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Understanding Child Abuse

“Understanding child abuse is the first step in building a child safe organisation. To protect children in your care you need to know the potential risks and indicators of child abuse. It is only with this knowledge and understanding that you can develop effective child protection policies and child abuse prevention practices.” Child Wise Booklet, 12 Steps to Building Child Safe Organisations - www.childwise.net

What is Child Abuse?
A widely held definition for abuse of a child is suggested by the International Society for the Prevention of Child Abuse and Neglect:

“Child Abuse is the proportion of harm to children that results from human action that is proscribed, proximate and preventable.” (Finkelhor and Korbin 1988)

Child maltreatment refers to any non-accidental behaviour by parents, caregivers, other adults or older adolescents that is outside the norms of conduct and entails a substantial risk of causing physical or emotional harm to a child or young person. Such behaviours may be intentional or unintentional and can include acts of omission (i.e., neglect) and commission (i.e., abuse) (Bromfield, 2005; Christoffel, et al., 1992).

A Child Focused Approach

It is imperative for us to always maintain a child focus when considering child abuse and neglect. A child focus means that we look first at what the effect of the situation is on the child, presently and in the future. That is opposed to an adult focus which focuses on the adult offender and looks for reasons to excuse their abusive behaviour. It is never the child’s fault that abuse has occurred. The adult (or minor offender under age 18) must always be held accountable for their behaviour.

‘Reasonable Chastisement’ Explained

All children need loving guidance and different parents/carers will choose different ways to provide guidance to their children when correcting their behaviour. Over the last 25 years Australian society has embraced other more preferable techniques for discipline than ‘smacking’ or ‘corporal punishment’. However, all Australian states do still have some provision in common law or specific legislation that condones the use of ‘reasonable chastisement’ or minimal force by a parent / carer, by way of correction, towards a child.

Most states / territories determine ‘reasonable chastisement’ on a case by case basis with regard to:

- The age of the child
- The method of punishment
- The child’s capacity for reasoning (i.e. whether the child is able to comprehend correction/discipline); and
- The harm caused to the child
‘Smacking’ or ‘Corporal Punishment’ that results in the bruising, marking or other injury lasting more than a 24-hour period may be deemed to be ‘unreasonable’ and thus classified as physical abuse. (I.e. The Crime Amendment Act 2001 (NSW) establishes that corporal punishment is ‘unreasonable’ if the force is applied to any part of the head or neck of a child or to any other part of the body in such a way as to likely cause harm to a child that lasts for more than a short period.) ‘Unreasonable’ corporal punishment may lead to intervention by police and or child protection authorities. Physical abuse goes beyond reasonable levels of chastisement and is the intentional act of inflicting injuries on a child Some Facts Concerning Child Abuse

Some Facts Concerning Child Abuse

- Approximately 250,000 reports of child abuse are made in Australia each year
- Statistics show that 1 in 3 girls and 1 in 7 boys will experience some form of sexual abuse
- 1 in 3 Australians will have experienced some form of abuse or neglect during their childhood
- Psychological and emotional harm are the most devastating effects of child abuse. These effects can be far reaching.
- Children rarely lie about or imagine being abused
- Those who abuse children come from all walks of life
- Research indicates that up to 50% of familial abusers will abuse children outside their own families as well. (Moore 1995)
- Research shows that approximately 90% of offenders are known by the victim, with abuse occurring at the child’s home or the abuser’s home. (‘Known’ indicates a person who has formed some sort of relationship with the child, their family or both)
- Perpetrators often start offending in their teens
- Abuse can occur between peers and by older children or teenagers perpetrating against younger children
- Offenders are usually bigger, older and have authority over the victim. Many children are threatened with further harm should they disclose information. Children are also tricked or shamed into maintaining their silence
- It is common for offenders to spend 2-3 years targeting the victim(s) they intend to abuse. It is important to remember their goals are to gain the trust of their intended victims, their family and carers
- Offenders usually spend inappropriate amounts of time with children. They often relate more to children than with people their own age.

Adults will always be held responsible regardless of the child’s behaviour. The child is always the victim, never the cause. The danger of not reporting abuse is continued abuse in a child’s life or and in some cases the abuse can be life threatening.

Healing is always possible in God. An important factor in recovery is how appropriately the situation is handled by the adults involved in the child’s life.
Four Types of Child Abuse

There are four types of Child Abuse. A child that has or is currently experiencing abuse may display some indicators, either behavioural and or physical (This Booklet, pages 6 to 9)

1. **Emotional Abuse** is a chronic behavioural pattern directed at a child whereby the child’s self esteem and social competence are undermined or eroded over time. Such behaviour may include:
   - Devaluing (e.g. “you’re hopeless, useless, and stupid”).
   - Ignoring (e.g. parent or carer is psychologically unavailable to the child).
   - Rejecting (telling a child in various ways he/she is unwanted)
   - Corrupting (to allow children to participate in immoral or criminal acts)
   - Isolating (limits normal social experiences)
   - Terrorising (may single out or threaten with punishment or death)
   - Witnessing domestic / family violence

2. **Neglect** is characterised by serious ongoing failure to provide for children’s basic needs (i.e. clothing, shelter, nutrition, medical care, dental care, and education). Such behaviour may include:
   - Inadequate supervision of young children for long periods of time
   - Failure to provide adequate nutrition, clothing or personal hygiene
   - Disregard for potential hazards in the home
   - Forcing children to leave home early

3. **Physical Abuse** goes beyond ‘Reasonable Chastisement’ (This Booklet, pages 3 to 4) for explanation of this term) and is the intentional act of inflicting physical injuries. Physical abuse is commonly characterized by such behaviours as:
   - Punching
   - Shaking
   - Beating
   - Burning
   - Biting
   - Pulling out hair
   - Bruising or other obvious injury
   - Or otherwise harming a child.

4. **Sexual Abuse** occurs when someone in a position of power to the child or young person uses their power to involve the child or young person in any sexual activity. Sexual abuse can occur between peers. Sexual abuse can include:
   - Sexual suggestions
   - Exhibitionism, mutual masturbation and oral sex
   - Showing pornographic material (e.g. printed material, photographs, DVD’s and internet)
   - Using children in the production of pornographic material
   - Penile or other penetration of the genital or anal region
   - Child Prostitution
Indicators of Child Abuse

The following is a guideline to assist with recognition of child abuse and neglect and is not intended to be exhaustive. The presence of one or even several indicators does not prove that abuse exists. However, the repeated occurrence of one indicator or the presence of several indicators in combination should alert observers to the possibility that a child may be being abused or neglected. Note that some illnesses or birth defects may produce similar symptoms.

<table>
<thead>
<tr>
<th>Behavioural Indicators</th>
<th>Physical Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of supervision</td>
<td>Poor physical care i.e. Tooth decay and or gum disease, untreated sores, unwashed.</td>
</tr>
<tr>
<td>Easily drawn to adults</td>
<td>Head Lice</td>
</tr>
<tr>
<td>Truancy</td>
<td>Nappy rash</td>
</tr>
<tr>
<td>Acting out</td>
<td>Underweight or overweight</td>
</tr>
<tr>
<td>Difficulty performing at expected benchmarks for age</td>
<td>Fatigue</td>
</tr>
<tr>
<td>Reluctance to go home</td>
<td>Clothes dirty or clothing worn is inadequate for weather conditions (i.e. Short sleeve shirt and shorts in cold weather)</td>
</tr>
<tr>
<td>Stealing of food</td>
<td>Nail biting</td>
</tr>
<tr>
<td>Craves attention from others</td>
<td>Cutting or otherwise self harming</td>
</tr>
<tr>
<td>Child constantly sleepy or hungry</td>
<td>Lives in unsanitary conditions</td>
</tr>
<tr>
<td>Poor self esteem. Depression</td>
<td>Lack of heating</td>
</tr>
<tr>
<td>Protective behaviours toward parents and or siblings</td>
<td>Infestation of rodents</td>
</tr>
<tr>
<td>Mirrored adult behaviour well advanced for their years</td>
<td></td>
</tr>
</tbody>
</table>
## EMOTIONAL ABUSE

<table>
<thead>
<tr>
<th>Behavioural Indicators</th>
<th>Physical Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Lack of concern for personal hygiene or physical care</td>
<td>• Unkempt appearance</td>
</tr>
<tr>
<td>• Attention seeking behaviour</td>
<td>• Nail biting</td>
</tr>
<tr>
<td>• Anxiety</td>
<td>• Self-harming</td>
</tr>
<tr>
<td>• Delayed or distorted speech</td>
<td></td>
</tr>
<tr>
<td>• Regressive behaviour e.g. soiling</td>
<td></td>
</tr>
<tr>
<td>• Wetting</td>
<td></td>
</tr>
<tr>
<td>• Extremely low self-esteem</td>
<td></td>
</tr>
<tr>
<td>• Aggressive or demanding behaviour</td>
<td></td>
</tr>
<tr>
<td>• Depression, sleep disorders</td>
<td></td>
</tr>
<tr>
<td>• Rocking</td>
<td></td>
</tr>
<tr>
<td>• Inability to mix with other children</td>
<td></td>
</tr>
<tr>
<td>• Changes in behaviour</td>
<td></td>
</tr>
<tr>
<td>• Negative verbal attacks toward self or others (I’m/your stupid, I hate you/myself)</td>
<td></td>
</tr>
<tr>
<td>• Seeks perfection in all tasks performed</td>
<td></td>
</tr>
<tr>
<td>• Overreacts to constructive criticism</td>
<td></td>
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</tbody>
</table>

Note: All abuse causes emotional distress to children but emotional abuse is the specific term applied to behaviour, which destroys a child’s confidence (e.g. rejection, verbal abuse). Therefore there are few physical indicators for emotional abuse although emotional abuse can be accompanied by other types of abuse.
## SEXUAL ABUSE

<table>
<thead>
<tr>
<th>Behavioural Indicators</th>
<th>Physical Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Inappropriate sexual activity i.e. rubbing against an adult</td>
<td>• Bruises</td>
</tr>
<tr>
<td>• Fear of being alone with a particular adult</td>
<td>• Bleeding in the genital area</td>
</tr>
<tr>
<td>• Sexual theme in artwork, stories or play</td>
<td>• Complains of soreness in the genital areas</td>
</tr>
<tr>
<td>• Showing a knowledge of sexual knowledge beyond their years</td>
<td>• Pregnancy</td>
</tr>
<tr>
<td>• Repressive behaviour</td>
<td>• Sexually transmitted infections</td>
</tr>
<tr>
<td>• Strong fear about going home</td>
<td>• Bruises to breasts, buttocks, lower abdomen, upper arms or thighs</td>
</tr>
<tr>
<td>• Sleep disorder</td>
<td>• Urinary tract infections</td>
</tr>
<tr>
<td>• Inhibition to play</td>
<td></td>
</tr>
<tr>
<td>• Serious difficulty relating to peers and or adults</td>
<td></td>
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<tr>
<td>• Self-destructive behaviour</td>
<td></td>
</tr>
<tr>
<td>• Suicidal behaviour</td>
<td></td>
</tr>
<tr>
<td>• Constant complaint of headaches or abdominal pains</td>
<td></td>
</tr>
<tr>
<td>• Bedwetting</td>
<td></td>
</tr>
<tr>
<td>• Difficulty walking</td>
<td></td>
</tr>
<tr>
<td>• Frequent infections</td>
<td></td>
</tr>
<tr>
<td>• Appearance of material goods</td>
<td></td>
</tr>
<tr>
<td>• Obsessive talk of someone</td>
<td></td>
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</tbody>
</table>

*Note: It is particularly important to recognise the possible lack of any physical symptoms with sexual abuse. It is not abnormal for there to be no obvious physical symptoms but rather a considerable presence of behavioural indicators.*
Identifying an Abuse Situation

An abuse situation involves a cluster of indicators as listed on (Booklet 1, pages 6 to 9). There may also be indications from the child or young person, or their family, of issues that have led to a destabilization of their normally low risk family routine. Issues such as separation, divorce, illness, death, unemployment, mental health issues and medical issues can have a great impact on the functioning of any family. The accumulation of such information may lead you to develop a suspicion that a child or young person is being abused or neglected.

**You have suspicion on reasonable grounds when any of the following four factors are present:**

- Your own observations of the **behaviour** of a particular child or young person and/or **injuries** present or your knowledge of the child or young person generally, leads you to suspect that abuse is occurring.
- A child or young person tells you that he or she has been abused.
- Someone reliable such as a relative, friend, neighbour or sibling of the child or young person tells you of the abuse.
- A child tells you that he or she knows someone who has been abused (the child may be referring to her/himself).

### PHYSICAL ABUSE

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<th>Behavioural Indicators</th>
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<td>- Bedwetting</td>
<td>- Bite marks</td>
</tr>
<tr>
<td>- Withdrawn</td>
<td>- Bruises</td>
</tr>
<tr>
<td>- Aggressive</td>
<td>- Burns</td>
</tr>
<tr>
<td>- Eating disorders</td>
<td>- Loss of hair</td>
</tr>
<tr>
<td>- Loss of concentration</td>
<td>- Scratches</td>
</tr>
<tr>
<td>- Appearance of being physically uncomfortable with no disclosure of pain</td>
<td>- Implement marks i.e. marks that resemble instruments used to injure such as belt buckles, straps, spoons, spatulas etc.</td>
</tr>
<tr>
<td>- Crying</td>
<td>- Weight loss or gain</td>
</tr>
<tr>
<td>- Unkempt appearance</td>
<td>- Dressed in clothing designed to cover injuries (may be inappropriate for weather cond.)</td>
</tr>
<tr>
<td>- Flinching</td>
<td>- Fear of specific people</td>
</tr>
<tr>
<td>- Mirroring abuse behaviour</td>
<td>- When the explanation of how an injury occurred does not fit</td>
</tr>
<tr>
<td>- Fear of specific people</td>
<td>- Disclosure</td>
</tr>
<tr>
<td>- When the explanation of how an injury occurred does not fit</td>
<td></td>
</tr>
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</table>
Reporting Suspected Abuse

CRC Best Practice requires all Leaders and volunteers in Children’s / Youth Ministries that work with or have access to children (including those with access to medical/contact details)

AND

All ordained CRC Trainee Ministers, Ministers and National Ministers...

...to report suspected abuse or neglect to their relevant Reporting Authority, even if their local state legislation does not identify them as mandated notifiers.

When any Team Member or ordained Trainee Minister, Minister or National Minister has developed reasonable suspicion that a child or young person is or has been abused or neglected the concern must be reported to your relevant Reporting Authority as soon as possible.

*NOTE – GO TO PAGES 17 & 18 for the relevant Reporting Authority for your State / Territory

Some Information about Offenders

There is no such thing as a “sex offender profile.” That’s because sex offenders are a diverse group of people whose only consistent commonality is their sexual abusive behaviour. Offenders frequently present as respectable, good and caring people. They may be exemplary in their public life, which they may use as an excuse for their private life. Never the less, many offenders are disturbed people and some have serious psychological issues. A significant number were themselves victims of abuse in their earlier years, though this is not an indicator that they will become abusers.

Child sex offenders groom children, their parents or carers, and/or organisational representatives to build trusting relationships through which they can use children for their own sexual gratification.¹

What is ‘Grooming’?

Grooming is the act of preparing a child with the intent of sexually abusing them, but the process also involves the act of manipulating people and situations to gain and maintain access to the victim/s.

Grooming is an insidious process that can be difficult to recognise or distinguish from seemingly harmless actions. It has two main elements:

- Building a trusting relationship with the child and his/her carers, and
- Isolating the child in order to abuse them

It would be wrong to assume that all grooming behaviour and abuse that occurs is conducted by ‘professional perpetrators’ – those considered hardened paedophiles, the ones that employ far more sophisticated techniques to manipulate the environment in which they operate, colleagues and family members, and their victims. In many instances, the abuse of children may be perpetrated by opportunistic or situational offenders, rather than the committed paedophile.

How Does ‘Grooming’ Occur?

There is no one set of actions or behaviours that are used to groom a child. It is important to remember that grooming occurs both before the offence in order to access the child, and after the offence to maintain that access for future abuse and ensure the child’s silence. Grooming also seeks the parent or carer’s continued trust.

Offenders who sexually abuse children engage in a cyclical pattern of behaviour. While there are variations amongst sex offenders in how they operate, the concept of the sexual offending cycle can be used as a fairly typical pattern for the largest category of offenders, adult male sex offenders. An understanding of the offender cycle can provide a context for grooming, and the actions and motivations of the groomer.

The Offender Cycle

1. *Thoughts & feelings, negative/positive:* Adults who sexually abuse children describe the first stage as having experienced certain feelings – depression, sadness, anger, anxiety, excitement, loneliness, and despair. They can emerge immediately prior to offending, or build up over a long period of time.

2. *Pro-offending thinking:* At this stage the offender convinces themselves that their behaviour is not harmful, and will make them feel better.

3. *Fantasy & rehearsal:* The third stage is often used to escape from problems and to relieve feelings of anxiety about their desire to abuse children. Often, the desire to repeat the feelings reinforces the fantasy and leads offenders to act out their desires in reality.

4. *Targeting:* The selection process used to isolate and choose victims, usually vulnerable or neglected children. The targeting includes the parents or caregivers of the children.

5. *Grooming:* The manipulation or coercion of children, parents/caregivers, and/or staff in order to gain access and isolate the child.

6. *The offence:* The actual sexual assault occurs, and the offender relies on this act to reinforce and replay earlier fantasies, used to escape negative feelings.

7. *Guilt & fear:* Often feelings of guilt or fear emerge after the offence has been perpetrated. The offender may convince themselves that it didn’t happen, wasn’t too bad, they were provoked, or the child enjoyed it.

8. *Maintain secrecy:* The cover up stage, a lot of work (in effect, continuing the grooming stage) goes into keeping the victim silent. Bribery, threats, coercion, manipulation and special treatment might be used.

9. *Pretend things are normal:* Acting or portraying themselves as normal, offenders are able to maintain the respect of the community or the parents/caregivers, to ensure continued access to children. At the end of this cycle, offenders feelings of guilt, fear, anger, excitement reoccur or can no longer be ignored, so the process begins again.

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The child sex offender is following a pattern of behaviour that remains constant across a range of situations – the methods only change as the circumstance or environment alters. Online grooming is one type of environment where grooming occurs; offline, or face-to-face grooming, is another environment, but the child sex offender uses the same techniques and patterns of behaviour to groom a child.

Grooming is an insidious process, one that builds a trusting relationship with the child and his/her carers, and one that isolates the child in order to abuse them. Importantly, be aware that grooming occurs both before the sex offence, to access the child, and after the offence, in order to maintain access, ensure the child’s silence, and keep the trust of carers and adults.

**Behavioural ‘Red Flags’**

Each local church must be diligent in observing people's actions and reactions and be alert to behaviour(s) / ‘red flags’ that could suggest someone may be an abuser or grooming a child in order to abuse them. A red flag on its own does not suggest a person is an abuser however below are some behavioural ‘red flags’ to watch for:

- In the Church
- In the Home

**Red flags to watch for IN THE CHURCH**

- Majority of abusers’ relationships are with children to whom they are over friendly
- May be adamant about joining the children’s ministry team and be seen wandering around the children’s church areas etc
- May remove themselves midway through a church service to have time with children who may be in the toilets
- May give inappropriate or extravagant gifts to one child in particular
- Insists on hugging, touching, kissing, tickling, wrestling or holding a child, even when a child doesn’t want this affection
- Over emphasises morality, and can be legalistic and inflexible – an indicator of their own situation
- Strong denial of any offence, despite convincing evidence
- Convincing in protests of innocence - defence mechanism. (Denial may also be the plea of the innocent, so care must be taken)
- Avoids screening process, i.e. applies to join children’s team, but doesn’t hand their form back due to fear of detection
- Attempts to engineer opportunities to be alone with a child, i.e. babysitting (targets single parents), child minders at conferences
- Taking child shopping or on an outing, picking up from school
- Does not fit a particular makeup. Can be an extrovert, introvert, married, single, old, young, rich, poor, and any nationality.  

---

4 Offenders are just as likely to be advocates of abuse awareness. They don’t classify themselves as abusers and may separate themselves from the social definition.
• Spends inappropriate amounts of time with children. Relates more to children - perhaps not as capable with people their own age

**Red flags to watch for IN THE HOME**

• Voices opinion on sex education i.e. children not taught properly
• Someone who has few or no boundaries and does not respect the limits of their role in their relationship with children
• Shows improper behaviour towards developing child
• Showers with children at an inappropriate age
• Expects an open door policy in the bathroom
• Attempts to shut down communication with other parent
• Children don’t want to be home with the specific person alone
• Is jealous of siblings’ friends & may be treated like a partner in conversations and decisions
• Someone who buys expensive gifts or gives children money for no reason
Develop and maintain an open & aware culture

“Child Abuse thrives on secrecy. To prevent child abuse in your organisation you need to develop and maintain an open and aware culture. Staff, volunteers and children need to be aware of appropriate/inappropriate behaviour. They need to feel encouraged and safe to raise any concerns. If all participants are aware of child abuse and the organisation encourages open discussion and scrutiny, it becomes more difficult for abuse to occur and remain hidden.” Child Wise Booklet, 12 Steps to Building Child Safe Organisations - www.childwise.net

Children have the right to:

- Be safe
- Be listened to
- Be respected
- Privacy
- Take calculated risks in a protected setting
- An inclusive environment

Parents / Caregivers have the right to:

- Be informed
- Listened to

Team Members / Church Leaders have the right to:

- Be respected
- Be listened to
- Be safe
- Be supported
- On-going information and training on all aspects of child protection & prevention
Evaluate How Child Safe Your Local Church Really Is

On a scale of 1-10 with 1 being ‘never’ and 10 being ‘always’:

1. Are you welcoming and respectful towards children, young people and their parents / caregivers?
   Never [1 2 3 4 5 6 7 8 9 10] Always
2. Are you respecting staff/ volunteers by providing support, training and clear guidelines to do their roles well?
   Never [1 2 3 4 5 6 7 8 9 10] Always
3. Are you identifying potential risks to children?
   Never [1 2 3 4 5 6 7 8 9 10] Always
4. Are you working continuously to prevent and reduce these risks?
   Never [1 2 3 4 5 6 7 8 9 10] Always
5. Are you transparent with parents / carers and welcoming of their feedback?
   Never [1 2 3 4 5 6 7 8 9 10] Always
6. Are you valuing children by asking their ideas / views and also listening to them?
   Never [1 2 3 4 5 6 7 8 9 10] Always

Strategies to Develop and Maintain an Open and Aware Culture

- Be preventative rather than reacting to an unfortunate incident after it happens
- Understand and act on the moral and legal imperatives of protecting children in your care
- Acknowledge the damage an incident of abuse would do to the child and their family, people within and outside your local church, as well as with the witness of the church itself.
- Introduce safeguards that will protect children, staff, volunteers and your local church
- Have clear boundaries of roles between staff/volunteers and children
- Be open to outside accountability
- Have adequate staff/volunteers, staff supervision and training
- Recognise and act on children’s rights
- Know that your local church is doing all that it can to protect children

A child safe organisation is created by putting in place the above strategies. Individually, each strategy reduces the risk of harm to children, but collectively they create child safe organisations and prevent child abuse.

Each step in these guidelines are intended to help you build a child safe culture in your church.
Identify risks / dangers to children

“Once you are aware of how and why child abuse occurs you need to consider the risks to children in your organisation and programs. Risk management is child abuse prevention. You need to identify potential risks and ways children can be harmed in your organisation. Only by identifying risks can you develop strategies to minimise and prevent child abuse. Risk means the potential for something to go wrong. Risk management means identifying the potential for an accident or incident to occur and taking steps to reduce the possibility of it occurring. Risk management is a generic process that can be applied to the prevention of child abuse.” - Child Wise Booklet, 12 Steps to Building Child Safe Organisations - www.childwise.net

A Risk Management Process should identify risk and also identify preventative strategies.

**Identify Risks**

**Identify risks** by considering the following questions:

1. In which areas do children’s programs or church activities involving children take place? *(Take into consideration all areas where specific programs are run as well as where unplanned or church social gatherings occur.)*
2. What risks are present in each area? *(Observations should include the physical structure of each area to determine accessibility to children, safety and comfort)*
3. Analyse the consequences of each identified risk
4. Determine what issues are most likely to occur and how often

**Identify Preventative Strategies**

**Control risks** by considering the following questions:

1. What risk-reducing actions need to be implemented to protect children and prevent abuse?
2. Who will be the appointed person(s) responsible for overseeing these actions?

**Review and Revise** by regularly asking:

1. Are the risks / potential dangers to children that we’ve identified still current?
2. Are there any further risks that have been identified?
3. Are the agreed measures to control risks being implemented?
4. Are the agreed measures to control risks effective?

**Communicate and consult** with all teams involved on a regular basis to build commitment and increase implementation.
Reporting Authorities by State / Territory:

Reporting Authorities for Northern Territory, South Australia, Victoria, New South Wales, Australian Capital Territory, Queensland, Tasmania and Western Australia are listed below. Please contact the relevant Reporting Authority for your State / Territory to report suspected child abuse or neglect, as soon as possible:

**Northern Territory**
- Police on 000 for emergencies
- Reports can be made to the 24 hour toll free number 1800 700 250

**South Australia**
- Contact the Child Abuse Report Line (C.A.R.L) 13 14 78.
- OR online via http://www.reportchildabuse.families.sa.gov.au

**Tasmania**
- Online via http://www.dhhs.tas.gov.au for all non-urgent concerns regarding the welfare of children and youth.
- If the matter is urgent, please also call 1300 737 639 to report or additionally advise that you have lodged an online notification.

**Victoria**
For concerns that are life threatening, ring Victoria Police 000.
- For concerns about the immediate safety of a child within their family unit, call the Child Protection Crisis Line - 131 278 - toll free for all Victoria (24 hours, 7 days a week). **Note:** this is an emergency service for weekends and after hours only and will pass on cases to the relevant regions the following working day.

**Other emergency contacts**
- State wide CASA Crisis Line after business hours weekdays, weekends and public holidays - Tel: (03) 9344 2210 or Rural Free Call: 1800 806 292.
- Domestic Violence and Incest Resource Centre - Tel: (03) 9486 9866.

When it is **not** an emergency:

If it is not an emergency, but you are concerned that a child may be harmed from abuse by their parents or caregivers, then you can discuss your concerns with a Regional Child Protection Worker during office hours.
Western Australia

- Department for Child Protection - **1800 622 258** or contact the district office closest to where the child lives. See the White Pages or [www.childprotection.wa.gov.au](http://www.childprotection.wa.gov.au).
- Crisis Care - 24 hour telephone service **(08) 9223 1111** or free call **1800 199 008**
- Western Australia Police - **131 444** or **000** (Emergencies only)

OR complete and lodge the Mandatory Report form via the website:


Queensland (QLD)

- During normal business hours contact your regional intake service on:
  - Brisbane - Phone: 1300 682 254, Fax: 07 3259 8771
  - Central Queensland - Phone: 1300 703 762, Fax: 07 4938 4697
  - Far North Queensland - Phone: 1300 684 062, Fax: 07 4039 8320
  - North Coast - Phone: 1300 703 921, Fax: 07 5420 9049
  - North Queensland - Phone: 1300 706 147, Fax: 07 4799 7273
  - South East - Phone: 1300 679 849, Fax: 07 3884 8802
  - South West - Phone: 1300 683 390, Fax: 07 4616 1796
- After hours and on weekends – **1800 177 135** or **07 3235 9999** (this service operates 24 hours a day, 7 days a week)

New South Wales (NSW)

- **Child Protection Helpline** on **132 111** (TTY **1800 212 936**) for the cost of a local call, 24 hours a day, 7 days a week

Australian Capital Territory (ACT)

- **Mandated Reporters** - Phone: **1300 556 728**, Fax: **6205 0641**, Email: [childprotection@act.gov.au](mailto:childprotection@act.gov.au)
- **General Public** - Ph: **1300 556 729**, Fax: **6205 0648**