7 Child protection policy

Outcome statement

Students at this school thrive, belong and achieve to the best of their ability. The school is committed to the prevention of child abuse and neglect and to the protection of all children.

Scoping

All staff members (including contractors and volunteers) are expected to be familiar with this policy, its associated procedures and protocols and abide by them.

Advice will be sought through appropriate agencies in all cases of suspected or alleged abuse.

In line with Section 15 of the Oranga Tamariki Act 1989, any person in our school/kura who believes that any child or young person has been or is likely to be harmed (whether physically, emotionally or sexually), ill treated, abused, neglected or deprived must follow school procedures and may also report the matter to a social worker or the local Police.

Delegations

Although ultimate accountability sits with the board, the board delegates responsibility to the principal to ensure that all child safety procedures are implemented and available to all staff, contractors, volunteers and parents.

Expectations and limitations

The principal must:

- develop appropriate procedures to meet child safety requirements as required and appropriate to the school
- · comply with relevant legislative requirements and responsibilities
- make this policy available on the school's internet site or available on request
- ensure that every contract or funding arrangement that the school enters into requires the adoption of child protection policies where required
- ensure the interests and protection of the child are paramount in all circumstances
- · recognise the rights of family/whānau to participate in the decision making about their children
- ensure that all staff are able to identify the signs and symptoms of potential abuse and neglect and deal with disclosures by children and allegations against staff members and are able to take appropriate action in response
- support all staff to work in accordance with this policy to work with partner agencies and organisations to ensure child protection procedures are understood and implemented
- promote a culture where staff feel confident they can constructively challenge poor practice or raise issues of concern without fear of reprisal
- consult, discuss and share relevant information with the board or designated person in line with our commitment to confidentiality and information-sharing protocols in a timely way regarding any concerns about an individual child
- seek advice as necessary from NZSTA advisers on employment matters and other relevant agencies where child safety issues arise
- make available professional development, resources and/or advice to ensure all staff can carry out their roles in terms of this policy
- · ensure that this policy forms part of the initial staff induction programme for each staff member.

Procedures/supporting documentation

Procedure Handbook

Identification and reporting of child abuse and neglect

- · Four categories of abuse (emotional, physical, sexual and neglect) Definitions and Indicators attached
- How to respond to suspected abuse or neglect
- · How to respond to disclosures made by a child
- Recording a disclosure
- Reporting suspected child abuse and neglect
- · Confidentiality, information sharing and recording
- Safety checking safety checklist
- · Staff capability and professional development
- · Safe at work practices
- Physical contact with children
- · Working one on one with children
- · Transporting children
- · Overnight stays/camps
- · Social media and technology (internet protection, photo storage)
- Parent help
- Visitors on site
- External contractors
- · Socialising with children
- Gifts and rewards
- · Intimate care toileting

Reducing student distress and use of physical restraint policy (Policy 8)

Monitoring

Refer to Procedure Handbook

Legislative compliance

http://www.education.govt.nz/

Vulnerable Children Act 2014

Oranga Tamariki Ministry for Children - further information and sample child protection templates

Reviewed: Jul 2023 Next review: Jul 2025

Definitions of Abuse

Child abuse includes physical, emotional, and sexual abuse, as well as neglect, which is the direct consequence of a deliberate act or omission by an adult, and which has the potential or effect of serious harm to the child. (Oranga Tamariki Act)

SchoolDocs appreciates the review of these definitions and associated child protection procedures by **Safeguarding Children**.

Type of abuse	Definition	Examples
Physical abuse	Any acts that may result in the physical harm of a child or young person. Physical abuse covers harm that is deliberate, as well as unintentional harm that results from a deliberate action towards a child.	 Physical abuse can include: Bruising, cutting, hitting, beating, biting, burning, strangling, suffocating, drowning, and poisoning. Physical abuse may also include a parent/caregiver exaggerating or deliberately causing symptoms of illness in a child, making a child think they are ill.
Sexual abuse	Any acts that involve forcing or enticing a child to take part in sexual activities, whether or not they are aware of what is happening. Sexual abuse may be categorised as contact and non-contact abuse: Contact abuse is defined as activity involving physical contact (e.g. unwanted touching). Non-contact abuse does not involve physical activity (e.g. exhibitionism, verbal harassment).	 Contact abuse: Touching breasts, genital/anal fondling, masturbation, oral sex, penetrative or non-penetrative contact with the anus or genitals, encouraging the child to perform such acts on the perpetrator or another, involvement of the child in activities for the purposes of pornography or prostitution. Non-contact abuse: Exhibitionism, voyeurism, exposure to pornographic or sexual imagery, inappropriate photography, or depictions of sexual or suggestive behaviours or comments. A precursor of sexual abuse may be grooming, which covers actions deliberately undertaken by an adult, adolescent, or child to befriend and influence a child (and in some circumstances members of the child's family) with the intention of achieving the criminal objective of sexual activity with children. Grooming behaviours can include: Sharing secrets with a child. Engaging inappropriately with a child on social media. Non-sexual touching, e.g. tickling, hugging, or rough play. Allowing the child to break rules. Spending time with the child away from protective adults. Favouritism through giving gifts or money.
Emotional abuse	Any act or omission that results in adverse or impaired social, psychological, intellectual and/or emotional functioning/development. Emotional abuse may also be described as psychological abuse.	 Patterns of isolation, degradation, constant criticism, or negative comparison to others. Isolating, corrupting, exploiting, or terrorising a child. Being threatened with harm, called derogatory names, being humiliated, witnessing others being abused (including pets or other animals). Exposure to family violence or intimate partner violence.

Definitions of Abuse (continued)

Type of abuse	Definition	Examples
Neglect	Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, leading to adverse or impaired physical or emotional functioning/development. Neglect is the most common form of abuse.	 Neglect can be: Physical (not providing the necessities of life, like a warm house, food, and clothing). Emotional (not providing comfort, attention, and love). Neglectful supervision (leaving children without someone safe looking after them). Medical neglect (not taking care of health needs). Educational neglect (allowing chronic truancy, failure to enrol in education, or inattention to educational needs).
Family violence	Family violence is abuse against any person whom that person is, or has been, in a domestic relationship with (i.e. someone who is part of the same household). Family violence covers a wide range of controlling behaviours, commonly of a physical, sexual and/or psychological nature. Family violence typically involves fear, intimidation, or emotional deprivation.	Family violence can occur within a variety of close interpersonal relationships, such as between partners, parents and children, siblings, and in other relationships where significant others are not part of the physical household but are part of the family and/or are fulfilling the function of family. It can include child against adult, adult against child, adult against adult, and violence by someone against their other partner (see below). Common forms of family violence include: Spouse/Partner abuse (violence among adult partners). Child abuse/neglect (abuse/neglect of a child by an adult). Elder abuse/neglect (abuse/neglect of older people aged approximately 65 years and over, by a person with whom they have a relationship of trust). Parental abuse (violence by a child against their parent) Sibling abuse (violence among siblings).
Intimate partner violence	Intimate partner violence (IPV) is a type of family violence . IPV refers to any behaviour within an intimate relationship that causes physical, psychological, or sexual harm to those in the relationship.	IPV includes physical violence, sexual violence, psychological/emotional abuse, economic abuse, intimidation, harassment, damage to property, and threats of physical or sexual abuse towards an intimate partner. IPV is particularly harmful for children as the parent/carer may be diminished in their ability to meet their child's needs. IPV is strongly linked to serious neglect and other direct abuse towards children, such as physical and sexual abuse.

Sources

Safeguarding Children

Oranga Tamariki | Ministry for Children: Definitions of abuse, neglect and harm

Ministry of Social Development | Te Manatu Whakahiato Ora: NZ Family Violence Prevention Strategy

Safer Organisations Safer Children: Guidelines for child protection policies to build safer organisations

NZ Family Violence Clearinghouse

Indicators of Abuse

Indicators may be observed in both **children** and **adults** that could signal that child abuse is occurring.

These indicators may be observed on their own or in combination. Abuse concerns should be shared with appropriate people or relevant external agencies/support services as soon as possible to best support any child involved.

Type of abuse	Indicators from children	Indicators from adults
Physical abuse	 Disclosing abuse Bruises, burns, sprains, dislocations, bite marks, cuts Fractured bones (especially in an infant where a fracture is unlikely to occur accidentally) Pressure marks from fingers Location and extent of injury does not fit the explanation given Difficulty recalling how injuries happened or giving inconsistent explanations Poisoning Showing wariness or distrust of adults or particular individuals Seasonally inappropriate clothing (to hide bruising or other injury) Demonstrating fear of parents and of going home, running away Becoming fearful when other people cry or shout Being excessively friendly to strangers Being vory passive and compliant Being extremely aggressive or withdrawn Bed wetting 	 Overly rough play Pinching, pushing, dragging, slapping, throwing, or shoving a child Shaking an infant When explaining causes of injury to a child, their story changes or is vague Believing in physical punishment Perspective of "Didn't do me any harm" Delay in seeking medical help for a child Hitting a child with hands or objects Making threats to harm Animal abuse Restraining a child as a punishment Force-feeding a child Choking, strangling, or suffocating a child, even if only attempted Lashing out or threatening a child in front of others General low empathy
Emotional abuse	 Disclosing abuse Developmental delays (being behind peers of the same age) Displaying low self-esteem Tending to be withdrawn, passive, or tearful Displaying aggressive or demanding behaviour Being overly compliant, trying to keep everyone happy Being highly anxious Complaining of headaches or stomach pains (psychosomatic complaints) Displaying difficulties in relating to adults and peers Avoiding certain people, places, and situations Sleep disturbances Regression (acting like a much younger child) e.g. soiling, wetting pants When playing, behaviour may model or copy abusive behaviour and language Bed wetting 	 Rejecting a child (not giving them attention, love, and affection) Calling a child names and/or publicly humiliating them Frightening a child with threats Misusing authority, power, or position of trust Verbal abuse, yelling, swearing Being critical of a child's efforts or ability Bullying and intimidation Forcing compliance Unpredictable responses (sometimes kind, sometimes volatile) Humiliation, making degrading comments/insults Having unrealistic expectations Severe or harsh interaction with a child Exposing a child to adult issues Shunning or rejecting a child Lack of emotional responsiveness and low empathy Having a harsh parenting style Threatening a child to watch physical harm Forcing a child to watch physical harm being caused to someone they love

Indicators of Abuse (continued)

Type of abuse	Indicators from children	Indicators from adults
Sexual abuse	 Disclosing abuse Acting in a sexual way with toys or objects Nightmares Being withdrawn or clingy Personality changes, such as seeming insecure or anxious Complaining of headaches or stomach pains Fear of particular people or places without an apparent reason Experiencing problems with schoolwork Sexually transmitted infections Unusual or excessive itching or pain in genital or anal area Changes in eating habits Genital injuries (bruising, cuts, redness, swelling, bleeding) Blood in urine or faeces Pregnancy Being secretive Receiving gifts or favouritism from a particular person or people Displaying sexual behaviour or knowledge that is unusual for that child's age Perpetrating sexual abuse Inappropriate masturbation Experiencing difficulty sleeping Persistent soiling or bed wetting or regression (starting to wet the bed again having stopped) Having difficulties relating to adults and peers Unexplained absences, unexplained gifts or money (often signs of sexual exploitation) Bed wetting 	 Refusing to allow a child sufficient privacy Insisting on physical affection Selecting/Favouring a particular child Abnormal interest in the sexual development of a child or teenager Discussing or sharing sexual jokes or sexual knowledge/material with a child Insisting on time alone with a child, including babysitting and outings Spending most of their spare time with children Buying children expensive gifts or giving them money for no apparent reason Treating a particular child as a favourite Frequently walking in on a child using the bathroom, changing rooms, or toilet Grooming Forced hugging and kissing Encouraging a child to behave in sexually inappropriate ways Voyeurism (secretly watching or filming children) Exposing of genitals Non-contact abuse can also involve failing to protect a child from seeing and hearing sexual activities, media, or conversations
Family violence	 Disclosing family violence Physical injuries Concentration difficulties Adjustment difficulties Being anxious or nervous Depression Fear of a parent, or partner of a parent Isolation from friends and family Unusual absences Fear of conflict Violent outbursts Aggressive language Bed wetting 	 Being jealous and possessive Exhibiting controlling behaviour, making all of the decisions Threatening, criticising, blaming, or humiliating Mood swings Having a history of bad relationships Having a dominant belief system that supports being controlling

Indicators of Abuse (continued)

Type of abuse	Indicators from children	Indicators from adults
Neglect	 Disclosing neglect Lack of sanitary protection for girls who are menstruating Frequent hunger Malnutrition Poor hygiene with few self-care skills Dental decay Medical conditions not being managed, not improving, or getting worse Seasonally inappropriate clothing Being left unsupervised for long periods Medical needs not attended to, being ill more than average Stealing food Staying at school outside of school hours Often being tired, falling asleep in class or at meal times Abusing alcohol or drugs Demanding affection or attention from adults, including strangers Displaying aggressive behaviour Not getting on well with peers Bed wetting 	 Prioritising needs of adults over needs and rights of children Failing to attend to a child's basic needs Unresponsive parenting Failing to take the child for medical appointments Leaving the child unattended Repeated "accidents" Being emotionally unavailable Appearing to be indifferent to the child Seeming apathetic or depressed Believing children are unimportant and their needs are secondary to adults or community needs Ignoring or belittling children's needs or rights

SchoolDocs appreciates the input of **Safeguarding Children** in providing these indicators and for their review of associated child protection content.

If there is evidence of the indicators above, concerns should be shared with appropriate people or relevant external agencies/support services. In a school context, the recommended first point of contact is the designated child protection person. An overview of the abuse response procedures at school is provided below. For more information, see **Abuse Recognition and Reporting** on **SchoolDocs**.

Abuse response overview:

- Maintain awareness of the indicators of abuse.
- Support any person disclosing abuse.
- Ensure student safety. Contact the police if there is immediate danger, or Oranga Tamariki for support.
- Record all available information, including disclosures, observations, and concerns.
- Consult with the designated child protection person or seek support from an external agency. Do not act alone.
- The designated child protection person supports the student through the school or external agencies.
- Any person that identifies abuse or receives a disclosure is also advised to seek support for themselves.

