Barnardo's Practitioner Survey Full Results

Wave 2: 23 September – 7 October 2019

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Introduction

This report presents the results for the second quarterly Barnardo's practitioner survey.

The aim of the survey is to capture emerging issues, and impacts on children and families, directly from Barnardo's practitioners.

The survey was open to all staff who work directly with children, young people, parents and/or carers.

Fieldwork was undertaken 23 September to 7 October 2019.

Data analysis was undertaken by Barnardo's Strategic Impact Team (SIT). Open questions were coded, and are presented in tables. For the open questions, respondents could make more than one point, so responses can be coded to multiple categories.

Where percentages do not sum to 100%, this may be due to computer rounding, or multiple answers.

* indicates responses of less than 1%.

For any further queries about the survey or the data presented in this report, please contact <u>joelle.bradly@barnardos.org.uk</u>.

ABBREVIATIONS USED

ACEs	Adverse Childhood Experiences
ADHD	Attention deficit hyperactivity disorder
ASD	Autism Spectrum Disorder
CCE/CE	Child criminal exploitation/Criminal exploitation
CSE, CSA, CSE/A	Child sexual exploitation, Child sexual abuse, Child sexual exploitation/abuse
СҮР	Children and young people
CAMHS	Child and Adolescent Mental Health Service
DA	Domestic Abuse
DV	Domestic Violence
HSB	Harmful Sexual Behaviour
LGBTQI+	Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Intersex +
MHWB	Mental Health and Wellbeing
NEET	Not in Education, Employment or Training
SEN	Special Educational Need
SPD	Sensory Processing Disorder
SW	Social Work
UC	Universal Credit

Overview of issues for children, young people and families

The overwhelming concern from practitioners is the lack of support available to children and families they work with; practitioners tend to cite issues with accessing mental health services, as well as the lack of more universal activities for families. Similar to the last survey, key issues cited for children and families were often around mental health (particularly self-harm), poverty (and the impact of changes to benefits system), and the impact of digital (such as exposure to sexual content affecting social norms). Other issues commonly cited across the survey include substance misuse, gangs, knife crime, sexual exploitation, housing and homelessness, and increased need for support for those with additional needs (e.g. ASD, SEN). While practitioners often worked across different sectors to address these concerns, they were likely to think that Barnardo's should work more with mental health services to address the concerns they had.

This survey asked specific questions around trauma, domestic abuse in teenage relationships, child sexual abuse, hate crime/abuse, school exclusions and concerns over the Christmas period. Some key findings were around 'hidden' groups we support who may be experiencing issues.

Many staff felt that boys, those from BAME communities, and those with hidden disabilities, experiencing sexual abuse were less likely than others to come to our attention. Practitioners felt that this was primarily due to signs of sexual abuse not being recognised by professionals, or due to stigma and shame.

Support for victims of domestic abuse often focuses on adults, yet the survey found that almost a third of those working with 12 to 15 year olds had supported someone under 16 experiencing domestic abuse in an intimate relationship; 46% felt that this was increasing due to social media and perceptions of healthy relationships. Additionally, 58% of those who had supported young people under 18 experiencing domestic abuse over the last year, had also supported someone under 18 *displaying* abusive behaviours in their relationships. Practitioners felt that this was often a result of childhood trauma, learned behaviour, and social influences through the media.

The survey also found that 43% of practitioners had supported a child or young person who had experienced concerning content online, such as viral scare memes (17%) and anti-LGBT content (16%). The most common reason cited for hate crime and abuse was due to gender identity, followed by sexual orientation. A quarter of practitioners felt that hate crimes were increasing in their local area, again often due to social media, as well as the political context.

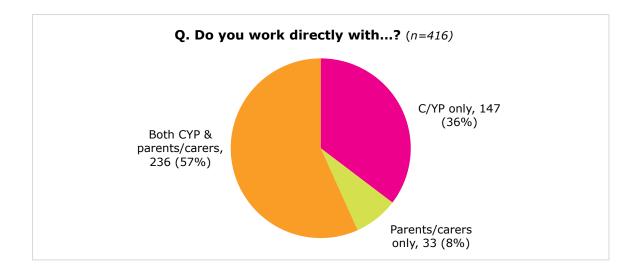
In terms of issues for parents, 62% of practitioners had supported parents over the last year who had experienced trauma, and 28% had supported parents who had experienced sexual abuse.

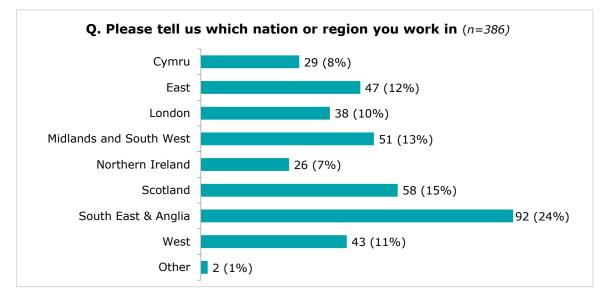
Nearly half of practitioners said that school exclusions impact negatively on families, including through increased stress, financial strains, and having to juggle child care. Two thirds of practitioners said they thought that families they worked with would experience increased loneliness over Christmas, with many expected to go into debt and experience increased mental health issues.

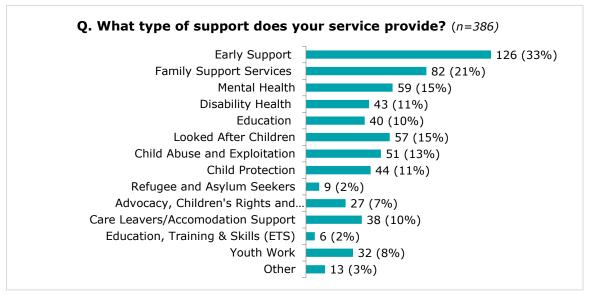
Practitioners felt that trauma experiences vary for different groups, such as by age and cultural background, but are also dependent on the support systems around people, and their own coping mechanisms. Seventy-two per cent felt 'fairly' or 'very' confident responding in a trauma informed way, but when adapting trauma informed responses to reflect individual needs they felt slightly less confident (63% 'fairly' or 'very').

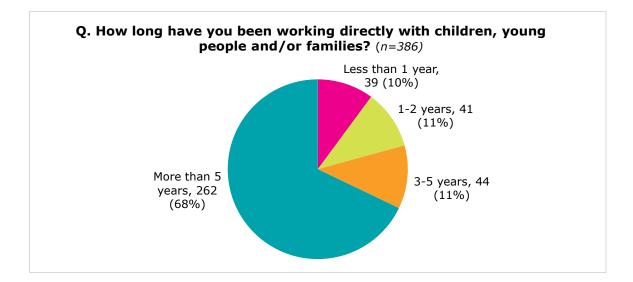
Practitioners felt that more could be done to recognise lived experience of staff, so that they could be supported appropriately, and so there is more recognition of how this experience adds value to their work. However, the extent to which they felt that trauma informed values were reflected in the way they were treated as staff varied, with 45% stating 'a little'.

Sample overview	п	
Service users supported (n=416)		
Children/young people	147	
Parents/carers	33	
Both	236	
Region (<i>n</i> =386)		
Cymru	29	
East	47	
London	38	
Midlands and South West	51	
Northern Ireland	26	
Scotland	58	
South East & Anglia	92	
West	43	
Other	2	
Service type (n=386)		
Early Support	126	
Family Support Services	82	
Mental Health	59	
Disability/Health	43	
Education	40	
Looked After Children	57	
Child Abuse and Exploitation	51	
Child Protection	44	
Refugee and Asylum Seekers	9	
Advocacy, Children's Rights and Participation	27	
Care Leavers/Accommodation Support	38	
Employment Training and Skills (ETS)	6	
Youth Work	32	
Other	13	
Length of time working with CYP/families (n=386)		
Less than 1 year	39	
1-2 years	41	
3-5 years	44	
More than 5 years	262	









Emerging Vulnerabilities

Summary

Respondents were asked whether they have seen any new issues emerging, or heard new things from children, young people and families, over the last few months.

Around one in five referred to support, resources, and activities having changed, with less available (22%; 51 of 234), and 15% reported an increase in mental health and wellbeing issues (15%). Around one in five reported seeing `no changes' (19%).

Respondents' biggest concerns for children, young people, and families were:

- A lack of support and resources (38%; 100 of 263)

- Mental health and wellbeing issues (26%)

- Poverty and changes to the benefits system (17%)

Around a third of respondents (34%; 86 of 255) stated 'all children, young people and families' are most affected by these concerns. Fifteen per cent felt 'low income families, those out of work and those on benefits'; and 'children aged 5 to 16 years old' are most affected by these concerns.

The most common agencies that respondents work with were:

- Schools (26%; 68 of 259)

- Social care (25%)

- Health (18%)

When asked which external agencies they would like to do more joint work with, to support children, young people, and families, to address these concerns, the most common responses were:

- Mental health and wellbeing services (e.g. CAMHS, counsellors and therapists) (29%; 63 of 219)

- Schools (11%)

- Health (11%)

Q. Are there are any new issues you are seeing emerging, or new things you are hearing from children, young people, or families, over the last few months?

Base: All who answered this question (234)	п	%
Less support/fewer resources/lack of activities	51	22
No change/nothing new	44	19
Increase in MHWB issues among CYP and families	34	15
Poverty/changes to benefits system	31	13
Increased impact of digital	20	9
Increase in enforced criminal activity/county lines/gang involvement	14	6
Increase in need for support for CYP with additional needs	11	5
Reduced quality of support	11	5
Increase in safeguarding issues	10	4
More CYP and families affected by substance misuse	9	4
Increase in (knife) crime/youth violence	8	3
Increase in housing issues (evictions, lack of housing)	8	3
Increase in identity issues (gender/sexuality)	6	3
Increase in bullying	6	3
Increase in violent/challenging behaviour	5	2
Increase in domestic abuse	5	2
Increase in family breakdown/crisis	5	2
More pressure on CYP/families	3	1
Reduced sense of belonging, marginalisation, and isolation	3	1
More CYP/families not having a voice	3	1
More awareness/understanding of trauma (and related issues)	2	1
Rise in hate crime (including racism)	2	1
Increase in parenting issues	2	1
Other	18	8

Less support/fewer resources/lack of activities (incl. lack of support for mental health issues) (n=51)

"Increasingly seeing and hearing about young people with mental health problems which don't meet the criteria for having input from CAMHS, but that do require some sort of intervention and there aren't adequate services available to help the young people at the right time."

"Children are not getting access to the therapeutic service that they need."

"Lack of activities for children to do after school that families can afford."

Increase in MHWB issues among children & families (incl. self-harm) (n=34)

"Increasingly parents are reporting that their children are self-harming."

"Over the last year I have seen an increase in the self-harm in young people."

Poverty/changes to benefits system (incl. UC) (*n*=31)

"The effect Universal Credit is having on families. Increased use of food banks."

"The main issues emerging are with homelessness and poverty and also the difficulties with Universal Credit."

"Families are struggling with deprivation – low income homes and home environments are sparse."

Increased impact of digital (incl. access to pornography/sexual content online) (n=20)

"Children are being exposed to online sexual content and that being the way they come to understand intimate relationships and consent."

"Unhealthy and easily accessible pornography which younger children are being affected by."

Increase in enforced criminal activity/county lines/gang involvement (*n*=14)

"Increasing mentions of barber shops as a potential location for recruiting into CCE."

"The amount of children who are being exploited sexually, criminally and for labour. Young people feeling as though they have to carry weapons for safety."

Increase in need for support for CYP with additional needs (*n*=11)

"Schools behaviour plans not suitable for all children- too hard for those with additional needs."

"Disabled people having increasing difficulty accessing community. Rise in hate crime. More issues with education (lack of suitable SEND support)."

Reduced quality of support (*n*=11)

"Less face to face contact."

"Big turnover of social workers and no support from family advisors."

Increase in safeguarding issues (incl. sexual abuse/trafficking/FGM/ HSB/multiple abuse) (n=10)

"Majority of cases with multiple exploitation – no longer just CSE, where you find one form of exploitation, you usually find them all."

"CCE and CSE as well as financial and emotional abuse."

<i>Q.</i> What is your biggest concern now for children, young families?	people	and
Base: All who answered this question (263)	п	%
Lack of support and resources	100	38
MHWB issues among CYP and families	68	26
Poverty/changes to benefits system	44	17
Impact of digital	39	15
Waiting times for support	18	7
CYP/families affected by substance misuse	15	6
Criminal activity/county lines/gang involvement	12	5
Child sexual abuse/exploitation	12	5
(Knife) crime/youth violence	10	4
Homelessness and housing issues	10	4
Trauma/abuse/ACEs	9	3
Domestic abuse	9	3
Less caring society/communities/politics/increase in hate crimes	8	3
Low self-esteem/low aspirations	7	3
Lack of early intervention/prevention	7	3
Increased pressures on CYP	7	3
Isolation	6	2
Family life more chaotic/less stable	6	2
Parenting issues	6	2
Safeguarding issues	6	2
Lack of support for children with additional needs (incl. SEN & SPD)	5	2
Thresholds for support	2	1
Not listening to/understanding needs of CYP/families	2	1
Neglect	2	1
Victim blaming	2	1
Lack of information	2	1
Other	17	6

What is your biggest concern now for children young people and

Lack of support and resources (n=100)

"Children and families not receiving the specialised services they require."

"Children and young people not getting adequate support they need and/or being put on long waiting lists."

"Lack of mental health/emotional support for young children who have witnessed domestic abuse."

MHWB issues among CYP and families (n=68)

"Mental health and general wellbeing of care leavers, including those who are parents."

"Parental mental health and inaccessible services."

"Anxiety and mental health of children, young people and parents."

Poverty/changes to benefits system (*n*=44)

"Poor living conditions and poverty."

"Financial difficulties. Lots of families with no recourse to public funds and increasingly high rent cost."

"An increase families are asking for food bank vouchers."

Impact of digital (n=39)

"The influence that social media has on self-esteem, decision making and mental health."

"Pressure from peers and social media dictating how young people should act and dress."

"Online security and bullying. Mainly Snapchat and the safeguarding issues around the fact if you don't have the settings correctly displayed then people can see an accurate location of where you are."

Waiting times for support (n=18)

"That children are being left within the system of CAMHS anywhere between 1-2years, awaiting for a diagnosis, or even simply waiting to be seen by a professional at CAMHS."

"Waiting times to access service to support with their mental health or additional needs."

"Long waiting lists for support services and young people in need of support not meeting thresholds. Free therapy options for children and families are limited."

CYP/families affected by substance misuse (*n*=15)

"Impact of parental drugs & alcohol /mental health on the children & young people."

"Substance misuse, loneliness and depression."

Criminal activity/county lines/gang involvement (n=12)

"Children being exploited by others whether this is around county lines or CSE."

"The widen level of exploitation and gang violence that young people are subjected."

Child sexual abuse/exploitation (*n*=12)

"Online CSA and lack of services to support young people through this."

"Exploitation, grooming - particularly online, children and families not being adequately supported."

(Knife) crime/youth violence (n=10)

"Levels of violence and deprivation."

"Poverty and lack of hope - the way this is leading to children and young people finding their own means and paving their own future to attaining wealth e.g. through fraud and violence."

Homelessness and housing issues (n=10)

"Lack of adequate, affordable housing."

"Homelessness, poverty, mental health, lack of universal services, education, debt."

most anected by the concerns you raised above?		
Base: All who answered this question (255)	п	%
All CYP/families	86	34
Low income families/workless/reliant on benefits	38	15
Children aged 5-16	38	15
Teenagers and children aged 16+	34	13
Children in care	27	11
The most vulnerable CYP/families	25	10
Children with additional needs (including ASD, SEN & SPD)	19	7
Children aged 0-5	19	7
CYP and families affected by mental health and wellbeing issues	18	7
Children with disabilities	15	6
Care leavers	11	4
CYP with protected characteristics (LGBTQI+, ethnic minorities)	10	4
Families affected by domestic abuse	8	3
Children impacted by trauma	6	2
CYP and families affected by substance misuse	5	2
Families who do not have a strong support network	4	2
Young parents	4	2
Those with chaotic lifestyles	4	2
Those from disadvantaged/deprived backgrounds	4	2
CYP and families statutory services struggle to engage	3	1
Those in deprived areas	3	1
Young people influenced by digital/technology	3	1
Lone/single parents	3	1
CYP and families who do not meet thresholds	2	1
Refugee and asylum seekers/migrants	2	1
Children who are not in education, employment or training (NEET)	2	1
Adoptive families	2	1
New parents	2	1
Young carers	2	1
Other	20	8

Q. Which groups of children, young people, and families do you think are most affected by the concerns you raised above?

). Which external agencies do you mostly work with?	<i>(</i> -	0
ase: All who answered this question (259)	n	%
Schools	68	2
Social Care (non-specific)	65	2
Health (NHS or non-specific)	47	1
Social Work	45	1
MHWB Services (e.g. CAMHS)	41	1
Education (non-specific)	35	1
Local Government/Local Authorities	35	1
Non-statutory Agencies (other & not specified)	30	1
Social Care - Children's Services	27	1
Health Visiting	22	8
Police	22	8
Housing/Homelessness Services	20	8
Midwifery Services & Mother and Baby Health Services	13	5
Youth Justice/Youth Offending Services	13	5
Speech & Language Therapists	12	5
Welfare Advice Agencies	11	4
Early Help	10	2
Addiction Services	9	3
Family Support Services	9	Э
Medical Professionals (other & non specified)	8	Э
Education - Nurseries/Pre schools	8	Э
Homestart	8	Э
Youth Work Services	8	Э
GPs	7	3
Domestic Abuse Support Services	7	Э
Welfare Agencies	6	2
Education Welfare	5	2
HE/FE institutions (universities and colleges)	5	2
Probation	5	2
Skills/Careers Agencies	5	2
Multiagency Teams	5	2
NI Trusts	4	2
Foodbanks	4	2
Local Community (based) Services	4	2
Parents/Family members	4	2
Criminal Justice Services (other & non-specific)	4	2
Disability/SEN support	4	2
Health - other	3	1
Young Carers Services	3	1
Care Homes	3	1
Sexual Health Services	2	1
Social Care - Adult Services	2	1
Children's Centres/Family Hubs	2	1
Child Bereavement/Grief Loss Support Services	2	1
	2	1
Foster Carers		

Q. Which external agencies would you like to more joint wo support children, young people and families, and address th you raised above?		
<i>Base: All who answered this question (219)</i>	п	%
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	63	29
Schools	24	11
Health (NHS or non-specific)	23	11
Non-statutory Agencies (other & not specified)	20	9
Police	19	9
None/We work with all	16	7
Social Care (non-specific)	14	6
Education (non-specific)	13	6
Social Work	13	6
Local Government/Local Authorities	12	5
Youth Justice/Youth Offending Services	12	5
Any/All	11	5
Health Visiting	8	4
Housing/Homelessness Services	8	4
Youth Work Services	8	4
Addiction Services	7	3
Midwifery Services & Mother and Baby Health Services	6	3
Welfare Agencies	5	2
Local Community (based) Services/Forums	5	2
Social Care - Children's Services	4	2
Early Help	4	2
Domestic Abuse Support Services	4	2
GPs	3	1
Family Support Services	3	1
Criminal Justice Services (other & non-specific)	3	1
Welfare Advice Agencies	3	1
Disability/SEN support	3	1
Health (other)	2	1
Sexual Abuse Support Services	2	1
Scottish Children's Reporters Association (SCRA)/Children's Hearings	2	1
Communities	2	1
Local Politicians	2	1
Policymakers	2	1
, Other	21	10

Trauma-Informed Practice

Summary

Over the last year, the majority of respondents (85%; 241 of 284) supported children, young people, or parents who experienced trauma. Of these respondents, the majority (69%; 157 of 228) felt 'fairly confident' in recognising signs of trauma. One fifth (20%) felt 'very confident', while 11% felt 'not very confident'.

Two thirds of respondents (67%; 152 of 228) felt there are differences in how trauma is experienced for different groups of children, young people, and parents. The three most common responses given for this difference were:

- The experience of trauma is very individual (49%; 61 of 124)

- It depends on support systems/networks (20%)

- It differs by age (19%)

The majority of respondents (58%; 132 of 228) felt 'fairly confident' responding in a trauma-informed way, while 52% (120 of 229) felt 'fairly confident' in adapting trauma-informed approaches to reflect individual differences.

Respondents were asked to what extent they think Barnardo's understands and supports staff with regards to the emotional impact of direct work with children, young people and parents.

- 48% (102 of 214) felt Barnardo's understands 'a lot'

- 49% (109 of 222) felt Barnardo's supports staff 'a little'

Forty five per cent of respondents (104 of 229) felt trauma-informed values are reflected 'a little' in the way they are treated by Barnardo's. The most common reasons for responses were:

- Feeling adequately or well supported (29%; 24 of 82)

- Feeling values are not reflected in the organisation (22%)

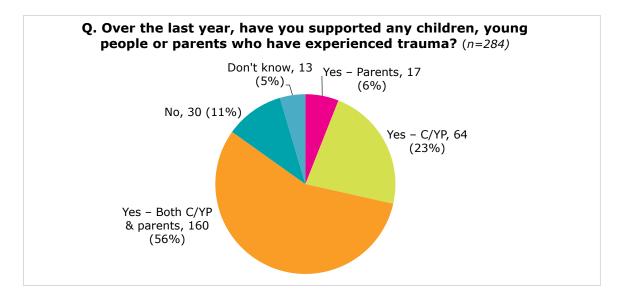
- Personal experience of lack of/no support

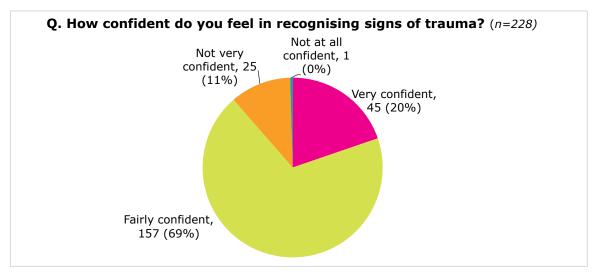
Sixty three per cent of respondents (144 of 229) think Barnardo's should do more to recognise the lived experience of staff. The most common reasons for this were:

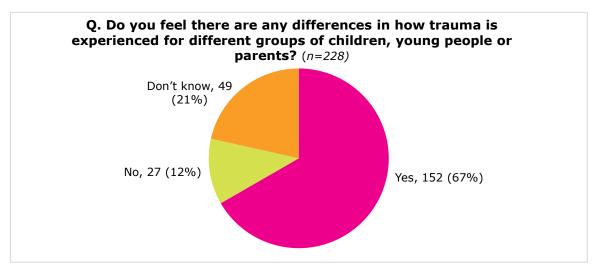
- So staff are supported appropriately (25%; 21 of 85)

- Experience adds value/understanding own trauma can help support others (19%)

- Staff do not feel valued (16%)







Q. If yes, please explain your answer		
Base: All who answered this question (124)	п	%
Very individual	61	49
Depends on support systems/networks	25	20
Differs by age	23	19
Depends on coping mechanisms/resilience	21	17
Differs by social and cultural background	17	14
Depends on parents	12	10
Differs by type of trauma (direct, indirect)	9	7
Depends on recognition of trauma	8	6
Children with disabilities/additional needs	6	5
Dependent on previous experiences of trauma/abuse	4	3
Vulnerable CYP/families	3	2
Differs for looked after children	2	2
Differs for those who have experienced domestic abuse	2	2
Other	3	2

Very individual (*n*=61)

"Depends on previous life history, current circumstances, health, resilience, supports offered/taken."

"Trauma and the effect of trauma is experienced differently by everyone."

"Trauma can be exhibited in many different ways, based on individual differences and the manner in which the brain processes trauma."

Depends on support systems/networks (*n*=25)

"Depending on their support network and whether they have been able to process the trauma they have experienced, their previous experiences (adverse childhood experiences) and what their 'baseline' is."

"Trauma can affect people differently depending on the support they have had."

Differs by age (*n*=23)

"I feel trauma is very individual and the perception of events can vary according to age."

"It depends on the age the trauma happened and if it was ongoing or single event."

Depends on coping mechanisms/resilience (*n*=21)

"It can have different impact depending on how much resilience and support a person may already have."

"Depending on age, development and any previous positive experiences that have helped build resilience."

"Those with increased resilience and those who have support around them experienced trauma differently."

Differs by social and cultural background (*n*=17)

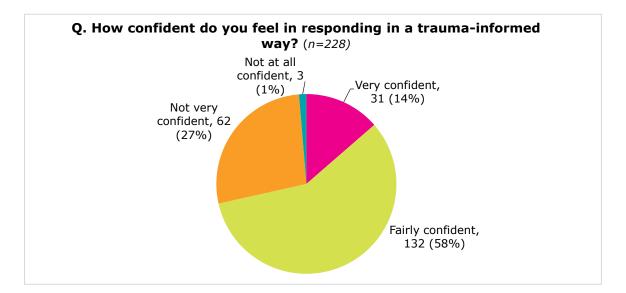
"Cultural and family differences might affect the experiences of different groups and ages."

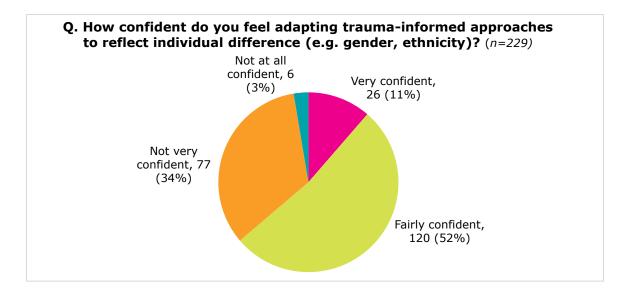
"Trauma is an individual experience but also needs to be considered from a culturally and EDI perspective."

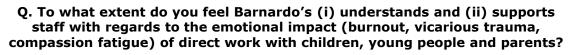
Depends on parents (*n*=12)

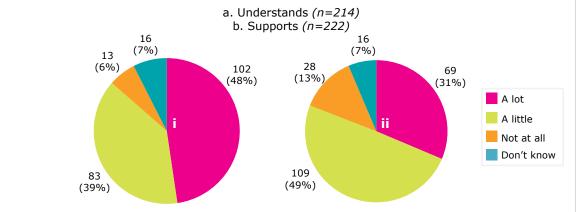
"Depends on resilience of family/social group."

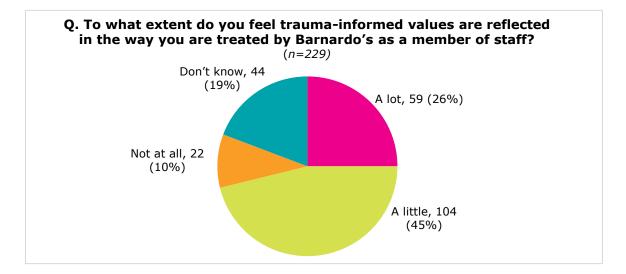
"Often this is not recognised for the children by their parents."











<i>Q. Please tell us why you think this</i>		
Base: All who answered this question (82)	п	%
Adequately/well supported	24	29
Values not reflected in the organisation	18	22
Personal experience of lack of/no support	7	9
Staff not attended training yet	7	9
Senior staff/managers more informed but knowledge not yet put into practice	5	6
Team/service is developing support	5	6
Dependent on individual line managers	4	5
TIP training is being rolled out	3	4
Not heard of TIP values before	2	2
Staff don't always want to share experiences	2	2
Other	5	6

Adequately/well supported (n=24)

"Senior staff and management support in our service is trauma focused."

"I feel my managers understand that the work I do with families is often emotionally challenging and that can impact on my wellbeing. I feel like my managers also understand that I am a person in my own right outside of work experiencing my own challenges and that this can also impact upon my wellbeing."

Values not reflected in the organisation (n=18)

"The way staff are treated often opposes the trauma informed approach & is in fact worse than before trauma informed approaches were discussed."

"The working conditions are not reflected in trauma informed values. E.g. when working with high levels or trauma it is not supportive of staff to expect them to lone work the majority of the time."

Personal experience of lack of/no support (*n*=7)

"When I was struggling with an issue I did not feel my line manager understood."

"I recently had a very difficult case and do not feel that I was given an opportunity to off load my feelings about this."

Staff not attended training yet (n=7)

"Barnardo's have started to roll out trauma-informed practice training but this is not due to reach my area until 2021/2022."

"I have had no training or information on trauma-informed values."

Senior staff/managers more informed but knowledge not yet put into practice (n=5)

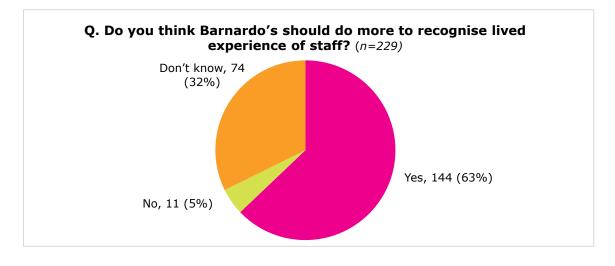
"It is recognised but can be difficult to incorporate into practice due to environment and workload demands."

"I feel that line managers are very informed and supportive, but have little time to offer support."

Team/service is developing support (*n*=5)

"We are becoming better. Plans are put in place to support staff."

"I feel within my service are trying to implement better opportunities for staff to try therapeutic / creative sessions in order to support mental wellbeing as well as improving supervision sessions to support the worker not just discuss case load."



Q. Please tell us why you feel this way Base: All who answered this question (85) п % Yes, so staff are supported appropriately 21 25 Experience adds value/Understanding own trauma can help support others 16 19 Staff do not feel valued 14 16 9 Can be difficult/need to feel safe to share/some may not want to share 8 Yes, can help to understand potential impact on work 7 8 Already happening/Knowledge & experience already recognised 7 8 7 Yes, to help prevent vicarious trauma 6 Other 9 11

Yes, so staff are supported appropriately (e.g. MHWB, self-esteem, confidence) (n=21)

"Would help staff emotional wellbeing, enhance good practice, improve services to families as approach is modelled."

"Support is always offered and managers do listen/make adjustments when needed. However I think there is always more that can be done/explored in relation to this question."

Yes, experience adds value/understanding own trauma can help support others (n=16)

"I feel we are all different and to understand trauma informed practice often people need help identifying their own trauma."

"A lot of staff are drawn to areas of work where they have personal experience. The benefits of this should be recognised more widely."

Staff do not feel valued (workload/pay/staff sickness/morale/staff retention) (n=14)

"Staff are not always rewarded for what they do or recognised for the stress they manage. There is an expectation that cuts in hours, loss of bonuses and increase in workload should be absorbed by staff in order to safeguard the service for another year."

"Practitioners working with CYP/ families are often overworked, with demanding caseloads working for salaries which often seem unfair when thinking about the work undertaken. The work carries a mental strain which needs to be nurtured by Barnardo's. We as a company should be role modelling being trauma informed from the roots of our organisation right the way to the top."

Can be difficult/need to feel safe to share/some may not want to share) (n=8)

"I feel some people may not want to share or relive these experiences, it should be optional."

"Not all lived experiences can be shared."

Yes, can help to understand potential impact on work (n=7)

"Because it affects workers and their experience is valuable."

"I think it is important to know where your staff are personally as this has an impact on the way they work."

Already happening/Knowledge & experience already recognised (n=7)

"I feel Barnardo's is already doing more than any other organisation and leads the way."

"I feel they do already to a certain extent. Within my service yes but can't comment on ours in any depth."

Yes, to help prevent vicarious trauma (n=6)

"To help prevent / reduce vicarious trauma."

"A wide support needs in place for workers on a personal level - if an issues for a family impacts on previous trauma experienced by the worker then there should always be room for this work to be taken on by another worker if so requested."

Young People and Domestic Abuse

Summary

Among respondents who work with young people aged 12 to 18, 47% (89 of 188) had – over the last year – worked with under 18s who experienced domestic abuse in their relationship. Of these respondents, 46% (38 of 82) felt domestic abuse is increasing for young people aged under 16.

The most common reason given for this perceived increase was social media (32%; 10 of 31). Other common reasons include domestic violence being perceived to be the norm (16%), increasing awareness of domestic violence (13%), and a lack of education/knowledge of domestic abuse (13%).

A third of respondents (32%; 23 of 71) said domestic abuse support was available to those under 16. Nineteen per cent (14 of 73) rated the quality of this support as 'good'.

The majority of respondents (57%; 43 of 75) said domestic abuse specific support was available to those aged 16 to 18. Thirty four per cent (25 of 74) rated the quality of this support as 'good'.

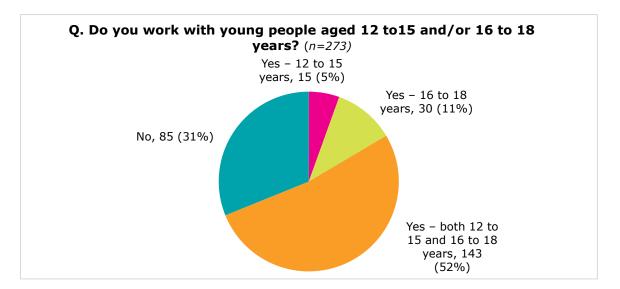
Respondents felt the following support was needed for those under 16:

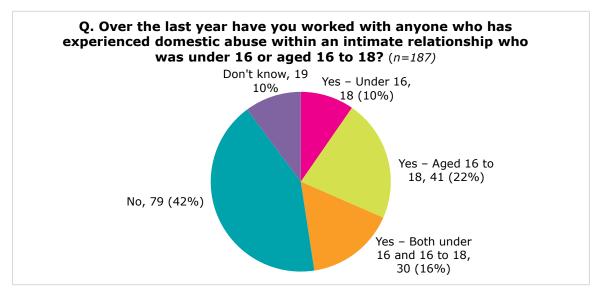
- Education (on healthy relationships/domestic abuse) (34%; 22 of 65)
- Counselling (17%)
- Specialist domestic abuse support (12%)

Respondents felt the following support was needed for those aged 16 to 18:

- Education (on healthy relationships/domestic abuse) (29%; 18 of 63)
- Mentors and 1:1 support (17%)
- Counselling (16%); Specialist domestic abuse support (16%)

Of those respondents who supported young people under 18 who experienced domestic abuse, 58% (52 of 89) also worked with a young person under 18 who displayed abusive behaviour within an intimate relationship.





Q. For those under 16, what was the nature of the relationship/s e.g. ages, online etc?

Examples:

"The child would often believe it to be a relationship but was actually CSE usually with older individuals - one boy age 15 living with a 27 year old class A addict."

"Varied between age appropriate and non-age appropriate relationships. Most concerns were around online grooming."

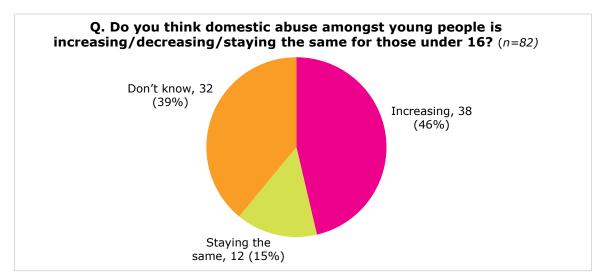
"14 year old female abused by 15 year old male boyfriend - physical violence, coercive control, emotional abuse, sexual abuse."

"14 year old who was in a sexual relationship with a 23 year old. He provided her with drugs and soon groomed her into having sex with other older men." "Boyfriend/girlfriend - female aged 15, male 17."

"Under 16 both online and face-face. Older males and relationships whereby both CYP were similar ages."

"Girl 14, Boy 15, face to face relationship. Element of controlling in the relationship."

"From all ages 3-18 Most of the children I work with have witnessed domestic abuse at some point in their lives. Some has been on-line mostly within the family home"



Q. If increasing, please tell us why you think this is		
Base: All who answered this question (31)	п	%
Social media	10	32
Perceived to be the norm	5	16
Increasing awareness of DV	4	13
Lack of education/knowledge of DA, relationships, coercive control	4	13
ACEs/inter-generational DV	3	10
(Easier) access to (violent) pornography	3	10
Increased substance use	3	10
More opportunities to control/abuse online	2	6
Other	3	10

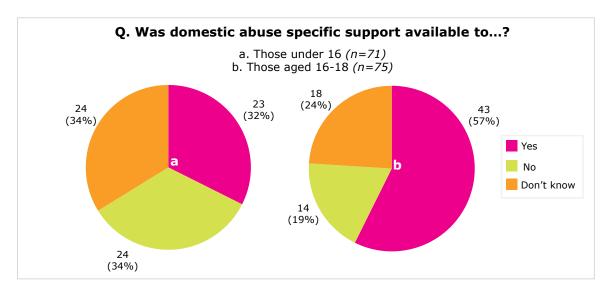
Social Media (n=10)

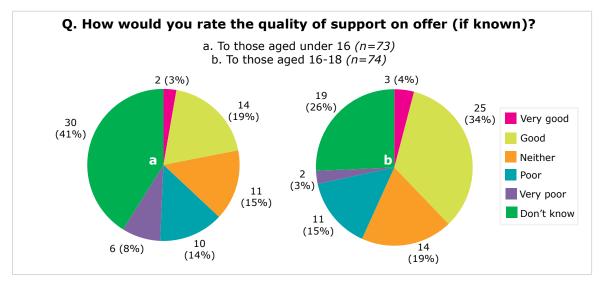
"There are more opportunities with a prevalence of social media to experience emotional harm and isolate young people from safety networks."

"Pressures of being a teenager, feeling you need to grow up faster, over exposure to more adult relationship themes via the internet, social media creating more exposure leaving young people feeling more vulnerable and feeling they need to appear like everyone else, appear 'perfect' with 'perfect' relationship."

Perceived to be the norm (n=5)

"YP are living a different youth to many years ago so perceptions are determined by what they see online e.g. porn, so they may have different expectations for relationships that are abusive rather than heal."





<i>Q.</i> What support do you think is needed for those under 16?	
Base: All who answered this question (65)	п
Education	22
Counselling	11

- 8 Specialist DA support 12
- Mentors and 1:1 support workers 6 9
 - Group work 5 8 6 Easier to access support 4
- 4 6 Support to develop healthy relationships
 - Age-appropriate support 4 6
 - Family work/interventions 4
 - 2 3 Consistent support
 - Perpetrator support 2 3
- Multiagency, systemic, wrap-around care 2 3
 - 3 2 Trauma informed support 8
 - 5 Other

%

34

17

6

Education (on healthy relationships/domestic abuse e.g. emotional abuse, red flags, warning signs) (n=22)

"Further work within schools around positive relationships and safe/unsafe behaviours."

"More education on what domestic abuse is from a younger age, particularly more subtle types of emotional abuse, gas lighting etc."

Counselling (*n*=11)

"Counselling and longer periods of support."

"They need to access a service that will give support with their mental health needs."

Specialist DA support (unspecified) (n=8)

"Generic services to be aware/look for signs, then either signpost to specific services or be trained and able to provide that support."

"Easily identifiable accessible services which focus on DV rather than various ad hoc services which are difficult to access."

Mentors and 1:1 support workers (n=6)

"Direct support away from family/friends on a 1-1 basis around self-esteem, healthy relationships, and safety."

"Listening ear, work with someone specifically capable of understanding their feelings and the capacity to help them understand their feelings when they can't actually put a voice to them."

Group work (unspecified) (n=5)

"On going group work and 1-2-1."

"More group healthy relationship awareness."

O What support do you think is pood for those aged 16 to 192		
Q. What support do you think is need for those aged 16 to18? Base: All who answered this question (63)	п	%
Education	18	29
Mentors and 1:1 support workers	11	17
Counselling	10	16
Specialist DA support (unspecified)	10	16
Age-appropriate support	6	10
Support to develop healthy relationships	5	8
Group work (unspecified)	4	6
Multiagency, systemic, wrap-around care	3	5
Support into adult services	2	3
Consistent support	2	3
Perpetrator support	2	3
Family work/interventions	2	3
Trauma informed support	2	3
Other	2	3

Education (on healthy relationships/domestic abuse e.g. emotional abuse, red flags, warning signs) (n=18)

"More information on red flags, warning signs. Not just worksheets, or external agencies."

"Sessions in school about DV & how to report."

Mentors and 1:1 support workers (n=11)

"Dedicated staff for DA."

"Counselling and one to one support worker, not just one for the parent if living in a refuge."

Counselling (n=10)

"Support for the DV witnessed, counselling/therapeutic support, group support sessions, sessions in school about DV & how to report."

"Therapeutic specialist."

Specialist DA support (unspecified) (n=10)

"Social services to put the support in place when they start working with a young person and not until after they've been referred into our services, as there can be a significant delay accessing support."

Age appropriate support (n=6)

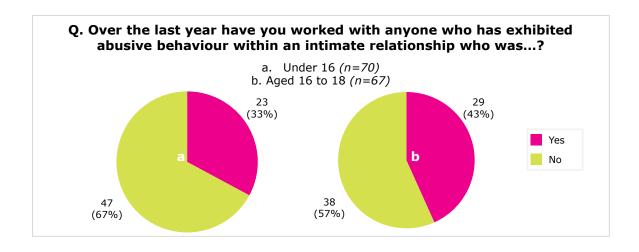
"Specific age appropriate support regarding relationships."

"User friendly interventions > specific age ranged supports as young people may relate easier."

Support to develop healthy relationships (*n*=5)

"Consistent, tailored support, relationship-building, education."

"1-1 self-referrals around relationships."



Q. If yes, what kind of abuse does this involve?		
Base: All who answered this question (41)	п	%
Emotional abuse/verbal/aggression	19	46
Physical violence	18	44
Coercive/controlling behaviour/manipulation	11	27
Sexual abuse/assault	7	17
Abuse towards parents	5	12
Online abuse	3	7
Other	4	10

Emotional abuse/verbal/aggression (n=19)

"Physical and emotional abuse towards a partner, physical and emotional abuse towards a carer."

"Both physical and verbal."

"Emotional abuse and controlling behaviour."

Physical violence (*n*=18)

"Domestic Violence with in a relationship." "Physical abuse."

Coercive/controlling behaviour/manipulation (*n*=11)

"Coercive control - emotional." "Emotional, controlling and coercive behaviour."

Sexual abuse/assault (n=7)

"Online intimidation to gain in appropriate images." "HSB, CSE/CSA amongst peers."

Abuse towards parents (n=5)

"Abusive behaviour towards parents."

"Physical violence towards parents."

<i>Q. Why do you think young people develop these behaviours/attitudes?</i>				
Base: All who answered this question (57)	п	%		
Adverse childhood experiences/childhood trauma	24	42		
Learned behaviours	18	32		
Social influences e.g. media and online	13	23		
Witnessing DV at home	13	23		
Lack of knowledge around healthy relationships	8	14		
Difficulties in understanding and managing emotions	6	11		
Lack of boundaries/consequences/behaviour not challenged	6	11		
Need for control/self-protection	6	11		
Mental health issues	5	9		
Substance misuse/addiction	4	7		
Low self-esteem	4	7		
Negative role models	3	5		
Parenting issues (attachment etc.)	3	5		
Boredom	2	4		
Other	6	11		

Adverse childhood experiences/childhood trauma (n=24)

"Adverse childhood experiences, experience of trauma and domestic abuse, mental health problems."

"Neglect, family history of DA, SA, drug and or alcohol addiction or adult mental ill health of a parent carer, misuse of power."

Learned behaviours (*n*=18)

"Learnt behaviour from their own childhood experiences or parents."

"Environment, upbringing, learned behaviours and personal experiences."

Social influences e.g. media and online (*n*=13)

"Media, access to pornography, lack of education on consent and rights."

"The television and games easily available that are inappropriate and the face that movies that are rated 15 could and should be 18. Young people think that what they see and hear on the screen is acceptable."

Witnessing DV at home (n=13)

"Witnessing the behaviours in their home during their childhoods."

"He witnessed domestic violence growing up and it became normalised."

Lack of knowledge about healthy relationship (n=8)

"Lack of education around healthy relationships and witnessed behaviours within home environment and media influences."

"Lack of knowledge/awareness around what an unhealthy relationship is."

Difficulties in understanding and managing emotions (n=6)

"It's becoming the norm, lack of understanding around emotions, love care and self-awareness."

"Difficulties managing their own emotions."

"He witnessed domestic violence growing up and it became normalised. Did not receive support for this or to manage his anger."

Lack of boundaries/consequences/behaviour not challenged (n=6)

"It appears that parents are having more and more difficulty in managing children's behaviour and putting boundaries in."

"Not challenged as inappropriate behaviour."

Need for control/self-protection (n=6)

"Learned behaviour, self-protection - avoid rejection."

"Self-protection from lack of trust in 'grown ups'."

Mental health issues (n=5)

"Struggling with mental health/low self-esteem/anger etc., more likely to take things out on someone else."

"As a result of trauma, learned behaviour, mental health issues."

1:1 support/specialised therapeutic support/counselling (*n*=32)

"More intense 1:1 support."

"Long-term 1-1 support with workers to build trust understanding."

"Early intervention and 1:1 support/mentoring."

<i>Q. What support do you think is needed for them specifically?</i>		
Base: All who answered this question (59)	п	%
1:1 support/specialised therapeutic support/counselling	32	54
Raising awareness/education on healthy r'ships (e.g. in schools)	17	29
Encouraged to understand impact of, and change, their behaviour	9	15
Support to parents to develop their parenting skills/family support	6	10
Early intervention work	4	7
Group work	4	7
Other	12	20

Raising awareness/education on healthy relationships (e.g. in schools) (n=17)

"Improved education focused on rights, education on healthy/unhealthy relationships within families and also within the education curriculum."

"In schools there should be more awareness of how to deal with our emotions and what is a healthy relationship."

"Education around different types of abuse, what they look like etc. but not just for them as individuals in isolation. It's important that the whole family unit is supported so that the change in behaviour can be sustained. Support in school may also be helpful and education around online usage and how this may impact relationships."

Encouraged to understand impact of, and change, their behaviour (n=9)

"Support to help them think about and manage the abusive behaviour, but also to understand how this has come about. They may be being exploited or abused themselves."

Support to parents to develop their parenting skills/family support (n=6)

"It's important that the whole family unit is supported so that the change in behaviour can be sustained."

"Importance of parenting support through 1-2-1 and group work."

Child Sexual Abuse

Summary

Over the last year, half of respondents (50%; 134 of 267) have worked with children, young people and/or parents who experienced child sexual abuse.

- 40% (106 of 267) have worked with children and young people who experienced child sexual abuse

- 26% (70 of 267) have worked with parents who experienced child sexual abuse

Respondents who have worked with children, young people, or parents who had experienced child sexual abuse said this most commonly included:

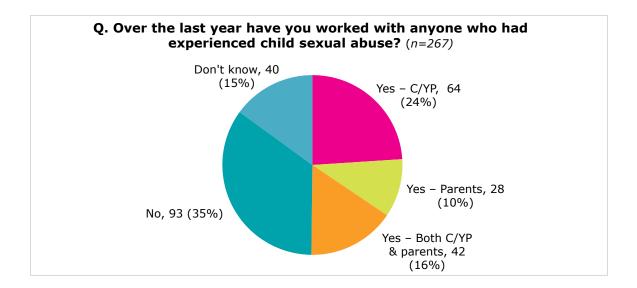
- Sexual harm in online settings (42%; 56 of 134)

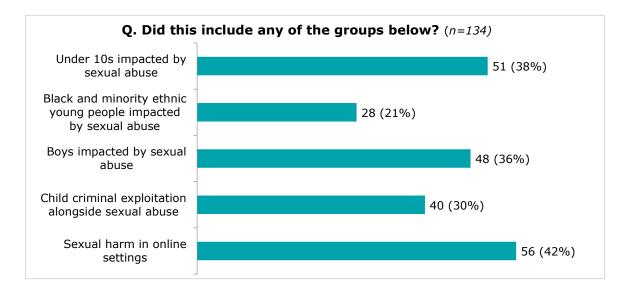
- Under 10s impacted by sexual abuse (38%)

- Boys impacted by sexual abuse (36%)

Respondents were asked which groups of children and young people who have experienced sexual abuse are less likely to come to our attention. Around a quarter of respondents (24%; 24 of 102) think boys and young men are, around a fifth (21%) think children and young people from BAME communities, and 14% think children with (hidden) disabilities/learning difficulties/ASD.

A fifth of respondents (21%; 21 of 100) think these groups of children and young people are less likely to come to our attention due to signs of abuse not being identified by professionals. Other common responses given as to why these groups of children and young people are less likely to come to our attention refer to the stigma, shame and embarrassment experienced by those who have been sexually abused (19%), and a lack of support for particular groups of children and young people (15%).





Q. Which groups of children and young people experiencing sexual abuse do you think are less likely to come to our attention?

Base: All who answered this question (102)	п	%
Boys/young men	24	24
CYP from BAME communities	21	21
CYP with (hidden) disabilities/learning difficulties/ASD	14	14
CYP/families not accessing services	11	11
CYP from 'more affluent' backgrounds	8	8
LGBTQI+ CYP	6	6
Teenagers and children aged 16+	5	5
CYP with language barriers (incl. non-verbal & ESL)	5	5
Don't know	5	5
Children in care	4	4
Vulnerable CYP/families	4	4
Travelling community	4	4
All groups of CYP are equally likely not to come to our attention	3	3
CYP being sexually harmed online	3	3
Children who are also offending/experiencing CCE	3	3
YP with more chaotic home lives (e.g. moving, homeless, going missing)	3	3
Younger children	3	3
CYP where the perpetrator is a family member/family friend	2	2
CYP who are quiet/don't draw attention to themselves through exhibiting behaviours	2	2
Primary school aged children	2	2
CYP aged 0-5	2	2
Refugees/asylum seekers/migrants/CYP with illegal status	2	2
Trafficked CYP/children of trafficked adults	2	2
Children who are not in care	2	2
Children of parents impacted by mental ill health or substance use	2	2
CYP with substance misuse issues	2	2
YP in religious groups/settings	2	2
Those still being abused	2	2
Those living in rural areas/isolated	2	2
Other	7	7

Base: All who answered this question (100)n%Signs of abuse not being identified by professionals2121Stigma, shame and embarrassment1919Lack of support for particular groups of CYP1515Fear1313CYP's lack of understanding or awareness of abuse/'perceived relationship'1313Communication difficulties or CYP who are quiet/have no voice1212Cultural barriers to disclosure and reporting1111Perceptions and stereotypes1010Fear of not being believed or listened to99CYP/families with own resources unlikely to rely on/turn to services88Fear of reprisals77Language barriers to disclosure and reporting44Groomed by abuser not to speak out33Online abuse more difficult to address33Less likely to disclose or report22Signs of abuse not being identified by parents/family22Other1010	<i>Q.</i> Why do you think some groups of children and young people experiencing child sexual abuse are less likely to come to our attent		are
Stigma, shame and embarrassment1919Lack of support for particular groups of CYP1515Fear1313CYP's lack of understanding or awareness of abuse/'perceived relationshipi1313Communication difficulties or CYP who are quiet/have no voice1212Cultural barriers to disclosure and reporting1111Perceptions and stereotypes1010Fear of not being believed or listened to99CYP/families with own resources unlikely to rely on/turn to services88Fear of family breakdown or family repercussions44Fear of family breakdown or family repercussions33Online abuse more difficult to address33Less likely to disclose or report22Signs of abuse not being identified by parents/familie22	Base: All who answered this question (100)	п	%
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Communication difficulties or CYP who are quiet/have no voice1212Cultural barriers to disclosure and reporting1111Perceptions and stereotypes1010Fear of not being believed or listened to99CYP/families with own resources unlikely to rely on/turn to services8Fear of reprisals7Language barriers to disclosure and reporting4Fear of family breakdown or family repercussions4Groomed by abuser not to speak out3Online abuse more difficult to address3Less likely to disclose or report2Signs of abuse not being identified by parents/family2	Fear	13	13
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Less likely to disclose or report 2 2 Signs of abuse not being identified by parents/family 2 2	Groomed by abuser not to speak out	3	3
Signs of abuse not being identified by parents/family 2 2	Online abuse more difficult to address	3	3
5 , , , ,	Less likely to disclose or report	2	2
Other 10 10	Signs of abuse not being identified by parents/family	2	2
		10	10

Signs of abuse not being identified by professionals (n=21)

"Not on professionals' radar, people seeing the behaviours not the cause." "Indicators of abuse are not being picked up by Children's Services or schools."

Stigma, shame and embarrassment (n=19)

"Due to shame and embarrassment and fear of sharing this information." "Stigma and guilt - worried they will be outed - think it's their fault."

Lack of support for particular groups of CYP (n=15)

"Barriers to accessing services, assumptions made as to who does and does not experience sexual abuse."

"Lack of access to support from BME communities professionals not being curious enough / looking more at behaviour, rather than why they are exhibiting such behaviour." **Fear** (*n*=13)

"Shame, fear, power and control issues of abusers."

"cared of telling someone and asking for support or not understanding that its wrong."

"Fear about impact on family and community and their own isolation."

CYP's lack of understanding or awareness of abuse/'perceived relationship' (n=13)

"Because the child has been groomed into not sharing what is happening, or do not have the knowledge that it is abuse."

"Difficult to recognize and difficult to get them to disclose (they might not know it's even abuse)."

"Some children and young people do not believe that what is happening to them is abusive."

Communication difficulties or CYP who are quiet/have no voice (n=12)

"Non-verbal children as it is harder to find the best way to communicate and services as a whole are not always adept at this."

"Under 5's due to lack of communication skills will be at high risk - again how will anyone know if they are having sexual abuse in their lives."

Cultural barriers to disclosure and reporting (n=11)

"Children from ethnic backgrounds due to their codes of silence and gross lack of support from the police and many professionals including social workers who are inadequately trained/knowledgeable of the impacts and are 'system focused' rather than child focused."

"Cultural differences, language barriers, stigma of being abused."

Perceptions and stereotypes (where boys/men are not seen as victims of CSA) (n=10)

"Culturally we still think that girls get abused, therefore are more open to seeing them as victims."

"There's a lack of awareness surrounding males that experience abuse and also around available services for men."

Hate Crime/Abuse

Summary

Forty three per cent of practitioners had supported a child or young person who had experienced concerning content online. Over the last year, 17% of respondents (41 of 245) had supported a child or young person who experienced viral scare memes online, and 16% (38 of 243) had supported a child or young person who had experienced anti-LGBT+ content online. Twenty two per cent of respondents (51 of 227) have supported a child or young person who experienced other concerning content online. When asked to describe this other content, the three most common responses were:

- Sexual content, pornography and sexting (30%; 18 of 60)

- Bullying, threats and trolling (27%)

- Online grooming (15%)

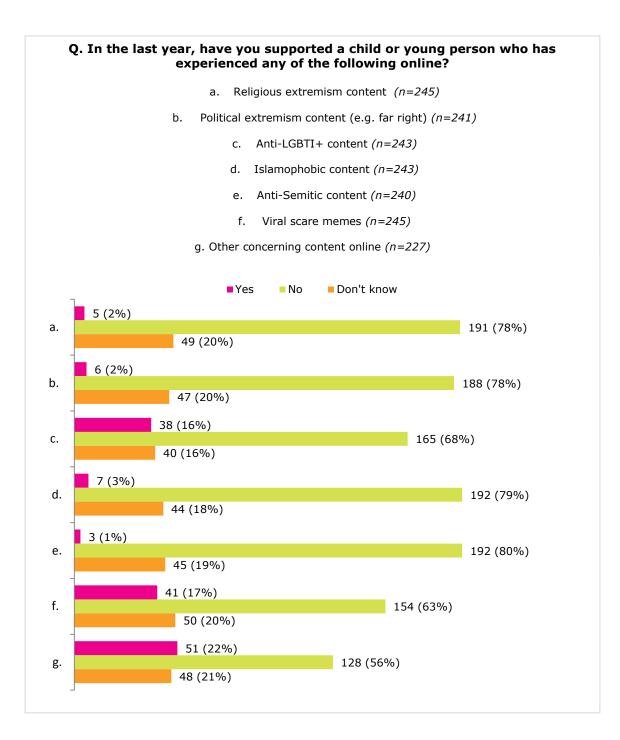
Over the last year, 12% of respondents (30 of 242) have supported a child or young person who experienced hate crime or abuse due to their gender identity. Eleven per cent (27 of 240) have supported a child or young person who experienced hate crime or abuse due to their sexual orientation. Ten per cent (25 of 240) have supported a child or young person who experienced hate crime or abuse due to their sex; and 10% (25 of 240) due to their race.

Around a quarter of respondents (26%; 61 of 237) felt hate crimes were increasing in their local area, compared to 12 months ago. The most common reasons given for this were:

- Negative impact of media and social media (47%)

- Brexit, the political context and the polarisation of the public/far right (35%)

- Lack of support and resources (16%)



Q. Please tell us what other concerning content is online		
Base: All who answered this question (60)	п	%
Sexual content/pornography/sexting	18	30
Bullying/threats/trolling	16	27
Online grooming	9	15
Sharing videos/images/personal content	7	12
Online games	5	8
Online CSA/E	5	8
Self-harm	4	7
Violent images/videos	4	7
Fake profiles (pretending to be younger than are)	2	3
Other	7	12

Sexual content/pornography/sexting (n=18)

"Pressure to engage in sharing of sexual images, being bullied for sharing sexual images."

"Sending of personal intimate photos via the likes of Snapchat."

Bullying/threats/trolling (n=16)

"Online bullying through social media and filming/sharing video." "Threats on social media."

Online grooming (*n*=9)

"Child grooming and sexual exploitation." "Sexual grooming via a gaming chat room."

Sharing videos/images/personal content (n=7)

"Receiving and sending explicit or inappropriate images/videos." "Recording children/young people fighting and put online."

Online games (*n*=5)

"A person contacting a child via a game and there was sexualised language in their communications."

"PlayStation - young boys often threaten each other and use alarming language towards each other."

Online CSA/E (n=5)

"Child sexual exploitation."

"Sexual abuse/grooming."

Q. Can you tell us any examples of this (e.g. what was experienced, which online platforms, what impact this had, was it reported etc.)

Examples:

"Instagram forums encouraging suicide and self-harm."

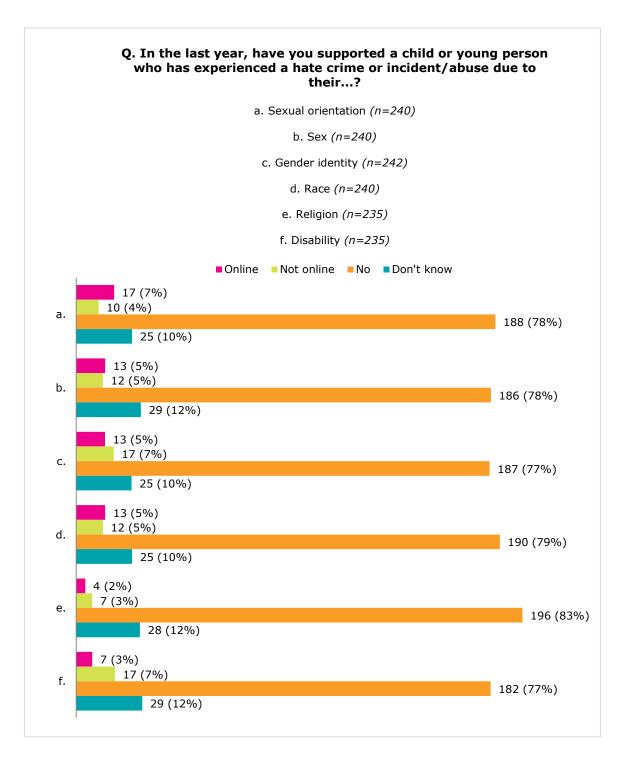
"Snapchat, Instagram and Facebook Messenger have been used in my experience to create group messaging to bully; explicit images have been shared and saved; this has diminished the CYP's trust and self-esteem, and resulted in deterioration of relationships, behaviours and self-esteem."

"Issues with on-line gaming such as Fortnite/the Momo phenomenon at the start of 2019. Killer clowns on You Tube have caused trauma/anxiety for the younger age group for several years now."

"Online gaming platform, designed to talk about gaming being used by adults to groom children. Reported to police."

"Snapchat & WhatsApp. Young person believed she was in a healthy relationship, even though they had not met. The male ended the relationship again over social media, referencing to how she looked."

"Facebook revenge porn."



Q. Which groups are most likely to face hate crime due to a combination of these factors?

Examples:

"LGBTQ community, and BAME community."

"If there is a combination of more than one of the above factors - LGBTQ community are often targeted."

"Refugees, asylum seekers, same sex couples."

"Vulnerable /disabled young people."

"Those with additional needs (perhaps Learning difficulties)."

"In our area there has been a significant rise in hate crime directed towards disabled people."

"Travellers. CYP attending a religious school/college."

"Not in the last year but from previous experience, those with a disability or identifying as LGBT."

"LGBTQ, BAME, Asylum seekers and refugees, Muslims, Jewish people, Disabled people, Roma, Gypsy and Traveller."

"People with additional support needs."

Q. Please provide examples (e.g. nature of incidents, what impact did it have, was it reported?)

Examples:

"Race abuse on social media filmed on public transport in England, news reports of individuals experience abuse based on gender identity and sexual orientation."

"Abuse in the streets relating to children with disability. Teen boys I worked with had regularly had abuse and threats hurled at them - not reported by parent to the Police."

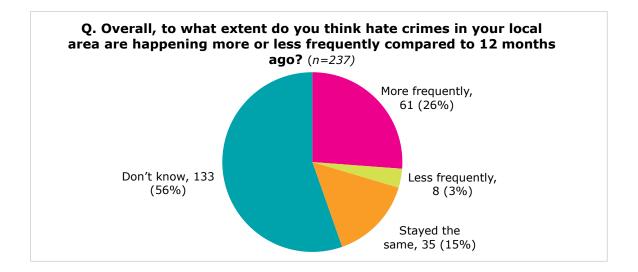
"A group attempted to set fire to a young person with autism. He is afraid to leave the house now and does not socialize outside school. He will only go out with his parents. Reported to police. No action taken."

"Transgender young person being verbally berated by a neighbour (about their transgender status). Young person feels anxious to leave the house in case of further incidents - has applied for housing transfer."

"Comments made by other family's extended family and friends. School not providing SEND responsive care or learning environment."

"I have come across prejudicial attitudes and beliefs from young people and adults from non-Muslim backgrounds."

"There was a young person who was in beginning stages of transitioning. Another young person was being discriminatory to their identity and was making threats of violence. As a result the young person was supported to inform police, and the police charged the young person."



Base: All who answered this question (62)	п	%
Negative impact of media and social media	29	47
Brexit/political context and polarization of public/far right	22	35
Lack of support and resources	10	16
Ignorance/lack of education	7	11
Increase of racism/racial tensions	5	8
Financial stress/limited employability	4	6
Austerity	4	6
Drug abuse/gangs	4	6
Parental influence	3	5
Issues with reporting (lack of evidence, support, follow up)	3	5
Religious differences	2	3
Rural isolation	2	3
Other	7	11

Negative impact of media and social media (n=29)

"I think that some of these incidents are hidden behind social media platforms and not always face to face."

"Rise of social media, and lack of accurate and effective reporting tools."

Brexit/political context and polarisation of public/far right (*n*=22)

"I feel there has been a rise in far-right views triggered by Brexit and sharing through social media."

"The current political climate in both the UK and America. I am seeing more racial and hate group related stickers etc. stuck on lampposts and around the area I work and live in."

Lack of support and resources (n=10)

"Less police, more young people and no youth clubs to go to."

"Lack of support and social activities."

Ignorance/lack of education (n=7)

"Misdirected anger and frustration. Lack of education." "Because people are not educated on it."

Increase of racism/racial tensions (n=5)

"Racial tensions."

"Brexit propaganda and anti-immigration rhetoric."

School Exclusions

Summary

Over the last year, 36% of respondents (91 of 252) have worked with children and young people who experienced a fixed term or permanent exclusion. The most common reasons given for why children and young people have been excluded were:

- Behaviour (including challenging, aggressive and anti-social) (80%; 68 of 85)

- Fighting/violence (24%)

- Truancy/poor attendance (13%)

Respondents were asked about the impact exclusion had on children and families. Forty five per cent (37 of 82) said it put pressure on family relationships (including stress, financial strain and difficulties juggling child care). Twenty eight per cent said it led to children and young people falling behind in their education, while 18% said it lead to self-esteem issues.

Respondents were asked to rate the quality of alternative provision to exclusion (e.g. Pupil Referral Units). Around two fifths of respondents (42%; 37 of 88) rated the quality as 'poor' or 'very poor', 19% rated it as 'neither good nor poor', while 19% rated it as 'good' or 'very good'.

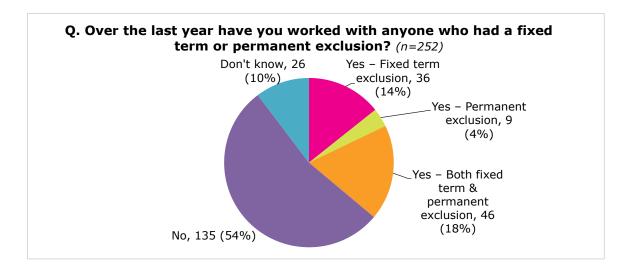
The most common reasons given for rating alternative provision in this way were:

- A lack of services/resources (25%; 13 of 53)

- A lack of awareness on how to support pupils (23%)
- All being lumped together has a negative impact (19%)

Around a fifth of respondents (21%; 15 of 71) said alternative education was needed for those who have been excluded. Eighteen per cent said an understanding of children and young people's behaviour and the reasons behind it was needed, while 15% said better support networks for young people were needed.

Thirty six per cent of respondents (25 of 70) said a better understanding of the reasons for behaviour was needed to avoid young people being excluded. Thirty per cent said 1:1, specialist support and counselling was needed, while 17% said home-school partnership working and support for families was needed.



Q. What are some of the reasons for exclusions?				
Base: All who answered this question (85)	п	%		
Behaviour	68	80		
Fighting/violence	20	24		
Truancy/poor attendance	11	13		
Lack of support and resources				
Carrying knives	8	9		
MHWB issues	8	9		
Substance misuse	6	7		
Sexual behaviour/harassment	3	4		
Uniform	2	2		
Other	5	6		

Behaviour (incl. challenging, aggressive and anti-social) (n=68)

"The school states behaviour is generally the reason for exclusions."

"Perceived violence, inappropriate behaviour."

"Challenging behaviour - Verbal and physical."

Fighting/violence (*n*=20)

"Violence towards staff and other pupils."

"Hitting or fighting other pupils."

"Physically fighting with other pupils. Displaying dangerous or disruptive behaviour."

Truancy/poor attendance (n=11)

"Disruptive behaviour, non-attendance."

"Fighting / Truancy."

Lack of support and resources (n=9)

"Lack of support from schools, undiagnosed neurological conditions so support not meeting needs."

"Education system unable to meet the needs of young people."

"Behaviour and school policies not reflecting that send students can't cope with this in the same way that it would work for the other students without send."

Carrying knives (*n*=8)

"Child taking a knife into school." "Bringing a knife to school."

MHWB issues (*n*=8)

"Behaviour due to mental health issues, and impact of parental drug & alcohol/ mental health."

"Emotional health and wellbeing impacting on behaviour."

Substance misuse (*n*=6)

"Violence and drugs on school premises." "In possession of drugs or and alcohol."

2. What impacts does this have on children and families? Base: All who answered this question (82)	п	%		
Pressure on family relationships	37	45		
Falls behind in their education	23	28		
Self-esteem issues	15	18		
More susceptible to being groomed, criminal and child sexual exploitation and trafficking	14	17		
Isolation	11	13		
Lack of support/need more support for CYP & parents/carers Changes in mental health				
Disengaged with education/difficulties re-engaging	6	7		
Behavioural changes	5	6		
Becomes depressed and anxious	5	6		
Doesn't address underlying issues/causes of behaviour that have led to exclusion	5	6		
Blame is put on CYP & parents/carers	3	4		
Not seen as a punishment	3	4		
Schools less tolerant/quicker to exclude	2	2		
Lack of routine/structure	2	2		
Other	8	10		

Pressure on family relationships (including stress, financial strain, difficulties juggling child care) (n=37)

"Added stressors at home while young person is excluded. Parents often are being requested to come to school to attend to the child although the child is not formally excluded parent has to be available daily in case the child is not coping. Has resulted in parent missing health appointment and appointment with her solicitor. Previously has been an issues for working parents but currents parents involve are not working."

"As a family school exclusions cause greater pressures on family relationships and have financial implementation."

"The family have to juggle their jobs and depend on family and friends. Financial difficulties arise through loss of job."

Falls behind in their education (*n*=23)

"CYP misses out on learning."

"The young person falls behind their peers, becomes disconnected with education, this also impacts on parents and other relationships."

Self-esteem issues (*n*=15)

"Self-esteem of YP affected." "Low self-worth."

More susceptible to being groomed, criminal and child sexual exploitation and trafficking (n=14)

"Self-esteem of YP affected."

"*Reinforcing poor and negative messages and how that young person feels about themselves.*"

"Isolation, depression, reinforces poor or no self-esteem and low self-worth."

Isolation (n=11)

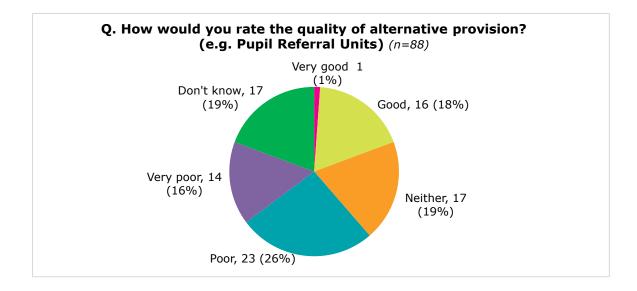
"Social isolation with peer group."

"Feel isolated, alone, blamed and shamed, un-supported."

Lack of support/need more support for CYP & parents/carers (n=10)

"A belief that the child is bad and not being supported beyond their behaviour".

"More exclusions and difficulties in supporting their needs as the right support has been limited."



<i>Q. Please tell us why you think this</i>		
Base: All who answered this question (53)	п	%
Lack of services/resources	13	25
Lack of awareness on how to support pupils	12	23
All being lumped together has a negative impact	10	19
Positive for CYP – better able to engage/respond to CYP needs	7	13
Alternative education not easy accessible for YP e.g. long travel times	2	4
Other	3	6

-	What support cluded?	do	you	think	is	needed	for	those	who	have	been	
Des	All when energy		hin m		171	1					0/	

Base: All who answered this question (71)	n	%
Alternative education	15	21
Understanding of CYP behaviour and reasoning behind it	13	18
Better support network for the YP	11	15
Mental health/therapeutic support	9	13
Support to return to school	9	13
1:1 support	8	11
Better support provided within school settings	8	11
Mentoring	3	4
Early intervention/support	2	3
Don't know	1	1
Other	5	7

Alternative education (n=15)

"As many hours of meaningful education as possible. Too often these children are parked in minimal hours provision doing work that is far too simple."

"More resources and offers of alternative curriculum to help support the young person and encourage them to engage in a form of education suitable to their needs at the time."

Understanding of CYP behaviour and reasoning behind it (e.g. a C/YP may have additional learning needs) (n=13)

"Exploring child's needs/barriers and the collateral break down in the changes they are displaying - more counselling wellbeing sensitive related support."

"An understanding of the reasons behind a behaviour."

Better support network for the YP (*n*=11)

"More cohesive support for all affected and more contact between home and school during the exclusion."

"Building relationships and identifying if they have additional needs that might be missed, buddy system to transition back into class. emotional support, why are they acting like this?"

Mental health/therapeutic support (*n*=9)

"Therapeutic holistic approaches with key workers who take and give time to get to know the young person first - building relationships see the person."

"A greater level of therapeutic support, the majority of students in PRUs have experienced a great deal of trauma, if a neurosequential format was in place in addition to regular expected curriculum, it may benefit."

Support to return to school (n=9)

"Home Tutor to support with work and to get them back on track ready for school."

"Key workers to support returning to education, to support parents to access the correct information."

1:1 support (n=8)

"1:1 support based on their individual needs."

"1-1 support to understand the main problem behind the behaviour."

Better support provided within school settings (*n*=8)

"Better support in schools, specialist teachers and assistance for teachers."

"Liaison with schools. Provision of lessons and tutors. Individual work with CYP to address any support issues."

<i>Q.</i> What support do you think is needed to avoid young pe excluded?	eople	being
Base: All who answered this question (70)	п	%
Better understanding of reasons for behaviours	25	36
1:1/specialist support/counselling	21	30
Home-school partnership working/support for families	12	17
Better training for staff	7	10
Early intervention	6	9
Flexibility	6	9
Alternative courses/programmes	4	6
Other	4	6

Better understanding of reasons for behaviour (*n*=25)

"Better understanding from teachers as to why young people act in a certain way. For example, those who don't attend school and then when they eventually do, they are given a very hard time by teachers- rather than support to find out why they haven't been attending."

"Greater school awareness of external factors leading to exclusion."

1:1/specialist support/counselling (*n*=21)

"More support and resources in school especially to support the young person's emotional health and wellbeing."

"More one to one's in school to support individual children who need this care."

"More effort to engage and provide emotional support."

Home-school partnership working/support for families (n=12)

"Restorative practice between school, parents and child."

"I believe schools should work more closely with parent and guardians, more detailed assessments to ensure young people are better suited to the school being offered and additional services to add additional support for young people who requires the support."

Better training for staff (*n*=7)

"Better training and resources in school so staff can understand additional needs (e.g. autism, ADHD, sensory processing disorder)."

"More training to understand the needs of the young person."

Early intervention (*n*=6)

"Early intervention - intervening earlier on when signs of deterioration in behaviour is first noticed."

"Much earlier help when initial signs are showing of struggling behaviours."

Flexibility (n=6)

"Schools to be more flexible in their approach, some children need a different way of teaching and I am not sure how this can be accommodated, maybe more hands on."

"Flexibility - mainstream is not for everyone. A variety of alternatives are needed."

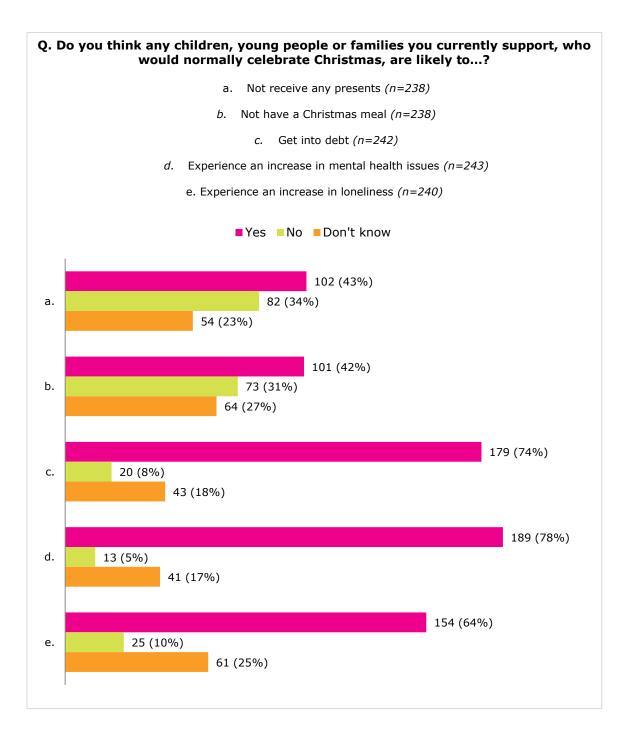
Christmas

Summary

The majority of respondents (78%; 189 of 243) felt the children, young people or families they supported, who would normally celebrate Christmas, were likely to experience an increase in mental health issues at Christmas. Seventy four per cent (179 of 242) felt the children, young people or families they supported were likely to get into debt, while 64% (154 of 240) felt they were likely to experience an increase in loneliness.

Around half of respondents (53%; 92 of 175) felt 'low income families' are most affected by these issues. Eighteen per cent felt 'all children, young people and families' are most affected, while 13% felt 'children, young people and families affected by mental health and wellbeing issues' are most affected.

Around a quarter of respondents (26%; 41 of 156) stated financial support and advice on money management over the year is needed to address these issues. Other common responses referred to the need to provide meals (15%), and for community or outreach support (14%).



Q. Which groups of children, young people or families do you think are most affected?

Base: All who answered this question (175)	п	%
Low income families	92	53
All CYP/families	31	18
CYP and families affected by mental health and wellbeing issues	22	13
Children in care	18	10
The most vulnerable CYP/families	12	7
Teenagers and children aged 16+	11	6
Lone/single parents	9	5
Families without strong support networks	9	5
Refugee and asylum seekers	9	5
CYP and families affected by substance misuse issues	9	5
Care leavers	8	5
Young carers	7	4
Children with additional needs (including ASD, SEN & SPD)	6	3
CYP and families affected by neglect	5	3
CYP and families affected by homelessness	5	3
Children aged 0-5	3	2
Children impacted by trauma	3	2
Edge of care/involved with social services	3	2
CYP and families affected by domestic abuse	3	2
Children with disabilities	2	1
Large families	2	1
Other	8	5

Q. What support do you think is needed?		
Base: All who answered this question (156)	п	%
Financial support and advice on money management	41	26
Providing meals	24	15
Community based support/outreach	22	14
Groups or activities for CYP & families to attend over Christmas period	21	13
Improved services/more funding for services	18	12
Providing gifts/gift donations	14	9
Mental health, wellbeing and emotional support	14	9
Improved wages, working conditions and hours	14	9
Family support	11	7
Improved benefits support/benefit provision/welfare support	10	6
Support to reduce the expectations and (financial) pressure put on families	10	6
Support for those who may be alone or feel lonely (includes over phone/check ins)	9	6
Multiagency approaches to providing support (incl. information sharing, working with foodbanks/Shelter)	6	4
Listen to the needs of CYP and families	3	2
More flexible family contact/respite	3	2
Other	5	3

Financial support and advice on money management (over the year, not just at Christmas) (n=41)

"Advice on saving through the year."

"Financial support for parents on income-based benefits such as universal credit."

"More work with parents as well as children around budgeting and expectations."

Providing meals (on Christmas day or over the Christmas period) (n=24)

"Donations support from the food bank."

"More services available such as food bank xmas hampers to make this time of year slightly easier for families."

"To ensure that the families we support will have the necessities' they need i.e. food for Christmas by offering a hamper from local churches and presents for each child from children's centres."

Community based support/outreach (*n*=22)

"Community based support - gift support - food support."

"More outreach and accommodation support."

"Local services in the area to bring communities together to have a Christmas meal."

Groups or activities for CYP and families to attend over Christmas period (n=21)

"Groups open for families to attend across Christmas."

"Options for places for them to spend Christmas, activities to do around Christmastime to perhaps distract them - maybe not necessarily Christmas based."

"Activities and meals to run at Centres over Christmas. Drop in for support with finance."

Improved services/more funding for services (*n*=18)

"More funding, staff and specialist services and support

"More government support funding."

"More support for contact to be flexible at this time of year and more beneficial to the children."

Providing gifts/gift donations (across the Christmas period) (n=14)

"Support to low income families to get affordable / donated presents." "Financial or food vouchers, toys, games."

Mental health, wellbeing and emotional support (n=14)

"Easier access to Mental Health Support Services and more services being made available."

"Education about mental health and support with it."

Improved wages, working conditions and hours (*n*=14)

"Lower cost of living, higher wages, more affordable housing." "Increase in wages and more opportunities for the unemployed." "Work related improvements for pay and conditions."

Family support (*n*=11)

"Encouraging families to find support outside of services e.g. family, friends, peers."

"More approachable support for the families."

"I think that a more think family approach is needed in statutory services, to provide mediation and safety planning to promote family involvement and inclusion where safe."

Improved benefits support/benefit provision/welfare support (*n*=10)

"Better ways to access the need for benefits."

"Improved welfare benefits system, debt advice, preventative advice."

"Scrapping Universal Credit, the benefits cap, sanctions and zero hours contracts."

Support to reduce expectations and (financial) pressure put on families (n=10)

"Support around the importance of quality interactions not just the physical expensive gifts."

"More work with parents as well as children around budgeting and expectations."

"Greater support for families to recognise Christmas is one day a year and does not need £100s spent on it. Too many families go significantly overboard and take on huge debt to provide a 'big' Christmas."

APPENDIX A: Regional Breakdowns – Emerging Vulnerabilities

Q. Are there are any new issues you are seeing emerging, or new things you are hearing from children, young people or families, over the last few months?

Cymru (<i>n</i> =22)	п	%
Less support/fewer resources/lack of activities	4	18
No change/nothing new	4	18
Increase in MHWB issues among CYP and families	3	14
Increase in enforced criminal activity/county lines/gang involvement	3	14
Poverty/changes to benefits system (including UC)	3	14
Increase in need for support for CYP with additional needs	3	14
East (<i>n</i> =24)	n	%
Less support/fewer resources/lack of activities	6	25
No change/nothing new	5	21
Increased impact of digital	4	17
London (n=28)	n	%
Less support/fewer resources/lack of activities	10	36
No change/nothing new	6	21
Increase in MHWB issues among CYP and families		14
	4	%
Midlands and South West (n=29)	n	28
Less support/fewer resources/lack of activities	8	
Increase in MHWB issues among CYP and families	4	14
Poverty/changes to benefits system (including UC)	3	10
No change/nothing new	3	10
Increase in safeguarding issues	3	10
Reduced quality of support	3	10
Northern Ireland (n=14)	п	%
Increase in MHWB issues among CYP and families	3	21
No change/nothing new	3	21
Less support/fewer resources/lack of activities	2	14
Increased impact of digital	2	14
Poverty/changes to benefits system (including UC)	2	14
Increase in need for support for CYP with additional needs	2	14
Scotland (n=32)	п	%
Poverty/changes to benefits system (including UC)	8	25
No change/nothing new	7	22
Less support/fewer resources/lack of activities	6	19
South East and Anglia (n=60)	n	%
Less support/fewer resources/lack of activities	12	20
Increase in MHWB issues among CYP and families	10	17
No change/nothing new	9	15
West (n=24)	n	%
No change/nothing new	7	29
Less support/fewer resources/lack of activities	3	13
Increase in enforced criminal activity/county lines/gang involvement		
	3	13
Poverty/changes to benefits system (including UC)	3	13

families?			
Cymru (<i>n</i> =23)		п	%
MHWB is	ssues among CYP and families	6	26
	Lack of support and resources	6	26
	Impact of digital	5	22
East (n=32)		п	%
	Lack of support and resources	15	47
MHWB is	ssues among CYP and families	9	28
Pover	ty/changes to benefits system	6	19
London (n=30)		п	%
	Lack of support and resources	10	33
	Impact of digital	9	30
MHWB is	ssues among CYP and families	6	20
Midlands and South West (n=34)		п	%
	Lack of support and resources	16	47
MHWB is	ssues among CYP and families	4	12
Pover	ty/changes to benefits system	4	12
Northern Ireland (n=14)		п	%
	Lack of support and resources	6	43
MHWB is	ssues among CYP and families	4	29
	Impact of digital	2	14
Scotland (n=38)		п	%
MHWB is	ssues among CYP and families	13	34
Pover	ty/changes to benefits system	10	26
CYP/families	affected by substance misuse	8	21
South East and Anglia (n=65)		п	%
	Lack of support and resources	33	51
MHWB is	ssues among CYP and families	17	26
Pover	ty/changes to benefits system	9	14
West (<i>n</i> =26)		п	%
MHWB is	ssues among CYP and families	9	35
	Lack of support and resources	8	31
Pover	ty/changes to benefits system	7	27

Q. What is your biggest concern now for children, young people and families?

Cymru (<i>n</i> =23)	n	%
Children aged 5-16	8	35
All CYP/families	7	30
Low income families/workless/reliant on benefits	5	22
East (<i>n</i> =30)	п	%
All CYP/families	9	30
Low income families/workless/reliant on benefits	8	27
The most vulnerable CYP/families	6	20
CYP and families affected by mental health and wellbeing issues	6	20
London (n=29)	п	%
All CYP/families	7	24
Children aged 5-16	6	21
CYP with protected characteristics (LGBTQI+, ethnic minorities)	5	17
Children aged 0-5	5	17
Midlands and South West (n=32)	п	%
All CYP/families	7	22
Low income families/workless/reliant on benefits	5	16
Children in care	5	16
Northern Ireland (n=13)	п	%
All CYP/families	7	54
Children with disabilities	2	15
CYP with protected characteristics (LGBTQI+, ethnic minorities)	2	15
Scotland (n=37)	п	%
All CYP/families	12	32
Teenagers and children aged 16+	7	19
Children aged 5-16	7	19
South East and Anglia (n=66)	п	%
All CYP/families	31	47
The most vulnerable CYP/families	10	15
Low income families/workless/reliant on benefits	8	12
Teenagers and children aged 16+	8	12
Children aged 5-16	8	12
West (<i>n</i> =24)	п	%
All CYP/families	6	25
Teenagers and children aged 16+	5	21
Care leavers	4	17

Q. Which groups of children, young people and families do you think are most affected by the concerns you raised above?

Q. Which external agencies do	you mostly work with?		
Cymru (<i>n</i> =25)		п	%
	Social Care (non-specific)	11	44
	Schools	9	36
	MHWB Services (e.g. CAMHS)	8	32
East (<i>n</i> =32)		п	%
	Health (NHS or non-specific)	8	25
	Schools	7	22
	Social Care (non-specific)	7	22
London (n=30)		n	%
	Social Care (non-specific)	9	30
	Schools	8	27
	Local Government/Local Authorities	5	17
Midlands and South West (n=33)		п	%
	Schools	11	33
	Health (NHS or non-specific)	10	30
	Social Care (non-specific)	10	30
Northern Ireland (n=13)		п	%
	Schools	5	38
	NI Trusts	4	31
	Social Care (non-specific)	4	31
Scotland (n=36)		п	%
	Social Work	29	81
	Education (non-specific)	12	33
	Health (NHS or non-specific)	7	19
South East and Anglia (n=63)		п	%
	Schools	19	30
	Social Care (non-specific)	17	27
	Local Government/Local Authorities	12	19
West (<i>n</i> =26)		п	%
	Social Care - Children's Services	8	31
	Social Care (non-specific)	6	23
	Health (NHS or non-specific)	5	19

concerns you raised above?		
Cymru (<i>n</i> =22)	п	%
None/We work with all	5	23
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	5	23
Schools	4	18
East (<i>n</i> =29)	п	%
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	12	41
Youth Justice/Youth Offending Services	4	14
Social Care (non-specific)	3	10
Police	3	10
London (n=24)	п	%
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	7	29
Health (NHS or non-specific)	3	13
Schools	3	13
Midlands and South West (n=28)	п	%
Health (NHS or non-specific)	7	25
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	4	14
Local Government/Local Authorities	4	14
Social Care (non-specific)	4	14
Northern Ireland (n=12)	n	%
None/We work with all	3	25
Health (NHS or non-specific)	2	17
Schools	2	17
Non-statutory Agencies (other & not specified)	2	17
Scotland (n=37)	п	%
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	15	41
Social Work	8	22
Health (NHS or non-specific)	6	16
South East and Anglia (n=44)	п	%
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	12	27
Police	6	14
Non-statutory Agencies (other & not specified)	5	11
West (n=22)	п	%
MHWB Services (e.g. CAMHS/Counsellors/Therapists)	7	32
Schools	4	18
Non-statutory Agencies (other & not specified)	4	18

Q. Which external agencies would you like to do more joint work with, to support children, young people and families, and address the concerns you raised above?

APPENDIX B: Regional Breakdowns – Trauma-Informed Practice

	Yes		Νο		Don't Know		Total Responses	
	п	%	п	%	п	%	п	
Cymru	24	92	2	8	0	26	26	
East	30	91	3	9	0	0	33	
London	21	68	7	23	3	10	31	
Midlands & South West	32	91	2	6	1	3	35	
Northern Ireland	14	88	0	0	2	13	16	
Scotland	38	95	1	3	1	3	40	
South East & Anglia	55	79	11	16	4	6	70	
West	26	81	4	13	2	6	32	

Q. Over the last year, have you supported any children, young people or parents who have experienced trauma?

Q. How confident do you feel in recognising signs of trauma?

Qi non connacht ao												
		ery fident	Fairly t confident			Not very confident		t all dent	Total Responses			
	п	%	п	%	п	%	п	%	п			
Cymru	4	18	15	68	3	14	0	0	22			
East	4	14	20	69	5	17	0	0	29			
London	9	45	10	50	1	5	0	0	20			
Midlands & South West	4	13	20	65	7	23	0	0	31			
Northern Ireland	2	14	11	79	1	7	0	0	14			
Scotland	8	23	24	69	3	9	0	0	35			
South East & Anglia	11	21	36	69	4	8	1	2	52			
West	3	13	20	83	1	4	0	0	24			

Q. How confident do you feel responding in a trauma-informed way?

		Very confident		Fairly confident		Not very confident		it all dent	Total Responses	
	п	%	п	%	п	%	п	%	п	
Cymru	3	14	11	50	7	32	1	5	22	
East	4	14	15	52	10	34	0	0	29	
London	3	15	14	70	3	15	0	0	20	
Midlands & South West	3	10	16	52	12	39	0	0	31	
Northern Ireland	1	7	12	86	1	7	0	0	14	
Scotland	9	26	18	51	8	23	0	0	35	
South East & Anglia	5	10	31	60	14	27	2	4	52	
West	3	13	15	63	6	25	0	0	24	

	A lot		A li	A little		Not at all		n't w	Total Responses	
	n	%	n	%	п	%	п	%	п	
Cymru	4	18	11	50	1	5	6	27	22	
East	7	24	19	66	1	3	2	7	29	
London	2	10	9	45	6	30	3	15	20	
Midlands & South West	9	29	12	39	4	13	6	19	31	
Northern Ireland	2	14	9	64	1	7	2	14	14	
Scotland	13	37	13	37	5	14	4	11	35	
South East & Anglia	17	33	16	31	2	4	17	33	52	
West	4	16	15	60	2	8	4	16	25	

Q. To what extent do you feel trauma-informed values are reflected in the way you are treated by Barnardo's as a member of staff?

	Yes		Νο		Don't Know		Total Responses	
	п	%	п	%	п	%	п	
Cymru	16	67	4	17	4	17	24	
East	19	59	10	31	3	9	32	
London	12	44	12	44	3	11	27	
Midlands & South West	19	58	10	30	4	12	33	
Northern Ireland	6	40	3	20	6	40	15	
Scotland	18	49	12	32	7	19	37	
South East & Anglia	29	43	30	45	8	12	67	
West	14	45	12	39	5	16	31	

APPENDIX C: Regional Breakdown - Child Sexual Abuse

APPENDIX D: Regional Breakdowns – Hate Crime/Abuse

		/				--				
		More frequently		Stayed the same		Less frequently		n't w	Total Responses	
	п	%	n	%	п	%	п	%	п	
Cymru	8	35	8	35	0	0	7	30	23	
East	10	36	3	11	0	0	15	54	28	
London	7	32	0	0	1	5	0	64	22	
Midlands & South West	10	34	3	10	4	14	12	41	29	
Northern Ireland	1	7	4	29	0	0	9	64	14	
Scotland	4	12	3	9	2	6	24	73	33	
South East & Anglia	9	16	8	14	1	2	40	69	58	
West	11	38	6	21	0	0	12	41	29	

Q. Overall, to what extent do you think hate crimes in your local area are happening more or less frequently compared to 12 months ago?

	Yes		No		Don't Know		Total Responses	
	п	%	п	%	п	%	п	
Cymru	14	58	8	83	2	8	24	
East	15	52	12	41	2	7	29	
London	9	33	17	63	1	4	27	
Midlands & South West	12	39	16	52	3	10	31	
Northern Ireland	2	13	9	60	4	27	15	
Scotland	8	24	22	67	3	9	33	
South East & Anglia	21	34	33	53	8	13	62	
West	9	30	18	60	3	10	30	

APPENDIX E: Regional Breakdowns - School Exclusions