



CHCPRT001

Identify and respond to children and young people at risk



Learner Guide



**Updated to include
National Quality
Framework changes**

Aspire
Learning Resources

CHCPRT001

Identify and respond to children and young people at risk

Release 2

Learner Guide

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CHCPRT001 Identify and respond to children and young people at risk, Release 2

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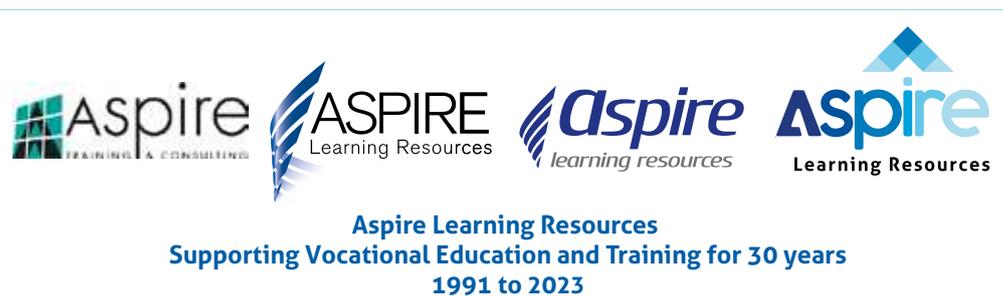
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Before you begin

This Learner Guide is based on the unit of competency *CHCPRT001 Identify and respond to children and young people at risk*, Release 2.

Your trainer or training organisation must give you information about this unit of competency as part of your training program. Information regarding how this Learner Guide relates to this unit of competency is detailed in our mapping guide.

How to work through this Learner Guide

This Learner Guide contains a number of features that will assist you in your learning. Your trainer will advise which parts of the Learner Guide you need to read, and which Practice Tasks and Learning Checkpoints you need to complete.

Feature of the Learner Guide	How you can use each feature
Learning content	<ul style="list-style-type: none"> ➤ Read each topic in this Learner Guide. If you come across content that is confusing, make a note and discuss it with your trainer. Your trainer is in the best position to offer assistance. It is very important that you take on some of the responsibility for the learning you will undertake.
Examples	<ul style="list-style-type: none"> ➤ These highlight learning points and provide realistic examples of workplace situations.
Practice Tasks	<ul style="list-style-type: none"> ➤ Practice Tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which Practice Tasks to complete.
Summaries	<ul style="list-style-type: none"> ➤ Key learning points are provided at the end of each topic.
Learning Checkpoints	<ul style="list-style-type: none"> ➤ There are Learning Checkpoints at the end of each topic. Your trainer will tell you which activities to complete. These activities give you an opportunity to check your progress and apply the skills and knowledge you have learnt.

This table maps each topic in this Learner Guide to the National Quality Standard and national learning framework: Early Years Learning Framework (EYLF).

T = Topic

Topics	National Quality Standard (NQS)
T1-T3	Quality Area 1: Educational program and practice
	Quality Area 2: Children’s health and safety
	Quality Area 3: Physical environment
	Quality Area 4: Staffing arrangements
	Quality Area 5: Relationships with children
	Quality Area 6: Collaborative partnerships with families and communities
	Quality Area 7: Governance and leadership
	Early Years Learning Framework
	Principles
T1-T3	Secure, respectful and reciprocal relationships
	Partnerships
	Respect for diversity
	Aboriginal and Torres Strait Islander perspectives
	Equity, inclusion and high expectations
	Sustainability
	Critical reflection and ongoing professional learning
	Collaborative leadership and teamwork
	Practice
	Holistic, integrated and interconnected approaches
	Responsiveness to children
	Play-based learning and intentionality
	Learning environments
	Cultural responsiveness
	Continuity of learning and transitions
	Assessment and evaluation for learning, development and wellbeing
	Learning Outcomes
	1. Children have a strong sense of identity
	2. Children are connected to and contribute to their world
T1-T3	3. Children have a strong sense of wellbeing
T1-T3	4. Children are confident and involved learners
	5. Children are effective communicators



Topic 1

In this topic you will learn about:

- 1A** Child-focused practice
- 1B** Rights and responsibilities
- 1C** Identifying children at risk

Supporting the protection of children and young people

To protect children and young people, you must be aware of their rights and any related legislation.

You must then think about how your work practices could be improved to allow you to respond to harmful situations.

When you know about the indicators of harm, you will be ready to act if a situation occurs.

1A Child-focused practice

All children have rights that must be upheld and protected.

Any person caring for children must be aware of, support and maintain these rights. It is equally important that you recognise when these rights have been ignored.

Children's rights are about being respected and having their needs met. You protect their rights by making sure you attend to them and realising that the care you provide impacts on their whole life, not only on that day.



A child-focused practice can offer valuable support to children.

The following table outlines how actions reflect a child-focused approach.

Example	Actions
Develop routines and timetables that are based on the needs of each individual child.	<ul style="list-style-type: none"> ➤ Provide meals when children are hungry. ➤ Settle children to sleep when they are tired. ➤ Give children the choice to participate.
Ensure programs are centred on the child.	<ul style="list-style-type: none"> ➤ Provide experiences based on the children's interests.
Communicate with families to determine family needs.	<ul style="list-style-type: none"> ➤ Ask questions to determine what the child will need each day. ➤ Ask how a child has been affected by changes such as a new baby in the family or moving house so you can provide support.
Adjust policies and procedures to meet the needs of individual families as required.	<ul style="list-style-type: none"> ➤ Respond to health needs, such as allergies.
Adapt plans to address family structure and cultural differences.	<ul style="list-style-type: none"> ➤ Include words from languages used by families. ➤ Include items from various cultures in play. ➤ Read stories that feature a variety of family structures and cultures.
Respond to children according to their financial, social and cultural needs.	<ul style="list-style-type: none"> ➤ Provide a change of clothing or a warm jumper. ➤ Discuss or celebrate special days from a child's cultural background.
Understand that children's abilities differ and adjust plans to match.	<ul style="list-style-type: none"> ➤ Offer activities that suit children's level of development, attention span and skills.
Balance interactions with children by offering group activities and one-on-one time.	<ul style="list-style-type: none"> ➤ Include group stories and take time to read stories with individual children.

Children and decisions

Being child-focused means putting children first and involving them in actions and decisions that occur throughout the day.

Listen to children and allow them to make choices about their own food, activities and routines. You could ask them:

- if they are ready to sleep, eat, go to the toilet or join an activity
- how much they would like to eat
- which activities they would like to join in
- whether they would like to play alone or join in with a group.

You could also involve them in planning a special event, such as an excursion or cultural day, or an ongoing project like creating a veggie patch or mural.

The United Nations Convention on the Rights of the Child recognises that the international community has a responsibility toward providing children the right to human dignity. The Convention is made up of 54 articles, each outlining the minimum standards government must meet to provide adequate services and support for children and their families in the areas of health, welfare and education.

Article 13 has a direct impact on services that provide care to children, and states:

'The child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice.'

Example

Creating a child-focused environment

In Gloria's family day care home, her environment is set up to allow children of all age groups to make decisions and have responsibilities. The children choose when to eat at the snack table. They select from the snacks on offer and pour their own drinks. Gloria sets up equipment and utensils for the younger children so they can participate, be involved, learn skills and make choices. This includes tongs to self-serve, a jug of milk for older children and smaller jugs for the younger children with just the right amount of milk in them.





Practice Task 1

Draw a line to match the beginning of each sentence about children making decisions to the correct ending.

- * You are helping a child who has recently learnt to wash their hands. You let them decide if they would like to
- * When a child is unsettled, you ask them if they would like to
- * Not all children sleep during the day. You encourage them to make a decision if they would like to
- * if they would like to rest with the sleeping children or choose a quiet activity to do.
- * if they would like to do it themselves or if they would like your help.
- * if they would like to tell you what is wrong or sit and read a book with you.

1B Rights and responsibilities

To provide for the rights of children you must understand their rights and your responsibilities for maintaining these.

To understand your responsibility toward protecting children's rights, you must be aware of the following things:

- duty of care
- position descriptions
- state or territory legislation
- mandatory reporting
- industry standards and regulations
- confidentiality.



Children need assistance to uphold their rights.

Duty of care

Duty of care is your responsibility to ensure that actions are taken to minimise the risk of harm.

This obligation applies to employers, workers and any other person in your service. If a person is injured while in the service, you may be held responsible and you or the service may be sued for negligence.

Harm to a person may be:

- physical, such as an injury
- psychological
- emotional or social
- financial.

Harm might also arise if you provide advice that is not appropriate, correct or within your area of expertise. The following are four steps that must be met to prove that a duty of care toward a child has been neglected.

- 1 You or the service owed a duty of care to the child.
- 2 You or the service responsible for the child did not provide the degree of care that was reasonable in the situation.
- 3 The child suffered damage or harm.
- 4 There is a link between these three things (that is, that the breach of duty of care caused the damage or harm).

To ensure you provide a duty of care to all people, you should work cooperatively with others to ensure a healthy and safe workplace. Follow the organisational policies and procedures, and encourage others to do the same.

In your work role you should take the following steps:

- Use positive communication and behaviour guidance strategies.
- Provide care and protection to all children.
- Ensure every child and their family is treated with respect and understanding.
- Keep up to date with current child and family issues, including legal and ethical issues.

Position descriptions

A position description (also called a job description) is written to reflect a service's policies, procedures, philosophy, structure and objectives.

It provides a clear statement about the obligations, responsibilities, boundaries and limitations of a particular role.

Your position description will define your role in terms of the following:

- Purpose or objective – the reason for your role
- Level of responsibility
- Key areas of responsibility
- Tasks that must be performed
- Accountability and reporting arrangements – who your supervisor is and how you communicate with them
- Specialist skills or knowledge – qualifications, experience or other needs that make you particularly suited to this role

You must always make sure that any decisions or actions you make are:

- appropriate to your level of responsibility
- in line with the organisational policies and procedures that apply to your role.

If you are unsure whether or not you are authorised to do something, check with your supervisor before taking any action.

State or territory legislation

While you are not expected to know all the details of legislation, you need to be aware of the legislation that applies to your role.

You also must understand that your organisational policies and procedures are based on legislation. This highlights why it is so important to follow these policies and procedures.

Legislation in each state/territory determines the way child protection services are provided. Australia is a signatory to the United Nations Convention on the Rights of the Child (1989) and, as a result, many of the principles in the convention are also found in child protection legislation.

The following table sets out the relevant legislation that applies to each state and territory.

ACT	<i>Children and Young People Act 2008 (ACT)</i>
NSW	<i>Children and Young Persons (Care and Protection) Act 1998 (NSW)</i>
NT	<i>Care and Protection of Children Act 2007 (NT)</i>
Qld	<i>Child Protection Act 1999 (Qld)</i>
SA	<i>Children and Young People (Safety) Act 2017 (SA)</i>
Tas.	<i>Children, Young Persons and their Families Act 2013 (Tas.)</i>
Vic.	<i>Children, Youth and Families Act 2005 (Vic.)</i>
WA	<i>Children and Community Services Act 2004 (WA)</i>

You can find this information at the Australian Institute of Family Studies (AIFS) website at: aspirelr.link/child-protection

This legislation outlines:

- the responsibilities and powers of various services, people and roles
- how decisions are made
- how child protection services should be supported
- child wellbeing concerns and the processes that should occur
- monitoring and reviewing expectations
- childcare agreements, including who may care for a child at risk of harm
- when a child is in need of protection or in need of therapeutic treatment
- reporting and standards of proof
- protection orders, permanent care orders and criminal offences
- offences, sentencing and appeals.

Nationally, there are ten standards included as part of the National Principles for Child Safe Organisations. The principles aim at creating an Australia-wide approach to child health and safety. The National Principles are set in place to compliment state and territory laws. The government's goal for these principles is to be a guide for organisations that will set these organisations apart as those of choice when it comes to the safety and wellbeing of children.

The National Principles are:

- Child safety and wellbeing are embedded in organisational leadership, governance and culture.
- Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously.
- Families and communities are informed and involved in promoting child safety and wellbeing.
- Equity is upheld and diverse needs are respected in policy and practice.
- People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.

- Processes to respond to complaints and concerns are child-focused.
- Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.
- Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.
- Implementation of the national child safe principles is regularly reviewed and improved.
- Policies and procedures document how the organisation is safe for children and young people.

You can find more information about the National Principles here: aspirelr.link/child-safe-national-principles

Example Rights and responsibilities

Ji is an educator who has noticed signs and symptoms that indicate a child may be at risk of sexual abuse. She noticed that the child:

- has difficulty sitting
- urinates frequently
- refuses to change in front of others
- refuses to participate in physical activities.

Ji reads her service's child protection policy. The policy tells her to:

- report any sign of abuse within 24 hours of noticing it
- write down what she has noticed
- keep any information in a confidential place
- speak with her director and explain what has happened.



Mandatory reporting

The legislation of each state and territory declare that certain professionals must legally report situations where children may be at risk of harm.

The following is an educator's guide for mandatory reporting.

State or territory	Educators are mandated to report:
Australian Capital Territory	<input checked="" type="checkbox"/> Physical abuse <input checked="" type="checkbox"/> Sexual abuse or other exploitation of the child <input type="checkbox"/> Emotional/psychological abuse <input type="checkbox"/> Neglect <input type="checkbox"/> Exposure to family violence <input type="checkbox"/> Exposure to physical violence (for example, a child witnessing violence between parents at home)

State or territory	Educators are mandated to report:
New South Wales	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Physical abuse <input checked="" type="checkbox"/> Sexual abuse or other exploitation of the child <input checked="" type="checkbox"/> Emotional/psychological abuse <input checked="" type="checkbox"/> Neglect <input checked="" type="checkbox"/> Exposure to family violence <input type="checkbox"/> Exposure to physical violence (for example, a child witnessing violence between parents at home)
Northern Territory	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Physical abuse <input checked="" type="checkbox"/> Sexual abuse or other exploitation of the child <input checked="" type="checkbox"/> Emotional/psychological abuse <input checked="" type="checkbox"/> Neglect <input type="checkbox"/> Exposure to family violence <input checked="" type="checkbox"/> Exposure to physical violence (for example, a child witnessing violence between parents at home)
Queensland	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Physical abuse <input checked="" type="checkbox"/> Sexual abuse <input type="checkbox"/> Emotional/psychological abuse <input type="checkbox"/> Neglect <input type="checkbox"/> Exposure to family violence <input type="checkbox"/> Exposure to physical violence (for example, a child witnessing violence between parents at home)
South Australia	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Physical abuse <input checked="" type="checkbox"/> Sexual abuse or other exploitation of the child <input checked="" type="checkbox"/> Mental or emotional abuse <input checked="" type="checkbox"/> Neglect <input type="checkbox"/> Exposure to family violence <input type="checkbox"/> Exposure to physical violence (for example, a child witnessing violence between parents at home)
Tasmania	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Physical abuse <input checked="" type="checkbox"/> Sexual abuse <input checked="" type="checkbox"/> Emotional/psychological abuse <input checked="" type="checkbox"/> Neglect <input checked="" type="checkbox"/> Exposure to family violence <input type="checkbox"/> Exposure to physical violence (for example, a child witnessing violence between parents at home)

State or territory	Educators are mandated to report:
Victoria	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Physical injury <input checked="" type="checkbox"/> Sexual abuse <input type="checkbox"/> Emotional/psychological abuse <input checked="" type="checkbox"/> Neglect <input checked="" type="checkbox"/> Exposure to family violence <input type="checkbox"/> Exposure to physical violence (for example, a child witnessing violence between parents at home) <p> <ul style="list-style-type: none"> ➤ All adults are mandated to report sexual abuse. ➤ Educators must follow Child Safe Standards. For full details of all reporting obligations go to: aspirelr.link/child-reporting-obligations-vic </p>
Western Australia	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Sexual abuse

Whether you are mandated to report or not, you have a duty of care toward children and are encouraged to report concerns.

For more information about mandatory reporting go to: aspirelr.link/state-child-abuse-authority

Industry standards and regulations

The National Quality Framework (NQF) requires services to use one system when working towards best practice and quality care.

The NQF covers all education and care services, including:

- long day care
- family day care
- outside school hours care
- preschool.

Your service policies and procedures are developed from the information in the NQF, and assessment is enforced to ensure this occurs.

Relevant to child protection, the NQF covers:

Laws and regulations for education and care services	Regulation 84 of the Education and Care Services National Regulations states you must be aware of: <ul style="list-style-type: none"> ➤ the existence of child protection law ➤ your obligations under the law.
National Quality Standards (NQS)	Element 2.2.3 Child protection: Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.
Education and care services national learning frameworks.	Outcome 1: Children feel safe, secure and supported

Confidentiality

When dealing with abuse or suspected abuse, you must monitor the child and provide a support base for the family.

Your role is not one of accuser, counsellor or legal practitioner, but of active listener, knowledge holder and resource provider. This demands your commitment to a high level of confidentiality and respect for those involved.

During this time you will be discussing very private information. The details of this information might influence the life of the child and family you are working with. At some point, these details might form part of legal proceedings.

All services will have a policy relating to confidentiality and privacy. This policy will outline what information you can share and who you can share it with. It will also detail privacy management systems and comply with the *Privacy Act 1988* (Cth).

Practice Task 2

1. Which state or territory legislation relates to your work?

.....

2. Which of the following relate to child protection? Select all that apply.

- Child Protection Policy
- Transport Safety Policy
- Abuse and Neglect Policy
- Regulation 77 – Health, hygiene and safe food practices
- 2.1.1 Wellbeing and comfort: Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest and relaxation

3. Which of the following statements are correct? Select yes or no for each one.

- a. If I think a child has been abused I should ask my family what to do. * Yes * No
- b. If a child was being abused by a parent, I should warn other parents that go on play dates with the family. * Yes * No
- c. I think a child may be at risk of harm. I will read my service policy to see what I should do, as well as speaking to my supervisor. * Yes * No

1C Identifying children at risk

The initial and long-term consequences of abuse may affect the child, the family, your service and the community as a whole.

By noticing abuse early and taking action, you can lessen the long-term effects of abuse.

Abuse, neglect and maltreatment describe situations where a child may need protection. Child abuse is defined as either an action or inaction (failure to act) by an adult that endangers or impairs the child's emotional or physical health or development.

Children are the most vulnerable members of our community. They do not have the power to stop abuse; therefore, they rely on others to help them. As an educator, you have a responsibility to make sure children are safe and that their needs are met.



Look for indicators in the child's behaviour.

Indicators of harm

When you know the signs of harm, you can help identify children or young people who may be at risk.

When working with children and young people, you must watch out for behaviours as well physical signs and symptoms. You may notice behaviours that are uncharacteristic or unusual for a particular child. You might also notice unusual things for children of a particular age or developmental stage.

Risk of harm indicators include:

- a child appearing frightened of a family member or another person they know
- a child acting in a way that is unusual for their age and development
- a family avoiding child health services, or treatment of their child's illness or injury
- a family member having expectations of their child that are unrealistic
- complaints by the child, or someone else, that the child is often being criticised harshly or is not provided with emotional comfort
- family members or others caring for the child who are missing or appear drunk or affected by drugs.

Child disclosure

If a child discloses information about abuse or neglect, there are a few things you can do to make sure you handle the situation legally and ethically.

The following outlines some guidelines and recommendations.

<p>Listen to and believe the child.</p>	<ul style="list-style-type: none"> ➤ Use words and actions that show you are listening and encourage the child to talk without pushing them. ➤ Reflect what you hear; for example, if the child explains something, repeat what they said and ask if that is what they mean.
<p>Ask open, non-leading questions.</p>	<ul style="list-style-type: none"> ➤ An open question requires a more detailed response than a simple yes or no. For example, 'Did that hurt?' is a closed question and only a yes or no response can be provided. An open question could be, 'How did that feel?' ➤ A non-leading question is a question that does not give hints. For example, if you asked, 'Did your dad do that to you with a belt?' you are leading the response. However, if you asked, 'How did you get that bruise?' you would be asking a non-leading question.
<p>Be supportive of the child.</p>	<ul style="list-style-type: none"> ➤ Let the child know they have done the right thing by telling you. Make sure they know that they are not to blame for what has happened. ➤ Do not make promises. Avoid saying, 'Everything will be OK', 'He won't go to jail', or, 'No one will take you away from her'.
<p>Don't overreact.</p>	<ul style="list-style-type: none"> ➤ Stay calm. Help the child to feel safe and ask open questions to see if they wish to tell you more. ➤ Never make comments or judgments about the abuser.
<p>Record what the child says.</p>	<ul style="list-style-type: none"> ➤ Use as many of the child's own words in your notes as possible. Describe any signs you notice, but avoid adding your opinion or thoughts.

Types of harm

When a child is harmed, they are hurt in some way.

Children may show signs of harm on various occasions due to risk taking behaviours, such as learning to walk, climbing trees or arguing with siblings. You must be aware of situations where there are unusual explanations for behavioural changes or where there are signs that the child has been harmed by an adult in an unacceptable way.

Type of harm	Impact of harm that may be noticed	
<p data-bbox="277 557 478 591">Physical abuse</p> 	<p data-bbox="547 557 1283 692">When an action results in injury, physical abuse has occurred. The physical injury may be the consequence of a physical punishment or physically aggressive treatment. Physical abuse may also occur as a result of neglect.</p> <p data-bbox="547 707 863 775">Injury may occur when a child has been:</p> <ul style="list-style-type: none"> <li data-bbox="547 790 810 824">➤ pushed or thrown <li data-bbox="547 831 884 864">➤ slapped, hit or punched <li data-bbox="547 871 911 938">➤ burned; for example, with a cigarette <li data-bbox="547 945 660 978">➤ kicked <li data-bbox="547 985 655 1019">➤ bitten <li data-bbox="547 1025 675 1059">➤ choked <li data-bbox="547 1066 708 1099">➤ tied down <li data-bbox="547 1106 895 1140">➤ assaulted with a weapon <li data-bbox="547 1146 783 1180">➤ shaken violently <li data-bbox="547 1187 914 1288">➤ not provided with medical treatment following an injury. 	<p data-bbox="949 707 1315 775">You might notice physical harm has occurred if a child:</p> <ul style="list-style-type: none"> <li data-bbox="949 790 1278 891">➤ has injuries that don't match the story of how they occurred <li data-bbox="949 898 1315 999">➤ has unexplained bruises, welts, bites, broken bones or burns <li data-bbox="949 1005 1307 1106">➤ has injuries in the shape of an object; for example, a belt buckle or cord <li data-bbox="949 1113 1275 1180">➤ has faded bruises or other noticeable marks <li data-bbox="949 1187 1315 1254">➤ shrinks at the approach of adults <li data-bbox="949 1261 1225 1294">➤ reports an incident <li data-bbox="949 1301 1310 1402">➤ has not received medical help for an injury needing care <li data-bbox="949 1408 1315 1543">➤ demonstrates extremes in behaviour; for example, being highly aggressive or completely withdrawn <li data-bbox="949 1550 1315 1650">➤ is afraid or overly upset about being with a parent or other carer <li data-bbox="949 1657 1307 1724">➤ demonstrates unusual or extreme dramatic play <li data-bbox="949 1731 1307 1832">➤ is described in a negative way by their parent or guardian <li data-bbox="949 1839 1307 1906">➤ seems to be subjected to harsh discipline.

Type of harm	Impact of harm that may be noticed	
<p data-bbox="276 219 448 248">Sexual harm</p> 	<p data-bbox="549 219 1310 315">Sexual harm refers to a situation in which a person involves a child in sexual activity. Physical force is sometimes also used.</p> <p data-bbox="549 338 900 434">Child sexual abuse involves a wide range of sexual activity, including:</p> <ul style="list-style-type: none"> <li data-bbox="549 450 900 483">➤ fondling a child's genitals <li data-bbox="549 495 900 555">➤ masturbating in front of the child <li data-bbox="549 566 683 600">➤ oral sex <li data-bbox="549 611 767 672">➤ vaginal or anal penetration <li data-bbox="549 683 847 743">➤ exposing the child to pornography. 	<p data-bbox="933 338 1294 398">You might be concerned about sexual harm if a child:</p> <ul style="list-style-type: none"> <li data-bbox="933 421 1262 481">➤ has difficulty walking or sitting <li data-bbox="933 492 1209 526">➤ urinates frequently <li data-bbox="933 537 1294 598">➤ refuses to change in front of others <li data-bbox="933 609 1283 669">➤ refuses to participate in normal physical activities <li data-bbox="933 680 1257 808">➤ demonstrates bizarre, advanced or unusual sexual knowledge or behaviour for their age <li data-bbox="933 819 1294 880">➤ contracts a sexually transmitted infection (STI) <li data-bbox="933 891 1230 925">➤ reports sexual abuse <li data-bbox="933 936 1315 996">➤ has pain, swelling or itching in the genital area <li data-bbox="933 1008 1241 1068">➤ has stained or bloody underwear <li data-bbox="933 1079 1203 1140">➤ displays regressive behaviour <li data-bbox="933 1151 1230 1211">➤ reports being shown pornography <li data-bbox="933 1223 1270 1323">➤ refuses to be hugged, kissed or touched by an adult <li data-bbox="933 1335 1283 1462">➤ receives sexual attention or is approached using sexual mannerisms by their parent or guardian.

Type of harm	Impact of harm that may be noticed	
<p data-bbox="276 219 384 248">Neglect</p> 	<p data-bbox="547 219 1297 315">Neglect refers to a situation where the carer of a child fails to provide the basic necessities to ensure a child is not harmed.</p> <p data-bbox="547 338 911 405">Neglect occurs when a child cannot access adequate:</p> <ul style="list-style-type: none"> <li data-bbox="547 421 639 450">➤ food <li data-bbox="547 461 687 490">➤ clothing <li data-bbox="547 501 671 530">➤ shelter <li data-bbox="547 542 807 571">➤ medical attention <li data-bbox="547 582 735 611">➤ supervision. 	<p data-bbox="938 338 1313 367">Be aware of neglect if a child:</p> <ul style="list-style-type: none"> <li data-bbox="938 383 1225 412">➤ is frequently absent <li data-bbox="938 423 1313 490">➤ does not receive adequate medical or dental care <li data-bbox="938 501 1313 568">➤ is often dirty or has severe body odour <li data-bbox="938 580 1313 669">➤ lacks appropriate clothing; for example, doesn't have a coat in winter <li data-bbox="938 680 1297 748">➤ discusses use of drugs or alcohol <li data-bbox="938 759 1281 882">➤ is left alone at home for long periods (relevant to their age and maturity level) <li data-bbox="938 893 1313 960">➤ shows a failure to thrive or signs of malnutrition <li data-bbox="938 972 1313 1061">➤ exhibits constant hunger or begs for, steals or hides food <li data-bbox="938 1072 1246 1140">➤ is extremely willing to please <li data-bbox="938 1151 1297 1218">➤ is ignored by their parent or guardian <li data-bbox="938 1229 1273 1319">➤ is cared for by a parent or guardian who is depressed <li data-bbox="938 1330 1289 1453">➤ has a parent or guardian who is irrational or demonstrates strange behaviour <li data-bbox="938 1464 1289 1599">➤ has a parent or guardian who regularly seems to be affected by alcohol or drugs.

Type of harm	Impact of harm that may be noticed	
<p data-bbox="276 215 499 248">Emotional harm</p> 	<p data-bbox="547 215 1307 349">Emotional harm refers to a situation in which a child is repeatedly rejected or threatened. Emotional harm may affect a child's development. There are similarities between emotional harm and neglect.</p> <p data-bbox="547 367 815 434">Emotional harm may include:</p> <ul style="list-style-type: none"> <li data-bbox="547 450 743 483">➤ name calling <li data-bbox="547 490 719 524">➤ put downs <li data-bbox="547 530 858 629">➤ continual isolation or lack of warmth from a carer. 	<p data-bbox="906 367 1299 434">Be aware of emotional harm if you notice that a child:</p> <ul style="list-style-type: none"> <li data-bbox="906 450 1243 616">➤ shows extremes in behaviour; for example, is overly compliant or demanding, extremely passive or aggressive <li data-bbox="906 622 1278 721">➤ acts inappropriately above or below their age or developmental stage <li data-bbox="906 728 1246 795">➤ is delayed in physical or emotional development <li data-bbox="906 801 1302 900">➤ exhibits signs of depression, or talks about or attempts suicide <li data-bbox="906 907 1233 940">➤ displays severe anxiety <li data-bbox="906 947 1262 1014">➤ shows signs of a very low self-esteem <li data-bbox="906 1021 1294 1055">➤ finds it very difficult to learn <li data-bbox="906 1061 1294 1160">➤ is constantly blamed, belittled or berated by their parent or guardian <li data-bbox="906 1167 1286 1332">➤ has a parent or guardian who is unconcerned about the child and refuses to consider offers of help for any problem <li data-bbox="906 1339 1307 1406">➤ is rejected by their parent or guardian.

Type of harm	Impact of harm that may be noticed	
<p data-bbox="276 219 384 248">Trauma</p> 	<p data-bbox="547 219 1302 315">Trauma can refer to a distressing or disturbing experience, or the emotional shock and ongoing psychological effects following an experience.</p> <p data-bbox="547 331 1302 495">You may be in contact with children and families who have fled from war or have experienced the death of loved ones in terrible circumstances. Children may have been homeless, without food, separated from parents with no other guardian or held in prison-like conditions.</p> <p data-bbox="547 517 879 613">Trauma can be caused by an event or experience in a child's life such as:</p> <ul style="list-style-type: none"> <li data-bbox="547 629 632 658">➤ war <li data-bbox="547 674 724 703">➤ kidnapping <li data-bbox="547 719 847 748">➤ religious persecution <li data-bbox="547 763 820 815">➤ homelessness and poverty <li data-bbox="547 831 879 949">➤ natural disasters, such as an earthquake, cyclone, bushfire, flood or tsunami <li data-bbox="547 965 836 1061">➤ accidents, such as a car accident or fall from a height <li data-bbox="547 1077 660 1106">➤ abuse <li data-bbox="547 1122 852 1173">➤ witnessing a death or severe injury <li data-bbox="547 1189 831 1218">➤ seeing a dead body <li data-bbox="547 1234 852 1330">➤ observing a severe emotional reaction from another person. 	<p data-bbox="911 517 1302 613">Common actions that children use to show they have experienced trauma include:</p> <ul style="list-style-type: none"> <li data-bbox="911 629 1302 658">➤ general irritability and crying <li data-bbox="911 674 1203 725">➤ demand for constant physical comfort <li data-bbox="911 741 1251 792">➤ difficulty sleeping or disrupted sleep patterns <li data-bbox="911 808 1302 882">➤ loss of appetite or refusal to eat <li data-bbox="911 898 1283 927">➤ regression in development <li data-bbox="911 943 1283 994">➤ failure to reach developmental milestones <li data-bbox="911 1010 1203 1061">➤ exaggerated startled responses <li data-bbox="911 1077 1302 1173">➤ anxious responses to separations or unfamiliar events, situations or people <li data-bbox="911 1189 1187 1240">➤ social withdrawal or restricted play <li data-bbox="911 1256 1251 1352">➤ re-enacting a traumatic event in play, sometimes repeatedly <li data-bbox="911 1368 1091 1397">➤ bed wetting <li data-bbox="911 1413 1123 1442">➤ thumb sucking <li data-bbox="911 1458 1310 1487">➤ night terrors and nightmares <li data-bbox="911 1503 1203 1554">➤ aggressive behaviour towards others <li data-bbox="911 1570 1283 1599">➤ fantasising about an event <li data-bbox="911 1615 1283 1666">➤ inappropriately expressing intense emotions <li data-bbox="911 1682 1075 1711">➤ flashbacks <li data-bbox="911 1727 1310 1800">➤ hyper-arousal in which a child is continually alert and looking for danger or threats.

Abuse risk factors

There are particular factors that make a child more vulnerable to abuse.

By knowing the indicators of abuse and the situations that make a child vulnerable to abuse, you can quickly identify potential abuse. Indicators of abuse are not based on judgement; they are based on statistics.

The following are factors that increase a child's vulnerability to abuse.

Community and societal factors	Living in areas where there is: <ul style="list-style-type: none"> ➤ high crime rate ➤ poor access to social services ➤ high poverty rate ➤ high unemployment rate.
Parental factors	Being the child of parents or guardians who: <ul style="list-style-type: none"> ➤ have a history of abuse as a child ➤ are teen parents ➤ are single parents ➤ are emotionally immature ➤ have poor coping skills ➤ have low self-esteem ➤ have a history of substance abuse ➤ have a known history of abusing children ➤ lack support, particularly from extended family ➤ experience domestic violence ➤ lack parenting skills ➤ are unprepared for the stress of a new baby ➤ experience depression or another mental illness.
Child factors	Being a child who: <ul style="list-style-type: none"> ➤ was born premature ➤ had a low birth weight ➤ has a disability (mental or physical).

If a child is in a situation that makes them vulnerable to abuse, this doesn't mean they are being abused. There are many healthy, happy and well cared for children who live in families faced with challenges. There are also many children at risk of harm in families that seem to be healthy, happy and well-adjusted.

Cultural and parenting differences

Sometimes harm happens to a child due to lack of parental understanding or due to the parent using cultural practices that cause harm.

In many of these situations, the harm occurs without the parent deliberately placing their child at risk.

For example, you may meet families who:

- are not aware of dangers in their home
- are unaware of the need for young children to be supervised at all times
- use medical practices that may be harmful to the child
- are not clear about the difference between punishing a child and harming the child
- expect unquestioned obedience from children
- have no rules or guidelines in the home
- expect children to make their own decisions regardless of their age.

In many of these situations you can provide some support and education for families in a professional and informative manner. Information may be provided by directing the family to government websites, or by offering information via pamphlets and newsletters.

In some situations you may be unsure of whether the harm to a child is abuse, an accident or a lack of understanding. When this happens, ask yourself the following questions:

- Is the harm likely to be ongoing
- Is the child is at risk of further harm?
- Which abuse risk factors are you aware of?

It is your responsibility to report your concerns.

Example

Identifying signs of abuse

Estie and Dianne are work colleagues who have met to discuss a situation they observed when a child's mother arrived to pick up her child. They have made the following notes:

They have made the following notes:

- **Indicators of abuse:** Bruises in a 2cm line across the legs of the child.
- **Risk factors:** Mother known to have alcohol addiction issues.
- **Dynamics of abuse:** Child hid when mother arrived to pick her up and would not come out from hiding place.

Based on these observations, Estie and Dianne agree that the risk of harm to this child is high. They discuss their observations of the child with the child's mother. She dismisses their concerns and says it was her right to punish her child for disobedience. Estie and Dianne follow their service's policy and procedures for reporting suspected child abuse.



Dynamics and cycle of abuse

An abuser may be any person in the community.

Abusers do not look a particular way or have particular characteristics. Abuse is not related to age, gender, disability, culture or sexuality. Abuse does not occur in any specific place and is not committed by a specific type of person.

While we are talking mostly about children, abuse is also committed against adults. Family violence involves abuse toward a parent or guardian, which in turn affects the child.

Some of the strategies used to keep the cycle of child abuse continuing are shown in the following table.

Intimidation	Using actions to make the child fear telling anyone
Use of adult privilege	Being in a position of power or dominance
Use of institutions	Threatening that the child will be punished by jail, juvenile institutions, religious organisations or relatives
Isolation	Preventing the abused child from seeing family, having friends or socialising outside the home
Threats	Threatening suicide, further punishment, abandonment or harm to loved ones
Economic abuse	Withholding money or essential needs
Emotional abuse	Destroying the child's self-esteem and making them feel ashamed

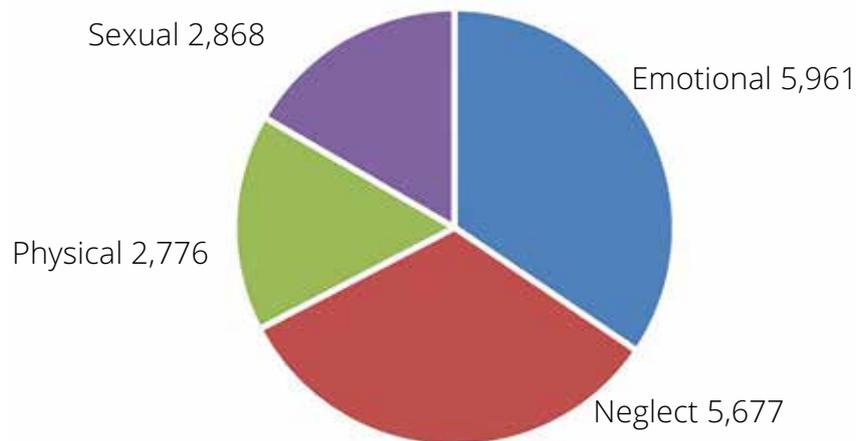
Mostly, abuse is committed by a person who:

- was abused as a child
- observed abuse – it was or is part of their everyday life
- needs to feel in control
- is afraid that if they are not the abuser they will be the abused
- has a mental health disorder, such as an anger management problem
- has a drinking or drug problem
- lacks a sense of empathy, meaning they are unaware of or indifferent to the emotions of others.

Abusers tend to use the same strategies to keep the cycle of abuse continuing. Your knowledge of these dynamics can assist you to understand the situation and support those involved.

The following pie graph is a breakdown of substantiated abuse report types in NSW from 2015-16. Substantiated reports are when the investigation concludes that the child was harmed.

2015-16 substantiated reports in NSW



Data sourced from the Australian Government Australian Institute of Family Studies, *Child abuse and neglect statistics*

Trauma-informed care

Children are affected by abuse and trauma in many ways.

Their life experiences can either make them more vulnerable or more resilient to abuse. When you are resilient you are capable of dealing with difficulties or challenges.

Generally, the greater the degree of abuse and the longer it lasts, the more serious the outcome. Recurrent incidents over long periods of time can have a profound effect on a child.

Children who have experienced trauma may be working with a mental health specialist who will provide trauma-informed care. This care includes actions to support the child's recovery and includes:

- understanding the trauma
- providing safety
- supporting recovery
- working together
- empowering the child so they develop resilience and strength.

To find out more about trauma-informed care, go to the KidsMatter website, which supports the mental health and wellbeing of Australian children: aspirelr.link/kids-matter

You may become involved in trauma-informed care as you work with a child and carry out actions that are recommended by a mental health specialist. Your organisation's policies should include the name of any agencies in your area that support traumatised children. Your supervisor can give you information on what specialists can offer children who have experienced trauma, and what you can do to assist them. Alternatively, you can seek this information yourself by contacting an agency and accessing an agency's website to learn more about the needs of these children.



Practice Task 3

1. Which of the following statements demonstrate reflective listening? Select all that apply.

- 'You got hurt. Where did you get hurt?'
- 'Tell me what happened.'
- 'I'm sure she didn't mean it.'
- 'That sounds like it made you angry.'
- 'Maybe if it happens again you should tell me.'

2. Which of the following questions are open and non-leading? Select all that apply.

- What happened?
- Where did that happen?
- Who was there?
- Did she hurt you?
- Did your dad do this to you?

3. Which of the following situations would cause you to follow your service policy for reporting suspected abuse? Select yes or no for each one.

- a. A child's mother is 16 years old. She is single and you are aware that she has no extended family. Her son seems well adjusted and happy. You have noticed the mother seems depressed. * Yes * No
- b. A child mentions that his shoulder is sore. You notice four small round bruises on his upper arm. When the child is picked up by his parent you notice they push the child into the car, holding the child firmly on the arm in the same area as the bruises. * Yes * No
- c. You notice a parent driving out of the carpark with her child kneeling on the front seat of the car, looking out the window. As the parent backs the car out, she slams on the brakes and the child falls forward, splitting her lip. The parent brings the child in to get first aid. She tells you that the child fell over outside. * Yes * No

- d. A child discloses to you that his parent has touched him inappropriately. The child tells you many details. The parent is a well-known person in the community. He seems stable and financially secure. He recently made a large donation to the service's fundraising campaign.
- * Yes * No

Summary

- A child-focused practice places the rights of the child before the needs of other people.
- There are laws, standards, guidelines and conventions in relation to children's rights that lead daily practice.
- You must comply with policies and understand your role in maintaining confidentiality.
- You must be aware of children's rights legislation to adequately support and protect children.
- Abuse can involve physical, emotional or sexual harm as well as neglect.
- You must be alert to signs that indicate abuse may be occurring.
- Abusers are not easily identified by their heritage, temperament or cultural identity.
- There are socioeconomic, parental and other factors that increase a child's risk of abuse.
- There is a link between certain behaviours and ongoing cycles of abuse.
- Sometimes abuse occurs due to parents being unaware of dangers to children, or due to their cultural or religious beliefs or background.

Learning Checkpoint 1

Supporting the protection of children and young people

1. Which of the following statements demonstrate child-focused actions? Select yes or no for each one.

- | | | |
|--|-------|------|
| a. An infant is falling asleep on the floor. It is almost lunchtime. You take the infant to bed and save their lunch for when they wake up. | * Yes | * No |
| b. A child has arrived upset this morning. One of his parents has left for a work trip. You tell him he should act brave and keep busy. There is no need to be upset. | * Yes | * No |
| c. A child has experienced abuse in the past and you think he may need trauma-informed care. You mention this to your supervisor, but she says it is too much trouble and the parent should organise this if they want it. | * Yes | * No |
| d. You are concerned a child is being abused as you have noticed indicators of harm and you notice that the child is shying away from her parent. You decide to continue monitoring the situation before mentioning it to your supervisor. | * Yes | * No |
| e. Children in your group are thirsty. You stop the planned activity to help them to get their drink bottles or use the drinking tap. | * Yes | * No |
| f. A parent is confused about children's rights. You tell them about the UN Convention on the Rights of the Child and how rights are really about making sure that children have all their needs met and that they are respected. | * Yes | * No |

2. Draw a line to match each type of harm with the indicator of abuse.

- | | |
|------------------|---|
| * Physical harm | * The child does not receive adequate medical or dental care. |
| * Sexual harm | * The child has unexplained bruises, welts, bites, broken bones or burns. |
| * Neglect | * The child is blamed, belittled or berated by their parent or carer. |
| * Emotional harm | * The child is approached using sexual mannerisms by an adult. |

3. Choose the most appropriate action for each situation.

- a. A child told me that he was afraid of his father.
- I said, 'He must be very mean to you.'
- I said, 'What makes you afraid of him?'
- b. I noticed a burn on a child's back.
- I treated it with first aid and watched to make sure no other burns occurred.
- I treated the burn with first aid and wrote down what I noticed. I spoke to my supervisor about the burn.
- c. A child told me he had been smacked with a stick and showed me a welt on his leg. The child seemed to think he deserved to be smacked.
- I followed my service procedure for reporting the situation.
- I asked what to do about this using an internet forum I belong to, where educators can ask questions.
- d. I was asked to read through a child protection policy for my service and comment on any improvement that could be made.
- The policy did not include the right legislation. I brought this to the attention of my supervisor.
- I read the policy and assumed it was all correct.

e. A child who experienced abuse in the past never asks for anything they need, such as going to the toilet or having a drink of water.

- I always ask if the child needs to use the toilet or if they are thirsty, especially when other children ask.
- The child will become more confident over time, then they will ask themselves. I will wait until then.

4. How do you deal with situations where child-focused practice is not being used?

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5. Where can you find your service's policies and procedures relating to child protection?

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Topic 2

In this topic you will learn about:

- 2A Noticing harm
- 2B Reporting harm

Report possible risk of harm

When you notice situations in which harm may be occurring, you need to record what you notice in an appropriate way.

When you are asked to record information, it means that you are expected to write it down, document or use a diagram to explain what you know. The term 'record information' does not mean that you should take recordings of children or adults speaking.

Each service will have procedures relating to reporting harm, as will any agency you report to. The agency that deals with reports will assess the situation and manage it with the child's best interests in mind. You may or may not be involved further.

2A Noticing harm

You are legally obliged to report if you believe a child may be in danger of being harmed or is being abused.

The service children protection policies and procedures reflect reporting requirements supported by the United Nations Convention on the Rights of the Child statements:

- Article 3: All organisations concerned with children should work towards what is best for each child.
- Article 19: Governments should ensure that children are properly cared for and protect them from violence, abuse and neglect by their parents, or anyone else who looks after them.



Where possible be proactive, not reactive.

Acting when concerned

You may need to report your concerns, even if you do not have evidence that a child is being abused.

When you are worried that a child may be at risk of harm, but have no details to report, do the following things:

- Continue to communicate with the family.
- Offer the family any help you think they may find useful.
- Encourage the family to gain parenting support or get involved with parenting activities.
- Link families to parent groups, cultural or religious support groups.
- Talk with someone experienced in helping families that are at risk.

Search on your state/territory child protection website for support services and information.

ACT	aspirelr.link/child-protection-services-act
NSW	aspirelr.link/childstory-reporter-nsw
NT	aspirelr.link/child-protection-nt
Qld	aspirelr.link/child-safety-qld
SA	aspirelr.link/child-safe-environments-sa
Tas.	aspirelr.link/child-protection-tas
Vic.	aspirelr.link/child-protection-contacts-vic
WA	aspirelr.link/child-protection-wa

Preparing to report

You do not need to be absolutely certain that harm is occurring before making a report.

You may report if you have any concerns of harm, or if you feel a family needs help before the child is harmed.

You can prepare to report the information you know by recording it in an appropriate and professional way.

When preparing to report abuse:

- be aware of all signs of abuse
- be approachable and let children know that you are available to talk so you can build a trusting relationship that allows them to share difficult information with you
- note down your observations according to your service policies and procedures, making sure that your notes are accurate, relevant, and never show bias or judgement procedures make sure your concerns are kept confidential
- pass on your notes to the right people according to legislation, and organisational policies and procedures.

Writing notes

To ensure your report is useful, you must gather accurate information.

This means writing what you see in a clear and objective manner. Reports must be non-judgmental and only record what you see or hear. It is very important that you do not add your own thoughts and ideas.

Think carefully about the details and, if possible, add information on each of the following.

General details	➤ The child's general details, including who they live with and where they live.
Indicators of harm	<ul style="list-style-type: none"> ➤ The things you notice that make you think the child is being harmed. ➤ Think of each of the types of harm and any indicators of risk.
Risk factors	➤ Include community, societal, parental and child factors, as well as cultural and parenting differences.
Dynamics of abuse	➤ Any actions you have noticed, or do not notice, or things you have heard that make you think the child is being threatened.

Example**Making observational notes**

Vera felt that two-year-old Stan was at risk of being harmed. She made the following notes, which she will use to write a report.

General details	<ul style="list-style-type: none"> ➤ Stan is two years and three months old. ➤ He lives with his grandmother and his mother visits on the weekends. ➤ He and his grandmother live in an apartment in Sydney.
Indicators of harm	<ul style="list-style-type: none"> ➤ Stan cries when he is picked up at the end of the day by his grandmother and is very unsettled when he comes to the service on Mondays. ➤ Stan's grandmother calls him 'trouble' and jokes that he will be just like his mother. ➤ If Stan makes a sound or does not leave his activity immediately when his grandmother tells him to, his grandmother smacks him. She usually smacks his legs, but today I saw her slap Stan on the face.
Risk factors	<ul style="list-style-type: none"> ➤ Stan's mother is drug addicted and Stan was addicted at birth. ➤ Stan is living in poverty.
Dynamics of abuse	<ul style="list-style-type: none"> ➤ Stan's grandmother seems unaware that her actions may put him at risk.

When writing her report, Vera needs to ensure:

- her observations are written according to her service's policies and procedures
- her notes are accurate, relevant and objective
- her concerns are kept confidential.

Practice Task 4

1. Comments used in a report for suspected child abuse should be objective and non-judgmental. Consider the following comments about Steph, a four-year-old child in the service. Which comments are appropriate to include in notes being used for a report? Select all that apply.

- Steph had a burn measuring approximately 2cm on her outer right thigh.
- Steph is usually involved in lots of activities and has many friends. This week she is spending lots of time on her own and I have noticed her crying on three occasions.
- Steph must be scared of her mother. She never wants to talk about her.
- Steph has told me that she is not allowed to leave her room at night to use the toilet, so sometimes she wets the bed.
- I think Steph is treated very badly by her father because he is not a nice person and I don't trust him.

2. Draw a line to match the correct report headings on the left to the details about a child at risk of harm on the right.

- | | |
|----------------------|---|
| * General details | * Belinda has an intellectual disability. |
| * Indicators of harm | * Belinda's mother told another parent that Belinda wasn't a very good friend and had issues. |
| * Risk factors | * Belinda has become very quiet and is not joining in with her friends. |
| * Dynamics of abuse | * Belinda is five years old and lives with her parents and two sisters, aged 12 and 14 years. |

2B Reporting harm

Any person, regardless of profession or position, can make a report to the relevant authority.

Despite legal requirements, you have an ethical duty toward a child in need of protection. You must report the situation and provide details that have led you to believe this.

A child in need of protection is one who may be faced with:

- any form of abuse
- domestic and family violence
- neglect
- exploitation
- alcohol and other drug (AOD) concerns
- systems abuse (harm done to children through policies, procedures, legislation and guidelines).



The report requires a depth of detail.

Taking action

If you determine that a child is at risk of harm or is being abused, you need to take the following steps.

When making a report, take the following steps.

Don't delay	<ul style="list-style-type: none"> ➤ Never assume that someone else will make a report. ➤ Don't wait until you have more evidence – you will be advised as to whether you need more evidence at the time of reporting.
Identify the appropriate reporting agency	<ul style="list-style-type: none"> ➤ Contact the child protection service or department that deals with child abuse in your state or territory. ➤ You may need to involve a supervisor or another educator, depending on the situation. ➤ If you are not sure what to do, call the police for guidance.

To identify your state or territory authority for advice and support regarding child abuse and neglect, go to: aspirelr.link/state-child-abuse-authority.

What to expect

When you make a report, you may be asked to provide specific details.

Information might include:

- the child's name and/or a description of the child
- the name and/or description of the suspected abuser, including their relationship to the child, if known
- what you observed and any immediate concerns you have for the child's safety
- any knowledge you have of suspected or known past abuse
- the names of any other witnesses
- a description of your relationship to the child.

You may be asked to:

- add to the information you have provided by making more notes
- recall past events
- observe further
- discuss or add to the notes you have already provided
- fill in and submit forms and reports.

In some states and territories you may become involved with an inter-agency body that has the role of working with all services relating to a particular case. They may be responsible for coordinating actions or events, and your involvement may include meeting with an agency or an inter-agency body to support a child's needs.

The person you report to should be aware that this is a stressful situation for you. However, they will need to follow their own steps for dealing with the report to ensure they act in the best way for the child.

Example

Notifying a child protection agency

Gerry is concerned that a child is at risk of harm. She develops some notes and calls her local child protection agency. The agency worker asks Gerry many questions. After listening to Gerry's concerns, the agency worker states that she believes the child is currently safe, but that the family may need support. The worker suggests that Gerry speaks to the parents and offer them support through a local service.





Practice Task 5

Which of the following statements are correct responses in relation to a child suspected of being abused? Select yes or no for each one.

- | | | |
|--|-------|------|
| a. I don't think a child is safe, but I have only seen a few bruises. I will wait until I see something more serious before I report this. | * Yes | * No |
| b. I know that something is not right in relation to a child, but I don't have much evidence. I will call the child protection agency and discuss my concerns. | * Yes | * No |
| c. I will call the child protection agency and take some notes if they ask me to. | * Yes | * No |
| d. I believe a child is being abused. I don't feel like I have enough evidence to support this, so I will just have to forget about it. | * Yes | * No |
| e. I will write down some details about what I have noticed, then I will call the child protection agency. This way I will be prepared. | * Yes | * No |
| f. I have evidence a child is being abused. My supervisor says to ignore it. I will need to contact the child protection agency myself. | * Yes | * No |

Summary

- If you suspect a child is being harmed or is at risk of harm, keep accurate and non-judgmental records.
- All instances of possible harm should be recorded.
- Be prepared to report possible situations of harm as part of your role.
- All educators have a duty to report harm if they identify it or have concerns.
- Child protection agencies can provide support by giving you guidelines for reporting child abuse.
- All organisations must have policies and procedures in place to ensure that children are protected, and that reports meet legal and ethical guidelines.

Learning Checkpoint 2

Report possible risk of harm

1. What is the name of the reporting authority you would contact in your state or territory if you require advice or support regarding child abuse or neglect?

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2. What is non-judgmental information in relation to reporting suspected abuse?

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Read the case study, then answer the questions that follow.

Case study

Ronald, an educator, has noticed bruising and burns on Caleb. Ronald has not noticed any issues prior to this occasion. These are Ronald's notes about what he has noticed.

Caleb fell over in the mud today and needed to change his clothes. I helped him to do this, providing pants and a clean shirt. When Caleb removed the dirty clothing I could see that he had a dark bruise approximately 10cm long and 2cm wide on his lower back. Just above this bruise was a small blister that looked like a 1cm round burn.

I asked Caleb what had happened and he said it was an accident, then he turned away and wouldn't talk any more.

I think Caleb's mum has told him not to talk about the injuries. She has probably done this to him.

3. a. Which two sentences in Ronald's notes are judgmental?

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- b. Which details about Caleb provides information about the type of abuse Ronald has noticed?

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4. The following information is from a child protection policy. The policy is based on legislation and child protection agency guidelines.

Child protection statement

Individual educators should keep note of the concerns that have led them to form a belief that a child is being abused. Educators should report their concerns rather than reporting a family.

Concerns for a child’s safety should be discussed with the director. It should then be decided who else, if anyone, should be informed. The need for confidentiality should be remembered at all times in the interests of the child and their family. Only where the child will be affected should the situation be discussed with anyone else. These procedures are in place to support and protect the child.

The educator with concerns should make a report to the relevant child protection agency within 24 hours of their concerns. If the agency asks for additional details, or asks the educator to comply with a particular action, the educator must cooperate, with support from the director.

After making a report, the educator should continue to take notes if they notice any further signs that the child is or is likely to be at risk of physical, sexual or emotional abuse or neglect.

After reading the policy statement, number the steps from 1 to 5 in the order you would follow.

- Report my concerns to the child protection agency within 24 hours.
- Continue to take notes if I notice additional concerns.
- Cooperate with the child protection agency if they need more information or action to be taken.
- Keep notes of concerns about a child’s safety or signs I notice.
- Discuss my concerns about a child’s safety with the director.



Topic 3

In this topic you will learn about:

- 3A** Applying a code of ethics
- 3B** Providing a safe environment
- 3C** Maintaining professional boundaries

Applying ethical practices

Protecting the rights of children begins by meeting their physical and emotional needs.

The quality of supervision and support a child receives is influenced by each educator. As someone responsible for children, make sure you are always working in an ethical and nurturing manner.

3A Applying a code of ethics

A code of ethics is a written set of guidelines that you can use to help you make decisions that are in the best interests of children and young people.

Educators can use the code of ethics guidelines to help them:

- understand which behaviours by adults must not be supported
- maintain standards of practice
- protect children who are powerless and vulnerable
- make decisions when faced with ethical dilemmas.



Use the code of ethics to guide you at all times.

Ethical dilemmas

An ethical dilemma is a situation where there is a conflict in responsibilities.

Usually there are two or more possible solutions, and it is not easy to decide which one to choose.

When you are facing an ethical dilemma, you will usually be dealing with an issue where:

- each choice of action has a negative or difficult consequence
- policies or procedures don't solve the problem clearly
- people, relationships and/or people's rights are affected.

The following are examples of ethical dilemmas that might occur in an education and care service. They relate to the difficulty you would have in making a decision out of two choices.

Scenario	Ethical dilemma 1	Ethical dilemma 2
A parent asks you to keep a child awake all day so he sleeps better at night. You know the child gets really tired and grumpy after lunchtime and needs a nap.	You feel that it is in the best interests of the child to have a nap after lunch.	Letting the child nap at lunch is going against the parent's wishes.
You hear your supervisor making hurtful remarks to children.	You know that the comments are upsetting the children and staff, and that you should say something.	You don't feel confident about confronting your supervisor about their actions.

Always seek support from your supervisor or senior staff member for any issues that you are unsure about.

Using a code of ethics

A code of ethics does not provide the answers to ethical dilemmas, but it does provide useful guidelines for appropriate behaviour, especially when there are no clear right or wrong answers.

You may not always be surrounded by adults who are role models for ethical practice, so you must develop your own ethical principles to guide you. When developing these, keep the following in mind:

- when in doubt, put the child's welfare first
- respect every family's right to privacy
- consider situations from other people's points of view
- support and assist your co-workers
- do not discuss details about your workplace or the people in it with unauthorised people.

An ethical dilemma is about having two equally concerning choices. If you are too afraid to act or don't care for an outcome, this is another issue.

Example

Ethical dilemma

The educator, Hannah, has been told that Melody, who is 12 months old, should not be given her regular bottle of milk after lunch. Following the meal, Melody is crying and asking for the bottle. She hasn't had anything to drink all morning.

Hannah knows that Melody's mum should be respected for her decision to not give Melody milk, but she also knows that Melody is tired, thirsty and upset.

Hannah's options are to either:

- give Melody the bottle of milk because she is tired, thirsty and upset
- respect the choice of Melody's mother, and not give Melody the bottle.

Hannah talks to her supervisor and together they decide to call Melody's mother and ask her what she would like them to do.

This decision is in line with the Early Childhood Australia (ECA) Code of Ethics as it meets the core Principle: Partnerships with families and communities support shared responsibility for children's learning, development and wellbeing.



Solving ethical dilemmas

ECA has developed a code of ethics that provides guidance for professional behaviour to help you make decisions.

ECA is a peak early childhood advocacy organisation that acts in the interests of young children, their families and those in the early childhood field. You can access the ECA code of ethics at: aspirelr.link/eca-code-of-ethics

As most ethical dilemmas will involve you and a parent or colleague, it may be in your best interest to explain any ethical situation to your supervisor or another senior staff member.

If you follow this advice you will be:

- reducing your responsibility and ownership of any decision made
- understood and supported
- preparing your supervisor if the situation is brought to them as a concern or complaint
- gaining feedback to make sure your actions are appropriate.

The following are some tips for solving ethical dilemmas.

Get the facts	<ul style="list-style-type: none"> ➤ Ensure you understand the situation and your options clearly. ➤ Identify who is involved and who may be affected by a decision.
Identify who needs to make this decision	<ul style="list-style-type: none"> ➤ Is this your responsibility or is the situation one that should be handled by another staff member? ➤ What do the policies and procedures say? ➤ Should you report this to another staff member?

If you are expected to solve the ethical dilemma, use these guidelines before implementing your decision.

Think about the options you have for solving the situation

- Use the ECA's Code of Ethics to guide you and draw on your knowledge of the people and situation.

Think about the option that respects everyone's rights

- Parents have the right to make decisions about their children, and educators must show respect by implementing these decisions where possible.
- Refer to policies and procedures for help.

Think about which options are fair

- Consider the outcomes of any situation and the long-term effects of a decision, including whether it will break trust with a parent.

Think about which options demonstrate your values and the service's values

- Consider whether you are comfortable with making a particular decision.
- Ask yourself, if someone you respected asked what you did, would you feel you made the right choice?

Example

Solving an ethical dilemma

Rodriguez is one of the last educators left in the evening. Eva's mum, Helen, arrives to pick her daughter up at the usual time, but tonight Rodriguez notices that Helen smells of alcohol, is giggly and is a little unsteady on her feet.

Rodriguez has a good relationship with Helen and feels comfortable asking what she has been up to. Helen tells him that there was a farewell party at work and she had a few drinks. Rodriguez says it looks like she enjoyed herself. He offers to call Helen an Uber, but Helen refuses. Rodriguez reminds Helen that if something goes wrong during the drive home she could lose her licence, or worse, she or Eva may be hurt. Helen thinks for a minute and then agrees that calling an Uber is a good idea. Rodriguez makes Helen a coffee and they chat about the party while they wait for the Uber to arrive.

Rodriguez has done the right thing by voicing his concerns. Even if Helen had still decided to drive, he would have fulfilled his duty of care and his role as an advocate by his clear attempts to alter the situation.





Practice Task 6

Draw a line to match each ethical dilemma to the ECA Code of Ethics commitment to take action that guides decision-making.

- * In relation to children, I will act in the best interests of all children.
- * In relation to families, I will respect families' rights to privacy and maintain confidentiality.
- * In relation to colleagues, I will maintain ethical relationships in my online interactions.
- * In relation to my profession, I will advocate for my profession and the provision of quality education and care.
- * A relative comments that childcare should be unregulated. They feel looking after kids is easy and that staff shouldn't have to get qualifications to do something a parent does every day.
- * After rest time, a child asks for music to sing and dance to. Other children are still waking up and want quiet time. One educator puts on the music very loud and begins dancing round and singing.
- * A parent tells you that he has a serious illness and will be leaving work soon. He confides in you that he may have trouble paying fees in the future. You decide to keep this information private to respect the parent's wishes.
- * One of your colleagues has posted something negative about you on the service social media page. They suggest you handled a situation poorly. You speak to a supervisor and ask for the post to be removed.

3B Providing a safe environment

By providing a safe environment for children, you are reducing the chance that they will be harmed and making sure incidents are kept to a minimum.

When you are providing a safe and healthy environment for children, you are standing up for their rights, or advocating for them. This is part of your duty of care. When you stand up for someone's rights, you are an advocate.

While there are many safety concerns that you deal with each day, common safety issues that relate to child protection and risk of harm and abuse include:

- late pick up of a child
- an accident or emergency involving a parent or guardian
- a person picking up a child who is affected by drugs or alcohol
- a person who has a court order against them, arriving to pick up the child.

Many of these situations require you to use ethical decision-making. Create and maintain good relationships with families, so that when you are faced with concerning situations, you will be better equipped to act in the best interests of the child.



Children need to feel safe at the service.

Acting to provide safety

Allowing a child to leave your organisation with an unauthorised person is a breach of a range of legal and ethical boundaries.

You may be held responsible not only for the unauthorised release, but for any issue or incident that occurs after the child's release.

If you release a child into the custody of an adult who has authority, but is not in a fit state to care for the child, you may also be held accountable for any incident that occurs. This does not mean that you must take full control of a child's release into another person's care. However, it does mean that you must take all reasonable steps to make sure the child is collected by the right person and that this person is fit to care for the child.

If you know certain family details, such as who is authorised to collect each child, you will be able to solve many issues. You may find the information you need by reading:

- legislation; for example, Regulation 99 of the Education and Care Services National Regulations indicates that a person under the age of 15 is not authorised to collect a child
- supervision or custody orders
- emergency contact forms
- parent permission notes.

You can obtain this information from:

- licensing authorities
- your organisation or supervisor
- courts of law
- the police.

Example

Enforcing safety procedures

As a new staff member, Simone doesn't know many parents, so she makes a point of introducing herself when children are dropped off. Simone soon notices that children are often dropped off and picked up by different people.

One afternoon, a man enters reception and starts to sign the departure book. Gabby, five years old, runs to him and gives him a hug. Simone has met both of Gabby's parents and is unsure who the man is. She is not certain if he is authorised to pick up Gabby.

Simone approaches the man and says hello. She asks him to show her some identification. He introduces himself as Gabby's uncle, Brian. Simone checks Gabby's enrolment form and sees that he has permission to pick her up. Simone thanks Brian for his patience and understanding.

Simone thanks Brian for his patience and understanding.



Practice Task 7

A parent arrives to pick up her child. You have a court order stating that she is not legally able to come within 500m of the child. Which of the following statements are things you would do in this situation? Select all that apply.

- Contact the person who has legal custody of the child.
- Get the child to hide in the storeroom and be quiet.
- Call the police if the person is uncooperative.
- Explain that you have a court order stating that she is not able to see the child.
- Ask a supervisor for help.

3C Maintaining professional boundaries

You will get to know the children and parents who visit your service and develop close relationships with them.

When friendship, caring and affection are involved, some educators find it difficult to clarify and maintain professional boundaries. As an educator, you must be clear about what is appropriate in terms of:

- how you share information
- what information you share and receive
- how you interact with others.

Children and boundaries

It can be challenging to find a balance between becoming over-involved and under-involved with children and young people.

This middle ground, known as the 'zone of helpfulness', makes sure your relationship is flexible and occurs within the right boundaries.

You must always work in accordance with professional boundaries in relation to children and young people.

If children share their problems and issues with you, your first priority should be to listen. Children may also want you to help them solve the situation.

If the child's experience links with a situation you have experienced, you must carefully think about how appropriate it is for you to share this with them. If you do decide to share your story, make sure it has a positive message that will encourage the child, not distress them. They may even take responsibility for your feelings. When unsure, choose not to share information.

It is expected that you have a friendly and caring relationship with children. For some educators this relationship will be very close and may include close physical contact like hugging. Many educators find the boundaries between close physical contact and inappropriate physical contact unclear. It is sometimes the child who oversteps the boundaries of physical contact.

Seek advice from a supervisor or co-worker to help you find an appropriate balance between caring and professionalism if you are unsure.



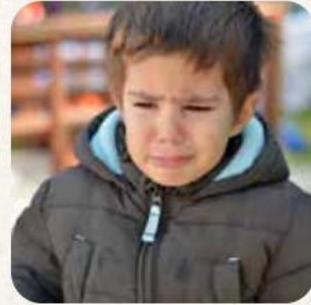
Find the 'zone of helpfulness' to maintain your professional boundaries.

Example**Maintaining professional boundaries**

Kai, five years, tells his educator, Monique, that his mother and father are getting a divorce, and that there had been a bad argument the night before.

Monique wants to support Kai and let him know that he will be okay. Monique tells him that when she split up with her husband, he hit her and that her kids were scared too. Monique tells Kai that now, years later, everyone is friends and that one day Kai's mum and dad might be friends again too.

After this discussion Kai is afraid that there may be violence between his parents. He worries that his parents will not be friends anymore.



Families and boundaries

Find a balance between becoming over-involved and under-involved with family members.

Professional boundaries can be less clear when you are interacting with adults. They may also be challenging when you live in a community where adults in professional roles socialise with families they care for professionally.

The following table describes how to work in accordance with professional boundaries when it comes to family members.

Sharing information about your life

- Parents may share their personal problems or issues with you so you can provide the best support for their child and family. They may view you as a responsible person they can confide in.
- When this happens, keep your personal problems and issues private.
- Prioritise the parent's situation in your discussion, rather than overshadowing it with your own story or experiences.
- Never enlist a family member of a child to become your support person.
- If you need someone to talk to, approach your supervisor, a trusted person outside of your work, or make an appointment with a counselling service.

Personal intimacy

- Parents and other educators may encourage you to become closer to them on a personal level.
- Professional boundaries allow for a trusting and friendly relationship, however, when you extend the relationship outside these boundaries there can be negative consequences.
- For example:
 - you may make co-workers feel uncomfortable or less favoured
 - you may end up having a personal dispute which causes wider service issues
 - your personal information may be shared with others.
- If you cross the line between professional boundaries and personal intimacy, you will involve yourself in a variety of service and family issues that may not be easily resolved.

Practice Task 8

1. Which of the following situations demonstrate that professional boundaries have been kept? Select yes or no for each one.
 - a. A parent arrives in the morning and tells you they have been made redundant and need to sell the family car. You start to tell them how your dad was made redundant last year and go on to reveal all the details of his situation and how difficult it was. Have professional boundaries been kept?

* Yes	* No
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 - b. Today you are reading a story with a child sitting beside you. The child starts cuddling into your arm, then asks if you will put your arm around them. The child starts to kiss you repeatedly on the cheek. You say, 'You are very cuddly today. That's enough kisses, let's sit up together and read the story.' Have professional boundaries been kept?

* Yes	* No
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 - c. A child tells you that they are worried about their brother as he was smoking cigarettes yesterday. You tell the child that maybe it was just one time and that when you were his age you did the same thing. Have professional boundaries been kept?

* Yes	* No
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 - d. A child tells you that their parents are fighting a lot. You listen and ask about how the child is feeling. Have professional boundaries been kept?

* Yes	* No
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Summary

- Protecting the rights of children and young people and creating a safe environment for them is an essential part of your professional role.
- When you are faced with ethical issues, there are a range of supports to guide you, including ECA's Code of Ethics and your co-workers.
- Professional boundaries allow you to implement your work practices with focus and respect.
- It is your responsibility to recognise and report unethical behaviour.

Learning Checkpoint 3

Applying ethical practices

1. Draw a line to match the beginning of each sentence about ethical practices to the correct ending.

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|--|---|
| <ul style="list-style-type: none"> * When an educator treats her niece differently to other children, she is | <ul style="list-style-type: none"> * gaining supervision support. |
| <ul style="list-style-type: none"> * You notice a staff member becomes angry towards some children when no one is watching. If you do something about this, you are | <ul style="list-style-type: none"> * breaching professional boundaries. |
| <ul style="list-style-type: none"> * When you are unsure what to do about a situation of confidentiality and ask for support from your supervisor, you are | <ul style="list-style-type: none"> * using ethical practices. |
| <ul style="list-style-type: none"> * When you refer to the ECA Code of Ethics to help you make a difficult decision, you are | <ul style="list-style-type: none"> * recognising and reporting potential ethical concerns. |
| <ul style="list-style-type: none"> * You see a staff member provide food for all children in the group except one. By reporting this to the director, you are | <ul style="list-style-type: none"> * protecting the rights of children. |

2. What can you do if you are worried about a child and need to talk about it with someone?

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3. What should you do if you notice a co-worker being unethical?

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