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The perceptions of Australian workers about caring for sexually exploited children in residential care

Authors

Gemma McKibbin and Cathy Humphreys

Department of Social Work, University of Melbourne, Parkville, Victoria, Australia

Corresponding author

Gemma McKibbin, Research Fellow, Department of Social Work, University of Melbourne, Level 6, Alan Gilbert Building, 161 Barry Street (Corner of Grattan Street), Parkville, VIC 3010, Australia. E-mail:

gemma.mckibbin@unimelb.edu.au

Running Headline

Caring for Sexually Exploited Children in Residential Care

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Abstract

Child Sexual Exploitation (CSE) is a problem for children and young people living in out-of-home care (Looked After Children). As part of a broader action research project aiming to prevent both harmful sexual behaviour carried out by children and young people and CSE in out-of-home care, four focus groups were undertaken with 17 workers at three Victorian residential houses in 2017. The findings reported in this paper were generated through the research question: What do workers perceive as the key challenges in caring for children & young people vulnerable to CSE in out of home care? [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]

Five major themes were identified: (i) *children and young people going missing from home*; (ii) *children and young people not identifying as victims*; (iii) *workers not feeling safe following missing children and young people*; (iv) *frontline police response unhelpful when children and young people go missing*; and (v) *attempts to support age-appropriate friendships and relationships being hampered by risk-averse system*. The design of prevention and response strategies to combat CSE must take into account the challenges identified by workers to ensure the best possible sexual abuse prevention outcomes for children and young people living in residential care.

Key Practitioner Messages

- Children and young people need to be educated about the tactics used by perpetrators so that they can recognise if they are being groomed or exploited.

- Residential staff need to be upskilled about how to respond to children and young people at the point they are leaving the house for the purpose of CSE.
- Workers need to be empowered to make decisions about the day-to-day welfare of the children and young people in their care.
- Multiagency collaboration is vital in preventing and responding to CSE and efforts should be upscaled across all local government areas.

Key words

child sexual exploitation; looked after children; out-of-home care; adolescents;
residential carers

Introduction

Child Sexual Exploitation (CSE) is a problem for children living in out-of-home care (Looked After Children) (Australian Institute of Health and Welfare, 2019; Euser *et al.*, 2013; Jackson, 2014). The Australian Royal Commission into Institutional Responses to Child Sexual Abuse (Royal Commission) found that children living in residential care settings are particularly vulnerable to being victims of sexual exploitation [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN] (Royal Commission, 2017). In Australia, residential care is understood as care for children on statutory child protection orders whereby four children, mostly over the age of 12 years, live together in a suburban house staffed by rostered workers (Connolly and Morris, 2011). In this paper, children are understood to be between the ages of 10 and 18 and CSE is defined as follows:

‘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.’ (Beckett *et al.*, 2017, p. 7)

This definition has been chosen because it highlights that CSE is one form of child sexual abuse among others, like intra-familial child sexual abuse and harmful sexual behaviour carried out by children against other children. However, it is important to

note that definitions of CSE are contested and different jurisdictions may use terminology associated with human trafficking rather than with child sexual abuse which may result in inconsistent policy and practice responses to the problem (Brayley and Cockbain, 2014; Mitchell *et al.*, 2017).

This paper explores the perceptions of workers in residential care about the challenges of caring for children who are being sexually exploited or at risk of exploitation. In particular, the paper sets out the dynamics of CSE perpetration in residential care settings and highlights the importance of multiagency work through the lens of a public health model of prevention. It reports on four focus groups held with 17 workers from three residential houses in Victoria, Australia in 2017. Two major sites of contestation are discussed in relation to: a) concepts of victimisation, agency and consent; and b) enhancing a multiagency CSE prevention agenda.

Sexual exploitation in residential care settings

There have been no general population studies undertaken to ascertain the prevalence of CSE for children (Kelly and Karsna, 2017). However, there appears to be a growing understanding amongst researchers, policy-makers and practitioners that CSE is a form of child sexual abuse that requires robust prevention and response initiatives (Barnardo's, 2011; Cameron *et al.*, 2015; Sharp-Jeffs *et al.*, 2017).

In their paper entitled *Key messages from research on child sexual exploitation* (Coy *et al.*, 2017), the authors found that sexual exploitation can happen to children of all socio-economic backgrounds, and that the average age of identification is between 12 to 15 years, although younger children are increasingly being identified. Further,

although most victims of sexual exploitation are girls, boys are also exploited
[PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]
(Sharp-Jeffs *et al.*, 2017). Indeed, the authors of a recent largescale UK study involving 9042 CSE service users found that one third of the sample were boys, indicating the need for responses and exit strategies that focus on boys as well as girls (Cockbain *et al.*, 2017).

Sexual exploitation in a residential care context tends to take the form of external adult perpetrators, operating in groups or individually, targeting children living in residential care (Coy *et al.*, 2017; Victorian Government, 2017). Perpetrators employ a range of grooming behaviours such as: giving a child cigarettes and drugs; pretending to be romantically interested in a child; giving a child mobile phones or tickets to sporting events; or sending taxis to transport children to ‘parties’ or plane tickets to traffic them interstate (Royal Commission, 2017). Exploitation in this setting can also involve older young people displaying grooming behaviours against younger children, whereby the younger children are recruited into abusive situations and this is a form of harmful sexual behaviour (Hackett *et al.*, 2016).

In the UK and Australian evidence, one of the risk factors that appears to be linked with sexual exploitation is when children go missing from home (Jackson, 2014; McKibbin, 2017; Coy *et al.*, 2017). In this paper, we use the terminology ‘missing from home’ for children living in residential care to avoid the negative connotations associated with the terms ‘absconding’ and ‘placement’. Other factors that may link with sexual exploitation are: being exposed to domestic violence; homelessness; and living with a disability (Jackson, 2014; Coy *et al.*, 2017).

Multiagency responses across the public health prevention spectrum

The evidence base indicates that the best response to CSE involves multiagency collaboration between police, community service organisations and governments, across the public health spectrum of prevention [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN] (Hackett *et al.*, 2016; Royal Commission, 2017; Sharp-Jeffs *et al.*, 2017). The public health model of prevention encompasses universal primary prevention strategies that target the whole population, whereas secondary prevention or early intervention strategies target risk factors or at-risk groups, and tertiary prevention initiatives are responses after abuse has occurred (Quadara *et al.*, 2015).

In Victoria, the Australian state in which this study was undertaken, the state government leads a multiagency response called the *Keeping children safe from sexual exploitation* strategy, which commenced in July 2015. Sexual exploitation practice leaders collaborate with specialist sexual abuse police and community service organisations to coordinate the identification of children at risk of sexual exploitation and to disrupt the activities of perpetrators. Further, the state government, community service organisations and police have piloted an enhanced model to better protect children from sexual exploitation (Victorian Government, 2017).

This kind of multiagency work mirrors that being undertaken in the UK to support victims of sexual exploitation and to disrupt perpetrators where multiagency teams have been established in local government contexts to lead a coordinated response to children living with sexual exploitation through Local Safeguarding Children's Boards and Multi-Agency Safeguarding Hubs. The approach enables different agencies to

share information and to develop coordinated responses to particular children, or to target areas that are 'hot spots' for CSE (Barnardo's, 2012; Jago *et al.*, 2011).

The enhancement of the CSE secondary and tertiary prevention agenda for children living in residential care involves strategies which build upon the multiagency work (Coy *et al.*, 2017). Such strategies include: sex education for children living in care addressing issues of grooming and consent; targeting 'being missing from home' as a risk factor for sexual exploitation; continuing the multiagency disruption of perpetrators; and increasing the support for children to exit exploitation (McKibbin, 2017).

With a view to developing such strategies as part of a broader action research project, this study explores the perceptions of workers about the key challenges they face caring for children who are being exploited or at risk of exploitation. In this way, the study represents an important contribution to the evidence base that could be considered when acting to enhance the CSE prevention agenda for children living in residential care.

Aim and objectives

The aim of this study was to collect the insights of workers in residential care about the challenges that they face caring for children who have been identified as being sexually exploited or suspected of being exploited through the presence of risk factors like coming home with gifts or being collected by older men. Its objective was to capture the perceptions of workers about CSE to help inform the design of a programme to prevent CSE for children living in residential care. The overarching research question guiding the study was: *What do workers perceive as key challenges in caring for children who are being sexually exploited or at risk of being exploited?*

Method

The fieldwork for this study was undertaken between July and December 2017. The study was part of a broader action research project about preventing CSE and harmful sexual behaviour (sexual abuse carried out by a child or young person), as well as promoting respectful relationships, for children in out-of-home care. The broader action research project is informed by the Knowledge-to-Action framework set out by Graham and Tetroe (2009) whereby a social problem is identified, and key stakeholders come together to design, implement and evaluate possible solutions. In line with the empowerment principles underpinning participatory action research (Liamputtong, 2013), participants were approached as experts in their own practice of caring for children [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN], and a consultative lens was adopted by the researcher to minimise power differentials between the workers and the researcher. Further, through regular meetings with a senior academic, the researcher engaged in reflexive practice to explore her influence on the research process and the influence of the research process upon her (Probst and Berenson, 2014).

Sampling

Seventeen workers from a large out-of-home care provider in Victoria, Australia were recruited [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN] to participate in the study. The workers included residential carers and case managers. Residential carers look after children on a daily basis and must undertake a Certificate in Child, Youth and Family Intervention, whereas case managers coordinate children's placements and mostly hold a bachelor's degree in social work or equivalent.

Of the 17 participants, 15 were residential carers (three male and 12 female), and two were case managers (both female). The sampling was purposive in that all participants were recruited from three houses that had been selected by senior management as having a current problem with CSE. The three houses also comprised the sites for the broader action research project.

Focus groups

Four two-hour focus groups were undertaken with the workers [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]. Three of the focus groups occurred during the team meeting of the house for the residential carers and the fourth was organised especially for the case managers. There were five participants in the Site 1 residential carer focus group, and four and six in the Site 2 and Site 3 focus groups respectively. There were two case managers from Sites 2 and 3 in the case manager focus group. All residential carers from the houses were invited to participate but ultimately some were absent on the day due to illness or unavailability. The three case managers associated with the sites were invited but only two could attend.

The focus group schedule was semi-structured and included questioning around the current problem of CSE in relation to particular children living in each house. The line of questioning then shifted to how workers perceived challenges in responding to CSE, and then to ideas about how prevention could be enhanced.

Data analysis

The focus groups were audio recorded and transcribed, and the transcriptions were de-identified and imported into NVivo. The transcripts were analysed according to Constructivist Grounded Theory [PUBLISHER – THE PRECEDING UNDERLINED

TEXT IS FOR THE MARGIN, i.e. '[Focus group] transcripts were analysed according to Constructivist Grounded Theory' (Charmaz, 2006). This involved undertaking a process of initial, focussed and theoretical coding with the help of NVivo software carried out by one researcher. The initial codes were identified through line-by-line coding, and then grouped together to form focussed codes. Theoretical coding was undertaken by two researchers through robust discussions about the focussed coding and the development of an agreed-upon narrative for each focussed code and how they related to one another. For example, the initial code, 'police saying she's been missing 300 times' was grouped together with other initial codes about workers seeking police help when children are missing from home, e.g., 'having to tell story about pregnant girls bleeding to get police on board'. The focussed code, 'frontline police response unhelpful when children missing' was then described and compared with the other focussed codes creating a theoretical code: a narrative about how the workers construct 'being missing from home' differently from frontline police. The focus group data were analysed in the same way that semi-structured interviews would be analysed in that the researcher did not attempt to capture tensions or differences in perspectives among group members but rather to capture the dynamics of the challenges faced by workers in caring for sexually exploited children. The purpose of collecting the data in a focus group setting rather than in semi-structured interviews was part of an engagement strategy relating to the broader action research project.

Ethics

The sexual abuse of children is an extremely sensitive area of research. Ethics approval was sought and received through the University of Melbourne Human

Research Ethics Committee (Ethics ID: 1748824.1). Ethical issues that needed to be considered included protecting the identities of the workers and the children discussed in the focus groups, and the potential for workers to be triggered by the distressing nature of the material.

Results

It emerged from the focus groups that workers face a number of challenges caring for children vulnerable to CSE. Three key theoretical codes/themes emerged [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN] in relation to these challenges: (i) *children going missing from home*; (ii) *children not identifying as victims*; and (iii) *frontline police response unhelpful when children missing*. The quotes provided support the theoretical codes and are reported verbatim from the focus group transcripts.

Children going missing from home

In all of the focus groups, workers described children going missing from the house as a problem. They talked about how children would leave the house and that the workers had no idea where they were:

'I have a young person... when she first entered into out-of-home care she went missing for quite a period of time, like just missing. I think it was two or three weeks, and that was her first time in out-of-home care and we didn't really know what was going on.' (Case manager 2, Site 3)

It emerged that children going missing from the home were being sexually exploited by adults [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]

who were providing them with shelter or mobile phones in exchange for sexual activity:

'[The perpetrators] were getting sexual favours, for lack of a better word, in exchange for letting [girl] stay at the house or taking her out for lunch or buying her a mobile phone or buying her credit or buying her things that the house wouldn't.' (Case manager 2, Site 3)

Children were not only being sexually exploited in hotels or home environments, but in gang environments. One 14-year-old girl was going missing to spend time with a gang of older people who carried out organised crime:

'Part of the gang that she's in... they have certain rules about what young girls have to do if they're in that gang. [Girl] takes that stuff very seriously. I feel like again, she's been sexually exploited by the gang. If a gang member wants to have sex with you, you're not allowed to refuse, that's part of their culture.' (Residential carer, Site 1)

It was not only girls who were being sexually exploited. Workers described how one boy who had been exploited began to display grooming behaviour:

'[Boy] then turned from victim into perpetrator... changing his behaviour to groom other young children. Hanging around with the wrong people. Using that. Having the power and money.' (Residential carer, Site 2)

It appears that children are going missing from the home and are being sexually exploited. Both boys and girls are victims of exploitation and one developmental pathway for boys may involve developing harmful sexual behaviours through recruiting younger children into exploitation.

Children not identifying as victims

The workers described how children being sexually exploited generally did not identify themselves as victims of sexual exploitation [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN], making it difficult to intervene in the situation. This emerged in all focus groups. One worker described how a girl appeared to seek out men who would then sexually exploit her:

'I guess one of the main kinds of behaviours that we deal with on a day to day is [the girl's] access to social media and her making relationships quite easily and quickly over that and just reaching out for any males... just reaching out for a male companion or relationship and then leaving the home to go and meet up with them and that sort of thing, and will at times come home with - even yesterday - come home with gifts. So I think yesterday was cigarettes and an umbrella and maybe make-up.' (Case manager 1, Site 2)

While from the worker perspective, this girl is being exploited, she on the other hand, does not see herself as a victim of sexual abuse but rather as having relationships with men and receiving gifts as part of those 'relationships'. Another worker talked about a girl who views herself as being in love with a much older man. When specialist sexual abuse police tried to disrupt the perpetration, the girl felt emotionally devastated by what she perceived as the loss of her central relationship:

'[Girl] won't make any statement against [older man] or any kind of charges. Look, it's been difficult as her carers to watch her go through what she's gone through, a horrible time where... the police have caught up with [perpetrator] and been able to give him a warning, so he's at times pulled back from that

relationship which has then caused [girl] to have complete meltdowns.'

(Residential carer, Site 1)

Another worker talked about a girl who would be sexually exploited by men and then report them to specialist sexual abuse police:

'She's been getting favours out of that, probably going to [hotel] and booking a room there, being with a guy, and she will receive some favours, like she's got a lot of these (cigarettes). But later on, after a week or some time later, she charges that guy. She reports that to [specialist sexual abuse police], and because of this credit card payment to book the room and stuff like that [perpetrator can be charged]. There's a couple of incidents of a similar nature that happened. She probably offers [sex] and then she charged that person, says that: "He exploited me".' (Residential carer, Site 3)

It appears that the girl was ambivalent about the exploitation, perhaps shifting between positions of agent and victim.

Workers also described instances of boys being sexually exploited and not identifying as victims. One worker talked about a boy being exploited over the internet:

'His grandfather had actually walked in on [boy] when he was on a live chat, so webcam, with an older gentleman and [boy] was masturbating. He was half naked... He's at risk... He's already said things where he's been in contact with older males, they've brought him stuff. I just don't think he understands the risk that he's putting himself at.' (Residential carer, Site 2)

Overall, these workers raise important issues about agency, consent and gender [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN] that would need to be considered when designing educative interventions or exit strategies for children at risk of, or experiencing, sexual exploitation. However, the quotes also demonstrate a need to upskill workers around using language like ‘getting favours’ rather than ‘being sexually exploited’ and referring to adult abusers as ‘gentlemen’ rather than as ‘perpetrators’.

Frontline police response unhelpful when children missing

Workers said that frontline police were not helpful when children are reported as missing in three of the focus groups. The workers described a disjunction between how they understand ‘being missing’ and how the police understand ‘being missing’. One carer said:

‘The biggest issue we have is the police and reporting to the police when a young person is missing. They come from a point of view, no, no, no, you’ve had contact on Facebook, you’ve had some contact, they’re not missing.’

(Residential carer, Site 1)

It appears that some frontline police do not perceive the child or young person as missing if the carer has had contact with them through social media [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN], despite the worker not knowing where the child or young person is. Another worker recalled her strategy for managing making missing person reports to police:

'It gets to a point where you're almost "amping" everything up to police: "I have two pregnant girls at the moment" and you'll be like, "They're pregnant and we're concerned they're bleeding," and it's like all this kind of stuff. You're telling this huge story just to get [police] on board.' (Case manager 2, Site 3)

The overwhelming message from the workers around children going missing from the house and not getting an adequate police response was that they feel disempowered. One worker said:

'Yeah, because a lot of it is - we've got no power. So you put in a [missing person's report] but we've got no power to do anything. We can just update you if we've seen them or whatever. There's no power to bring them home. So then they're still out doing whatever they are unless staff can get the [missing person report].' (Case manager 1, Site 2)

Workers reported that the response of specialist sexual offence police and sexual exploitation practice leaders employed through the child protection agency is more helpful than that of frontline police. One worker recalled collaborative practice whereby the sexual exploitation practice leader worked together with the case manager and the police to disrupt sexual exploitation:

'For this young person it's actively updating her Sexual Exploitation Information Template, which would look like any males that she comes in contact with, any names, any addresses, anything that's a little bit suspicious goes to [child protection agency] and our practice leader, or their practice leader of sexual exploitation gets updated on everything. And [sexual exploitation practice

leader] is pretty - she's just amazing... We were able to get an address [of the perpetrator] and when [girl] went missing we sent police there, served [perpetrator] with a Harboursing Notice. It was all very - and it all happened really, really quickly. So that's our relationship with [child protection agency].'

(Case manager 2, Site 3)

It seems evident that a collaborative, multiagency approach towards disruption of perpetration is more successful than 'missing person' reporting to frontline police [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN], which appears to lead to strong sense of disempowerment for workers.

Discussion

Two major sites of contestation emerged through the focus groups with workers. The first site of contestation was between the workers and the children and involves the way that each group constructs victimisation, agency and consent differently. The second site of contestation was between the workers and the system and involves the differing ways that 'being missing from home' is constructed by workers and frontline police. Both sites of contestation have implications for prevention strategies across the public health spectrum.

In terms of the first site of contestation, workers identify children who are receiving goods or affection in exchange for sexual activity as victims of CSE [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]. Workers seem to understand that even if a young person is legally able to provide consent to sexual activity (in Victoria children over the age of 16 can legally consent to sex with an adult who is not in a caring or teaching role) with an adult, the tactics of abuse and coercion

that accompany sexual exploitation create a situation where giving informed consent is problematic. The workers' conceptualisation of children as victims reflects the local Victorian CSE policy and practice responses, which construct children who are being exploited as victims of sexual abuse (Victorian Government, 2017). Both the workers' understanding, and the policy and practice responses, appear to be informed by evidence about the harm caused to children by sexual abuse (Paolucci *et al.*, 2001; Wilson and Widom, 2010).

However, children may perceive their experience of sexual exploitation in very different terms to workers and policy-makers [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]. A child may think that they are in love with the perpetrator (Barnardo's, 2011), or a child who has been sexually abused since infancy may perceive abuse as normal (Firmin *et al.*, 2016). Such a child may attempt to gain some agency over the sexual abuse experience by making the exploiter pay. The young person may construct getting alcohol, drugs or other goods as 'pay-back' for the sexual activity, and as 'a bonus' compared to when they were victimised as a younger child and given nothing in return. This dynamic of not identifying as a victim is supported by a qualitative study undertaken by Gilligan (2016) in which the author found that some young women who had been sexually abused and attended a therapeutic service felt ambivalent about terms such as 'child sexual exploitation' and preferred to talk about their 'relationships'.

In a study undertaken by Firmin *et al.* (2016), the authors explore how children's sexualities are influenced by sexual exploitation. They synthesised various findings from their previous work about children and sexual exploitation and found that

children's sexualities can be skewed in different ways: through discourses that normalise abuse or blame the victim; or through structural inequalities whereby children are forced into exploitation in order to survive. The authors argue for an approach to CSE that does not reject the sense of agency that some children experience through the exploitation, and that takes into account the ecological life context of each child.

Prevention efforts across the public health spectrum could construct children as victims and as having agency at the same time [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]. That is, prevention at the tertiary end of the public health spectrum need not construct victimisation and agency as mutually exclusive. This approach to children being exploited mirrors that taken to women who are living with domestic violence, where it is recognised that they are victims and that they also have the ability to make the best decisions for themselves and their children (Laing *et al.*, 2013). It may be that learnings can be drawn from the domestic violence arena and that children can be educated about the tension of occupying a social position of both agent and victim. However, it must be understood that boys are victims of sexual exploitation to a greater extent than men are victims of domestic violence and that the relationship between masculinity, sexuality and victimisation requires further investigation (McNaughton Nicholls *et al.*, 2014).

In terms of the second site of contestation between the workers and frontline police, the workers perceive children who leave the house without permission for the purpose of meeting up with perpetrators as 'missing from the home' and as at risk. By contrast, some frontline police do not consider prevention work with young children as a priority

in spite of the evidence that missing from the home is an indicator of sexual exploitation (Coy *et al.*, 2017; Jackson, 2014).

It appears that workers are receiving a better response to children who are missing from their care through multiagency collaborative responses from the formal child protection agency and specialist sexual abuse police. This is not surprising considering that the best available evidence indicates that multiagency collaboration involving police, government and community service organisations provides the most robust response to sexual exploitation (Cameron *et al.*, 2015; Hackett *et al.*, 2016; HM Government, 2015). It may be that the multiagency response could be expanded to include frontline police, through a process of training or coaching so that workers feel more supported when reporting children as missing, and frontline police understand that being missing often indicates sexual exploitation. Alternatively, early intervention strategies could be designed to target 'being missing' as a risk factor for CSE [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]. Such strategies could involve strengthening relationships between workers and children, which acts as a protective factor against going missing (Coy *et al.*, 2017).

There are some limitations of this work. One limitation is that the data were not analysed with attention to the focus group dynamics. The focus groups were undertaken for convenience and as part of a broader action research engagement process with the three sites. Another limitation is that much of the literature that frames the article is from the UK and may not be easily transferrable to an Australian context. However, the study does provide an opportunity to reflect on how residential carers and

case managers understand CSE and how that conceptualisation could inform prevention efforts.

Conclusion

This paper has reported key challenges that workers perceive about caring for children who are being sexually exploited or who are at risk of exploitation. In particular, two sites of contestation were identified which would need to be taken into account in the design of prevention strategies. Such strategies would need to address the dichotomy between victimisation and agency as informed by discourses of masculinity, femininity and diverse sexualities, and to support the expansion of multiagency response efforts to upskill frontline police.

It is unacceptable that so many children in state care are living with sexual exploitation. It is troubling that residential workers often feel powerless in the face of children going missing from home [PUBLISHER – THE PRECEDING UNDERLINED TEXT IS FOR THE MARGIN]. This study represents important evidence about the current state of CSE in Australia. There is a pressing need to synthesise the knowledge generated in this study with other promising evidence, and to translate that evidence into the prevention and response agenda.

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