



Child Protection Policy

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1. DEFINITIONS

1.1 Child

A 'child', as defined by the United Nations Convention on the Rights of the Child, is 'any person under the age of 18 years'. It should be acknowledged, however, that children are not a homogenous group who can be defined simply by their biological age. It is important that other factors - such as their developmental age, level of maturity, individual abilities, and current circumstances - are taken into account, when we respond to their needs and strive to realise their rights.

1.2 Child abuse

There are many forms of abuse, although a child may well be a victim of more than one, including:

1. **Physical abuse** or non-accidental injury can be defined as injuries inflicted by the caretaker. These are often (arbitrarily) rated as mild, moderate or severe.
2. **Child sexual abuse** is the use of a child for sexual gratification. Note that this is a broader term than child rape.
3. **Failure to thrive** due to nutritional deprivation is most commonly seen within the first two years of life. It is estimated that approximately 50% of all failure to thrive in this age category is due to maternal neglect.
4. **Intentional drugging** or poisoning takes place when parents give a prescribed drug that is harmful and not intended for children.
5. **Medical care neglect** occurs when a child suffers from a (chronic) disease and the condition worsens due to parental neglect of the condition. Children are completely dependent on their parents for medical care.
6. **Safety neglect** is present when there is a gross lack of supervision especially in the younger age categories.
7. **Emotional abuse** can be defined as the repeated blaming of the child for incidents, or the rejection of a child by its carers. Severe verbal abuse and berating are always part of the picture. This is a difficult condition to prove.
8. **Economic exploitation** is the deliberate misplacement, exploitation or wrongful temporary or permanent use of a child or youth's belongings or money.

In the majority of cases of child abuse the perpetrator is related, or at least known, to the victim. Adults working with children should note that children can abuse other children and they should watch out for and eradicate bullying, name-calling etc.

1.3 Orphans and Vulnerable Children

An '**orphan**' is 'a child who has no surviving parent caring for him or her after one of them has died' (Children's Act, 2005). This definition is sensitive to childcare and child rearing practices that are prevalent in South Africa, where significant numbers of children have been brought up in single parent (mainly female parent-headed) households. It is important to note that the definition makes no reference to the causes of orphan-hood.

'**Vulnerable children**' are defined as those whose survival, care, protection, or development may be compromised, due to a particular condition, situation, or circumstances which prevents the fulfilment of their rights. Lack of care, love, shelter, education, nutrition and psychosocial support are important elements that increase children's vulnerability.

1.4 Coordinators

A person who has the parental responsibility or right in caring for the child and who exercises that responsibility and right, i.e. the facilitators and grade leaders.
An Educarer employed by Vision AfriKa

1.5 Parent

Biological father or mother of a child.

1.6 Volunteer

A 'Volunteer' is a person who has offered their services without payment from Vision AfriKa to assist the programme coordinators r in the care of their children.

2. CHILD PROTECTION POLICY

2.1 Policy statement

1. An effective child protection policy is essential for the promotion of the health and development of children and to ensure a safe, secure environment.
2. This child protection policy recognises the importance of the rights and responsibilities of all children and role players. The success of the policy depends upon a partnership between all role players and on a commitment to promote the health and development of children.

2.2 Aims of the policy

Vision AfriKa's child protection policy aims:

To provide:

1. A welcoming and stimulating environment that is free from harm and allows children to develop to their full potential and where young people are aware of their entitlement to this health promoting environment.
2. An empowering environment that recognises the rights of a child, and enables all role players to recognise the rights of people, particularly in regard to confidentiality.
3. An environment in which all role players are listened to and that enables young children to voice any concerns they may have about violation of their rights.

To enable:

1. Children to recognise safe practices and to request help where necessary.
2. All role players to recognise the need for outside organisations' help and to support them to access this.
3. All role players to recognise and promote a safe environment, appropriate boundaries for themselves, the recognition of safe practices in others and a commitment to support the promotion of safe practices.

To support children who may have had harmful and hurtful experiences to safely re-engage in social, emotional and learning processes and to recognise the need for support from Vision AfriKa and its support resources.

2.3 Commitment

Vision AfriKa will ensure that the needs and rights of the children within their care are primary and central in identifying who needs to know, who needs to be involved, who needs to be engaged from outside organisations and when this should happen.

2.4 Framework

The framework of the Vision AfriKa Child Protection Policy is in line with the:

1. United Nations Convention on the Rights of the Child that has been ratified by South Africa
2. South African Constitution 1996
3. African Charter on the Rights of Children
4. United Nation General Assembly Special Session on HIV/AIDS (2001).

All role players will be made aware of their roles and responsibilities in providing a safe environment where everyone is listened to.

Vision AfriKa will provide guidance and advice regarding child protection, to enable all participants, coordinators and parents to provide a positive, safe environment that is free from harm and enables the (vulnerable) children to grow to their full potential.

Vision AfriKa will provide child-centred guidance and advice to programme coordinators and leaders/coordinators to look at the behaviour of the children – not from the perception of managing behaviour but the meaning of this behaviour to the child.

All the personal data of the child will be put in a secure place and only shared in confidence.

2.5 General guidelines for the protection of children

The following guidelines are intended to assist Vision AfriKa coordinators and volunteers in monitoring and supervising behaviours and interactions with children and to prevent those that may be inherently harmful to children, those used by child molesters to groom children and their parents, or that may create the conditions where abuse can occur more easily. These guidelines should also be used to make decisions about interactions with children in activities or programmes. When exceptions to the guidelines must be made, they should be reported to the Operations Manager of Vision AfriKa as soon as possible.

1. All coordinators and volunteers who work with children must agree to comply with the Guidelines for Appropriate Affection (Annexure D).
2. No person will be allowed to volunteer to work with children until the person has completed the necessary screening process and has been approved by Vision AfriKa.
3. Coordinators and volunteers are prohibited from the use, possession, distribution or being under the influence of alcohol or illegal drugs while participating in or assisting with programmes or activities for children.
4. Vision AfriKa coordinators and volunteers will respond to children with respect, consideration and equal treatment, regardless of sex, race, religion, sexual orientation, health status, culture or socio-economic status. They will portray a positive role model for children by maintaining an attitude of respect, patience and maturity. They will avoid even the appearance of favouritism.
5. One to one counselling with children will be done in an open space or other place where private conversations are possible but occur in full view of others.
6. Vision AfriKa coordinators and volunteers are prohibited from dating or becoming romantically involved with a child.
7. Vision AfriKa coordinators and volunteers are prohibited from having sexual contact with a child.
8. Vision AfriKa coordinators and volunteers are prohibited from possessing any sexually oriented materials (magazines, cards, videos, films, clothing etc) at work, except when it is expressly permitted as part of a pre-authorised educational programme, or in the presence of the children.
9. Vision AfriKa coordinators and volunteers are prohibited from discussing their sexual activities, including dreams and fantasies or discussing their use of sexually oriented or explicit materials such as pornography, videos or materials on or from the internet with children.
10. Vision AfriKa coordinators and volunteers are prohibited from sleeping in the same beds, sleeping bags, tents, hotel rooms or other rooms with children or youth unless the adult is an immediate family member of all

children in the bed, sleeping bag, tent, hotel room or other room. It is acceptable to have a number of adults sleeping in the same room with the children if they are participating in a camp.

11. Vision AfriKa coordinators and volunteers are prohibited from dressing, undressing, bathing or showering in the presence of children.
12. Vision AfriKa coordinators and volunteers are prohibited from using physical punishment in any way for behaviour management of children and youth. No form of physical discipline is acceptable. This prohibition includes spanking, slapping, pinching, hitting or any other physical force. Physical force may only be used to stop a behaviour that may cause immediate harm to the child or to others.
13. Vision AfriKa coordinators and volunteers are prohibited from using harsh language, degrading punishment, physical isolation or mechanical restraint such as a rope or tape for behaviour management.
14. Vision AfriKa coordinators and volunteers are prohibited from participating in or allowing adults or children to conduct any hazing activities – i.e. bullying or intimidating.

2.6 Prohibition of corporal punishment

Introduction

The South African Schools Act (SASA), 1996 (Act 84 of 1996) and the National Education Policy Act (NEPA), 1996 (Act 27 of 1996) ban corporal punishment from schools.

In line with policy, strict disciplinary action will be taken against those employees who administer corporal punishment and/or assault learners at WCED's educational institutions.

In view hereof, the following information and guidelines are provided.

Legislative framework

Various laws have been promulgated to give effect, assist and guide employees in refraining from administering corporal punishment:

- Constitution of the Republic of South Africa, 1996
- South African Schools Act, 1996 (Act 84 of 1996), as amended
- Employment of Educators Act, 1998 (Act 76 of 1998), as amended
- South African Council for Educators Act, 2000 (Act 31 of 2000), as amended
- Public Service Act, 1994 (Proclamation 103 of 1994), as amended
- National Education Policy Act, 1996 (Act 27 of 1996)
- WCED Abuse no more protocol document (2001, amended 2014)
- Children's Act, 2005 (Act 38 of 2005)
- Criminal Law (Sexual Offences and Related Matters) Amendment Act, 2007 (Act 32 of 2007), as amended
- SAPS National Instructions 3 of 2008 (Part 4)
- Ethical Code for Educators, South African Council for Educators (SACE)
- Abolition of Corporal Punishment Act, 1997 (Act 33 of 1997)

Definitions

Corporal punishment

Corporal punishment is defined as any deliberate act against a child that inflicts pain

or physical discomfort to punish or contain him/her. This includes, but is not limited to,

spanking, slapping, pinching, paddling or hitting a child with a hand or any other object; denying or restricting a child's use of the toilet; denying meals, drink, heat and

shelter; pushing or pulling a child with force; forcing the child to do exercise. It is,

therefore, not just about caning but also refers to an assault on a person (learner) in any manner whatsoever.

Assault

Assault is the unlawful and intentional application of force to the body of another person or threat of immediate personal force to another person in circumstances where the threatened person believes that the person who is threatening him/her has

the intention and power to carry out the threat. Therefore even a threat of assaulting a person, is regarded as assault in terms of the law.

Assault, in terms of legislation is defined as the unlawful and intentional application of force to a person, or a threat that such force will be applied. It is an unlawful attack,

or the threat thereof, upon the person of another through blows, physical mishandling or the use of weapons or objects.

Corporal punishment vs. assault

As indicated in the definitions above it is evident that all forms of corporal punishment shall, by implication be regarded as an act of assault. It should be understood that the WCED/Vision AfriKa takes disciplinary action in all cases of corporal punishment as if they are deemed acts of assault.

Forms of assault

The following are examples of forms of corporal punishment (assault) that are punishable:

- Any physical act which may cause discomfort or pain to the learner
- Using a stick/belt/cane or any object to threaten learners
- Intention to inflict bodily harm
- Threatening a learner
- Shaking a learner
- Any forms of torture
- Kicking
- Pinching
- Pulling of ears or any other body parts
- Poking at someone with a finger
- Any verbal onslaught, use of vulgar language, swearing, name-calling
- Insulting a learner with racial and/or sexual undertones

Note that premeditation makes the offence more serious and that self-defence and provocation may only influence the sanction, and not the guilty finding in a hearing.

Prohibition of corporal punishment

No employee may administer corporal punishment, as defined above, to a learner at any educational institution. Any employee who administers any form of corporal punishment is guilty of an offence and liable on conviction to a sentence which could be imposed for assault. An employee may not conduct or participate in any initiation practices against a learner at a school or in a hostel accommodating learners of a school. Any employee who is guilty of any of these practices, corporal punishment and/or assault will have disciplinary action instituted against him/her.

The prohibition of corporal punishment is intended to encourage a culture of nonviolence; of resolving conflict through dialogue and discussion and inculcating a sense of responsibility and self-discipline amongst all stakeholders in the school.

Consequences of administering corporal punishment or assault

The South African Schools Act prohibits corporal punishment and provides for any person who contravenes it to be guilty of an offence and liable on conviction to a

sentence which could be imposed for assault. Employees must therefore take note that the institution of disciplinary proceedings against them in terms of the Employment of Educators Act, 1998 (Act 76 of 1998) does not prevent the WCED or an individual from instituting criminal proceedings against them as required by law. In the case of educators, they will also be subjected to a disciplinary process by SACE.

The principal's responsibility

Principals are requested to inform their staff of the prohibition of corporal punishment and the subsequent consequences thereof. When a case is reported through the principal of the institution, he/she is compelled to inform the Directorate: Employee Relations, the district office and the district school social worker of the alleged transgressions immediately.

Under no circumstances should cases of corporal punishment be dealt with in terms of the informal disciplinary hearing procedure. All such cases should be heard in a formal disciplinary hearing.

It is the responsibility of the Management Committee of Vision AfriKa to investigate and determine the seriousness of the incident/case and whether the transgressor will be charged or not.

It will however be required from the principal to inform the learner's parents/guardians of the alleged incident.

Principals who do not conform to the steps outlined above will make themselves guilty of dereliction of duty which could lead to possible disciplinary action.

2.7 Review

This policy and its procedures will be regularly monitored and reviewed in accordance with changes in legislation and guidance on the protection of children.

3. SAFEGUARDS FOR CHILDREN

3.1 Screening and Selection

- 3.1.1. Any Vision AfriKa coordinator and volunteers who regularly work with and around children shall be screened, selected and approved utilising at least the following:
1. Completed application form (See Annexure A – Sample of an application form).
 2. An individual interview with the applicant.
 3. Acknowledgement and signing of the code of conduct – (See Annexure B & C - Code of conduct document and Acknowledgement, Release and Signature).
 4. At least two references from people outside the organisation who are not related to the applicant and who have known her/him, for at least two years.
 5. Applicants will be checked to ensure that they are not on the National Child Protection Register.
- 3.1.2. All information gathered about an applicant will be fully reviewed and evaluated to determine, in consultation with others as necessary, whether or not the person is appropriate to work with children.
- 3.1.3. Vision AfriKa staff must have a personnel file that is kept where other important records are kept.
- 3.1.4. The Employee or Volunteer is responsible for organising a police clearance check and providing it to Vision AfriKa.

3.2 Education and Training Requirements

- 3.2.1. Child abuse prevention education and training will be conducted for all staff members who regularly work with or around children.
- 3.2.2. Each person will be trained as per the requirements of his /her portfolio.

3.3 Monitoring and Supervision of Programme

The monitoring and supervision of programmes and activities involving children is important for safeguarding children. A Task Team from Vision AfriKa will monitor and supervise the behaviour of adults and other children with children so that:

- 3.3.1. Inappropriate behaviour and interactions that are potentially harmful can be detected and stopped. (See Annexure F - Indicators of Abused Children)
- 3.3.2. Children are not given illegal drugs or alcohol
- 3.3.3. Other behaviours and interactions that are not necessarily harmful in and of themselves, but are the same behaviours and interactions known to be used by those who abuse children or that provide the privacy molesters need in order to abuse children, are monitored. These behaviours could include holding children over the age of three on the lap, transporting a child alone etc.

3.3.4. The monitoring and supervision will be guided by the General Conduct for the Protection of Children is followed (See Annexure D – Guidelines for Appropriate Affection)

4. RESPONDING TO PROBLEMS

4.1 Reporting inappropriate behaviours or policy violations with children

4.1.1. When Vision AfriKa personnel and volunteers observe any inappropriate behaviour that is inconsistent with the Guidelines for Appropriate Affection or which may violate any provision of this Policy for the Protection of Children from Abuse, they must immediately report their observations. Such inappropriate behaviours or possible policy violations that relate to interactions with children should be reported in one of the following ways:

1. A telephone call or meeting with the Operations Manager of Vision AfriKa.
2. Submission of a Notice of Concern (Annexure E – Notice of Concern).

4.1.2. All reports of inappropriate behaviour or policy violations with children will be taken seriously.

4.1.3. All reports of inappropriate behaviour or policy violation with children must be reported immediately.

4.2 Reporting Suspected Abuse of Children

4.2.1. All role players, such as social workers, teachers and nurses, are required by this policy to report known or suspected abuse of children to the appropriate state authorities as stipulated in the Children's Act of 2005.

4.2.2. In the case of rape, the incident needs to be reported immediately and the process reported and completed within 72 hours at the very latest, because of the need for medical intervention.

4.2.3. Failure to report suspected abuse of children may be a crime. Reports may be made confidentially or anonymously. Simply stated "in good faith" means that the person submitting the report believes what he or she is reporting to be true.

4.2.4. In addition to reporting to the state authorities, Vision AfriKa are required to report any suspected or known abuse of children that may have been perpetrated by the staff, directly to the Operations Managers so that immediate and proper steps may be taken to ensure the safety of alleged victims.

4.2.5. Vision AfriKa management and/or staff will cooperate with any investigation by state authorities to the fullest extent and inform authorities that a concurrent internal investigation will be directed by Vision AfriKa Management.

ANNEXURE A SAMPLE OF APPLICATION FORM

INSTRUCTIONS

Please complete all of the questions accurately and fully. Attach additional sheets if needed.

PERSONAL DATA

Name: _____

Physical Address: _____

Postal Address: _____

City: _____

Province: _____ Code: _____

How long at current Address: _____

Home Phone: _____ Work Phone: _____

Email Address: _____

Driver Licence Number: _____

Nationality: _____ ID Number: _____

Please list your addresses in the past five years:

What interests you about the position for which you are currently applying?

What has prepared you for the position for which you are applying?

EMPLOYMENT HISTORY

Current Employer

Company Name: _____

Address: _____

City: _____

Province: _____ Code: _____

Immediate Supervisor Name: _____

Immediate Supervisor Phone Number: _____

Position Held: _____

Dates of Employment: _____

Reason for Leaving: _____

Previous Employer

Company Name: _____

Address: _____

City: _____

Province: _____ Code: _____

Immediate Supervisor Name: _____

Immediate Supervisor Phone Number: _____

Position Held: _____

Dates of Employment: _____

Reason for Leaving: _____

Any Other Employers

Company Names:

Volunteer Experience:

Include all experience working with children or youth:

Organisation: _____

Contact: _____

Phone: _____

Duties: _____

Dates: _____ From: _____ To: _____

Any other Volunteer Experience:

Educational History:

Name of School: _____

Address: _____

City: _____ Province: _____ Code: _____

Name of Degree: _____

Courses Completed: _____

Name of School: _____

Address: _____

Professional Reference:

Name: _____

Address: _____

City: _____ Province: _____ Code: _____

Daytime Phone: _____

How long have you known this person? _____

Relationship to you: _____

Name: _____

Address: _____

City: _____ Province: _____ Code: _____

Daytime Phone: _____

How long have you known this person? _____

Relationship to you: _____

Personal Reference:

Name: _____

Address: _____

City: _____ Province: _____ Code: _____

Daytime Phone: _____

How long have you known this person? _____

Relationship to you: _____

Name: _____

Address: _____

City: _____ Province: _____ Code: _____

Daytime Phone: _____

How long have you known this person? _____

Relationship to you: _____

Family Reference:

Name: _____

Address: _____

City: _____ Province: _____ Code: _____

Daytime Phone: _____

How long have you known this person? _____

Relationship to you: _____

Name: _____

Address: _____

City: _____ Province: _____ Code: _____

Daytime Phone: _____

How long have you known this person? _____

Relationship to you: _____

ANNEXURE B
CODE OF CONDUCT FOR THE PROTECTION OF CHILDREN

I agree to do my best to prevent abuse and neglect among children involved in my care.

I agree not to physically, sexually, or emotionally abuse or neglect a child.

I agree to comply with the policies for General Conduct for the Protection of Children defined in the Policies for the Protection of Children.

I agree to Comply with the Guidelines for Appropriate Affection with children.

In the event that I observe any inappropriate behaviour or possible policy violation with children, I agree to immediately report my observations.

I acknowledge my obligation and responsibility to protect children and agree to report known or suspected abuse of children to the Vision AfriKa Social Worker in accordance with the Child Protection Policy.

I understand that Vision AfriKa will not tolerate abuse of children and I agree to comply in spirit and in action with this position.

Signature

Date

ANNEXURE C

ACKNOWLEDGEMENT / RELEASE AND SIGNATURE

To the best of my knowledge, the information contained in this application is complete and accurate. I understand that providing false information is grounds for not hiring me or choosing me for a volunteer position or for my discharge if I have already been hired or chosen.

I authorise any person or organisation, whether or not identified in this application, to provide any information concerning my previous employment, education, driving record, criminal conviction record, sexual offender registry or other qualifications for my employment or volunteering, I also authorise Vision AfriKa to request and receive such information.

If hired or chosen, I agree to be bound by Vision AfriKa's policies and procedures, including but not limited to its Policies for the Protection of Children from Abuse and Code of Conduct for the Protection of Children. I understand that these may be changed, withdrawn, added to or interpreted at any time at the sole discretion of Vision AfriKa and without prior notice to me.

I have read and understand the above provisions.

SIGNATURE: _____

DATE: _____

ANNEXURE D

GUIDELINES FOR APPROPRIATE AFFECTION

Vision AfriKa is committed to creating and promoting a positive, nurturing environment to protect our children from abuse. When creating safe boundaries for children, it is important to establish what types of affection are appropriate and inappropriate; otherwise that decision is left to each individual. Stating which behaviours are appropriate and inappropriate allows Vision AfriKa personnel to comfortably show positive affection at work and yet identify individuals who are not maintaining safe boundaries with children.

These guidelines are largely based on avoiding behaviours known to be used by child molesters to groom children and their parents for future abuse. They are also in place to protect the children, but also to protect staff and volunteers from any situations that might be misinterpreted by others. The following guidelines are to be carefully followed by all role players working around or with children. There are many ways to demonstrate affection, which is an important part of programmes for children, while maintaining positive and safe boundaries.

Some positive and appropriate forms of affection are listed below:

- Brief hugs
- Pats on the shoulder or back
- Handshakes
- "High – fives" and hand slapping
- Verbal praise
- Touching hands, faces, shoulders and arms of children
- Sitting beside small children
- Kneeling or bending down for hugs with small children
- Holding hands during prayer
- Pats on the head when culturally appropriate.

The following forms of showing affection for children are generally inappropriate because many of them are the behaviours that child molesters use to groom children and their parents for later molestation or can be in and of themselves, sexual abuse.

- Inappropriate or lengthy embraces
- Kisses on the mouth
- Holding children over three years old on the lap
- Touching bottoms, chests or genital areas other than for appropriate diapering or toileting of infants and toddlers
- Showing affection in isolated areas such as bedrooms, closets, staff only areas or other private rooms
- Occupying a bed with a child or youth
- Touching knees or legs of children
- Wrestling with children or youth
- Tickling children
- Piggyback rides
- Any type of massage given by a child to an adult
- Any type of massage given by an adult to a child
- Any form of unwanted affection
- Comments or compliments (spoken, written or electronic) that relate to physique or body development.
- Snapping bras or similar touching of underwear whether or not it is covered by other clothing
- Giving gifts or money to individual children
- Private meals with individual children.

ANNEXURE E
CONFIDENTIAL NOTICE OF CONCERN

Individual(s) of Concern: _____

Date of occurrence: _____

Time of occurrence: _____

Type of concern:

- Inappropriate behaviour with a child
- Policy violation with a child
- Possible risk of abuse
- Other concern

Describe the situation: What happened, when it happened, who was involved, who was present, and who was notified? If reported to the State, what was their recommendation about investigating? Attach additional sheet if needed.

Has this situation ever occurred previously? Attach additional sheets if needed.

What action was taken? How was the situation handled, who was involved, who was questioned, were the police called? Attach additional sheets if needed.

What is the follow-up plan? Does anyone else need to be notified? Will the situation need monitoring? Would you like someone to call you to discuss this situation?

SUBMITTED BY: _____

Telephone Number: _____

Location and Address: _____

SIGNATURE: _____

REVIEWED BY: _____

DATE: _____

Have you ever been accused of physically, sexually or emotionally abusing a child or an adult?

YES

NO

If yes, please explain:

ANNEXURE F INDICATORS OF ABUSE

REMEMBER:

- It is important to remember this list is not definitive or exhaustive.
- Any of these signs or behaviours has to be seen in the context of the child's whole situation and in combination with other information related to the child and his/her circumstances. There can also be an overlap between different forms of abuse.
- It is generally a cluster of these indicators that would alert you to something being wrong.
- This is not a checklist.

Physical Abuse

- Unexplained injuries or burns, particularly if they are recurrent.
- Improbable excuses given to explain injuries.
- Refusal to discuss injuries.
- Untreated injuries, or delay in reporting them.
- Excessive physical punishment.
- Arms and legs kept covered in hot weather.
- Avoidance of swimming, physical education etc.
- Fear of returning home.
- Running away.

When considering the possibility of non-accidental injury it is important to remember that the injuries may have occurred for other reasons. Among the most important are:

- Genuine accidental injuries, which are common. The nature and site of bruising relative to the child's age is important.
- Bleeding and clotting disorders.
- Mongolian blue spots which occur naturally in Asian, Afro-Caribbean and Mediterranean children.
- Skin disorders e.g. impetigo.
- Rare bone diseases e.g. brittle bones.
- Swelling or dislocation of the eyes caused by tumour.
- Undiagnosed birth injury e.g. fractured clavicle.
- Medical advice must be sought in all cases.

Fictitious order by proxy/Munchausen's syndrome by proxy

- This is a type of child abuse whereby a parent or carer fakes the symptoms or deliberately induces illness in a child.

Signs of possible physical neglect:

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Frequent lateness and/or unexplained non-attendance at school
- Untreated medical problems
- Low self esteem
- Poor peer relationships
- Stealing
- Significant lack of growth
- Weight loss

- Hair loss
- Poor skin or muscle tone
- Circulatory disorders.

Signs of possible emotional abuse:

- Low self-esteem
- Continual self-deprecation
- Sudden speech disorder
- Significant decline in concentration
- Immaturity
- "Neurotic" behaviour (e.g. rocking, head banging)
- Self-mutilation
- Compulsive stealing
- Extremes of passivity or aggression
- Running away
- Indiscriminate friendliness.

Signs of the sexually abused child

Not all children are able to say that they have been sexually assaulted. Changes in a child's behaviour may be a signal that something has happened. It is important to remember that in sexual assault there may be no physical or behavioural signs.

NB A child who is distressed may have some of these signs that should alert you to the fact that there is a problem. It is the combination and frequency of these signs that may indicate sexual abuse. Always seek advice. Try to notice all changes in usual behaviour.

Behavioural

- Lack of trust in adults or over familiarity with adults
- Fear of a particular individual
- Social isolation – withdrawal and introversion
- Sleep disturbances (nightmares, bed wetting, fear of sleeping alone, needing a night light)
- Running away from home
- Girls taking over the mothering role
- Sudden school problems, e.g. Falling standards, truancy
- Reluctance or refusal to participate in physical activity or to change clothes for games or to take part in swimming
- Low self esteem
- Drug, alcohol or solvent abuse
- Displays of sexual knowledge beyond the child's age e.g. French kissing
- Unusual interest in the genitals of adults or children or animals
- Fear of bathrooms, showers, closed doors
- Abnormal sexual drawings
- Fear of medical examinations
- Developmental regression
- Poor peer relationships
- Over sexualized behaviour
- Compulsive masturbation
- Compulsive cleaning/washing
- Stealing
- Irrational fears
- Psychomatic factors, e.g. recurrent abdominal or headache pain
- Sexual promiscuity
- Eating disorders.

Physical/Medical

- Sleeping problems, nightmares, fears of the dark
- Bruises, scratches, bite marks to the thighs or genital areas
- Anxiety/depression
- Eating disorder, e.g. anorexia nervosa or bulimia
- Discomfort/difficulty in walking or sitting
- Pregnancy – particularly when reluctant to name father
- Pain on passing urine, recurring urinary tract problem, vaginal infections or genital damage
- Venereal disease/sexually transmitted diseases
- Soiling or wetting in children who have been trained
- Self-mutilation, suicide attempts
- Itch, soreness, discharge, unexplained bleeding from the rectum, vagina or penis
- Stained underwear
- Unusual genital odour.