

Learning from Safeguarding Adults Reviews



Theme: Adult Sexual Exploitation

Adult Sexual Exploitation (ASE) is a form of sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive an adult into sexual activity:

- (a) in exchange for something the adult at risk needs or wants, and/or
- (b) for the financial advantage or increased status of the perpetrator or facilitator. The adult at risk may have been sexually exploited even if the sexual activity appears consensual. Adult Sexual Exploitation does not always involve physical contact; it can also occur through the use of technology.



Did you know that there is no national definition of *Adult Sexual Exploitation*? ASE is incredibly complex and can often overlap with many other forms of abuse, neglect and/or exploitation.

Spotting the Signs...

- ⇒ Evidence or suspicions of sexual assault
- ⇒ Self-harm or significant changes in emotional wellbeing
- ⇒ Developing inappropriate or unusual relationships or associations, including relationships with controlling or significantly older people
- ⇒ Displaying inappropriate sexualised behaviour, language or dress
- ⇒ Being isolated from family, friends and social networks
- ⇒ Unexplained absences, including persistently being late or going missing
- ⇒ Unexplained acquisition of money, clothes and mobile phones
- ⇒ Their passport or identity documents have been taken away

Trauma: The impact of sexual abuse and exploitation on a victim can be devastating and can lead to a range of trauma responses such as:



- Low self-esteem, low self worth, self-harm, self-neglect or high risk taking behaviours
- Inability to self-regulate emotions or understand positive relationships which can lead to a higher tolerance of coercion and intimidation
- Substance misuse
- Mental health issues such as anxiety, depression, PTSD

Read: [Trauma Informed Practice Fact Sheet](#)

Remember! Professionals can only look after others if they look after themselves.

Molly Safeguarding Adults Review

Molly was a victim of Child Sexual Abuse. She was known to police as part of Child Sexual Exploitation Operations to disrupt perpetrators and they would ensure Molly was taken home if found when missing. Molly had Post Traumatic Stress Disorder (PTSD) and a history of intentional and accidental overdoses. Professionals felt this was due to her traumatic experiences of abuse.

At the age of 17 Molly fell pregnant and her relationship was known to be abusive. She used substances during her pregnancy and the baby was placed with Molly's mum when born.

When Molly turned 18, she was largely deemed as an adult with mental capacity to make her own decisions.

In her adult life, there were concerns about domestic abuse, self-neglect, unstable housing, self-harm, drug use and sexual exploitation by multiple perpetrators, some of which were known to be part of Organised Crime Groups.

Molly was supported by multiple agencies including adult safeguarding. Molly died at just 25 years old.

Did you know that "sex work" is a term used to describe adults who receive money or goods in exchange for **consensual** sexual services, without coercion or control by others? It is believed that Molly did not choose to engage in sex work and was being sexually exploited.



Coercion and Consent

Just because someone makes an unwise decision it does not mean that they lack mental capacity. People have a right to live how they choose.

However, there are significant challenges for professionals when it comes to cases where consent to share information is declined by someone who appears to have mental capacity but where coercion could be influencing their decision making. Where there are significant risks, there are circumstances where consent to safeguarding can be overridden. If you are unsure speak to your supervisor, safeguarding lead or local safeguarding team. There are various referral options for victims of ASE.

Read: [Adult Sexual Exploitation Toolkit, Risk Screening Tool and Referral Pathway](#)

Reasonable causes to override consent to share:

- When an adult at risk of harm lacks capacity to make a decision to share information with professionals to safeguard them
- Emergency or life-threatening situations
- Other people or children may be at risk
- Sharing information could prevent a serious crime or a serious crime has been committed
- The risk is unreasonably high and duty of care needs to be considered

It is good practice to seek consent. Practitioners should record their rationale if consent is overridden. Multi-agency safety planning is required to keep the victim safe.

Keeping Safe: Create a safety plan. Ask how you can communicate with them in a safe way. For example not sending letters to their home where a perpetrator may read them. Set up a '[safe word](#)' so that they can alert when they are in danger. Arrange appointments in a safe location.



Mobile phones can be used to log evidence or as safety devices. Take a look at [Bright Sky](#) and [Hollie Guard](#) apps.



To tackle sexual exploitation agencies need to work effectively together to support victims and [disrupt perpetrators](#).

Why don't they just tell someone?



Victims can be fearful of perpetrators and the potential consequences if they refuse sex. They may feel it is 'safer' to comply. Perpetrators may intimidate their victims so that they don't talk to professionals.

Victims can depend on perpetrators to provide a roof over their head, money, food, drugs or alcohol. This makes it more difficult for them to report abuse or escape because they rely on them for their basic needs.

Victims may witness/be involved in crimes and don't often report to services for fear of going to prison or being deported.

Victims may have been groomed and sexually exploited as a child and as an adult their understanding of 'normal' relationships can be misconstrued, truly believing that they are consenting to sex. They may not believe they are a victim at all or understand that they are being exploited.

Lack of prosecutions can lead to victims feeling unsafe/ withdrawing their statements and can increase the perpetrators' power over them.



Flexible or assertive outreach

approaches can be more effective in engaging victims.

For people who have been traumatised, it can be difficult for them to trust professionals. They may tell professionals to "go away" or it might be difficult for them to attend appointments.

Professionals need to be understanding, respectfully persistent and patient to build trust and develop a consistent and positive relationship.

What could you do to make it easier for the person to engage or access support?

Think about your discharge /case closure process. Could more be done to work with the person before closing their case?



Services should work in a way that is best for the person, not what is best for the service.

Transitional Safeguarding: Children and Adult Services should work together to consider what support may be needed when an exploited child is approaching their 18th birthday.

Advocacy / Key Workers

Perpetrators may control many aspects of a victim's life which can make it so difficult for them to seek help. It takes real courage to speak out. It is crucial that victims are believed, listened to and protected.

When a disclosure is made, consider if a Key Worker or Advocate would be helpful. Victims may feel overwhelmed or retraumatised having to tell their story again. Victims need enough time away from perpetrators to build on their resilience and independence.

There are [different types of advocacy](#) available. Advocates are independent and can help a person to share their views, so that no decision is made about them without them.

A Key Worker is not independent, but may already have a good relationship with the person and knows them well. A Key Worker can be useful if there are a number of agencies involved and can act as a single point of contact between the adult and professionals where needed.

Professionals should listen to the person and (where appropriate) to family/carers who know the person best.

Effective multi-agency working ensures that the most up to date information is shared to assess, monitor and address risks.

Useful Information and Resources

- [Report a Safeguarding Concern](#)
- [Find Support in Your Area](#)
- [Safeguarding Policies, Procedures and Guidance:](#)
 - [Mental Capacity Act Guidance](#)
 - [Multi-Disciplinary Team Guidance](#)
 - [High Risk Adults Panel](#)
- [Leaflets on Sexual Abuse and Exploitation and Domestic Abuse](#)
- [County Lines \(Criminal Exploitation\) Learning Briefing](#)
- [Training Courses, Resources and E-Learning](#)
- [Safeguarding Explained Video: What is Trauma Informed Care?](#)
- [Thematic Analysis of Safeguarding Adult Reviews Involving ASE](#)
- [Independent Advocacy](#)
- [Language Guidance for Professionals](#)
- [Sharing Information](#)