



# **Child Safeguarding Practice Review:** BSCP 2021-22/01

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## 1. Introduction

- 1.1 This report covers the findings of a Children’s Safeguarding Practice Review relating to a child to be referred to as ‘the child’.
- 1.2 Concerns regarding physical abuse within the home date back to 2014. In 2016 all the children were made subject to Child Protection Plans under the category of physical abuse for a period of three months. When the child was 14, she disclosed that her parents had subjected her and her siblings to systematic, extreme corporal punishment and physical assaults during their childhood. The child’s account was corroborated by her siblings who experienced similar assaults, but to a lesser extent than their sister.

## 2. The process

- 2.1. The circumstances of this case were discussed at the Rapid Review on the 4<sup>th</sup> October 2021. The Rapid Review took a holistic view of the physical and emotional impact on all six children within the family, when determining whether the criteria for ‘serious harm’, as set out in Working Together 2018<sup>1</sup> was met. It was unanimously agreed that whilst the physical injuries suffered by the children would not lead to any long-term physical impairment, it is likely that their adverse childhood experiences will significantly impact on their long-term mental and emotional wellbeing. It was therefore agreed that, on that basis, the case met the threshold for a Child Safeguarding Practice Review. The Rapid Review considered this should be a National Review.
- 2.2 The Rapid Review highlighted two key issues which it felt required resolution at a national level:
- **Elective Home Education** - There is a need to revise current Elective Home Education guidance, to extend Local Authorities’ investigative roles where there are concerns about a child’s education, to incorporate powers to visit and meet the child, to redress absence of safeguarding protection that children in full-time state education receive.
  - **Lack of regulation for supplementary schools** - The second area appertained to the lack of regulation of supplementary schools and the extension of Ofsted’s powers of inspections to supplementary schools and suspected unregistered institutions, as recommended by the Independent Inquiry into Child Sexual Abuse report published on the 2<sup>nd</sup> September 2021.
- 2.3 On the 4<sup>th</sup> of November 2021 the National Panel endorsed Birmingham Safeguarding Children Partnership’s (BSCP) decision to initiate this review.

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<sup>1</sup> Working together to safeguard children (2018) HM Government

- 2.4 In February 2022 an Independent Chair and Lead Reviewer<sup>2</sup> was commissioned to work alongside local professionals to undertake the review. It was determined that the review should focus upon the period from the 1<sup>st</sup> October 2016, to capture agency intervention when Birmingham Children’s Social Care received a referral from school following a disclosure by the children of assault, up until the 31<sup>st</sup> July 2021, in order to include action taken by agencies post-incident to safeguard the child and her siblings.
- 2.5 The Review Team then met on four occasions to monitor the progress of the review and discuss the learning. Two review team meetings benefitted from the expertise of a representative from the organisation AFRUCA<sup>3</sup> – Safeguarding Children who has Ghanaian heritage.
- 2.6 A reflective learning event was held in June 2022 to discuss the circumstances of the case with frontline workers. A separate meeting was held, in October 2022, to discuss the viability of holding a Community Leaders event. It was subsequently agreed that the Community Leaders event would not form part of the review process but would be incorporated into a bigger piece of work being undertaken by the Safeguarding in Faith Communities Project. The Review Team felt that having representation from AFRUCA on the Review Team provided them with the subject matter expert advice required.
- 2.7 Consideration has been given to involvement of the child and her parents in the review process. It has not been possible to speak to the child. Mother and father were both approached, father did not respond to the request but mother chose to engage. The Reviewer is grateful to her for providing an insight into the family dynamics and the support and services she and the family received.

### **3. The Child’s Story**

- 3.1 The child is described by practitioners as quiet and introverted. Practitioners indicated she is a beautiful singer and eloquent writer who is academically bright.
- 3.2 The child was born in the UK. Father identifies as Black Ghanaian and converted to the Islamic faith. The child’s father moved from Ghana to the UK and lived in London between 2005 and 2011; father was granted leave to remain in 2016. Mother identifies as Black British and is known to some services as British Jamaican; mother converted to the Islamic faith.
- 3.3 The family comprised of six children, two boys and four girls. The child aged fourteen, is the eldest. The children have all been brought up in the Islamic faith.

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<sup>2</sup> Nicki Walker-Hall has a background in health working predominantly with children. Nicki has an MA in Child Welfare and Protection and an MSc in Forensic Psychology. Nicki is an experienced Reviewer of both child and adult safeguarding reviews. Nicki is entirely independent of the BSCP.

<sup>3</sup> AFRUCA – Africans Unite Against Child Abuse

- 3.4 In 2011 the family relocated from London to the West Midlands to be nearer to mother's extended networks in Birmingham. In 2014 the family became known to Children's Social Care due to the child having been hit with an implement described as a stick/cane on her hands, from which she had marks. The child's mother and father received police cautions for the assault. The children were made subject to Child in Need Plans for three months, during which time they completed a Promoting Happier Parenting course. There were no further incidents and the case was closed.
- 3.5 In 2015 the family relocated to Birmingham to be nearer to maternal grandmother.
- 3.6 In April 2016 two of the child's siblings were playing at nursery when it was noted that one of the siblings was about to hit the other with a wooden spoon. One of the children disclosed her mother would beat her brother like that. Mother was spoken to who denied hitting or beating him but indicated she sometimes "roughs him up" when he didn't listen. Mother explained this was her picking him up or dragging him to make him sit down. Mother was invited to attend a further Promoting Happier Parenting course but declined. No referral was made to Children's Social Care at that time.
- 3.7 In October 2016 the child disclosed to school that she was being beaten at home. The school made a referral regarding concerns around physical abuse. As a result, a strategy meeting was held and a section 47 investigation was initiated. The children all disclosed being hit by their parents. A social worker visited the home and conducted a partial examination (arms and legs) of the children, in respect for the family's Islamic beliefs, and did not see any marks. As a result, no Child Protection Medical was conducted and the Police concluded their investigation without charge.
- 3.8 An initial Child Protection Conference was held with the children being made the subjects of Child Protection Plans. However, parents did not attend the conference indicating they did not believe a Child Protection Plan was needed. The social worker made regular visits to the family home but only saw the children all together with their parents, no reason for this was recorded. Mother was heavily pregnant during this time, concerns regarding potential Female Genital Mutilation were explored.
- 3.9 During a health assessment by a school nurse one of the child's siblings disclosed that her father had told the children they were not allowed to say anything. The school nurse planned to inform the social worker but it is not clear whether this plan was followed through. A Child Protection Review Conference was held in January 2017 with only the social worker and the parents present; no agency reports had been submitted. Rather than cancel the meeting, it went ahead, the Child Protection Plans were ended, and the case closed.
- 3.10 Parents withdrew the children from school in September 2017. The children have all been electively home educated since November 2017, the Elective Home Education

Team were informed. Parents informed the Elective Home Education Team that the children were receiving tuition for 16 hours a week. The team made contact with the Tuition Centre on two occasions in January 2018 and August 2020; on both occasions the children were reported to be making good educational progress, parents were felt to be very supportive and there were no concerns identified.

- 3.11 In June 2021, Birmingham Children's Trust received a referral from West Midlands Police following a disclosure from the child that her mother and father beat her and her siblings with items such as plastic poles, wooden sticks and a broom. The child indicated her father was the worst perpetrator. The child also described being punched by both her parents and having her hair pulled by her mother. The child's siblings made disclosures which confirmed that they too were beaten, but to a lesser degree than their sister.
- 3.12 The child indicated her only source of protection had been at school, which was lost when she became home educated. The child identified her GP was another protective factor but explained that she and her siblings were rarely taken to the GP Practice, and they had been warned by their parents not to show medical staff any marks on their bodies from the beatings.
- 3.13 The children were made the subjects of Police Protection and placed in foster care. Within 72 hours the children had child protection medicals; significant linear scars were found on the bodies of the four older children which were consistent with systematic beatings over a sustained period of time. No marks were identified on the youngest two children.
- 3.14 In police interview the child stated that she did not know how other children lived with their families or parents, but she believed that there was something wrong with her family.
- 3.15 Both parents were arrested, charged and received convictions in relation to assault, ill-treatment, neglect and abandonment of a child/young person. Father received a three years and six months sentence whilst mother received a twenty-one month sentence, suspended for two years with conditions attached.

#### **4. Analysis and Learning**

- 4.1 The analysis of partnership intervention and practice concentrates on identifying systemic learning to inform the continuous improvement of safeguarding partnership practice in Birmingham. The Review Team identified five key themes, which provide the framework for the four learning points. The five key themes are;
  - Barriers and enablers to enhancing cultural competency and confidence
  - Effective engagement and support for children in Elective Home Education
  - Responding to allegations of physical abuse
  - Better understanding historic and contextual information enhances decision making and assessment of risk

- Engaging Communities in safeguarding children – maximising protective factors

### **Barriers and enablers to enhancing cultural competency and confidence?**

- 4.2 Concerns regarding physical abuse within this family were first identified in 2014 when the child was just 7. At that time a Child Protection medical was undertaken and confirmed evidence of physical abuse. The child's siblings were interviewed and gave similar accounts. The parents admitted that they hit the children with implements but stated they were unaware that this was not allowed in the UK. They stated that in Ghana regular use of corporal punishment was acceptable and indicated it to be the norm.
- 4.3 It has been recognised that issues of ethnicity, faith and race within the safeguarding children arena can be challenging, and there are examples of misunderstandings leading to over intrusive practice or inactivity in the face of child maltreatment. Research<sup>4</sup> has long identified the importance of developing cultural competence and confidence. There is a need for safeguarding systems to educate professionals regarding the relevant faiths and/or cultures in which they work to ensure messages are consistent and children are effectively protected. In this case the impact on a worker of a wish to respect religious views led to child protection procedures not being followed and as a result the concerns not progressing to a child protection medical; this was a Key Practice Event and missed opportunity.
- 4.4 Whilst it is widely accepted across cultures that physical abuse is child abuse, in research by AFRUCA they found that participants who grew up in Africa all agreed that the use of physically abusive methods to manage behaviours were a major form of the punishment and discipline they experienced while growing up. Almost all agreed that it was used both at home and in school and still continues even today. The majority of participants did not accept that beating children was a form of child abuse, but a form of discipline to correct behaviour, as this was the way in which they themselves were brought up. This is more so in situations where parents said they are fearful for their children being susceptible to peer pressure and negative external influences or not performing well academically. This contrasted with the views of young adults who grew up in the UK.”<sup>5</sup> In discussion mother used the phrase “spare the rod and spoil the child as the ethos of some.”
- 4.5 Child abuse is widespread in Ghana with corporal punishment being the most pervasive. An estimated 93% of children in Ghana are subjected to this form of abuse which entails a wide range of behaviours including spanking, hitting, pushing, pinching, swatting, slapping and other forms of physical force that cause bodily

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<sup>4</sup> Rhoda Akilapa, Douglas Simkiss, Cultural influences and safeguarding children, Paediatrics and Child Health, Volume 22, Issue 11, 2012 Pages 490-495

<sup>5</sup> Ariyo, Debbie, Ssali, Rose, Nambuya, Barbara, Olurin, Fola and AFRUCA (Africans Unite Against Child Abuse) (2018) Voices of the community: exploring attitudes towards physical chastisement among African communities in Greater Manchester. London: AFRUCA (Africans Unite Against Child Abuse) Voices of Community.

harm. These behaviours are often considered to be methods of 'disciplining' or 'correcting' deviant behaviours and are rarely perceived as violent.<sup>6</sup>

- 4.6 Of note mother identifies as British and spent her whole childhood in the UK. It could be argued that she should have been guiding her husband on acceptable parenting methods in the UK. However, mother indicated her low self-esteem and isolation meant that whilst she knew what was happening, she did not address it and would distract herself and focus on other things. In the view of AFRUCA, whilst in Islam husbands and wives are looked on as equals, within some Ghanaian households the man is considered the leader of the family. In some households where the father is seen as the head of the household, this can result in the mother having to listen to and agree with father; if she opposed, she would be deemed disrespectful. This may also have been a factor in who took the lead on physical punishments within the couple.
- 4.7 The police investigation in October 2016 concluded with both parents receiving an adult caution. The children were not put on Child Protection Plans at that time, despite the evidence that they had suffered physical harm. It appears professionals were satisfied that having been alerted to the fact that physical abuse was not acceptable in the UK, mother and father would stop physically punishing the children.
- 4.8 A different West Midlands Local Authority worked with the family on a Child in Need Plan, during which time parents engaged well and participated in a Promoting Happier Parenting course. There were no known further incidents during this time and the case was swiftly closed.
- 4.9 Practitioners at the practitioners' event indicated they are mindful of the need to be respectful of individual's cultural and religious beliefs. Practitioners indicated their belief that when adults convert to a religion, they appear to take it more seriously – they are more devout. Practitioners noted that both mother and the children dressed very modestly.
- 4.10 The family were reported to be living in an area of the city where 95% of the community are from a Muslim background and hold traditional views<sup>7</sup>. Difficulties in engaging the community with services and issues such as Domestic Violence are disproportionately high.
- 4.11 Practitioners indicated that there has been some training around cultural<sup>8</sup> genograms but they had not had an opportunity to attend. Despite this they

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<sup>6</sup> Tenkorang and Owusa (2018) cited in Tenkorang E.Y. Physical, sexual, and psychological health impact of child abuse: Evidence from Ghana, *Advances in Life Course Research*, Volume 57, 2023

<sup>7</sup> Traditional views – Values handed down from earlier generations.

<sup>8</sup> Cultural genograms – explore the cultural and ethnic background of the family, including traditions and values. They seek to describe not just biological or marital relatedness but factors or characteristics (such as sexuality, ethnicity, religion or social class) that are central to people's identity and which will contribute to how we each understand relatedness itself.



indicated they felt reasonably confident that they had knowledge and understanding around the cultural norms for those from a Ghanaian background, as the community has been long established in Birmingham.

- 4.12 A study<sup>9</sup> into the use of physical methods of punishment concluded that reducing the use of physical punishment of children needed to emanate from within family policy. Childcare, education, and all services for children need to adopt a stance of no tolerance to physical punishment as an everyday societal responsibility rather than it being dictated within or by families. The need for a cohesive community and agency response is key.
- 4.13 On the second occasion the child reported physical abuse the practitioner only looked at the child's arms and legs. This was reported to be out of respect for religious beliefs but suggests a lack of cultural confidence when there is abuse and harm identified and was a missed opportunity to follow child protection procedures and assess and observe signs of physical harm via a medical examination.
- 4.14 Practitioners indicated they struggle when there is an influx of people from alternate cultures. Recently practitioners report there has been an influx of people from Eastern Europe to Birmingham. When this happens, practitioners stated they do not feel confident and are reliant on internet sources, such as Google, to increase their knowledge regarding cultural norms. Practitioners indicated they are nervous talking to families and feel this makes them cautious causing conversations to be less free flowing.
- 4.15 There needs to be a balance between understanding cultures and following Safeguarding procedures.
- 4.16 The recent Child Protection in England report identified that "Effective child protection work requires practitioners to unpack biases and assumptions that may impact on how they perceive and assess the risk to a child. This includes assumptions and biases that relate to culture, ethnicity, gender and sexuality. Practitioners need to be confident working with diverse communities and to be supported and challenged through supervision to reflect on these issues."<sup>10</sup>
- 4.17 The review found that there was a lack of knowledge and confidence in working with ethnic minority groups which is acting as a barrier to delivering consistently safe practice. Practitioners need to be provided with the tools to understand and recognise existing norms in relation to care of children across all cultures, including the use of physical punishment. Culture, and practitioner's beliefs around behaviours they relate to culture, need to be challenged within supervision. The case was closed too early and practitioners should have continued to work with the family through a

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<sup>9</sup> Rush, M., & Ibrahim Lazarus, S. (2018). 'Troubling' Chastisement: A Comparative Historical Analysis of Child Punishment in Ghana and Ireland. *Sociological Research Online*, 23(1), 177–196. <https://doi.org/10.1177/1360780417749250>

<sup>10</sup> Child Protection in England - National review into the murders of Arthur Labinjo Hughes and Star Hobson May 2022

Child in Need or Child Protection Plan, to ensure the children were protected and parents provided the requisite assurance of a change in their parenting behaviour.

**Learning point 1:**

Safeguarding Organisations should ensure that frontline practitioners do not lose sight of the paramountcy of their safeguarding duties and responsibilities towards the child but have the requisite skills, experience and confidence to work with, and support children and families, from different cultures, faiths, backgrounds and communities in Birmingham. Where there are gaps in understanding then resources, training, support and supervision should be provided.

**Effective engagement and support for children in Elective Home Education?**

- 4.18 The children in this family have been electively home educated since November 2017. The Reviewer learned that at the time the child was being home educated there were 2478 children across Birmingham being home schooled, this has risen to 2601 (November 2023). Of those, Child Protection Services are involved with 17 children with plans in place to return these children to mainstream school as soon as possible. The removal of the child and siblings from mainstream schooling came several months after the children had been on Child Protection Plans. The plan at that time identified the need for the children to have benefits from consistency within their education to assist their learning and emotional development and that was to be addressed by each child remaining on roll at the school with excellent attendance. However, the children were withdrawn from school in July 2017 by father who informed staff they were to be home educated. There was a missed opportunity here for the school to alert Birmingham Children’s Trust that the children had been withdrawn from school in light of the requirements of the intervention plan.
- 4.19 When removing the children from mainstream school the parents cited the 2006 regulations<sup>11</sup> highlighting ‘Parental Choice’ to Elective Home Education. There was no action taken by the school to hold the family to account in regards to the action in the plan. Practitioners identified that some families will elect home schooling when they want to close the door on statutory services and isolate the children.
- 4.20 Removing children from mainstream schooling in families where there are or have been child protection concerns has long been recognised by safeguarding professionals as a concern and is a national issue. The Independent Inquiry into Child Sexual Abuse findings<sup>12</sup> (published in September 2021), recommends government legislation for supplementary education settings to be regulated and for Ofsted to be given powers to examine the quality of child protection when it undertakes inspections of suspected unregistered institutions. This recommendation has yet to be enacted and therefore the issues remain.

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<sup>11</sup> The Education (Pupil Registration) (England) Regulations 2006

<sup>12</sup> The Independent Inquiry into Child Sexual Abuse (September 2021)

- 4.21 The BCC<sup>13</sup> Impulse database note recorded on 10/11/17 states that on receipt of the Elective Home Education referral, checks were made on Birmingham Children's Trust system and records informed that the children were known and that the case had since been closed at the time. Having knowledge of this history provided an opportunity for enquiry and contact with the social worker to understand the details.
- 4.22 The Local Authority have had limited powers to intervene when a child is Elective Home Educated, parents are not required to engage, show evidence of what tuition they are providing, or allow the children to be seen. There isn't a national definition of what constitutes suitable education and it had been left to the Local Authority to draw up a definition. The Reviewer learned that at the time the child was being home educated there were 2,478 children across Birmingham being home schooled, this has risen to approximately 3,156 currently. Of those 47 children are currently known to Birmingham Children's Trust.
- 4.23 In this case, the school aged children in this family were home educated and received additional education from an unregulated supplementary education setting, for 16 hours a week. Mother was spoken to via telephone and although she declined an offer to meet with the Elective Home Education Service, she was engaging and happy for them to contact the tuition centre; there were no alarm bells sounding for the worker and in some ways, mother appeared more compliant than some parents. Practice has since changed in Birmingham, the Elective Home Education Service encourage face to face meeting with parents to see the child, either in the home or in another location. Although DfE National Guidance clarifies that although there is no legal obligation for the parents to agree to this, simply in order to satisfy the local authority as to the suitability of home education, refusal to allow a visit can in some circumstances justify service of a school attendance order.
- 4.24 The Tuition Centre confirmed the children's attendance, which was in accordance with the information received from mother. Although the Elective Home Education Service liaised with the tuition centre in relation to the children in January 2018 and August 2020, and the Elective Home and Education worker attended the Tuition Centre, there is no statutory requirement for cooperation or information sharing without parental consent; it is not clear whether parental consent was sought for information sharing. The tuition centre indicated to the Reviewer that they don't have access to much multi-agency information and are reliant on parents.
- 4.25 On both occasions the Elective Home Education Manager attended the Tuition Centre and the children were reported to be making good educational progress. Tutors reported no concerns for the children and felt the parents were very supportive. The Reviewer learned that the tuition centre had not received any background or historic information in relation to the concerns of physical abuse and were therefore not sighted on this as a potential issue; they report that had they

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<sup>13</sup> BCC – Birmingham City Council

known they would have been more vigilant. The Elective Home Education Service had information contained within the referral as well as read only access to the electronic system. The information recorded on the Elective Home Education referral submitted by the school informs that the family were known to Birmingham Children's Trust between 2014 - 2017, however, the school had no further concerns after the Child Protection Plan closed in January 2017. The referral also stated that the child and a sibling had been previously home educated and that the child had attended 6 primary schools. Mother indicated the decision to electively home educate was for religious reasons. Mother felt that it would give the children greater freedom around prayer. Mother indicated that when she had opted to home educate previously, she had intended to educate the children herself but became pregnant and felt too overwhelmed to manage, hence why in 2017 she had enrolled them in a faith based school. Mother reports the children were settled and happy in the school and parents felt the children were being provided with something extra above the usual school curriculum.

- 4.26 Read only access to the electronic system should not have affected the officer from accessing historic information, therefore, this would question how well the officer knew how to navigate the system to access historic information. Furthermore, there was historic information listed on the Elective Home Education referral form from the school that included Birmingham Children's Trust involvement with the family as far back as 2014. This was sufficient information to prompt further enquiry by the Elective Home Education officer about Birmingham Children's Trust involvement and the children's education journey to date. The Reviewer learned that there is a new IT system (Eclipse) which has been reported to provide greater information.
- 4.27 Current information sharing practice can lead to professionals working with a child being unaware of previous child protection concerns. If the children had moved from one mainstream school to another their information would transfer with them and the new school would be able to review the historic information; the same process is not in place when the child moves to home education and/or to an unregulated placement.
- 4.28 There is no requirement for tuition centres to register and therefore they are not regulated. Although, tuition centres are un-regulated, there is an expectation that they adhere to DfE National Guidance for providers of after-school clubs, community activities, and tuition published in September 2023<sup>14</sup>. The guidance highlights the importance of effective information sharing and what to do if you are worried about a child.

**Learning point 2:**

Registration of tuition centres with Ofsted is currently voluntary. It is believed that mandatory regulation and inspection would enhance the safety, welfare, and wellbeing of

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<sup>14</sup> [https://assets.publishing.service.gov.uk/media/6509558022a783000d43e81f/After-school\\_clubs\\_community\\_activities\\_and\\_tuition\\_safeguarding\\_guidance\\_for\\_providers.pdf](https://assets.publishing.service.gov.uk/media/6509558022a783000d43e81f/After-school_clubs_community_activities_and_tuition_safeguarding_guidance_for_providers.pdf)

children under their care and strengthen formal engagement and information sharing between Local Authorities and tuition centres.

- 4.29 In 2022, and in part on the back of the Education Select Committee: Strengthening home education paper,<sup>15</sup> the government indicated that they were committed to the ethos that all children were entitled to a world class education, and in recognition of the variable quality of education provided to those home educated or receiving their education in unregistered independent schools, the Children Not in School Schools Bill<sup>16</sup> was developed. It was hoped that when this became law there would be a duty on local authorities in England to establish and maintain Children Not In School (CNIS) registers, and to provide support to home educators. Unless a child had been previously registered at a mainstream school, the LA might not be aware of the child's existence. Unfortunately, a decision was taken in November 2022 to axe the bill.
- 4.30 The Department for Education has indicated it is committed to the establishment of a register of children not in school and greater powers to tackle illegal schools.
- 4.31 It was proposed that the registers would record eligible children of compulsory school age that are: electively home educated, flexi-schooled, or receive alternative provision in an unregistered setting (unless an exception applies, to be set out in regulations, such as where the proprietor of a school has made such arrangements). This would increase Local Authorities, awareness of the children in their area that were not in school so that they could undertake their existing responsibilities more effectively.
- 4.32 In October 2022 the Department for Education has commenced a programme of data collection<sup>17</sup> which will provide a greater understanding regarding the demographics of children being home educated including their safeguarding status. This data is needed in order to understand the gaps and risks and provide an opportunity to use that data to increase safety for those who are being home educated.
- 4.33 It is clear from the child herself that the move from mainstream schooling removed one of her only forms of protection and prevented those professionals who knew the children well from seeing any changes in their behaviour and spotting the signs. What helps children tell?<sup>18</sup> addresses the question of what helps children disclose experiences of child sexual abuse. Whilst the abuse type in the child's case is different i.e. physical not sexual, the messages from this research still resonate for all forms of abuse. The research established two key dynamics that help children tell with six associated facilitating factors:
- The Need to tell,

<sup>15</sup> Education Select Committee: Strengthening home education<sup>15</sup>, July 2021 <https://bit.ly/3WQeEu4>

<sup>16</sup> Department for Education (2022) Children not in School Schools Bill

<sup>17</sup> Department of Education (2022) Elective home education and children missing education: submit your data

<sup>18</sup> [What Helps Children Tell? A Qualitative Meta-Analysis of Child Sexual Abuse Disclosure \(icmec.org\)](https://www.icmec.org/)

- Realising its not normal
  - Inability to cope with emotional distress
  - Wanting something to be done about it
  - The Opportunity to tell.
    - Access to someone you can trust
    - Expecting to be believed
    - Being asked
- 4.34 The move from mainstream to elective home education reduced the child's opportunities to:
- realise her parents abuse of her was not normal,
  - for her to tell, and
  - her access to people she could trust
- 4.35 When the child made her disclosure to the police, she stated she did not know how other children lived with their families or parents, but she believed that there was something wrong with her family; this is evidence that she was starting to realise her parents abuse was not normal. Mother informed the Reviewer that she did not know anyone who chastised their children in the same way.
- 4.36 Of national concern, there is limited engagement with, and support for, children who are receiving elective home education. The axing of the Children in Schools Bill and the lack of regulation of these settings is concerning, but of greater concern is the reduction of opportunities for these children to disclose the abuse they are suffering. It is not clear if what is now being proposed will be sufficient to address this issue.

### **Responding to allegations of physical abuse?**

- 4.37 In this case there was a mixed response by professionals to indicators or disclosures of physical abuse. In 2014 the parents were offered and completed a parenting programme. They were able to satisfy professionals they could put what they had learned into practice. The question is whether one parenting course will ever be sufficient to override a cultural norm. In Review Team discussions it was recognised that this was unlikely. Certain learned behaviours can be difficult to change. Without reinforcement it is usual for everyone to fall back into entrenched habits, Mother indicated that whilst the course was clear in regards to abuse it was quite light in approach and, on reflection, she feels it could have been in greater depth over a longer period of time.
- 4.38 On one occasion (April 2016) there was a missed opportunity to refer concerns regarding the children's behaviour and statements they made at nursery regarding physical abuse in the home. The mother's denial was heard above the voices of the children.
- 4.39 On all other occasions where physical abuse had been reported to Children's Social Care, there had been consideration of the child and her siblings having a child

protection medical. In (October 2016), following the child disclosing being beaten at home, a referral was made and a strategy meeting was held.

- 4.40 The social worker visited the family home and saw the children. The social worker looked at the children's arms and legs but in deference to the family's Islamic beliefs did not view any more of the children's bodies. Having not seen any marks, and on that basis, the police investigation concluded and the child protection medical was cancelled. It appears the family's culture impacted on the 's decision making. Child Protection procedures are clear that an expert opinion from a Consultant Paediatrician, and oversight by a team manager, are required; these were not followed. In addition, whilst the children were seen, they were not seen on their own in line with Child Protection procedures but together with their parents, reducing their opportunities to speak freely. This was a missed opportunity which may have confirmed physical abuse was continuing and led to further action earlier.
- 4.41 Each incident or episode of concern regarding physical abuse needs to be considered and where there is reported physical abuse a child protection medical should be carried out. It is also essential to establish an understanding of what the child has experienced before to assess whether a multitude of factors, when considered together, constitutes significant cumulative harm<sup>19</sup>.
- 4.42 As a young child, the child's child protection medicals involved examination of all areas of her body. At 14 the child was given greater autonomy as to which parts of her body she felt comfortable showing the Doctor. Whilst this might have caused issues from a Police evidential perspective, this was the right approach for a person of the child's age and mental capacity. The child's decisions on which parts of her body she felt comfortable to show may have been influenced by the gender of the Doctor. It would be good practice to enquire whether the gender of the Doctor might impact whether a child would agree to a medical examination. The pool of doctors who are called upon to complete such medicals is fairly large and it is believed that if a case is not immediately urgent it could be offered to have a medical the next day and potentially find someone of a specified gender. If the case is urgent and cannot wait, it might not be possible to match up gender requests.
- 4.43 Practitioners reported that at the time agencies had different opinions on the urgency of conducting a Child Protection medical. It has now been agreed that a Strategy Discussion will take place prior to a Child Protection Medical and should consider the urgency of the examination.
- 4.44 There was an inconsistent response to allegations of physical abuse, which meant that a child protection medical assessment was not requested at an earlier opportunity to determine if there were physical signs to support verbal accounts of physical abuse.

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<sup>19</sup> Bromfield and Higgins in Australia first introduced the terms 'cumulative risk' and 'cumulative harm' in 2005 when they point out that 'the effects of patterns of circumstances and events in a child's life which diminish their sense of safety, stability and wellbeing. Cumulative harm is the existence of compounded experiences of multiple episodes of abuse or layers of neglect.'

- 4.45 A Child Protection medical assessment pathway<sup>20</sup>, which aims to be clear regarding the parameters around Child Protection medicals, aid decision making, and aligns with the Royal College of Paediatricians guidance on good quality Child Protection medicals, has now been launched.

**Learning point 3:**

BSCP needs to seek assurance and evidence that the Child Protection Medical Assessment pathway is being adhered to and monitor its effectiveness.

- 4.46 Following the concerns raised in 2016 there was very brief involvement of partner agencies, with the children being made subject to Child Protection Plans but the parents did not engage and there is no evidence of any meaningful intervention, any change in parenting approach nor an effective step down prior to case closure. There was no lead professional to provide continuity and remain involved with the family post case closure. Mother informed the Reviewer no implements were being used to chastise the children at that time, and that her mind frame was that these were false allegations and as there were no issues there was no need for agency involvement; mother reflected that more support at that time would probably have been helpful but she wouldn't have welcomed it.
- 4.47 Unless practitioners continue to work with families through Child in Need or Child Protection Plans, to ensure children are protected and parents provide the requisite assurance of a change in their parenting behaviour, there is little opportunity to proactively revisit these issues unless a further incident occurs. Practitioners need to manage the safe transfer of cases from Early Help through to Child Protection, recognising the importance of promoting continuity in relationships.

**Learning point 4:**

At the point of stepping down from a Child Protection Plan or a Child in Need Plan, or case closure, it is critical that the multi-disciplinary team have properly considered and assessed whether sustainable change has been demonstrated. Failure to do so could result in children suffering harm if the abuse reoccurs.

- 4.48 The need for longer periods of practitioner involvement provides difficulties for both commissioners and providers of services as, in order to move from crisis responsive services to preventative services, more families would need much longer-term involvement which would have to be counter balanced with their Human Rights. An alternative community-based approach involving faith and community leaders could support statutory services.

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<sup>20</sup> Child Protection medical assessment pathway  
[https://www.birminghamsoalihull.icb.nhs.uk/download\\_file/view/3909/1768](https://www.birminghamsoalihull.icb.nhs.uk/download_file/view/3909/1768)



- 4.49 Increased community support and engagement with faith and community leaders, in changing the message around raising children in the UK without resorting to physical abuse, is essential. Birmingham was part of the study<sup>21</sup> in 2012, so it has long recognised the need for a community response.

#### **Better understanding of historic and contextual information enhances decision making and assessment of risk**

- 4.50 As indicated in section 4.24 there is no seamless transfer of information between mainstream schooling and that provided by private/unregulated education providers. This lack of transfer of information is leaving children, where there have been historic safeguarding concerns, at risk. Legislation regarding information sharing, in particular the introduction of GDPR<sup>22</sup> and its inclusion in legislation<sup>23</sup> has caused increased caution and for some, confusion regarding what can and cannot be shared. Whilst it is not appropriate to share all information, it remains necessary to share all information when children require safeguarding.
- 4.51 Practitioners report that they are often allowed read only access to electronic systems and would only pick up on recent disclosures, thus losing historical context and making it impossible to identify emerging patterns of behaviour. This has improved for health with the introduction of Shared Care Records. For schools, a well completed school Elective Home Education referral form should provide information where there are concerns or patterns of behaviour. Where the quality of information is not good or limited in detail, then there would be an expectation of follow up by the Elective Home Education advisor with the school to acquire more information. Practitioners indicated that the systems and processes are more robust for those children who are being home based educated only, rather than those who are accessing tuition in an unregulated education setting.
- 4.52 Changes in the Children’s Social Care IT systems in the years prior to 2022, are reported to have made accessing historical information worse. Practitioners have indicated that historical information held within Children’s Social Care records has not been successfully migrated, that the system is not as intuitive as the previous system, and the system requires the user to be confident and IT literate; this is deeply concerning.
- 4.53 The current systems and access agreements are not supporting practitioners to gain knowledge of the history of the children they are working with. Issues with IT systems are making it unlikely that practitioners will be able to identify patterns of behaviours or disguised compliance over extended periods of time. There is a need for access to historical safeguarding information for all practitioners involved with a

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<sup>21</sup> Rhoda Akilapa, Douglas Simkiss, Cultural influences and safeguarding children, Paediatrics and Child Health, Volume 22, Issue 11, 2012 Pages 490-495

<sup>22</sup> GDPR – General Data Protection Regulation -

<sup>23</sup> The [Data Protection Act 2018](#) controls how your personal information is used by organisations, businesses or the government.

child and a robust system of communication between agencies and private providers. BCC should explore the possibility of the transfer of safeguarding files for children who leave school to be home educated being shared with the Elective Home Education service at the time of children being registered for home education.

### **Engaging Communities in safeguarding children – maximising protective factors**

- 4.54 In 2018 AFRUCA explored attitudes towards physical abuse among African communities in Greater Manchester<sup>24</sup>. They found that most participants underlined the gaps in community support in raising children in the UK, in comparison to lives in their countries of origin. This is because of the lack of extended family networks here, compared to back home. Participants highlighted that friends and faith leaders have, to an extent, been able to fill this gap, especially in situations where religion has a strong role to play in shaping children's moral character as in this case. Adult participants did not agree that religion teaches them resort to physically abusive methods, although this view was countered by the youth participants who talked about faith leaders encouraging parents to beat their children to instil discipline. Nevertheless, it seems that if faith groups are involved in child upbringing, then stronger efforts are required to ensure there can be effective channels of support for parents especially in child abuse prevention.
- 4.55 Birmingham is one of Europe's youngest and most diverse populations with 70% of its residents having a religious affiliation. The city is home to over 700 unique places of worship, each playing a crucial role in supporting communities, families and children, a role magnified during the Covid-19 pandemic.
- 4.56 Within the practitioner event, practitioners reported that historically there has been a lack of engagement from and with minority communities, this was recognised in Birmingham a decade ago. Work has been ongoing between statutory services and places of worship, aimed at educating communities and families around keeping children and the vulnerable safe. In recent times new roles have been developed in Birmingham to promote and increase community engagement and carry out outreach work across minority communities, through religious leaders, faith organisations and community groups; building of relationships and developing a network of contacts with faith-based organisations which is still in its infancy. Those within these roles were aware of the need to avoid marginalising communities.
- 4.57 The Blooms review and the All-Party Parliamentary Group for Safeguarding in Faith Communities underscore the importance of developing strong relationships with faith communities and providing them with resources for safeguarding. In Birmingham there is now a 'Safeguarding in Faith Communities Project'. BSCP are working in close collaboration with the Birmingham Council of Faiths, West Midlands Faith Alliance, and other partners to strengthen the capacity, coordination and

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<sup>24</sup> Ariyo, Debbie, Ssali, Rose, Nambuya, Barbara, Olurin, Fola and AFRUCA (Africans Unite Against Child Abuse) (2018) Voices of the community: exploring attitudes towards physical chastisement among African communities in Greater Manchester. London: AFRUCA (Africans Unite Against Child Abuse) Voices of Community.

impact of faith-based organisations in safeguarding and promoting the wellbeing of children across communities. An on-line Faith Directory is in development which will enable the public and professionals to contact and communicate with individual places of worship by specific faith and locality. Alongside the Faith Directory a Designated Safeguarding Lead (DSL) network for faith organisations is being developed to enable all places of worship to have access to expert advice on safeguarding children, families and the vulnerable and allow dissemination of safeguarding updates and resources. The BSCP provide bespoke Safeguarding training for places of worship and a new Adult and Children Safeguarding Guidance and toolkit is scheduled for publication in summer 2024.

- 4.58 The practitioners involved with the child and her siblings were clear that whilst there had been some cultural training on offer in Birmingham, they hadn't had an opportunity to attend. They indicated some nervousness in talking to families from different cultural backgrounds. This nervousness resulted in a more cautious approach and conversations were said to be 'not as free flowing' as with many families.
- 4.59 Practitioners identified that the location of the family within the city was an additional factor. In some of the inner-city areas 93% of its inhabitants are from a Muslim background, many still holding very traditional views. Practitioners report that Domestic Abuse frequency is high in this cohort. Practitioners were cognisant of demonstrating respect and understanding of traditions. Whilst this is commendable, this always needs to be in the context of legislation, procedures and the need to safeguard children.
- 4.60 The experience of some communities of feeling marginalised and experiencing discrimination could act as a barrier to integrating with society and accessing services. We also need to consider their lived experiences in other countries and how statutory services are perceived there as this may be an added barrier to engaging with support and statutory services in the UK.

## **5. Good Practice**

- 5.1 There is evidence of a positive response from all agencies when the child made her disclosure of abuse in 2021. Police used their powers taking all the children into Police Protection to ensure their safety.
- 5.2 Child Protection Medicals were arranged and conducted for all the children in this family within 72 hours of the child's disclosure. The Child Protection Medicals allowed for the children to share their lived experience with professionals who had not met the children before but who used skills to allow the children to freely talk in a safe environment.
- 5.3 Foster care placements were swiftly identified for the child and her siblings.

5.4 Mother indicated that the Family Group Conference held in November 2021 was very helpful.

## **6. Conclusion**

6.1 It is clear that in this case the practice of physical abuse has played a significant part in the lives of the children within this family; the response to this abuse has been variable and has not been sufficient to stop these children suffering further harm until the disclosure of abuse in 2021. Whilst the use of physically abusive methods to control behaviour is not uncommon in Ghanaian culture, it is neither acceptable nor legal in the UK. Practitioners identified that working with families from different cultures and faiths does provoke some anxiety as they are more cautious and less confident to challenge practices which are rooted in culture. It is imperative that practitioners are enabled to deliver consistently safe practice for all children regardless of their culture or religion. Greater cohesion between communities and statutory services is essential.

6.2 Whilst steps were taken to educate the parents when this practice was first known, they continued to, or slipped back into, the use of physical abusive methods to manage their children's behaviours. On further occasions when there was evidence from the children that were being physically abused, referrals were not made and/or child protection medicals were not always conducted. There was only ever a very brief period of the children being placed on Child Protection Plans. Parents did not accept the need for the plans suggesting they could not recognise the harm they were causing; no additional education of the parents occurred. Sadly, in this case, the voice of mother was given more weight than that of the child. In addition, the children were not seen and spoken to separately once they had become subject to Child Protection Plans.

6.3 The change in IT systems at the time and information sharing processes and practices appeared to have hampered professionals' abilities to know the family history and to be vigilant. Decisions made by the family to move the children into home education have further isolated the children making it extremely difficult for them to speak out.

6.4 It is clear that there have been significant developments since this review commenced. The need to empower the community whilst educating the system remains a priority. The Reviewer is cognisant of the huge difficulties in making cultural changes and is somewhat reassured by the approach that Birmingham is taking. However, the Reviewer is also conscious that it is over ten years since the issue was identified in Birmingham and recognises the need to remain focussed and committed if the proposed changes are to bring about the required community cohesion.