

# Safeguarding women involved in prostitution

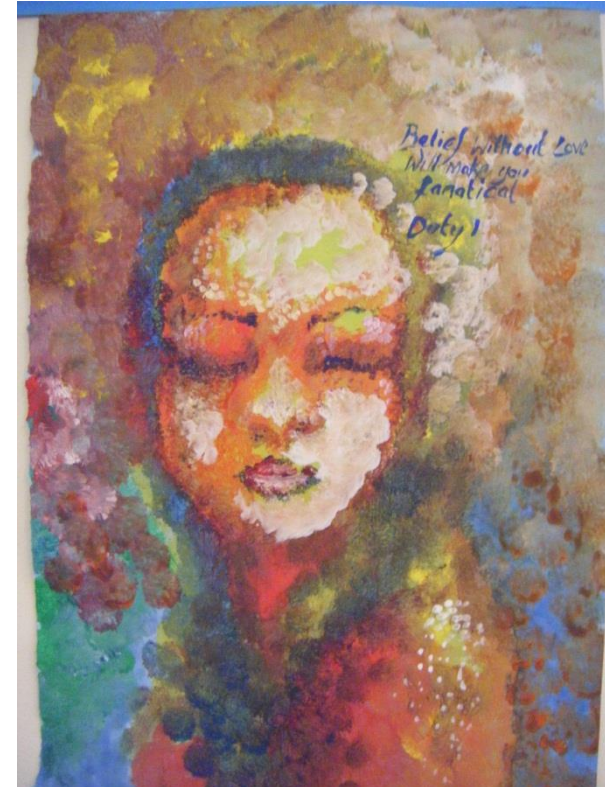
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# Aims

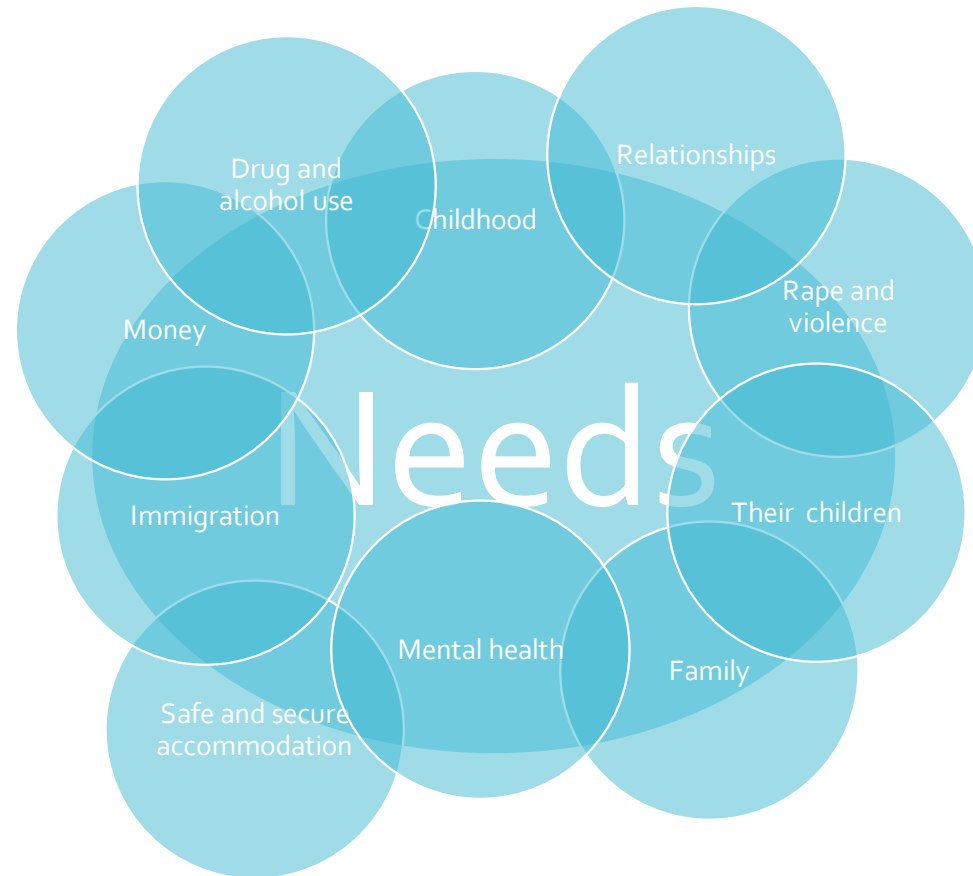
- The needs of women involved in prostitution
- Safety and risk
- Roles in safeguarding
- Capacity and consent
- Information sharing
- Resources
- Language



IT'S A GOOD DAY TO  
TAKE CARE OF YOURSELF  
(SO IS EVERY OTHER DAY).



# Women's needs





# Approaching help

- An individual's approach to help stems from their childhood experiences, where care-seeking behaviours are developed
- For women we must be aware of the trauma they have experienced as this will impact on help seeking
- To get a need met, one must first know they have a need.
- Women tend to describe experiences rather than needs



# Understanding women's needs

- *When they don't listen*
- *When they manipulate me to cooperate*
- *When they treat me the same way every time they see me*
- *When I am excluded from decisions*
- *When the different services don't talk to each other*
- *Doing what they say they will*
- *Show me respect*
- *Treat me with dignity*
- *Try and connect with me*
- *Share power with me*
- *Showed me how to, don't just tell me*
- *When I get given choices and alternatives*
- *Meet me where I feel safe*
- *Just really listen to me*



# What does 'safe' mean

- **What is safety?**
- Safety is....
- What being safe to me means or is it what you think being safe for me means?



# Activity – keeping me safe

- Working in pairs think about risks you might take, such as smoking, drinking with friends on a Friday night, leaving work to study for a couple of years, walking home late from your friend's house, bungee jumping, sky diving, swimming with sharks.....
- What does your partner think about your activities? What might she want to keep you safe from?



Is it safe to....

- Go to a night club with a group of friends?
- Go to a night club with a group of friends if you have epilepsy?
- Have a tattoo?
- Have a tattoo from an unlicensed artist?
- Meet up with someone you don't know?
- To participate in a bloodletting ceremony?
- To travel to Milawi?
- To travel to Syria?

# Safety is a social construct

- *"Perceptions of safety and danger are 'intersubjective' – products of social construction, collective agreement, and socialisation. Whilst objective danger certainly exists, perceptions of danger do not derive directly from observation of the empirical world. The objective environment provides only inconsistent and ambiguous information, permitting ample room for socially constructed beliefs"*

# Who are the experts?

- To successfully safeguard women, we need to foster a relationship of co-working with those who have been abused or neglected.



# What do you need to know?

- The Care Act 2014
- The Children Act 1989
- National Health Service Act 2006
- Health and Social Care Act 2014
- The Mental Capacity Act 2005 and the Human Rights Act 1998
- Equality Act 2010
- The Data Protection Act 1998,
- Freedom of Information Act 2000
- GDPR
- Police and Criminal Evidence Act 1984
- The Crime and Disorder Act 1998
- Serious Crime Act 2015.

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- *"No one will tell you how to interpret the law in practice, but they will judge whether you have justified your practice in law"*

# Role of the safeguarding lead

- Coordination, delegation and hypothesis development, to explore the evidence and create defensible and justifiable outcomes based on the wishes and feelings of the person concerned.
- Must think not only about the person who is reported to have suffered abuse or neglect, they must also think about others who may be affected, the potential perpetrator and their rights and the balance of the ethics involved
- To balance the law models, methods, theories and research (empirical evidence)
- The things the person said that they wanted, and the things that the practitioner observed the person doing (rational evidence)
- Proportionality – justifying a proportionate response to the above potentially conflicting issues, based on the balance of credible evidence.



# Practitioner decision making

- Reflect on lessons we have learned, personally and as a team and organisation, through our encounters and acting in a way that we feel is the most correct and sensitive manner
- Need to justify a course of action via legislation, models, methods, theory and research
- Provide evidence for a hypothesis from evidence gathered from the person, others who know the person, and other professionals
- Define why we have acted proportionately in any given situation
- Local Authority teams will expect practitioners to have risk assessed the concern and conducted part of the enquiry process and response prior to making the referral.

# The wellbeing principle

- Maintaining personal dignity (including treating the person with respect)
- Physical, emotional and mental health and wellbeing
- Protection from abuse and neglect
- Control by the individual over day to day life (including the care and support that is provided and the way it is provided)
- Participation in work, education, training and recreation
- Social and economic wellbeing
- Domestic, family and personal wellbeing
- Suitability of living accommodation
- The individual contribution to society.

# Three part eligibility test for safeguarding

- The individual has needs for care and support (whether or not the local authority is meeting any of those needs)
- The individual is experiencing, or is at risk of, abuse or neglect
- And, as a result of those needs, is unable to protect themselves against the abuse or neglect or the risk of it.

# Capacity, consent and information sharing

- Begin by working out together what the women's aims are
- Explain how the referral will support these
- Inform them of their rights including access to the process and criminal and civil redress if appropriate
- You need to check that consent is the most lawful method for proceeding
- Allow the person to consent to each part of the referral
- Ensure that the person knows how to withdraw their consent and that they can do this at any time
- Record, record, record

# Capacity, consent and information sharing

- If you are going to make the referral whether the individual consents or not, then it is inappropriate and unfair to ask for consent

# Defensible decision making

- Use appropriate and relevant legislation
- Consider responsibility to protect the individuals interests
- Conduct an assessment of the situation and have a justification for the sharing of information
- You have checked that there is not a less intrusive way to achieve the same result
- You are confident that the persons autonomy and individual interests do not override
- You have minimised the impact on the person of sharing the data

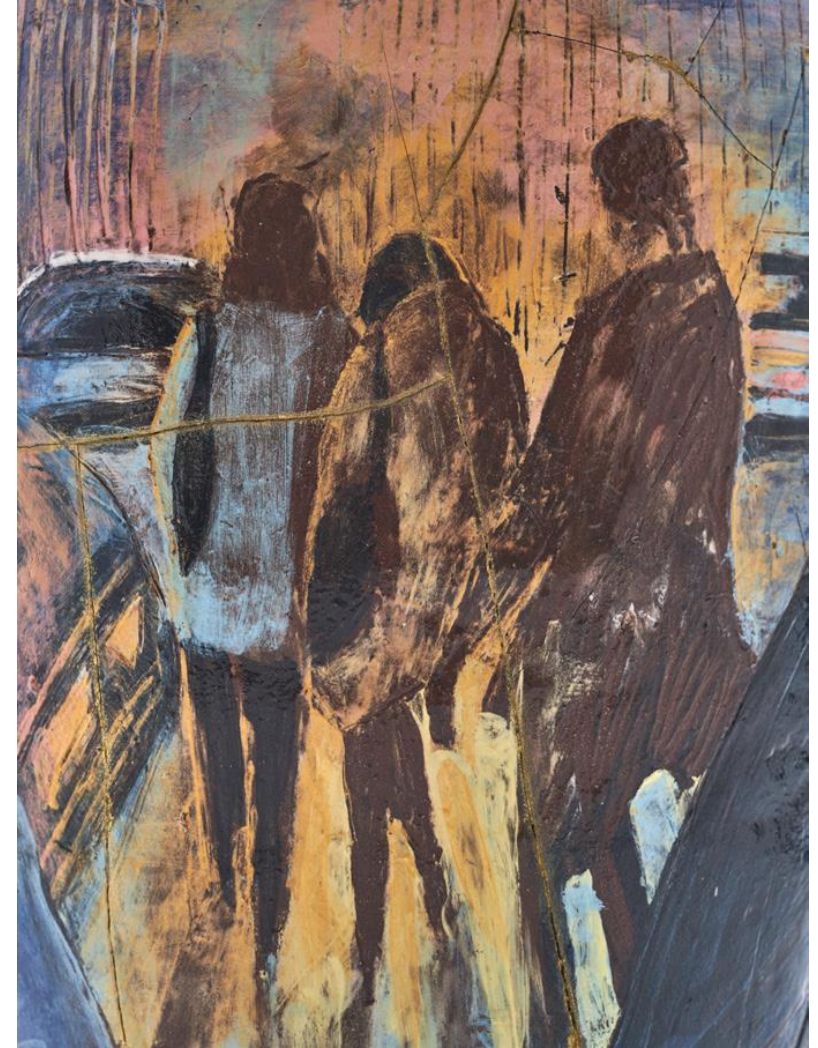
# Defensible decision making is...

- Person centred
- Based on appropriate legislation
- Proportionate



# Specificity of consent

Don't ask for it,  
if you don't need it!





# Safeguarding and Adult Protection

*"Safeguarding relates to the prevention of abuse and has a broad focus that extends to all aspects of a person's general welfare, adult protection refers to investigation and intervention where it is suspected that abuse may have occurred. Safeguarding considered in this context, as properly part of the general approach to be taken to assessment and the delivery of services."*

- Safeguarding duties encompass both prevention and protection

# Considerations

- Are any of the following required?
- An adult protection response coordinated by the local authority
- An adult protection response coordinated by health, housing or a relevant professional
- A social work assessment, review or planned care to maintain well-being
- A professional response by one or more agencies where actions will be requested by the local authority and outcomes will be monitored
- A safeguarding response to prevent the risk of abuse or neglect (signposting, advice, guidance or therapeutic support).

# Responses

Referrals can have a number of possible responses

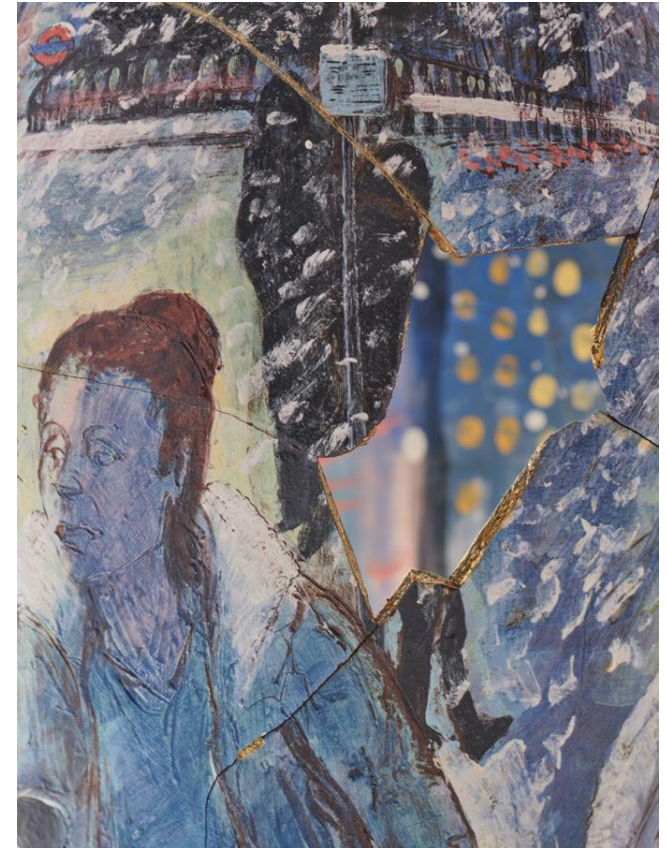
- Safeguarding/Adult Protection response
- Care management
- Advice and guidance
- Information sharing
- Other agency response/intervention

# Managing risk

- Assess the risk
- Record and ensure defensible decision making
- Take account of the principles of safeguarding
- Discuss and reflect with others
- Be clear on the anticipated outcome

# When you can make a referral without consent

- Reasonable suspicion of a potential crime
- Risks to person or others
- Coercion
- Harassment of the person
- When it is in the public interest



# Resources for safeguarding

- The person you are supporting
- Agencies around the area
- Specialist women's organisations
- Specialist exiting services
- Sexual health services
- Mental health services
- Community groups
- Housing teams
- Local authority/borough services for DV/SV
- Local authority safeguarding teams/MARAC etc.



# A note on language use

- Language has power, to support agencies and those working with women involved in prostitution, we have produced a resource on language use and misuse in this area, it is available from our website:
- [www.watw.org.uk](http://www.watw.org.uk)





**KEEP  
CALM  
AND  
THANK YOU  
FOR PARTICIPATING**

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