

## Increasing Safety and the Resilience of Children at Risk of Technology-assisted Child Sexual Abuse: Implementation Evaluation for InCtrl

### Aims

Designed by NSPCC staff, **InCtrl** is a preventative service that aims to support children to safely enjoy online life by increasing safe online behaviours and digital resilience. InCtrl was piloted between January 2019 and February 2020. The implementation evaluation aimed to examine (1) the feasibility of the pilot service, (2) whether the theory of change for InCtrl is evidenced, and (3) the factors that were barriers and facilitators to service delivery.

### Key Findings

- **Three quarters of the 162 children referred partially or fully completed InCtrl.** Their age ranged from 7 to 16 years, with more girls (59%) referred than boys (37%). Children with disabilities (37%) or who were looked after (7%) was higher than the general school population. Over 20% were from minority ethnic groups.
- **InCtrl is generally well received by all stakeholders.** Most young people complete the service and there are indications of positive outcomes. Children's relationships with the practitioners were very positive, with some saying this was a key factor in their enjoyment of the sessions. Children, parents and practitioners described evidence of increased digital resilience, emotional resilience, and wellbeing for children who completed the pilot service.
- **Low numbers limit quantitative findings on outcomes.** Analysis of the data suggested that attending InCtrl may help to improve the wellbeing of children reporting lower wellbeing scores within the clinical range of the Child Outcome Rating Scale (CORS). However, these findings are limited by small samples, due to missing and invalid data and difficulties setting up referral pathways during the first few months of the pilot.
- **Session materials work well with a variety of circumstances, ages and needs.** However, some sessions and activities require revision. Age range was wider than the target age group of 9–13 years. Gender appeared to influence both rates and reasons for referral. Boys were more likely to be involved in gaming, while concerns for girls were often about their use of social media. Mental health, safeguarding, bullying and a lack of risk awareness of risk were recurring themes discussed as reasons for referral.
- **InCtrl is not currently delivered as a consistent service.** There are variations in methods of service delivery and interpretation of referral criteria. Targeting of the service needs to be clarified and agreed, for example whether the service should be universal or only for children with identified vulnerabilities. This will help to ensure that referrals are appropriate and will inform future evaluation design.
- **Engagement of parents /main caregiver was variable.** Finding ways to increase the lower-than-anticipated number of parents supported by InCtrl would strengthen outcomes for children by enabling a more systemic approach. Parents are key to keeping children safe online after the group completes, and those who did engage felt more able to support their children. An adapted one-to-one version of InCtrl delivered virtually while children are at home during the COVID-19 pandemic enabled greater involvement of parents and caregivers.
- **Over 80 per cent of referrals came from schools.** Successful introduction of the service within schools was dependent upon having a good working relationship with a main referrer within the school who could explain the service to children, parents and their colleagues. Teams with an established working relationship with a school found it easier to set up groups. Social services referred 17% of the children.
- **Primary schools had several factors that complement the InCtrl service model.** In contrast to secondary schools, the children already know each other, there is greater flexibility in timetabling and more contact and communication with parents and carers. Research also suggests that preventative interventions should be aimed at younger children: the majority of whom have mobile phones by Year 6 and are more receptive to adopting productive coping strategies than older children.

### Policy Context

Every day, millions of children enjoy different ways of spending time online. They keep in touch with their friends and family; watch and listen to content; play games; and have easy access to information. Online activity increased during the time that this report was written: during the coronavirus (COVID-19) pandemic and UK lockdown. Sadly, online activity relating to child sexual abuse also significantly increased. Rapidly developing technology and evolving use of social media creates new opportunities to initiate abuse, exposing children to unacceptable risks in the spaces where they socialise, learn and play. Most online platforms fail to integrate adequate child safeguarding into the design of their sites. While the NSPCC campaigns to hold tech companies accountable for abuse happening on their platforms, the charity also recognised the need to create and evaluate tailored services for children who may be particularly vulnerable to online sexual abuse.

### Methodology

Using mixed methods, the evaluation included analysis of case record data for 162 children referred to InCtrl during the pilot; two online surveys completed by practitioners; and 32 qualitative interviews and focus groups held with children, parents/carers and NSPCC staff. The Child Outcome Rating Scale Measures (CORS) was piloted to test whether it was appropriate to use as a practice measure for InCtrl and with any further evaluation of the service. Children and parents were asked about the child's online activity, their experience of InCtrl, and whether the service helped them in any way. NSPCC staff were asked about how they developed InCtrl, the extent to which the service met local needs, what activities were effective within sessions, outcomes noticed and their experience of evaluation activities. One of the online surveys recorded each child's needs that were known at the time of referral. The second survey was completed after each session and logged the activities completed, whether materials needed adaptation and why, and ratings for children's engagement and the effectiveness of the session.

### Background

Children who experience sexual abuse report high rates of lasting psychological difficulties; the presence of technology adding further factors to contend with (e.g., permanence, additional control, self-blame). During its development, we found little evidence of a similar small group/individual, face-to-face approach to improving children's online safety led by social workers, nor evaluations of such a service. As such, this study was designed to answer questions important to further service development, as well as to explore how best to evaluate the service.

**Source** <https://learning.nspcc.org.uk/research-resources/2020/implementation-evaluation-of-inctrl>

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