CSCP
CROYDON SAFEGUARDING CHILDREN PARTNERSHIP



Exploring Adultification

Impact on Lived Experiences of Children and Young People

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CROYDON SAFEGUARDING CHILDREN PARTNERSHIP



A multi-agency partnership

Core safeguarding partners

CROYDON
www.croydon.gov.uk

METROPOLITAN POLICE

NHS

Wider partnership

Education and Early Years

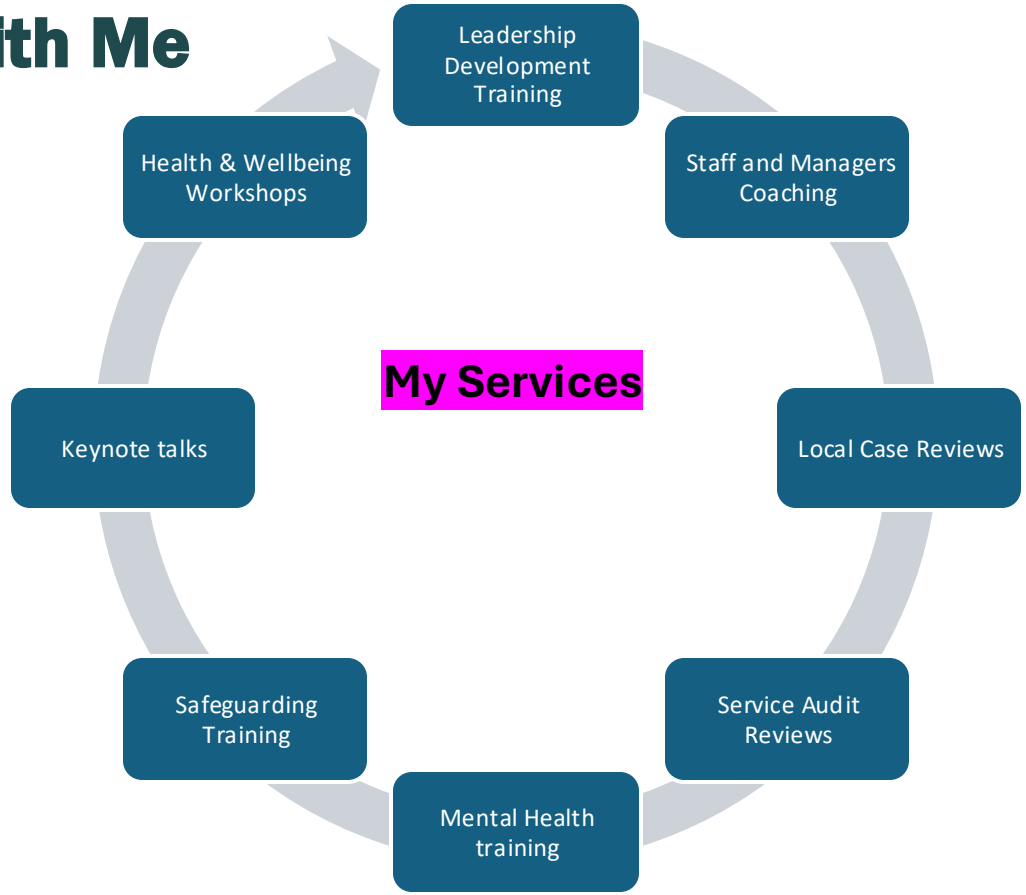
Probation and Cafcass

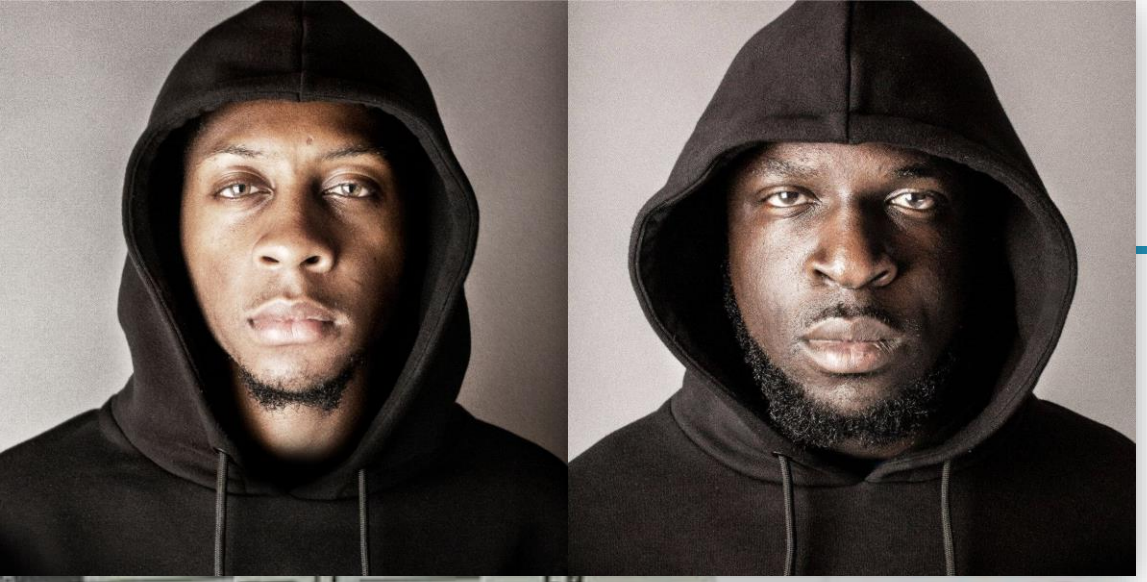
Voluntary, Community and Faith organisations

NSPCC and specialist partners



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How unconscious and conscious bias shape the safeguarding journey for Black children

- What do you see? What don't you see ?
- What is the very first thing you notice?
- What assumptions even subtle ones start to form in your mind?
- What do you think you know about this person?
- What don't you know?
- What risks, strengths, or stories did your mind automatically attach?
- Where might those assumptions come from?

Definition of Adultification

- **Adultification** is the term used to define a form of bias and prejudice where children are viewed as older than they are in a way which is harmful or wrong. Children who are accommodated, from lower socio- economic backgrounds or neurodivergent are also at risk.
- This is a more prevalent experience for Black children of African and Caribbean origin.
- Systemic racism has forced Black children into social, emotional, and physical adult roles before they are mature , contributing to adultification bias .
- Educational settings are rich contexts to explore how this phenomenon is institutionalized, particularly around data related to disproportionate rates exclusions and lack of safeguarding issues.

How are Children and Young people adultified ?

- **Being Parentified** especially by parents with mental health difficulties or disability
- Presence of **Domestic Violence** ,protecting siblings or parents
- **Being a Young Carers looking after parents and or siblings** assuming greater responsibilities at home and adult roles
- **Sexual or criminal exploitation** by gangs or predatory offenders
- **Unaccompanied minors ,refugees and asylum seekers –** unjust age verification tests
- **Missing children and young people** whose vulnerability not acknowledged or is minimized.

  Police officers and other **staff use victim-blaming language** that implies (intentionally or unintentionally) that a child is partially or wholly responsible for abuse that has happened to them. (His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) Report into Child Exploitation Feb 2024
- **Looked after children** from lower socio - economic groups trafficked or involved in prostitution as part of child sexual abuse.
- **Economic Deprivation**, Impact of the cost of living crisis

Key Tenets of Adultification

1. Black children are more likely to experience systemic adultification bias
2. **Racism is the core issue influencing the adultification of Black children**
3. Black children are more likely to be met with suspicion, assumed deviance and culpability
4. **Adultification reduces professional and organisational responsibility to safeguard and protect children, yet increases a responsibility of children to safeguard themselves**
5. Adultification bias is a breach of child safeguarding legislation and guidance.

Adultification Bias in Social Care Practice

1. Adultification bias leads practitioners to interpret Black children as older, more resilient or more responsible than their peers.

2. This distorts how vulnerability is recognised and how risk is assessed and misinterpreted .

3. When we fail to acknowledge race, identity and intersectionality, we misread need and underestimate harm.

4. These biases shape professional curiosity, decision making and the support children receive.

Professional Biases enters Safeguarding

1. Behaviour seen as “offending” rather than “symptoms of exploitation”
2. Black children viewed as “streetwise”, not victims — aligning closely with adultification bias pattern
3. Information shared into multi-agency meetings is skewed. Officers’ reports often shape the narrative other professionals inherit
4. Stigmatising language (“gang affiliated”, “aggressive”) creates a biased starting point for social care and health responses
5. Negative assumptions about Black children in healthcare eg experience of pain management sickle cell minimized
6. This is reinforced by research on how bias shapes perception, attention, and behaviour within organisations
7. Trust is often broken at the first point of contact

The 2025 Metropolitan Police reviews

- The 2025 reviews highlighted persistent racialised patterns in frontline policing. Those findings were not new — they simply confirmed what communities, practitioners and previous inquiries have been saying for decades
- Repeated findings of disproportionate policing of Black communities
- Continued evidence of discriminatory stop and search
- Failures in recognising vulnerability in Black children
- Persistent racialised stereotypes of Black boys as threats, and Black girls as problematic rather than vulnerable
- Once a family experiences unfair policing, they: disengage, fear professionals avoid statutory meetings, see safeguarding

  professionals as aligned with police
- The Met continues to operate in ways that racialise children, treat Black young people as suspects first, and strip them of vulnerability in moments when protection is needed most." Think Child Q

Spheres of Oppression & Victimisation of Black Children and Young People

Personal life Experience Traumas, abuse, life events, ACES, racial stereotyping,



Institutional racism-

coercive treatment and extra surveillance by police, school exclusions, criminalisation of black males, less access to therapy for Black children and young people

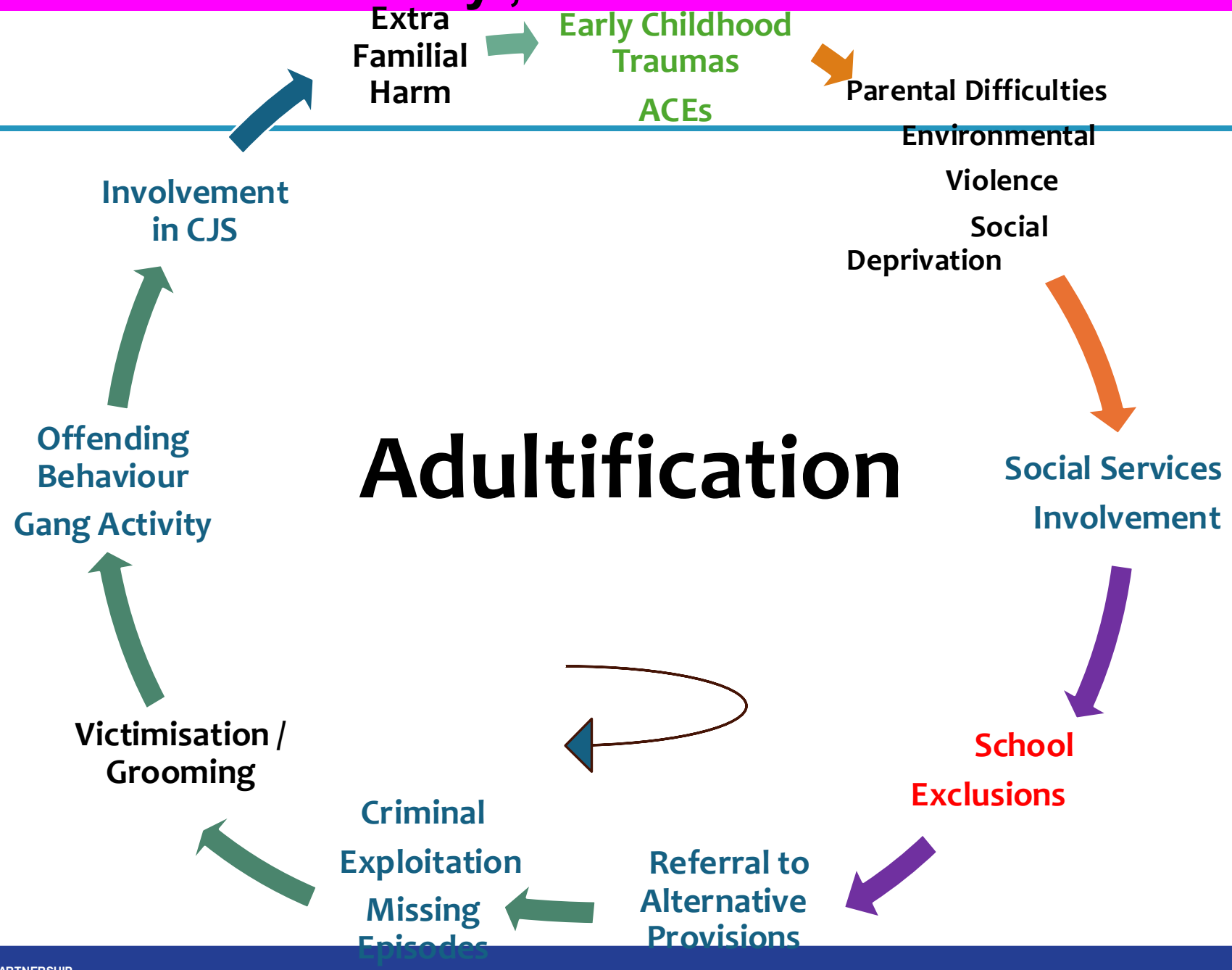


Multi dimensional spheres of Adultification



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Cycle of Vulnerability ,Exclusion and Extra Familial Harm



Marcia Rice 2026

How might Adultification manifest in a young person's life?

- Interpreting for the family
- Financially responsible for family
- Inappropriate sexual relationships and dynamics- adolescent black girls viewed as sexualized and older and little empathy if abused
- Disproportionate sanctions ,school exclusions 5x
- Viewing challenging behaviour as needing to be controlled or punished not managed therapeutically

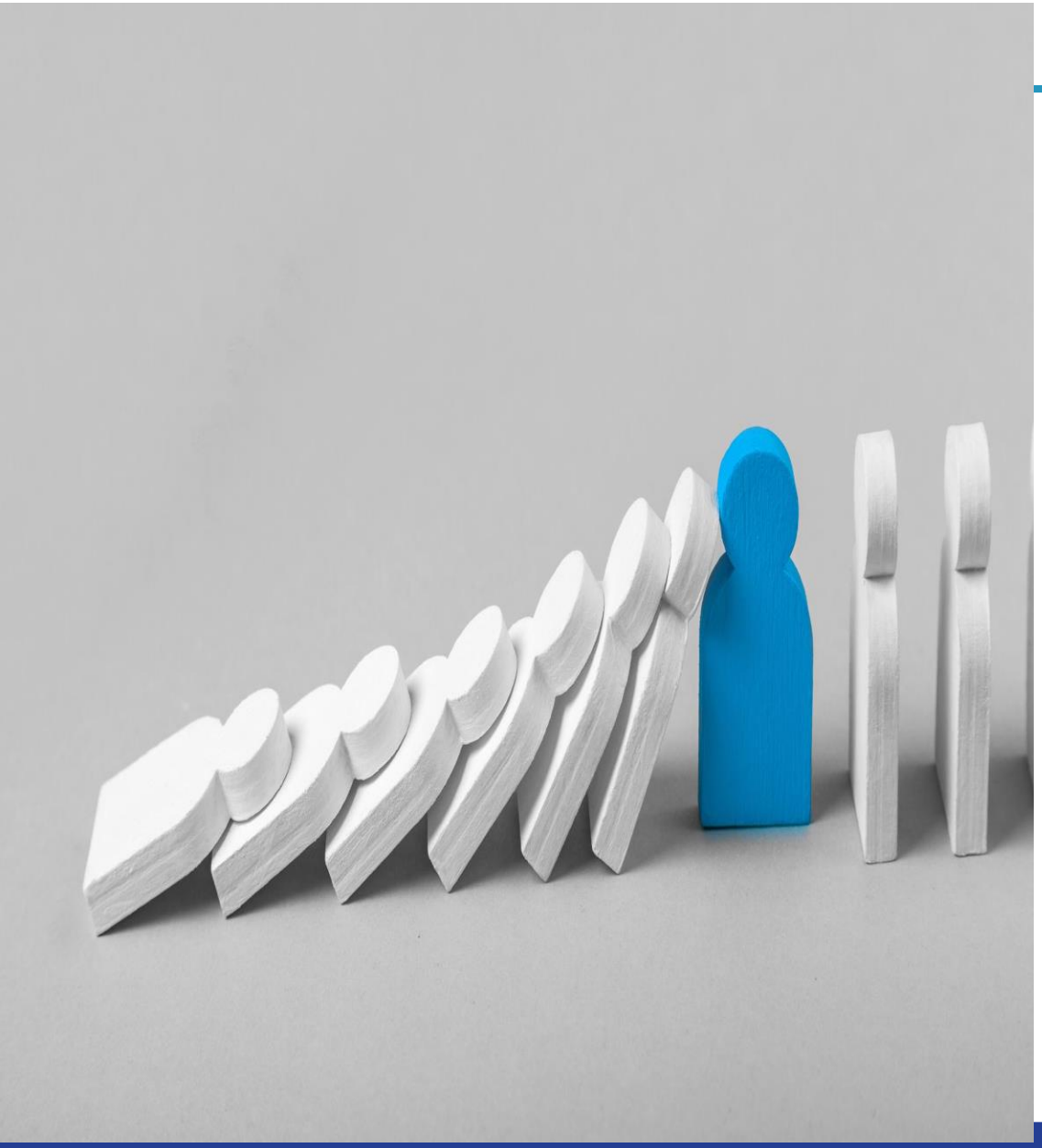
Short term Personal Consequences of Adultification

- Low self esteem and feelings of worthlessness
- Loss of sense of authentic self due to labelling and stereotyping
- Heightened stress reactions in Children
- Communication difficulties especially with authority
- Pessimistic world view, affecting emotional wellbeing
- Normalising adultification experiences in self and others
- Being hyper vigilant risk of PTSD
- Being ostracized by others based on stereotypes
- Trauma / compassion fatigue from repeated experiences

Long term Personal /Professional Impact of Adultification

- Inter generational Traumas -Reduce help seeking towards professionals with lack of trust and faith in systems
- May lead to long term dysregulation, difficulty managing adversity
- Tension between different intersecting factors eg Neuro divergence and spirituality
- Repetition of unresolved trauma and adultification across generations unable to break cycles
- Failure to safeguard and protect Black and Global majority children ,breach of procedures.
- The child is rendered invisible in plain sight- Voice of the child is diminished

Implications for Safeguarding



1. Practitioners often lack understanding of the lived experiences of Black and adultified children limit their recognition of the child's vulnerabilities and exposure to multifaceted risks
2. Lack of responsiveness to, and engagement with, family members who had access to or caring responsibilities for the child ,especially if they were mental health issues or challenging behaviour present.
3. Risks to Black children who are often partially recognised, but not translated into a professional responses , Eg, where children had made disclosures of abuse which were not appropriately responded to or followed up by practitioners.

4. Failure to recognise barriers to service engagement leading to inconsistent intervention leading to a failure to support, protect and safeguard.

Remembering Child Q

Case Summary:

In 2020, Child Q, a Black female child of secondary school age, was strip searched by female police officers from the Metropolitan Police Service (MPS). The search, which involved the exposure of Child Q's intimate body parts, took place on school premises, without an Appropriate Adult present and with the knowledge that Child Q was menstruating.

1.1 Teachers told the review that on the day of the search they believed Child Q was smelling strongly of cannabis and suspected that she might be carrying drugs. On questioning Child Q, she denied using or having any drugs in her possession. A search of her bag, blazer, scarf, and shoes revealed nothing of significance.

QUESTIONS TO EXPLORE

Ques 1: How was Child Q adultified?

Ques 2: What might have been some of the factors influencing the professionals' responses and actions?

Ques 3: Who were responsible for adultifying Child Q in this scenario?

Improving Practice to reduce Adultification Bias

- **Adultification bias can also be identified by the language used** to describe children, such as a 'streetwise', 'resilient' and 'mature.' Such language may assume children have more agency and capacity to safeguard themselves. Be mindful of power of **victim blaming language**
- **Challenge racial, gender and transphobic stereotypes** can influence professionals actions and assumptions of deserving. Children perceived as more adult like are less likely to be **safeguarded and have rights protected.**
- Be aware of **impact of intersectional identities** on adultification Bias and vulnerabilities eg Black children with neuro diversities.
- Be aware of **your own prejudices and biases** exhibited by a colleagues
- Don't assume that **young person's involvement in criminal activity negates their vulnerability** or likelihood of being victimised.

Lessons for Good Practice

Active Advocacy & Challenging Bias: Developing the confidence to " call out" bias and challenge adultification and negative perceptions when observed in schools, professional meetings

Vulnerability Identification: Proactively spotting children most at risk of adultification bias within the service.

Subconscious Bias Awareness: Maintaining a heightened consciousness of how subconscious bias and intersectionality specifically impact Black and Global majority children.

Strategic Identification: Applying new strategies to identify early signs of bias in daily activities and setting-based work.

Systemic Change: Supporting specific service settings to recognise their own adultification patterns and adopt more equitable safeguarding lenses

Improving Practice to reduce Adultification

Reframing Language: Shifting from " young person " to " child" in reports and meetings to reinforce the right to protection

School Advocacy: Educating SENCos and teachers to prevent biased disciplinary trajectories for high risk children.

Staff Training: Using new knowledge to deliver internal briefings with increased confidence and clearer definitions.

Early Intervention: Identifying children at risk of bias and proactively challenging partner agencies to ensure equitable treatment.



- **The Child First** – we have a **legal duty to safeguard the health, wellbeing and safety of children** (Children Acts, 1989 & 2004)
- Be the child's **ADVOCATE**
- **See the world through the eyes of the child** in terms of **racism, bias** and **stereotypes, cultural differences** and **language barriers, diversity, exclusion**.
- **Act** – build trust, create a safe space to speak to the child and **refer early** to the appropriate services
- **Listen to experiences of parents and carers**
- **Be aware of the power of language in minimising**
- **Be Professionally Curious and Challenge stereotypes**
- **Think Critically and be Culturally Competent**
- **Clear communication with other agencies**
- **Remember the Voice of the Child cannot be heard if Adultified**

TREAT CHILDREN AS CHILDREN

Future of service delivery

1. How might Adultification manifest in your service?

2. What Strategies would you use to overcome Adultification?

3. What Barriers might you encounter to Change?

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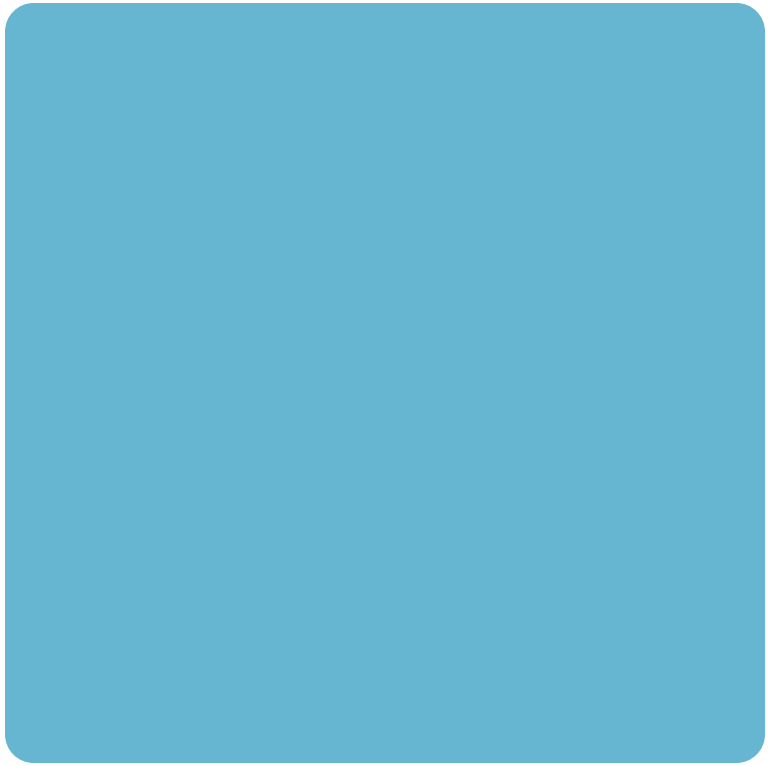
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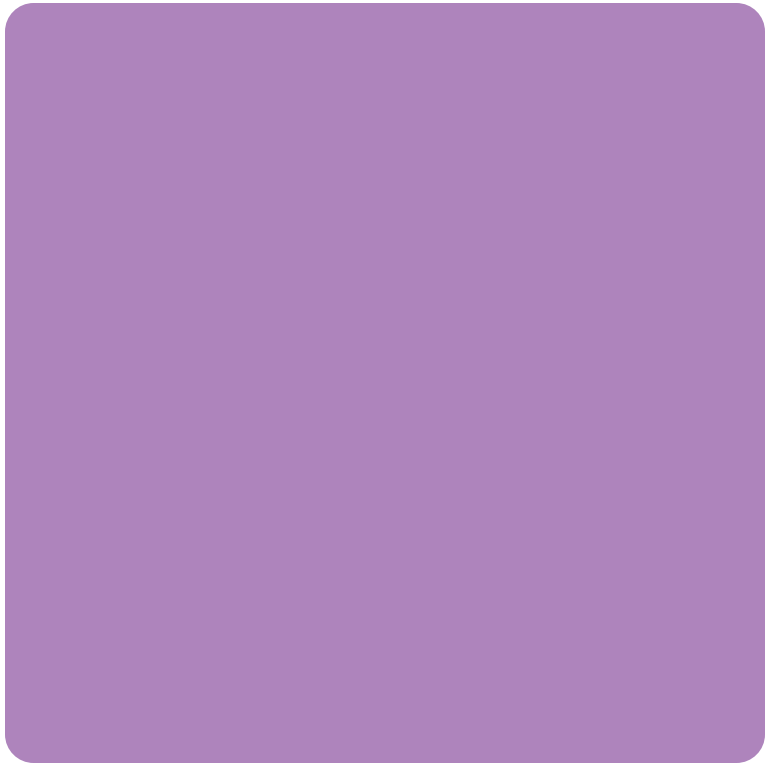
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Families First Partnership programme

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