Life & Times

Child sexual exploitation in Coronation Street

GROOMING

When 16-year-old Bethany Platt began dating a 34-year-old man her on-screen family expressed discomfort, but for viewers it was no more alarming than the soap opera's other outlandish pairings. The story aired over multiple episodes during the first 6 months of 2017; however, the insidious onset of child sexual exploitation (CSE) has turned this into one of the most harrowing plotlines in UK soap opera Coronation Street's history.

At the outset of this story, developed in consultation with survivors of CSE and the NSPCC, Bethany's mother and her new partner expressed concern about the relationship but 34-year-old Nathan leveraged this dynamic to begin isolating Bethany. Over time he completed the process of alienating Bethany from her family, moving her into his flat, and dismissing her desire to contact them as 'childish'. This pattern is common in child exploitation: taking advantage of pre-existing rifts within the family, offering stability, and disrupting expectations of childhood and maturity.1

A man claiming to know Nathan visited the flat while Bethany was there, taking some equipment belonging to his friend. Nathan convinced her that an adult relationship entailed Bethany paying off the debt by sleeping with this friend. Following this, Nathan began holding parties where Bethany had to sleep with various men. En route to Belgium to meet more men working with Nathan, Bethany finally asked for help from a mother with young children in a service station, thus recognising and rejecting her exploitation and demonstrating her maturity by reclaiming the child role.

AFTER ROCHDALE

This common model of exploitation, the so-called 'Boyfriend' approach, is characterised by manipulation, deception, isolation, and disorientation.² Some viewers suggested the most upsetting scenes should only be shown after the 9 p.m. watershed, but Lucy Fallon who plays Bethany disagreed:



Bethany (played by Lucy Fallon) has her day in court. ITV Archive.

... we want young girls to watch. They might think, "Maybe what's happening to me isn't normal", or parents might start talking to their daughters about a relationship.'3

Any story about CSE in Greater Manchester will attract comparisons with the exploitation ring operating in Rochdale between 2008 and 2012. After Rochdale, the soap opera's story is subversive. Nathan is a handsome, white, 30-something man who owns his own business, in stark contrast with the Rochdale perpetrators routinely offered by the press: older, Muslim men from Pakistan and Afghanistan. The characters of Nathan and his cronies defy tabloid divisiveness as these exploiters are approachable, charming, and friendly. Crucially, Coronation Street's viewers aren't asking 'How can she be taken in by someone so terrifying?'; they're asking 'How can someone so terrifying look so normal?"

AVOID STEREOTYPING VICTIMS OF CSE

Bethany's bubbly confidence and supportive family remind us that we cannot stereotype victims either, particularly in primary care. Pregnancies and STIs in underaged girls always raise alarm, but the RCGP/ NSPCC Child Safeguarding Toolkit offers diverse manifestations of CSE, including unexplained injuries, self-harm, substance misuse, enuresis, and soiling.2 CSE may even precipitate a sudden deterioration in control of a chronic condition.² The privileged position of the GP provides a unique opportunity to identify possible exploitation and begin the process of involving child protection and multi-agency sexual exploitation (MASE) teams.

Families may be best placed to approach primary care with concerns about behaviour change or absences from home, perhaps combined with unexplained gifts, but like professionals they often struggle to understand exploitation.1 This makes it all the more heartbreaking when Bethany's mother discovers her daughter drunk and undressed, and Bethany insists on returning to the party. Doctors often have the distance and perspective necessary to recognise that young people involved in CSE are victims and that interpretations such as promiscuity or prostitution are misguided, especially when children do not recognise the exploitative nature of their experience.2

The message of this storyline is the same for GPs on the frontline as for families: abusers distort the lines between childhood and adulthood, maturity and childishness, autonomy and exploitation. Perhaps the first step in helping victims of CSE is recognising the girl or boy who, like Bethany at the service station, needs to be a child again.

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