

# Living on a railway line

## Executive Summary

Some children in the world are *physically* living on a railway line; others are *metaphorically* living on that same railway line at significant risk of harm from many different sources.



**Turning the tide of child abuse and exploitation in the UK and overseas:  
international lessons and evidence-based recommendations**

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# Executive Summary



***“The world is in greater peril from those who tolerate or encourage evil than from those who actually commit it”***

Albert Einstein, 1879-1955

## About this chapter

**This publication is not intended to be read cover-to-cover in one go as a book.**

Instead, the report is grouped into different themes covering key areas of child protection work and is presented in chapters so professionals and community members interested in exploring different aspects of this challenging work can see the evidence base behind the conclusions and recommendations and can appreciate the international contribution to their creation.

This chapter summarises the main findings of this report and makes ten key recommendations that are applicable to the United Kingdom of Great Britain and Northern Ireland (UK).

This report makes recommendations for the UK and the international community. Whilst the nomenclature may differ between England, Northern Ireland, Scotland and Wales the intention behind the UK recommendations is that they are just that – recommendations to be applied on a UK basis. The intention behind the recommendations should be preserved and translated into whatever national or devolved terminology is necessary to implement the recommendations across all four nations of the UK.

The full report can be downloaded from the Winston Churchill Memorial Trust website (<http://www.wcmt.org.uk>)

## 1.0 Executive Summary

- 1.0.1** Some children in the world are *physically* living on a railway line; others are *metaphorically* living on that same railway line at significant risk of harm from many different sources.
- 1.0.2** *Living on a Railway Line* makes key recommendations to improve the safeguarding of vulnerable children in the United Kingdom and beyond. In light of recent events in Northern England, including the child sexual exploitation cases in Rochdale<sup>i</sup> and Rotherham<sup>ii</sup>, this report is crucial to professionals working with children and families as well as to policy and law makers at a national level in the UK.
- 1.0.3** Child protective systems in the UK are *partially* broken. Not *completely* broken but they are certainly not functioning adequately in all cases. If they were then there would not be serious case review after serious case review highlighting inter-agency communication failures and failures to act upon information received which suggests that a child might be at risk of significant harm, as causative or associative factors leading to an adverse outcome for a child. That adverse outcome is, sadly, sometimes the death of a child who could and should have been protected.
- 1.0.4** Professor Alexis Jay's independent inquiry into Child Sexual Exploitation (CSE), published at the end of August 2014, estimated that approximately 1400 children were sexually exploited in Rotherham, UK between 1997 and 2013<sup>ii</sup>. One thousand four hundred children in a town whose population is only around 250 000<sup>iii</sup>.
- 1.0.5** In more than a third of Rotherham cases, children affected by sexual exploitation were previously known to services because of child protection and neglect. The abuse that these victims suffered was horrendous. Girls as young as 11 years old were raped by multiple perpetrators. Children were trafficked to other towns and cities in the North of England, abducted, beaten, and intimidated.

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<sup>i</sup> <http://www.rbscb.org/news.aspx?ID=23>

<sup>ii</sup> <http://goo.gl/cZGDN9>

<sup>iii</sup> <http://www.ons.gov.uk/ons/guide-method/census/census-2001/index.html>

- 1.0.6** Some children were doused in petrol and threatened with being set alight, threatened with guns, made to witness brutally violent rapes and threatened they would be next if they told anyone.
- 1.0.7** Professor Jay's inquiry concluded that over the first twelve years covered (1997 – 2009) the collective failures of political and officer leadership were blatant and that from the beginning there was growing evidence that child sexual exploitation was a serious problem in Rotherham. Within social care, the scale and seriousness of the problem was under-played by senior managers and at an operational level the police gave no priority to CSE, regarding many child victims with contempt and failing to act on their abuse as a crime.
- 1.0.8** Although there have been improvements over the last four years in Rotherham this does not detract from the horrendous abuse that over one thousand children and young people suffered over the course of more than a decade, without adequate inter-agency intervention and without effective investigation and support.
- 1.0.9** *Living on a Railway Line* has not been produced in response to the Rotherham report – the work underpinning this publication has been going on for over a year, well before publication of the Rotherham report. However, the timing of the release of information surrounding the appalling events in Rotherham over many years is such that there are recommendations contained within *Living on a Railway Line* that could, if implemented efficiently and correctly, go some way to reducing the likelihood of another “Rotherham” occurring in the future.
- 1.0.10** The fact that there continues to be the same lessons that still require learning in different regions of the country and in independent cases involving child protection, suggests that the system in place at the current time needs a further review and that a different approach is needed – potentially a more radical approach than has been tried before – to properly protect the most vulnerable members of our society.
- 1.0.11** As well as looking at good practice examples from the UK there is a real opportunity, provided people are willing to keep an open mind and to try new things, to see how experiences gained abroad in different settings could be modified or applied to the UK systems and processes and how they could be the different approach that is most definitely needed.

**1.0.12** When focussing on child protection issues it is right that special focus is given to those children who cannot speak up, or are prevented from speaking up, for themselves. However, the effects of child maltreatment on older children cannot be underestimated. It is crucial that professionals recognise the specific vulnerabilities that exist within the adolescent age group and that they are empowered to influence the community in which they live in a positive way, with the community advocating on their behalf and supporting them.

**1.0.13** The importance of protecting children who have to give evidence in Court cannot be underestimated and a recommendation is made to ensure that each region has access to a remote site where children can give evidence from outwith the Court building, without any possibility of meeting the alleged perpetrator. Mandatory training for all legal professionals involved in child abuse cases is vital.

**1.0.14** Throughout the whole report there are recommendations for further research surrounding child protection in the UK, including ascertaining the views of society and child protection professionals, as well as the continued development of international networks to respond to the global challenge of children's advocacy on a much larger scale.

**1.0.15** There are five major themes that are discussed throughout this report:

- **Mandatory reporting of child abuse occurring within certain organisations**
- **Better training to recognise and respond to cases of potential child sexual exploitation**
- **It takes a community to protect a child: protecting children is everyone's business including yours!**
- **Advocating for children**
- **Prohibition of physical punishment of children**

- 1.0.16** It is of the utmost importance that it is recognised that the majority of child abuse and neglect occurs within homes, families and communities not within organisations and institutions. Society must never lose sight of that or be distracted by a media frenzy of high-profile cases involving celebrities which, disturbing and disgraceful though they are, do not reflect the majority of abuse cases that do occur within our communities.
- 1.0.17** However, failing to take action to protect, and bring justice for, those vulnerable children who have suffered from abuse in a most heinous manner by people who occupy positions of trust, responsibility and power would be woefully egregious.
- 1.0.18** It is time for the UK to take an unequivocal stand against the child abuse cases that occur within organisations or institutions exercising care, supervision or authority over children. The law in the UK must be changed to introduce mandatory reporting of those cases.
- 1.0.19** Legislative change is required in some instances to properly protect children and for this reason there are specific changes recommended to both the Sexual Offences Act 2003 and the Children Act 2004.
- 1.0.20** Without better training for professionals to be alert to the possibility of child sexual exploitation cases and without a clear inter-agency commitment to thoroughly investigate those cases and to fully protect the children involved, it is highly likely that the circumstances leading up to the events in Rotherham<sup>ii</sup>, and indeed those in Rochdale<sup>i</sup>, will occur again in the future.
- 1.0.21** The Academy Child Sexual Exploitation Working Group<sup>iv</sup> has recently made a number of useful recommendations including that the medical Royal Colleges and Faculties should provide backing to individual members seeking to make contributions to tackling sexual exploitation. Following release of *Living on a Railway Line* it is hoped that the College of Emergency Medicine, the Royal College of Paediatrics and Child Health and other medical Royal Colleges and Faculties will be able to take advantage of this backing to move forwards with many of the recommendations contained within this report.

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<sup>iv</sup> [http://www.aomrc.org.uk/dmdocuments/aomrc\\_cse\\_report\\_web.pdf](http://www.aomrc.org.uk/dmdocuments/aomrc_cse_report_web.pdf)

- 1.0.22** Although Multi-Agency Safeguarding Hubs (MASHs) have been set up to improve inter-agency working, if the UK is really serious about building strong and healthy communities with children at their heart, the proposal to launch a UK children’s advocacy centre is something that should be tackled now to decide how this can be made a reality in the UK.
- 1.0.23** Education of professionals underpins safe services and enables them to support children and families in a better way – the standardisation of these child protection educational programmes will make services run more efficiently and will allow the community to be more confident that professionals in different areas of the country are more likely to have been trained, and assessed, to the same robust standards.
- 1.0.24** Finally, the position of a society where physical (corporal) punishment of children is permitted, yet efforts are being made to try and prevent all forms of child abuse in those same communities, is not a tenable one. Reducing the number of cases of child abuse must begin with a clear message from society that physical punishment of children, whatever the circumstances, is unacceptable. There should be legislative change in the UK to prohibit physical punishment of children in all settings and to remove the defence of ‘reasonable punishment’.
- 1.0.25** There are communities around the world, including those visited in Cambodia during the preparation of this international report, that are, quite literally, Living on a Railway Line. In other areas, the UK included, there are children and families metaphorically living on that same railway line not in terms of physical location but in terms of living in a highly risky and dangerous situation, without adequate protection, never sure where the next harm is going to come from.
- 1.0.26** It is for that reason that although the inspiration for the name of this publication came from experiences abroad the themes highlighted and discussed in this report are as equally applicable to children and families living in the UK as they are to those living in the USA, Singapore, Malaysia, Cambodia and beyond.

**1.0.27** Whilst it was distressing to see the abject poverty or dysfunctional arrangements which blighted many of the communities that were visited during the Fellowship travels, the stories of resilience and recovery demonstrated clearly that no matter how severe the adversity facing people living in situations that none of us would choose to exist in, it is community spirit and a strong social network that is effectively able to protect children.

## **2.0 Recommendations**

### **2.1 Key recommendations for the UK**

#### **2.1.1 Mandatory reporting of child abuse and neglect**

##### **2.1.2 Key Recommendation ONE**

There should be a new law introduced in the UK to make it a legal (mandatory) requirement to report any reasonable suspicion of child abuse (of any type) occurring within any organisation or institution exercising care, supervision or authority over children, whether as part of its primary functions or otherwise. This new law should comply with the principles set out in Recommendation [THREE](#).

#### **2.1.3 Physical punishment of children**

##### **2.1.4 Key Recommendation TWO**

There should be legislative change in the UK to prohibit physical punishment of children in all settings and to remove the defence of 'reasonable punishment'.

#### **2.1.5 Legislative change required in the UK**

##### **2.1.6 Key Recommendation THREE**

Section 15(1)(a) of the Sexual Offences Act 2003 must be revised to change the number of times contact must be proven to have been made with a child, prior to meeting with that child with the intention of abusing him or her, from two to one. Consideration should also be given to raising the age in relation to sexual exploitation in section 15 from age 16 to age 18 to reflect that it is possible to treat someone in an exploitative manner who is above the age of legal consent to sexual intercourse but still a child aged under 18 years of age.

### **2.1.7 Key Recommendation FOUR**

The Sexual Offences Act 2003 must be revised to remove the terms 'child prostitute' and 'child prostitution' and additional clauses should be inserted to better reflect the fact that children who were previously classed as being involved in 'child prostitution' are actually victims of serious child sexual abuse and child sexual exploitation.

### **2.1.8 Key Recommendation FIVE**

Section 58 of the Children Act 2004 should be revised, and other legislation introduced as necessary, to make explicitly clear that in future there is no defence of 'reasonable punishment' and that any corporal or physical punishment of a child, aged under 18 years of age, is strictly prohibited in law.

### **2.1.9 Paediatric Emergency Medicine Social Worker pilot**

#### **2.1.10 Key Recommendation SIX**

There should be a funded research evaluation of attaching a social worker to a UK paediatric emergency department to investigate the benefits of such provision, to children, families and the ED, and to contribute to setting standards for children in emergency care settings in the future.

#### **2.1.11 Child abuse and neglect education and training**

#### **2.1.12 Key Recommendation SEVEN**

A standardised, compulsory, multi-professional training programme, to complement the inter-collegiate competency levels, should be introduced in the UK for all professionals dealing with children and families. This must include specific training on the potential signs, features and vulnerabilities of children who are at risk of, or who are suffering from, exploitation including sexual exploitation. This coordinated educational programme would reduce inefficiencies of duplication of educational material preparation and would better quality assure the outcome of the educational programme.

### **2.1.13 Society's views on child abuse**

#### **2.1.14 Key Recommendation EIGHT**

A research study should be conducted in the UK comparing professionals' and the public's views on the acceptability of various events which can occur to and around children and whether or not these are considered abusive. The results of this study should be used to inform organisations and groups working on primary prevention of child maltreatment in the community. To help facilitate achievement of this key recommendation there should be widespread support of The Academy of Medical Royal Colleges Child Sexual Exploitation Working Group recommendation (September 2014) that the Faculty of Public Health should consider how they can encourage their members to work closely with local safeguarding children boards to improve awareness in parents, communities, and schools of indicators of child sexual exploitation [and of other types of abuse] and of available help. This would also include a focus on primary prevention to help build awareness and resilience in children and young people to prevent them being exploited or abused in any way.

### **2.1.15 Child abuse awareness event**

#### **2.1.16 Key Recommendation NINE**

The UK government should consult with key child protection stakeholders and prepare to launch a pilot Child Abuse Awareness Month as soon as is practicable after the 2015 General Election. This event should be evaluated and replicated in future years if it is found to be successful in either raising awareness of child abuse issues within society or decreasing the incidence of child maltreatment in different communities.

### **2.1.17 Children's advocacy**

#### **2.1.18 Key Recommendation TEN**

A children's advocacy centre pilot should be launched in the North West of England with an initial evaluation after 12 months, an interim evaluation after 24 months and a full evaluation after 60 months of operation.

## **2.2 Associated and enabling recommendations for the UK**

### **2.2.1 Mandatory reporting of child abuse in the UK**

### **2.2.2 Recommendation ONE**

Any introduction of mandatory reporting must be accompanied by a commensurate increase in resources to child welfare agencies to enable them to cope with the increased number of referrals that will be received and so that the safety of children who are in need of protection already is not compromised.

### **2.2.3 Recommendation TWO**

Further research should be conducted in the UK to assess the training-reporting-outcomes relationship for children where suspicions of possible child abuse have arisen looking, in detail, at the outcomes for the child of a referral to child protective services.

#### 2.2.4 Recommendation THREE

Principles for the introduction of a new law on mandatory reporting of child abuse:

- All persons associated with an organisation or institution exercising care, supervision or authority over children, whether as part of its primary functions or otherwise, should be legally required to report suspicions of child abuse occurring within that organisation or by a person associated with that organisation, to a designated officer.
- All designated officers who are aware of suspicions of child abuse either from their own knowledge or as a result of a report from another person should be legally required to report this to the local authority and such a report should be treated as a referral falling within the auspices of Section 47 of the Children Act 1989.
- The local authority should be legally obliged to give feedback to the designated officer who, in turn, should be legally obliged to provide this feedback to the individual(s) who made the initial report(s). There should be mechanisms put into place within the legislation to ensure that if feedback is not received by persons entitled to receive it, this is both reported and acted upon.
- Timescales should be introduced within the new legislation covering the timescale for reporting, both by the person associated with the organisation and the designated officer, and the timescale for a response by the local authority.
- There must be introduction of a comprehensive, standardised, multi-disciplinary training package delivered to the necessary professionals in advance of the new legislation becoming law combined with a UK-wide community engagement programme relating to the new legal provisions.
- It should be an offence for any organisation, institution or individual to take action to prevent or discourage a person from making a report.
- There must be a full evaluation of the impact of the new mandatory reporting legislation before consideration is given to extending the scope of the legislation to other organisations, institutions, individuals or situations.

### **2.2.5 UK legislative process**

### **2.2.6 Recommendation FOUR**

The Modern Slavery Bill 2014 must ensure that children aged under 18 years of age are properly protected from trafficking, exploitation and modern slavery and that provision of guidance, education and training is mandatory.

### **2.2.7 Child maltreatment screening tool**

### **2.2.8 Recommendation FIVE**

An international, multi-centre research study should be carried out to investigate, and validate, the sensitivity, specificity, positive predictive value (PPV) and negative predictive value (NPV) of a new screening tool and appropriate clinical decision rules, which all require development, to assess the risk of child maltreatment in children attending urgent and emergency care facilities.

### **2.2.9 Safeguarding vulnerable children professional educational programmes**

### **2.2.10 Recommendation SIX**

Institutions training pre-qualification professionals who may in the future work with vulnerable children and families should ensure that their training courses incorporate the necessary training from the Intercollegiate Document on Safeguarding Children and Young People competencies, with an appropriate competency assessment at the end of the training programme to ensure that the skills and knowledge required have been obtained.

### **2.2.11 Recommendation SEVEN**

Current educational programmes in child maltreatment ought to be formally validated including assessing the impact on the competence of the professional, both pre- and post- training, and, if possible, outcomes for children.

## **2.2.12 Medical investigations in cases of suspected child maltreatment**

### **2.2.13 Recommendation EIGHT**

Healthcare organisations involved in providing or requesting skeletal surveys in cases of suspected non-accidental injury should review their policies to ensure that they contain specific guidelines, based on the joint Royal College of Paediatrics and Child Health and The Royal College of Radiologists standards, relating to the repeating of skeletal surveys two weeks after the initial survey.

### **2.2.14 Recommendation NINE**

Research should be undertaken in the UK to investigate the sensitivity and specificity of using elevated hepatic transaminase levels as a potential marker for occult intra-abdominal injury in children in whom there is concern for possible physical child abuse. The results of this research should be used to determine if there is a level at which definitive abdominal radiological investigation should take place in cases of suspected non-accidental injury in a UK population.

## **2.2.15 Child protection peer review and multi-professional involvement**

### **2.2.16 Recommendation TEN**

Child protection peer review meetings with clear terms of reference and involving representatives from the local authority (including, as an essential component, local authority, or Crown Prosecution (as appropriate) legal teams), the police and community health services, should be set up in all health organisations conducting child protection clinical work. Such peer review meetings should actively contribute to the case management of individual cases.

### **2.2.17 Recommendation ELEVEN**

The role that advanced practitioners can play within child protection work should be further explored and promoted in the UK. Multi-disciplinary teams should seek out opportunities to develop an advanced practitioner service working as part of a pan-professional medical and non-medical team within the sphere of child protection work. There should be an investigation of the benefits of this model of care for patients, families and health service effectiveness.

### **2.2.18 Adverse childhood experiences (ACEs)**

#### **2.2.19 Recommendation TWELVE**

The concept of the importance of detecting and, where possible, eliminating Adverse Childhood Experiences (ACEs) in the UK, and beyond, ought to be included in undergraduate and postgraduate educational programmes for professionals working with children and families.

#### **2.2.20 Recommendation THIRTEEN**

Organisations working in the community on child abuse prevention programmes should incorporate material relating to Adverse Childhood Experiences (ACEs) and provide community education about the importance of minimising ACEs as well as recognising when they are present in the community and seeking appropriate community-based or professional assistance.

### **2.2.21 World Health Organisation (WHO) Health Needs Assessment (HNA)**

#### **2.2.22 Recommendation FOURTEEN**

A formal Health Needs Assessment (HNA), from a secondary care point of view, should be conducted in a pilot community in the UK in relation to child maltreatment and its prevention. The result of this initial pilot should be used to conduct further HNAs in other regions of the country with the aim of building up a societal evidence base of the health needs of children who have suffered from, or who are at risk of, significant harm so that evidence-based preventative strategies can be appropriately designed and targeted.

### **2.2.23 Children's advocacy**

#### **2.2.24 Recommendation FIFTEEN**

Children should be involved more in healthcare decisions and planning from the outset. A suitable version of the friends and family test, used to quality assure the service provided in healthcare facilities, should be developed for use by all children, including those with learning difficulties or who are pre-verbal. Children's councils should be created in departments or hospitals seeing children in the UK.

## **2.2.25 Advocating for adolescents**

### **2.2.26 Recommendation SIXTEEN**

All professionals dealing with adolescents need to recognise the specific vulnerabilities that exist within this age group and ensure that these are not overlooked. Professionals should ensure they use an appropriate history-taking framework, such as HEADSS, when talking to children of adolescent age and Emergency Departments should provide an adolescent area with age-appropriate information available.

## **2.2.27 Paediatric Emergency Medicine Research**

### **2.2.28 Recommendation SEVENTEEN**

Organisations involved in clinical research should promote this more widely with patients and the public. Those departments involved in paediatric emergency medicine research should consider the 'brand' that is used to promote this important work and should set up a local Paediatric Emergency Medicine Research Unit (PEMRU) to coordinate the research arm of the clinical work that is delivered. Such units should collaborate with PERUKI (Paediatric Emergency Research in the UK and Ireland).

## **2.2.29 Child protection pro-bono work**

### **2.2.30 Recommendation EIGHTEEN**

Organisations and individuals interested in strengthening international partnerships, either from an Emergency Medicine or Child Protection viewpoint, should seek out and foster lasting relationships with overseas individuals and organisations that will be of mutual benefit.

### **2.2.31 Recommendation NINETEEN**

The Foreign and Commonwealth Office Medical Pro-bono Panel should be enhanced by creating a multi-disciplinary sub-panel focussing on child protection issues.

### **2.2.32 Commonwealth Scholarship Commission Awards and Fellowships**

#### **2.2.33 Recommendation TWENTY**

Organisations in the UK interested in hosting Overseas Fellows should investigate the possibilities offered by The Commonwealth Scholarship Commission Awards.

### **2.2.34 Child Sexual Exploitation**

#### **2.2.35 Recommendation TWENTY-ONE**

The ChildSafe initiative, and other similar schemes, should be promoted by the UK travel industry when products they sell, including flights, hotels and packages, involve travel to areas where child protection issues are abundant and children are at significant risk of harm from issues such as sexual abuse, sexual exploitation and child labour. A pilot region-specific ChildSafe initiative should be introduced, and evaluated, in the UK to contribute towards better protecting children who might be at risk of exploitation in that particular area.

### **2.2.35 Children giving evidence in Court in the UK**

#### **2.2.36 Recommendation TWENTY-TWO**

Judges and lawyers involved in all child abuse cases should be required to undertake mandatory specialist training. The public, and professionals involved in child protection work, should support the NSPCC's campaign *Order in Court* to try to ensure that in every region there is at least one remote site for children to be able to give evidence from outwith the Court building.

### **2.2.37 Locally provided health services**

#### **2.2.38 Recommendation TWENTY-THREE**

Economically viable services should be commissioned which allow patients who might have difficult accessing healthcare in a hospital setting to have their care provided more locally in the community.

### **2.2.39 Domestic and inter-partner violence**

#### **2.2.40 Recommendation TWENTY-FOUR**

Domestic (inter-partner) violence interventions being undertaken in UK Emergency Departments should be subject to validation and a multi-centre research study should be undertaken looking at their short-term, medium-term and long-term benefits.

### **2.2.41 International Network Development**

#### **2.2.42 Recommendation TWENTY-FIVE**

Further academic, clinical and other partnerships should be developed between UK organisations, professionals and NGOs who are providing essential child protective services in countries overseas where local statutory services are inadequate or absent.

## **2.3 International recommendations**

### **2.3.1 Ratification of the UN Convention on the Rights of the Child in the USA and Somalia**

### **2.3.2 International Recommendation ONE**

The USA and Somalia should follow due process, commencing immediately, and ratify the United Nations Convention on the Rights of the Child (UN CRC) so that children living in these countries can be assured of the protection that the treaty quite rightly affords them.

### **2.3.3 International prohibition of physical punishment of children aged under 18 years of age**

### **2.3.4 International Recommendation TWO**

Countries that have not prohibited physical punishment of children aged under 18 years of age in all circumstances should do so as soon as possible.

### **2.3.5 Children giving evidence in Court in the USA**

### **2.3.6 International Recommendation THREE**

The USA should review legislation to facilitate the ability of children to be able to routinely give evidence in chief by pre-recorded video and to be able to be cross-examined by remote video link, preferably from outwith the Court building.

### **2.3.7 Child protection strategy for Malaysia**

### **2.3.8 International Recommendation FOUR**

An expert advisory panel, working in conjunction with the National Advisory and Consultative Council for Children, UNICEF and other partner organisations, should be created in Malaysia to guide future developments concerning safeguarding vulnerable people in Malaysia and to ensure that the other three recommendations relating specifically to Malaysia are completed effectively.

### **2.3.9 International Recommendation FIVE**

There should be creation and launch of a publication, with statutory function, concerning protection of children in Malaysia including new guidance on when to suspect child maltreatment, the inter-agency investigation of suspected cases and the standardised management thereof within Malaysia.

### **2.3.10 International Recommendation SIX**

There should be creation and evaluation of a pilot Multi-Agency Safeguarding Hub (MASH) or Children's Advocacy Centre of Malaysia.

### **2.3.11 International Recommendation SEVEN**

There should be production and promotion of a coordinated standardised educational programme for all professionals working with families and children in Malaysia.

## **3.0 Implementation Strategy**

### **3.1 Important recommendations that can be implemented or generalised**

**3.1.1** This report was launched to mark the 25<sup>th</sup> anniversary of the signing of the UN Convention on the Rights of the Child, which took place on 20 November 1989. Although there has been progress over the last quarter of a century there are still laws, policies and procedures in the UK and internationally which fall way short of properly protecting children as was agreed by the signatories to the convention twenty-five years ago.

**3.1.2** Parliamentarians, professionals, communities and organisations in the UK and beyond that are interested in protecting the rights of children should find this report useful to assist them with their campaigns and aims to make our global society a better place for children to live in, now and in the future. It is vital that these individuals and organisations ensure the voices of children are heard and listened to and ensure that children's advocacy is at the forefront of people's minds when dealing with families and children.

**3.1.3** There is no single short-term fix to the problems identified within this report but the recommendations that have been made should go some way to contributing to effective resolutions of the issues that were the springboard for the creation of this project. Many of these recommendations can be tackled locally without additional resources. Some will require regional co-operation between agencies and between units. Some can only be tackled at a national level and a minority will require international cooperation to be effective.

**3.1.4** This report is just the start of the implementation process – what is required is for the agencies, organisations and individuals to whom this report is directed to grasp the challenge that has been set and put in place the recommendations contained herewith so that children, and young people, living in the UK and beyond can grow up in the safest possible environments, within supportive communities and realise their maximum potential.

**3.1.5** That potential is something we would all surely wish them to achieve to create a strong and resistant society in the future, with healthy children at the heart of it.

**3.1.6** The following groups highlight those recommendations that are most important, those that are most implementable and those that can be most generalised. Whilst all of the recommendations in this report should be implemented to better protect and support children, it is recognised that some are easier to implement, and are of more urgency, than others and it is with these recommendations that work should start in earnest. Some of the recommendations are able to be generalised to other localities, individuals and groups, including those working outside of the UK.

## **3.2 Recommendations that are most important and urgent**

- Key Recommendation [ONE](#)
- Key Recommendation [TWO](#)
- Key Recommendation [THREE](#)
- Key Recommendation [FOUR](#)
- Key Recommendation [FIVE](#)
- Key Recommendation [SIX](#)
- Key Recommendation [SEVEN](#)
- Key Recommendation [EIGHT](#)
- Key Recommendation [NINE](#)
- Key Recommendation [TEN](#)
- Recommendation [ONE](#)
- Recommendation [THREE](#)
- Recommendation [TWENTY-ONE](#)

### 3.3 Recommendations that are most implementable

- Key Recommendation [ONE](#)
- Key Recommendation [THREE](#)
- Key Recommendation [FOUR](#)
- Key Recommendation [SIX](#)
- Key Recommendation [SEVEN](#)
- Key Recommendation [EIGHT](#)
- Key Recommendation [NINE](#)
- Recommendation [THREE](#)
- Recommendation [FOUR](#)
- Recommendation [SIX](#)
- Recommendation [SEVEN](#)
- Recommendation [EIGHT](#)
- Recommendation [NINE](#)
- Recommendation [TEN](#)
- Recommendation [TWELVE](#)
- Recommendation [FIFTEEN](#)
- Recommendation [SIXTEEN](#)
- Recommendation [SEVENTEEN](#)
- Recommendation [NINETEEN](#)
- Recommendation [TWENTY](#)
- Recommendation [TWENTY-FOUR](#)
- International Recommendation [FOUR](#)
- International Recommendation [FIVE](#)
- International Recommendation [SIX](#)
- International Recommendation [SEVEN](#)

### 3.4 Recommendations that can be most generalised

- Key Recommendation [TWO](#)
- Key Recommendation [EIGHT](#)
- Recommendation [TWO](#)
- Recommendation [FIVE](#)
- Recommendation [NINE](#)
- Recommendation [ELEVEN](#)
- Recommendation [TWELVE](#)
- Recommendation [THIRTEEN](#)
- Recommendation [FOURTEEN](#)
- Recommendation [SEVENTEEN](#)
- Recommendation [EIGHTEEN](#)
- Recommendation [TWENTY-ONE](#)
- Recommendation [TWENTY-THREE](#)
- Recommendation [TWENTY-FIVE](#)
- International Recommendation [ONE](#)
- International Recommendation [TWO](#)
- International Recommendation [FOUR](#)
- International Recommendation [FIVE](#)
- International Recommendation [SIX](#)
- International Recommendation [SEVEN](#)

## 4.0 **Basis of *Living on a Railway Line***

### 4.1 **Purpose of this report**

#### 4.1.1 **Living on a Railway Line**

Thirty five thousand and forty three miles flown, 10 weeks away from home, eight different cities, five different mobile phone SIM cards, four different currencies, four different countries and one extra checked bag on the way back to the UK to carry books, research papers and gifts: *Living on a Railway Line* is a publication that uses international experiences to make recommendations designed to improve the safeguarding from child abuse of vulnerable children in the UK and beyond.

#### 4.1.2 **Definition**

In accordance with the United Nations Convention on the Rights of the Child ([UN CRC](#)), unless otherwise stated in this document the term “child” or “children” refers to a person or persons under the age of 18 years<sup>v</sup>. Throughout this report the terms “child maltreatment” and “child abuse and neglect” are used synonymously.

#### 4.1.3 **Purpose**

**This publication is not intended to be read cover-to-cover in one go as a book.** Instead, the report is grouped into different themes covering key areas of child protection work and is presented in chapters so professionals and community members interested in exploring different aspects of this challenging work can see the evidence base behind the conclusions and recommendations and can appreciate the international contribution to their creation.

4.1.4 The purpose of this report is to present recommendations for the UK (although it does include some international recommendations) as well as to outline the evidence and experiential base upon which these recommendations are made; its purpose is not to describe the travel undertaken, or the visits in each location, in any detail. Those visits, the meetings that took place and the experiences gained have been invaluable in the creation of this report – without them it could not have been written. Absence of reference to any particular visit or project in

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<sup>v</sup> United Nations Committee on the Rights of the Child. <http://www.unicef.org.uk/UNICEFs-Work/Our-mission/UN-Convention/>

this report should not, in any way, be taken as an adverse inference relating to the usefulness of that particular activity in question.

## **4.2 Disclaimer**

- 4.2.1** The opinions and recommendations expressed in this work are entirely those of the author and do not necessarily reflect or represent the opinions or policies of any individual or organisation mentioned within this work unless explicitly stated. None of the organisations or individuals mentioned in this work, nor any person acting on their behalf, may be held responsible for any use made of the information contained herein.
- 4.2.2** The Author is grateful to Professor Desmond K. Runyan and Professor Donald C. Bross for writing the joint foreword to this work.
- 4.2.3** The right of Andrew Graeme Rowland to be identified as the Author of this work has been asserted by him in accordance with the Copyright, Designs and Patents Act 1988. All rights reserved.
- 4.2.4** The full report to which this Executive Summary relates can be downloaded from The Winston Churchill Memorial Trust [website \(http://www.wcmt.org.uk\)](http://www.wcmt.org.uk)

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