Appendix A1

#### A guide to types of abuse and how to recognise them

The definitions of abuse set out below are taken from the Department of Education document "Working Together to Safeguard Children" (2013) and the Department of Health document "No Secrets: guidance on protecting vulnerable adults in care" (2000)

Abuse is "a violation of an individual's human and civil rights by any other person or persons' and can be perpetrated by, and to, anyone, regardless of age, gender, class or ethnicity". Abuse may be a single act or repeated over a period of time. Somebody may abuse or neglect a child or vulnerable adult by inflicting harm, or by failing to act to prevent harm. Children or vulnerable adults may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger.

It is important to understand that a vulnerable adult may be abused by another vulnerable adult, or conversely, a child or young person may be abused by another child or young person.

#### **Tools to help define and identify abuse**

Please note that the categories of abuse are not mutually exclusive; a child or a vulnerable adult may be subjected to more than one type of abuse at the same time. Caution is suggested against establishing abuse merely due to the presence of one or more of the indicators, without further detailed assessment/investigation

The table below provides the main categories of abuse and their indicators they should be read to refer to children and vulnerable adults unless otherwise stated. The table can be used as a guide to assist with recognising abuse in domestic homes, care homes, day centres, workplaces and other community settings.

TYPE OF ABUSE	DEFINITION	INDICATORS
Physical abuse	<ul> <li>Hitting, slapping, scratching, pushing, shaking, suffocating, scalding or otherwise causing physical harm</li> <li>Restraint without justifiable reason (may include misuse of medication)</li> <li>Inappropriate sanctions (deprivation of food, clothing, warmth, health care needs)</li> <li>May include a caregiver fabricating or deliberately inducing illness (Münchausen by Proxy Syndrome)</li> </ul>	<ul> <li>Bruises, fractures, bites, burns, scalds, hair loss in one area, urine burns, bed sores, scars, lack of mobility aids where applicable</li> <li>Cowering, flinching, general fearfulness</li> <li>Injuries especially in well-protected areas of body (e.g. inside of thighs or upper arms)</li> <li>Injuries of uniform or unusual type</li> <li>Accumulation of non-administered medicine History of unexplained falls or minor injuries</li> <li>Frequent changing of</li> </ul>

### Appendix A1

TYPE OF ABUSE	DEFINITION	INDICATORS
Physical abuse		General Practitioners (GPs) or reluctance against GP consultation or visit
Sexual abuse	<ul> <li>Sexual activity involving force, coercion or enticement</li> <li>Violence not necessarily involved</li> <li>Sexual activity where the child or vulnerable adult lacks the mental capacity to understand and/or give consent</li> <li>Rape or attempted rape</li> <li>Sexual assault and harassment</li> <li>Non contact abuse (e.g. voyeurism, pornography, grooming over the internet (see pages 11-12 for details about E Safety)</li> <li>Perpetrator not solely adult males, could be female and/or another child or vulnerable adult</li> </ul>	Recognition can be tricky unless disclosed, indicators most likely to be:  Behavioural (e.g. attention seeking, withdrawal and isolation, sexually explicit behaviour/ language, sleep disturbance, self-harm) Physical (bruising, bleeding or itching around the genitals, bedwetting, torn or blood/semen stained underclothing, sexually transmitted infections, pregnancy)
Psychological abuse	<ul> <li>Behaviour that has a harmful effect on emotional health, wellbeing and/or development</li> <li>Verbal abuse; humiliation, ridicule, intimidation, threat of punishment, abandonment</li> <li>Isolation or withdrawal from services or supportive networks</li> <li>Deliberate denial of religious or cultural needs</li> <li>Failure to provide access to appropriate social skills and educational</li> </ul>	<ul> <li>Any sudden changes to mood, behaviour, appetite, sleep patterns, continence, use of eye contact, sociability</li> <li>Anxiety, confusion or general resignation</li> <li>Easily frightened</li> <li>Loss of self esteem</li> <li>Uncharacteristically becoming manipulative, uncooperative and aggressive</li> <li>Obsessions or phobias</li> <li>Dysfunctional relationships with family members/caregivers</li> </ul>

### Appendix A1

TYPE OF ABUSE	DEFINITION	INDICATORS
Psychological abuse	<ul><li>development training</li><li>By-product of all forms of abuse</li></ul>	
Neglect and acts of omission	<ul> <li>Persistent failure to meet physical/psychological needs of child or vulnerable adult</li> <li>Failure to:         <ul> <li>provide reasonable care, privacy and dignity</li> <li>provide adequate food, clothing and shelter</li> <li>protect from harm</li> <li>provide appropriate health, social care or educational services</li> <li>meet basic emotional needs</li> </ul> </li> </ul>	<ul> <li>Inadequate heating, lighting, hygiene, clothing, food or fluids</li> <li>Poor physical condition (e.g. bed sores, weight loss)</li> <li>Failures to give prescribed medication or obtain appropriate medical care</li> <li>Sensory deprivation (e.g. no access to glasses, hearing aids)</li> <li>Thriving outside the home/care environment</li> <li>Children may be frequently absent or late to school</li> <li>Rarely an act of deliberate cruelty in a home environment, often indirect result of unmet needs of the parent(s) or caregiver(s)</li> </ul>
Discriminatory abuse	<ul> <li>When values, beliefs or culture result in a misuse of power</li> <li>Discrimination on basis of sex, disability, age, race/ethnicity, colour, language, culture, religion, politics or sexual orientation</li> <li>Degrading harassment and slurs</li> <li>Hate crime</li> </ul>	<ul> <li>Tendency to withdrawal and isolation</li> <li>Fearfulness and anxiety</li> <li>Being refused access to services or being excluded inappropriately</li> <li>Loss of self esteem</li> <li>Resistance or refusal to access services that are required to meet need</li> <li>Expressions of anger and frustration</li> </ul>
Financial abuse (in the case of vulnerable adults)	<ul> <li>The use personal resources without informed consent or authorisation</li> <li>Theft, fraud and/or extortion of material assets</li> <li>Exploitation, pressure in connection with wills,</li> </ul>	<ul> <li>Anxiety about money</li> <li>Unexplained inability to pay for household shopping or bills etc.</li> <li>Withdrawal of large sums of money which cannot be explained</li> <li>Personal possessions go missing from home</li> </ul>

#### Appendix A1

TYPE OF ABUSE	DEFINITION	INDICATORS
Financial abuse (in the case of vulnerable adults)	<ul> <li>property or inheritance</li> <li>Misappropriation of property, possessions or benefits</li> <li>Misuse of power of attorney or appointeeship</li> </ul>	<ul> <li>Living conditions substandard and unsatisfactory in contrast to adult's apparent financial position</li> <li>Extreme interest and involvement by the family, carer, friend or stranger in a vulnerable adult</li> </ul>

Multiple forms of abuse may occur in an on-going relationship or an abusive service setting and may include more than one person, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm. Any or all of these types of abuse may be perpetrated as the result of deliberate intent and targeting of children or vulnerable people, negligence or ignorance.

#### Other situations to be aware of

Whilst the table above describes six manifestations of abuse, there are situations which have heavy implications for the safeguarding of children and vulnerable adults. As such these need expanding:

CIRCUMSTANCE	EXPLANATION	INDICATORS
Domestic Abuse	<ul> <li>Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or who have been intimate partners or family members regardless of gender or sexuality.</li> <li>This can encompass but is not limited to any one of the six manifestations of abuse outlined in the previous table.</li> </ul>	<ul> <li>Frontline workers throughout the council are likely to encounter signs of domestic abuse and possibly even a disclosure.</li> <li>It is vital that any indicator, explicit or otherwise, is taken seriously and reported – this act saves lives.</li> <li>Staff who suspect domestic abuse must consider safeguarding issues:         <ul> <li>Who else is at risk?</li> <li>Are children or vulnerable adults present?</li> <li>What preventative action in needed?</li> </ul> </li> <li>Incidents reported by Kent Police through domestic abuse protocols will be addressed under child and adult protection processes if a child or vulnerable adult is at risk.</li> </ul>

### Appendix A1

CIRCUMSTANCE	EXPLANATION	INDICATORS
Forced marriage	<ul> <li>Must be seen as distinct from arranged marriage (where families organise marriage but the choice whether to accept lies with the adult or young person)</li> <li>Forced marriage denotes a situation where one or both of the spouses do not consent and some element of pressure is involved</li> </ul>	May exhibit signs of physical, psychological, financial, sexual and emotional abuse
Institutional Abuse	<ul> <li>Children or vulnerable adults placed in any kind of care home or day care establishment are potentially vulnerable to abuse and exploitation</li> <li>Shows lack of respect for dignity and human rights</li> <li>When care standards and practices fall below an acceptable level, institutional abuse is more common</li> <li>May result from poor standards of care, lack of knowledge, understanding and training</li> </ul>	<ul> <li>Indicators include regimented regimes, unusually subdued residents, anxiety in the presence of social care workers</li> <li>Users may exhibit signs of physical, sexual, financial, psychological or discriminatory abuse</li> <li>Whistle-blowers must know how to access support and protection, anonymous reports are permitted and should be taken seriously</li> </ul>
Restraint (formerly 'physical intervention')	<ul> <li>It is illegal and unprofessional to use any form of physical, mechanical, emotional or any other form of restraint as a means of punishment</li> <li>Restraint may only be considered in situations where there is a clear or perceived risk of an adult injuring themselves, or others, or seriously damaging property</li> </ul>	<ul> <li>Children and vulnerable adults who have been unlawfully restrained are most likely to exhibit signs of physical or psychological abuse</li> <li>Depending on the circumstances, restraint could also be considered institutional abuse</li> </ul>
Self neglect or self injurious behaviour	This should be considered as a separate issue and should necessitate assessment by social and/or health care professionals	

#### **E-Safety**

The growth of the Internet has brought with it a mass of opportunities and also complex and diverse risks to safeguarding. Sevenoaks District Council has an obligation to help keep children and vulnerable adults safe online by being adequately equipped to understand, identify and mitigate the risks of new technology. There are complex dangers out there and outlined below are some of the key considerations to be aware of:

E-ABUSE	EXAMPLES
Financial	<ul> <li>Phishing scams, designed to obtain personal and/or financial information and possibly steal your identity</li> <li>Fraud, from fake shopping, banking, charity, dating, social networking, gaming, gambling and other websites</li> </ul>
Psychological	<ul> <li>Exposure to inappropriate content (sexually explicit, racist, violent, extremist or other harmful material, either through choice or in error)</li> <li>Inappropriate contact (people who may wish to abuse, exploit or bully)</li> <li>Inappropriate conduct (because of their own and others' online behaviour, such as the personal information they make public, for example on social networking sites)</li> <li>Commercialism (targeted by aggressive advertising and marketing messages)</li> </ul>
Sexual	<ul> <li>Exposure to sexually explicit content</li> <li>"Sexting"</li> <li>Grooming in web forums and chat rooms</li> <li>Online predators, cyber-stalking and risk of abuse</li> </ul>
Physical	<ul> <li>Access to legal highs and illegal drugs</li> <li>Online predators, cyber-stalking and risk of abuse</li> <li>Exposure to violent content</li> </ul>

E-abuse has been separated for ease of understanding, yet risks are likely to interact and overlap in complex ways.

**Appendix A1** 

#### **Abuse in hospital**

Please be aware that if abuse is witnessed or suspected within a hospital, concerns should be immediately reported to the hospital's senior manager. If it is believed that concerns have not been taken seriously, then it should be reported to the police, the Patient Advice and Liaison Service (PALS), the Clinical Commissioning Group, the Care Quality Commission or to the Social Services Agency.

#### The impact of abuse and neglect

The repeated abuse or neglect of children or vulnerable adults can have major long-term effects on all aspects of a health, development and well-being. Repeated abuse is likely to have a deep impact on self-image and self-esteem, and on his or her future life. Difficulties resulting from abuse can be lifelong: the experience of long-term abuse may lead to difficulties in forming or sustaining close relationships, establishing oneself in the workforce and to extra difficulties in developing the attitudes and skills needed to be an effective parent.

It is not only the stressful events of abuse that have an impact, but also the context in which they take place. Any potentially abusive incident has to be seen in context to assess the extent of harm and appropriate intervention. Often, it is the interaction between a number of factors that serve to increase the likelihood or level of actual significant harm.

For every child or vulnerable adult, there may be factors that aggravate the harm caused and those that protect against harm. Relevant factors include the individual's means of coping and adapting, support from a family and social network, and the impact of any interventions. The effects on a child or vulnerable adult are also influenced by the quality of the family/caring environment at the time of abuse, and subsequent life events. An important point to note is that the way in which professionals respond has a significant bearing on subsequent outcomes.