

Harmful Sexual Behaviours Safety Plan Practice Tool



Use the following checklist to ensure your safety plan considers all aspects of planning including balancing risk and protective factors. Safety plans should increase safety whilst also providing opportunities for young people to engage in safe relationships and prosocial activities.

The next pages contain this safety plan template for you to fill out for a young person you work with, followed by an example safety plan for reference.

SAFETY PLAN TEMPLATE FOR SUPPORTING YOUNG PERSON WHO HAS ENGAGED IN HARMFUL SEXUAL BEHAVIOUR

Safety Plan	
Summary of a child or young person's current and history of care arrangements	
Summary of a child or young person's concerning or harmful sexual behaviour	
Risk factors for harmful sexual behaviour	
Protective factors/ strengths of young person and/or care environment	
Current drivers of harmful sexual behaviour	
Safety strategies	
Engagement of a child or young person with the Safety Plan	
Person/people responsible for monitoring and reviewing the Safety Plan	
Review date/frequency	







Summary of young person's current and history of care arrangements:
Summary of young person's concerning or harmful sexual behaviour:
Risk factors for harmful sexual behaviour:
Protective factors/ strengths of young person and/or care environment:





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Current drivers of harmful sexual behaviour:
Safety strategies:
Engagement of young person with the Safety Plan:
Person/people responsible for monitoring and reviewing the Safety Plan:
Review:







Summary of young person's current and history of care arrangements:

Kai is a 15 year old young person who has resided in residential care for two years. Kai has witnessed significant family violence and experienced significant neglect. Kai has experienced multiple placements in out of home care after he was removed from parental care when he was seven years old and he has been subject to two attempts at reunification into parental care.

Summary of young person's concerning or harmful sexual behaviour:

Kai has previously asked same aged male co-residents in residential care, fostersiblings and peers at school to perform oral sex on him. This often occurs when he is attempting to seek connection with other young people. It is unknown if any of Kai's requests have been successful. Kai has previously disclosed that he witnessed adult sexual activity regularly when in parental care.

Risk factors for harmful sexual behaviour:

- Kai often expresses low self-worth and verbalises feeling helpless and depressed for being a "resi kid".
- Kai can become aggressive and threatening when carers are unable to meet a request or when carers attempt to implement rules and boundaries.
- Kai has difficulty relating appropriately with other people and can become inappropriate and hyperactive in an attempt to be acknowledged.
- Kai often becomes withdrawn and hard to engage after contact with his family.
- Kai often absconds from placement for several hours and returns substance affected by cannabis.





Protective factors/ strengths of young person and/or care environment:

- Kai has a strong connection to his school and attends regularly.
- Kai loves cooking and has recently started practicing piping icing in different patterns. This concentrated activity keeps Kai calm and attentive to others at the same time.
- Kai loves riding and fixing bikes. He enjoys being praised for his skills understanding about mechanics.
- Kai thrives on one-to-one support and enjoys joining carers on a drive.
- Kai is placed with other young people who have individual interests and they
 rarely engage in the community together however mostly live amicably in the
 home.

Current drivers of harmful sexual behaviour:

Kai has difficulty in social settings and has a constant desire to be liked and feel connected with others. Kai was exposed to adult sexual themes at a young age and has developed expectations that connection is achieved through sexual activity. Kai's trauma experiences have impacted on his impulse control and emotional regulation. When he becomes distressed or stressed around other young people, he will make sexually inappropriate statements as a means to seek the attention of others to maintain a sense of belonging and relationship.

Safety strategies:

- Kai is to be supervised in his interactions with other young people in the home. Kai is to be positively praised when relating appropriately.
- Kai is not enter the bedroom of other young people and he should dress in private in his bedroom or bathroom.
- Carers should redirect Kai when they notice he is becoming inappropriate and hyperactive with other young people to an activity such as going for a bike ride, drive or baking with a carer.





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Safety strategies (continued):

- Kai is to be engaged in a one-to-one activity if carers notice he is withdrawn and expressing low self-worth.
- Should Kai start asking another young person to "give me head", carers should acknowledge that it is inappropriate and redirect him to a more prosocial activity together such as playing PlayStation. Further conversations with Kai about the inappropriateness of those statements should occur in private without the other young people present to reduce shame.
- Kai is to be reminded that bike rides are an activity he can do by himself or with a carer and that his interactions with other young people should occur in the home.

Engagement of young person with the Safety Plan:

Kai was reluctant to engage in conversations around safety planning however stated he would agree to dress and bathe privately and go for bike rides by himself or with a carer. Kai is able to reflect on the inappropriateness of asking other people to perform oral sex on him. He states he is unable to control it but will try to follow the expectations of this plan.

Person/people responsible for monitoring and reviewing the Safety Plan:

Therapeutic Specialist and House Manager

Review:

3 weeks



