

# CSE Research: Short Practice Films for the Police

## Research Briefing

### A Trauma-Informed Approach: Policing Responses to Child Sexual Exploitation

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#### Text of the film

*Child sexual exploitation (CSE) can involve traumatic physical, emotional, and sexual abuse. For some children and young people, this happens after they've already been victimised by child abuse and neglect in other ways. Understanding the impact of these traumatic experiences is really important for front line professionals- including police. We need to know how to recognise trauma symptoms, avoid re-traumatising, and prioritise physical and emotional safety. Recently, this trauma-informed approach has been applied and developed across a range of disciplines.*

*Being trauma informed first involves considering trauma in a more holistic way; rather than viewing it as a clinical label or 'condition', it's understood as a common, expected outcome of exposure to dangerous and threatening circumstances.*

*A trauma informed approach also involves recognise signs and symptoms of trauma. For example, you might observe someone having a panic attack or suddenly becoming angry or afraid. A traumatised young person may be hyper vigilant, meaning they are in a*

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*constant state of arousal- ready to fight, flee, freeze, or just flop. They may be tense or on edge, and it's important to know that these symptoms could be easily misunderstood as behaviour that's uncooperative or aggressive.*

*A traumatised person could dissociate, which means they disconnect or detach from a traumatic experience in some way. Dissociation is a really important adaptive survival instinct that kicks in when someone feels psychologically overwhelmed, but it also means that they might come across as avoidant or numb, appear to 'check out' when being questioned, or seem like they aren't bothered by the distressing things they've been through.*

*Repeated exposure to traumatic events can also alter neurological development, contributing to increased engagement in high risk behaviours and difficulty forming trusting relationships.*

*Police can work to help mitigate the impact of trauma by providing opportunities, whenever possible, to let children and young people make their own choices, and inform them about what is going to happen to them. This allows them to feel some control over their lives and will help them start feeling safe again. Police can provide opportunities for children and young people to share how they're feeling in a location that feels safe, and can avoid re-traumatising them by asking them to talk about their difficult experiences over and over again. Police can also quickly facilitate relationships with partner organisations able to do more intensive trauma-focused, relational work.*

*Finally, instead of asking questions like "What is wrong with you?" or "what have you done?" ask "What has happened to you?"*

## **Research Summary**

### **1. BACKGROUND, INTRODUCTION AND STRUCTURE**

The purpose of this briefing is to introduce the principles of trauma informed practice and apply them to police work, specifically in relation to child sexual exploitation. This information is most relevant for operational front line officers, those in specialist roles, and specialist unit line managers.

Child sexual exploitation (CSE) can involve traumatic physical, emotional, and sexual abuse. For some children and young people, CSE is preceded by traumatic experiences earlier in life including child maltreatment, exposure to domestic abuse in the home, and episodes of going missing and/or homelessness. The accumulation of traumatic stressors often manifests in symptoms that front line professionals, including police officers, are often not trained or equipped to address.

This can become particularly difficult for police officers who may be called to respond to CSE victimisation. Recent research indicates that young people who have experienced CSE often describe initial encounters with police as very difficult; they perceived these interactions as lacking sensitivity and they were left feeling blamed for their abuse. This may happen because police officers do not always understand the complexities of CSE *or* the impact of trauma and abuse, and in order to effectively safeguard children and young people affected by CSE, it is critical to understand the impact of traumatic experiences and recognise the signs and symptoms of trauma.

Traumatic life stressors include life-threatening accidents, disasters, abuse, maltreatment, and violence. These stressors can range in severity and impact, and affect people differentially; that is, not everyone is affected in the same way following exposure to traumatic stressors. Children and young people who have experienced some form of trauma early in life are often vulnerable to exposure of subsequent traumas as they grow. Knowing that children and young people affected by CSE are often exposed to early life traumas means front line professionals need a way of working that recognises the signs and symptoms of trauma and how to best approach working with traumatised children and young people.

This briefing provides an overview of the 'trauma-informed approach' and how it might apply to police work, particularly in relation to CSE. It then provides a description of the symptoms and behaviours police officers may observe in children and young people affected by CSE, along with some practical suggestions for what police officers may do to effectively work with these children and young people.

## 2. WHAT IS A TRAUMA-INFORMED APPROACH?

A trauma-informed approach represents a new way of working across health and human services. It includes:

- Recognising the signs/symptoms of trauma
- Acknowledging the impact of traumatic experiences
- Actively seeking to avoid re-traumatisation
- Integrating an understanding of trauma in organisational policy and practice.

The term 'trauma' can often be intimidating for people who believe treating trauma is outside the scope of their role. However, a trauma-informed approach simply considers trauma in a more holistic way; rather than viewing trauma as a clinical label or 'condition', it is understood as a common, expected outcome of exposure to dangerous and threatening circumstances.

## 3. WHAT MIGHT POLICE OBSERVE IN TRAUMATISED CHILDREN AND YOUNG PEOPLE?

Being trauma-informed starts with recognising signs and symptoms of trauma. A police officer may observe physical symptoms such as **nausea** or **trembling**; a traumatised person may have **panic attacks** or display what seems to be unexplainable **anger or fear**. They may freeze up, or be unable to clearly recall events. It is important to know that these same symptoms can manifest in behaviours that might be interpreted by police as uncooperative, adversarial, or aggressive.

A traumatised person may be **hypervigilant**, which involves being in a constant state of arousal. Hypervigilant people can appear tense, 'on edge', and may demonstrate hostility, particularly if they feel threatened. They may **dissociate**, which refers to disconnecting or detaching from an experience. Dissociation is an adaptive, survival instinct that can occur when someone is psychologically overwhelmed. A person who is dissociating may appear as avoidant and numb, or may appear to 'check out' when being spoken to or questioned. They may appear as if they are not distressed at all, which can easily lead observers to think that they are not affected by the traumatic experience.

Repeated exposure to traumatic events can also alter a child or young person's neurological development, resulting in increased engagement in **high-risk behaviours** and the development of **poor coping mechanisms** (e.g. substance misuse and self-harming behaviours). Prolonged exposure to trauma, a common experience among children and young people affected by CSE, can result in **problems trusting** and forming supportive relationships.

#### 4. WHAT CAN POLICE DO TO HELP MITIGATE THE IMPACT OF TRAUMA?

Being trauma-informed means prioritising **safety and trust**. Feeling safe is a physical, emotional, and relational experience. Police can help establish safety and trust among children and young people affected by CSE in the following ways:

- Demonstrating that they are trustworthy and transparent.
- Providing opportunities whenever it is possible for children and young people affected by CSE to make their own choices so that they feel empowered and in control of their lives.
- Being particularly sensitive to cultural, historical, and gender issues.
- Informing children and young people affected by CSE about what is going to happen with- or to- them.
- Facilitating connections to others including family, other survivors, and to the interagency process, particularly if a range of other services (e.g. child protection, youth justice, education) are involved.
- Being aware that trauma often manifests in disruptive or harmful behaviours (e.g. substance misuse, aggression, extreme avoidance, self-harm, and anxiety), and that children and young people need space and time to address these concerns as part of comprehensive, holistic treatment.
- Providing children and young people who may have experienced CSE with opportunities to share how they are feeling, in a location that feels safe.
- Validating their feelings and engaging with them in a non-judgemental manner. For example, instead of asking '*What is wrong with you?*' or '*What have you done?*' ask '***What has happened to you?***'
- Remembering to ask if the child or young person feels unsafe, and then following through to ensure that they know their concerns are being acknowledged and addressed in concrete ways.

Trauma-informed policing also involves keeping in mind the myriad ways in which the criminal justice system can re-traumatise victims of CSE. To avoid re-traumatisation, officers can help prepare victims for what they can expect as their case is processed and criminal justice proceedings commence. This is particularly important in considering the manner in which a victim is prepared for, and supported through an Achieving Best Evidence interview. Police officers can also partner with mental health professionals and child advocacy organisations who are able to provide more intensive and on-going trauma-specific support. Relationships with organisations that can provide these services should be established as early as possible, as it may take a while for service providers to build relationships with victims who are reluctant to trust.

Finally, identified victims of CSE are not alone in experiencing trauma. Most people experience at least one traumatic event in their lives, including police officers *and* suspected perpetrators. In each case, access to services and support should be prioritised. Understanding trauma and how best to respond to traumatised individuals can only serve to enhance the police response to CSE and in every area of public protection.

## **5. CONCLUDING COMMENTS**

A trauma-informed approach is one useful framework for engaging with children and young people who have experienced sexual exploitation. While developed for use by other front line professionals, it is useful for police as it does not require extensive, clinically oriented trauma training. Rather, it requires police officers to have a basic understanding of the impact of traumatic experiences, and some knowledge of how trauma symptoms manifest in children and young people. It allows officers to prioritise building trust and gathering information in a way that is sensitive and child-centred. It is a useful, evidence-based way of enhancing police responses to CSE and other forms of victimisation.

Is there someone you know who would benefit from seeing this short film?

If so, take a minute to pass it on <https://www.uobcsepolicinghub.org.uk/responding-to-cse/videos>.

### To cite this film

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