Young people's involvement in service developmentmeaningful engagement is possible:

input into a national proforma to detect risks for child sexual exploitation when attending sexual health services.

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Background

- •Child sexual exploitation (CSE) takes many forms with increasing recognition of exploitation by groups (usually older men) and gangs (peer on peer sexual violence) and involves both under 16's and vulnerable 16 and 17 year olds. (Children's Commissioner report 2013)
- •Organisations including BASHH have previously developed proformas to detect concerns about vulnerable young people but these may not address current patterns of exploitation nor have had user input and have often not included 16 and 17 year olds.
- BASHH ASIG obtained a Department of Health grant authorised by an inter-ministerial group to develop a national proforma in collaboration with Brook for use by sexual health providers. Initial work aimed to have meaningful engagement with young people to gain insight into how to ask about and detect risk factors associated with CSE.



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Methods

- 5 focus groups were run by Brook to obtain young people's views
- Blackburn Brook- young people who have experienced CSE and clinic users (n=21)
- Manchester 6th form college (n= 23)
- Brook Young volunteers London (n=2)
- Family Action Young Carers Group (n=13)
- Redthread Support network for young people affected by gangs and CSE London (n=20)
- Additional input was provided by a Home Office Young Person's advocate# who works with young women at risk of or affected by gangs.

Results

- 79 young people were involved (36% male)
- Questions asked of focus groups included:
- "How should questions about CSE be asked?"
- "What type of language should be used?"
- · "What would make you OK to answer?"
- There were several recurrent themes to discussions including:
- Young people welcome a health professional asking questions if they were understandable and confidentiality was made clear.
- "Be chilled, maybe adapt to the individual"
- Completing the proforma should take a conversational rather than formal approach
- "If a person doesn't want to answer, they shouldn't be forced to talk"

- "If the professional has concerns, then they should point out if something sounds unusual, as the person might not be aware that what's happening is concerning"
- Young people wanted to be reassured they would be involved in any future steps the professional may take such as sharing information.
- Young people asked that we use "slang and simple words everyone would understand" "Not snakey shizz"
- Asking "who else was there when you were having sex?" was felt to be a useful screening question for CSE.

Conclusion

- All groups considered it appropriate to ask about CSE risks in sexual health clinic settings
- Seeking the views of young people by involving focus groups gave valuable insight into how information is best gathered
- Meaningful engagement with young people is possible through a collaborative approach between organisations such as BASHH, Brook and RCGP
- Opinion was sought across the spectrum of service users and non service users including victims of CSE and young people affected by gangs
- Using focus group information a national proforma to aid sexual health care providers identify CSE has been developed and piloted
- We recommend that this proforma be used for all under 18 year olds (and vulnerable adults where appropriate) seen within sexual health services and general practice



