

**September 2023**

## **Safeguarding Review**

### **Exploring the potential barriers faced by school staff in successful identification and reporting of child abuse.**

#### **Summary**

This review has been carried out at the request of the governing body.

The scope of the review is to consider potential barriers faced by school staff in the successful identification of child abuse.

Child abuse is a global problem that can have grave-long term effects on a child (The World Health Organisation, 2022). Child maltreatment is an umbrella term for different types of abuse and neglect, caused by someone imposing harm or not acting to stop harm (HM Government, 2015; Metropolitan Police, 2019). The United Kingdom has well-established safeguarding protocols (Foster, 2020), but cases of child abuse continue to rise (Robinson, 2020a), and more needs to be done to protect children.

School staff are uniquely placed in the community to identify and report child abuse; however, they often face difficulties recognising and reporting suspicions (Brady, 2018; Bartlett, Mathews and Tippett, 2021).

#### **Literature review**

The contemporary literature on school staff and opinions of the barriers they face when identifying and reporting child maltreatment was explored. The literature was filtered using a systematic approach and a number of papers were selected to be critically analysed. Two main themes emerged:

1. Lack of education and training in protocols,
2. Recognition and reporting of child abuse,

#### **Background and Rational**

The scope of the review is to consider potential barriers faced by school staff in the successful identification of child abuse.

The accurate identification of child abuse by professionals may have a profound impact on safeguarding and preventing harm to a child. If this area of practice is transformed the results could have a long-lasting effect on a child's physical, emotional, and mental well-being, and could even lead to preventing deaths.

Child abuse is a pervasive global problem which can have grave life-long consequences on a child. **(The World Health Organisation (WHO), 2022).**

Child abuse is when a child or young person under the age of 18 is intentionally harmed by an adult or another child – it can be over a period of time but can also be a singular action. **(National Society for the Prevention of Cruelty to Children (NSPCC), 2022).**

Neglect of a child or young person also constitutes abuse and can be defined as failing to provide or secure for a child or young person the basic needs of physical safety and well-being. **(The Children's Society).**

Child maltreatment occurs due to the abuse or neglect of a child by a person inflicting harm or by not acting to prevent harm. **(HM Government, 2015; Metropolitan Police, 2023).**

Child abuse can manifest itself in different forms and can include physical, sexual, mental, emotional and neglect. **(HM Government, 2015; WHO, 2022; Metropolitan Police, 2023).**

Physical abuse can be from hitting, shaking, pinching, poisoning, throwing, scalding, burning, suffocating, or drowning a child and is the deliberate act of hurting a child. **(HM Government, 2015; NICE 2017; Metropolitan Police, 2023).**

Emotional abuse occurs when a child is deliberately told they are unloved, worthless, and inadequate. Furthermore, emotional abuse may not allow a child to express their view, ridicule them, silence them or be a form of bullying. **(HM Government, 2015; NICE, 2017 Metropolitan Police, 2023).**

Sexual abuse may involve physical contact, including assault by penetration or non-penetrative acts such as kissing, the production of sexual images of a child, forcing children to watch or look at sexual images or activities, grooming or encouraging children to behave in sexually inappropriate ways. **(HM Government, 2015; NICE 2017; Metropolitan Police, 2023).**

The definition of neglect is set out in the Children and Young Persons Act 1933. Neglect is where a person, legally liable to maintain a child or young person, has wilfully neglected the child in a manner likely to cause injury to health by failing to provide adequate food, clothing, medical aid or lodging or, if having been unable to provide such items, they fail to take steps to procure them. **(College of Policing, 2023).**

The NSPCC, a leading UK charity in preventing and protecting children from child abuse, estimates that in the UK half a million children a year suffer a form of abuse or neglect (**NSPCC 2022**), with the highest proportion of cases happening in babies and toddlers. (**NICE, 2019**). However, the true number of children maltreated is unknown. (**NICE, 2019**).

The **NSPCC (2023)** identifies that the signs of child abuse are not always apparent due to a range of issues such as children not wanting to tell what happened to them or not realising it is not normal. **Blaber and Harris (2014)** identify abuse is not always visible and obvious to identify. Indications of children being abused can vary from child to child, with the most vulnerable children being harder to identify. (**HM Government, 2015**).

The Children Act 2004, was a development and extension of the same act from 1989. It was introduced following an inquiry into the death of Victoria Climbié. Eight-year-old Victoria Climbié was tortured and murdered by her great-aunt and her boyfriend in 2000. A public inquiry led by Lord Lamming was held, and major changes in the way that child protection policies were implemented in the UK were instigated. **The Victoria Climbié Inquiry: Summary Report of an Inquiry (2003)**

The main way in which the 2004 Children Act differs from the Children Act 1989 is its focus on ensuring that all people (both individuals and organisations) who are working with children have a responsibility for safeguarding children and promoting their welfare. A multi-agency approach was implemented in an attempt to prevent and stop child maltreatment. (**WHO, 2022**).

Professionals who encounter children, such as school staff, are obligated to safeguard children at potential risk of abuse and promote child welfare. (**HCPC; JRCALC; Foster, 2020; NSPCC 2022**). They have a statutory duty to report concern, whilst other agencies such as the police have the statutory duty to investigate accusations of child maltreatment. (**JRCALC**).

School staff are uniquely positioned to identify children at risk of abuse and neglect due to encountering children in their natural environments, they have a vital role in child protection. (**Robinson, 2020**).

In 2021, two children, Arthur Labinjo-Hughes and Star Hobson were victims of abuse and died. In May 2022, the Child Safeguarding Practice Review Panel published a review. It concluded that their deaths reflect 'fault lines' in child protection, and, *'the public services and systems designed to protect them were not able to do so despite the intentions of recent reform, multi-agency safeguarding arrangements are not yet fit for purpose everywhere. This results too often in blurred strategic and operational responsibilities.'* (**The Child Safeguarding Practice Review Panel, 2022**).

Despite legislation to protect children, abuse may only be recognised when it is too late due to barriers hindering recognising of child abuse. Many SCR's child abuse

inquiries including Victoria Climbié and Peter Connelly have shown that these children were being monitored by a range of professionals but a failure to recognise and act resulted in death.

Safeguarding is everyone's responsibility and a statutory duty under the Children Act. School staff must be aware of the signs, symptoms and indicators of abuse and neglect that constitute harm. This applies to staff who have direct contact, either face-to-face or on the telephone. If the abuse is not reported, the victim may be at greater risk. They may also feel discouraged from disclosing again, as they may feel they were not believed. This may put other people at risk. **(JRCALC)**.

Research identifies barriers professionals may encounter that hinder child abuse identification. **WHO (2022)** recognises that studies of child maltreatment are complex and challenging and shows that more needs to be done to identify children experiencing abuse. A literature review by the **Department of Education (2014)** identified potential obstacles in reporting child abuse that social workers and education professionals may face. Knowledge, resource constraints and professional confidence where the main reasons child abuse was not reported.

Despite changes in policies and procedures, and a statutory requirement on professional's report, instances of child abuse and neglect continue to increase in the United Kingdom (UK) despite the government's efforts and more needs to be done. **(Robinson, 2020)**. SCRs have identified that there has been a blurring of lines where professionals sometimes consider another agency to be responsible for safeguarding children. Other barriers include not knowing what constitutes child abuse, not knowing the signs and not understanding how signs vary from child to child.

To act on child abuse, school professionals must be able to identify and report child abuse and neglect. There are no robust standard screening tools in the school settings to help identify child maltreatment, however, robust education of staff at all levels is a positive development.

## Literature Review

### Introduction

Evidence-based practice is fundamental to professionals offering the best care to children and improve practice (HCPC, 2018a). Although a literature review is less robust than a systematic review, which is more rigorous (Robertson and Lowe, 2015), a literature review can add to the evidence base by detecting gaps in evidence which can update guidelines and clinical practice (Moule, 2021).

A literature review is a secondary source of evidence as it collaborates primary evidence together using a systematic format (Moule, 2021). The purpose of a literature review is to appraise existing evidence on a subject critically and requires the gathering of information to be able to contextualise the research data to investigate a hypothesis (Smith and Noble, 2015; Winchester and Salji, 2016).

This literature review will attempt to be conducted systematically and will take the form of a narrative review (Aveyard, 2018; Moule, 2021). The literature review will examine the school staff perspectives on factors that affect child protection identification and reporting. The studies selected will be critically analysed and appraised showing the strengths and weaknesses (Aveyard, 2018; Moule, 2021). After this, the papers will be synthesised identifying main themes (Aveyard, 2018; Moule, 2021). Additionally, the review will also offer suggestions for practice and draw conclusions about the topic (Moule, 2021).

### **Research question for literature review**

The question that has been used to guide the literature search is:  
Exploring the barriers faced by school staff in the successful identification and reporting of child maltreatment.

### **Search strategy**

The primary purpose of a literature review is to undertake a systematic approach to discover and find published literature to answer the specified research question (Aveyard, 2019).

Electronic sources are valuable tools, such as online databases and eBooks, in searching literature (Nixon, 2013), because they are accessible, up to date, have the ability to filter for relevance and have large quantities available (Moule, 2021; Coughlan and Cronin, 2021).

Winchester and Salji (2016) suggest that having a selection of articles to evaluate avoids the potential bias of 'cherry-picking' in which papers are only selected because they support the hypothesis. After identifying and evaluating suitable databases for the literature search, evidence suggests that a focused search method is essential to augment the quality of the literature review (Winchester and Salji, 2016).

The review question can be broken into concepts by using frameworks (Atkinson and Cipriani, 2018). The most widely used framework is PICO (population, intervention, comparator, and outcome) (O'Driscoll, 2022). Although Atkinson and Cipriani (2018) recognise that the PICO framework is not always suitable in identifying key elements, other frameworks exist that may be more appropriate. While considering the qualitative nature of this research question, the study search strategy was structured using the SPIDER tool (Sample, Phenomenon of Interest, Design,

Evaluation, Research type) to refine the research question scope (Cooke, Smith and Booth, 2012).

Evidence suggests that the Spider improves qualitative evidence synthesis (Cooke, Smith and Booth, 2012; Atkinson and Cipriani, 2018). Additionally, Davies (2019) suggests that implementing the Spider tool enables a well-defined search criterion and allows the readers to understand the author’s thought process regarding answering the research question, as shown in Table 2.

**Table 1: Spider tool (Cooke et al., 2012)**

<b>Spider criteria</b>	<b>Inclusion Criteria</b>
Sample	Professionals and practitioners.
Phenomenon of interest	Child maltreatment; barriers. identification and reporting.
Design	Quantitative, qualitative, and mixed methods.
Evaluation	Thought, perspective, knowledge, confidence, experiences; views and reflections.
Research Type	Semi-structured interviews, in-depth interviews; focus groups; surveys and questionnaires.

Following the development of the Spider criteria, inclusion and exclusion criteria were applied and developed prior to searching, as seen in Table 2.

The majority of the inclusion criteria were implemented by having the advanced search option on the databases. Having explicitly clear inclusion and exclusion criteria is essential because it defines clear boundaries of what is or is not relevant to the literature review (Williamson and Whittaker, 2020). Aveyard (2014) states that inclusion and exclusion criteria are applied for a high-quality, focussed literature review. Likewise,

Moule (2021) implores researchers to apply a detailed inclusion and exclusion criteria to reduce the literature to produce relevant resources. Therefore, evidence suggests that having clear criteria improves the validation and relevance of the review.

**Table 2: Inclusion and exclusion criteria of the literature review search**

**(Moule, 2018)**

<b>Characteristic</b>	<b>Inclusion criteria</b>	<b>Exclusion criteria</b>	<b>Justification</b>
Population	Professionals who work with children under the age of 18 years of age.	Staff who have no exposure to children.	To ensure the target population to answer the research question is relevant as many professionals do not encounter children.
Peer reviewed	Peer-reviewed journals.	Journals that have not been peer-reviewed.	To increase the validity and reliability of the study.
Language	English	Non-English	To ensure complete interpretation of the journal is understood, and no errors occur in translation.
Country of origin	Research from the UK and countries with cultural and safeguarding similarities.	Research from non-Western countries or countries that lack safeguarding protocols or cultural differences to the UK.	To avoid no safeguarding protocols and cultural differences which are not relevant to UK paramedic practice scope.
Methodology	Primary research	Secondary research such as systematic reviews, review documents and literature reviews	To ensure the articles were first-hand empirical knowledge and original research.
Publication date	Studies published after 2012	Studies published before 2012	To narrow the search and to ensure the research is contemporary and appropriate.

Duplicates	No duplicates	Duplicate discarded	To avoid data repetition.
Full text available	Full text available	Non-full text such as abstracts access only	Allows the ability extensively to analyse the whole article.
Research question	Research focusing on the main aspect of the research question from the perspective of health care professionals.	Research that does not have relevance to the research question and does not involve health care professionals.	To ensure the research question can be answered and not divert from the literature review.

Additionally, Boolean operators were employed to find the most relevant studies by entering keywords into the electronic search database in the advanced search option and looking for the words in the title and abstract (Coughlan and Cronin, 2021).

Boolean operators make the searches more specific by allowing the researcher to combine multiple keywords related to the research question (Greetham, 2021). However, NICE (2022) recommends keeping the search structure simple due to the potential of missing relevant studies that could be fundamental to the research. The Boolean operators used in this literature search were AND which connects keywords that lay on either side of the 'and' and OR which looks for alternative keywords with similar meanings (Onwuegbuzie and Frels, 2016; Greetham, 2021).

Table 3 shows the keywords used in the Boolean operators.

**Table 3: Search terms used.**

<b>Search terms used in database literature search</b>
Child OR Infant OR Baby OR Children. AND Abuse OR Safeguard OR Safeguarding OR Neglect OR Maltreatment OR Emotional OR Physical. AND Thought OR Perspective OR Knowledge OR Confidence OR Outlook OR View OR Viewpoint OR Point of view OR Standpoint OR Position OR Barrier OR Difficulty.

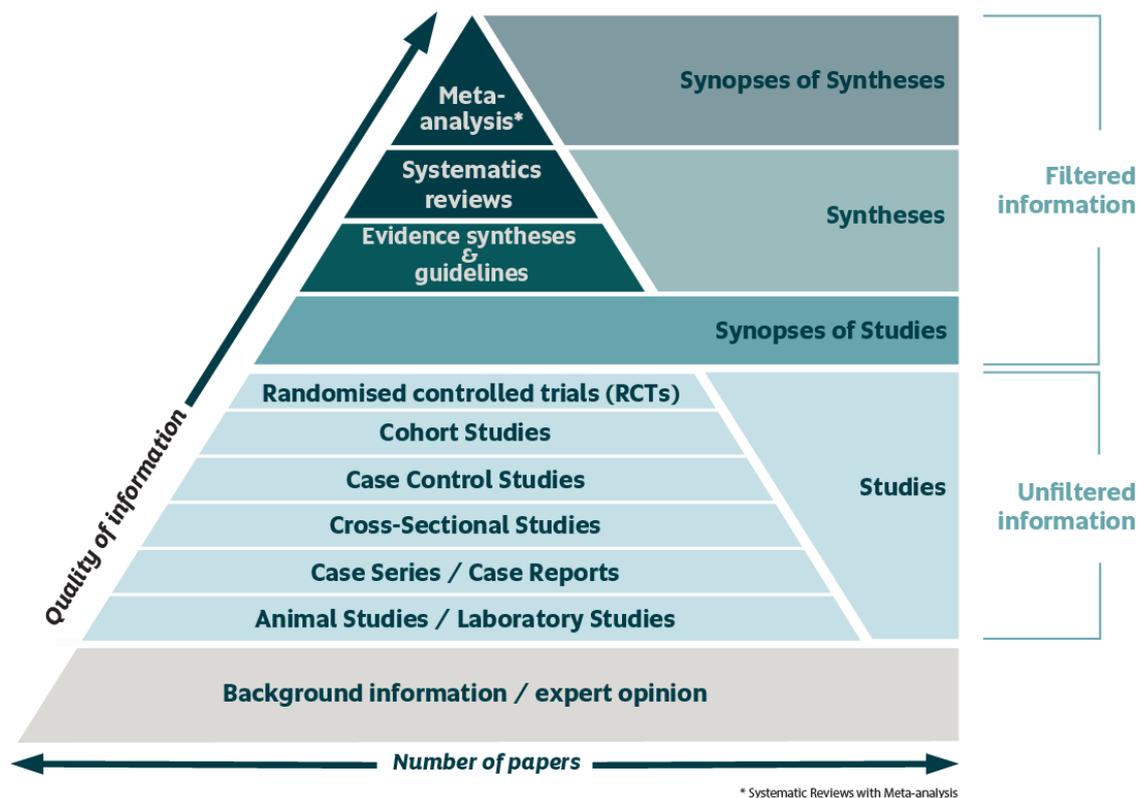
Five papers were selected via snowballing due to their relevance to the research question by finding sources through reference lists (Greetham, 2021).

Vassar, Atakpo and Kash (2016) argue that manual inspection of reference lists can potentially create bias. On the other hand, Reeves et al. (2019) suggest snowballing can be helpful in identifying studies which can be relevant to the research question, which otherwise could have been missed. These papers were placed with the articles found to be scrutinised.

The author reviewed and examined each article's titles and abstract against the inclusion and exclusion criteria. The Prism flow chart documents the articles that were excluded and the selection process of the articles that were selected. After evaluation and subsequent removal of irrelevancies and duplicates, articles were selected for critical appraisal.

To assess the strength of the literature, the Hierarchy of evidence pyramid (Figure 1) was applied (Moule, 2021). The highest primary research is randomised-controlled trials (RCTs), which usually entail a scientific approach to producing quantitative data. RCTs are considered high-quality research with a low risk of bias (Moule, 2021). Applying the eight papers selected none were RCT but the papers identified as **Cross-Sectional Studies** which, on the hierarchy of evidence, is lower of quality and has an increased risk of bias (Tannenbaum and Sebastian, 2021). However, McEwan (2023) recognises that a high level of evidence may not be available in the area of research and therefore evidence lower on the pyramid should be used to build the evidence base.

**Figure 1 (Delaney, 2023)**



## 2.4 Critical Appraisal and Synthesis

The papers were examined using the Moule (2021) Critical Appraisal Framework, the framework being applied to the study by Tiyyagura *et al.* (2016). The framework allows for an in-depth systematic process to appraise research (Moule, 2021).

The origin of the selected papers was from Western societies with similar cultural and professional scopes including two studies from the Netherlands, four American, one UK and one Australian. Due to limited research on teaching personnel other professionals were included that had similarities in profession and/or interactions. A combination of study methodologies was used in the papers ranging from questionnaires, semi-structured interviews, focus groups and one mixed-method study. After using the framework, two themes emerged in identifying child protection matters, lack of education and training protocols and recognition of child maltreatment.

### **Theme 1 Lack of education and training in protocols.**

A significant recurring barrier to identifying and reporting child protection in most papers was a lack of education and training in different roles. This theme is most predominant in the studies by Louwers *et al.* (2012), Herendeen, Anson and Smith (2014) and Lynne *et al.* (2015) which will be discussed further below.

A quantitative study conducted in America by Herendeen, Anson and Smith (2014) was designed to explore experiences in recognizing and managing child abuse. The study used a series of closed questions using a 5-point Likert scale gathering. However, a limitation of closed questions is that they only produce ordinal data and do not allow in-depth understanding (Bishop and Herron, 2015). Herendeen, Anson and Smith (2014) attempted to address this by using vignettes of child abuse cases. Moule (2021) states that vignettes allow for deeper insight into the participant's perspective, knowledge, and opinion about a situation. Data was downloaded from the hosting site and statistically analysed.

The study by Lynne *et al.* (2015) also undertook a quantitative study and wanted to explain why educational personnel were underreporting suspected cases of child abuse. A web-based survey was used for data gathering with closed and open answers (Lynne *et al.*, 2015). The survey was designed by a committee of various childcare experts in multiple roles in North Carolina and 444 participants completed the survey (Lynne *et al.*, 2015).

Quantitative data can be applied to test existing theories to prove or disprove them (Blaber, 2018). Herendeen, Anson and Smith's (2014) and Lynne *et al.* (2015) research designs involved online data collection in the form of numerical data that can be counted. Online surveys are easy, convenient, and cost-effective for obtaining data (Nayak and Narayan, 2019). Moule (2021) suggests that quantitative

data enhances the validity and reliability of the study due to being highly structured and tightly managed. However, a limitation of online data collection raised by Andrade (2020) is that participants may influence the result due to their own biases. Therefore, researchers need to be aware of this drawback with the methodology.

Unlike Lynne *et al.* (2015) and Herendeen, Anson and Smith (2014) Louwers *et al.* However, qualitative research is often criticised due to lacking rigour because of the small sample size and higher risk of bias within the study which questions the validity and creditability (Noble and Smith, 2015). However, Denfold *et al.* (2018) defend this research methodology as it can provide new research on a phenomenon and more profound insight from individual perspectives and understandings.

Louwers *et al.* (2012), Herendeen, Anson and Smith (2014) and Lynne *et al.* (2015) used selected sampling in some form in their studies. Shorten and Moorley (2014) state that suitable sample selection and appropriate sample size strengthens a study. Louwers *et al.* (2012) sample was selected because of their direct involvement in detecting CM, although the age, years of experience and gender were not disclosed. Therefore, the sample may not have been fairly represented and less likely to be generalisable (McLeod, 2019). Herendeen, Anson and Smith (2014) had a larger sample size though the response rate was low. To increase the response rates the researchers could have adopted a mixed-mode approach to notify or contact potential participants (Dykema *et al.*, 2012). Furthermore, although Lynne *et al.* (2015) sample correlates with the target sample in the research question, they state that it was not generalisable to other states. Another limitation was that the experience levels were not fairly represented due to 60% having ten years plus. Therefore, the three studies' generalisability to the research question may not be relevant. However, Coughlan and Cronin (2021) recognise that probability sampling is hard to achieve, and researchers should select a sample representative of a population.

Although the studies were conducted differently and had various strengths and limitations, they all had similar research questions by wanting to address issues in child maltreatment identification and barriers to reporting and all reached similar themes and conclusions. Although the generalisability, is questionable they all identified a common finding throughout the papers due to a lack of familiarity with mandatory reporting and policy (Herendeen, Anson and Smith, 2014; Louwers *et al.*, 2012; Lynne *et al.*, 2015). Most HCP working with children and their families are required by law to report any reasonable suspicion of CM to government authorities (Pietrantonio *et al.*, 2013). Herendeen, Anson and Smith (2014) found that one-fifth of their participants did not feel they received adequate training in reporting cases. Similarly, Lynne *et al.* (2015) data revealed that 40% were unsure of written mandatory policy regarding suspicion of CM. Although Louwers *et al.* (2012) study does not mention mandatory reporting, all hospitals involved in the study were legally required to fulfil the criteria of the child abuse framework of the Dutch Health Care Inspectorate. The data showed that not all participants knew it or where to find the protocol (Louwers *et al.*, 2012). Thus, this implies that the health care worker's understanding of the protocols creates a barrier if CM is suspected due to

the professionals not knowing what to do with the information and thus not reporting it.

Although not all the studies involved the AC's perspective, a lack of education and training seemed to affect all HCP and more needs to be done to minimise the barrier. Herendeen, Anson and Smith, 2014; Louwers *et al.*, 2012; Lynne *et al.*, 2015 all suggested similar recommendations for overcoming the barrier by strengthening education and training.

## **Theme 2 Child Maltreatment Recognition.**

Another major recurring barrier to identifying and reporting was due to finding it difficult to recognise CM. This theme is prevalent in the studies by Tiyyagura *et al.* (2015), Stolper *et al.* (2020) and Brady (2018) and will be examined beneath.

The study by Tiyyagura *et al.* (2015) was undertaken in Connecticut and sought to gain an understanding of ED staff experiences with the evaluation, recognition, and reporting of CM and detect barriers and facilitators to recognising and reporting. Tiyyagura *et al.* (2015) recruited 29 participants from various professions and levels of seniority within three ED, they were purposively selected as they had recently treated and evaluated children who had been maltreated. In addition, Tiyyagura *et al.* (2015), utilised a sampling technique by recruiting further participants via snowballing. Etikan and Bala (2017) state that a snowball sample can be a useful method for selecting a hidden sample group. On the contrary, Moule (2021) suggests that this could be a limitation as the sample is not selected independently and biases could be introduced. Tiyyagura *et al.* (2015) used semi-structured interviews and consisted of one open end question and prompts were used to gain data. The study interview guide went through three iterations due to key questions needing clarity (Tiyyagura *et al.*, 2015). Two experienced investigators conducted the face-to-face interviews which were recorded and transcribed verbatim (Tiyyagura *et al.*, 2015). The data were analysed by four members of the research team and analysis software was used (Tiyyagura *et al.*, 2015). To enhance the trustworthiness of the findings multiple coders from varied backgrounds analysed the data and concluded when saturation had emerged (Tiyyagura *et al.*, 2015).

Stolper *et al.* (2020) also undertook a qualitative study in the Netherlands, although they wanted to investigate how the suspicion of child abuse appears in GPs' diagnostic reasoning, how they act upon suspicions and which barriers they encounter. Even though, the study is directed at GPs who are based in primary care and have prior knowledge such as medical history, socio-economic situation and family history (Stolper *et al.*, 2020), they too, like school staff, are usually the first contact with children and their families (Stolper *et al.*, 2020). Stolper *et al.* (2020) enrolled 26 GPs in the study, with varying levels of experience to partake in four focus groups to discuss the topic of vulnerable children and did not disclose the exact purpose of the study. Stolper *et al.* (2020) study was led by experienced moderators using an interview guide to address the research questions, and all

sessions were recorded and transcribed. Stolper *et al.* (2020) achieved data saturation after the four focus groups.

Interviews are a common approach taken in qualitative research because of the richness of information that can be acquired from speaking with people about their experiences, opinions, and beliefs (McIntosh and Morse, 2015; National Health Service (NHS), 2017). However, focus groups have become popular in research to understand school staff and other professionals perspectives. Tausch and Menold, (2016) suggest that focus groups allow for deeper insight into a subject compared to individual interviews since they help participants recognise and articulate their perspectives that otherwise would not formulate in individual interviews. Then again, a limitation of them is that they take more time and effort to organise and pose more logistical issues than individual interviews (Tausch and Menold, 2016).

In these two studies by Tiyyagura *et al.* (2015) and Stolper *et al.* (2020) the interviewers were able to manage the flow of the conversation by asking pre-prepared questions, while at the same time enabling open-ended responses to reach the point of data saturation (Faulkner and Trotter, 2017). Data saturation is where no new information is discovered, and further data collection would generate similar findings and confirm emerging themes and conclusions (Faulkner and Trotter, 2017). If the studies failed to reach data saturation the quality of the research could be impacted and content validity questioned (Fusch and Ness, 2015). However, the findings of qualitative research are not quantitative and cannot be generalised to the community being researched, hence this type of research carries with it certain inherent limitations. (Moule *et al.* 2021). To produce relevant and valuable results, qualitative research must be thorough and meticulous. Thus, qualitative researchers must record, systematise, and disclose their data analysis methods in enough detail for readers to assess their integrity (Nowell *et al.*, 2017). Tiyyagura *et al.* (2015) and Stolper *et al.* (2020) disclosed their analysis, although more rigour could have been applied to confirm the findings in order to strengthen the studies.

In contrast, Brady (2018) undertook a mixed methods approach to examine professionals' confidence in identifying child sexual abuse in the UK. A mixed methods approach can balance the strengths and weaknesses of qualitative and quantitative studies, strengthening a study's validity (Shorten and Smith, 2017). Firstly, Brady (2018) produced online self-completed questionnaires using Likert attitudinal scale in the quantitative data collection which were directed at a range of professionals working with children. Brady (2018) rationalizes the use of attitudinal scales by stating that they are widely used in social science and public health research to collect data. Likert-type, responses aim to measure people's opinions on various problems (Bishop and Herron, 2015). The questionnaire had a potential sample of 1679, the final response rate was 276 with 152 males and 124 females in various roles (Brady, 2018). The questionnaire was analysed descriptively and scrutinised using computer software (Brady, 2018). The questionnaire results were used to inform and design the seven semi-structured focus groups with a sample of 25 professionals from different regions in the UK, increasing the generalisability of the study (Brady, 2018). Brady (2018) undertook thematic content analysis using

the Braun and Clarke framework to guide and affirm the themes using software analysis to reduce bias. Thus, increasing the strength and validity of the research (Brady, 2018).

Despite the fact that each of the three studies used a unique methodology, they still uncovered quite similar themes. All three studies identified barriers in failure to recognise CM as a key theme. Tiyyagura *et al.* (2015) participants provided scenarios in which child abuse and neglect may be missed by discussing their personal failure to recognise the signs and symptoms of physical abuse when presented with traumatic injuries or burns and cases of possible neglect. Several participants found neglect more complex as opposed to physical abuse due to it not being clear-cut and further probing would be needed (Tiyyagura *et al.*, 2015). Likewise, Stolper *et al.* (2020) focus groups discussed n47 cases of child abuse overall. The cases of child abuse that were detected and reported were recognised due to obvious signs such as sexual and physical abuse, and triggers such as behavioural changes, malnutrition, and bruises raised suspicion (Stolper *et al.*, 2020). Some professionals also relied on their gut feeling that something was wrong giving them cause to probe further (Stolper *et al.*, 2020). However, the participants spoke about 9 missed cases of due to children not talking about their experiences or having no signs, whilst also suggesting the identification of emotional abuse was challenging as a frame of reference is less clear due to judgement depending on a person's values and cultural views (Stolper *et al.*, 2020). Although Brady's (2018) study focused on sexual abuse, the study found similar barriers. The results from the questionnaire showed that many school staff had low levels of confidence in identifying all areas of child sexual abuse (Brady, 2018). The focus groups discussed the difficulties in identifying hidden abuse, for instance, female genital mutilation (FGM) as it is not visible and having to rely on nonverbal and nonphysical signs of abuse (Brady, 2018). However, the participant's confidence in identification to physical and neglect was higher due to being more identifiable compared to sexual abuse (Brady, 2018).

All of the studies provided recommendations for reducing the barrier's impact. Stolper *et al.* (2020) discussed a lack of a gold standard for diagnosing CM which hindered recognition and that the cases shared in the study were a learning experience and suggested to use of small group discussions as a learning technique. Whilst Tiyyagura *et al.* (2015) suggested that education focusing on signs and symptoms may improve recognition by using visual prompts and case base education. While Brady (2018) clarifies that more training is required, and further research is needed to understand which training method would be most beneficial and explore the phenomenon further.

## **Ethical consideration**

Throughout the course of a research study, it is imperative that ethical standards and fundamental human rights be upheld in order to protect the participants, clients, and patients involved in the study (Moule, 2021). Moule (2021) accepts it is challenging for researchers to maintain an equilibrium between rigour and respect,

but it is essential that the study itself adhere to ethical standards by incorporating and adhering to the principles of justice, beneficence, non-maleficence and autonomy, which are fundamental principles to best practise (Beauchamp and Childless, 2012). Louwers *et al.* (2012), Brady (2018) and Bartlett, Mathews and Tippett (2021), all had ethical approval. Lynne *et al.* (2015) and Stolper *et al.* (2020) studies do not state if ethical approval was sought or if approved.

All the studies kept the anonymity of the participants as no personal information such as names or addresses was disclosed throughout the papers (Moule, 2021). Any information provided by participants should be treated in confidence and only with their permission be disclosed (Moule, 2021).

A fundamental ethical principle in research is informed consent (Eaton, 2019). Six studies either gained informed consent verbally or prior to undertaking the study. Herendeen, Anson and Smith (2014), Lynne *et al.* (2015) and Stolper *et al.* (2020) all fail to state if informed consent was gained or how. (Moule, 2021) states that participants must give written consent to participate in the study and have the right to withdraw at any time while it is ongoing. Additionally, participants should be given significant information in an understandable form to help them decide about whether or not they want to participate and also be given the respect and autonomy to decide (Moule, 2021; Eaton, 2019).

The literature review examined a number of primary research articles regarding barriers to child abuse identification and reporting faced by school staff. A combination of methodology approaches was employed involving qualitative, quantitative, and mixed-method research to gain information on the issue. The participants all had similar school backgrounds with similar ethos. Two key themes emerged: lack of education and training in protocols and recognition of child abuse. All papers made recommendations on how to address the barriers. The final consideration discussed was the ethical implications of the studies.

### **Existing practice guidelines**

Safeguarding is everyone's responsibility, and school staff have a statutory duty to report. In the UK various pieces of legislation are constructed to protect children and young people. However, there is no single overarching legislation, and child protection is encompassed within Acts of Parliament (Blaber, 2019). The Children Act 2004, places a duty on a range of organisations, so they consider safeguarding and endorse the well-being of children (Foster, 2020). Another is The Serious Crime Act 2015 which has a section that is specifically implemented to protect children, one of these is the mandatory reporting duty of school staff of known cases of FGM in children (Home Office, 2015).

There is existing guidance to support school staff and other organisations. The UK government comprised a statutory guidance in Keeping Children Safe in Education

updated September 2023 and 2015 titled Working Together to Safeguard Children with the purpose of illustrating how organisations and individuals should work together to protect children (HM government, 2018). The guidelines help ensure unity in safeguarding practices and are also an important part of risk management covering an array of issues. The guidelines incorporate legislation, common signs and symptoms of possible child abuse and the environmental factors to consider and vulnerable groups more susceptible to Child abuse for example, children with disabilities (AACE and JRCALC, 2022).

In relation to the research question the stakeholders involved are school staff. All papers reviewed engaged the participation of school staff and were designed to retrieve information from their perspective. Two studies discussed the research design with involvement from others outside the research. Herendeen, Anson and Smith (2014) sought permission to adapt the survey in the identification and reporting of children suspected of child sexual and physical abuse. Though Herendeen, Anson and Smith (2014) had the largest stakeholder participation, with a sample size of 603 responses analysed none of them were directly involved with the study design. Lynne *et al.* (2015) survey was developed by an array of professionals with connections in child safeguarding. Although these studies exhibited power sharing to some extent, they did not involve the stakeholders in the outline, design or analysis of the study and maintained control of the research.

The researcher could have considered the child's involvement in the study. However, it is recognised that research undertaking in child abuse is problematic and difficult (WHO, 2022), with victims being vulnerable if subject to maltreatment (NSPCC, 2016). Mitchell *et al.* (2018) suggests the importance of incorporating PPI with children in research and the need to implement a systematic approach to recognising and addressing ethical implications to minimise the risk of harm to children (Mitchell *et al.*, 2018). Furthermore, the researchers could have included the school staff participation but none of the studies fully involved a PPI and a different perspective on the research could have been acquired.

## **Recommendations for practice and research**

A consensus among all studies recommended strengthening training and education around child maltreatment such as the recognition of symptoms and signs, and further education around policies and reporting. Although the signs and symptoms of maltreatment are well documented within the literature as seen in Brady's (2018) study, paramedics still lack an understanding of the probable signs and symptoms and had low levels of confidence in detecting maltreatment.

Louwers *et al.*, (2012) and Herendeen, Anson and Smith (2014) suggest this could be conducted in the form of CPD online which is easily accessible to undertake. CPD allows for continuous learning and development which allows school to keep their skills and knowledge up to date and practise safely and efficiently (Blaber, 2019). Nixon (2013) recommends using CPD which is engaging to help embed the knowledge. However, there is no statutory mandated

Tiyyagura *et al.* (2015) and Lynne *et al.* (2015) suggest a national screening tool for suspected Child abuse to help school staff. Guidelines exist to aid school staff such as NICE (2017) which provides professionals with features connected with child abuse. However, Lynne *et al.* (2015) recognise that one is not available and that many are in circulation and there is no unity as yet.

Another idea on how to deliver further education is suggested by Tiyyagura *et al.* (2015). Tiyyagura *et al.* (2016), Stolper *et al.* (2020) and Bartlett, Mathews and Tippett (2021) was to have the involvement of children protection services. Bartlett, Mathews and Tippett (2021) recommend incorporating child protection services to help in the development of training packages for school staff to help decisions when encountering child abuse. The child protection in the UK is provided by police and social services. Social workers for children and families work with multi-disciplinary agencies to act in the best interest of children and to support families (Frontline, 2023). Their primary role is to help, support and provide a high-quality evaluation of family situations, whilst also intervening in crisis by managing risk and protecting children from harm (Frontline, 2023). Therefore, due to their constant involvement with children and acting in their best interest, they could provide contextual knowledge to training and education. Tiyyagura *et al.* (2015), Tiyyagura *et al.* (2016), and Stolper *et al.* (2020) proposed that case reviews of child abuse could be delivered by child protection services to school staff. . This could help to further the knowledge of the whole process surrounding child abuse of why and how it happens, how to raise suspicions, the investigations and intervention process. The NSPCC (2023) provide case-based learning and believes it is a vital tool which can help address challenges and themes to help keep children safe from child abuse. Case base learning provides cases, problems or investigations which are used to stimulate and reinforce the attainment of knowledge, aids, and attitudes towards a subject (Williams, 2005).

Although Brady (2018) echoes the other studies that additional training is necessary, it suggests additional research is required to identify which training approach would be of greatest benefit to school staff and to investigate the phenomena of child abuse in greater depth.

### **3:4 Conclusion**

The literature review has drawn attention to the barriers in recognising and reporting child abuse, due to the lack of safeguarding training and education which was seen in all papers reviewed . All the papers made recommendations for overcoming the barriers from CPD that is engaging, a national screening tool, child protection services adding to the training programme and case-based studies delivered by child protection services. Although Brady (2018) suggests, further research into the phenomenon of child abuse in school settings is needed along with research into the most beneficial training and educational delivery. This literature review could provide a foundation to explore further.

School staff are responsible for safeguarding children along with everyone else but have a unique position. Children are vulnerable, and in the cases of abuse they need an advocacy. Even though abuse can prove hard to identify if any concerns are indicated they should refer. Further research with UK school staff is required to build on the evidence to make change and gain a deeper understanding within the profession of the issues surrounding child abuse.

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