

Keep Safe: the development of a manualised group CBT intervention for adolescents with Learning Disabilities (LD) who display Harmful Sexual Behaviours (HSB)

A PLACE TO
INSPIRE / AN
APPROACH TO
CHALLENGE



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University of
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Tizard
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Acknowledgements

phf Paul Hamlyn Foundation

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Avon and Wiltshire **NHS** Mental Health Partnership NHS Trust

St Andrew's

foundation for people with learning disabilities

Aldingbourne Trust

NSPCC
EVERY CHILDHOOD IS WORTH FIGHTING FOR

CHSS
University of Kent
Centre for Health Services Research

Northumberland, Tyne and Wear **NHS** Foundation Trust

SOTSEC-ID
Sex Offender Treatment Services Collaborative - Intellectual Disability

ySOTSEC-ID
youth Sex Offender Treatment Services Collaborative - Intellectual Disability

BSCB Bristol Safeguarding Children Board
making safeguarding everybody's business



Funded by Avon & Somerset Police & Crime Commissioner

Bristol Community Health

Sirona care & health

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Powerful Trainers/Aldingbourne Trust

The Keep Safe Focus Group of advisers from the LD Community -Anthony, Celia, Gillian, Michael, Nicola supported by John, Jill, Ro.



See video <https://research.kent.ac.uk/safer-idd/harmful-sexual-behaviour/sotsec-id-programme/resources/video/>

Aims of Introduction

- Consider the need for an adapted programme for young people with LD who display HSB
- Development of the Keep Safe intervention
- Feasibility study and outcome data
- Current Keep Safe developments in UK
- Reflections/implications for practice

Need:

- Development of SOTSEC-ID (Sex Offender Treatment Services Collaborative-Intellectual Disabilities) from late 1990's to current showed most adults had started displaying HSB/sexual offending earlier in childhood or adolescence
- Children and Young People (CYP) commit 30-35% of sex offences, with learning disabilities (LD) over-represented
- Hackett et al (2013) n=700 CYP with HSB, referred to 9 UK specialist services 1992-2000; **38% had LD**; Hackett (2014) Research to Practice Review found little research, practice evidence or guidance on assessment or intervention for CYP-LD & HSB

Need: social and institutional denial

- Calderbank et al's (2013) "Multi-agency Responses to Children and Young People who Sexually Offend" –detailed analysis of 24 young people displaying HSB. **LD over represented - 10 with a disability ie 42% total. Only 2 of these had a statement of Special Educational Needs ie 8%**
- Access to services was delayed by :
 - "poor recognition, lack of pathways and lack of services"
 - "too often subject to disbelief, minimisation and denial by professionals as well as families".
- "In this inspection, interventions, if successfully delivered, appear to have a positive effect, help delivered earlier may prevent other children and young people from becoming victims in the future. " (p8)
- So y (y=young) SOTSEC-ID set up as practice and research collaborative to develop and trial an earlier intervention to reduce harm

Development & feasibility study of Keep Safe

- **ySOTSEC-ID** – practitioners and researchers collaborative; 18 meetings, 2012–2019. E-list 150+ members
- **Paul Hamlyn Trust** – funding for development & feasibility September 2013 – February 2016 (plus SOTSEC-ID, University of Kent funding) & Avon & Somerset Police and Crime Commissioner and Safer Bristol Partnership grant Sept 2016- March 2017)
- **Keep Safe Development Group (KSDG)**- 14 face-to-face meetings, 4 telephone conferences, 11.13 – 01.17
- **Keep Safe Powerful Trainers Focus Group** - of advisers with learning disabilities from Aldingbourne Trust/Powerful Trainers (supported by KSDG/Foundation for People with Learning Disabilities,) 16 meetings, January 2014 - April 2015; 3 reflective meetings, October 2017-August 2019)

Harmful sexual behaviour is

“... when children and young people (under 18) engage in sexual discussions or activities that are inappropriate for their age or stage of development, often with other individuals who they have power over by virtue of age, emotional maturity, gender, physical strength, or intellect and where the victim in this relationship has suffered a betrayal of trust. These activities can range from using sexually explicit words and phrases to full penetrative sex with other children or adults.”

- This definition of Harmful Sexual Behaviour (HSB) is based on the definition used by the National Society for the Prevention of Cruelty to Children (NSPCC) and The National Institute for Health and Clinical Excellence (NICE), with Calder’s (1999) observation that power differences play a role in HSB added.
- This broad definition makes it clear that, whilst a wide range of behaviours could amount to HSB, the exact labelling will often depend on the particular circumstances of each case and the characteristics of the individual child involved.
- Importantly, alongside more obvious incidents of one child sexually abusing another child, it can also involve behaviours which may be harmful to the perpetrator, but not necessarily to others.

Theoretical and practical basis for Keep Safe

- **Group Cognitive behaviour Therapy (CBT) with adolescents with HSB**
 - Groups -adapted CBT, Old Life/ New Life, Road Maps, simplified Finkelhor (O'Callaghan et al,1999, 2004, 2006; Wiggins et al. 2013)
 - Good Way Model (Ayland & West 2006)
 - Adapted Good Lives Model (original Ward & Ganon 2013)
 - Change for Good /Turn the Page NSPCC
- **Group CBT -for young children (6-12 years) with problematic sexual behaviour (Carpentier et al 2006)**
 - Be Safe: Children's Programme (Big Lottery evaluation)
- **Group adapted CBT with adults with ID**
 - SOTSEC-ID (Murphy et al.. 2010, 2014- SOTSEC-ID);
 - Good Lives
 - Risk, Needs, Responsivity framework (RNR, Bonta & Andrews 2016)
 - CBT and DBT (Sakdalan, CBT and DBT, Wise Mind/Risky Mind, 2013;)

Keep Safe has the twin focus of

1. **enhancing well-being (meeting needs in prosocial way)** and.....
2. **reducing harm** (harmful sexual behaviour and other inappropriate/unhealthy ways of meeting needs)

Keep Safe:

- considers developmental needs/stages of adolescence & parent/carer involvement. Some sessions joint, some just for young people, some just for parents/carers.
- is strengths-based, contextual and systemic; integrates these and narrative approaches with CBT

The Keep Safe manual summarises evidence, outlines the Keep Safe model and methods, gives practice guidance and session plans/resources across its modular structure, has sections on Diversity (abilities, age, autism, culture, gender) and delivering Keep Safe as individually focused, family intervention

Keep Safe Modular structure:

38 yp sessions; 16 p/c sessions total; 1 year, term time

yp = Young People; p/c = Parent/Carers

Module:

- 1: Keep Safe: what is it about & getting started (4 yp; 2 p/c sessions)
- 2: Growing up, relationships, sexual relationships & boundaries (10 yp; 4 p/c sessions)
- 3: Feelings and managing feelings (6 yp; 3 p/c sessions)
- 4: Understanding my behaviour (6yp; 2 p/c sessions)
- 5: Empathy & consequences (6yp; 3 p/c sessions)
- 6: Making my Keep Safe Plan and getting ready to move on (6 sessions)

Making Keep Safe engaging & accessible:

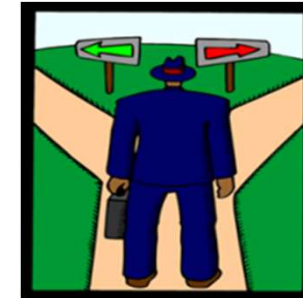
- Consistent structure – safety & security
- Fun & engaging
- Visual
- Interactive
- Concrete
- Multi-media
- Stories/narrative
- Repeat, repeat and repeat

Key elements- models & visuals

- Good Lives Model



- Good Way Model



- Big Rules of Sex

- Chill Skills



The BIG RULES of Sex

- You both need to be 16 years or older.
- Consent: You both need to agree. You have to say "Yes" and "No" to sex.
- It needs to be a private place.
- You are not allowed to have sex with a partner in your family.
- It will break your privacy and bring the police to the private place.

Consent

To do sexual things with someone, you and the other person must both:

	1. Be 16 years old or older
Yes	2. Say "Yes"
	3. Have good body language
	4. Not have taken drugs or be drunk

Key elements: narratives -Stuart's Story Examples across all elements , modules & activities



Keep Safe Manual: Session Outlines – consistent structure:

- Module Title and Number
- Brief scene setting (Background) for Module
- Aims for Module
- Overview of Module (i.e. Session Titles)
- Session Number and title
- Aims
- Materials
- Session activities
- Relax/chill skills (always with Parent/Carers when they have a session)



Keep Safe Manual Session: consistent structure

- **Welcome and Agenda** (visual timetable on board)
- Session have 2 x 45 minute halves with a 15-20 minute refreshment break in middle
- **Check-in:** an activity, step they did well/feel proud of from week (from Module 4 also reflect/review a difficulty, issue, something that didn't go so well for problem solving and practice in group and home activity using Keep Safe elements, skills learned, strengths)
- **Recap** of learning from last week, review of any Home Activity
- Other activities: **new learning**, consolidation, practice
- **Relax/chill skills**
- **Set Home Activity**
- **Session Review**



Inclusion criteria for participants in feasibility study of Keep Safe:

- Male
- 12 -17 years at beginning of intervention
- Learning disabilities - IQ equivalent 50- 70 (+/- Standard deviation) as measured by previous psychological assessment, statement of special educational needs, school reports), and social impairments
- having displayed harmful sexual behaviours-participants may be known to the police and CJS, but this is not a requirement; any relevant criminal investigations should have been completed.
- screened as suitable through the “Suitability for Keep Safe Group Intervention” tool
- have families/carers who will attend Keep Safe

Data from feasibility study

- 10 starters (anticipated 24-32 in 4 groups; actual 9 in 2 groups, 1 individual)
- Ages 14-19 years; measured abilities, IQ 43-65
- Sites: Be Safe Service, Bristol; NCATS North London (specialist NSPCC service)
- 8 completers; 2 non-completers (1 Looked After Child moved by Local Authority, 1 set of parents withdrew their son – some cultural/religious issues)

Feasibility Outcome data:

- Measures: Assessment of Sexual Knowledge in Adolescents- gains in knowledge for all; Victim Empathy- some gains in empathy; Questionnaire on Attitudes Consistent with Sexual Offending (QACSO) 2 subscales adapted for adolescents and Resiliency Scale - more mixed findings.
- Need to add guidance on delivery as individually focused family intervention as well as group to Keep Safe manual
- Need to extend age and abilities ranges to reflect changes in UK legislation, policy and practice (up to 25 years, and borderline abilities/complex needs)

Feedback from Practitioners delivering Keep Safe:

- high engagement in Keep Safe delivery in groups and individual family intervention
- Modular structure, activities and resources worked well
- Positive knowledge, skills, behaviour change

Feedback on Keep Safe

**Apology letter –
hard to do. Nice
when mum read
hers (praise letter)**
(young person)

**Liked the quizzes, the
snacks & the drinks**
(young person)

**Learned new
things. Got
more confident**
(parent/carer)

**Staff really listened
to me; didn't judge**
(parent/carer)

**Hard to talk in front of
others at first but got
more confident**
(young person)

**Big rules of Sex,
use a condom; not
having sex yet**
(young person)

**Activities were really
engaging**
(co-facilitator)

**Useful to have
materials and
resources all
together**
(co-facilitator)

Reflections

- Recruitment issues- thresholds, austerity
- Challenges of mixed abilities, including autistic spectrum
- Working with the professional system
- Issues within parent/carer sessions- seperated parents, parental abilities and needs

Current Keep Safe in UK

- Over 220 practitioners trained in Keep Safe (also other Europe) and 100+ in Japan
- Group and individual delivery
- Seeking research funds for next phases - larger controlled, systematic trial and trial of Keep Safe 4 All -shorter, earlier, school-based intervention
- 2 linked PhDs: i) school-based Relationships, Sex Education and Boundaries, plus some emotions with young people with autism at risk of sexual offending; ii) Empathy (what happens after) groups with adults with ASC.
- Training went online during pandemic. Planned "Train the Trainers" postponed from 2020

Further information

- Malovic, A., Rossiter, R., & Murphy, G. (2018) "**Keep Safe: the development of a manualised group CBT intervention for adolescents with ID who display harmful sexual behaviours**", *Journal of Intellectual Disabilities and Offending Behaviour*, Vol. 9 Issue: 1, pp.49-58.
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- Wake, A., Davies, J., Drake, C., Rowbotham, M., Smith, N. and Rossiter, R. (2020) "**Keep Safe: collaborative practice development and research with people with learning disabilities**", *Tizard Learning Disability Review*. Emerald, pp. 173-180. doi: 10.1108/TLDR-12-2019-0040
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