parts of the world. In Europe and the United States Clitoridectomies were performed from as early as the 19thC up until 1960s. However, the majority of FGM practicing communities are found on the African continent. Over 36 African countries have FGM practicing communities, while the procedure is also prevalent in around 11 South/South East Asian and 12 Middle Eastern countries. Indigenous communities in Latin America have also been found to practice FGM, while the prevalence rates in Europe, Australasia and North America are predominantly linked to immigrant communities who come from FGM practicing countries and cultures

Risk Indicators:

- The family comes from a community that is known to practice FGM;
- Any female child born to a woman who has been subjected to FGM must be considered to be at risk, as must other female children in the extended family;
- Any female who has a relative who has already undergone FGM must be considered to be at risk;
- The socio-economic position of the family and the level of integration within UK society can increase risk;
- Parents state that they or a relative will take the child out of the country for a prolonged period;
- Parents have poor access to information about FGM and do not know about harmful impact;
- Girl has attended travel clinic for vaccinations;
- Family not engaging with professionals i.e.: health or school;
- A child may talk about a long holiday (usually over the school summer holiday) to her country of origin or another country where the practice is prevalent;
- A child may confide to a professional that she is to have a 'special procedure' or to attend a special occasion;
- A professional hears reference to FGM in conversation, for example a child may tell other children about it.

Signs that FGM has taken place:

- Prolonged absence from school with noticeable behaviour changes on the girl's return;
- Longer/frequent visits to the toilet particularly after a holiday abroad, or at any time;
- Some girls may find it difficult to sit still and appear uncomfortable or may complain of pain between their legs;

- Some girls may speak about 'something somebody did to them, that they are not allowed to talk about';
- A professional overhears a conversation amongst children about a 'special procedure' that took place when on holiday;
- Young girls refusing to participate in P.E regularly without a medical note;
- Recurrent Urinary Tract Infections (UTI) or complaints of abdominal pain

Reporting Female Genital Mutilation

The reporting duty for FGM is personal and mandatory which means that this responsibility lies with the person that the disclosure or discovery is made to. This means that the person should record all factual information in line with school protocols and then call 101. The Safeguarding Team will support any person who needs to do this and suggest this process:

1. Follow the BCHS protocols for reporting a concern or a disclosure from a child
2. Pass this to the Designated Safeguarding Lead (DSL)
3. The DSL will contact the Education Safeguarding Team contact consider their advice
4. The member of staff with the support of the DSL will make immediate contact with the Police
5. A referral to Children's Social Care may be completed by the DSL with the information from the member of staff
6. Mentoring, support and counselling may be offered to the member of staff and child

**If any member of staff thinks that a child is at risk of immediate, significant harm, they can call the Police or Social Care (01925 443400)*

Forced Marriage

Definition

A Forced Marriage (FM) is a marriage conducted without the valid consent of one or both parties and where duress is a factor. FM is now a specific offence under s121 of the Anti-Social Behaviour, Crime and Policing Act 2014

The Government makes a 'clear distinction' between forced marriage and arranged marriage based on the issue of choice. In arranged marriages the families of both spouses take a leading role in choosing the marriage partner, but the choice of whether or not to accept the arrangement remains with the prospective spouses. In forced marriage, there is no choice – one or both spouses do not consent to the marriage or their consent is extracted under duress. This is predominantly a female issue but males are affected.

Forced marriage in the UK often takes three forms:

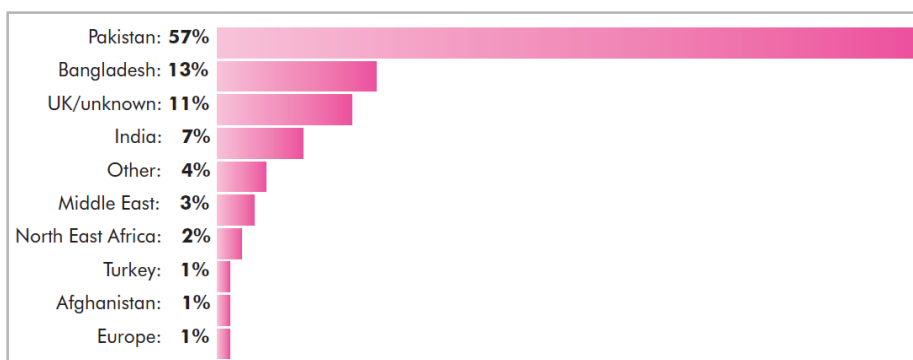
1. an individual who fears they may be forced to marry in the UK or overseas;
2. an individual who has already been forced to marry in the UK or overseas;
3. and a spouse who has come to the UK as a result of a forced marriage.

Motives for Forced Marriage

- Controlling unwanted behaviour i.e. drinking alcohol and behaving in a 'westernised manner'
- Preventing 'unsuitable relationships'
- Attempting to strengthen family links
- Achieving financial gain i.e. through bride price
- Protecting family honour or 'izzat'

Vulnerability Indicators

- From a community where this is prevalent. Reporting is inconsistent but based on reports...



<http://www.refuge.org.uk/files/1001-Forced-Marriage-Middle-East-North-East-Africa.pdf>

- Family or history
- Absence from school and indication from a family that their child will leave education
- Travelling abroad and not knowing why

- Child Missing from Education
- Missing or removed travel documents

Emerging Reporting Factors from a Child:

- Physical abuse
- Threats to kill
- Emotional abuse
- Threats to send back to home country
- False imprisonment
- Monitoring of movements
- Financial abuse: interference with education and access to money

Reporting Forced Marriage

1. Follow the BCHS protocols for reporting a concern or a disclosure from a child
2. Pass this to the Designated Safeguarding Lead (DSL)
3. The DSL will contact the Education Safeguarding Team contact consider their advice
4. The member of staff or the DSL will make contact with the Police if there is a suspicion of a crime
5. A referral to Children's Social Care may be completed by the DSL with the information from the member of staff
6. Mentoring, support and counselling may be offered to the member of staff and child

**If any member of staff thinks that a child is at risk of immediate, significant harm, they can call the Police or Social Care (01925 443400)*

Child Sexual Exploitation

Definition

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

CSE Signs of Risk and Vulnerabilities

- Living in a chaotic or dysfunctional household (including parental substance use, domestic violence, parental mental health issues, and parental criminality)
- History of abuse (including familial child sexual abuse, risk of forced marriage, risk of honour based violence, physical and emotional abuse and neglect)
- Recent bereavement or loss
- Gang association either through relatives, peers or intimate relationships (in cases of gang-associated CSE only)
- Attending school with young people who are sexually exploited
- Learning disabilities
- Unsure about their sexual orientation or unable to disclose sexual orientation to their families
- Friends with young people who are sexually exploited
- Homelessness
- Lacking friends from the same age group
- Living in a gang neighbourhood
- Living in residential care
- Living in hostel, bed and breakfast accommodation or a foyer
- Low self-esteem or self-confidence
- Young carers

Signs and Behaviours of Children of who are Exploited:

- Missing from home or care
- Physical injuries
- Drug or alcohol misuse
- Offending
- Repeat sexually-transmitted infections, pregnancy and terminations
- Absence from school
- Change in physical appearance
- Evidence of sexual bullying and/or vulnerability through the internet and/or social networking site
- Estranged from their family
- Receipt of gifts from unknown sources

- Recruiting others into exploitative situations
- Poor mental health
- Self-harm
- Thoughts of or attempts at suicide

Evidence shows that any child displaying several vulnerabilities from the above lists should be considered to be at high risk of sexual exploitation. Professionals should immediately start an investigation to determine the risk, while taking preventative and protective action as required. However, it is important to note that children without pre-existing vulnerabilities can still be sexually exploited. Therefore, any child showing risk indicators in the second list, but none of the vulnerabilities in the first, should also be considered as a potential victim, with appropriate assessment and action put in place as required.

Reporting Child Sexual Exploitation

1. Follow the BCHS protocols for reporting a concern or a disclosure from a child
2. Pass this to the Designated Safeguarding Lead (DSL)
3. The DSL will contact the Education Safeguarding Team contact consider their advice
4. The DSL may consider contacting the Police if there is a report of a crime
5. The DSL will follow the Pan Cheshire Guidelines and consider completing a CSE Screening tool and referral to CSOG.
6. A referral to Children's Social Care may be completed by the DSL with the information from the member of staff
7. Specialist mentoring, support and counselling may be offered to the member of staff and child

**If any member of staff thinks that a child is at risk of immediate, significant harm, they can call the Police or Social Care (01925 443400)*

Private Fostering

Definition

When a child under the age of 16 (under 18 if disabled) is cared for by someone who is not their parent or a 'close relative'. This is a **private arrangement** made between a parent and a carer, for 28 days or more.

Examples of Private Fostering Arrangements

1. Where arrangements are made due to parental illness or distress or when parents' work or study involves long or anti-social hours;
2. Children sent from abroad to stay with another family, usually to improve their educational opportunities;
3. Asylum seeking and refugee children;
4. Teenagers who stay with friends (or other non-relatives) because they have fallen out with their parents and who may not be in touch with agencies such as education services;
5. Children staying with families while attending a school away from their home area; and
6. Children from overseas whose parents do not reside in this country.

Reporting Private Fostering Arrangements

1. Follow the BCHS protocols for reporting a concern or a disclosure from a child
2. Pass this to the Designated Safeguarding Lead (DSL)
3. The DSL will contact the Education Safeguarding Team contact consider their advice
4. A referral to Children's Social Care may be completed by the DSL with the information from the member of staff
5. Specialist mentoring, support and counselling may be offered to the member of staff and child

**If any member of staff thinks that a child is at risk of immediate, significant harm, they can call the Police or Social Care (01925 443400)*