

Transcript for Safeguarding Children and Young People Webinar

[Welcome]

Hello and welcome to our Safeguarding Children and Young People webinar. This webinar is two and a half hours long and we'll have two five-minute breaks within that time. You should have received a link to the PDF of the slides and the handbook for this course, you will need those throughout the discussion so please have them ready. There are accessible formats available, so please let the host or the co-host know if you would like those. Ideally, we would like your webcams enabled, but we ask that you keep microphones muted unless you are participating in a discussion or asking a question. We do this because we want to minimise the distractions that background noise could create for people, but we also want to be able to see that everyone is here and engaged. We understand there might be occasions when you would prefer to have the webcam off. For example, if you're having problems with your internet speed, or you've got children who need your attention.

Just to say that information shared can be of a sensitive nature, and some of the content is not appropriate for children, so if children are in

the room, please consider using headphones and angling your screen away. Also, if you're happy to share any of your own experiences, please bear in mind confidentiality. We ask that you anonymise any examples, experiences or stories that you share.

Safeguarding can be a difficult topic, so please take care of yourself during this training, many of us in this group will have personal experience of harm and abuse. This may even be that the training makes you realise this for the very first time, we know that around two in five people experience abuse at some point in their lives, and that childhood abuse is often not disclosed for more than 20 years. Your wellbeing takes priority. If you need to, feel free to take a break and turn off your camera. Consider who you can reach out to for support and remember you can privately message our co-host at any time.

The chat facility can be used throughout for questions and for participation in activities. The co-host might answer the question, signpost you to further sources, or hold on to that question for the next pause and share it with the host. If a question is not answered, or a question is about a very specific issue, please do contact our safeguarding help-centre by email or phone.

Thank you for choosing Thirtyone:eight for your training today. Our motivation is to equip, empower and encourage you in your safeguarding responsibilities. As we start, we just want to recognise the time, care and commitment you're investing in your church, charity or organisation by attending this training and in everything that you do, thank you. I hope that the message you get today is that you never have to do safeguarding alone. As I mentioned already, we have a help-centre; you may want to pop contact details into your phone now if you don't already have them to hand. The help-centre is there to support you with any questions regarding safeguarding. It might be queries about policy, or you might have a live situation which you'd value talking over with us and getting advice. The helpline operates from 7am till midnight, seven days a week, 365 days a year, or 9am to 5pm Monday to Friday for those regular questions about policies, guidance and processes, and the out of hours service for any more immediate concerns.

Everyone here today will have a different motivation for engaging with safeguarding. For us at Thirtyone:eight, it comes from our passionate belief that safeguarding is close to God's heart. Our name comes from a verse in the Bible, Proverbs 31:8 that says, "Speak out on behalf of the voiceless and for the rights of all who are vulnerable." When we take care of the vulnerable, we are fulfilling God's call. If you're part of

another faith group, you may well recognise this call from your own sacred scripts. Or you might be part of a charity that has care and dignity for the vulnerable at its heart. Whatever your motivation, we want to equip you.

[Introduction]

Our course is framed using the five R's of safeguarding. In each module, we will explore one of these essential elements of safeguarding children and young people. First, we'll recognise types of abuse, signs and indicators and the scope of the safeguarding task. Secondly, we will discuss how to respond well when we are concerned about the safety of a child or the behaviour of another adult. Thirdly, we'll seek to understand how and when to record concerns and why this is so important. Fourthly, we will identify who we need to report to when we have concerns. And finally, we will explore the importance of reflection as we seek to build a healthy safeguarding culture.

Some of us find it helpful to know what's coming up, so here is just a little bit more in terms of what to expect. The first two modules are much longer than the final three. Much of our learning in this live webinar will come through discussions and scenarios. Your handbook has a lot of information in it and expands on what we will discuss together. It's designed to be an ongoing resource to support you. There is a full

transcript of the course available so you're free to make notes or not, with that in mind.

This is a 4 UK nations friendly course, the principles for safeguarding children and young people that we cover throughout the webinar are applicable across all four nations, and we will flag anything that is nation specific. There are also nation specific sections in the handbook outlining key practice, models, terminology and legislation.

All four UK nations have legislation and guidance that recognise the rights of children and young people to live free from abuse and neglect and the responsibility of all of us who work with children and young people to safeguard them.

It would be good to hear from you now. Without overthinking it, how would you answer the question: What is safeguarding?

Thank you for your contributions. Yes, it's about protection, and prevention as well as response. It's about safety, it's positive and enables people to thrive. Safeguarding is a duty under the law in all UK nations, and it's necessary in all organisations and communities. There are no exceptions, we all need to safeguard those around us who are at risk of harm or abuse.

The other part of our course title is 'children and young people'. So, what do we mean by that? In short, this is anyone up to 18 years of age.

Children of all ages have rights and protections under UK law.

Lots of legislation and guidance just uses the word 'children' to refer to anyone under 18. We've included young people in our title to recognise that the lives of teenagers are different from the lives of younger children, and for those of you working with youth groups to know that this training is for you too.

Some other ages and stages are also relevant. Mental Capacity laws in the UK apply to anyone over the age of 16, there's an appendix in your handbook to explain more about mental (in)capacity. This means that 16- and 17-year-olds are presumed capable of making their own decisions, and there are laws in place to support and protect those who don't.

The age of criminal responsibility is 10 years old in Northern Ireland, England and Wales, and it's 12 years old in Scotland, meaning that children of these ages and older can be convicted of crimes.

In the UK, a child under the age of 18 is considered a minor, so we generally don't need their consent to report safeguarding concerns to the police or social services. Your Safeguarding Lead can advise you about

how to keep the child at the centre of any concerns and ensure their voice is heard, and also when to involve parents and carers.

Why does safeguarding children and young people matter?

As we start, I'd like you to imagine your own context for a moment. How many children and young people do you work with each week? Keep them in mind as we go through.

It can be painful to acknowledge how common abuse is, but it is also important. Every year, the NSPCC produces briefings of the different types of abuse experienced by children in the UK, and for 2024 to 2025 the figures showed that, in the UK, 1 in 14 children have been physically abused. 1 in 5 have experienced emotional abuse, 1 in 10 have experienced neglect, and 1 in 20 have experienced sexual abuse.

Remember also that when we work from statistics, we only have the data of abuse that has been reported, so these numbers won't reflect the children who can't or don't report what's happened to them. Several studies show that this number will be far greater than the reports we have. What does this mean for you? Well, if you work with more than 5 children, the statistics indicate one of them may experience abuse. So, awareness and knowing what to do if you're worried is really important.

Our second image on the screen represents the fact that those who wish to perpetrate harm will often target charities and faith groups as a means of gaining access to vulnerable people like children. We need to balance having an open door for all and a great welcome with strong safeguarding practices to protect children and young people and other vulnerable groups in our communities

And finally, the image of the gavel represents the law. All our organisations have a legal duty to safeguard children and young people. Safeguarding laws in all four UK nations define types of harm and abuse, lay out the roles of different statutory agencies and give expectations for all organisations working with children in terms of safely recruiting staff and volunteers and reporting concerns. If you're already aware of the relevant laws in your nation, please share these in the chat. You will also find names of key laws and national guidance in your handbook.

[Module 1: Recognise]

Let's begin our 5 'R' modules now. Our first 'R' is 'Recognise'.

Recognising that a child may be experiencing harm is the first step in safeguarding them. So that's where we'll start.

Throughout the course, we'll hear from several victim-survivors of abuse, it's really important to have victim-survivors at the centre of our thinking

around safeguarding and have their voices central to our training as well.

This child says, "I wanted them all to notice and ask what was going on."

This quote summarises why recognising is so important. Sometimes the caring curiosity of a trusted person is what enables a child to reach safety and support.

On the screen now we've got the different categories of abuse as defined in legislation around safeguarding children and young people in the UK. The first four are sometimes given the acronym 'PENS': physical abuse, emotional abuse, neglect and sexual abuse. These four are recognised for children across the UK. Financial abuse is an additional category for children only in Welsh law. Welsh legislation doesn't separate adult and child safeguarding. Rather, it talks of safeguarding people. One example where children could be affected by financial abuse is when benefits or disability payments are being withheld or not spent on the child.

We're going to do a quick quiz together. It's multiple choice and the answers are anonymous, so please have a go. Can you identify the type of abuse or harm from the definition given? When you've answered all four, please just press 'submit'.

Our first one is: not meeting a child's basic physical, emotional, educational or medical needs, or failing to protect them from harm.

Well done to those of you who recognised that this describes neglect.

Secondly: deliberately hurting a child and causing harm to their body, for example, by hitting, kicking, burning, shaking, poisoning or any other form of non-accidental harm. This one describes physical abuse.

Thirdly: forcing or persuading a child to take part in sexual activities. This may involve physical contact or non-contact abuse and can also take place online. As many of you recognised, that describes sexual abuse.

And then finally: ongoing emotional ill treatment that can have a severe negative effect on a child's development, for example, rejection, frightening, humiliating a child, or exposing them to the ill treatment of others. And again, well done if you recognised that that describes emotional abuse or harm.

These definitions are based on information drawn from laws across all four nations. There's further examples and definitions as laid out in national legislation and guidance in the nation-specific sections of your handbook.

So how could we recognise that a child that we know is experiencing one of these forms of harm and abuse? One of the most important things to recognise are signs and indicators, and that's what we're going to discuss now.

Changes are one of the most important indicators of abuse and neglect.

This could be a change in behaviour. Perhaps a child seems more withdrawn or nervous or watchful than normal. They may be displaying some of the behaviours that they have experienced or observed. So, you may notice that they're more aggressive or angry threatening, or they display sexualised behaviour and language.

You might notice a change in appearance. This is also significant. This could be deteriorating personal care, clothes that are soiled or ill-fitting, a child who's looking exhausted, for example. Also, suddenly having a lot more expensive items or clothes could be an indicator of exploitation or grooming, where children are often given money or gifts by those who are grooming them or receiving payment for exploitation. Abuse affects relationships as well. Pay attention to a child who seems fearful of a particular person or who's becoming over reliant on a relationship above all others. We might recognise changes within friendships, relationships with teachers or other adults. Relationships of all kinds are difficult when trust is broken, as it is when a child is experiencing abuse.

Sometimes we can see physical signs of abuse. This could be injuries, cuts, burns, bruises, a child finding it difficult to sit or stand. Of course, we know that accidental injuries happen as part of a normal, non-abusive childhood. But if you're worried, pass on your concern.

Particular attention should be paid to injuries to non-mobile babies or other non-mobile children, as well as injuries to soft and hidden parts of the body. Also be aware of explanations for injuries that are inconsistent with what we see, or we believe there's been a lack of medical attention sought.

We might have an indication that a child isn't safe because of a comment they make. Children don't always realise that what they're experiencing is abuse and neglect. Pay attention to comments that make you wonder, as well as those clear disclosures of abuse. This could be the way that a child talks about themselves or another person, the words that they use or their responses to situations.

Our next point in terms of signs and indicators, is absence. Many children who are experiencing physical abuse are kept away from clubs and faith groups while injuries heal. Adolescents who are being exploited often go missing for periods of time. This is complex, and many of our organisations don't have set patterns for attendance but do pay attention to your instincts and pass on concerns.

And finally, interactions. You might observe, overhear or otherwise notice interactions that cause you concern. It could be the way that parents or carers interact with a child, or the behaviour of another staff member or volunteer. You might notice something between children as well.

It can be hard to know how to respond when you don't have a full picture, but, essentially, if you are wondering or worried, pass on your concern.

We're going to apply some of that knowledge now about the categories of abuse and the signs and indicators to some case scenarios. You're going to go into breakout rooms to have discussions in smaller groups.

Please could one person can read the scenario and someone else volunteer to bring some feedback to the main group when you return?

During your discussion, just be curious. What do you notice? The questions for you to consider are: What are your concerns; are there any clues that the child might be at risk? And secondly, can you identify the category or categories of abuse?

You'll have seven minutes with your group. The final minute will be a one-minute countdown timer. [Note for the transcript: In a live session, you'll discuss three to four of these situations but for this transcript, we'll review all eight. We encourage delegates to use the situations not discussed during the live sessions as a team exercise.]

Scenario one is about Josh. Josh is 12. He comes to your youth group every Wednesday in term time. He started a new school a few months ago, and recently, you've noticed some changes. He dresses differently and he seems to have a new pair of trainers most weeks. The way he

interacts has become a bit more aggressive. You had to talk to him a couple of weeks ago after he shouted at one of the other young people for touching his phone. He often seems tense and tired. Last night, he came in with his cap pulled low and his hood up. As the evening went on, he relaxed and joined in the games. When his hood came down, you noticed a cut and bruise on the side of his face. When you ask him about it, he says, "It's nothing, just man life".

So, what concerns and clues might you notice for Josh?

We have a change in his appearance. He's got new clothes, new trainers, and you may be wondering where those have come from. You've noticed a change in his behaviour as well. He's become more aggressive. You could wonder why he was angry about somebody touching his phone. We've got an unexplained injury as well. You could wonder if he's dressing to disguise this injury.

What categories of abuse could we be considering here? When we have an injury, we're aware that a child might be experiencing physical abuse. It's important to note that injuries look different on different skin tones. Consider now, would you recognise bruises and other injuries as they appear on the skin of all the children and young people that you work with? If not because of unfamiliarity, take some time to educate yourself on this so that you don't miss anything.

You may have noticed as well that there are some indications of exploitation for Josh. There's more information about this in your handbook, in the required reading section. In Northern Ireland, child criminal exploitation is also related to paramilitary groups, with children and young people being threatened with punishments, financial extortion and family reprisals. Children could be coerced into participating in acts of violence. There's also a section around this in that required reading part of your handbook, too.

Scenario two is about Awusi. Awusi is 15. She comes to your drop-in homework club with a couple of friends and her younger siblings. When she comes to show you her work, you notice long, red marks on the palms of her hands. You ask her what happened? And she says, "My father is very strict, if we step out of line, we get caned. You should have seen my brother last week!"

What clues and concerns might we have for Awusi? We've got the marks on Awusi's hands and her comments as well: "If we step out of line, we get caned". We might also be concerned about what happened to her brother last week, why didn't we see him? Is he one of the siblings who would normally come? Has he been kept at home while injuries heal? We could wonder about his absence.

And the category of abuse that we're thinking about here is physical abuse. Obviously, in this scenario, the disclosure of harm is very clear. In real life, this may not be the case, especially when we're working across languages and cultures. Just something to note, as we're talking about it, on physical abuse versus physical discipline. The law in the UK varies on this. In Scotland and Wales, all physical chastisement is illegal. England and Northern Ireland still have a 'reasonable physical chastisement' defence. Physical discipline must not exceed the law. In England and Northern Ireland, this means that physical discipline is of your own child, not using an implement, not leaving a mark and not being a repeated action. What Awusi is describing is illegal across the UK.

This case scenario is based on a serious case review. Our faith groups and community organisations have a responsibility to record and report indicators of harm and abuse. We may also have opportunities to raise awareness with our communities when UK law may differ from religious and cultural norms and practices. There's more information in the required reading section of your handbook around physical discipline.

Our third scenario is about Maeve and Nora. Maeve and Nora are four-year-old twins. They're part of your kids' group on Sunday mornings. This morning, they look really tired, and Nora actually fell asleep during

story time. During the next activity, ask them how they're doing and why they're so tired. They expressed to you that they couldn't sleep last night because of the 'shouting and crashing'. Maeve starts to cry. She says, "I don't like it. It's scary. Mommy's worried. I'm worried."

So, what concerns do we have for Maeve and Nora? What clues do we have that all might not be well? They both look really tired, so we're noticing a change in their appearance. Nora actually fell asleep. And you've got their comments as well, that they couldn't sleep last night, that there was shouting and crashing. Maeve's words are important: "I don't like it. It's scary. Mommy's worried. I'm worried."

We might be worried that Maeve and Nora are experiencing emotional harm or abuse. We've got some signs and indicators that there may be domestic abuse in this household, although it could be other things. But it is relevant to note that children who live in a home where there is domestic abuse will be experiencing emotional harm, even if the abuse is not perpetrated directly against them. The stress and fear of living in this environment is harmful to a child in the moment, and can have a long term negative impact on their developing body and brain.

Parents in the home may also be less able to act as protective factors in a child's life. There is support available to families living with domestic

abuse. By passing on our concerns, we can safeguard children and enable families to access this.

Scenario four is about Charles. Charles is nine years old. He's part of your weekly children's group. He has an epilepsy diagnosis, and you think he also may be neurodivergent, but his parents have never mentioned this. You've noticed that his parents don't seem very warm towards him, but you know that everyone parents differently, so you haven't said anything. However, his younger brother Jonathan, has now joined the group, and their attitude towards him is completely different. At pick up times, they greet him with a smile and a hug and ask if he's had fun, their behaviour towards Charles hasn't changed. Today, Charles notices you looking over when they get dropped off. He shrugs and says, "It's because I've got the evil in me. He's a good boy."

So, what are your concerns and what clues do you have that Charles may not be okay?

You might be concerned that his parents don't seem warm towards him, but you recognise that people are all different. What makes it more apparent is that the difference in attitude to the younger brother.

We've got Charles's comments as well. "I've got the evil in me". Where has he heard that from? And what might that be indicating?

At the beginning of that scenario, we mentioned that Charles has an epilepsy diagnosis and that we're wondering if he may be neurodivergent. Sadly, children with disabilities are statistically more likely to experience abuse and neglect.

The categories of harm for Charles may be emotional harm and abuse, with that messaging he is getting about himself and the seeming lack of love and care from his parents. We might be wondering about neglect as well. You may or may not be familiar with the term 'Child Abuse linked to Faith and Belief'. There's more about this in your handbook, but essentially, this refers to harmful practices that are motivated by a particular faith, culture or belief system. Some examples include female genital mutilation, sometimes known as FGM, breast ironing and child witch accusations. Children who are thought to be witches or possessed by devils or evil spirits can be subject to physical, sexual and emotional harm and neglect in order to 'drive the evil out'. Children with epilepsy, disabilities and children who are not neurodivergent are at greater risk of this. There's further information and resources in your handbook around this.

Scenario five is about Logan. Logan is three. Last year, he came to your food bank each week with his mum. He was a lively, smiley toddler. You haven't seen him for a while, but today, he came in with an older woman

that you don't recognise, and you can't believe the difference in him. He doesn't make eye contact with you or smile and wave like he used to. He just stares ahead. His clothes and his wheelchair are stained and dirty, and you notice he isn't wearing his glasses. You go over to say hi and introduce yourself to the woman with Logan. She says, "Yeah, he's my daughter's but I'm lumbered with him all the time now that she's working. Life's all about him these days."

So, what are your concerns and what are the clues that Logan might not be okay? You haven't seen him for a while, and you've noticed lots of changes. He doesn't make eye contact or smile or wave, and those were things he used to do. You've noticed changes in the appearance of his clothes and his wheelchair. He also isn't wearing his glasses.

We've got his grandmother's comments saying that she's 'lumbered' with him, and that she also says that this is 'all the time'. We might be wondering, where and when is mum working? Where is Logan sleeping? Does he still see his mum?

Categories of abuse that may be indicated are potentially neglect and also emotional harm. We know that d/Deaf and children and children with disabilities are more vulnerable to abuse and neglect than their peers. They may also be less able to report their experiences due to communication barriers and being more reliant on adult carers.

The NSPCC and Childline report that concerns that a child is experiencing neglect is the most common reason for adults to call their helpline, but the least common reason for children to call. This potentially indicates that children don't always recognise that they are experiencing neglect, making it all the more important for adults to recognise, respond, record and report.

Our sixth scenario is about Layla-Rose. Layla-Rose is five months old. Her child minder, Angie, brings her to your stay and play group with another couple of children she looks after. Layla-Rose is often asleep in her pushchair when the group is on. Today, she wakes up and starts crying. Angie is busy with the toddlers, so you offer to pick her up, and Angie agrees. When you lift off her blanket, you notice marks on the inside of her arms and a bruise on the side of her head. When you ask Angie what happened, she says her parents said that she had an accident at the weekend, and that there have been a few of those recently.

So, what are your concerns? What clues do you have that Layla-Rose may not be safe and well? First of all, she's got some injuries. There are marks on the inside of her arms, and a bruise on the side of her head. Is Layla-Rose mobile yet, at five months? If not, how has she had an accident? We could be thinking about the placement of the injuries as

well. There are marks on the inside of her arms, a soft part of her body that's not easily injured in an accident.

You've also got Angie's comments that there have been a few accidents recently. As an organisation, we don't have contact with the parents as she comes to our group with Angie. We may be wondering, where is Layla-Rose receiving these injuries? Is it at home as Angie says? Who else is in that home?

For the category, or categories of abuse, our main concern is physical abuse, we may also wonder about neglect.

Injuries to non-mobile babies, and marks and bruises on the inside of the arms are more indicative of abusive than accidental injuries. As we've said previously, if you notice injuries that aren't consistent with the explanation that somebody gives, this is also a concern. Multiple injuries to the same child and a lack of medical attention are also concerning.

Remember again that bruises and injuries appear differently on different skin tones.

Scenario seven is about Halima. Halima is eight. She attends your girls' group after school twice a week. She's a quiet child, and you don't know much about her but, until recently, she always seemed content and happy and plays regularly with two other girls. For the last couple of

sessions, she's been tearful and withdrawn. She goes to the bathroom frequently, staying for a while, and isn't responding to her friends in the same way. You mentioned what you've noticed to a colleague, and she says that she knows that Halima's aunt and teenage cousin have recently moved into the family home, so maybe she's struggling to adjust the change.

So, what are your concerns and what clues might you have that Halima may not be safe and well? First of all, we've got that change in behaviour and emotional state, in that Halima is tearful and withdrawn. You've also noticed those longer, frequent visits to the bathroom. There has also been a change in her relationships as she isn't responding to her friends in the same way. We've also got the information that her aunt and her teenage cousin have recently moved into the family home.

There's a whole range of categories of harm and abuse that could be indicated by the changes we've noticed in Halima. We might wonder about sexual abuse, it could also be emotional harm that she's experiencing. If Halima's being harmed by a teenage cousin, this is an example of child-on-child abuse. We have some indicators that Halima might have experienced or be at risk of experiencing female genital mutilation. We don't know what's happening for Halima, but the changes

that we're noticing do cause us concern, and our concern should be passed on to our Safeguarding Lead.

And finally, in scenario eight, we have Dylan. Dylan's 15. He's part of your summer sports club. He loves all sport, and he's a gifted athlete. At the start of the program, he was confident and chatty. In the breaks, he'd check his phone quite a bit, but he always looked happy, almost excited, when he did this. You've noticed that in the last week he's become more withdrawn, and when he checks his phone, he looks worried and stressed. Today, he helps you to tidy up the equipment at the end of the session, you mentioned to him that you've noticed he seems different lately, and ask if everything's okay. He says, "Oh, I can't tell you. It's too shameful. I've got myself into a bit of a mess. It's okay. I'll work it out."

So, what concerns do you have for Dylan? What are the clues that all might not be well? We've noticed that change in him, haven't we, that he's become withdrawn, that he looks worried and stressed when he's checking his phone. There are also the comments he's made: "I can't tell you, it's too shameful. I've got myself into a bit of a mess."

Again, we've got a range of categories that this could be. Is he experiencing sexual harm or abuse, or perhaps emotional harm?

There're two emerging and evolving forms of harms that could be indicated by what we notice of Dylan, he could be experiencing

exploitation, or something called 'sextortion'. Sextortion is where a child is tricked into sending a nude or suggestive image, and then the perpetrator demands money or more images, threatening to send the image to all of the child's contacts if they don't comply. It's a type of organised crime that's growing exponentially at the moment. 14- to 17-year-old boys are the primary targets for sextortion involving money, and girls for sextortion demanding more images.

In a US study, 85% of sextortion victims cited shame and embarrassment as their reason for not getting help, and the same study indicated that one in two caregivers would ultimately blame the victim, which could explain why young people experiencing this can struggle to reach out for help. There's more information about this in your handbook too.

As we've recognised in those scenarios, the four main categories of harm and abuse can be experienced by children in a variety of ways. What other ways are you aware of that children might experience harm and abuse? Is there anything that is particularly prevalent in your local area? The required reading section in your handbook looks in more detail at several emerging and evolving forms of harm and abuse with links to some helpful resources.

That section includes: affluent neglect; child abuse linked to faith or belief; child exploitation, both sexual and criminal; child on child abuse; domestic abuse, that children can experience in their home and young people in their own relationships; fabricated or induced illness and perplexing presentations; honour based violence and abuse; modern day slavery and trafficking; online harm and abuse; paramilitarism, physical discipline; radicalisation and sextortion.

If we talked through all of these in detail here, it would take too much of our session, so it's really important that you take some time to review these after the webinar, so you're equipped to recognise and respond to them.

Now we're going to consider the impact of a child's wider environment and aspects of their identity and experiences on their safety and wellbeing. We want to encourage you to take a contextual approach to safeguarding children and young people. A contextual approach to safeguarding means recognising that children and young people are influenced by a variety of environments, not just the place where they spend most of their day, like their home, school or nursery.

Other environments might include online spaces, their neighbourhoods, faith communities and social situations. Risks can arise in any of these settings, but these settings can also provide protection.

For example, imagine a child who is being pressured by older children at school to carry drugs for a local gang. Now add into that child's context that there is domestic abuse in their home and their youth group has recently closed. That child will have fewer protective factors compared to another child with more trusted adults around. The threat at school is directly affecting them, but their overall environment also plays a role in their wellbeing.

This contextual approach is part of many national safeguarding frame and frameworks like the UNOCINI framework in Northern Ireland and the SHANARRI well-being indicators in Scotland, and it's woven through the Social Services and Wellbeing Wales Act too. They all consider various aspects of a child's life.

What does this mean for us? Firstly, we encourage you to be curious. Be ready to recognise signs that harm might be happening in different areas of a child's life. Secondly, be broad. Understand that harm can occur outside the home or school. Also consider whether there are any siblings or others who might be at risk when we have concerns about a child.

Thirdly, pass on your concerns. Share any concerns with your Safeguarding Lead, including those about the child's wider context, so we can better protect them.

We can all recognise the vulnerability associated with each age and stage of childhood, from the total dependence of babyhood to the independence and exploration of adolescence, and everything in between. We also know that any child can experience abuse. There are also particular experiences and identities that make a child even more vulnerable than their peers and therefore at greater risk of harm.

I wonder if you can think of any. Please unmute or type into the chat.

Thank you. So, we recognised that care experience, disability, neurodiversity, adverse childhood experiences, seeking asylum and being a refugee, experiencing racism, living in poverty, having an LGBTQ+ identity or perceived identity, and being unable to communicate in the dominant form may all increase vulnerability. It's important to recognise these factors and identities that can increase risk, so we can have a greater awareness and better safeguard these children.

We've now come to the end of our 'recognise' section and we have covered a lot! At the end of each module, we'll draw out one key action for you to take to make your activities safer for children and young people. For this module your key action is to familiarise yourself with the types of harm and signs and indicators so you can recognise when a child may be experiencing, or risk of experiencing, harm. Your handbook is there to support you in this. When we recognise harm and abuse, we

can respond well, and that's what we'll explore in module two, after our break.

[Break 1]

Okay, welcome back. I hope you've had a good break.

[Module 2: Respond]

Our second 'R' is 'Respond'. After we recognise that a child may be experiencing abuse, we need to respond well. So, let's explore module two.

Our victim-survivor voice for this module says, "If just one person I trusted had taken the time to sit with me and ask, it might have taken a while, but I would have told them." This quote comes from a victim survivor who contributed to a recent Child Safeguarding Practice Review Panel. The way we respond can mean a child can reach safety, or not, and so our responses really matter.

For each of these responses we're going to read now, I'd like you to just put your thumb up if you think that this is a helpful way to respond if a child tells you that they're experiencing harm and abuse.

And put your thumb down if you think that this is an unhelpful way to respond.

Okay. Number one is, "Thank you for telling me." This is important. It's helpful that we validate the child for coming to talk to us.

Number two is, "I won't tell anyone else." It's great to recognise this is not helpful because it's unlikely to be true. If we're worried that a child is experiencing harm and abuse, we will need to pass this on to our Safeguarding Lead, and so we want to be honest with a child and not break their trust by promising we can keep it a secret.

Number three, "What did you do to make them do that?" That is unhelpful. Often children are blamed for what's happened to them, both by the person who's harmed them and by others. And it's really important that we do the opposite in our response.

Number four is similar: "Well, what do you expect if you behave that way?" Again, that is unhelpful. A child's behaviour doesn't mean that they should experience abuse.

Number five is, "You were right to talk to me about this." That is helpful. We want to affirm that this was the right thing to do. Children may well be doubting their decision to tell somebody, and we can reassure them.

Number six, "It wasn't your fault." Again, this is helpful. Children are often told that it is their fault, and we need to dispel this for them.

The next one, "I'm sure that they didn't really mean it." That is unhelpful.

We can sometimes be tempted to minimise what's happened or to defend the person, especially if it's somebody who we know well. But it's important that we honour the child's experience and not try to find excuses for what's happened to them.

"Are you sure that's true?" That's unhelpful. It's not our role to decide whether something is true or not. It's simply to pass on to our Safeguarding Lead, and indicating that we don't believe the child can be harmful and may silence them in future.

Next one, "Is there anyone you'd like me to call?" This is helpful. We want to keep the child at the centre of our safeguarding process, finding out what they would like to happen so we can do all we can to support them and increase their sense of safety.

Next one. "How can I support you with this?" This is helpful. As with the previous one, we want to find out what we can do to support that child.

Next one, "You need to forgive and forget." This is unhelpful. We can't force a child to forgive. We don't want to silence them. We want to help them seek justice.

And finally, “This person is our Safeguarding Lead. They can help us.”

This is helpful. We want to tell the child what our process is and how we're there to support them in our organisation.

If a child or a young person tells you that they have experienced or are experiencing, abuse, the way that you respond can have a powerful impact on them. Here are some practical do's and don'ts for responding well to a child or young person coming to talk to us about abuse that they're experiencing.

Do, be caring and curious. As the quote on an earlier slide showed sometimes just caring enough to ask, “Is everything okay?” is enough to encourage a child to tell you what they're experiencing.

Do, listen actively. Some of the biggest gifts we can give someone who's telling us something painful are our time, our presence and our attention. Show you are listening through body language, facial expressions and lack of distractions. Listen well and let them speak.

Do, keep calm. We communicate with our body language and tone of voice that we are emotionally available to a child, even if inside we don't feel calm at all. It's important we don't show any disbelief or disgust or rush a child as this could close the conversation down.

You may need support for yourself after discovering that a child has been experiencing abuse, it can be really distressing, but our own wellbeing needs to be managed with support from a safe person at another time, rather than becoming something that the child takes on.

Finally, do, reassure and reaffirm. Telling someone that you're being abused is scary. Reassure the child that they've done the right thing by telling you, that they are valuable, and that they have the right to be safe.

And now some don'ts:

Don't promise secrecy. Confidentiality means only telling the people who need to know at the time they need to know it. We can reassure a child that we won't tell all their friends, we won't tell the perpetrator or any unnecessary person, but we may have to pass on our concern to the Safeguarding Lead so that they and others can be kept safe.

Don't excuse, minimise or blame. It can be tempting to try and make a child feel better by downplaying their experience, to make it seem smaller or more reasonable. However, this may inadvertently make the child feel that they should just put up with it, or that they have made a mistake by seeking help. Perpetrators often tell children what is happening to them is their own fault. This is a powerful message that's hard to shake. Even if we can see problems in a child's actions, abuse

and neglect is never their fault, and we must be careful not to give that impression in our response,

Don't ask leading questions or try to investigate the situation. This is not our role, and we can compromise any official investigations if we respond inappropriately. Another reason why it's really important to avoid leading questions is that some neurodevelopmental conditions, particularly Foetal Alcohol Spectrum Disorder, otherwise known as FASD, can affect memory retrieval. Children's brains fill in the gaps in their memories with other information that they see or hear, and false memories are created that feel as real to the child as what actually happened.

If we ask leading questions, we might contribute to the creation of false memories, causing the child to appear to be lying, or preventing a just outcome. There's more information about FASD in your handbook.

Also, don't try to solve the child's situation all by yourself. Seek support from your Safeguarding Lead or from the emergency services if it is at that level of risk.

We've just considered how to respond when a child comes to us with a concern. However, this is not the only time we're called on to respond. Sometimes we need to respond to other signs and indicators that a child may be at risk.

As you hear the following scenario, just think about this question: What, if any, are your concerns about this situation?

You volunteer at your organisation's children's group. Recently, you've noticed that the way one of the other volunteers interacts with the children makes you feel uncomfortable. It's probably nothing. The volunteer is popular with the children, and your team leader gets on with them very well, so maybe it's just a different approach. They seem to spend a lot of time with a couple of the quieter children in the group. They get really close to these children during activities, so their bodies are touching, and always make a beeline for them at the end of the session, helping them to put their coats on and things like that. This week, you heard them offer to the parents of one of the children to take their child home after the group finished. You know that things are tough for this family at the moment. They're probably just being helpful, but you know that it says in your code of conduct that leaders shouldn't give children lifts alone.

So, do you have any concerns?

You may be concerned that this leader is identifying particular children and that these children are the quieter ones, one of whom is having a tough time at home. You might be concerned about the unnecessary

physical contact, or that they're offering to take a child home, which goes against the code of conduct.

We don't know what the situation is here, but when we have concerns, it's important that we don't wait to be sure. We don't investigate, we just pass on the concerns that we notice to our Safeguarding Lead,

This scenario has some signs and indicators of grooming. Grooming is a feature of many experiences of abuse. It describes the process of forming a positive relationship with someone in order to later exploit or abuse them. Children can be groomed for direct abuse by an individual, or for radicalisation or criminal and sexual exploitation by gangs.

Perpetrators will specifically choose a child or young person. They will take time to identify children or young people with vulnerabilities. The perpetrator or perpetrators will then use or exploit this vulnerability to their advantage. Groomers will seek to develop and build trust with the child or young person. They will often also groom those who care for or support the child in their family, in their school, in their church or in their community, in order to gain more prolonged and frequent access to the child.

In online grooming, contact might start on one platform but build to multiple platforms and transfer from public forums to private chats. The number of messages will increase as time goes on and boundaries will

be tested and pushed in terms of the content of messages. Online grooming is often a much more rapid process than in person abuse.

In face-to-face relationships, when a child is being groomed for sexual abuse or exploitation, physical contact will increase over time to desensitise the child or young person to touch and to push their body boundaries. Non-sexual physical touch is often the final stage before abuse occurs.

Groomers might also try to isolate children from their friends and family, making them feel dependent on the person or people grooming them instead and giving that individual or group power and control over them. We see this approach of isolation particularly in the grooming of adolescents.

So again, just to reiterate, if you ever have a concern regarding someone's behaviour towards a child or young person, it is important you record these concerns and pass them to the Safeguarding Lead. Record and report as many instances as you identify. If behaviour hasn't changed or the concern hasn't gone away, keep recording and reporting. This will equip your Safeguarding Lead, and possibly statutory agencies, with a fuller picture and may enable them to act on the child's behalf.

Building on that scenario, we're going to consider responding to the abuse of a position of trust. Sadly, we know that those who wish to

abuse children will often seek out roles where they have a position of trust because of the access and power it gives them.

A shocking finding of the Independent Inquiry into Child Sexual Abuse was that, and this is a quote from the final report, “In religious settings, perpetrators were able to shelter behind the moral standing of the institution to deflect allegations, inhibit investigations and belittle survivors.”

In the apology to victims following the Historical Institutional Abuse Inquiry in Northern Ireland, Minister Naomi Long stated: “There were children who were sexually abused by staff, male and female, and by visitors. The perpetrators included employees, members of religious orders and priests. Institutions, both state and voluntary, failed to stop the abuse.”

Position of Trust is a legal term. It refers to certain roles and settings where an adult has regular and direct contact with children. It's against the law for someone in a Position of Trust to engage in sexual activity with a child in their care, even if that child is over the age of consent - so 16 or 17. Examples of Positions of Trust include teachers, care workers, youth justice workers, social workers and doctors. In England, Wales and Northern Ireland, changes to the law made in 2022 extend the definition to include faith group leaders and sports coaches.

There is also a more general meaning of the term 'position of trust', which we all need to be aware of. Because you work for your church, your charity or your organisation, a child and their family might feel you are trustworthy because they trust your organisation. We need to take this seriously and be thoughtful and safe in our actions with children and young people. It is also vital that we pass on any concerns we have about somebody else's interaction with the children and young people in their care.

Responding well to concerns about abuse is essential, but it isn't easy. We can be scared of getting it wrong and causing upset and trouble for an individual, family or our organisation. This might be particularly concerning for you if you have a disability or a background that impacts communication. Was that really what they said? Have I understood that properly? We don't want to be judgmental, either do we? We live in a multicultural society where families live and parent differently. There's a broad and diverse range of healthy expressions of family life which should be celebrated and welcomed, but our awareness of this shouldn't stop us acting to safeguard a child.

We can be worried about how passing on concerns may damage existing relationships with the child who may have spoken to us, or with their family or other members of our community.

There may also be challenging power dynamics to navigate. If a concern implicates a leader, someone in authority over you, or someone widely loved and respected, responding well can be particularly challenging.

Acknowledging that a child may be experiencing harm is painful. We don't want to believe it, and it can be more comfortable to ignore or find another explanation for the changes that we notice. This can particularly be true if we know the family well.

However, children and young people have the right to be safe, and we have the responsibility to act to safeguard them.

We need to respond well, because abuse can affect all aspects of a child's life, and these effects can be long lasting. A child may sustain a physical injury, and there are links between abuse in childhood and self-harm later in life, which can be risky. Children may experience emotional impacts, such as nightmares, intrusive thoughts, triggers, flashbacks, a damaged sense of self, depression and anxiety.

Abuse can have a social impact as it can damage a child's ability to trust, make friends, have relationships and respond to authority figures. It can affect a child's ability to focus in school, and therefore have a long term impact on their future.

There are also more complex, long-term impacts. You may have come across the term ACEs before. It stands for Adverse Childhood Experiences. Experiencing abuse in childhood is an Adverse Childhood Experience. Research into ACEs demonstrates that long term or extreme stress in childhood has a toxic impact on a growing body and brain. Studies show that these experiences are linked to increased rates of heart disease, diabetes and cancer, as well as the more known about mental and emotional impacts. There's a lot more information about this in the first appendix of your handbook.

Trauma describes a response to a situation in which we felt unsafe. Trauma can affect behaviour and responses to situations long after a traumatic event happens. It is important to have an awareness of the impact of trauma so we can create safe and trusted environments for the children in our care and avoid causing further harm.

The effects of abuse are real. They can have a huge impact on a child's life. It's important that we acknowledge this. However, there is also research to show that a good response, early intervention and safe relationships with adults can limit the long-term damage that abuse can cause. This is hopeful, and it's another reason why we want to equip and empower everyone involved in a child's life to recognise abuse and act to protect them.

Our key action for this second module is a question for you to consider: how do you, or how can you, keep the child at the centre of your responses? Reflect on that for a moment and make it your priority. The child's safety and wellbeing is our priority. We can keep them at the centre by listening actively, responding calmly and without judgment when we speak about what they're experiencing. There's an appendix in your handbook that explores child-centred safeguarding further.

Keeping the child at the centre also means responding to our concerns about an adult's behaviour by recording and reporting what we've seen. We'll look at these actions in our next two modules.

[Module 3: Record]

Clear and accurate safeguarding records are essential for enabling a child to be kept safe. So, let's explore Module Three now, which is 'Record'. Again, let's start by hearing from a victim-survivor.

"I don't remember him saying, 'You mustn't tell anyone about this'. I don't remember him ever saying that. But I just thought, how could I possibly tell my parents, for example?"

This quote is from a victim-survivor of John Smyth's abuse taken from the Independent Learning Lessons Review. Sometimes we can be tempted to think that if something were truly wrong, a child would just tell

us. However, this quote illustrates why this may not be the case. Another shocking example of this is the Alexander McCartney sextortion case. Of his 3500 victims, just four reported to authorities. There are so many barriers to children reporting, and this makes our accurate, regular recording of signs and indicators of abuse incredibly important. It can provide evidence of things a child is unable to tell us, enabling us to seek justice and protection for them.

There are many reasons why a child may not be able to tell us what is happening to them. Therefore, we need to record any signs and indicators of abuse, injuries, changes in behaviour, observed interactions that cause us concern, and anything else that we notice.

Let's consider some of the reasons why a child may not tell us what is happening to them. First, silencing and fear. Silencing the child is often part of grooming and abuse, creating secrets and using blackmail, threats and coercion to stop a child from speaking out.

Children may also be scared of the consequences of reporting their abuse. If it's a member of the family who's abusing them, they might be scared of splitting the family apart if they tell anyone. They might fear they won't be believed or that they will be treated differently if anyone knows.

Children may have been taught that this is normal behaviour, that this is what people do when they love each other, or this is how family members or friends behave towards each other. They might not realise that what they're experiencing is abuse because they've never known anything different.

Children might feel embarrassed, ashamed, or even to blame for what happened to them.

A child simply might not have the language to tell us what's happening. They may be too young, speak a different language, not know the terms, or there may be other communication barriers.

They may have complicated feelings like loyalty, admiration, love as well as fear, distress and confusion. If a child or young person talks to us about abuse or harm that they're experiencing, we need to remember the huge barriers that they've overcome and the courage it's taken to tell us, remembering the principles of responding well that we spoke about in the previous module. But we also need to realise that they might not tell us and so be alert to those signs and indicators and record everything that makes us concerned.

So, what needs to be included on a safeguarding record?

We record factual, accurate notes of any disclosure or concern we have.

Think about: who, what, where and when. Who was involved, what happened? Where did it happen? When did this happen? And when are you recording this?

We don't include opinions or personal judgments of a situation, such as why somebody might have acted in a particular way or the level of harm that may have been experienced. This can be misleading and can prevent someone getting the help that they need.

Record the child or young person's own words. Case reviews and national guidance highlight the importance of capturing the voice of the child, having their story in their own words, and also recording non-verbal communication, body language, how they present, things like that.

We can clarify but mustn't ask leading questions when we're making records. It's not our role to investigate. If we're not sure that we've got an accurate picture for our record, we can ask a few clarifying questions. These can be remembered as 'TED' questions: tell, explain, describe. For example, can you tell me what you mean by...? Can you explain that a bit more for me, please? We use these questions to check that we've understood enough to make our record accurate. Reflecting back what we've heard is also helpful as it will give the child or young person an

important opportunity to clarify anything we've misunderstood or add any additional information that they'd like to.

Best practice is to record within an hour of a disclosure or a concern arising, while things are still fresh in our minds. We need to date and time and sign our record and pass it to our Safeguarding Lead so they can respond as necessary and securely store the record.

If this is an emergency, contact 999, as you would in any other situation; you can inform your Safeguarding Lead afterwards about what happened.

If you're not sure whether this is an emergency situation that requires an immediate response, you can phone your Safeguarding Lead or the Thirtyone:eight helpline while the child is still with you to get advice.

If there's not an immediate risk of harm, pass your record on to your Safeguarding Lead within 24 hours.

[Break 2]

Okay, we're going to go for our second break now.

Feel free to turn your cameras off and go and have a screen break. I'll see you again in five minutes. Thanks everyone.

[Module 3 Continued]

Okay, welcome back. I hope you had a good break. We're going to look at some more scenarios now so we can apply those principles of recording in practice. For each of these short scenarios, I'd just like you to think about what you would record. These scenarios pick up the story of Charles, who we met in module one.

The first Wednesday of the month: You're playing board games with children this week, Charles wins the game with his group. His friend Milena starts to cry because she's come last, but she doesn't stay upset for long. During the snack break that comes next, you notice Charles standing in the corner hitting himself on the head. When you ask if he's okay and why he's hurting himself. He says, "I've got to get it out. It happened again. I'm always upsetting people and making everything sad."

So, what would you record?

We'd want to record Charles's name, age and personal details, such as his address. We'd also record the date and the time of the session, the date of the record, as well your own name and your role. Then describe what happened as clearly as you can remember it. Use Charles's exact words. Include any other relevant information, including things you might

have noticed before, any action that you took (which isn't specified in our scenario).

In your handbook, you'll see that we've got a recording template for this incident. It's useful to have a recording template because it helps us to frame our thoughts and prompt us for what information we need, enabling us to think widely and clearly at a time when we may be feeling some heightened emotions.

If you're not sure what type of records are used in your organisation, find this out after this training. You may have an online system, a paper form, a digital form, or it may be an email address or a less prescribed arrangement. Find that out so you know what to do in the moment. You could use this record template to form your responses if you ever have to make a record yourself.

Let's listen to another incident now. This is the third Wednesday of the month. Again, just think about what you would record:

You notice that Charles's brother, Jonathan, has come to the group in brand new clothes and shoes, and that Charles is wearing the same trousers and jumper he always wears, and these are getting quite small now. When he takes his jumper off after one of the games, you notice that he still has hot chocolate on his t-shirt that he spilt during last week's session.

So, what would you record? You would again include Charles's name, age and details, the date and time of the session, the date of the record, and your name and details too.

You'd record your observations about the boys' clothes. You would note your reason for recording, including any existing information that might be relevant, and anything else that you noticed too.

There are reasons that Charles may be wearing the same clothes as last week, other than abuse and neglect. For example, he may have some sensory needs that means he is attached to certain clothing. Whatever the reason, noticing and recording this is helpful. Our caring curiosity can either enable us to better understand and support a child or to safeguard them. And both are good outcomes. The Safeguarding Lead is the right first approach.

The significance of what we've seen or heard may only occur to us after we've seen another incident that makes us wonder. If you're making a record of one incident and realise something you've seen earlier may be relevant, add that to the record with as much detail as you can remember. What you've noticed here about the difference in the boys' clothes might not prompt you to make a record if this was the first time you'd ever met Charles and Jonathan, but if you've been in the group for

those previous two incidents as well, this might cause you more concern.

Okay, here's a third one. Again, what would you record? This is the fourth Wednesday of the month: During today's activities, Charles hasn't seemed able to concentrate. He looks exhausted and isn't talking to his friends. When you ask him a question, it takes him a few moments to register that you've spoken to him, and then he seems upset and confused. He mumbles, "I'm sorry, I'm so sorry," and goes back to looking at his hands.

So, what would you record. Again, all of those personal details, the date and time of the session, the date of the record, and your details. Then you describe what happened and quote Charles's exact words. You would record your observations of his demeanour and his body language. How does this compare to typical presentation for Charles? You would put your reason for recording, including any existing information that might be relevant and any actions that you took (though those are not specified in our scenario).

Recording all our concerns as often as they happen is really important. As with the scenarios we've just looked at for Charles, a lot of safeguarding involves noticing and recording incidents that, on their

own, may not seem hugely significant, but when put together with others, show a pattern of harm and abuse.

When we record these incidents, they form evidence that our Safeguarding Lead can use to raise a concern with statutory agencies and those agencies can use to safeguard a child and seek justice for them.

Our faith and community organisations often have a significant role in a child's life. We may see a child regularly and in different contexts to other agencies who are involved with them. One way community and faith organisations have failed children in the past is by not collaborating with others to share what we know so a child can be protected more quickly.

Ultimately, our records enable a child to be kept safe. Imagine if the statutory services received all of those reports from us about Charles, and others from his school, and maybe others from his sports club.

And now imagine if they only received one or even none of these. The impact for Charles could be very different.

Another quote from the Independent Inquiry into Child Sexual Abuse says, "Across some religious institutions and schools, there was a reluctance to refer allegations to the statutory agencies."

We need to be open, to collaborate, and to play our part in safeguarding a child, not feel like we need to deal with everything 'in house'. So, pass on concerns to your Safeguarding Leads so they can act.

Our key action for record is to record all concerns quickly and accurately. We hope that this module has demonstrated how important this is. Find out how your organisation needs you to record. Do you have an online system, a paper or digital form, or a designated email address? However you make your record, it's important that you do so quickly and pass it on to your Safeguarding Lead so they can store it securely and take action. We'll now look at reporting in module four.

[Module 4: Report]

Our fourth 'R' is 'Report'. Knowing how to pass on concerns and who to report to is vital. So, let's discuss this now.

Our victim-survivor quote for this one is particularly painful: "When I reported the first incident, I got laughed at. I just got laughed at. There was nowhere really for me to turn."

This quote is from a Truth Project participant. Just 7% of participants in the Truth Project who disclosed child sexual abuse at the time, said that the police were informed about their allegation.

When we know or suspect that a child might be being abused, we need to act. As well as responding with compassion and making a record, our responsibility is to report the concern to the right person as soon as possible. That's what we'll discuss now.

Who would you talk to if you were concerned a child wasn't safe? It would be good to hear from a few of you now. The most likely person you'll need to speak to is your Safeguarding Lead. Go to them with any concern, however big or small, about children or young people in your organisation. The children and young people in your organisation should also know who they can talk to if they don't feel safe.

If there is an immediate risk of significant harm, phone the police or the ambulance or the duty social worker, as you would in any other situation outside of your church or charity, you can call your Safeguarding Lead afterwards to keep them informed and get advice.

If you can't get hold of your Safeguarding Lead, our helpline advisors are here for you. There are other helplines available for specific circumstances and there is signposting in your handbook. For example, there's an organisation called Papyrus who have a helpline for preventing young suicide.

Report every concern. Remember from our previous module, multiple concerns about the same person help build a bigger picture. Don't worry about repeating yourself. If you're worried that a concern you've reported has not been acted upon, and a child remains at risk of harm, follow the escalation process in your organisation's safeguarding policy. That might be to report to a network or umbrella organisation, or to the statutory agencies. If you're not sure what the process should be or how to do it, you can call our helpline for advice.

Your organisation should also have a whistle blowing policy, or section in your main policy. This tells you how to report externally if you're worried that actions or inactions by your organisation may be putting people at risk of harm and the rights that you have when you're raising this concern.

Let's think for a moment about the role of the Safeguarding Lead. I want to start with a question. If I asked you to contact your Safeguarding Lead right now, during this session, could you do it? If the answer is no because you don't know who they are or their contact details, find this out as priority. If the answer is no because of the timing of the course, or because you know that your Safeguarding Lead is on holiday or otherwise unavailable, check your policy for the arrangements to follow in their absence.

The role of the Safeguarding Lead is a vital one. It has its basis in law and guidance across the UK. They're the central point of contacting any organisation for safeguarding concerns. They keep records and respond to concerns on behalf of the organisation. They also refer to statutory agencies as necessary.

Your Safeguarding Lead might be called a Safeguarding Lead, or they might have another title. I wonder what yours is called. Maybe they're the Safeguarding Co-ordinator or a Designated Safeguarding Person.

You might have a single safeguarding lead or a safeguarding team or a lead and a deputy. Your safeguarding policy should tell you who to contact if your Safeguarding Lead isn't available, or if you need to escalate a concern outside your organisation.

Your Safeguarding Lead needs you. They can't be in every group conversation or interaction. They rely on you to make records and pass on your concerns so that they can act.

Just like responding well, reporting is essential, but it isn't always easy. There are some particular considerations and challenges. One of these is that we never address the abuse with the alleged perpetrator. In training, this may seem obvious, but if you receive an allegation in your organisation about someone who you know and trust, it can be tempting to just 'have a word' with them to clear up any misunderstandings

‘without involving safeguarding’. However, you could be putting a child at increased risk by doing this, enabling a perpetrator to destroy evidence and also breaking the child's trust. Reporting might seem like a big step, but the policies we have are designed to protect everyone and reporting is a key element of those policies.

Talking to parents and carers is often a great way to support children and families. However, when there's a safeguarding concern, it's important that you report to the Safeguarding Lead first and follow their advice about whether, when and how to approach parents and carers. If the child is being abused or neglected at home, talking to parents and carers could put the child at greater risk. They may respond negatively to being approached, even if they're not the source of harm, and we risk losing contact with the child if the family takes them away from our activities.

We don't need a child's consent to report to our Safeguarding Lead, and they don't need the child's consent to report to statutory agencies or a child's Named Person in Scotland to safeguard them.

However, it is important for us to keep the child central to our safeguarding actions. This could mean finding out what support they would like and what they want to happen, even if this turns out not to be possible, and explaining to them in age-appropriate language what we

need to do and why. There may be other charities or organisations we feel could help, but we would need informed consent before we refer to these or to use a child's information in any other way. In many situations, depending on the age of the child, we're likely to need parental consent for this too.

Confidentiality doesn't mean never telling anyone, but it does mean being careful and responsible with somebody else's information. There is an appendix in your handbook about child-centred safeguarding that explores this topic further.

Reporting isn't easy. We might have concerns about the outcome or mixed feelings about the information we have. However, safeguarding is everyone's responsibility. Your organisation has a duty to safeguard children and young people, and part of fulfilling your role is to be part of this too. Your Safeguarding Lead needs you to pass on all your concerns so they are equipped to report to the agencies who can act to protect a child.

Your Safeguarding Lead needs you. Your key action for this module is to talk to them. They are there to advise and support you as you safeguard the children and young people in your care. Report any and all concerns to them as quickly as possible, so they can act to safeguard a child.

Work with them to reflect on your activities so you can make your

activities as safe as possible for children and young people. That's what we're going to discuss now in our final module.

[Module 5: Reflect]

Our final 'R' is 'Reflect'. Reflection is an essential part of creating safer organisations, but it can be easily get missed if we aren't intentional,

Reflection means intentionally thinking about an experience and learning lessons from it to improve future practice. It is a key element of safeguarding at all levels, for example, the reviews of serious cases that Local Authorities must undertake. In our own communities, honest reflection with our teams enables us to better safeguard children and ourselves.

When things go well, reflection helps us recognise the formula so we can repeat it. When things go wrong, or we realise that a situation involved unnecessary risks, it can be tempting to avoid thinking or talking about it and just move on. If we do this, though, we miss important learning opportunities, and the risk remains. Reflection helps us identify where there are unclear processes, where we have gaps in our knowledge, and if there are any aspects of our physical spaces that put children in our care, or ourselves as staff and volunteers, at greater risk of harm. When we are proactive about reflecting, we can take steps to reduce this risk.

Our final victim-survivor voice is from Angela, who also took part in the Truth Project, and she's explaining what motivated her to speak to the Inquiry. She says, "I am still alive. I am a survivor. This is why I'm speaking to you."

We have a responsibility to reflect on the voices and experiences of victim-survivors so we can learn lessons and better safeguard children in future. We need to ask ourselves, what are they telling us? What changes can we make to our processes, our activities and our behaviours as a result?

Reports such as the Independent Inquiry into Child Sexual Abuse, the investigations and hearings that are contributing to the Scottish Child Abuse Inquiry and the Northern Ireland Historical Institutional Abuse Inquiry all show multiple examples of how vulnerable children and young people have been consistently let down by systems without transparency and accountability, and where the reputation of institutions and adults in power were prioritised over the safety of children. We need to ensure that we don't repeat these patterns in our own organisations.

Some common themes that emerge when victim-survivors are asked what they need are: being listened, to being believed, being supported and seeing action taken.

Our final exercise of the webinar is an opportunity to reflect. Think for a moment about the role that has brought you to this training. Picture the activities you take part in, and the children with whom you work.

I'm going to ask you three questions, and I'd like everybody to reflect.

You can type into the chat, but it would be good to hear examples from one or two of you, if you'd like to unmute and speak.

What do you already do every week to reduce risk and keep these children safe? That's our first question.

Second question, would a child experiencing abuse be listened to, believed, supported, and see action taken by you and your organisation?

I'd like you to go a bit deeper in your reflection for this one. You probably had an instinctive answer there, an instant yes or no. But ask yourself, was that an emotional response, or was that a factual response? If you've said yes, what would you point to that makes you certain that they would? If you're not sure, what barriers have you identified? What can be done about those?

And then finally, what will you take away from this training to enable you to better safeguard children in your context? Think back through those previous four modules, the scenarios that we've looked at, and the voices of victim survivors that we've heard. What is it that you're going to take away to equip you in your context?

Thank you for participating in that activity, reflecting really can help keep everybody safer. And that's our key action, to reflect honestly with your team. When we take that time to reflect honestly on our activities, especially when situations have been difficult, we can learn and grow. This isn't always easy, and there is always another way we could use our time, but it really does keep children and young people safer and make a safer working environment for us as well.

[Conclusion and thanks]

So, let's review the learning journey that we've been on. We hope that in covering all of these objectives, you've got a greater awareness and understanding in these areas. Firstly, that you're now able to recognise types of abuse, some signs and indicators, and the scope of the safeguarding task. Secondly, that you've got a sound understanding of why we need to respond well, both to what children tell us and to any concerns we have about an adult's interaction with children. Thirdly, that you understand how and when to record concerns and why this is so important. Fourthly, you feel secure about how to report concerns and to whom. And finally, that you've been encouraged to reflect and work with others to build a healthy safeguarding culture.

Before you sign off for the end of this training, I just encourage you to take a moment to note down a couple of things that you want to take

away from this training and put into action. Your feedback is very important to us, please take a few minutes to complete the feedback form. Thank you so much for being part of our session today. We wish you all the best as you safeguard the children and young people in your organisation. Thank you.