
October 2019

Response by the National Deaf Children’s Society Cymru

About Us

The National Deaf Children’s Society is the national charity dedicated to creating a world without barriers for deaf children and young people.

We support deaf children and young people with all levels of hearing loss from mild to profound, including those with a unilateral loss (hearing loss in one ear) and temporary hearing loss.

Our Response

The National Deaf Children’s Society Cymru believe it is essential that the needs and voices of deaf young people are acknowledged, understood and addressed in Social Service provisions. The need for a solid understanding of the communication and support requirements of deaf children is particularly relevant in relation to safeguarding children from sexual exploitation.

There are currently over 2,000 deaf children in Wales. Deaf children are more likely to be abused than hearing children. Studies show they are at least twice as likely to experience abuse as hearing children, with one study identifying incidences of abuse being 3.4 times that of hearing children.1

As highlighted in the statutory guidance consultation, young people with learning disabilities are, due to multiple factors, more vulnerable to Child Sexual Exploitation (CSE). The same is true of deaf children due to perceived communication barriers. It is, therefore, clear that any measures aimed at both preventing CSE and supporting children who have been victims of CSE must take into account the specific needs and requirements of deaf children.


2 "38. Disabled children: Research undertaken by Franklin et al (2015) found that young people with learning disabilities are vulnerable to CSE due to factors that include overprotection, social isolation and society refusing to acknowledge them as sexual beings. The research suggests that a lack of awareness of the sexual exploitation of young people with learning disabilities among professionals also contributes to their vulnerability”. in Welsh Government, Social Services and Well-being (Wales) Act 2014 Statutory guidance in relation to Part 7 of the Act—safeguarding children from child sexual exploitation, p.11.
The National Deaf Children’s Society Cymru are happy to work with the Welsh Government to this end. Please find some key areas for consideration outlined below.

**Raising awareness and knowledge of CSE**

**Raising awareness amongst Young People**

The consultation makes several references to the importance of educating young people about CSE. It positions education as a means of empowering them with the knowledge to spot the signs and the confidence to come forward should they feel that they themselves or their peers are at risk.

107. The Centre for Expertise on Child Sexual Abuse suggests that schools are ideally placed to deliver information to students about CSE and a number of resources exist for them to use in doing so. Opportunities to learn about sexual exploitation should be available in age appropriate forms in both primary and secondary schools. Open conversations inside and outside the classroom can help children recognise potentially abusive behaviours, identify trusted adults who they can talk to and offer information about support services.

At The National Deaf Children’s Society Cymru, we are keen to highlight that any education or awareness raising opportunities should be presented in a way that is accessible to, and understandable by, deaf children. This should permeate through written and visual materials as well as ensuring visiting speakers are equip with the knowledge, equipment and capabilities to communicate with deaf children. Ensuring all children have access to accurate and reliable information should be a key focus for all services involved. Teachers and those working with young people must be aware of how certain groups of children, including those who are deaf, are particularly vulnerable to exploitation.


Here you will also find advice and guidance for professionals working with children across age ranges.

**Raising awareness amongst Adults**

The consultation highlights the need to educate adults outside of children’s services on how to spot the signs of CSE in everyday settings:

120. Research on a pilot approach to safeguarding in public spaces undertaken by Safer London (2017) suggests that in order to take appropriate action to protect children, we need to include public spaces in the safeguarding framework. Interventions, together

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with support, are required in the places where children socialise and spend time, such as shopping centres and transport hubs.

121. Perpetrators of CSE are known to use fast-food outlets, taxi firms and hotel rooms to facilitate and conduct abuse. Research suggests that there is a need to provide industry-specific awareness-raising information and guidance for night-time economy workers on the warning signs of CSE, and on what to do if ‘something doesn’t look right’.4

It is essential that awareness raising campaigns designed at those who deliver services to, or work with, young people, both directly and indirectly, highlight how certain groups of young people are more at risk of and vulnerable to exploitation, including deaf children.

It is also important to remember that deaf children may have difficulties communicating or responding to questions. It is imperative that members of the public do not discount their concerns and mistake an inability to engage due to communication barriers as a lack of need for intervention.

We recommend that any public facing education campaign reminds the intended audience of the particular difficulties children with additional learning needs or disabilities may have in order to ensure the needs of these children are not overlooked.

Our guidance on communicating with children may also be of use here


**Children who have been victims of CSE**

The consultation makes reference to good practice for professionals providing medical and emotional support to child victims of sexual assault.

284. The World Health Organisation has set out good practice statements on the provision of medical and emotional support for child victims of sexual assault: Health-care providers should provide first-line support that is gender sensitive and child or adolescent centred, in response to disclosure of sexual abuse. - In line with the principle of “do no harm”, when the medical history is being obtained and, if needed, a forensic interview is being conducted, health-care providers should seek to minimize additional trauma and distress for children and adolescents who disclose sexual abuse. - In conducting physical examinations and, where needed, forensic investigations, health-care providers should seek to minimize additional harms, trauma, fear and distress, and respect the autonomy and wishes of children or adolescents. - Health-care providers should accurately and completely document findings of the medical history, physical examination and forensic tests and any other relevant information, for the purposes of appropriate follow up and supporting survivors in accessing police and legal services,

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while at the same time protecting confidentiality and minimizing distress for children or adolescents and their caregivers.

It is essential when any physical or forensic examinations are being conducted, practitioners communicate in a way that is suitable for deaf children. This must be done in order to ensure the child is fully aware of what is happening, allowing informed consent to be obtained.

For a child who communicates using Sign Language, a Sign Language Interpreter who is either a member of the National Register of Communication Professionals working with Deaf or Deaf blind People or the Scottish Association of Sign Language Interpreters’ must be used. Failure to use a qualified and registered interpreter may jeopardise a successful prosecution of the perpetrator of abuse and deny the deaf child access to justice. The word ‘interpreter’ should only be used for qualified persons who have had training and are qualified and registered. Others should be termed facilitators.

Please be mindful that both British Sign Language (BSL) and Sign Supported English (SSE) are used by young people. It is essential that any interpretation support is provided in the child’s preferred format.

We urge professionals to remember that family members should not be relied on as interpreters. Through our consultation work with children and parents we have come across incidents of this taking place:

“Many times social workers don’t bring out interpreters when it’s clear he needs one and I end up communicating for him. It’s not an add-on… it’s his human rights! When social care have accepted that he needs additional support they can never find anyone with the right signing skills and so again I end up stepping in.”
( Parent P North Wales January 2019)

Whilst, as the guidance states, CSE predominantly happens outside of the home setting, there are occasions when parents, guardians or family members may be involved. It is, therefore, essential that practitioners do not rely on family members to take the on the role of interpreter or communicator. For further guidance, please read our Social care provision statement


**Independent Professional Advocate (IPA).**

The consultation outlines children’s rights to an IPA.

199. Some children will be entitled to an Independent Professional Advocate and they should be reminded of this. When a child is subject to child protection procedures or becomes looked after they should receive an Active Offer of Independent Professional Advocacy. Information should be shared with them that includes an explanation about the role of Independent Professional Advocacy, what it can and cannot do, how it operates based on their wishes and feelings, its independence and how it works solely

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for the child/young person, its policy on confidentiality and significant harm – it explains the statutory right of children and young people to be supported to express their views, wishes and feelings as well as their right to make a representation or complaint⁶.

Information on a child’s rights to an IPA should be available in ways that are accessible to the communication needs of the deaf child.

An IPA should be offered to all qualifying children including those with disabilities or additional learning needs. If a suitable IPA is not available, practitioners should not withhold the offer. Independent advocates must hold a certificate in independent advocacy and should have undertaken deaf awareness training. Where deaf children or young people are sign language users then advocates must be accompanied by a registered sign language interpreter.

**Social Worker Involvement**

The consultation references the importance of rapport building between young people and practitioners:

183. Hallett (2017) reports that children’s perceptions of what makes a good or poor practitioner largely focus on the development of rapport and that children respond more positively to practitioners who take a relational approach, while children are less likely to engage fully with practitioners who do not focus on developing a relationship⁷.

As the consultation highlights, a lack of rapport can lead to children disengaging and withholding key information.

As there are increasingly diminishing numbers of specialist Social Workers for deaf children, it is imperative that suitable social workers are involved from the beginning.

Child protection investigations should be undertaken by staff who are deaf aware, have expertise in child protection and must involve a specialist social worker in deafness to ensure the communication issues are fully taken into account. The specialist social worker should either be an identified champion within the authority who is suitably trained to provide the necessary advice and support or alternatively there are clear arrangements to commission advice from an outside specialist social worker, either from another local authority or an existing independent and registered social worker. Where one of these three elements is missing arrangements cannot be regarded as adequate.

The involvement of the identified social worker must be consistent to ensure children are not forced to unduly repeat their experiences and ensure they feel comfortable in establishing bonds of trust during this difficult period.

The National Deaf Children’s Society are currently working with the Welsh Government on guidance for Social Workers working with deaf individuals and their families across all ages. We

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are happy to provide a copy of this work and for it to be cross-referenced in the CSE statutory guidance.

**Involving young people in their care and support planning**

The consultation highlights the importance of professionals actively engaging with young people to plan for their own care and support needs:

192. Some children and young people also spoke about the insecurity they felt because decisions about them were not explained to them or were not explained well. Many did not get an opportunity to ask anyone about the decisions that were being made about them or to ask questions to help them to understand why these decisions were being made.

This is echoed in our own research:

"...for me the support dropped off really quickly so I’m not sure what really happened...it would have been nice for the person to stay the same and also for them to explain why they are coming over."

It is essential that young deaf children are allowed to participate and shape decisions surrounding their care and support needs. To do this, they must be presented with an opportunity to participate in discussions through whatever communication method is most suited to their needs (e.g. sign language interpreters, lipspeaker, note-takers etc.). This will ensure that deaf young children can express their wishes and feelings and have their experience understood.

**More Information**

Thank you for inviting us to respond on this tremendously important topic.

For comprehensive guidance on how social care professionals can ensure the needs of deaf young children are met, please see our social care position statement https://www.ndcs.org.uk/media/4191/social-care-position-statement-june-2016.pdf

For further information please contact campaigns.wales@ndcs.org.uk

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