

SAMPLE CHILD ABUSE POLICY

What Is Abuse?

A person may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting; by those known to them or by a stranger.

Children

The Main Forms of Child Abuse

It is recognised that there are four main areas of abuse:

Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scolding, drowning, suffocating or otherwise causing physical harm to a child.

Physical abuse, as well as being a result of a deliberate act, can also be caused through omission or the failure to act to protect.

Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. The situation is commonly described as factitious illness, fabricated or induced illness in children and young people or 'Munchausen's Syndrome by Proxy' after the person who first identified the situation. A person might do this because they enjoy or need the attention they get through having a sick child.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child or young person's emotional development. It may involve making a child or young person feel or believe that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person.

It may feature age or developmentally inappropriate expectations being imposed on children. It may also involve causing children to frequently feel frightened or in danger, or the exploitation or corruption of a child.

Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone.

Sexual Abuse

Sexual abuse is forcing or enticing a child to take part in sexual activities, whether or not the child is aware of, or consents to, what is happening. The activities may involve physical contact, including penetrative acts such as rape, buggery or oral sex or non-penetrative acts such as fondling.

Sexual abuse may also include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Boys and girls can be sexually abused by males and/or females, by adults and by other young people. This includes people from different walks of life.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent leaving a young child home alone or the failure to ensure that a child gets appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Multiple Forms of Abuse

It is accepted that in all forms of abuse there are some elements of emotional abuse and that some children are subjected to more than one form of abuse at any one time.

Child Abuse - How to recognise it

Signs And Indicators

Every child and young person is unique and it is difficult to predict how their behaviour will change as a result of their experience of abuse. Listed below are some physical signs and behavioural indicators that may be commonly seen in children who are abused, but remember they may only be an indication and not confirmation that abuse is taking place.

Physical Abuse

<u>Physical Signs</u>	<u>Behavioural Indicators</u>
Unexplained bruising, marks or injuries on any part of the body. Bruises which reflect hand marks or fingertips (from slapping or pinching). Cigarette burns. Bite marks. Broken bones. Scalds.	Fear of parents being approached for an explanation. Aggressive behaviour or severe temper outbursts. Flinching when approached or touched. Reluctance to get changed, for example wearing long sleeves in hot weather. Depression. Withdrawn behaviour. Running away from home.

Emotional Abuse

<u>Physical Signs</u>	<u>Behavioural Signs</u>
<ul style="list-style-type: none">• A failure to thrive or grow.• Sudden speech disorders.• Developmental delay, either in terms of physical or emotional progress.	<ul style="list-style-type: none">• Neurotic behaviour, e.g. hair twisting, rocking.• Being unable to play.• Fear of making mistakes.• Self harm.• Fear of parent being approached regarding their behaviour.

Sexual Abuse

<u>Physical Signs</u>	<u>Behavioural Signs</u>
<ul style="list-style-type: none">• Pain or itching in the genital/anal areas.• Bruising or bleeding near genital/anal areas.• Sexually transmitted diseases.	<ul style="list-style-type: none">• Sudden or unexplained changes in behaviour, e.g. becoming aggressive or withdrawn.• Fear of being left with a

<ul style="list-style-type: none"> • Vaginal discharge or infection. • Stomach pains. • Discomfort when walking or sitting down. • Pregnancy . 	<p>specific person or group of people.</p> <ul style="list-style-type: none"> • Having nightmares. • Running away from home. • Sexual knowledge which is beyond their age or development age. • Sexual drawings or language. • Bedwetting. • Saying they have secrets they cannot tell anyone about. • Self harm or mutilation, sometimes leading to suicide attempts. • Eating problems such as overeating or anorexia.
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Neglect

<u>Physical Signs</u>	<u>Behavioural Signs</u>
<ul style="list-style-type: none"> • Constant hunger, sometimes stealing food from others. • Constantly dirty or 'smelly'. • Loss of weight, or being constantly underweight. • Inappropriate dress for the conditions 	<ul style="list-style-type: none"> • Complaining of being tired all the time. • Not requesting medical assistance and/or failing to attend appointments • Having few friends. • Mentioning them being left alone or unsupervised.

Note: The above chart is intended to serve as a guide, it is neither exhaustive nor definitive. Any one sign doesn't necessarily mean your child has been abused, but the presence of several suggests you begin asking questions and stay alert.

Important –factors other than abuse underlying behaviour

There may be other reasons that a child or young person is exhibiting some of the signs and indicators set out above. It is important to remember that many children and young people will exhibit some of these signs and indicators at some time, and the presence of one or more should not be taken as proof that abuse is occurring. There may well be other reasons for changes in behaviour such as death, birth of a new baby in the family, relationship problems between parents/carers, etc.

General

Photography

There is evidence that some people have used activities and events involving children as an opportunity to take inappropriate photographs or video footage. Staff and volunteers from organizations at any event should be vigilant at all times and any person using cameras or videos should be monitored to ensure that they are acting appropriately.

It is recommended that the names of children should not be used in photographs or video footage, except with the express permission of the child's parent or carer(s), or their carer(s) or legal guardian if they are adjudged to be incapable of self-determination.

Who Might Abuse?

Abuse may be perpetrated by a wide range of people, including relatives and family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates, people who deliberately exploit children.

Be mindful that abuse may be perpetrated by someone in a position of power or authority who uses his or her position to the detriment of the health, safety, welfare and general wellbeing of a child.

Where Might Abuse Occur?

Abuse can occur in any setting.

Abuse – What to do about it

Important – Duty to inform

It is important that all staff and volunteers understand that they are not responsible for deciding whether or not abuse has occurred. However, staff and volunteers do have a duty of care to report any suspicions they may have. Refer to the Children's Act 1998.

**It is not the Representative's job to judge or investigate,
but it is the Representative's job to inform.**

Responding to concerns and allegations

These procedures inform all staff and volunteers of what actions they should take if they have concerns or encounter a case of actual, alleged or suspected child abuse.

Each organization should consider assigning a Protection Officer

The Protection Officers (PO) are:

Name	Post	Work Tel.	Mobile

The designated persons above are responsible for dealing with reports or concerns about the protection of children appropriately. The relevant contact numbers for Child and Family Services, the Police and other useful contacts are included in this document.

Response situations

In general there are several situations that staff or volunteers may encounter:

- Responding to a child disclosing abuse.
- Responding to discovery of abuse.
- Responding to reasonable suspicion that abuse has taken place
- Responding to third party allegations or concerns about a staff member or volunteer.
- Responding to third party allegations or concerns about any other person, e.g. parent, carer, other service user.

Specific Response Procedures

The following specific procedures should be followed.

Abused children will often only discuss abuse with people they trust and with whom they feel safe. By listening and taking seriously what the child is saying, you are already helping the situation.

Responding to disclosure of abuse by child

When dealing with a disclosure, do this:

- Stay calm and allow silence in the conversation so that the child can take his or her time.
- Listen carefully to what is said.
- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others- do not promise to keep secrets or that the information will be kept confidential.
- Allow the child to continue at their own pace.
- Ask questions for clarification only, and at all times avoid asking questions that suggest a particular answer – be very careful not to ask leading questions. Ask only open-ended questions like, “What happened next?” or “It’s okay to tell me more. You can tell me whatever you want. (Questions can come across as judgement and can confuse the child’s memory of events.)
- Say, “I believe you, what happened is not your fault.”
- Say, “I’m the adult and it’s my job to protect you.”
- Reassure and praise the child that they have done the right thing in telling you. Tell the child “This takes a lot of courage. I’m very proud of you for telling me.”
- Tell them what you will do next and with whom the information will be shared.
- Don’t make broad promises about the future.
- Be careful showing great anger towards the offender as the child may have mixed feelings about the offender because the offender is often someone trusted or even loved by the child. Showing anger towards the offender can sometimes feel out-of-control or threatening to the child. Also the child may already feel guilty. Expressions of disgust or anger about the offender may feel like judgment to the child, as if, “I must be terrible, too.”
- Contact Child & Family Services and/or the Police and inform the Protection Officer (PO), if the organization has one.
- Record in writing on a Department of Child & Family Services Referral Form (included) all the details that you are aware of and what was said using the child’s own words, as soon as possible. In order to record you should include:
 - The date and time.
 - The child’s name and address where the child lives and date of birth if known.
 - The nature of the allegation.
 - A description of any visible injuries.
 - Your observations – e.g. a description of the child’s behaviour and physical and emotional state.

- Exactly what the child said and what you said. Record the child's account of what has happened as closely as possible.
- Tell what behaviors you've observed in the alleged offender.
- Tell what access the alleged offender has to the child.
- Tell where you are, where the child is, and where the offender is, if known.
- Any action you took as a result of your concerns e.g. who you spoke to and resulting actions. Include names, addresses and telephone numbers.
- Sign and date what you have recorded.
- You must inform the relevant authorities, i.e. Child & Family Services and/or the Police, as appropriate.

Remember, when dealing with any form of allegation, expression of concern or disclosure of abuse do not:

- Appear shocked, horrified, disgusted or angry.
- Ask too many questions or press for individual details (it is not your duty to undertake the investigation).
- "Put words in their mouth".
- Make comments or judgement other than to show concern.
- Do not give the promise of confidentiality.
- Confront the abuser.

Preserving evidence

- In most cases you will not have to do anything except record the events and inform people. However, there may be rare occasions when you have to:
- Make a written record of answer phone messages and date and sign them.
- In cases of physical or sexual assault encourage the person not to wash where they might have a medical examination.
- In the case of oral sex encourage the person not to drink until they have been seen by the police or forensic doctor.
- If you are waiting for the police to arrive it is important that things are left where they are, do not touch what you do not have to.

Witnessing abuse

In situations of immediate danger, take urgent action by calling the emergency services by dialling 911. It may also be appropriate to contact the victim's medical doctor, bearing in mind that emergency services may benefit from the doctor's knowledge of the victim's medical history.

You may wish to challenge the person who is abusing the individuals and try to persuade them to stop whilst ensuring your personal safety is not compromised. Remember to have regard for your own safety, leave the situation if you feel you are in danger.

Call 911, Child & Family Services & or the Police to report the incident. Contact your Protection Officer, if your organization has one assigned.

Responsibilities towards victims of abuse

- Ensure the child is safe and supported.
- Consider whether the individual requires urgent medical attention and if so make arrangements with an explanation to health staff that abuse is suspected.

Confidentiality

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only, i.e.: Protection Officer, Child & Family Services, the Police.

Where a crime may have been committed the Police must always be contacted, and if in any doubt, they should still be notified so that they can make that judgement.

PROTECTION INCIDENT REPORTING FORM

All information will be treated in strict confidence

Date: ___/___/20___ Time: _____

Venue: _____

Name of Child: _____ Age: _____

Address(if known): _____

Postcode: _____

Telephone Number (if known): _____

Next of Kin: _____

Address (if different from above):

Postcode: _____

Telephone Number (if different from above): _____

Are you reporting your concerns or passing on those of someone else?

Please give details:

Please give a brief description of what has prompted the concerns including any specific incidents, places, dates, times etc:

Any physical signs? Behavioural signs? Indirect signs?

Community Resources for Responding to Child Sexual Abuse in Bermuda

To Report Abuse

Call **911** if in immediate danger

Child & Family Services at **278-9111** or **294-5882**

Bermuda Police Service at **295-0011** or **247-1744** www.bermudapolice.bm

To Report a Cybercrime – 800-8477 www.cybertips.bm

Helplines

Child & Family Services Kids Hotline (9:00 am – 5:00 pm) 278-9111

Child & Family Services Hotline (After hours) 295-0011

(This is the Police Service - they will contact a social worker from Child & Family Services)

Child & Adolescence Services (MAWI) 239-6344 or 236-3770

Centre Against Abuse Domestic Violence 297-8278

& Sexual Assault Victim 24 hour Hotline (male & female)

The Family Centre (9:00 am – 6:00 pm) 232-1116

The Coalition for the Protection of Children 295-1150

Sexual Assault Response Team (SART) 911

Additional Resources for Healing

Treatment Providers

Cardinal House 296-2903

The Association of Diagnostic and Psychological Services 295-7766

Benedict Associates 295-2070

Solstice 292-3456

Patterns 296-7288

Children's Act 1998

2. Interpretation

"child" means ... a person who is under the age of 18 years

"Director" means the Director of Child and Family Services

PART III - ABUSE OF CHILDREN

19. Mistreatment, abandonment etc of child

Any person who, having the care and control of, or parental responsibility for, any child, wilfully abuses, mistreats, neglects, deserts or abandons the child or causes or procures the child to be abused, ill - treated, neglected, deserted or abandoned is guilty of an offence and is liable on summary conviction to a fine not exceeding \$3,000 or imprisonment for a term not exceeding 6 months.

20. Mandatory reporting of child abuse

(1) Every person who has information indicating that a child is suffering or has suffered significant harm, shall forthwith report that information to the Director.

(2) Notwithstanding subsection (1) or any statutory provision, a person who performs professional or official duties with respect to a child, including —

(a) a physician, nurse, dentist, pharmacist, psychologist or other health care professional;

(b) a school principal, teacher, counsellor, social worker, youth or recreational leader, member of the clergy or child care worker; or

(c) a police officer, probation officer or youth care worker, who, in the course of that person's professional or official duties, has reasonable grounds to suspect that a child is suffering or has suffered significant harm, shall forthwith report the suspicion to the Director together with the information upon which it is based.

(3) Subsections (1) and (2) apply whether or not the information is confidential or privileged except that nothing in this section shall be taken to affect or abrogate the privilege that attaches to a communication between a solicitor and his client.

(4) No civil action lies against a person by reason of that person reporting information pursuant to subsection (1) or (2) unless the reporting of that information is done falsely and maliciously.

(5) Every person who —

(a) contravenes subsection (2) or (6); or

(b) falsely and maliciously reports information to the Director indicating that a child is suffering significant harm or is suspected thereof, is guilty of an offence

and is liable on summary conviction to a fine not exceeding \$3,000 or imprisonment for a term not exceeding 6 months.

(6) No person shall reveal or be compelled to reveal the identity of a person who has reported information to the Director pursuant to subsection (1) or (2).

(7) On receiving a report pursuant to subsection (1) or (2) the Director shall —
(a) cause an investigation to be made into the circumstances of the case;
(b) arrange for the provision of such child care services as he considers necessary; and
(c) make application for such order under this Act as he considers appropriate.

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