

Soka Gakkai International Australia (SGIA) Child Safe Policy Summary

SGIA is committed to protecting the rights of children without reservation to uphold the dignity of humanity and afford every right each individual must be afforded as stated in the UN Declaration of the Rights of the Child and United Nations Human Rights Charter.

SGIA members, leaders and staff must be responsible for the protection of children from abuse and neglect and must report to senior leaders and (in very urgent cases) the relevant government authorities any such abuse or neglect whenever it is witnessed or information concerning abuse or neglect is received as per the SGIA Child Safe Policy.

SGIA requires of its volunteers and staff at all times to uphold the standards included in the SGIA Child Safe Policy (available at sgiaust.org.au).

SGIA requires all staff and volunteers who work with children to hold current Working With Children Checks (or equivalent checks required by local legislation) as required by state and territory laws. In addition, such people must undergo training as prescribed by the leadership of SGIA and undergo training in the SGIA Child Safe Policy.

SGIA leaders must check and confirm the safety of the environment in which children's activities are conducted and report or correct any issues or dangers discovered in accordance with the SGIA Risk Management Assessment clauses 5.0 & 5.1 of the SGIA Child Safe Policy.

The rights of the child must be held above any concerns for the name or status of SGIA and authorities must be included in all reporting of child abuse or neglect, while complying with the principles of procedural fairness summarised at clause 8.1 of the SGIA Child Safe Policy. The privacy of the child must be upheld throughout any process of reporting or inquiry.

Soka Gakkai International Australia Child Safe Policy

“The welfare of people must always be the starting point and final goal of every human endeavour. As such, it is unacceptable for religion, government or any ideological system to treat people as a means to an end.” - Daisaku Ikeda

This document must be read with the Appendix and Attachments taken into consideration in order to gain a full understanding of the obligations you and Soka Gakkai have in caring for children. For access to the attachments please email admin@sgiaust.org.au

1.0 Commitment

Soka Gakkai International Australia (**SGIA**) recognises the significance of human rights both as a foundation for our organisational goals and activities and also as a legal responsibility. We recognise the responsibility to the children who are involved in our activities as a matter of unquestionable seriousness and reflect this in the SGIA Child Safe Policy. We understand this to be a consistently ‘working’ document, reviewed and modified on a regular basis and as needed. The rights of the child are of paramount importance both to our organisation and the humanity’s future. SGIA is fully committed to preventing any accident or abuse that may befall a child within its activities and locations.

SGIA is committed to:

- Respecting the dignity and rights of all children
- The prevention of all possibilities of child abuse or accidents within its ability
- Fulfilling all our social, legal and moral responsibilities regarding child safety, abuse or neglect
- Ensuring a safe environment for children in all the activities of SGIA
- Providing appropriate professional access, support, non-judgemental engagement and guidance for any child victimised by abuse or neglect
- Informing all leaders, members and parents of the significance of child safety practices
- Ensuring appropriate checks, training and attitudes of those leaders with children in their care
- Ensuring inclusion of children from indigenous, culturally or linguistically diverse backgrounds and children with disabilities

1.1 SGIA Child Activity Description

The activities involving children or teenagers in SGIA can broadly be defined as uniform with some minor differences nationally. Our organisation has active members in all states, the ACT, Christmas Island and the Northern Territory. Children's and teenager's activities are held in Queensland, NSW, ACT, Victoria, South Australia and West Australia.

Predominantly activities are provided for the children and teenagers during our monthly meetings held at 10am in each State and NT on one Sunday each month although some states hold the children's meeting on a different day. These include religious prayers, games and reading.

The organisation provides two groups for these activities where the age groups require it. High School Group and Future Group (Ages from infants to year 6 primary students). These monthly activities are run by volunteers, usually young adults for the High School Group and more mature people for the Future Group.

Parents and guardians are welcome to attend though usually they are attending the monthly Buddhist meeting while the children are having their own activities. Any other activities are usually picnic or party style activities in which the children's parents or guardians are in attendance.

Numbers for each state vary from a handful to occasionally 20 or more children involved across the two groups. There is no cost and the children usually arrive and depart with their parents or guardians.

2.0 Standards of Behaviour and Practices for Child Safety in SGI Australia

Child safety is a priority within the leadership, staff and membership of SGIA. In accord with the philosophy of Nichiren Daishonin and the guidances of SGI President Daisaku Ikeda, the SGIA commits to protecting children in every aspect and further commits to constantly reviewing and updating our Child Safe Policy in accord with and where possible surpassing the relevant government standards across Australia.

2.1 Application of Policy

This Policy applies to all staff (including employees and independent contractors) and all volunteers involved in SGIA activities involving children.

2.2 Standards

All adults have responsibility to care for children, promote their welfare and protect them from any kind of abuse or neglect. Those volunteers and staff afforded the responsibility of caring for or conducting activities for children within

our SGIA activities must be people of the utmost character and commitment to child safety and well being. SGIA considers the appointment of these persons a matter of great importance and seriousness. The process of appointment must be made in accord with SGIA practices and in addition training and a Working with Children Check (or equivalent check required by local legislation) (**WWC Check**) must be undertaken prior to their assuming the responsibility.

The behaviour of those appointed to the responsibility of care and activities for children in SGIA must reflect the best practices of Buddhist humanism and be appropriate as examples to the children in their care. Neglect, inappropriate behaviour, manipulation, intolerance or abuse of any kind, and health and safety issues will be promptly investigated and may result in SGIA terminating its relationship with a person or removing the person appointed from their position or from the organisation. Further action may also be taken, including action by the relevant authorities.

Diligence must be observed in relation to any signs that the child may be in distress, show aspects of abuse or neglect in any way in accordance with the standards set out in this document and its attachments. Such signs must be reported or acted on appropriately. If you are unsure how to respond, you must seek advice and guidance from a senior leader as to the appropriate response. Failure to do so is a dereliction of the duty of care for the child and a breach of your obligations to SGIA.

While the duty of care is paramount, those responsible for children must avoid imparting fear or tension on the children unnecessarily. An atmosphere of safety, security and good humour must always be the aim of the activities.

SGIA commits to sharing information with parents, guardians, members and leaders regarding education in the need for awareness and action in response to the abuse or neglect of children.

When no volunteers are available the High School Group (**HSG**) and Future Group (**FG**) who have a current WWC Check, activities are to be either postponed until volunteers with a current WWC Check are available, or cancelled.

SGIA volunteers and staff are not child minders – we do not compare our practices with other countries but tailor our policies and activities to the needs and legal requirements of Australia and our resources. Our HSG and FG activities are for the benefit of the children in acquiring the attitudes and education of Buddhist Humanism in an environment of support and friendship.

This policy aims to avoid over-protectiveness or perception of over-protectiveness by the SGIA and emphasise concerns for the well being of the individual as the priority.

The inclusion of secular parties and organisations is paramount in order to ensure support of any victim of abuse or neglect and to ensure compliance with our legal obligations. In addition, SGIA will provide, when welcome, the support of the SGIA leaders and members.

2.3 Failure to disclose offence and failure to protect offence

In Victoria, it is a criminal offence to fail to disclose a reasonable belief that a sexual offence has been committed by an adult against a child (see: Attachment 1- Failure to Disclose).

In addition to such obligations, SGIA requires all people covered by this Policy to report any reasonable belief that child abuse or neglect has occurred. SGIA may terminate its relationship with or remove from their position and from the organisation any person found to be negligent in reporting abuse or neglect of any child involved in SGIA activities.

It is the policy of SGIA that any person to whom this Policy applies who becomes aware of an incident where child abuse or neglect has not been reported must report the abuse or neglect in accordance with the reporting procedure set out at section 6 below at the earliest possible time without consideration for the person who failed to report the incident.

In Victoria, a criminal offence may be committed where a person fails to protect a child from sexual abuse (see: Attachment 2- Failure to Protect).

In addition to any action taken by the relevant authorities, action may be taken by SGIA against a person to whom this Policy applies, including termination of its relationship with a person or removing them from their position and from the organisation, in relation to any failure to carry out inspections and other preventative matters associated with this Child Safe Policy where it is reasonable to believe that that child abuse or neglect may be occurring.

2.4 Code of conduct breaches

All people to whom this Policy applies must sign the SGIA Child Safe Code of Conduct.

Failure to comply with the SGIA Child Safe Code of Conduct may lead to SGIA terminating its relationship with the person or removing them from their position and from the SGIA and/or reporting to the relevant authorities.

(Attachment 3- SGIA Child Safe Code of Conduct)

2.5 Practices

As set out at section 6 of this Policy, HSG leaders and FG leaders, and any other person to whom this Policy applies must report to a senior leader any information disclosed to them that suggests that a child has been abused physically or sexually or has been neglected.

Any senior leader, having received such information, must notify the relevant authorities or seek advice from those authorities as to what action should be taken.

These disclosures include a child sharing their own circumstances or fears, the parent guardian relative or friend sharing information regarding abuse or neglect, your own observations or any physical signs. If the response of the senior leader is not sufficiently appropriate to the seriousness of the issue in your opinion you may contact the relevant authorities directly with your concerns.

FG and HSG leaders and any other person to whom this Policy applies must report any interactions they have been involved with, including speech, that may have caused concern or misunderstanding that the interaction was of a sort potentially covered by this Policy.

Privacy is paramount, so only those to whom the disclosure has been made and the persons involved in seeking support from authorities or others should be informed.

The person about whom any allegation of wrongdoing is made may also be informed of that allegation and permitted to respond at an appropriate time as determined by senior leaders and/or the relevant authorities. No discussion regarding the abuse or neglect reports outside of these persons should be engaged with.

3.0 Reported or Suspected Abuse or Neglect

3.1 How to respond to reported abuse or neglect

Any disclosure of abuse or neglect must be treated openly but neutrally: disclosures are not be doubted or denied, but also should not be endorsed or confirmed without proper investigation.

It is difficult for a victim of abuse or neglect to share their experience. Therefore your initial response is of great importance. Do not show fear or negative emotions, stay as reassuring and confident as possible while remaining neutral about the accuracy of the allegations made. Do not ask confronting questions. If you receive such disclosure you should behave in the following manner:

- Ask if you can include someone else they trust in this dialogue
- If you need to find someone to assist do NOT leave the child alone, take them with you or have them choose someone else THEY trust to stay with them while you find someone to share this disclosure with (this is for the sake of the child and yourself)
- Listen without judgement or intervention
- Express and reinforce that their experience is not their fault
- Let them know that procedures are in place and will be followed to investigate and respond to their situation, share the procedures with them if necessary
- Do not at this initial stage probe more deeply than the child voluntarily discloses; no direct questions or requests for more details
- Try to make the child feel safe; using a calm voice in responding to their needs, do not encroach physically in any way on their person.
- Do not frighten the child or heighten their anxiety; ensure they know that you are not doubting them (while remaining neutral about any allegations made), do not panic, do not express anger, do not make harsh physical movement, do not touch the child, make no demands, do not interrogate, allow pauses in the dialogue for them to gather or reflect on their thoughts and language, make suggestions calmly regarding sharing the information as per SGIA procedure
- Younger children (pre school) need your understanding in that:
 - they sometimes have limited language to convey their feelings and situation
 - may need extended time to respond or explain an answer to your questions
 - may be unaware that their interpretation of their experience is not the same as the way they have a right to be treated
 - cannot comprehend things in an adult like manner
- School age children need your understanding in that:
 - they may have difficulty with abstract ideas or complex questions
 - may not understand adult language
- When possible write down the child's report after the encounter (not during) in order to have a clear record of what was said using Attachment 4- Child Safe Report Form
- Follow the reporting practices at section 6 of this Policy as soon as practicable

3.2 How to respond to suspected abuse or neglect

In the circumstance when through your own observation or information you suspect abuse or neglect, the following is suggested in response.

- Record your concerns and where appropriate your observations and conversations using Attachment 4- SGIA Child Safe Report Form
- Regarding abuse or neglect, include any physical/emotional signs alerted you to the suspect abuse or neglect in the Child Safe Report Form
- Follow the reporting practices in section 6 of this Policy as soon as practicable
- In the case of abuse or neglect offer them your availability to listen should they wish to talk to someone
- If abuse is suspected, do not frighten the child or heighten their anxiety; ensure they know that you are not doubting them (while remaining neutral about any allegations made), do not panic, do not express anger, do not make harsh physical movement, do not touch the child, make no demands, do not interrogate, make suggestions calmly regarding sharing the information as per SGIA procedure

4.0 FG and HSG Appointment and Activities

Appointments of the HSG leaders and FG leaders must follow the same policy as the appointment of all other leaders in SGIA with the addition of:

- specific training in child safety and child safety best practices
- WWC Checks
- familiarisation with this SGIA Child Safe policy

Proposals for appointments to HSG and FG leadership are to be made at the highest level of leadership within the given State. The final decision in appointing those leaders is given by the Nationwide Executive leadership.

All activities conducted by the SGIA for HSG and FG must have in attendance two appropriately trained and appointed leaders. When such leaders are not available the activity must be postponed or cancelled until Leaders are available.

HSG and FG participants must not be left alone or allowed to wander away from the designated area for the activity without supervision and/or permission. A HSG or FG participant must never be left alone with only one adult while involved with the SGIA activity.

At regular intervals (not less than three monthly), leaders must inquire with the children in their care as to whether they are comfortable within the activities, whether they feel safe and are experiencing a sense of wellbeing during the activities. Leaders will liaise with each other to ensure that such inquiries are being made at the relevant intervals.

4.1 The HSG and FG leadership must follow this protocol when visiting the HSG and FG participants:

- They must have the permission of the parent or guardian before contacting the FG or HSG member by phone, text, facebook, instagram or any other medium
- They must meet at a place agreed to by the parent or guardian
- There must be two HSG or FG leaders present at any visit
- The parent or guardian must have free access during the visit
- Appropriate behaviour of respect and maturity must be observed if contacting the FG or HSG members by any medium after the parent or guardian gives permission for such contact
- FG and HSG leaders must refrain from overzealous or too frequent contact with the HSG or FG members
- Any photography or video recording must have the signed permission of the parent or guardian prior to using the photography or video in the SGIA publications; use Attachment 5- SGIA Image Use Permission Form
- Phones should not be used except for essential communication during the FG and HSG meetings to ensure a safe and private environment for children

4.2 Training

Training sessions on child safety will be conducted with a senior leader for all current and future HSG and FG leaders. (Also see: Attachment 6- Responding to Children)

In addition all HSG leaders and FG must undertake the Bravehearts training program (SGIA will cover the cost of such training).

5.0 Risk assessment method

SGIA requires the checking and reporting of potential areas of risk in our centres and activities using the following procedure:

- Monthly inspection and review of the centre furnishings, building sites, activities held during that month and any reports of incidents during that month (or, if serious, as soon as the report is communicated). This inspection will be undertaken by the leaders on duty for the monthly Commemorative meeting or HSG/FG meetings and if any risk is identified that risk will be sent in written form to the State leadership team for addressing in a timely fashion.
- Leaders must follow risk management strategies and conduct checks prior to activities conducted for children (See: Attachment 7- SGIA Child Safe Risk Management Strategies).

5.1 Risk mitigation (see: Attachment 8- SGIA Child Safe Risk Assessment SGIA)

SGIA has identified areas that present possible risks to children in various ways. The following are policies that are to be implemented and monitored as an ongoing process of mitigating risk, determining better ways to address such risks and ensure that training is provided to appropriate persons.

- Awareness of physical dangers, checking and removing/modifying:
 - Sharp furnishings, unstable chairs or tables, secure or remove sharp objects in the room
 - Doors to unsafe areas secured
 - Doors open for access of parents and other responsible persons
 - Knowledge of fire danger response
- Awareness of abuse/neglect:
 - Monitoring of children's behaviours and interactions
 - Children not left alone with only one adult
 - Confirm training for appropriate leaders in correct identification and response to apparent and suspected abuse or neglect (see sections 2.1/2.2 of this Policy)
 - Escalate concerns to senior leaders as soon as practicable

6.0 SGIA response to injury or reported or suspected abuse or neglect

6.1 Responding to injuries

In the case of injury where the responsible leader does not have the ability to assess the seriousness of the injury or are uncertain about how much damage might have been done they need to contact either a delegated first aid person or a person they know to have first aid training or in the event no such person is in the vicinity contact the parent/guardian for advice or the ambulance service depending on the severity.

6.2 Responding to reported or suspected abuse or neglect

If a child is identified as having possibly experienced, or being at risk of, abuse or neglect in any form (see sections 3.1 & 3.2 of this Policy), then the person who identifies this issue should escalate the issue to a senior leader.

The senior leader will, where appropriate, contact child services or the police and report the matter and follow the instruction of those services. In very urgent situations, it may be appropriate for the person who first identifies the issue to themselves contact child services or the police.

The SGIA leaders must offer support for the child and those affected in accordance with this Policy and the advice and instruction of the professional services empowered to deal with such matters.

6.3 Internal procedure for reporting reported or suspected abuse or neglect

The following procedure covers the internal reporting requirements of SGIA and should be followed together with the steps set out at 6.2 above.

- A report must be made in the first instance to a senior leader, except where the urgency of the situation does not allow this
- Where there is a time gap between the observation of the issue and being able to report to the senior leader, an account of the issue and concerns should be prepared using Attachment 4- SGIA Child Safe Report Form
- Then pursue the conversation at the earliest possible time with the senior leader
- The senior leader must make a record of the report and send it in email form to the General Director of SGIA as well as discussing the necessary response in accord with the seriousness of the behaviour with the General Director at the earliest possible opportunity

6.4 SGIA policy regarding protecting abuse or neglect victims

SGIA shall cooperate with each authority at a federal or state level that has jurisdiction for child safety. The primary responsibility of SGIA and its appointed responsible person, without regard for the organisation's protection, must be the protection of the child in any abuse or neglect matters. As referred to at section 8 of this Policy, SGIA will also ensure that it acts in a manner which is fair to its staff and volunteers.

Working in cooperation with the victim and the authorities SGIA must, within the boundaries of its capabilities, provide whatever services or support deemed necessary and fair in regards the particular event or incident.

6.5 Training of child safe standards

SGIA commits to training the following standards at the leadership levels and as part of the raising of its response to any incidents of child abuse or neglect generally within the membership:

1. An open and aware culture
2. Understanding child abuse and neglect
3. Managing risk to minimise abuse and neglect
4. Child protection policies and procedures
5. Clear boundaries
6. Recruitment and selection

7. Screening of leaders
8. Support and supervision
9. Empowering children and young people
10. Training and education
11. Complaints and disclosures
12. Legal responsibilities¹

7. 0 Trauma Indicators

SGIA applies the following standards in training those charged with care for children within our activities (See: Attachment 9- Speak Up Booklet):

Age Group	Indicators
0-12 Months	<ul style="list-style-type: none"> ○ Increased tension, irritability ○ Increased startle response ○ Lack of eye contact ○ Sleep and eating disruption ○ Loss of acquired skills ○ Back arching ○ Aggression ○ Touch avoidance
12 months-3 years	<ul style="list-style-type: none"> ○ Lack of eye contact ○ Inability to be soothed ○ Increased tension, irritability, reactivity and inability to relax ○ Loss of eating skills ○ Alarmed by trauma related reminders ○ Uncharacteristic aggression ○ Touch avoidance ○ Sexualised play with toys
3-5 years	<ul style="list-style-type: none"> ○ Regression to younger behaviour ○ Bodily aches, pains and illness complaints with no explanation ○ Loss of skills (toileting, eating, self care) ○ Lack of eye contact ○ Sleep disturbances, nightmares, night terrors

¹ Source: Child Wise Standards

http://childwise.blob.core.windows.net/assets/uploads/files/Speak_Up_booklet.pdf

	<ul style="list-style-type: none"> ○ Withdrawal and quietening ○ General fearfulness ○ Separation anxiety ○ Sexualised drawings and demonstrated sexual knowledge
5-7 years	<ul style="list-style-type: none"> ○ Lack of eye contact ○ Spacey, distractible or hyperactive ○ Increased tension, irritability, reactivity and inability to relax ○ Accident prone ○ Absconding/truanting from school ○ Hurting animals, fire lighting ○ Toileting accidents/smearing of faeces
7-9 years	<ul style="list-style-type: none"> ○ Frightened by intensity of own feelings ○ Distant and withdrawn ○ Feelings of guilt, humiliation and shame ○ Spacey, distractible, blanking out, loss of ability to concentrate ○ Increased tension, irritability, hyperactivity, reactivity and inability to relax ○ Lowered school performance ○ Bodily aches and pains with no reason ○ Hurting animals, fire lighting ○ Retelling of traumatic events
9-12 years	<ul style="list-style-type: none"> ○ Feelings of shame, humiliation and guilt ○ Spacey, distractible, blanking out, loss of ability to concentrate ○ Reduced capacity to feel emotions – may appear numb or apathetic, distant and withdrawn ○ Depressed ○ Vulnerable to anniversary reactions caused by seasonal events, holidays ○ Lowered school performance ○ Retelling of traumatic event ○ Sexualised drawings or written stories

12-18 years	<ul style="list-style-type: none"> ○ Feelings of shame, guilt and humiliation ○ Eating disorders/disturbances ○ Sleep disturbances, nightmares ○ Distant and withdrawn ○ Depressed ○ Spacey, distractible, blanking out, loss of ability to concentrate ○ Challenging behaviours ○ Substance abuse ○ Aggressive/violent behaviour ○ Self-harming eg. cutting, burning ○ Suicidal ideation ○ Hurting animals, fire lighting
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8.0 Conducting relevant history assessments

Any leaders, volunteers or staff appointed to run or assist with the running of the activities involving children in SGIA must have a current WWC Check in keeping with their State's legislation.

8.1 Principles of procedural fairness

SGIA observes the principles of procedural fairness by ensuring people are:

- informed of any allegations against them and provided with an opportunity to respond to those allegations
- informed of any proposed decision to be made about them
- provided with the rationale for the proposed decision and provided with an opportunity to respond to that proposed decision
- given the right to have a decision reviewed by an independent body

APPENDIX A

APPENDIX A

The following government departments, websites and relevant organisations have been contacted or their resources included in preparation of the Child Safe policy.

- <http://www.tools4dev.org/resources/does-your-organisation-need-a-child-protection-policy/>
- <http://www.childhope.org.uk/resources/learning-resources/>
- <https://bravehearts.org.au/services/have-children-in-your-care/child-protection-training/general-community/>
- <https://aifs.gov.au/cfca/publications/mandatory-reporting-child-abuse-and-neglect>
- <https://aifs.gov.au/cfca/publications/reporting-abuse-and-neglect>
- <http://www.kidsguardian.nsw.gov.au/child-safe-organisations/become-a-child-safe-organisation>
- <http://www.ccyp.vic.gov.au/child-safe-standards/index.htm>
- <http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/child-safe-standards-resources>
- [http://www.legislation.vic.gov.au/Domino/Web_Notes/LDMS/PubStatbook.nsf/f932b66241ecf1b7ca256e92000e23be/7C1AE31A45DC458FCA25806C0010977F/\\$FILE/16-063aa%20authorised.pdf](http://www.legislation.vic.gov.au/Domino/Web_Notes/LDMS/PubStatbook.nsf/f932b66241ecf1b7ca256e92000e23be/7C1AE31A45DC458FCA25806C0010977F/$FILE/16-063aa%20authorised.pdf)
- <https://www.bluecard.qld.gov.au/volunteercoordseducationproviders/yourobligations.html>
- <https://www.bluecard.qld.gov.au/risk-management.html>
- <https://www.decd.sa.gov.au/child-protection/child-safe-environments>
- <https://www.legislation.sa.gov.au/LZ/C/R/CHILDRENS%20PROTECTION%20REGULATIONS%202010.aspx>
- <https://www.dcp.wa.gov.au/Resources/Pages/PoliciesandFrameworks.aspx>

- <https://www.dcp.wa.gov.au/Resources/Pages/PoliciesandFrameworks.aspx>
- [http://www.asc.wa.edu.au/files/8b%20-%20Child%20Safe%20Policy%20\(WA\)%20V3.pdf](http://www.asc.wa.edu.au/files/8b%20-%20Child%20Safe%20Policy%20(WA)%20V3.pdf)
- <https://chilsafeststandards.com.au/>
- www.community.nsw.gov.au
- www.ombo.nsw.gov.au
- www.keepthemsafe.nsw.gov.au
- http://childwise.blob.core.windows.net/assets/uploads/files/Speak_Up_booklet.pdf

BETRAYAL OF TRUST: FACTSHEET

The new 'failure to disclose' offence

Reporting child sexual abuse is a community-wide responsibility. Accordingly, a new criminal offence has been created in Victoria that imposes a clear legal duty upon all adults to report information about child sexual abuse to police.

Any adult who forms a reasonable belief that a sexual offence has been committed by an adult against a child under 16 has an obligation to report that information to police. Failure to disclose the information to police is a criminal offence.

1. What is a 'reasonable belief'?

A 'reasonable belief' is not the same as having proof. A 'reasonable belief' is formed if a reasonable person in the same position would have formed the belief on the same grounds.

For example, a 'reasonable belief' might be formed when:

- a child states that they have been sexually abused
- a child states that they know someone who has been sexually abused (sometimes the child may be talking about themselves)
- someone who knows a child states that the child has been sexually abused
- professional observations of the child's behaviour or development leads a professional to form a belief that the child has been sexually abused
- signs of sexual abuse leads to a belief that the child has been sexually abused.

2. Are there any excuses for not reporting child sexual abuse to police?

A person will not be guilty of the offence if he or she has a **reasonable excuse** for not disclosing the information. A reasonable excuse includes:

- fear for safety
- where the information has already been disclosed.

➤ Fear for safety

A reasonable excuse exists in cases where a person has a reasonable fear for their own safety or the safety of another person (such as a child or another family member) and they do not report to police due to those circumstances.

This defence may apply, for example, if a mother decides not to disclose information about her partner sexually abusing her child due to fear of violence to her or her child.

The person's fear must be subjectively reasonable, that is, it must be reasonable from the perspective of that person in those circumstances. This recognises that the person in question is best placed to judge whether their safety is in danger.

The court or jury will consider whether it was reasonable for the person not to report in the circumstances.

➤ Where the information has already been disclosed

It is a reasonable excuse to not disclose where a person believes on reasonable grounds that the information has already been disclosed to police and they have no further information to add.

BETRAYAL OF TRUST: FACTSHEET

An important example of this exception is where the person has already made a report under the mandatory reporting obligation specified in the *Children, Youth and Families Act 2005*. This obligation requires teachers, doctors and other professionals to report concerns about child welfare to child protection authorities within the Department of Human Services (DHS).

Under the existing mandatory reporting system, DHS already passes on all allegations of child sexual abuse to police, so it will be a reasonable excuse for not reporting to police if a person has made a report to DHS or reasonably believes a report has been made to DHS. This ensures that people are not required to make multiple reports to different agencies.

3. What is not a reasonable excuse?

A person does not have a reasonable excuse for failing to disclose sexual abuse if they are only concerned for the perceived interests of the perpetrator or any organisation. 'Perceived interests' includes reputation, legal liability or financial status.

For example, a principal's concern for the reputation of a school, or a clergyman's concern for the reputation of a church where the abuse happened will not be regarded as a reasonable excuse.

4. Are there any other exemptions to the offence?

There are a number of other exemptions, which include:

- the victim requests confidentiality
- the person is a child when they formed a reasonable belief
- the information would be privileged
- the information is confidential communication
- the information is in the public domain
- where police officers are acting in the course of their duty.

➤ The victim requests confidentiality

The new offence respects the position of a victim who does not want the offending disclosed and who is sufficiently mature to make that judgment. The obligation to report therefore does not apply where the information comes from a person aged 16 or over and this person requests that the offence not be reported. The law recognises that a child under 16 is not able to make this kind of decision and sometimes lacks the capacity to fully understand the effects of sexual abuse.

A person will still be required to disclose information to police if:

- the victim who requested confidentiality has an intellectual disability, and
- the victim does not have the capacity to make an informed decision about a disclosure, and
- the person who received the information is aware or should be reasonably aware of those facts.

➤ The person is a child when they formed a reasonable belief

If a person was under the age of 18 when they formed a reasonable belief, they will not be obliged to make a disclosure when they turn 18. This protects children from the burden of knowing that they will have to disclose to police when they turn 18.

➤ The information would be privileged

People will not be required to disclose where the information would be privileged. This includes:

BETRAYAL OF TRUST: FACTSHEET

- client legal privilege
- journalist privilege
- religious confessions.

For example, if a priest obtains information made in good faith through a rite of confession (as long as the admission is not given for a criminal purpose), the priest is exempt from disclosing.

➤ **The information is confidential communication**

A registered medical practitioner or counsellor is not required to disclose information to police if the information is obtained from a child whilst providing treatment and assistance to that child in relation to sexual abuse. However, under the mandatory reporting obligations, a registered medical practitioner would still be required to report to DHS if they form a reasonable belief that a child has been sexually abused and is in need of protection. This exemption is not designed to prevent the reporting of child sexual abuse, but rather to protect the registered medical practitioner or counsellor from criminal liability.

If an adult provides information to a medical practitioner or counsellor regarding the sexual abuse of a child, the medical practitioner or counsellor would be required to disclose that information to police unless another exemption applies.

➤ **The information is in the public domain**

A person does not have to disclose to police if they get the information through the public domain, or form the belief solely from information in the public domain such as television or radio reports.

➤ **Where police officers are acting in the course of their duties**

A police officer acting in the course of their duty in respect of a victim of child sexual abuse is exempt from the offence.

5. If it is going to be compulsory for everyone to report child sexual abuse, why are there exemptions?

We need to ensure that in creating this legal obligation, we do not put children and their families at even greater risk of harm, especially those who may be experiencing family violence.

6. Won't child sexual abuse continue to occur if exemptions are allowed?

There is currently no requirement for people to report child sexual abuse to police, so introducing this new legal obligation is a big step towards preventing child sexual abuse in our community and ensuring people understand that it is a community-wide responsibility.

Certain exemptions are required to avoid any unintended consequences of this new obligation. It is not intended, for example, that this offence criminalise victims of family violence who don't report due to fear for their own or someone else's safety.

For example, women in family violence situations may have a reasonable fear for the safety of their child or another family member, especially in cases where threats have already been made. They may fear that making a report to police will escalate the situation, putting their child or another family member at even greater risk of harm – or even death.

Preventing the sexual abuse of children is a community responsibility. Other people connected with the child will still be required to make a report, unless they have a reasonable excuse not to do so.

BETRAYAL OF TRUST: FACTSHEET

7. Won't this offence discourage people from seeking help where they have experienced child sexual abuse?

The law will not require a medical practitioner or counsellor to disclose information to police when it has been obtained from a victim during treatment for sexual abuse.

Disclosures for the purpose of obtaining legal advice will also be protected by client legal privilege. There are also other exemptions which have been listed above.

8. The offence requires 'any adult' to report suspected child sexual abuse. Isn't this too broad? Won't it lead to people reporting unfounded suspicions?

The offence requires a person to report to police where they have information that leads them to form a 'reasonable belief' that a sexual offence has been committed against a child under 16. Under the offence, people will not be expected to disclose unfounded suspicions as a suspicion does not constitute a 'reasonable belief'.

The failure to disclose offence is a big step towards preventing child sexual abuse in our community and ensuring people understand that protecting children and preventing sexual abuse is a community-wide responsibility.

9. How will I be protected if I make a disclosure to police?

Your identity will remain confidential unless:

- you disclose it yourself or you consent in writing to your identity being disclosed
- a court or tribunal decides that it is necessary in the interests of justice for your identity to be disclosed.

10. Will any person who knows of child sexual abuse happening in the past be required to report?

A person who knows of child sexual abuse having occurred in the past will not have to report to police unless the victim is still a child when the offence comes into effect.

11. What is the penalty for failing to disclose child sexual abuse?

The maximum penalty is three years imprisonment.

12. When will the failure to disclose offence take effect?

27 October 2014.

13. How do I contact Victoria Police to make a report?

If you want to report a child in immediate risk or danger of sexual abuse please call [Triple Zero \(000\)](tel:000). Alternatively, you can [contact your local police station](#).

If you or someone you know has experienced child sexual abuse in an institutional context, we encourage you to contact Victoria Police's Sano Taskforce via email at sanotaskforce@police.vic.gov.au

BETRAYAL OF TRUST: FACT SHEET

Failure to Protect: a new criminal offence to protect children from sexual abuse

In response to the [Betrayal of Trust](#) report the Victorian Government is strengthening laws to protect our children from sexual abuse and exposure to sexual offenders. This is in recognition of the shared community responsibility to protect children from abuse and to provide a safe environment for children to develop, learn and play.

A new criminal offence for failing to protect a child under the age of 16 from a risk of sexual abuse will commence on 1 July 2015.

The offence will apply where there is a substantial risk that a child under the age of 16 under the care, supervision or authority of a relevant organisation will become a victim of a sexual offence committed by an adult associated with that organisation. A person in a position of authority in the organisation will commit the offence if they know of the risk of abuse and have the power or responsibility to reduce or remove the risk, but negligently fail to do so.

This offence will encourage organisations to actively manage the risks of sexual offences being committed against children in their care and further protect them from harm.

1. What is the offence of failing to protect a child from a sexual offence?

The new offence provides that a person who:

- a) by reason of the position he or she occupies within a relevant organisation, has the power or responsibility to reduce or remove a substantial risk that a relevant child will become the victim of a sexual offence committed by a person of or over the age of 18 years who is associated with the relevant organisation; and
- b) knows that there is a substantial risk that the person will commit a sexual offence against a relevant child –

must not negligently fail to reduce or remove that risk.

2. What is a 'relevant organisation'?

The offence applies to people in authority within a *relevant organisation*. A relevant organisation is one that exercises care, supervision or authority over children, whether as part of its primary function or otherwise.

Relevant organisations include, but are not limited to:

- churches
- religious bodies
- education and care services (such as childcare centres, family day care services, kindergartens and outside school hours care services)
- licensed children's services such as occasional care services
- schools and other educational institutions
- organisations that provide accommodation to children and young people, such as boarding schools and student hostels

BETRAYAL OF TRUST: FACT SHEET

- out-of-home care services
- community service organisations providing services for children
- hospitals and other health services
- government agencies or departments providing services for children
- municipal councils (for example those that deliver Maternal and Child Health services)
- sporting groups
- youth organisations
- charities and benevolent organisations providing services for children.

3. Who is a person in authority in an organisation?

A person in authority is someone who, by reason of their position within a relevant organisation, has the power or responsibility to reduce or remove a substantial risk that a child under the age of 16 years, who is under their care, supervision or authority, may become the victim of sexual abuse committed by an adult associated with the organisation.

Whether someone is considered to be a person in authority will depend on the degree of supervision, power or responsibility the person has to remove or reduce the substantial risk posed by an adult associated with the organisation. People in authority will usually have the ability to make management level decisions, such as assigning and directing work, ensuring compliance with the organisation's volunteer policy and other operational arrangements.

Examples of people in authority may include residential house supervisors, CEOs, board, council or committee members, school principals, service managers and religious leaders. It may also apply to people with less formal involvement in an organisation. For example, a volunteer parent coach responsible for the supervision of a junior sports team may be a person in authority, even if their role is informal or limited.

4. Who is a relevant child?

A person in authority will be guilty of an offence if he or she negligently fails to reduce or remove a substantial risk to a relevant child. A 'relevant' child is a child under the age of 16 who is, or may come, under the care, supervision or authority of a relevant organisation.

The child does not need to be identified. This means that the risk is not that a particular child will become the victim of sexual abuse. Instead, the substantial risk could be posed to any child who is, or who may be in the future, under the organisation's care, supervision or authority.

5. Who is a 'person associated with' an organisation?

The offence requires a person in authority to act if they know that a *person associated with their organisation* poses a substantial risk to a relevant child. This may include a person who is an officer, office holder, employee, manager, owner, volunteer, contractor or agent of the organisation. This definition does not include a person who solely receives services from the organisation.

For example, a parent living in the community who is involved with child protection services or who has a child in out-of-home care, and who may pose a risk of sexual abuse to a child, would *not* be considered to be 'associated with' the Department of Health & Human Services under the offence. Similarly, parents of children attending a school or service will generally only be 'associated with the organisation' if they are also engaged as a volunteer, for example to assist in the classroom or attend an excursion or camp.

BETRAYAL OF TRUST: FACT SHEET

The offence relates to risk of sexual abuse by adults. Children under the age of 18 who pose a risk of sexually abusing other children are not covered by this offence.

6. What is a 'substantial risk'?

The offence requires a person in authority to reduce or remove a known 'substantial' risk that an adult associated with the organisation may commit a sexual offence against a relevant child. It does not make it a criminal offence to fail to address every possible risk that a sexual offence may be committed against a child.

There are a number of factors that may assist in determining whether a risk is a substantial risk. These include:

- the likelihood or probability that a child will become the victim of a sexual offence
- the nature of the relationship between a child and the adult who may pose a risk to the child
- the background of the adult who may pose a risk to a child, including any past or alleged misconduct
- any vulnerabilities particular to a child which may increase the likelihood that they may become the victim of a sexual offence
- any other relevant fact which may indicate a substantial risk of a sexual offence being committed against a child.

When determining whether a risk is substantial, the courts will consider a variety of factors, which may include those listed above. The courts will consider all the facts and circumstances of the case objectively, and will consider whether a reasonable person would have judged the risk of a sexual offence being committed against the child abuse as substantial. It is not necessary to prove that a sexual offence, such as indecent assault or rape, was committed.

7. When does a person 'know' there is a risk of child sexual abuse?

This offence requires a person in authority to act if they *know* that there is a substantial risk that a child may become the victim of a sexual offence. A person is generally taken to have knowledge of a circumstance if he or she is aware that it exists or will exist in the ordinary course of events. This requires a higher level of awareness than merely holding a tentative belief or suspicion.

However, it is expected that a person in authority will take steps to follow up on a suspicion or belief that children in their organisation were at risk of harm.

8. When does a person negligently fail to reduce or remove a substantial risk?

Under the offence, a person is taken to have *negligently failed* to reduce or remove a substantial risk if that failure involves a great falling short of the standard of care that a reasonable person would exercise in the same circumstances. The offence does not require a person in authority to eliminate all possible risks of child sexual abuse.

For example, a person in authority who knows that an adult associated with the organisation poses a substantial risk to children, and moves that adult from one location in an organisation to another location where they still have contact with children, is likely to be committing the offence. Another example is where a person in authority employs someone in a role that involves contact with children, when the person in authority knows the employee left their last job because of allegations of sexually inappropriate behaviour involving children.

BETRAYAL OF TRUST: FACT SHEET

9. Will this criminalise mistakes made by adults who are caring for or working to protect children?

This law is aimed at protecting children and compelling those in authority to remove or reduce known substantial risks that children may become victims of sexual abuse.

As previously noted, the offence applies to a person in authority whose failure to protect a child from sexual abuse involves a great falling short of the standard of care that a reasonable person would exercise in the same circumstances.

The offence is unlikely to be committed where a person takes reasonable steps to protect a child from the risk of sexual abuse, for example, where an allegation is reported to appropriate authorities and the individual is removed from any role involving unsupervised contact with children pending an investigation.

10. What should a person in authority do to reduce or remove the risk of child sexual abuse posed by an adult associated with their organisation?

A person in authority in an organisation must take reasonable steps to reduce or remove a known substantial risk that an adult associated with their organisation will commit a sexual offence against a child.

For example:

- A current employee who is known to pose a risk of sexual abuse to children in the organisation should be immediately removed from contact with children and reported to appropriate authorities and investigated.
- A community member who is known to pose a risk of sexual abuse to children should not be allowed to volunteer in a role that involves direct contact with children at the organisation.
- A parent who is known to pose a risk of sexual abuse to children in a school should not be allowed to attend overnight school camps as a parent helper.

If you want to report a child in **immediate** risk or danger of a sexual offence please call Triple Zero (000).

11. How can you improve child safety in your organisation, and remove or reduce the risk of harm?

There are a range of measures that organisations can adopt to improve child safety and reduce the risk of harm to children. New Victorian child-safe standards are expected to be introduced from January 2016, and will provide a framework to assist in ensuring child safety in the organisation. Under the standards, organisations will be expected to have policies, procedures and systems in place to protect children from abuse, including appropriate pre-employment screening arrangements and systems for reporting and responding to allegations of abuse.

In the meantime, organisations are encouraged to create and implement risk management strategies suitable to their environment to reduce the risk of harm to children. These may include:

- Adopting a child safety policy that outlines a commitment to child safety and provides guidance on how to create a child safe environment.
- Enforcing a code of conduct that sets clear expectations about appropriate behaviour towards children and obligations for reporting a breach of the code.
- Ensuring all new staff and volunteers are appropriately screened, including reference checks, before commencing employment with the organisation (in addition to Working with Children Checks or Victorian Institute of Teaching registration).
- Providing training to staff in prevention, identification and response to child safety risks, including reporting requirements and procedures.

BETRAYAL OF TRUST: FACT SHEET

Organisations should review existing policies and practices to identify potential risks and ensure that risk management strategies and action plans are effective. To learn more about creating child-safe organisational environments, the *Guide to Creating a Child-safe Environment* produced by the Commission for Children and Young People provides practical information for organisations seeking to improve child safety and reduce the risk of harm.

Organisations operated, funded and/or regulated by Government can reduce the risk of child harm to children by continuing to comply with departmental standards, screening requirements, program requirements and policies on preventing, reporting and responding to child sexual abuse, for example:

- [Protecting the safety and wellbeing of children and young people: A joint protocol of the Department of Human Services Child Protection, Department of Education and Early Childhood Development, Licensed Children's Services and Victorian Schools \(Joint Protocol\)](#)
- [DHHS's Critical Client Incident Management Instruction; and the Instruction on Responding to Allegations of Physical or Sexual Assault \(RAPSA\)](#)
- [Schools Policy and Advisory Guide](#) (SPAG) for Victorian government schools

Sports and recreation organisations can also refer to the [Victorian Code of Conduct for Community Sport](#) and [VicSport 'Safeguarding Children'](#) websites for resources about creating child-safe organisations.

12. Will the offence criminalise members of the public who fail to protect a child from a risk of sexual abuse?

No — the failure to protect offence applies to people in authority within an organisation that exercises care, supervision or authority over children. It does not apply to parents or other individuals not connected to these organisations. However, as noted above, a parent who volunteers in an organisation (for example as a sporting coach) may be in a position of authority and subject to the offence.

A separate ['failure to disclose'](#) offence applies to any adult who fails to report a reasonable belief to Victoria Police that a sexual offence has been committed against a child under the age of 16, unless there is a reasonable excuse for not doing so.

13. How does the failure to protect offence interact with mandatory reporting obligations?

This offence is in addition to existing mandatory reporting obligations for specified staff under the *Children, Youth and Families Act 2005*. It applies to any person in authority within a relevant organisation, not just mandatory reporters.

14. What is the penalty for failing to protect a child?

The maximum penalty is five years' imprisonment.

15. When will the offence take effect?

The offence will commence on 1 July 2015.

16. How do I contact Victoria Police?

If you want to report a child in **immediate** risk or danger of a sexual offence please call Triple Zero (000).

If the report is not in relation to an immediate risk, contact your [local police station](#) or call Crime Stoppers on 1800 333 000.

SGIA Child Safe Code of Conduct

- *All staff (including employees and contractors) and volunteers, who are involved in SGIA activities involving children must acknowledge and sign this code of conduct*

Working with children and young people brings additional responsibilities for staff and volunteers of SGI Australia.

All staff and volunteers of this organisation are responsible for promoting the safety and well-being of children and young people by:

- Adhering to this SGIA's child safe policy at all times and taking all reasonable steps to ensure the safety and protection of children and young people
- Treating everyone with respect and honesty (this includes staff, volunteers, students, children, young people and parents)
- Remembering to be a positive role model to children and young people in all your conduct with them
- Setting clear boundaries about appropriate behaviour between yourself and the children and young people in your organisation – boundaries help everyone to carry out their roles well
- Listening and responding appropriately to the views and concerns of children and young people
- Ensuring another adult is always present or in sight when interacting with children and young people, including conducting one to one coaching, instruction or other activities
- When uncertain about how to respond to any situation involving risk to children or young people or suspecting but unsure about indications of abuse or neglect consult immediately with a senior leader and request knowledge of their procedure in dealing with the matter

Reporting suspected child abuse and neglect as soon as practicable to:

Kids Helpline National 1800 55 1800,

Lifeline 13 11 14

Child Abuse Report Line SA 13 14 78,

Child Protection Crisis Line Vic 13 12 78,

Western Australia Police: 131 444 or the Police Child Abuse Unit: 08 9492 5444

Crisis Care: 1800 199 008 or 08 9223 1111 This hotline operates 24 hours a day, 7 days a week.

Department for Child Protection: 08 9222 2555 or 1800 622 258.

NSW Child Protection Helpline on 132 111.

Qld Child Safety After Hours Service Centre on 1800 177 135 or (07) 3235 9999

- Responding quickly, fairly and transparently to complaints made by a child, young person or their parent/guardian
- Encouraging children and young people to ‘have a say’ on issues that are important to them.
- Providing feedback to children and young people and their parents or guardians.

Staff and volunteers must not:

- Engage in rough physical games
- Develop any ‘special’ relationships with children and young people that could be seen as favouritism such as the offering of gifts or special treatment
- Do things of a personal nature that a child or young person can do for themselves, such as toileting or changing clothes
- Discriminate against any child or young person because of age, gender, cultural background, religion, vulnerability or sexuality.

I agree to abide by this code of conduct

Name:.....

Signature:..... **Date:**.....

SGIA Incident report

Child Safety – Refer to guidelines at the end of this document regarding written reports

The child safe standards require organisations that provide services for children¹ to have processes for responding to and reporting suspected child abuse.² You can provide this resource to a child or their family if they disclose an allegation of abuse or safety concern in your organisation. Your staff can also use this resource to record disclosures.

All incident reports must be stored securely.

Incident details

Date of incident:	
Time of incident:	
Location of incident:	
Name(s) of child/children involved:	
Name(s) of staff/volunteer involved:	

If you believe a child is at immediate risk of abuse phone 000.

Does the child identify as Non-English-speaking?

(Mark with an 'X' as applicable)

No Yes

Please categorise the incident

Physical violence

Sexual offence

Serious emotional or psychological abuse

Serious neglect

¹ For a [list of the organisations in scope](#) for the child safe standards, please see the Department of Health and Human Services website: <www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/in-scope-organisations-for-child-safe-standards>.

² The child safe standards aim to protect children from abuse in organisations, including physical violence, sexual offences, serious emotional or psychological abuse and serious neglect. For further explanation of the different types of child abuse, please see see [An Overview of the Victorian child safe standards](#): <www.dhs.vic.gov.au/___data/assets/word_doc/0005/955598/Child-safe-standards_overview.doc>.

Please describe the incident

When did it take place?	
Who was involved?	
What did you see?	
Other information	

Parent/carer/child use

Date of incident:	
Time of incident:	
Location of incident:	
Name(s) of child/children involved:	
Name(s) of staff/volunteer involved:	

SGIA Leader use:

Date incident report received:	
Staff/volunteer leader managing incident:	
Follow-up date:	
Incident ref. number:	

Has the incident been reported?

Child protection	
Police	
Another third party (please specify):	

Incident reporter wishes to remain anonymous?

(Mark with an 'X' as applicable)

Yes No

Avoid language that includes:

- Excessive use of pronouns e.g. he, she , it etc. Use persons name where possible.
- 'probably' or 'possibly' – these do not create confidence for the reader

Do not include irrelevant information such as:

- hearsay, information from a third party that is not a direct witness
 - For example: "Harriet stated that Jenny told her John said/done..."
 - You can write: "Harriet said her mum, Jenny, told her..."
 - Do not include your own opinions

Avoid 'I believe/I think' statements. Stick with what you do know or have information about.

Family history (unless relevant to the concerns)

- E.g. While the parents may be great at volunteering for the organisation this is unlikely to have any bearing on the concerns raised about them
- It is important to think of WHY you think the particular information is relevant. If the parent has a history of failing to pick up a child from the service, this may be relevant but the fact they have been married four times is not

Personal conclusions about the type of abuse suspected

- E.g. X type of people are more likely to neglect their children
- The parents are junkies so its likely they have done X

Do not use opinionated, prejudiced or exclusive language

- Rather than writing 'men and girls' write 'men and women'

Avoid words which appear to exaggerate. It can help if you avoid 'intensifying adverbs' that tend to give this impression:

- For example, 'awfully,' 'very', 'really', 'always', 'never'

The use of these words can make what you are describing appear biased or lacking in judgement.

Avoid generalisations. For example:

- "Children from (name of country or ethnic group) are more upset by this behavior"
- This also relates to avoiding words which intensify or appear to exaggerate: "John is always upset when his dad comes to pick him up"
- Instead be more informational: "On each occasion John's father has come to pick him up I/volunteers have observed that John..."

Avoid evaluative words which are based on judgements and feelings, such as 'badly', 'disappointment', 'amazing' etc.

Avoid language that implicitly excludes any group of people

- For example do presume as doctor, nurse, teacher is male or female unless you know.

Avoid the personal pronoun “I”: Write more impersonally

- For example, “I have observed” or “I have been informed” instead of “I think...”, “I believe...”
- Stating “I believe...” or “in my opinion...” infers expertise or specialisation you may not have and knowledge you may not possess.
- In addition, adding such personal comments almost seems to emphasise that the writing is just your opinion or interpretation, rather than positions that are supported by evidence.

Avoid such things as “She/he did not want to”.

- The same goes for “she thought”, “he feels”, or “they were trying to”
- This form of writing supposes the writer knows the feelings of the person as opposed to what they expressed.
- **Detailing what a person “did” is a good means by which to show your writing is objective rather than subjective.**
 - If something has actually happened and the writer or speaker is simply relaying that information, they are making simple statements of fact.
 - In subjective writing, words are often added to these phrases to make them more than just fact – and in doing so, they become inferences:

Be specific instead of vague or general.

- Rather than writing ‘everyone says’ give examples of what was actually said and by whom.

Be explicit in expressing yourself.

- For example ‘ten’ instead of ‘several’: ‘70%’ instead of ‘most of the population’: ‘three years ago’ or ‘2006’ instead of ‘some time ago’.
- Write exactly what they said, rather than your interpretation, even if the person uses incorrect words to express themselves.
- Instead of writing ‘smoking causes cancer and she’s got the kids in the car with her against the law’ write ‘I have observed Mrs White picking up her children on four occasions. On each occasion she has been smoking when getting into the car with the children.’
- **Some examples of good reporting:**
 - The child’s date of birth is provided.
 - Observations are clearly stated.
 - The injury shape, location and colour of the child’s injury is clearly described.
 - Names are used frequently so the reader knows who has said what to whom.
 - A time frame is provided during which it appears the injury occurred.
 - A time frame is provided identifying when the disclosure occurred and how
 - There are no assumptions. What people do or do not know or think is not presumed.
 - Facts are presented clearly.

Further information

Further information on [child safe standards](#) can be found on the Department of Health and Human Services' website <www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/projects-and-initiatives/children,-youth-and-family-services/creating-child-safe-organisations>.

Additional resources for organisations in the child safe standards toolkit can be found on the [Department of Health and Human Services website](#): <www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/child-safe-standards>. In particular, [An Overview to the Victorian child safe standards](#), has information to help organisations understand the requirements of each of the child safe standards, including examples of measures organisations can put in place, a self-audit tool and a glossary of key terms: <www.dhs.vic.gov.au/___data/assets/word_doc/0005/955598/Child-safe-standards_overview.doc>



Soka Gakkai International Australia

Value Creation through the promotion of Peace, Culture and Education

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Event:

Location image is recorded:

Date:

Name of child:

I give my permission for this photograph and/or video to be used in Soka Gakkai International Australia and Soka Gakkai International publications only. This image will not be on sold, shared or used in any other manner without permission by the child's parent or guardian.

Signed

Name of parent or guardian

Guidance in responding to children and young people

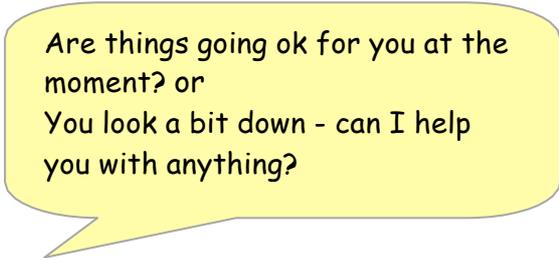
Sometimes children and young people use the opportunities that arise in education and care settings to share personal information. Recognising and respecting the significance of those moments for children and young people is part of the staff/volunteer member's duty of care. Sometimes what is shared will be about serious matters such as abuse or neglect.

Your role in these situations is to do everything you can to enable the young person to share what they wish to share. This means listening respectfully, showing you care by your manner and allowing the child/young person time. Research clearly indicates that a supportive response to children/young people's disclosure of abuse or neglect contributes in a positive way to their potential long term recovery.

When might children and young people talk with adults about their concerns?

Some children and young people will initiate a conversation with a counsellor or another trusted staff/volunteer member by themselves. For others this will only happen if *staff/volunteer* initiate conversations and some children/young people will only allude to their problems via a range of non verbal methods. For this reason it is important that staff/volunteer :

- Pay attention to children and young people's wellbeing and deliberately structure opportunities to ask after their welfare when there isn't an audience. Open questions such as



Are things going ok for you at the moment? or
You look a bit down - can I help you with anything?

are good examples. (See below for more about 'open' and 'leading' questions.)

- Take note of the children or young people who seem to deliberately want to stay behind, want to be in your area at lunchtime or connect with you on yard duty. Whenever possible, take these chances to talk rather than rush away yourself or hurry the child/young person away. If it's not possible for you to talk at that time, let them know you are aware they want to speak with you, that you think it's important and will follow up with them as soon as you can. Make an effort to do this, preferably before the end of that day.
- Recognise that play, art work and many forms of written work can be used by children and young people to express their sadness, fears or anger. Always follow up concerns raised through such expressions and seek support from senior staff/volunteer as appropriate.

What might the child or young person be feeling when they share information about abuse or neglect?

A child may experience a range of emotions when disclosing, including:

- Guilt – children/young people often blame themselves for the abuse and may feel guilty for telling someone about it
- Shame – children/young people are often ashamed of the abuse itself, particularly sexual abuse
- Confusion – children/young people may be confused about their feelings for the ‘perpetrator’ particularly if it is a family member
- Fear – children/young people are often fearful of the repercussions of telling. They may be scared of the ‘perpetrator’, that the abuse may recur or that their actions will cause their family to break up.

What are leading and open questions?

Leading questions can usually be answered by a “yes” or “no”. Leading questions tend to *suggest* information and ideas (put words in people’s mouths).

Open questions tend to *invite* information and allow the individual to only say what they wish to say. Open questions keep the conversation open and are rarely answered by a “yes” or “no”.

For example:

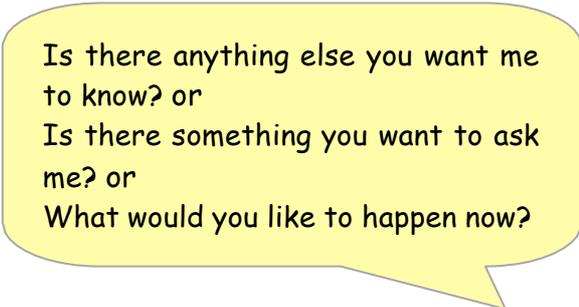
Child/young person’s statement	Leading question ☒	Open question ☑
I don’t like my uncle looking after me.	Does he make you afraid?	How does he make you feel?
I don’t want to work, my hand hurts.	Is that a cigarette burn on your hand? Did mum or dad do that to you?	Your hand looks sore: how did it happen?
I’m scared to go on the camp with my class.	Has someone in the class been hurting you?	What’s making you feel scared?

Using open questions is the most supportive way of responding to children and young people's personal disclosures. It is a gentle and respectful approach that protects both the child/young person's emotions as well as protecting against you influencing what the child/young person wants to say.

Remember the central role you play in these kinds of situations is to support the child/young person. This means that as soon as you think a child/young person is distressed by being asked clarifying questions, you should stop. Reassure them that they don't have to talk more with you and that you're going to do everything you can to help them.

What if the child keeps talking after I have formed a suspicion that they have been abused or neglected?

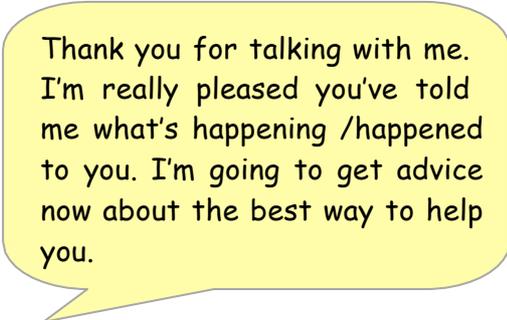
The purpose of your discussion with a child/young person is to support them and to respect their decision to speak with you about matters of importance to them. It is not necessary to ask more clarifying questions once you have formed a view about what your next actions should be. However *it is necessary to hear the child/young person out*. Interrupting them or cutting the conversation short will not give them the sense of being heard or of being supported that is so important to their wellbeing. When it appears that they have exhausted what they wish to say you can finish with a question such as,



Is there anything else you want me to know? or
Is there something you want to ask me? or
What would you like to happen now?

What should I say when the conversation is finished?

This is a difficult moment for many staff/volunteer as they want to acknowledge the seriousness of what has been shared with them but they do not want to fall into the trap of making promises or alarming the child/young person with responses that show how impacted they are by what they have been told. Consider saying

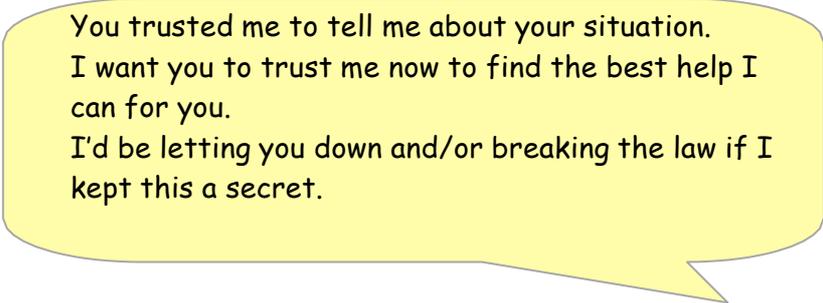


Thank you for talking with me. I'm really pleased you've told me what's happening /happened to you. I'm going to get advice now about the best way to help you.

Don't leave a child/young person alone in this situation. Offer to walk them back to class or organise for someone they nominate to accompany them. If more appropriate, allow them to remain where they are in the company of someone they nominate.

What if a child/young person begs me not to do anything or talk with anyone?

Depending on the situation disclosed and the age of the child/young person, consider saying,



You trusted me to tell me about your situation.
I want you to trust me now to find the best help I can for you.
I'd be letting you down and/or breaking the law if I kept this a secret.

If you form a suspicion the child/young person is being abused by a family member or other adult into whose care or company they are supposed to return at the end of the day, this poses a risk that will need to be communicated with the Child Abuse Report Line. If you are given information to suggest that parents /caregivers or other adults have been aware of the harm this too is very important information to provide to the Child Abuse Report Line in their risk assessment processes. ([Pre-Notification Checklist](#). [Notification checklist](#))

Alternatively it may be an adult *at the site* who is causing the child/young person distress or harm in which case the staff/volunteer /volunteer member must report this immediately to their leader so they can follow procedures for responding to allegations involving adults at the site - as well as making a notification where appropriate.

([Protective Practices for Staff/volunteer in their Interactions with Students](#))

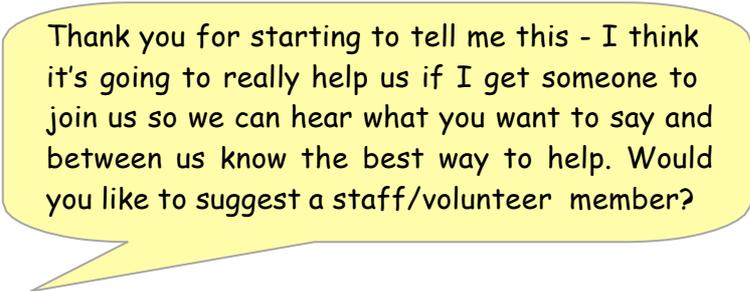
If the concern involves another child/young person at the site then decisions need to be made with the site leader about what is an appropriate response to that child/young person, their parents, other children/young people at the site and whether there are obligations to report the behaviour to any other agencies.

([Responding to Problem Sexual Behaviour involving Children and Young People](#))

It may be that the kind of harm described by the child/young person warrants an immediate response from a medical or mental health care provider or a referral for short or long term therapeutic support. ([Support Resources](#))

What if I think I can't handle the conversation?

Remember it is best if you can manage your emotions for the sake of the child/ young person. However, if you are concerned in this way try to stay calm and consider saying, at an appropriate break,



Thank you for starting to tell me this - I think it's going to really help us if I get someone to join us so we can hear what you want to say and between us know the best way to help. Would you like to suggest a staff/volunteer member?

What are examples of open questions that might help gather appropriate information from children/young people – who are able and willing to provide it?

Clearly the age of the child/young person is significant and will influence the language used to frame open questions and how long the child/young person is expected to engage in talking. The following list is not provided to suggest any kind of conversational order. Obviously staff/volunteer will ask questions most appropriate to how and where the conversation begins - in response to a specific disclosure, to a general appearance, to an incident, to a drawing etc

What's making you feel frightened /sad /depressed/like crying/running away?

What's making you feel like you don't want to go home /go to class/ go to...your grandparents' house/ the OSHC site/ football practice/ church group...?

Where were you when you felt like this?

Where were you when this happened?

Why do you like playing that game?

What's happening here in the drawing?

Who taught you this game?

Who is that in your drawing?

Where does your story come from?

Tell me more about what happened?

Tell me more about how this happened?

Can you point to where it hurts?

Who is making you feel like this?

Tell me more about what he/she does?

How do you feel about going home /going to class/ to...your grandparents' house/ the OSHC site/ football practice/ church group...?

Have you felt like this/ experienced this before?

Has this happened before?

Does mummy or daddy know what happened?

Do other people know what's happened?

Was someone else there at the time?

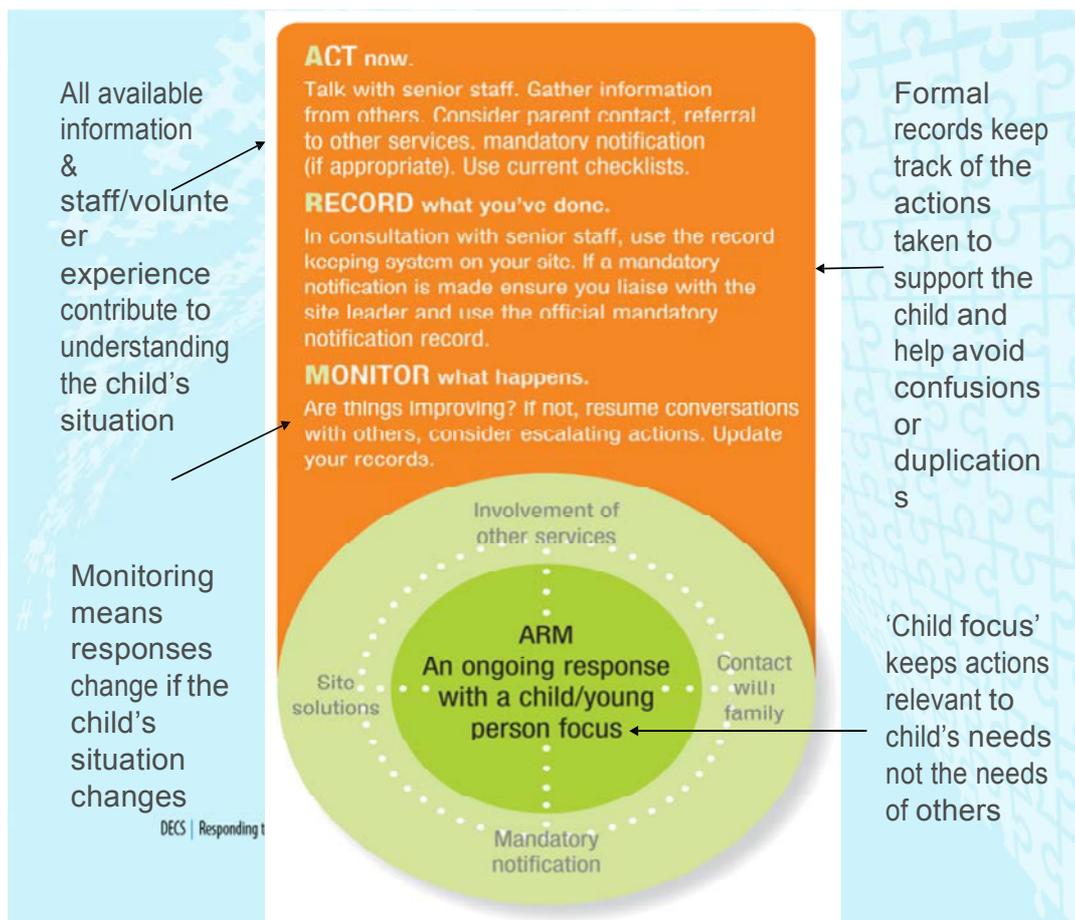
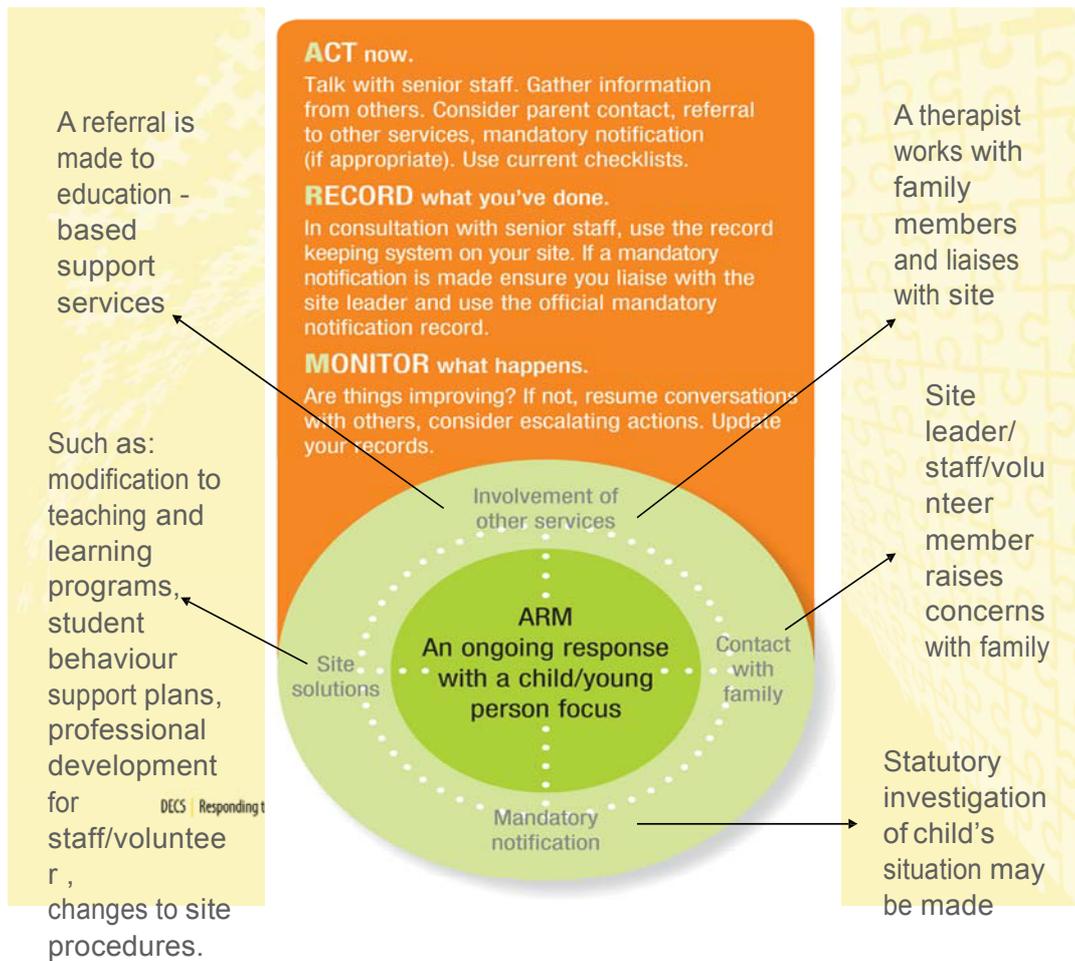
Is there anything else you want me to know?

Is there something you want to ask me?

What would you like to happen now?

What is the longer term responsibility in responding to children/young people about whom concerns have been raised?

Follow the ARM response (**Act Record Monitor**)



Summary guide of the dos and don'ts of appropriate responding when abuse or neglect is disclosed or suspected

Do

- listen with care, show care and use open questions
- find a private place if possible
- be patient, don't rush them or yourself
- stop asking questions if the child/young person does not want to talk further and/or becomes distressed
- record what you have been told
- speak with a senior member of staff/volunteer ASAP to help you determine your next actions (for example referral to support services, report to the Child Abuse Report Line, police contact)
- respect their privacy by sharing only relevant information with the people who need to know (Information Sharing Guidelines for promoting the safety and wellbeing of Children, Young People and their Families)
- look after yourself

Don't

- stop the child from talking or saying what they wish to say
- act scared or shocked
- doubt the child (question the validity of their story)
- threaten to harm or punish the perpetrator
- promise that everything will be fine, that they will be safe, happy, better
- insist that they answer questions, provide more information when unwilling/unable to do so
- ask leading questions or interview others (investigate matters)

All resources listed in this document are available from the DECS website, at <http://www.decs.sa.gov.au/speced2/pages/childprotection/>

Risk Management Strategies Ahead of Planned Scheduling of Activities

- Implement an effective child safety risk management strategy (refer to Attachment 8 and to Child Safe Policy)
- SGIA Child Safe code of conduct read and signed
- Child safety reporting procedures clear
- Induction for all staff and volunteers involved in SGIA activities involving children
- Train leaders to detect inappropriate behaviour, physical dangers etc
- Guidance and other resources made available
- Clear windows in walls to enable visibility of occupants
- Non-lockable doors in hot spots
- Assessment of new or changed physical environments for child safety risks
- Supervision or monitoring of activities
- Deny Online searches during activities that are not planned and overseen by leaders (Google, Facebook etc)
- Activity management procedures (what kind of activities? Are they appropriate and low risk?)
- Working with Children (or local equivalent) checks and confirming currency for those involved in SGIA activities involving children

SGIA Safety Checklist for Children's Activities

Prior to activities for children such as Future Group and High School Group the following inspections and preparations must be made at the venue.

1. Ensure that a minimum of two SGIA appointed and appropriately trained leaders will be conducting the activity.
2. Ensure the attending volunteers and leaders are aware of the safety concerns and risks for the activity.
3. Consult the SGIA Child Safe Policy & Attachment 7 if unsure of risks or when necessary.
4. Identify the child safety risks.
 - a. What are the areas of concern?
 - i. Stairs are clear
 - ii. Sharp objects secured or removed
 - iii. Furniture in good condition and maintained
 - iv. First aid kit accessible
 - v. Appropriate doors unlocked giving access to parents or guardians
 - vi. Appropriate doors locked e.g. to street or dangerous areas
 - vii. Adults left alone with child
 - viii. Strangers in attendance
 - ix. Children do not use smart phones or tablets except to urgent matters
 - x. Activities are appropriately low risk
 - b. What could go wrong?
 - i. Child accident on stairs
 - ii. Children's injury
 - iii. Children's injury
 - iv. Non-treatment of minor injury
 - v. Children not accessible to parents or guardians/fire exit barred
 - vi. Children may wander into traffic

- vii. Danger of abuse, misunderstanding, false accusations
- viii. Risk of exposing children to abuse
- ix. Child exposed to cyber bullying or grooming

5. In the event of an incident

- a. Ensure the child is given appropriate treatment/support
- b. If necessary ensure the appropriate authorities are contacted
- c. Ensure that the appropriate leaders at the venue are notified while protecting the privacy of the child where necessary
- d. Ensure the SGIA Incident report is filled in and a copy passed to the General Director

Speak Up

Understanding and responding to child abuse



About Child Wise

Established in 1991, Child Wise is one of Australia's leading not-for-profit child sexual abuse prevention organisations. Our vision is of a society in which children can grow up free from abuse and exploitation. Child Wise works to build awareness, deliver education, and provide the tools to empower individuals and communities around Australia so they can actively prevent child abuse.

Purpose of the Speak Up booklet

The purpose of this booklet is to provide parents, carers and professionals who work with children, information about the importance of preventing and reporting instances of child abuse.

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Design by Jasmine Tsan.

Child Wise values feedback and comments in order to improve our programs. Please contact us if you would like to make any suggestions regarding this guide.

Table of Contents

<u>Types of child abuse</u>	<u>2</u>
<u>Australian child protection data</u>	<u>3</u>
<u>Impacts of child abuse and trauma</u>	<u>4</u>
<u>Particularly vulnerable groups</u>	<u>6</u>
<u>Common sex offender behaviours</u>	<u>6</u>
<u>Child Safer organisations and communities</u>	<u>7</u>
<u>Child abuse trauma indicators by age group</u>	<u>8</u>
<u>Sexual development in children</u>	<u>10</u>
<u>United Nations Convention on the Rights of the Child</u>	<u>13</u>
<u>Child safe screening legislation in each State & Territory</u>	<u>14</u>
<u>Child safe screening systems used in each State & Territory</u>	<u>16</u>
<u>Reporting child abuse</u>	<u>19</u>
<u>Child Protection authorities</u>	<u>20</u>
<u>Support services</u>	<u>22</u>

Types of child abuse

Child abuse is an act that endangers a child or young person's health and wellbeing. Child abuse comes in different forms, all of which can have an impact on a child or young person's social, physical, intellectual and/or emotional development. Child abuse can be a single event or a series of traumatic events, both of which can have long lasting impacts on the victim.

Sexual Abuse

Occurs when a person uses power, force or authority to involve a child or young person in any form of unwanted or illegal sexual activity. These behaviours may take the form of touching or fondling, obscene or suggestive phone calls, taking or exposing children to sexually explicit images and videos, penetration (with penis, finger or other object), and forcing or coercing children to have sex or engage in sexual acts with other children or adults.

Physical Abuse

Occurs when a child or young person suffers significant harm from an injury. The injury may be intentionally inflicted, or may be the inadvertent consequence of physical punishment or physically aggressive treatment of a child or young person. Physical abuse may take the form of hitting, punching, beating, shaking, burning, restraining, poisoning or otherwise causing harm to the child.

Emotional Abuse

Also referred to as 'psychological abuse', emotional abuse affects a child's self-esteem and can have a significant impact on a child's mental, social and emotional development. Emotional abuse can include being repeatedly isolated, rejected, continual coldness, excluding and distancing of a child, or putting down and calling a child demeaning names.

Neglect

Occurs when there is a failure to provide or cater for a child or young person's basic needs for life, such as food, clothing, shelter, medical attention, supervision or care, to the extent that the child's health and development is, or is likely to be, placed at risk.

Exposure to Family Violence

Occurs when children and young people witness or experience the chronic domination, coercion, intimidation and victimisation of one person by another by physical, sexual or emotional means within a domestic relationship. Exposure to domestic violence can include watching or hearing a family member assault or threaten another member of the family, direct involvement (for example, trying to intervene or calling the police), or experiencing the aftermath of family violence, such as seeing physical indicators of abuse or observing parental depression.

Grooming

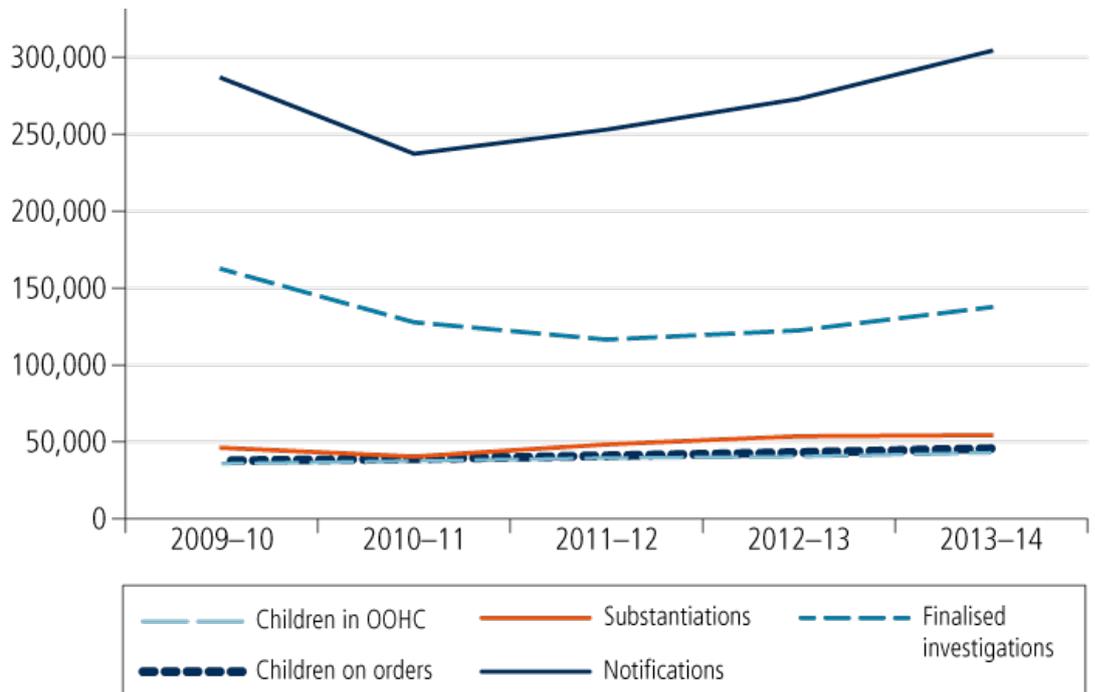
Occurs when communication or conduct is linked to the intention of facilitating the involvement of a child in sexual behaviour with an adult. It can include, but is not limited to, developing special relationships with a child; favouring or giving gifts to a child or young person; inappropriate interactions with children either in person or via forms of media and electronic devices; asking a child or young person to keep a secret of any aspect of their relationship; and testing of, or ignoring, professional boundaries or rules.

Australian child protection data

The graph below outlines national statutory child protection data. The data shows the magnitude of child protection in Australia over the past five years. It is important to remember that these are only the reports that are made to child protection authorities. Unfortunately too many instances of child abuse go unreported.

In 2013 - 2014 across Australia:

- Total number of notifications: **304,097**
- Children the subject of substantiations: **54,438**
- Children on Orders: **45,746**
- Children in Out of Home Care: **43,009**



Australian Institute of Health and Welfare Canberra, Child Protection Australia 2013-14

Impacts of child abuse and trauma

“
A child's primary drive is towards attachment rather than safety.”



Children and young people need stable, sensitive, loving and stimulating relationships and environments in order to reach their full potential. Child abuse can have significant and long lasting impact on a child's development. Home life, culture, family and community dynamics play an essential role in children's development, as they impact on a child's experiences and opportunities.

A child's primary drive is towards attachment rather than safety - they will accommodate to the parenting style they experience.

It is crucial to keep in mind that children are particularly vulnerable when witnessing and/or experiencing violence, abuse and/or neglectful circumstances. Given their age and vulnerability, witnessing or being a victim of abuse can lead children to have and display complex traumatic responses. Accordingly, infants and children adapt to frightening and overwhelming circumstances through the body's survival response. Their autonomic nervous system will become activated and switch on their natural flight/fight/freeze response.

Repeated and prolonged exposure to these experiences can lead to toxic stress for a child, which:

- alters the child's brain development,
- sensitises the child to further stress,
- leads to heightened activity levels and hypervigilance,
- consequently affects future learning and concentration.

Most importantly, abuse and trauma impairs a child's ability to trust and relate to others. When children are traumatised, they find it difficult to regulate their mood and behaviour,

and to self-soothe, which can have a lifelong effect.

Traumatic memories are stored differently to everyday memories. They are instead encoded in vivid imagery and sensations and lack verbal narrative and context. As they are unprocessed, they are likely to flood the child when triggers such as smells, sounds or internal and/or external reminders present at a later stage. Moreover, children can experience severe sleep disruption and intrusive nightmares, which contribute to their changed behaviour.

It is particularly important that attention is given to understanding the complexity of a child's experience. The recovery process for children is enhanced by the support of non-offending family members and significant others. Survivors of child abuse are often diagnosed with post-traumatic stress and other mental illnesses as adults due to their adverse childhood experiences.

It is also important to acknowledge that parents can have similar post-traumatic responses, as they feel overwhelmed and suffer shock and grief from their child's trauma and may need ongoing support as well.

The recovery process for children is enhanced by the support of non-offending family members and significant others.



Particularly vulnerable groups

Infants and pre-school children are at higher risk of abuse than older children. The leading cause of death amongst this age group is from injury and assault - the rate of child homicide is highest among infants less than 1 year old.

Indigenous children are over-represented across the child protection system compared with non-Indigenous children. In 2013-14, Indigenous children were:

- Approximately 7 times more likely to be the subject of substantiated abuse or neglect.
- Almost 10 times more likely to be on a care and protection order.
- Over 10 times more likely to be in out-of-home care.

It is estimated that children with a disability are 3 times more likely to be sexually abused - but the actual rate is probably far higher. There is early evidence to suggest that children from a culturally and linguistically diverse (CaLD) or migrant background are also at higher risk of sexual abuse.

Australian Institute of Health & Welfare, 2015.

Common sex offender behaviours

Methods used to develop trust

- Spending a lot of time with children and possibly their families.
- Touching the child in a non-sexual way and then progressively touching the child in a sexual way.
- Giving the child a lot of special attention, more than what would be regarded as usual.
- Complimenting and saying loving things to children.
- Doing things the child wants to do or buying gifts.
- Testing their ability to keep secrets.
- Filling a void perceived to be left by primary parents or carers.

Common locations for sexual offending

- At the child's home or the home of a friend or family member.
- Through organised sports or community activities.
- In child-related organisations and businesses.

Means for organising time alone

- Babysitting/looking after children.
- Taking a child on an outing, going for car rides or walks.
- Offering to provide tutoring, coaching or other extra curricular activities.

Child Safer organisations and communities

The Child Wise Standards aim to prevent, minimise and end child abuse in an organisational and institutional context.

12 Standards for a Child Safer Organisation

- 1 An open & aware culture
- 2 Understanding child abuse
- 3 Managing risk to minimise abuse
- 4 Child protection policies & procedures
- 5 Clear boundaries
- 6 Recruitment & selection
- 7 Screening of representatives
- 8 Support & supervision
- 9 Empowering children & young people
- 10 Training & education
- 11 Complaints & disclosures
- 12 Legal responsibilities

Child Wise established the ‘12 Standards for a Child Safer Organisation’ to create a framework for building open, transparent, and accountable organisations. If fully adopted, the Standards will act to combat the barriers to establishing a child safe organisation – fear, denial, lack of resources, complacency, group think, and an entrenched culture.

Child Wise has been active in its engagement with state and federal governments to help develop a national set of child safety standards. We are confident that these standards align with current and pending child safety standards in Australia. Just as all organisations are expected to meet Occupational Health and Safety standards through OHS regulations (i.e. WorkCover), organisations with a duty of care for children should be expected to meet standards for the protection and wellbeing children.

The Standards work together - by understanding child abuse organisations will be better able to identify any risks to children; by accounting for known risks through clear boundaries and codes of conduct they will enable better support and supervision of staff; better training in offender grooming behaviours will lead to more effective recruitment processes, and so on.

The Standards aim to prevent, minimise and end child abuse in an organisational and institutional context. They employ situational crime prevention tools to create environments that are ‘child safe’. This does not seek to have a direct effect on the behaviour of offenders but aims to eliminate or reduce their inappropriate behaviour within organisations. It is about creating safer environments, rather than safer individuals; the goal of a child safe environment is to create a culture where opportunities for abuse are unable to take place.

Recognising that there is no fool-proof system for the complete prevention of all forms of abuse, the Standards also incorporate elements of public health interventions to prevent the abuse of children, heighten the likelihood that abuse will be detected, and to reduce the long term impacts of abuse on children.

Child abuse trauma indicators by age group

Age Group	Trauma Indicators	Trauma Impacts
0 – 12 months	<ul style="list-style-type: none"> • Increased tension, irritability, reactivity and inability to relax • Increased startle response • Lack of eye contact • Sleep and eating disruption • Loss of acquired skills • Back arching • Aggression • Touch avoidance 	<ul style="list-style-type: none"> • Neurobiology of brain and central nervous system altered by switched on alarm response • Behavioural changes • Regression in acquired developmental gains • Lowered stress threshold • Lower immune system
12 months – 3 years	<ul style="list-style-type: none"> • Lack of eye contact • Inability to be soothed • Increased tension, irritability, reactivity and inability to relax • Loss of eating skills • Alarmed by trauma related reminders • Uncharacteristic aggression • Touch avoidance • Sexualised play with toys 	<ul style="list-style-type: none"> • Neurobiology of brain and central nervous system altered by switched on alarm response • Sleep disruption • Behavioural changes • Greater food sensitivities • Lowered stress threshold • Lower immune system
3 – 5 years	<ul style="list-style-type: none"> • Regression to younger behaviour • Bodily aches, pains and illness complaints with no explanation • Loss of skills (toileting, eating, self-care) • Lack of eye contact • Sleep disturbance, nightmares, night terrors • Withdrawal and quietening • General fearfulness • Separation anxiety • Sexualised drawings and demonstrated sexual knowledge 	<ul style="list-style-type: none"> • Behavioural changes • Hyperactive, hyper-arousal • Tiredness and lack of concentration • Delayed gross motor and visual perceptual skills • Greater food sensitivities • Fear of trauma reoccurrence • Low self-esteem and self-confidence • Loss of focus, lack of concentration and increased inattentiveness
5 – 7 years	<ul style="list-style-type: none"> • Lack of eye contact • Spacey, distractible or hyperactive • Increased tension, irritability, reactivity and inability to relax • Accident prone • Absconding/truanting from school • Hurting animals, fire lighting • Toileting accidents/smearing of faeces 	<ul style="list-style-type: none"> • Loss of concentration and memory • Eating disturbances • Risk taking behaviour triggered by previous experience of trauma • Sleep disturbance due to intrusive imagery • Mood or personality changes • Wish for revenge and action oriented responses triggered by trauma • Fearful of closeness and love

Age Group	Trauma Indicators	Trauma Impacts
7 – 9 years	<ul style="list-style-type: none"> • Frightened by intensity of own feelings • Distant and withdrawn • Feelings of shame, guilt and humiliation • Spacey, distractible, blanking out, loss of ability to concentrate • Increased tension, irritability, hyperactive, reactivity and inability to relax • Lowered school performance • Bodily aches and pains with no reason • Hurting animals, fire lighting • Retelling of traumatic events 	<ul style="list-style-type: none"> • Fear of trauma reoccurrence • Lowered self-esteem • Loss of concentration and memory • Speech or cognitive delays • Risk taking behaviour triggered by previous experience of trauma • Sleep disturbance due to intrusive imagery • Detailed memory of traumatic events • Wish for revenge and action oriented responses triggered by trauma • Fearful of closeness and love
9 – 12 years	<ul style="list-style-type: none"> • Feelings of shame, guilt and humiliation • Spacey, distractible, blanking out, loss of ability to concentrate • Reduced capacity to feel emotions – may appear numb or apathetic, distant and withdrawn • Depressed • Vulnerable to anniversary reactions caused by seasonal events, holidays • Lowered school performance • Retelling of traumatic event • Sexualised drawings or written stories 	<ul style="list-style-type: none"> • Risk taking behaviour triggered by previous experience of trauma • Fear of trauma reoccurrence • Lowered self-esteem • Lack of concentration and memory loss • Speech or cognitive delays • Factual and accurate memory may be embellished by elements of fear or wishes • Flashbacks of traumatic events • Wish for revenge and action oriented responses triggered by trauma • Concerned about personal responsibility for trauma
12 – 18 years	<ul style="list-style-type: none"> • Feelings of shame, guilt and humiliation • Eating disorders/disturbances • Sleep disturbance, nightmares • Distant and withdrawn • Depressed • Spacey, distractible, blanking out, loss of ability to concentrate • Challenging behaviours • Substance abuse • Aggressive/violent behaviour • Self-harming eg. cutting, burning • Suicidal ideation • Hurting animals, fire lighting 	<ul style="list-style-type: none"> • Flight into activity and involvement with others or retreat from others in order to manage inner turmoil • Pessimistic and vulnerable to withdrawal • Adulthood seen as a way of escaping impact and memory of trauma • Fear of growing up and need to stay in family orbit • Loss of, or reduced capacity to attune with caregiver • Acute distress when encountering any reminder of trauma

Sexual development in children

Traffic Light Model

The following model can be used to help parents and carers to assess if a child is displaying normal or concerning sexual development behaviours.

Green: Sexual behaviours that are considered 'normal', healthy, spontaneous, curious, light-hearted, easily distracted, experimental, and that are in line with age and ability level.
Action: opportunity to give the child or adolescent positive feedback and information.

Yellow: Sexual behaviours that are outside the norm in terms of persistence, frequency or disparity in age/development.
Action: gather more information to assess the most appropriate action.

Red: Sexual behaviours outside the norm – behaviour that is excessive, secretive, compulsive, coercive or degrading.
Action: requires immediate intervention and action.

When using the traffic light model it is important to remember the model is evidence based and outlines what research shows is normal and irregular sexual behaviours in children at various ages and stages of development.

Considerations

There are various influences on children's sexual behaviour and development, including:

- Parents and family relationships
- Media - television, internet, radio, magazines, etc
- Peer relationships
- How adults treat each other
- Children's services
- School environments
- Cultural background and norms

Social overlays or judgements should be managed carefully in order to appropriately respond to the behaviours in the first instance.

When assessing a child's sexualised behaviour it is important to consider the following variables:

- Is the behaviour age appropriate or concerning?
- What is the context of the behaviour?
- What is the age difference and relationship between children?
- What is the vulnerability of the child? (age, cognitive ability, socio economic status)

0 - 5 Years	
Green	<ul style="list-style-type: none"> • Thumb-sucking, body-stroking, genital holding • Curious - wants to touch others' private parts, e.g. when in bath • Games, e.g. doctor/nurse, 'show me yours, I'll show you mine' • Enjoyment being nude, using slang language for toilet functions
Yellow	<ul style="list-style-type: none"> • Preoccupation with adult sexual behaviour • Preoccupation with touching others' genitals • Use of adult sexual language • Peeping at others' private body parts, pulling others pants down/skirt up • Sexualised play with dolls
Red	<ul style="list-style-type: none"> • Simulation of foreplay/sexual behaviour in play • Persistent masturbation, touching or attempting to touch others' genitals • Sexual behaviour between children involving penetration with objects • Forcing other children to engage in sexual play
5 - 9 Years	
Green	<ul style="list-style-type: none"> • Self-touching, masturbation to self-soothe • Increased curiosity about other children's genitals and adult sexuality (e.g. babies, gender differences) • Using 'toilet words', body parts as swear words to be silly, telling dirty jokes • Increased sense of privacy about bodies
Yellow	<ul style="list-style-type: none"> • Persistent/recurrent questions about sexual activity • Writing sexually threatening notes • Engaging in mutual masturbation • Constant public touching of own genitals • Use of adult language to discuss sex i.e., "do I look sexy?" • Persistent use of dirty words
Red	<ul style="list-style-type: none"> • Persistent masturbation, especially in front of others • Sexual behaviours engaging younger/less able children (e.g. sneaking into room of sleeping younger children to touch or engage in sexual play) • Simulation of sexual acts sophisticated for age e.g. oral sex • Persistent sexual themes in talk, play, art, etc
9 - 12 Years	
Green	<ul style="list-style-type: none"> • Use of sexual language and dirty words/jokes with peers • Having girlfriends/boyfriends; consensual kissing with known peers • Some exhibitionism e.g. flashing/mooning to same age peers • Increased need for privacy • Occasional masturbation • Use of internet to chat online
Yellow	<ul style="list-style-type: none"> • Sudden change in behavior or dress • Mixing with new and/or older people • Bullying involving sexual aggression • Pseudo maturity, inappropriate knowledge, discussion of sexuality • Preoccupation with online chat or pornography • Persistent expression of fear of pregnancy or STIs • Mutual masturbation, preoccupation with masturbation
Red	<ul style="list-style-type: none"> • Persistent masturbation, particularly in front of others • Sexual activity, oral sex, intercourse, coercion of others into sexual acts • Sending nude/sexually provocative images of self or others online • Degradation/humiliation of self or others using sexual themes • Presence of STI • Penetration of children, animals, dolls or other objects

13 - 18 Years	
Green	<ul style="list-style-type: none"> • Sexually explicit conversations with peers; obscenities/jokes within norm • Solitary masturbation • Interest in erotica • Use of internet to chat online • Sexual activity: flirting, hugging, kissing, foreplay, hand-holding, consensual oral sex, intercourse with partner of similar age and development
Yellow	<ul style="list-style-type: none"> • Sexual preoccupation • Anxiety interferes with daily function • Preoccupation with pornography, online chat, meeting online acquaintance • Sexually aggressive themes, obscenities or graffiti • Peeping, exposing, non-consensual sexual touch, violation of others' space • Unsafe sexual behaviour i.e. unprotected, intoxicated, multiple partners
Red	<ul style="list-style-type: none"> • Compulsive masturbation (especially chronic or public) • Degradation of self or others with sexual themes • Preoccupation with sexually aggressive pornography • Sexual harassment, attempt or force others to expose genitals • Sexual contact or talk with others of a significantly different age developmental status • Sending nude or sexually provocative images of self to others online • Genital injury to self or others • Sexual penetration or contact with animals

*Traffic Lights: Family Planning Queensland (2006), adapted from the Child at Risk Assessment Unit (2000).
Age Appropriate Sexual Play and Behaviour in Children*

United Nations Convention on the Rights of the Child

Parents share the responsibility for bringing up their children and should always consider what is best for each child.

ARTICLE 1 (Definition Of The Child)

Everyone under 18 years of age has all the rights in this Convention.

ARTICLE 2 (Non-discrimination)

The Convention applies to all children; whatever their race, religion, abilities, wherever they come from, or whether they are a boy or girl.

ARTICLE 3 (Best interests of the child)

The best interests of children must be the primary concern in making decisions that may affect them. All adults should do what is best for children.

ARTICLE 4 (Protection of rights)

Governments should make sure these rights are respected, protected and fulfilled.

ARTICLE 5 (Parental guidance)

Governments should respect the rights and responsibilities of families to guide their children so that, as they grow up, they learn to use their rights properly.

ARTICLE 6 (Survival & development)

Children have the right to live a full life. Governments should ensure that children survive and develop healthily.

ARTICLE 7 (Identity & belonging)

Children have the right to a legally registered name and nationality. Children also have the right to know their parents and, as far as possible, to be cared for by them.

ARTICLE 8 (Preservation of identity)

Governments should respect a child's right to a name, a nationality and family ties.

ARTICLE 9 (Separation from parents)

Children have the right to live with their parent(s), unless it is bad for them. Children whose parents do not live together have the right to stay in contact with both parents, unless this might hurt the child.

ARTICLE 10 (Family reunification)

Families who live in different countries should be allowed to move between those countries so that parents and children can stay in contact or reunify as a family.

ARTICLE 11 (Kidnapping)

Governments should take steps to stop children being taken out of their own country illegally.

ARTICLE 12 (Respect child's opinion)

Children have the right to say what they think should happen when adults are making decisions that affect them and to have their opinions taken into account

ARTICLE 13 (Freedom of expression)

Children have the right to get and to share information, as long as the information is not damaging to them or to others.

ARTICLE 14 (Freedom of beliefs)

Children have the right to think and believe what they want and to practise their religion, as long as they are not stopping other people from enjoying their rights. Parents should guide children on these matters.

ARTICLE 15 (Freedom of association)

Children have the right to meet with other children and young people and to join

groups and organisations, as long as this does not stop other people from enjoying their rights.

ARTICLE 16 (Privacy)

Children have the right to privacy. The law should protect them from attacks against their way of life, their good name, their family and their home.

ARTICLE 17 (Access to information)

Children have the right to information that is important to their development and wellbeing. Mass media such as television, radio and newspapers should provide information that children can understand and should not promote materials that could harm children.

ARTICLE 18 (Parental responsibilities)

Both parents share responsibility for bringing up their children and should always consider what is best for each child. Governments should help parents by providing services to support them.

ARTICLE 19 (Protection from violence)

Governments should ensure that children are properly cared for and protect them from violence, abuse and neglect by their parents, or anyone else who cares for them.

ARTICLE 20 (Out-of-home care)

Children who cannot be looked after by their own family must be looked after properly by people who respect their religion, culture and language.

ARTICLE 21 (Adoption)

When children are adopted, the first concern must be what is best for them. The same rules should apply whether children are adopted in the country of their birth or if they are taken to live in another country.

ARTICLE 22 (Refugee children)

Children who come into a country as refugees should have the same rights as children who are born in that country.

ARTICLE 23 (Children with disabilities)

Children who have any kind of disability should receive special care and support so that they can live a full and independent life.

ARTICLE 24 (Health)

Children have the right to good quality health care, clean water, nutritious food and a clean environment.

ARTICLE 25 (Review of treatment in care)

Children who are looked after by local authorities rather than their parents should have their situation reviewed regularly.

ARTICLE 26 (Social security)

Children have the right to financial help from the government if they are poor or in need.

ARTICLE 27 (Adequate living standards)

Children have the right to a standard of living that is good enough to meet their physical and mental needs. The government should help families who cannot afford to provide this.

ARTICLE 28 (Education)

Children have the right to an education. Discipline in schools should respect children's dignity. Young people should be

encouraged to reach the highest level of education of which they are capable.

ARTICLE 29 (Goals of education)

Children's education should develop each child's personality, talents and abilities to the fullest. It should encourage children to respect the rights of others and their own.

ARTICLE 30 (Children of minorities)

Children have the right to learn and use the language and customs of their families, whether or not these are shared by the majority of the people in the country where they live, as long as it does not harm others.

ARTICLE 31 (Leisure, play and culture)

Children have the right to relax, play and to join in a wide range of leisure activities.

ARTICLE 32 (Child labour)

Governments should protect children from work that is dangerous or that might harm their health, education or wellbeing.

ARTICLE 33 (Drug abuse)

Governments should use all means possible to protect children from dangerous drugs.

ARTICLE 34 (Sexual abuse)

Governments should protect children from all forms of sexual abuse and exploitation.

ARTICLE 35 (Abduction & trafficking)

Governments should make sure that children are not abducted or sold.

ARTICLE 36 (Exploitation)

Children should be protected from any activity that could harm their development.

ARTICLE 37 (Detention & punishment)

Children who break the law should not be treated cruelly. They should not be put in a prison with adults and should be able to keep in contact with their family.

ARTICLE 38 (War & armed conflict)

Governments should not allow children under 15 to join the army. Children in war zones should receive special protection.

ARTICLE 39 (Rehabilitation of child victims)

Children who have been abused or neglected should receive special help to recover and restore their self-respect.

ARTICLE 40 (Juvenile justice)

Children who are accused of breaking the law should receive legal help. Governments are required to set a minimum age below which children cannot be held criminally responsible.

ARTICLE 41 (National laws)

If the laws of a country protect children better than the articles of the Convention, then those laws should override the Convention.

ARTICLE 42 (Knowledge of rights)

Governments should make the Convention known to all parents and children.

ARTICLES 43 TO 54 (Implementation measures)

These articles discuss how governments and international organisations like Child Wise should work to ensure children are protected in their rights.

Child Safe screening legislation in each State & Territory

Jurisdiction	Act	Type of program
VIC	<i>Working With Children Act 2005</i>	Individuals are required to apply for a Working With Children Check. Valid for 5 years, the check entitles individuals to engage in child-related organisations, occupations, volunteering and practical training. The WWCC Act was amended in 2014 and is now seen as a minimum standard in Victoria.
NSW	<i>Child Protection (Working with Children) Act 2012</i>	The NSW Working With Children Check resulted in a move from an employer driven “point-in-time” system to a system where individuals, including volunteers, are responsible for their own application for certification. Employers operating within a child-related industry are required to register online with the NSW Office of the Children’s Guardian and to subsequently conduct online verification of new paid employees clearance. Existing paid workers and all volunteers (new and current) also need to have clearance validated online as they are phased in to the new check system. The check is valid for 5 years and subject to ongoing monitoring.
QLD	<i>Commission for Children and Young People and Child Guardian Act 2000</i>	Individuals are required to apply for a Working With Children Check, known as a ‘Blue Card’ in Queensland. Valid for 2 years, Blue Cards entitle individuals to engage in child-related occupations and volunteering. Organisations providing child-related services must also have policies and procedures in place to identify and minimise risk of harm to children, which are monitored by the Commissions for Children and Young People and Child Guardian.
WA	<i>Working with Children (Criminal Record Checking) Act 2004</i>	Individuals are required to apply for a Working With Children Check. Valid for 3 years, the check entitles individuals to engage in child-related occupations and volunteering.
SA	<i>Children’s Protection Act 1993</i>	The South Australian system is an employer driven point-in-time system requiring employers and responsible authorities to obtain National Police Checks and conduct wider screening assessment for those engaging in child-related occupations and volunteering.

Jurisdiction	Act	Type of program
ACT	<i>Working with Vulnerable People (Background Checking) Act 2011</i>	The ACT Working with Vulnerable People Background Check requires that individuals engaging in regulated activities or services, including where these are provided to children, must be registered. A statutory Screening Unit within the Office of Regulatory Services, Justice and Community Safety Directorate is responsible for applications for registration. The registration is valid for 3 years and is subject to ongoing monitoring. There are three types of registration administered to individuals under the Working with Vulnerable People Background Check: general registration, which is transferable across all roles and organisations; role-based registration; and conditional registration.
NT	<i>Care and Protection of Children Act 2007</i>	Individuals are required to apply for a Working With Children Check, known as an 'Ochre Card' in the NT. The Ochre Card, which is also known as a Clearance Notice, is valid for 2 years and applies to employers and volunteers in child-related employment settings.
TAS	<i>Education and Care Services National Law (Application) Act 2011</i>	The Good Character Check screening program requires that staff members, volunteers and students on practicum placement obtain a security screen clearance in order to engage in work with regulated education and care services only. The Good Character Check includes consideration of crimes of violence; sex-related offences; serious drug offences; crimes involving dishonesty; and serious traffic offences. Employers in other child-related work may require police checks at their discretion.

Child safe screening systems used in each State & Territory

Jurisdiction	Information considered
VIC	<p>The Working With Children Check is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check - offences with most significance include serious sexual offences, serious violent offences, serious drug related offences, offences against the <i>Working with Children Act 2005</i>. • A review of relevant findings from prescribed professional disciplinary bodies. • Information sought from other bodies, such as courts, the Director of Public Prosecutions and any employee within the meaning of the <i>Public Administration Act 2004</i>, Corrections Victoria and employers. It includes where a court made a formal finding of guilt in relation to an offence, convicted the applicant of an offence, accepted a plea of guilt from the applicant, or acquitted the applicant of an offence because of mental impairment. • Information about any spent convictions, juvenile convictions and findings of guilt, pending charges, and the circumstances surrounding any charges or convictions. <p>In addition, the following individuals are ineligible to apply for a Working With Children Check:</p> <ul style="list-style-type: none"> • Registered sex offenders within the meaning of the <i>Sex Offenders Registration Act 2004</i>, or subject to an extended or interim extended supervision order under the <i>Serious Sex Offenders Monitoring Act 2005</i>. • Individuals subject to a detention order, including an interim detention order or a supervision order, including an interim supervision order under the <i>Serious Sex Offenders (Detention and Supervision) Act 2009</i>.
QLD	<p>The Blue Card screening system is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check. • Consideration of any charge or conviction for an offence, whether or not a conviction is recorded. • Consideration of whether a person is a respondent to or subject to an application for a child protection prohibition or disqualification order; or whether a person is subject to reporting obligations under the <i>Child Protection (Offender Reporting) Act 2004</i>. • Disciplinary information from professional organisations associated with teachers, childcare service providers, foster carers, nurses, midwives and certain health practitioners. • Information from police investigations into allegations of serious child-related offences will be taken into account, even if no charges were laid because the child was unwilling or unable to proceed.

Jurisdiction	Information considered
NSW	<p>The Working With Children Check is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check for charges and convictions (including spent convictions) for any sexual offence (including but not limited to, sexual assault, acts of indecency, child pornography, child sexual exploitation and carnal knowledge); any assault, ill treatment, neglect of, or psychological harm to a child; any registrable offence; offences of attempting, or of conspiracy or incitement, to commit any of the above offences. • Consideration of whether any of the above offences were committed in New South Wales and were punishable by penal servitude or imprisonment for 12 months or more; or whether any of the above offences were committed elsewhere and would have been an offence punishable by penal servitude or imprisonment for 12 months or more if the offence had been committed in New South Wales. • Consideration of relevant matters, including all matters irrespective of whether they are considered spent or were committed as a juvenile (relevant matters include charges that may not have been heard or finalised by a court; are proven but have not led to a conviction; or have been dismissed, withdrawn or discharged by a court). • Consideration of relevant Apprehended Violence Orders. • Consideration of relevant employment proceedings, reportable conduct, any sexual offences or sexual misconduct committed against, with, or in the presence of a child, including a child pornography offence; any child-related personal violence offence; any assault, ill treatment or neglect of a child; any behaviour that causes psychological harm to a child; or an act of violence committed by an employee in the course of employment and in the presence of a child. As part of an additional risk assessment, the Children's Guardian may give consideration to a range of different factors regarding previous matters that triggered the risk assessment. The Children's Guardian may also consider any other matters deemed necessary for an assessment to be made.
WA	<p>The Working With Children Check is comprised of:</p> <ul style="list-style-type: none"> • Relevant national criminal record information to see if the applicant has charges or convictions that indicate that he or she may be of harm to a child (relevant criminal records include information about convictions for any offence, whether committed as an adult or a juvenile; any spent convictions; any pending charge for a Class 1 or Class 2* offence; and any charge that has been finalised by a court for a Class 1 or Class 2 offence but which did not result in a conviction). • Information may also be obtained from authorised bodies in WA and similar authorities in other states and territories, such as the police, the Director of Public Prosecutions, the Department of Corrective Services, the Department of the Attorney General and courts. <p>* Class 1 and 2 offences include various sexual offences against a child, as well as offences such as murder, manslaughter, grievous bodily harm, indecent assault, making/viewing child pornography and involvement in child sexual exploitation and other offences.</p>

Jurisdiction	Information considered
SA	<p>Under the Children's Protection Regulations 2010, the Department of Communities and Social Inclusion provides a wider screening assessment which includes:</p> <ul style="list-style-type: none"> • A National Police Check. • South Australian Police information regarding alleged offences regardless of outcome, including spent convictions; pending charges and non-conviction charges; and circumstantial information around charges and convictions. • Information from other jurisdictions. • Information sourced from professional registration bodies.
ACT	<p>The Vulnerable People Background Check is comprised of:</p> <ul style="list-style-type: none"> • A risk assessment conducted by the Commissioner for Fair Trade, which can include checking for charges and convictions, whether committed in the ACT or elsewhere for any sexual offence; offence against the person; offence involving violence; offence involving dishonesty or fraud; offence relating to property; offence involving possession of or trafficking in a drug of dependence or controlled drug; an offence against an animal; and a driving offence. • Consideration is given to non-conviction information in relation to a relevant offence (or an alleged relevant offence) involving the following: where a person has been charged with the offence but a proceeding is not finalised; the charge has lapsed, been withdrawn or discharged, or struck out; the person has been acquitted of an alleged offence; a conviction for an alleged offence has been quashed or set aside; an infringement notice for an alleged offence has been served, or the person has a spent conviction for the offence. • Consideration may also be given to apprehended violence orders; care and protection orders for a child for whom the person has or had parental responsibility; and professional disciplinary proceedings against the person.
NT	<p>The Working with Children Clearance Screening (Ochre Card) is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check - offences of most significance included sexual offences involving children, violent offences involving children and drug related offences involving children. • An analysis of employment history, including an assessment of references and/or disciplinary proceedings instigated as a result of malpractice. • Other material, which may include assessing whether an individual has attempted to change behaviours or address triggers to behaviours if they have a criminal history.

Reporting child abuse

Children have a right to protection from being hurt, and from violence, abuse and neglect. No one likes to think of children being abused, but unfortunately child abuse is a reality. It is important that all those involved with children or young people are alert to the possibility of abuse and know what to do if they have concerns about a child's safety or welfare.

In Australia, state and territory governments are responsible for receiving reports of suspected child maltreatment from members of the public. Anyone who suspects, on reasonable grounds, that a child or young person is at risk of being neglected or physically, sexually or emotionally abused, should report it to the authority in their state or territory.

How do I know if a child is at risk of abuse?

Abuse can take many forms – physical, emotional, sexual, neglect. You may see suspicious marks or bruises, you may notice a change in the child's behaviour, or a child may say something directly about ill treatment.

What should I do if I am worried about a child?

If you think a child may be suffering (or has suffered) abuse or neglect, you must take action – the safety and welfare of the child must come first and may depend on you reporting your concerns.

- Act promptly, particularly in cases of suspected abuse or neglect which could be life threatening.
- Make a confidential, factual record of what you have seen or heard. Do this at the time of the event. Have this record with you when you make a report.
- Contact your local Child Protection agency or Child Wise.

When should I make a report to Child Protection?

- A child makes a disclosure of sexual or physical abuse.
- A child has a concerning or suspicious physical injury.

When should I contact the Police?

- If you believe a child to be in life threatening or imminent danger.

It is important to note that in Victoria, certain groups of people are required by law to report any suspicion of abuse and neglect of a child. Further guidelines regarding mandatory reporting can be found in Mandatory Reporting of Child Abuse and Neglect (<http://www.aifs.gov.au/cfca/pubs/factsheets/a141787/index.html>).

Child Protection authorities

State	Reporting authority	Phone	Address
VIC	Department of Human Services – Children, Youth and Families www.dhs.vic.gov.au	<p>Metropolitan East: 1300 360 391 South: 1300 655 795 North & West: 1300 664 977</p> <p>Rural Barwon South Western: 1800 075 599 Gippsland: 1800 020 202 Grampians: 1800 000 551 Hume: 1800 650 227 Loddon Mallee: 1800 675 598</p> <p>After hours (all regions) 131 278</p>	Level 9 50 Lonsdale St Melbourne, 3000
NSW	Department of Family and Community Services www.facs.nsw.gov.au	All hours 132 111	219-241 Cleveland St Redfern, 2016 Locked Bag 10 Strawberry Hills, 2012
QLD	Department of Communities Child Safety and Disability Services – Child Safety Services www.communities.qld.gov.au	<p>During business hours South East: 1300 679 849 South West: 1300 683 390 Far North: 1300 684 062 North: 1300 706 147 North Coast: 1300 703 921 Brisbane: 1300 682 254 Central: 1300 703 762</p> <p>After hours (all regions) 1800 177 135</p>	111 George St Brisbane, 4000 PO Box 806 Brisbane, 4002
WA	Department for Child Protection www.dcp.wa.gov.au	<p>During business hours (08) 9222 2555 1800 622 258 (toll free)</p> <p>After hours (08) 9223 1111 1800 199 008 (toll free)</p> <p>If you are a mandatory reporter: 1800 708 704 (24 hours)</p>	189 Royal St East Perth, 6004 PO Box 6334 East Perth, 6892

State	Reporting authority	Phone	Address
SA	Department for Education and Child Development <i>www.families.sa.gov.au</i>	All hours 131 478	31 Flinders St Adelaide, 5000 GPO Box 1152 Adelaide, 5001
ACT	Department of Human Services – Child and Youth Protection Services <i>www.humanservices.gov.au</i>	All hours 1300 556 729 If you are a mandatory reporter: 1300 556 728	219-241 Cleveland St Redfern, 2016 Locked Bag 10 Strawberry Hills, 2012
NT	Department of Children and Families <i>www.childrenandfamilies.nt.gov.au</i>	All hours 1800 700 250	PO Box 40596 Casuarina, 0810
TAS	Department of Health and Human Services - Child Protection Services <i>www.dhhs.tas.gov.au</i>	All hours 1300 737 639	GPO Box 125 Hobart, 7001

Support services

If a child is in immediate danger, contact the Police on 000

Other Support Services	Phone	Website	Email
Child Wise National Child Abuse Helpline	1800 99 10 99	www.childwise.org.au	helpline@childwise.org.au
Australian Federal Police	+61 262 233 000	www.afp.gov.au	
Kids Helpline	1800 551 800	www.kidshelp.com.au	counsellor@kidshelp.com.au
Life Line	13 11 14	www.lifeline.org.au	
Parentline	13 22 89	www.parentline.com.au	parentline@boystown.com.au
Child FIRST	1300 775 160 (Victoria)	www.dhs.vic.gov.au	

Location	Hospital	Phone	Address
Melbourne, VIC	Royal Children's Hospital	(03) 9345 5522	50 Flemington Rd Parkville, 3052
Sydney NSW	The Children's Hospital at Westmead	(02) 9845 0000	212 Hawkesbury Rd Westmead, 2145
Brisbane, QLD	Royal Brisbane and Women's Hospital	(07) 3646 8111	Butterfield st Herston, 4006
Perth, WA	Princess Margaret Hospital for Children	(08) 9340 8222	Roberts Rd Subiaco, 6008
Adelaide, SA	Women's and Children's Hospital	(08) 8161 7000	72 King William Rd North Adelaide, 5006
Canberra, ACT	Centenary Hospital for Women and Children	(02) 6244 2712 AH: (02) 6244 2222	Hospital Rd Tiwi, 2605
Darwin, NT	Royal Darwin Hospital	(08) 8922 8888	Rocklands Dr Casuarina, 0810
Hobart TAS	Royal Hobart Hospital	(03) 6222 8308	48 Liverpool St Hobart, 7000



PO Box 1117, South Melbourne, Vic, 3205
Phone: (03) 9645 8911 Fax: (03) 9645 8922

www.childwise.org.au