



1.0 Child Protection Policy

The Child Protection Policy is based on the concepts and principles underpinning the U.N. Convention on the Rights of the Child.

Relief Foundation Charitable Trust aims to ensure the protection of all young people who are involved in any way with the Organisation and to give staff and volunteers a clear structure in which to work toward with the Organisation. Relief Foundation Charitable Trust is ultimately responsible for the conduct of its employees and volunteers during the course of their work. Workers are responsible for the safety of children under their direction or in their care.

Relief Foundation Charitable Trust works towards ensuring that every child is happy and safe in a community that cherishes children and their learning.

1.1 Definition and Rights of a Child

Definition of a Child

Child Protection Procedures apply to all children and young people under the age of 18.

Rights of a Child

- Every child should be treated as an individual.
- Every child should have the right to affection, love and understanding
- Every child has the right to express his/her views about any issues or decisions affecting or worrying him/her.
- Every child has the right to be protected from all forms of abuse, neglect and exploitation.
- Every child has the right to enjoy his/her rights regardless of race, colour, religion, age, gender, sex or disability.

1.2 Recognising and Reporting Suspected Abuse

1.2.1 Definition of Child Abuse

'Child abuse and neglect' is a generic term encompassing all ill treatment of children including serious physical and sexual assaults as well as cases where the standard of care does not adequately support the child's health or development.

Children may be abused or neglected through the infliction of harm, or through the failure of Relief Foundation Charitable Trust to prevent harm.

Abuse can occur in a family or an institutional or community setting. The perpetrator may or may not be known to the child.

1.2.2 Categories of Abuse

Physical Abuse

Physical abuse may take many forms e.g. hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child.



It may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child. This unusual and potentially dangerous form of abuse is now described as fabricated or induced illness in a child.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent effects on the child's emotional development and may involve:

- Conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- Imposing developmentally inappropriate expectations.
- Causing children to feel frightened or in danger e.g. witnessing domestic violence.
- Exploitation or corruption of children.

Some level of emotional abuse is involved in most types of ill treatment of children, though emotional abuse may occur alone.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening and includes penetrative (i.e. vaginal or anal rape or buggery) and non penetrative Act.

It may also include non-contact act, such as involving children in looking at, or in the production of pornographic materials, watching sexual acts or encouraging children to behave in sexually inappropriate ways.

Neglect

Neglect involves 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 and development.

This may involve failure to provide adequate food, shelter or clothing, failure to protect from physical harm or danger or failure to ensure access to appropriate medical care or treatment. It may also include neglect of a child's basic emotional needs.

1.3 Delay in normal growth and development

A staff member or a volunteer may notice evidence of significant failure of child to reach normal growth and development. This category only applies following medical diagnosis.

What Should Raise Suspicion?

1. Obvious, non-accidental marks or injuries.
2. Injuries of different ages.
3. Injuries in very young children.
4. Features of general neglect of the child's physical or emotional needs.
5. Delay in parents seeking medical attention for their child.
6. Conflicting explanations or inconsistent report of:
 - medical treatment received
 - reasons for marks/injuries
 - reasons for absence from school or medical appointments.
7. Inappropriate behaviour (including sexualized play or activity) or demeanour of the child or parent.
8. Usual illness suggestive of a fabricated or induced origin.
9. Child's name may already be on Child Protection Register.



Concerns about the welfare of children may come to notice in a variety of ways, and not all of the concerns indicate that a child may be at risk. Evidence of a child not having reached normal growth and development does not necessarily have to be an abuse. It may be due to extreme conditions at home due to which the child might not have received sufficient nutrition from the food taken daily. Care must be taken to ascertain these details before concluding it as abuse. In certain cases, the parents or the adult who takes care of the child may not be aware of such deficiency in nutrition and may require guidance.

1.3.1 What to do upon suspicion or disclosure

Do's	Don'ts
Stay calm	Don't panic. It is extremely unlikely that the child is in immediate danger.
Listen, hear and believe	Don't probe for more information. Questioning the child may affect how the disclosure is received at a later date.
Remember TED: Tell, Explain, Describe	
Give time to the child to say what they want	Don't make assumptions, don't paraphrase and don't offer alternative explanations
Reassure and explain that they have done the right thing in telling. Explain that only those professionals who need to know will be informed.	Don't promise to keep it a secret or that everything will be OK.
Act immediately on the procedure in this policy (see referrals section below).	Don't try to deal with it alone.
Record in writing what was said as soon as possible. Try to use the child's actions words/ phrases as far as you can.	Don't make negative comments about the alleged abuse.
Report to the designated representatives (see referrals section below).	Don't 'gossip' with colleagues about what has been said to you.
Record the report and action taken.	Don't make the child repeat the information unnecessarily.
Ask leading questions where the child is able to express freely using more words.	Do not ask closed ended questions

1.3.2 Referral

The responsibility for the investigation of child abuse lies with the respective district Child Welfare Committees that fall under the Juvenile Justice (Amended) Act of 2011 of the Department of Social Welfare. Where abuse is suspected referral will be made to the Chairperson of the district Child Welfare Committee or the Police in the area in which the child lives without delay by the member of staff directly concerned following consultation with the Chairperson of Relief Foundation to:

- outline their concerns
- be ready to provide any information regarding the child and family including names, dates of birth, family composition and any special needs of the child or other family members
- provide details regarding what action has already been taken
- provide any other relevant information

If the duty Social Worker confirms that this is a child protection situation, it must also be notified immediately.



1.3.3 Responsibility of the Manager/Co-ordinator

Managers/Coordinators should ensure that they and those they manage are aware of their responsibilities for the protection of children including:

- recognition of abuse
- procedures to be followed when abuse is suspected
- ensuring appropriate records are maintained and made available if requested by those involved in investigating suspected child abuse.
- ensuring appropriate staff are able to attend Child Protection Case Conferences when requested.
- ensuring that advice and support is available and that staff/volunteers have access to training.
- All staff will be supported during and after an investigation

1.3.4 Responsibility of the Staff

Staff and volunteers of Relief Foundation Charitable Trust have an important role in child protection. This includes:

- being aware of indicators of abuse and taking appropriate Action whenever abuse is suspected
- promoting positive child care practices to combat and prevent child abuse.
- offering ongoing support to children and families where investigations are in process or have been concluded.
- allowing the opportunity for parents/carers to disclose any doubts/anxieties/concerns with regard to their parenting skills and abilities to cope with situations

If abuse is suspected or disclosed the worker involved should always let the young person know that this will have to be passed on. If a worker or a volunteer of Relief Foundation Charitable Trust identifies child abuse in any of the project areas, then it needs to be immediately brought to the attention of the Chairperson who will determine the action to be taken on a case to case basis.

1.3.5 Following Referral

If appropriate, support should be made available to the child and his/her family. In addition Relief Foundation will:

- record details of any concerns relevant dates and times and any actions taken. Any written information will store in such a way to ensure that confidentiality is respected.
- be prepared to attend a Child Protection Case meetings or Child Welfare Committee meetings and provide a written report of its involvement with the child and family.
- be prepared to provide a statement to the police and in some circumstances to attend court and present its evidence.

1.4 Confidentiality

Staff and volunteers are in a unique position to build trusting relationships that will encourage children to confide in them.

A child's wish for information not to be shared may not be in keeping with safeguarding their welfare, which must be the paramount consideration. Care should be taken not to promise a child confidentiality. If a child discloses that he or she has been abused then the adult to whom he or she makes the disclosure must follow the required procedure: a promise should not be given to keep the information secret.



The child should, however, be reassured that the information will not be shared indiscriminately and will be passed on only in an effort to help the child. When a child has disclosed abuse, and is told that this information will be passed on, there is danger of the child retracting the disclosure. This usually reflects the level of anxiety the child feels about the consequences of the disclosure and should not be taken as an indication that the original disclosure was false. Unless and otherwise it is required, details of child should never be disclosed with anyone totally unconnected to the child or does not need to know. Identity of the child will have to be protected in every possible way.

1.5 Informing Children and Parents

Parents should be made aware of Relief Foundation Charitable Trust's responsibilities in respect of protecting children. Relief Foundation will conduct awareness programmes for parents and teachers on the seriousness of various forms of child abuse and how it needs to be handled, if identified, in every Relief Foundation's projects.

Children and their parents will be advised of the intention to refer concerns to the Social Work Services and/or the Police. However, consideration must be given to the safety of the child if the parents are informed and whether alerting them may prejudice any subsequent investigation. This will be of particular importance if the child indicates that the parent, relative or close family friend is the alleged perpetrator. The priority must be to protect the child from any possible repercussions.