Assessing sexual behaviours in children and young people
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Introduction

Sexual behaviours in children and young people (CYP) are a largely unexplored phenomenon in the UK and assessments relating to harmful sexual behaviour (HSB) in CYP are continuously evolving. Ryan and Lane (1997) assert that three elements: equality; consent and coercion must be considered when defining HSB in CYP. Hackett, Holmes and Branigan (2015) suggest a definition of HSB in CYP that appears to offer more clarity in the area and is widely used in the UK context by organisations such as Barnardos and the NSPCC:

> 'Sexual behaviours expressed by children and young people under the age of 18 years old that are developmentally inappropriate, may be harmful towards self or others, or be abusive towards another child, young person or adult.' (p.12)

Figures from the criminal justice system do suggest that HSB in CYP is relatively high in comparison to the total number of offences. A summary of sexual offending in England and Wales (ONS, 2013) stated that in 2011 8.2% of 5977 sexual offenders were under the age of 18. The data also showed that HSB in CYP had risen from 4603 in 2013 to 7866 in 2016, with only 26% of the latter resulting in intervention, representing a 71% increase over four years (ONS, 2017).

Whilst no national strategy currently exists there are some policy documents that relate to HSB. The Home Office funded Centre of Expertise on Child Sexual Abuse (McNeish and Scott, 2018) advocates the Hackett Continuum (2014) approach to assessment. The *Keeping Children Safe in Schools* (2019) and *Sexual Violence and Sexual Harassment Between Children in Schools and Colleges* (2018) provide guidance for professionals when HSB in CYP emerges. Both of these documents advocate the use of the Brook Traffic Light Tool when assessing these behaviours.

This paper details the results of the first part of a realistic evaluation of the Brook Traffic Light Tool explores whether it is meeting its intention of helping professionals and others recognise and respond to developmentally inappropriate sexual behaviour through professional training.

Brook Traffic Light Tool

Brook is a national charity that focuses upon various aspects of sexual health for the under 25s. providing a range of services, including counselling, contraception, STI testing and education.

The Brook Traffic Light Tool uses a traffic light system that was adapted from True Relationships & Reproductive Health in Australia with the intention of educating users on healthy child sexual development and enabling professionals to assess and categorise sexual behaviour that presents in CYP. The Traffic Light Tool aims to give professionals from various agencies a consistent and unified criteria and common language (see table 1) when assessing and categorising sexual behaviours (see table 2, 3, 4 and 5).

[INSERT TABLE 1]

[INSERT TABLE 2, 3, 4 and 5]

In 2015 Brook was commissioned by Cornwall Local Authority to carry out training in the Traffic Light Tool with CYP professionals in the locality. This is the first time that the Traffic Light Tool training had received such a large commission in the UK and at the time of writing this had not happened in any other locality. The half day multi-agency training consisted of an overview of the Traffic Light Tool, safeguarding, values, case studies and action planning (see Table 6).

[INSERT TABLE 6]

Aim

The aim of this research was to ascertain how the training of Cornwall professionals in the use of the Traffic Light Tool impacted upon their identification and response to sexual behaviours in CYP

Methodology

Realistic evaluation (see Pawson and Tilley, 1997) was used for this evaluation, it is focussed upon how knowledge can be obtained through the exploration of the multiple contextual influences of a given phenomenon (see Parker, 2003; Hartwig, 2007, Duran, 2005; Hibberd, 2010). A realist evaluation allows for the complexity that surrounds social interactions to be explored in relation to outcomes that are present (Pawson and Tilley, 1997 and Pawson, Greenhalgh, Harvey & Walshe 2005). Taking this approach allowed for the exploration of how the training and the Traffic Light Tools subsequent use impacted upon the assessment of sexual behaviours in CYP. These were then measured against the context, mechanism, outcome (CMO) configurations (Pawson and Tilley, 1997). This allowed for the exploration of the successes and/or failures of the Traffic Light Tool on a number of differing levels.

In an effort to measure 'what works, for whom and in what circumstances' Pawson and Tilley (1997, p.58) suggest the following configuration:

'Context+ Mechanism = Outcome'

This is suited to the complexity that surrounds the Traffic Light Tool training due to the many elements of social interactions that are present and translates as:

What social/physical norms exists (C) + Traffic Light Tool and the training (M) = Impact upon identification and response to sexual behaviours in CYP (O).

The Kirkpatrick model (Kirkpatrick, 2006) was intersected with the mechanism element of the methodology. The model proposes that four stages are central to the

success of a training programme. These are Level one (reaction); Level two (learning), Level three (behaviour) and Level four (results). The model asserts that when the criteria of all these levels are met then success can attributed to a training programme.

Methods

The research utilised a three phase approach:

Phase one: consisted of a questionnaire with those that had taken part in the training. The questions were based around attitude measurement with a combination of five point summated and open ended questions. The purposive sample of N=436 participants consisted of all of the attendees that had attended the training to date. The results are representative of Cornwall CYP professionals trained only.

Phase two: A targeted questionnaire with those that had had the training over six months previously with a focus on the impact and use of the Traffic Light Tool from the training. An internet based questionnaire using a multi-stage, purposive sampling strategy of N=60 participants who had taken part in phase one was used (Robson, 2001; Cohen, Manion & Morrison 2008). The range of professions were factored in to gain a representative sample of the staff being trained.

Phase three: Semi-structured interviews of those that had taken part in both phase one and two of the study aimed at exploring the impact of the training and the Traffic Light Tool on the identification and response to sexual behaviours in CYP. The N=13 participants were self-selecting using a multi-stage, purposive sampling strategy (Robson, 2001 and Cohen et al, 2008). Thematic analysis was used on the data gained from the open ended questions. The heterogeneity of the professions was again considered to gain adequate data saturation.

Analysis

The data were analysed using three differing approaches (see table 7). Phase one data were analysed using a descriptive statistical approach, specifically examining frequencies, and content analysis.

Two methods of analysis were employed for the second phase of the study. Descriptive statistics examined measures of central tendency and frequency, alongside cross tabulation and comparison with content analysis.

Content analysis was used to analyse the findings in phase three. The 'codes' that were assigned to the transcripts were based upon those allocated from the previous phases, the research aim and conceptual basis, descriptive and open coding.

[INSERT TABLE 7]

Ethics

The well-being and anonymity of both the participants and the CYP they were discussing were built into the design (Lee, 1994, p.5; Pawson and Tilley, 2007). For example, whilst the data were discussed in the research, it is not discussed as a singular case with distinct identifiable characteristics. The management of risk issues were also considered, such as disclosures of child sexual abuse that needed to be addressed. Clear referral and reporting pathways were put in place and outlined for the participants.   Detailed ethical cases were put forward for each phase and approved by the University of Birmingham ethics committee (Approval number ERN_15-0133).

Results: Phase one

The results from this phase were focussed primarily upon the reaction, learning and behaviour change using the four levels of the Kirkpatrick (2006) model to assess the impact of the training (see table 8). These provided a basis for phase two and phase three of the analysis, which had direct links to learning, behaviour and results.

The results indicated that the reaction to the training was overwhelmingly positive which met level one of the Kirkpatrick model. According to Kirkpatrick (2006) this

indicates that the knowledge learned will be applied underpinning level two and level three of the Kirkpatrick Model.

[INSERT TABLE 8]

Level two of the model was also met. This was further reinforced by the qualitative results of phase one which found participants intended to use the Traffic Light Tool in practice (table 9).

 [INSET TABLE 9]

Three themes emerged from the content analysis of the open ended questions in terms of using the learning. The intention to use the Traffic Light Tool in general day-to-day practice; using the Traffic Light Tool to change current practice and for signposting; and the intention to combine the training and the Traffic Light Tool with safeguarding processes and in decision making when categorising risk.

Results: Phase two

There were four CMO configurations that emerged from phase two of the analysis. They related directly to the impact of the training on the professionals identification and response to sexual behaviours in CYP. These being confidence levels, knowledge of sexual development, the understanding of risk and intersections with sexual health issues. Three contextual outcomes also emerged: the amount of sexual behaviours encountered, category cross-over and lack of professional training. Through the analysis evidence was found that demonstrated that Kirkpatrick levels two and three were evident whilst level four was difficult to ascertain.

The analysis found that confidence was raised when responding to sexual behaviours in CYP, working across agencies, referring and signposting. This was achieved via the clarity, intention, knowledge, experience and support that the training provided; which links to level two of the Kirkpatrick model. The training was

found to raise self-efficacy and self-awareness enhanced by the multi-agency nature of the training.

Conflicting outcomes emerged in relation to the impact upon the understanding of healthy sexual behaviours and sexual health knowledge. It was found that the understanding of healthy sexual development had been raised through the clarity, change in views, shared terminology and confidence gained from the training. There was also an increase in signposting referrals and information sharing when identifying sexual health needs. Which linked to level two and three of the Kirkpatrick model. However, it emerged that the knowledge required for sexual health was distinctly different to assessing sexual behaviours.

There was an impact upon a shared understanding of risk across agencies through the intention to apply the knowledge, raised clarity and changes in multi-agency language and working practice. These linked to level three of the Kirkpatrick model. This was inhibited when other agencies that had not had the training due to miscommunication.

Contextually, all categories of sexual behaviours, red, amber and green were encountered by the range of professionals. There were n=30 instances of green, n=30 instances of amber and n=23 instances of red categorised sexual behaviour spread over the various roles of the professionals. For example out of the N=14 family support workers N=25 instances of sexual behaviour were experienced with N=4 of these being categorised as red. Similarly, professionals from education, the justice system and social services all gave examples of where they had categorised behaviour as either red or amber (see table 10).

[INSERT TABLE 10]

Category cross-over emerged as a contextual element. Participants categorised some behaviours as green, however these also met the amber criteria. Some behaviours were categorised as red when they met the criteria for amber. There was evidence of behaviours being categorised using the tool that did not link to sexual behaviour such as purging of food. These contextual issues appeared to be directly linked to the participants subjective assumptions as not all behaviours explicitly outlined within the Traffic Light Tool nor were they covered in the training.

Contextually it was also found that the participants lacked training in sexual behaviours in CYP. When viewed alongside the amount of sexual behaviours that were encountered and category cross-over this becomes a relevant point. A third of phase two participants were found to have had no prior training in sexual behaviours and just under a quarter were found to have had safeguarding training, but no specific training in sexual behaviours. Only three had received sexual behaviours training (these participants also worked directly with CYP who display harmful sexual behaviours). This was then cross-tabulated with the sexual behaviours that the participants had experienced to provide an example of where sexual behaviours had been experienced and where no prior training (apart from the Traffic Light Tool) had taken place. Whilst the lack of prior training itself is not overly remarkable, the key point from this finding was that five instances of amber and five instances of red behaviours were found in the group that had no prior training in sexual behaviours.

Results: Phase three

The findings in phase three supported those found in phase two. Four CMO configurations were found and three contextual factors emerged. The Kirkpatrick levels two and three were evident. However, only tenuous links to level four were evident.

Raised confidence was evidenced via an increase in multi-agency discussions, personal confidence, referrals and signposting. Confidence was raised in sexual health through clarity, raised awareness and the nature of multi-agency training. However, it was noted that sexual behaviours and sexual health are distinctly

different and those whose jobs did not relate to these services directly (i.e. school teachers) did not find an increase in their confidence and practice in the area of sexual health. It was found that there was an increase in the understanding of heathy sexual development through the changes in views and raised awareness as a direct result of the training.

There was an increase in the understanding of risk via the raising of clarity, the multi-agency nature of the training and a consistent tool. However, a shared understanding of risk in this area broke down when agencies had not had the training (see table 11).

[INSERT TABLE 11]

The contextual factors found in phase two were explored further in phase three. Sexual behaviours categorised as green centred around relationships and information seeking. Amber related to individual behaviours, relationships, CSE and information seeking. Similarly, red behaviours related directly to relationships, CSE and individual behaviours. A theme emerged of the lack of training in the sexual behaviours of CYP despite the number of sexual behaviours the participants were encountering.

Category cross-over was explored in more depth (see table 12). Cross over was found in behaviours categorised as green that appeared to relate to amber. The results demonstrated that some of the information in the Traffic Light Tool may be misinterpreted and this could be detrimental to CYP. For example, interest in pornography is categorised as a green behaviour for the 13-17 age range. However, the actions advised for green are to 'give additional information'. Whilst the advice of the tool acknowledges that CYP aged 13-17 may be interested in pornography it does not appear to condone the use, however this was assumed by a participant. This point provides an example of how the Traffic Light Tool is ambiguous in nature and open to individual interpretation. However, 'accessing exploitative or violent pornography' in this age range is categorised as an amber behaviour.

[INSERT TABLE 12]

The Traffic Light Tool does not provide detailed direction for complex cases. For example, a 17 year old male, with special educational needs (SEN), who is becoming increasingly aroused. Whilst having SEN does not have any bearing on sexual behaviour, the CYP in this case did have developmental issues that related to their understanding of the feelings that they were having and how to manage these. Subjectivity of judgement also emerged when assessing behaviours that were not explicitly listed. For example a participant categorised an individual as amber for their choice of clothing.

Cross-over was evident where behaviours classified as amber could have been related to the red category and may have required immediate action. For example in the 9-13 age category, boys touching younger girls and a young person taking indecent images of themselves. A need for immediate action in this instance appears to be the more adequate response rather than to 'gather information to assess'. The reasons for these choices were not apparent from the analysis and the participants in these instances felt that they were following the Traffic Light Tool guidelines, pointing to the ambiguity of the tool and how it is open to interpretation.

The analysis demonstrated that the training had met level two and three of the Kirkpatrick model, however, evidence for level four was weak and only tenuous links could be made.

Discussion

The difficulty of measuring Kirkpatrick level four: Results

The study found that the Kirkpatrick model levels one (reaction), two (learning) and three (behaviour change) were met. However level four (results) were difficult to ascertain. Kirkpatrick (2009) suggests that a positive training reaction may influence participants by motivating them to apply learning and commit to changing their behaviour (see Tannenbaum and Woods, 1992; Meyer and Allen, 1997 and Rhoades and Eisenberger, 2002). Measuring level four was a difficult endeavour (Kirkpatrick, 2009) making attribution of the identification and response to sexual behaviour to the Traffic Light Tool training difficult. This may be due to a number of

factors. The time elapsed since the training may not have allowed for the sequence of intervention and outcomes when a sexual behaviour was encountered. Measuring the outcomes were difficult in terms of green and amber behaviours as no information on the impact on the CYP was available, only the impact upon the participants behaviours. In both phase two and phase three examples of how the training and the use of the Traffic Light Tool may have gone some way in achieving level four, for example references to sexual behaviours that have changed, contraception accessed and provocative images taken down from social media.

The Strengths of the Traffic Light Tool

The themes of 'confidence', 'clarity' and 'consistency' emerged and the skills that were referred to were embedded within certain actions such as advice and support, referrals, changing the terminology used, actions taken, change in process and signposting. By referring to how the tool is used across agencies and the clarity given to the definitions of sexual behaviours in CYP across agencies, it appeared that behaviour had been influenced. In both phase two and phase three the participants felt that the changes were due to a raised confidence in this area. The wider cultural context does not lend itself to confidence when considering sexual behaviour in CYP (Hackett, 2014). The language of the Traffic Light Tool also provided a consistent approach in a context with sporadic training. These elements enhance clarity in the complex context of sexual behaviour in CYP and indicated knowledge transfer to behaviour.

The social mechanisms that are present within a programme (such as the Traffic Light Tool training) originate from the choices of individuals and what they gain from group membership (Pawson and Tilley, 1997). Through the exploration of the

differing layers of social reality which constitute the Traffic Light Tool, the Kirkpatrick Model (2006) allowed for mapping of the causality of the outcomes on a conceptual level. However, measuring the impact upon the behaviour of the CYP with whom the participants worked proved complex and problematic due to the difficulty in gaining evidence in this area. These findings indicate that whilst the training was successful for the participants measuring its impact upon CYP was problematic.

Confidence was be raised via gaining knowledge, experience and support which influences self-efficacy and self-awareness. Hall (2006) and Charnaud and Turner (2015) assert that CYP professionals often do not feel confident in the area of sexual behaviours which is exacerbated by inadequate or little training, clarity and tools. The Traffic Light Tool training appears to have raised the confidence of the participants, by imparting knowledge and providing a consistent multi-agency tool.

Demonstration of the confidence raised was mainly through discussions that took place after the training in the area of sexual behaviours (both with CYP and other professionals). The multi-agency training also had an impact upon confidence through raised referrals to other agencies. Raised confidence impacted upon the participants' skills set and subsequent behaviour when responding to sexual behaviours in CYP (see Currie, 2006; Hackett, 2012; Hall, 2006). Similarly, the results demonstrated how the mechanisms of knowledge, experience and support influenced the outcome of confidence.

The Importance of consistent language and multi-agency working

It was found that multi-agency working contributes to the inconsistency in how sexual behaviours in CYP are dealt with by professionals and the streamlining of approach that arises from the Traffic Light Tool training gave consistency to the responses,

impacting upon practitioner confidence. This makes a strong case for reliable multi-agency training that raises confidence in this area.

The increase in knowledge in sexual development related to raised clarity and understanding. Clarity also stemmed from gaining a consistent approach to sexual development via the training. Perry and Thurston (2008) and Carroll, Lloyd-Jones, Cooke and Owen (2012) imply that consistency, professional knowledge and clarity is important when considering the sexual development of CYP and that this can be reached via professional, multi-agency, training. The results show that clarity and confidence are increased through the multi-agency nature of the training, giving a consistent perspective across agencies. Pow, Elliott, Raeside, Themessl-Huber and Claveirole (2013) state that multi-agency training and skills acquirement is a key factor in the successful approach to understanding the sexual development of CYP.

The findings also demonstrated that the profile of sexual health had been raised for some of the participants. However, the results also indicated conflicts in this area. This point is reflected by Owen, Carroll, Cooke, Formby, Hayter, Hirst, Lloyd Jones, Stapleton, Stevenson, and Sutton (2010) and Formby Hirst, Owen, Hayter, and Stapleton (2010) who assert that the contextual diversity into which sexual behaviours and sexual health in CYP are embedded within the UK can often make consistent approaches difficult. Yet, as indicated within the results, offering multi-agency training may be a step towards reducing the sporadic nature of approaches. However, whilst the results indicate that the training does heighten awareness of sexual health the impact is not direct or explicit. This is because the training is directed at sexual behaviours, a distinctly different area to sexual health.

The Traffic Light Tool provided a common language and understanding from which to assess harm. The results support the points made by Hackett (2014) that a lack of clarity in sexual behaviours, CYP and risk, impact negatively upon risk assessments. The results demonstrated this point, highlighting the clarity given and multi-agency as a key factor in the understanding and assessment of risk when sexual behaviours in CYP are present. Difficulties in risk assessment processes may also be inhibited by the lack of commonalities between CYP who display HSB (Hackett, 2014), and the multi-layered contexts into which they are embedded (see Bladon, Vizard, French & Tranah 2005; and Vizard, Hickey, French & Mccrory, 2007). This is further exacerbated by the number of agencies involved in assessing risk in terms of sexual behaviours (Hackett, 2016). This contributes to disjointed risk assessments due to lack of clarity. The multi-agency nature of the Traffic Light Tool training goes some way to combat these issues. The complexity of context when dealing with the subjective area of sexual behaviours in CYP also requires consideration. These subjective elements may influence how sexual behaviour risk is assessed. There is 'considerable diversity' within the realms of CYP and sexual behaviours, adding a further dimension to the already complex area of the understanding of risk in CYP and sexual behaviours (Taylor, 2003, p.69).

Contextual Issues

When the amount of sexual behaviours encountered across participants emerged, investigation into the empirical evidence focussed upon a baseline from which to compare the findings to. However, an up-to-date baseline for normal sexual behaviours in CYP is not available in a UK context. Assumptions tend to be based within subjective judgements, rather than empirical evidence due to the lack of conventional knowledge about child sexual behaviour. There is a small body of

research that explores the instances of sexual behaviour in CYP but currently none that examines the behaviours encountered in the current UK context, across the CYP professions and differing age groups (see Davies, Glasser & Kossoff, 2000 and Freidrich Fisher, Broughton, Houston, and Shafran, 1998).

The complexity of sexual behaviours and how they are perceived adds to this multifaceted area. As highlighted by Fitzpatrick, Deehan and Jennings (1995) and Larsson and Svedin (2000) cultural context and gender expectations (amongst other factors) are influential when considering how these behaviours are judged and acted upon by professionals. Hackett (2014) expands upon this and highlights that normal sexual behaviour between children is probably part of a natural curiosity and is exploratory, rather than harmful, and may not be grounded in sexuality. Yet, despite these observations, it is difficult to ascertain whether the findings in this research are remarkable or in line with what is to be expected. In this research sexual behaviours in CYP were present across all of the professional roles which may indicate that sexual behaviour in CYP is not a rarity, however, this cannot be generalised.

One of the reasons why measuring the amount of sexual behaviours in this study was straightforward was the use of the Traffic Light Tool, which provided a common language. This allowed for similar interpretations of the subjective and contentious area of sexual behaviours in CYP. Therefore the Traffic Light Tool training may go some way to providing this shared language by which to measure sexual behaviours in CYP. Despite the relative clarity of the Traffic Light Tool, assessing sexual behaviours in CYP is problematic due to ambiguities that exists within the Traffic Light Tool.

Ambiguities were highlighted when the contextual finding of category cross over emerged. Inconsistencies stemmed from the behaviours presenting not being explicitly listed in the Traffic Light Tool and the subjective assumptions of the participants. When considering the category cross-over collectively, the results demonstrate the difficulties that arise due to the ambiguous and complex context of sexual behaviours in CYP. Hackett (2014) refers to this lack of clarity and states that incorrect labelling of HSB often leads to inappropriate interventions. The lack of clear definition is due to the subjective nature of HSB may explain the category overlap seen in this study. The key elements to judging whether a sexual behaviour is harmful - equality, coercion, exploitation, aggression and consent - may mean differing things to different professionals in different circumstances.

This indicates the need for the Traffic Light Tool to incorporate clearer guidance or additional ongoing coaching to accompany the training in the UK. In 2019 (NSPCC, 2020) some progress had been made with this and the Traffic Light Tool system was merged with the Hackett Continuum (2010) for the NSPCC. Whilst this may not solve the issues of ambiguity in this area, it may go some way to negating subjective judgements.

The context of the behaviours may also be an influencing factor. Bladon, et al (2005) outline the range of contexts and behaviours that encompass sexual behaviour in CYP and make clear that assessments of HSB is difficult. The age of the CYP is also an aspect that may affect the categorisation of a sexual behaviour in the Traffic Light Tool (see McCrory, Hickey, Farmer & Vizard 2008). Some of the age ranges differ greatly and behaviour may not be categorised correctly due to this (i.e. sexual intercourse as a green behaviour in the 13-17 age range). Taylor (2003) furthers these points highlighting the 'considerable diversity' (p.69) that exists in CYP and

sexual behaviours, highlighting that assessments and interventions need to be ecosystemic and consider a range of factors and not just the sexual behaviour that is presenting. From this perspective, the Traffic Light Tool may be too simplistic as it does not allow for wider assessment to take place.

There was confusion, with some areas being categorised as sexual behaviours and the Traffic Light Tool used when it was not applicable, for example: purging of food and sexuality. This confusion demonstrates that the judgement of the professionals categorising the behaviour tended to become skewed when the behaviours were not explicitly listed. The category cross-over of behaviours which overlapped did so only marginally (for instance, a red behaviour categorised as amber, but not green). This makes the case for the merging of the Hackett Continuum and the Traffic Light Tool (NSPCC, 2019) where there are five categories that consist of normal, inappropriate, problematic, abusive and violent, as not all kinds of behaviours can be listed in one tool. These findings show that the definition of sexual behaviours in CYP still has subjective elements, such as what consists as inappropriate and harmful which reflects this often contested area.

Hackett (2014) asserts that in terms of the knowledge of CYP professionals some improvements have been seen since the NCH (1992) report. However, these changes in awareness and intervention still require more development. This was reflected in the results as the majority of participants have not had prior training in sexual behaviours yet sexual behaviours across the red/amber/green spectrum are being experienced by a wide range of CYP professionals. The importance of a multi-agency approach and understanding is advocated by Hackett, et al (2019) in the NSPCC HSB framework. Interestingly Hackett (2014) also points out that the focus of multi-agency working and policy developments are almost always focussed upon

the HSB area of children's sexual behaviour, often neglecting the need for training and support for professionals in the green/amber areas. A review conducted by Smith et al (2013), whilst focussed upon provision for CYP who display HSB, did highlight the need for the appropriate use of the tools that are available. As CYP present with a broad spectrum of sexual behaviours, the assessment tools that are available for these (such as the Traffic Light Tool) may provide a common language and strategic process by which to assess the behaviours presented.

In 2005 Hackett, highlighted the need for a national strategy to address sexual behaviours in CYP as this is an area lacking a robust and streamlined approach. Once revised the Traffic Light Tool may fit in with a national strategy as a first response to sexual behaviours in CYP. However, revision to the Traffic Light Tool and the training is required before this can happen.

Limitations

Due to the scope of the research some elements could not be explored in depth such as that of gender (both of professionals and CYP). In relation to the sexual behaviours of CYP, which were experienced by the participants more in-depth exploration could have taken place in terms of types of behaviours and professions to search for any correlations and/or circumstances that surrounded these presentations of behaviours. No research was carried out with CYP which would have given further insight to the findings. Due to the scope of this research, however, this was not possible. It is also important to point out that whilst the results from this research do have implications for practice the results cannot be generalised.

Conclusion

This study indicates a need for the Traffic Light Tool and its training to be revisited. The simultaneous nature of the successes and failures of the Traffic Light Tool

training indicate a requirement for a robust continuous evaluation process to allow for modification to be an ongoing process.

Establishing a UK baseline for sexual behaviours in CYP would allow for the training and the tool to be further developed. The training needs revisiting as confusion was evident when a behaviour was not explicitly listed. The tool requires updating as technology assisted sexual behaviours and online behaviours are not addressed. The Traffic Light Tool washes away the complexities of context that surround sexual behaviours in CYP, and this requires consideration. However, the Traffic Light Tool does appear to fill a training gap in the CYP workforce. There is currently no tool like it that allows for multi-agency professionals to have a common language for a first response in assessing sexual behaviours in CYP. With the apparent growing numbers of HSB experienced by CYP, with some work, this appears to be a timely and valued resource.

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