

‘Opening Doors’: best practice when a young child might be showing or telling you that they are at risk

This article gives practical, evidence-based guidance on responding carefully to young children in early years settings, using an ‘open doors’ framework. The guidance is relevant for many situations, but particularly when you may be worried about a child’s safety.

During the course of this article, early years settings is used to describe the whole range of places where young children receive care and education outside of their homes – childminders, nursery and reception classes, playgroups, children’s centres and nurseries. Much child abuse goes unreported. ‘Disclosure’ is often seen as a one-off, one-way event where a child ‘tells’ an adult. Separately, many professionals are given negative, prohibitive guidance about responding to early concerns. This paper re-frames disclosure as an interaction in which the listening adult may need to play an active, enabling role, and respond to what a child ‘does’ as well as what they ‘say’.

The paper uses the analogy of ‘opening doors’ for children in response to possible concerns. It reviews what is known from research about young children’s memory, communication and testimony; sets out clear guidance for how to respond directly to children and ends by following a young child through a sequence of moments, where adults have opportunities to ‘open or close’ doors on crucial communication. Specific examples are given throughout, showing how to safely open doors for children, while avoiding accidentally closing doors, or trying to lead or direct children through doors, or not noticing children who are trying to open doors. Connections are made with current safeguarding procedures and with best practice guidance in the early years.

‘Opening doors’ is a framework of positive, evidence-based guidance translated into very practical responses. This approach has evolved within multidisciplinary practice and training; its roots are in direct work with children giving evidence about serious crime, including sexual and physical assault, and rape. A series of ‘opening door’ photographs were produced in collaboration with children, who were active agents in the creation of the images.

The context

Child abuse has serious consequences for children, families, and society. For example, the annual cost of child sexual abuse in the UK has been estimated at £3.2 billion (Saied-Tessier, 2014). Research indicates that children experience much higher levels of abuse and neglect than those recorded in official statistics (Allnock, 2015; Beckett and

Warrington, 2014; Radford et al, 2013; Smith et al, 2015;) with recent research suggesting that 85 percent of child sexual abuse goes unreported in England (OCC, 2015).

A failure to listen to children is a recurrent finding in reviews of professional practice – for example, the serious case review into the death of Daniel Pelka (four-years-old) noted that ‘Daniel had become invisible to professionals... there was no evidence of any conversation with Daniel about his home life’ (Rogers, 2013). Separately, an evaluation of 67 serious case reviews identified that too often the focus on the child was lost and the voices of children and young people were not heard (Ofsted, 2011).

In January 2011, a nursery worker, Paul Wilson, came to the attention of the police following an accusation by a 13-year-old girl of online grooming. Examination of his computer revealed many indecent images, including a serious assault of a three-year-old in a nursery, which he had recorded on his mobile phone. He was arrested, charged and subsequently convicted and sentenced to life imprisonment after admitting two charges of rape, 16 counts of causing or inciting a child to engage in sexual activity, 25 of making indecent images, and three of distributing images of children.

The review found that it was known by the nursery, Ofsted and the Local Authority that Wilson had a ‘special relationship’ with the child, which should have raised the alarm and been examined in more detail. One of the key lessons from the serious case review was the need for those working with children to listen to, and to ask about, children’s experiences directly with them, rather than just speaking to adults (Wonnacott, 2014).

A more recent serious case review, into the death in foster care of a child aged 23-months-old, raises similar issues. Although several professionals noticed that the child had become ‘very watchful and wary’; that his behaviour ‘showed clearly that he was miserable and at times hungry’, and he had lost two kilograms in 12 weeks, these concerns were not followed up (Bentley-Lawson, 2017 para 9.9 and 9.11). The review notes ‘regular and consistent supervision ... is crucial for the safeguarding of children, especially non-verbal/pre-school children’ (ibid p49).

There are signs of positive change – young children’s unspoken communication is now being accepted within



Ruth Marchant (top); Lucy Turner

is a forensic interviewer and witness intermediary, providing communication support to very young children in their involvement with the police and the courts; Lucy works with Triangle as an intermediary, interviewer, advocate, and trainer. She is qualified as an Early Years Teacher and SENCO

ruth@triangle.org.uk
lucy@triangle.org.uk

Much child abuse goes unreported. ‘Disclosure’ is often seen as a one-off, one-way event where a child ‘tells’ an adult. Separately, many professionals are given negative, prohibitive guidance about responding to early concerns.

When a young child might be showing or telling you that they are at risk

- An 18-month-old freezes every time his nappy is changed.
- A three-year-old plays 'jections' (injections) alone in the quiet area.
- A three-year-old has very faint bruising around her neck, you think it might be finger marks.
- A four-year-old announces that 'Fireman Sam squirts on my tummy all night' – see page 57.
- A four-year-old plays 'bedtime' frantically and repetitively, whispering 'Don't tell or I kill you'.
- A five-year-old offers 50p to lick another child's minnie at playtime.
- A five-year-old tells you she has 'a bad, bad secret' but cannot say what it is.
- A three-year-old draws this picture of his step-father, says 'Look, Jon's hurty fingers'
- A two-year-old draws this picture of herself, says 'me and my holes'

legal proceedings. Many four-year-olds and some three-year-olds have given evidence at criminal trials in England, including children who were two-years-old when first interviewed (Marchant, 2013; 2016).

In 2010, the Appeal Court upheld a conviction for rape based on the evidence of a child aged three-years-old at interview (four at trial), who was describing events that had occurred when she was two-years-old. The judgement stated, 'the age of a witness is not determinative on his or her ability to give truthful and accurate evidence' (R v. Barker, 2010; EWCA Crim 4 para 40).

In the six years following this judgment, there has been a significant increase in the number of young children giving evidence in criminal proceedings, reflected, for example, in patterns of referral for intermediary support (intermediaries are a Special Measure, enabling children's communication in legal proceedings – <http://www.triangle.org.uk/service/intermediaries>).

Safeguarding policies and procedures in the early years

Confident early pick-up of possible concerns – by careful opening of doors – is an essential foundation for children's safety. The requirement to protect children from harm is embedded throughout policies and guidance across every discipline and agency involved with children, for example:

- '... safeguarding children and protecting them from harm is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.' (Department for Education, 2015b, p5).
- 'Safeguarding is everybody's business ... the safety and well-being of those in vulnerable circumstances is at the forefront of our business' (NHS England 2015 p6).
- 'The police have a duty to safeguard and protect children.' (College of Policing 2016).

The requirement to protect babies, toddlers and young children from harm is similarly clear in *Early Years Foundation Stage* (EYFS) policies and guidance, for example: 'Providers must be alert to any issues for concern in the child's life at home or elsewhere. Providers must have and implement a policy, and procedures, to

safeguard children. A practitioner must be designated to take lead responsibility for safeguarding children in every setting. Policy must cover the use of mobile phone and camera. Providers must train all staff to understand their safeguarding policy and procedures ... Training ... must enable staff to identify signs of possible abuse and neglect at the earliest opportunity, and to respond in a timely and appropriate way.' (Department for Education 2014 para 3.4, 3.5 and 3.6).

Closing doors by mistake

Multi-agency government guidance states: 'If a child reports, following a conversation you have initiated or otherwise, that they are being abused and neglected, you should listen to them, take their allegation seriously, and reassure them that you will take action to keep them safe.' (Department for Education, 2015a).

Although most guidance, like the above, says children should be listened to, it rarely explains how to do this safely. In fact, practitioners in many early years settings are given long lists of what not to do: 'Don't investigate, don't ask suggestive or leading questions, don't ask any questions at all, don't press the child for information; avoid making promises you can't keep, don't extend a child's account, never say you will keep a secret, don't interpret a child's behaviour, don't comment, don't react, don't express shock or disbelief, don't lead a child as this could prejudice police investigations, never promise the child complete confidentiality, do not question or cross-examine a child, never put words into a child's mouth.' [Department for Education, 2015b; Department for Education 2016; Department for Education, 2015a; Pan Sussex Child Protection Procedures 2016; Pan London Child Protection Procedures 2016; *Early Years Foundation Stage* 2014; CACHE Children and Young People Diploma 2011]

Such prohibitive, negative guidance can accidentally silence children, by creating anxiety, hesitancy or confusion in the adults. In our experience, many professionals are clear about what they must not do or say. Relatively few people are confident about what they should do or say.

The opening doors guidance is entirely positive, i.e. it explains what to do, rather than what not to do.

Re-framing 'Disclosure' – what research tells us

It is commonly thought that young children do not 'tell' about abuse, especially sexual abuse. For example, research reports that children rarely disclose sexual abuse immediately after the event (Smith et al, 2015) and that 60-80 percent of victims 'withhold' or 'delay' disclosure (Hébert, Tourigny, Cyr, et al, 2009; Jones, 2000; Paine and Hansen, 2002; McElvaney, 2015). However, some recent research suggests that many children do attempt to tell, over time, in different ways and that disclosure tends to be a process rather than a single episode (London et al, 2005; Alaggia, 2010). Some children face additional barriers in disclosing abuse – for example, very young children and some disabled children (Marchant 2013, 2010).

In a recent study in England, more than 80 percent of young adults who had experienced high levels of abuse and

violence during childhood reported that they had tried to tell someone about the abuse. Not being noticed, asked or heard 'was a consistent thread throughout... Some young people emphasised that they delayed their disclosures – or did not disclose – because no-one asked them or no-one noticed' (Allnock and Miller, 2013). Some young people are also sure that when they were children there were signs of abuse that should have been picked up (McElvaney, 2015).

Disclosure is often understood as a one-off, one-way event. However, disclosure can better be understood 'as a process that unfolds over time in different contexts and not as a singular event' (Reitsema and Grietens, 2016). 'Disclosure' develops through an interplay between children's signs and expressions and the reactions of the adults around them, both verbal and non-verbal. Children receive information on how adults respond to them, they process and evaluate this information, and they base their reactions on this (McElvaney, Greene, and Hogan, 2012).

Our experience with more than 1,000 children giving evidence about alleged abuse, suggests that many children – especially young or disabled children – show or tell repeatedly before action is taken – for example, 'Oh she's been saying that for ages.' 'He always does that, we thought that's just him.' The initial response of adults to children's disclosures can also affect children's wellbeing and the likelihood that they will recant or 'take back' their allegations (Ahern and Lamb, 2016) – adult responses are also key in later legal proceedings (Stolzenberg and Lyon, 2014).

Children's evidence – what research tells us

Early years practitioners are practised and skilled at understanding young children, and know that listening means attending in the widest sense to all of children's communication – everything that they say and do, from sounds, words and sentences to expressions, gestures, eye gaze, play, demonstrations, behaviour and drawing.

Research has confirmed that young children rely much more on unspoken communication than adults (Doherty-Sneddon 2003). This applies both to receptive communication (children's ability to understand) and expressive communication (children's ability to explain). Therefore, being aware of one's own unspoken communication (intonation, facial expression and body language) and paying careful attention to children's unspoken communication is essential when exploring possible safeguarding concerns.

Young children may 'show' about abuse well before they can or will 'tell' about it. They may also say or do things that are worrying, but are not clear allegations or disclosures. Children may make repeated deliberate attempts to begin to show or tell, or may unintentionally or accidentally do so. Children may be coerced into making false allegations, or their reports of innocent events may be misunderstood (for example, a four-year-old who announced, 'Fireman Sam sleeps in my bed and squirts all on my tummy' had just received a duvet cover for his birthday picturing Fireman Sam using his hose).

There is now also a robust knowledge base for investigative interviewing of children. Founded on extensive worldwide research, this provides a helpful basis for much clearer guidance about how adults should respond to initial concerns, reducing the risk of confusing or contaminating children's accounts, and also reducing the risk of accidentally silencing children.

Research is absolutely clear that the best way to elicit accurate information from children is to ask as few questions as possible (Burrows and Powell, 2014; Lamb et al, 2008) and to make these short, open-ended questions that let the child decide what to focus on, and do not introduce any information the child has not mentioned (Lamb et al, 2008; Lyon, 2014; Malloy et al, 2013; Orbach and Pipe, 2011; Powell and Snow, 2007).

Asking open-ended questions is not easy and takes practise. There is also confusion about which questions are open-ended. For example, 'wh' questions (who, what, where, when, why) are often incorrectly defined as open-ended questions. They are actually closed questions, because they direct the child's attention. 'Wh' questions can easily become unintentionally leading, i.e. 'Who else was there?' assumes that another person was present.

The 'opening doors' guidance is based on what is known about children's memory and children's testimony (Lamb et al, 2011; LaRooy et al, 2015; Marchant, 2013; 2015) and about the impact of trauma (Perry et al, 2006; Van der Kolk, 2015). It also draws on a set of ideas about non-directive communication within play therapy and beyond (Axline, 1947; Pinney, 1984; Rogers, 1942).

The opening doors approach is compatible with current policy and guidance (Department of Education, 2015a; 2015b; Home Office 2011; Ofsted 2016).

Practitioners must be very aware that it is easy to 'close doors' on children without meaning to



A different approach to guidance

The 'opening doors' approach offers a positive, accessible and safe way to explore possible concerns with children, gently and at their pace. The aim is to get just enough information to work out what action is required, without leading children or contaminating their accounts. This approach is safe in terms of protecting children and protecting potential evidence. It is also safe whether children have been abused or have been misunderstood, or have been coached to give false accounts.

Positive guidance – Opening Doors

We could give much more enabling, helpful and clear guidance on how to respond to young children's possibly concerning behaviours or comments. We could say...

- You are part of children's first line of defence. It is your job to build helpful relationships with children. You are likely to meet some children who are not safe. They may tell you. Or they may show you. This might happen suddenly and without warning, or it may happen slowly, bit by bit, over time. It is your job to notice low level concerning behaviour that makes you skip a beat. It is your job to attend to the things children say or do that might not initially make sense.
- It is your job to notice the baby who keeps very still and silent when you change their nappy, to think about the toddler who makes you feel uneasy with the way they straddle your lap and rock on you, to see the child who is so busy keeping quiet and watching every adult in the room.
- It is your job to notice. And it is your job to respond. This is how to do that job. And this is how to do it carefully and well. The analogy used is of 'opening doors', that a child can walk through, or not. Early years settings are used to keeping in mind issues of door safety around young children. It is, therefore, hoped that the 'doors' analogy will easily stick in the mind of practitioners.
- If a child tells or plays or draws or shows about possible abuse, listen and attend carefully, with 100 percent of your attention, even if you look like you are doing something else. Many children find it easier if eye contact is not required (sit next to, instead of in front of the child, or direct your gaze to shared play, or simply look away).
- Let the child tell you what they want to tell you, or show you what they want to show you, as long as they and other children are safe. If the time or place is tricky, you might be able to adjust the environment rather than interrupt or stop the child (for example, reduce sound in the room, alert another worker to engage with the other children, or perhaps quietly direct them to play elsewhere, and always have a pen and notebook nearby, ready to make notes).
- If you are not sure what the child said or did, or if you are not sure what they meant, offer an open invitation – 'tell me more about that', or 'show me that again'.
- Then say things like 'uhuh' or 'mmhmm', or 'go on', to show you are listening. These are safe things to say because they encourage the child to continue, without

directing their account in anyway. Saying 'OK' or 'right' or 'yes' is riskier because these can suggest approval of what the child is telling you, and some things that children need to tell about are really not OK.

- Make clear through your behaviour and body language that you are calm and alright, and that you have time. Breathe, relax, keep still if the child is still. Give the child as much physical space as they need. Adapt your language and communication style in line with the child's needs.
- Ask as few questions as possible. Ask one question at a time. Good questions are open questions – 'tell me about that', 'then what happened', 'what else happened', 'tell me more about that'. Let the child use his or her own words.
- Be clear about what you need to know. Try to get just enough information to work out what action is required. Make a careful record of what the child said and did, and any questions you asked. If a child tries to demonstrate violent or sexual acts using your body, say calmly, 'I can't let you do that' and, if necessary, move away. If a child draws something concerning, keep the drawing safe.
- If appropriate, reflect back, using the child's own words. Say exactly what they said, without expanding or amending or asking questions. If appropriate, comment to show that you have noticed what a child is doing (for example, 'you are showing me with your hands').
- Let the child know what you will do next. This can be very simple: 'I am going to have a think and then I will come back', then perhaps, 'a policeman called Jon is going to come to nursery, he needs your help. I will stay with you when he's here'.

The aim is to keep opening doors, to keep an open mind about what you see and hear. You may need to carry on opening doors throughout an interaction that may last two minutes, or that may be spread across several weeks or months. **eye**

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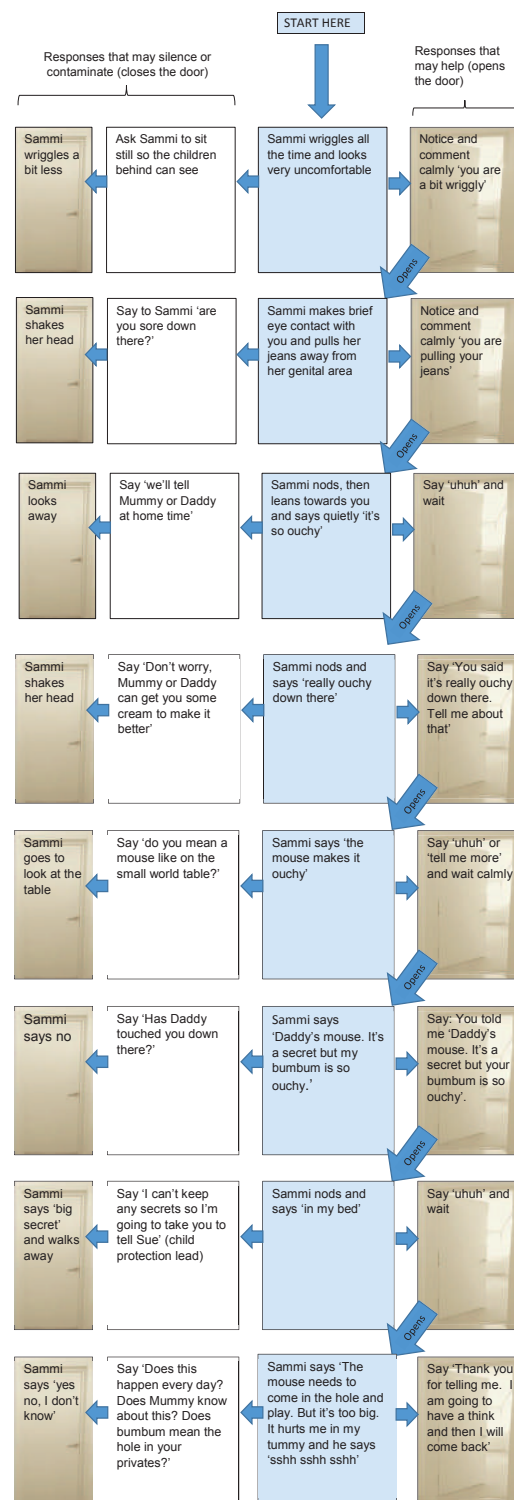
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Opening Doors in action

The example below shows this 'door opening' approach in action, following a young child through a sequence of moments where adults have opportunities to open or close doors.

Sammi, age 3, is a bright child with no known health issues, additional needs or safeguarding concerns. Today you notice that Sammi is wriggling constantly whenever she sits on a chair or on the floor.

What might close the door for Sammi? What might open the door for Sammi?



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Key points

- Disclosure is often seen as a one-off, one-way event, where the adult is a passive recipient of words that a child says
- In fact, disclosure is interactive, and many young children show as well as tell
- The way adults respond when children begin to show or tell about possible abuse can determine whether they continue telling and whether they are kept safe
- Adult responses can also clarify, confuse or contaminate children's accounts
- 'Opening Doors' is a positive, practical, accessible, evidence-based approach, enabling adults to respond confidently and carefully when there may be safeguarding concerns about a child