



CHCPRT025

Identify and report
children and young
people at risk



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Release 1

Learner Guide

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CHCPRT025 Identify and report children and young people at risk, Release 1

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Aspire acknowledges the homelands of all Aboriginal and Torres Strait Islander peoples and pays our respect to Country



Before you begin

This Learner Guide is based on the unit of competency *CHCPRT025 Identify and report children and young people at risk*, Release 1.

Your trainer or training organisation must give you information about this unit of competency as part of your training program.

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	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	These highlight learning points and provide realistic examples of workplace situations.	
Practice Tasks	Practice Tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which Practice Tasks to complete.	
Callouts	Callouts reiterate key learning points to help students revise for their assessments.	
Weblinks	Weblinks provide learners with additional content to contextualise their learning and develop their understanding.	
Videos	Videos provide a visual reference of key concepts to aid comprehension and guide learner exploration. Each video is accessed by a QR code in the Learner Guide (or a button in the eBook version) for ease of access.	 
Glossary/margin definitions	Key terms are defined where they first appear to help consolidate understanding. A glossary of terms is provided at the end of the Learner Guide to assist learner revision of key concepts.	
Summaries	Key learning points are provided at the end of each topic.	
Learning Checkpoints	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.	
Case studies	Case studies are interspersed throughout the learning content to provide a workplace setting that contextualises key concepts.	

Foundation skills

As you complete learning using this guide, you will be developing the foundation skills relevant for this unit. Foundation skills are the language, literacy and numeracy (LLN) skills and the employability skills required for participation in modern workplaces and contemporary life.

These skills are listed below:

Foundation skill area	Foundation skill description
Reading	<ul style="list-style-type: none"> • Understanding how documents are presented and being able to navigate through documents • Understanding industry- and job-specific terminology • Interpreting key information in relevant documents • Understanding routine workplace checklists and documentation
Writing	<ul style="list-style-type: none"> • Planning, drafting and writing reports and documents • Communicating through written letters, email and online • Recording progress; reporting incidents
Oral communication	<ul style="list-style-type: none"> • Clarifying instructions • Providing information • Supporting others through encouragement, negotiation and conflict resolution • Using body language to model desired behaviour and responding to others' body language
Numeracy	<ul style="list-style-type: none"> • Calculating costs, weights, measurements of height and distance • Interpreting measurements
Learning	<ul style="list-style-type: none"> • Understanding your job role, organisational procedures and legal responsibilities • Managing your work and seeing how well you are going • Making goals for yourself at work • Seeking professional development opportunities for continuous improvement
Problem-solving	<ul style="list-style-type: none"> • Identifying problems • Working out how to fix a problem using problem-solving processes • Reviewing the outcome
Initiative and enterprise	<ul style="list-style-type: none"> • Recognising opportunities to develop and apply new ideas • Generating ideas by thinking of new ways to do something • Making suggestions to improve work



Foundation skill area	Foundation skill description
Teamwork	<ul style="list-style-type: none"> Working well with other people by cooperating, collaborating, encouraging and building rapport
Planning and organising	<ul style="list-style-type: none"> Planning your workload and commitments Implementing tasks Completing work on time Knowing how to deal with hazards and risks
Self-management	<ul style="list-style-type: none"> Understanding and applying decision-making processes Reviewing your behaviour and the impact of your decisions
Technology	<ul style="list-style-type: none"> Efficiently using digitally based technologies and systems correctly and safely Accessing, organising and presenting information Using equipment correctly and safely

Note: Not every unit of competency will contain all foundation skills.

What do you already know?

Use the following table to identify what you may already know. This may assist you to work out what to focus on in your learning.

Topic	Key outcome	Rate your confidence in each section
Topic 1 Identify children and young people at risk	1A Observe signs and identify children and young people at risk	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1B Document signs and indicators according to legislative and organisational requirements	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1C Use communication and information gathering techniques	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 2 Report indications of possible risk of harm	2A Report risk of harm indicators	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2B Ensure documentation is accurate and factual	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident



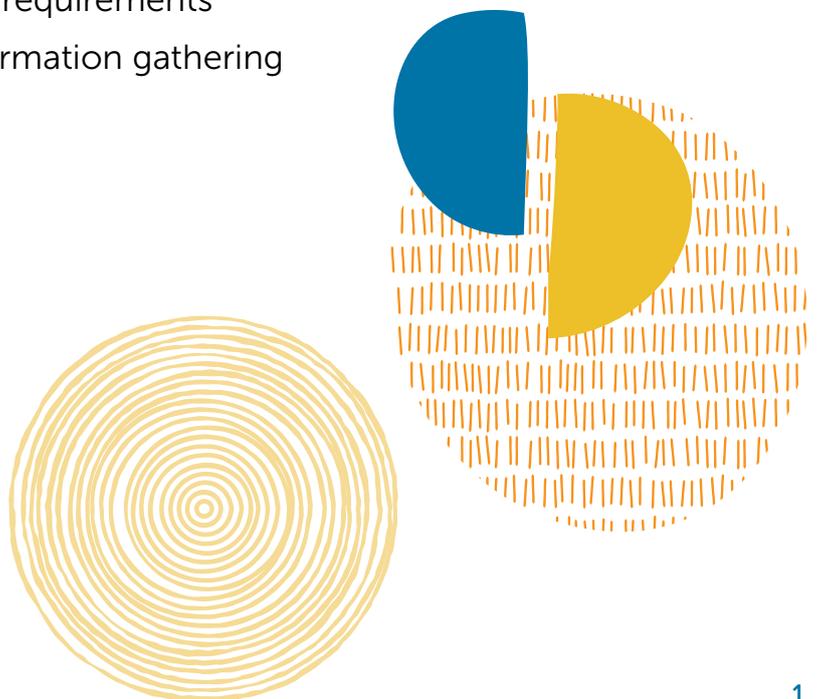
Topic	Key outcome	Rate your confidence in each section
Topic 3 Apply ethical practices in work with children and young people	3A Employ ethical practices	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3B Observe professional boundaries	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident





Topic 1: Identify children and young people at risk

- 1A Observe signs and identify children and young people at risk
- 1B Document signs and indicators according to legislative and organisational requirements
- 1C Use communication and information gathering techniques



1A

Observe signs and identify children and young people at risk

The primary objective of community service organisations and their staff is to provide support.

The support needs of clients require a range of different services which may be provided in a variety of settings. While the circumstances for service provision will vary, interactions with children and young people are likely to occur as part of service delivery. Here are some examples:

- Working as a disability, family or child support worker. You may provide a range of support and assistance in a client's home and/or in a community setting.
- Respite services where support is provided in a client's home or at a designated residential facility. The children or young people may have a disability, or their parents may receive support due to mental health problems or a complex family situation.
- Child protection services where child welfare is the focus of support and workers are trained to assist case managers.
- A family service organisation that provides a range of family support programs for parents, adolescents and younger children.
- Services catering for adults but where children may attend appointments with their parents. These services may have specialist workers to work with the children while their parents are receiving support.
- After-school, weekend and vacation care programs. These may be early education, primary education and after-school programs located at schools, community centres or sporting centres. They may be community based and focus on supporting specific needs such as children with disabilities or young people in foster care. The staff will have mixed levels of education, disability and community service qualifications and experience.
- Foster care residential services where children live with a foster family if they can't live with their parents or other family members.
- Youth services such as drop-in centres, youth justice organisations, youth mental health services, and social programs designed to engage young people.



Observe signs and indicators

Identifying children or young people who may be at risk is part of your duty of care.

As a person working with children and young people, you are particularly well-placed to observe behaviours and/or physical signs and symptoms that may indicate abuse. You may notice behaviours that are uncharacteristic or unusual for a particular child or young person. You might also notice unusual actions or responses for children of a particular age or developmental stage.

Children can show signs of harm due to their risk-taking behaviours such as learning to walk, climbing trees, arguing or playing with siblings. You must be sensitive to situations where there are unusual explanations for behavioural changes or where there are signs that the child may have been harmed in an unacceptable way.

Sometimes a child is hurt because of lack of parental understanding or from the person/parent using cultural practices that cause harm. In these situations, the harm occurs without the parent having deliberately placed their child at risk.

Expectations of how children should be treated vary across cultures, religions and societies. For example, you may work with families or meet parents who:

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

Depending on your role, you may be in a situation to direct the person/parents to information or advice. This might be directing them to government websites or supporting them to contact a specialist parent/family relationship service. Always check information first with your supervisor before passing it on.

If you are unsure of whether the harm to a child is abuse, an accident or a lack of understanding, ask yourself the following questions:

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

It is your responsibility to report your concerns.

What is abuse and neglect?

The terms abuse and neglect describe situations where a child may need protecting from further harm.

Children are the most vulnerable members of our community. They do not have the power to stop abuse; therefore, it is the responsibility of others to help and protect them. As a worker, you have a responsibility to make sure children are safe and their needs are met.

Abuse

Any intentional action that harms or injures another person.

Neglect

Failing to properly care for a person.

The World Health Organization (WHO) defines child **abuse** and **neglect** as:

‘All forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.’

Source: <https://apps.who.int/iris/handle/10665/43499>

Here are further details on the terminology used:

- The terms ‘child abuse and neglect’ and ‘child maltreatment’ are used interchangeably. However, the term ‘child abuse and neglect’ is commonly used in Australia.
- In legislation the term ‘child abuse and neglect’ refers to behaviours and treatment that result in the actual and/or likelihood of harm to the child or young person.
- Many people just refer to ‘child abuse’ instead of to ‘children and young people’. In Australia anyone under the age of 18 is legally a child. However, there are distinct differences in the required support and needs of young people versus younger children.

Source: <https://aifs.gov.au/cfca/publications/what-child-abuse-and-neglect>

General indicators of risk

Behaviours to look out for in a child or young person:

- Appears frightened of a family member or another person they know
- Acts in a way that is unusual for their age and development
- Has suddenly regressed from their chronological age to a younger age

Risk of harm indicators include when an adult:

- avoids child health services or seeking treatment for their child’s illness or injury
- has unrealistic expectations of the child
- is missing or appears drunk or affected by drugs.

Another indication can be when the child complains, or someone else mentions, that the child is often being criticised harshly or not provided with emotional comfort.



Impact of abuse and neglect

There are five main types of harm, outlined below. However, research is suggesting that it can be misleading to categorise types of harm as many children are subjected to multiple forms of abuse and neglect.

Physical abuse

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.



Injury may occur when a child has been:

- pushed or thrown
- slapped, hit or punched
- burned; for example, with a cigarette
- kicked
- bitten
- choked
- tied down
- assaulted with a weapon
- shaken violently
- not provided with medical treatment following an injury.

You might notice physical abuse has occurred if a child:

- has injuries that don't match the story of how they occurred
- has unexplained bruises, welts, bites, broken bones or burns
- has injuries in the shape of an object; for example, a belt buckle or cord
- has faded bruises or other noticeable marks
- shrinks at the approach of adults
- reports an incident
- has not received medical help for an injury needing care
- demonstrates extremes in behaviour; for example, being highly aggressive or completely withdrawn
- is afraid or overly upset about being with a parent or other carer
- is fearful of a particular person
- demonstrates unusual or extreme dramatic play
- is described in a negative way by their parent or guardian
- seems to be subjected to harsh discipline.

Sexual abuse

Sexual abuse refers to a situation in which a person involves a child in sexual activity. Physical force is also sometimes used.



Child sexual abuse involves a wide range of sexual activity, including:

- fondling a child's genitals
- masturbation in front of a child
- oral sex
- vaginal or anal penetration
- exposing the child to pornography
- taking explicit photographs or videos of children.

You might be concerned about sexual abuse if a child:

- has difficulty walking or sitting
- urinates frequently
- refuses to change their clothes in front of others
- refuses to participate in usual physical activities
- demonstrates bizarre, sophisticated, or unusual sexual knowledge or behaviour for their age
- contracts a sexually transmitted infection (STI)
- reports sexual abuse
- has pain, swelling or itching in the genital area
- has stained or bloody underwear
- reports being shown pornography
- demonstrates that they don't like being hugged, kissed or touched by an adult
- receives sexual attention or their parent or guardian uses sexual mannerisms when approaching them.



Neglect

Neglect refers to a situation where the carer of a child fails to provide the basic necessities to ensure a child is not harmed.



Neglect occurs when a child cannot access adequate:

- food
- clothing
- shelter
- medical attention
- supervision
- education
- emotional development
- nutrition.

Be aware of possible neglect if a child:

- is frequently absent from school or community service programs
- does not receive adequate medical or dental care
- is consistently dirty or has severe body odour
- lacks appropriate clothing; for example, doesn't have a warm coat in the winter
- discusses use of drugs or alcohol
- is left alone at home for long periods (relevant to age and maturity)
- shows a failure to thrive or signs of malnutrition
- exhibits constant hunger or begs for, steals or hides food
- is extremely willing to please
- is ignored by their parent or guardian
- has a parent or guardian who appears not to care about them
- has a parent or guardian who is irrational or demonstrates strange behaviour
- has a parent or guardian who regularly seems to be affected by alcohol or drugs.

Emotional abuse

Emotional abuse refers to a situation in which a child or young person is repeatedly rejected or threatened. Emotional harm may affect a child's development. There are similarities between emotional harm and neglect.



Emotional abuse may include:

- name calling
- put-downs
- continual isolation or lack of warmth from a carer
- gaslighting
- manipulation
- guilt trips.

Be aware of emotional abuse if you notice that a child:

- shows extremes in behaviour; for example, is overly compliant or demanding, extremely passive or aggressive
- acts inappropriately above or below their age or developmental stage
- is delayed in emotional development
- exhibits signs of depression and anxiety
- may talk about or attempts suicide or running away
- shows signs of very low self-esteem
- finds it very difficult to learn
- is constantly blamed, belittled or berated by their parent or guardian
- has a parent or guardian who seems unconcerned about the child and refuses to consider offers of help for any problem
- is rejected by the parent or guardian.

Source: <https://aifs.gov.au/cfca/publications/what-child-abuse-and-neglect>

Psychological abuse

Psychological abuse is behaviour that aims to cause emotional or mental harm.

This type of abuse is known by different names and can be categorised as emotional abuse. It can also be part of domestic or family violence.

This type of abuse can make a child or young person feel scared, distressed or bad about themselves. It is a pattern of behaviour which means it is repeated over and over. This type of abuse can occur in any relationship including intimate or family relationships but also between carers or paid support workers, adult children or with people that share a house or see each other often.

According to the national sexual assault, domestic and family violence counselling service, psychological abuse can be someone regularly:

- embarrassing the person in front of others
- calling them derogative names
- treating the person badly about things they cannot change such as their sexuality, family, disability, religion or gender
- threatening to harm the person or others who are important to them
- ignoring the person or pretending they are not there
- always correcting the person with the aim of making the person feel confused or foolish.

Parental abuse

Forcing a child or young person to live in an environment where a primary caregiver experiences sustained violence is, in and of itself, emotional and psychological abuse.

Family violence involves the use of abuse towards a parent or guardian which in turn affects the child. Children and young people who are forced to live with violence can experience significant disruptions in their psychosocial wellbeing. Even if they are not being physically harmed, they often exhibit a similar pattern of symptoms to other abused or neglected children.

In all states and territories across Australia, exposure to family violence is dealt with under the category of emotional and psychological abuse. However, in some jurisdictions, such as NSW and Tasmania, there is specific mention of family violence as grounds for protection.

Source: <https://aifs.gov.au/cfca/publications/what-child-abuse-and-neglect>

Prenatal or fetal abuse

Prenatal abuse is when an unborn child is harmed or placed at risk of harm as a result of maternal drug or alcohol use. Drugs like alcohol can easily cross the placenta supplying the unborn child and affect the brain development of the growing fetus. The most serious risks are slowed fetal growth, low birth weight, premature birth, miscarriage, still birth and a range of physical, mental, behavioural and learning disabilities referred to as FASD – fetal alcohol spectrum disorder.

You can read more about the effects of alcohol on an unborn child here: aspirelr.link/alcohol-and-pregnancy

Example

Identifying signs of abuse

Gerry has been working as a respite support worker to Jonathan who is 13 and has cerebral palsy. Jonathan lives with his mother, Imogen. Imogen has just returned to the workplace after being Jonathan's carer and Gerry has been supporting Jonathan at home after school while Imogen is at work. Gerry works with Jonathan for a month and has a good idea of Jonathan's hobbies, routines, self-soothing activities and areas where he needs additional support. Imogen and Jonathan go away on holiday for three weeks and when they return to their regular school and work routine with support from Gerry, Gerry notices that Jonathan is behaving differently. He is withdrawn, his mood is low and he does not wish to do any of the regular activities he used to enjoy doing with Gerry.

Jonathan discloses to Gerry that Imogen's new boyfriend, who they met on holiday, has been touching him inappropriately. Gerry remembers the organisation's policy about disclosures made by children, so he just listens to Jonathan, without asking him too many questions or pushing for more information. Gerry thinks to himself that it does sound like Jonathan has been sexually abused. Gerry says to Jonathan that he is very brave for telling him what happened and that he is going to do everything he can to help him and keep him safe. He then follows his organisation's policy and procedure and reports what was disclosed to him, as he is legally obligated to report any suspected or actual abuse of children.

Consequences of abuse and neglect

The Australian Institute of Family Studies reviewed a number of relevant research studies and concluded that the consequences of child abuse and neglect can include:

- attachment and interpersonal relationship problems
- mental health problems
- youth suicide
- alcohol and/or drug dependency
- behavioural problems
- fatal abuse – (abuse that results in death).
- aggression, violence and criminal activity
- physical health problems
- teenage pregnancy
- homelessness

However, it is important to note that even though there is extensive research, it is difficult to prove causal links between abuse/neglect and adverse consequences.

Source: <https://aifs.gov.au/cfca/publications/effects-child-abuse-and-neglect-children-and-adolescents>



Factors that prevent or increase risk of abuse and neglect

Child abuse and neglect occurs because of many factors intersecting in the perpetrator's environment.

Protective and risk factors apply to different groups of children and young people and operate differently as a child grows. Protective and risk factors also vary according to the person's gender, disability, culture and sexuality.

Risk factors are the measurable circumstances, conditions or events that increase the probability that a family will have poor outcomes in the future. When risk factors are combined with limited protective factors, they increase the probability of children experiencing child abuse or neglect.

The following are characteristics and factors that increase the risk of children and young people experiencing abuse and neglect.

Individual child factors	<ul style="list-style-type: none"> • Low birth weight • Pregnancy or birth complications • Child temperament or behaviour • Child disability
Family/parental factors	<ul style="list-style-type: none"> • Parental substance abuse • Involvement in criminal behaviour • Family conflict or violence • Mental health problems • Child perceived as problem by parents • History of child abuse and neglect • Large family size • Exposure to stress • Parental temperament • Teenage/young parent/s • Single or unmarried parents • Low level of parental education • Use of corporal punishment • Unplanned pregnancy • Physical health problems • Low self-esteem • Social isolation



Social/ environmental factors	<ul style="list-style-type: none"> • Socioeconomic disadvantage • Parental unemployment • Housing stress • Lack of access to social support • Lack of prenatal care • Neighbourhood disadvantage • Neighbourhood violence
--	--

Source: <https://aifs.gov.au/cfca/publications/risk-and-protective-factors-child-abuse-and-neglect>

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

According to research collected by the Australian Institute of Family Studies, there is a common misconception that adults who were abused as children will be abusive toward their own children as adults, continuing an intergenerational transmission of abuse. However, most people who were abused as children do not become abusive or neglectful of children.

Protective factors are attributes or conditions that can occur at individual, family, community or wider societal level. Protective factors moderate risk or adversity and promote healthy development and child and family wellbeing (Child Welfare Information Gateway, 2014). They serve as safeguards that can help parents find resources or supports and encourage coping strategies that allow them to parent effectively, even under difficult circumstances.

The following are characteristics and protective factors that reduce the incidence of child abuse and neglect.

Individual child factors	<ul style="list-style-type: none"> • Social and emotional competence • Attachment to parent/s
Family/parental factors	<ul style="list-style-type: none"> • Strong parent/child relationship • Parental self-esteem • Family cohesion • Two-parent household • High level of parental education • Self-efficacy • Family functioning • Knowledge of parenting and child development • Parental resilience • Concrete support for parents



Social/ environmental factors	<ul style="list-style-type: none"> • Positive social connection and support • Employment • Neighbourhood social capital • Adequate housing • Socioeconomically advantaged neighbourhood • Access to health and social services
--	--

Source: <https://aifs.gov.au/cfca/publications/risk-and-protective-factors-child-abuse-and-neglect>

Dynamics of abuse

Abusers do not have a certain way or have particular characteristics.

Abuse does not occur in any specific place and is not committed by a specific type of person.

From the evidence available it is clear that, with the exception of child sexual abuse, children are most likely to be abused or neglected by parents and/or caregivers. This may be because children spend most of their time with their parents and are reliant on them for care, nurture and protection.

Here are some other pieces of evidence now being revealed about abuse and neglect:

- Sexual abuse is different from other types of abuse. Research suggests that a majority of child sexual abuse offences are perpetrated by adults who are not in a caregiver role and mostly by someone known and trusted by the child.
- Male victims are less likely to disclose their abuse and take longer to do so. Male and female victims may be impacted in different ways.
- Aspects of the abuse, including the relationship with the perpetrator and the betrayal of trust, the age and gender of the child, and the particular form of abuse are significant factors.

Example

Identifying signs of abuse

Estie and Dianne work in a weekend children's support program. They notice that Bailey, who is six, acts quite differently than his peers. He displays significant separation anxiety when his mother drops him off at the program. Bailey also cries and overreacts when something does not go his way, or a child does not share with him. Estie and Dianne discuss Bailey's behaviours and review his file. They notice that he has just left a family violence situation and his mother has an intellectual disability. They are still unsure whether what they are seeing in Bailey's behaviour constitutes signs of abuse or is a result of his living situation. They review the organisation's policies and procedures which outline and define the different types of abuse. They both decide it is unclear if he is displaying signs of abuse, and that they will bring up Bailey's case with their supervisor and discuss him at the next staff meeting to ensure that he gets the best care and early intervention if necessary.

Impact of trauma on children

You may be in contact with children and families who have fled from war, religious persecution or poverty, or have experienced the death of loved ones in disturbing circumstances.

Trauma

Distressing or disturbing experience/event, where a threat or the perception of threat overwhelms a person's capacity to cope.

Trauma can be caused by a single event or ongoing experience in a child's life, such as being homeless, without food, separated from parents with no other guardian, held in prison-like conditions, or being abused or neglected.

A person who experiences trauma has a stress response that can result in agitation or shutting down, fear, confusion, helplessness and feeling trapped. Some people can feel sad, angry, distressed or anxious. For many children and young people, the impact of trauma can be felt for a long time. The trauma can affect:

- brain development
- physical health
- cognitive function
- behaviour
- emotional and mental health
- relationships.



Read more about the effects of childhood trauma here: aspirelr.link/impact-childhood-trauma

Children who have experienced trauma need support from professionals who specialise in this area. Trauma-informed care involves 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.

Video: Trauma-informed care

Watch this video that discusses trauma-informed care and how it is used when teaching primary-school-aged children: aspirelr.link/yt-trauma-informed-practices



What does the presenter say about impacts on learning that can result from a child having experienced trauma?

The Blue Knot Foundation is one of Australia's leading organisations on trauma and trauma-informed practices and has information specifically about children.

Read more about trauma and trauma-informed practices here: aspirelr.link/blue-knot-resources



Practice Task 1

Question 1

Identify at least two examples of signs and/or symptoms for each of the following types of abuse:

- physical abuse
- emotional abuse
- psychological abuse
- sexual abuse
- neglect
- parental abuse
- prenatal abuse.

**Question 2**

Which of the following statements relate to the dynamics of abuse? Tick all that apply.

- Young people with a disability are most likely to be abused by their relatives.
- In the case of young children, abuse is often committed by adults.
- Children who speak English as another language are more likely to be neglected.
- Children are most likely to be abused or neglected by parents and/or caregivers.
- Adults not in a caregiver role are often the perpetrators of child sexual abuse.
- Females are more likely to be the perpetrators of emotional abuse.

Question 3

Briefly outline what risk and protective factors are and identify the personal characteristics that might influence how these are determined.

Question 4

List at least three characteristics in a child or young person that may be an increase in their risk of experiencing abuse or neglect.



Question 5

Provide three examples of the effects of childhood trauma and why trauma-informed care is used with a child or young person who has experienced trauma.

1B

Document signs and indicators according to legislative and organisational requirements

Community services workers must work within their organisation's policies, laws of their state/territory as well as complying with federal legislation.

Federal legislation, codes of practice and standards are developed to ensure clients, children and young people are provided with support of the highest possible quality.

While you are not expected to memorise the details of legislation, you need to be aware of what legislation is in place and how it affects your job role. Your organisation's policies and procedures are written to align with laws and legislation. This is why it is essential you understand and refer to these policies and procedures when carrying out your work.

Duty of care

Duty of care is the responsibility to ensure appropriate actions are taken to minimise the risk of harm to anyone.

Your **duty of care** includes your responsibility to identify indicators of possible abuse or neglect. This obligation applies to clients and their families, co-workers and any other person within your community service organisation.

Duty of care
A moral or legal obligation to ensure the safety and wellbeing of other persons.

Harm to a person may be:

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

To ensure you fulfil your duty of care to children and young people you should work cooperatively with others, following your organisation's policies and procedures, to ensure a healthy and safe workplace.

In your support work role you can:

- provide care and protection to all children and young people you work with
- ensure every child and their family are treated with respect and understanding



- stay informed about current child, adolescent and family issues, including legal and ethical concerns
- use positive communication and behaviour guidance strategies
- use support strategies which suit the child or young person’s developmental stage, language ability and skills level.

The rights of the child

Every child and young person has the right to be respected and have their needs met.

Human rights

Fundamental rights and freedoms that apply to all people, setting norms for standards of human behaviour.

Community services organisations should promote people’s rights to dignity, privacy, security and safety. To ensure all are treated equitably and fairly, **human rights** must be reflected in the organisation’s policies that underpin the support provided to clients.

Everyone with responsibility for the care and support of children must be aware of, uphold and maintain these rights. As a community worker it is essential you recognise when rights are, or have been, ignored or abused.

The United Nations Convention on the Rights of the Child recognises that the international community has a responsibility to provide the right to human dignity to children. The Convention is made up of 54 articles which outline minimum standards governments must meet to provide adequate services and support for children and their families. The articles cover the areas of health, welfare and education, and include the following examples that have a direct impact on services that provide care to children:

Article 13: 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.

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.

Child-centred work practices

Making the needs of the child the priority.

The Convention on the Rights of the Child can be found here: aspirelr.link/child-convention-rights

Child-centred or child-focused work practices underpins child protection work.



Video: Child-centred practice

Watch this video that discusses child-centred practice: aspirelr.link/yt-child-focused-practice

What recommendations are made about making a space/built environment safe and welcoming for children?



The following table provides examples of actions that reflect a child-focused approach.

Child-focused practice	Examples of actions
Involve the young person in actions and decisions that affect them.	<ul style="list-style-type: none"> • Ask the child or young person for their opinion. Respect and value the responses they provide.
Develop routines and timetables 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. • Allow children to choose whether to participate.
Ensure programs are centred on the interests of the young person.	<ul style="list-style-type: none"> • Develop experiences based on children's interests such as computer games, art activities or specific sports. • Offer activities that suit children's level of development, attention span and skills. • Balance interactions by offering group activities and one-on-one time.
Communicate with families, carers or other family members who know the young person to determine their needs.	<ul style="list-style-type: none"> • Ask questions to determine what the young person needs. • Ask the young person or child what has been happening in their life or what they need so you can provide support. For example, they might be feeling rejected because there is a new baby in the family or worried by a move to a new school.
Address family structure and cultural differences.	<ul style="list-style-type: none"> • Include words from languages used by the family. • Include items from various cultures in play and in books.

Child protection legislation

Legislation in each state or territory determines the ways 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 to be found in child protection legislation.

The main legislation related to child and youth protection that applies in each state or territory is as follows:

Australian Capital Territory	<i>Children and Young People Act 2008</i> (ACT)
New South Wales	<i>Children and Young Persons (Care and Protection) Act 1998</i> (NSW)
Northern Territory	<i>Care and Protection of Children Act 2007</i> (NT)
Queensland	<i>Child Protection Act 1999</i> (Qld)
South Australia	<i>Children and Young People (Safety) Act 2017</i> (SA)
Tasmania	<i>Children, Young Persons and their Families Amendment Act 2013</i> (Tas.)
Victoria	<i>Children, Youth and Families Act 2005</i> (Vic.)
Western Australia	<i>Children and Community Services Act 2004</i> (WA)

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

The following list summarises the areas covered by child protection legislation:

- 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 processes that should occur
- Monitoring and reviewing expectations
- Privacy
- Childcare agreements, including who may care for a child at risk of harm
- When a child is deemed to be in need of protection or therapeutic treatment
- Reporting and standards of proof
- Protection orders, permanent care orders and criminal offences
- Offences, sentencing and appeals.



Standards and codes of practice underpinning work practices

The table below outlines examples of the laws, standards and codes of practice that may be part of service delivery. Mandatory reporting legislation will be covered in the next topic.

Australian Community Workers Association (ACWA) Code of Practice	<p>A set of practice guidelines defines the ethical standards of practice for members of the association. It also helps you to understand your community services role.</p> <ul style="list-style-type: none"> • aspirelr.link/acwa-practice-guidelines
Workplace health and safety (WHS) legislation and codes of practice	<p>The model workplace health and safety laws and codes of practice underpin the work provided by community services workers.</p> <p>Australia has both federal and state laws covering workplace health and safety. Safe Work Australia provides a range of codes of practice that are practical guides to achieve the standards of health and safety required under the WHS Act and Regulations.</p> <ul style="list-style-type: none"> • aspirelr.link/manage-whs-risks-code-of-practice • aspirelr.link/law-and-regulation-legislation
Mental health standards	<p>If you work in mental health services, you must work by the National Standards for Mental Health Services.</p> <p>The standards apply across a broad range of mental health services. This includes bed-based and community mental health services, those in the clinical and non-government sectors, in the private sector and also those in primary care and general practice.</p> <ul style="list-style-type: none"> • aspirelr.link/mental-health-standards
NDIS Quality Standards	<p>If you work in an organisation which receives funding through the National Disability Insurance Scheme (NDIS), or is a registered NDIS provider, you must follow the NDIS Practice Standards and the NDIS Code of Conduct.</p> <ul style="list-style-type: none"> • aspirelr.link/ndis-practice-standards • aspirelr.link/ndis-practice-standards-quality-indicators • aspirelr.link/ndis-code-conduct
Community Services Quality Governance Framework	<p>States and territories across Australia also provide a framework document designed for use across all community services that are delivered and funded by the relevant state or territory government. For example, the Department of Health (DH) and the Department of Families, Fairness and Housing (DFFH) Victoria provides a community services framework.</p> <ul style="list-style-type: none"> • aspirelr.link/dffh-vic

Example

Applying legislation to work practices

Stacey is a support worker at an organisation which supports children with disabilities at an after-school program. It is Stacey's role to take care of the children, run activities and clean up when the children have finished the program for the day.

In the design phase of the programs, the support workers collaborated to develop specific fun activities for children with a wide range of disabilities and additional needs. They needed to consider the children's diverse developmental stages and cognitive abilities when designing games, activities and toys.

The support workers considered the hazards and risks the children might encounter and conducted a risk assessment. They put control methods in place and documented the risk assessment according to the organisation's policies and procedures regarding workplace health and safety. They designed activities that all the children could engage with and which complemented their social, cognitive and physical development. They also came up with behaviour management strategies to support the children to engage in safe and positive behaviours.

Obligations to protect children and young people

Service agreements are used when a non-government organisation receives funding from a government department.

A service agreement is a contract between a community service organisation and the government department that funds their programs. It contains details of the terms and conditions that both parties must follow in the delivery of services. It will also refer to relevant guidelines, laws and departmental policies that the service provider must follow when delivering services to clients.

Codes and standards also apply to licencing arrangements where one organisation is subcontracting services on behalf of another organisation, such as a specialist service providing psychological or other professional services.

Many professionals working in community services must also be registered with a professional body. This may be a condition of their employment or a requirement of being a registered practitioner in that field. For example, an employer may want staff to have access to current information on various aspects of their job role. Additionally, a professional association or peak body requires its members to abide by its own ethical standards and codes of practice. For example, many allied health professionals – such as physiotherapists, occupational therapists, psychologists, speech pathologists – must be a member of a professional association to practice. An example of the ACWA Code of Ethics is discussed in topic 3.

Organisational policies and procedures

Policies and procedures are developed in relation to relevant laws, codes of practice and standards.

As a part of service delivery, workers follow procedures that outline how their employer wants tasks undertaken and jobs performed. Organisations that have contact with children and young people will have procedures on how to respond when there is a disclosure of abuse. If your organisation does not have protocols in place, then you must contact your supervisor or manager immediately and they must contact the relevant child protection department in your state or territory.

Confidentiality must always be considered. You should consider privacy laws and principles, other relevant laws; for example, the *Family Law Act 1975* (Cth) and confidentiality policies.

All community services workers have the obligation to protect clients' privacy. When interacting with children and young people, both in general and when dealing with abuse or suspected abuse, you have a commitment to confidentiality. At some point, information gathered from a child or young person might become part of legal proceedings. For example, a policy relating to confidentiality and privacy will outline how information can be gathered, how it should be documented and stored and secured to limit access by unauthorised people, and who the information can be shared with. It will also detail the systems for managing and storing personal and private information and the procedures for documenting and recording information according to the *Privacy Act 1988* (Cth).

To read more about the 13 privacy principles, visit: aspirelr.link/oaic-privacy-principles

For child protection purposes, workers need to be aware of the policies and limits for:

- reporting serious injuries when a criminal offence may have been committed
- information sharing for the purpose of promoting client safety



- the potential use of service or professional records as evidence in criminal or family law proceedings
- secure storage of information about clients, including electronic or cloud storage.

Here are some examples of areas where workers would follow organisational policies and procedures related to abuse and neglect:

- Gathering information when it is disclosed or when there are indications of abuse or neglect
- Emergency procedures including when there is violence
- When and how to report abuse and neglect
- How to document abuse and neglect.

Position descriptions

Position/job description documents, developed to align with appropriate legislation, standards and organisational policies and procedures, are signed by an employee and their employer at the beginning of employment. These outline the organisation’s vision, mission and objectives and include the obligations, responsibilities, boundaries and limitations of a job role.

A position description will often include the following sections that help to define your role.

Purpose or objective	The reason for your role
Level of responsibility	What you can and cannot do
Key areas of responsibility	Things you are responsible for
Tasks that must be performed	Things you must do
Accountability and reporting arrangements	Who your supervisor is and how you communicate with them
Specialist skills or knowledge required	Qualifications, experience or other requirements that make you particularly suited to this role. This may also require membership of a professional or peak body.

If you are unsure, or wish to confirm that any decisions or actions you make are appropriate to your level of responsibility, you can refer to your position description or speak to your supervisor. This is especially important in regard to the protection of children and young people.



Example

Working with children and policies and procedures

Prisha and Calvin are new workers at a children's club running programs in a disadvantaged area. They have experience working with children of all ages from different regions.

Prisha and Calvin have adjusted their supporting practices to meet the social, emotional and cognitive needs of the group. Various disclosures they heard from children include issues which are new to them. Prisha heard one boy talk about not having enough food to eat at school. Calvin has heard another boy talk about being left alone for long periods of time while his parents are working.

Calvin and Prisha share their concerns about the children, and they decide to check the organisation's policies and procedures and their position descriptions regarding these types of disclosures. The policies and procedures state that if any disclosures are made, they should speak to their supervisor. Prisha and Calvin both make an appointment to discuss the disclosures. The supervisor notes down the details and makes plans to speak to the parents about the disclosures.

Practice Task 2

Question 1

Briefly outline at least five child-focused strategies you can use when communicating with a child or young person about abuse and neglect.



Question 2

Match each term about work practices to its description.

United Nations Convention on the Rights of the Child
Human rights
Duty of care
Child-focused approach

The needs of the child are considered the priority.
Moral or legal obligation to ensure the safety and wellbeing of other persons.
Minimum standards for the provision of services and support for children and their families in the areas of health, welfare and education.
The right to life, freedom of speech, choice, and freedom from discrimination.

Question 3

Identify the name of the relevant child protection legislation in your state or territory.

Question 4

Which of the following are legal and ethical requirements for work practices that protect children and young people? Tick all that apply.

- A policy or procedure developed by an employer organisation
- Private health insurance for employees
- Code of practice developed by a peak body
- Registration with a professional organisation
- Service agreements for government funding of services



Question 5

Identify at least two examples of information in a job description that would list obligations and responsibilities for the protection of children.

Question 6

Provide three examples of the types of information provided by a workplace policy or procedure related to collecting and documenting signs and indicators of abuse and neglect.

1C

Use communication and information gathering techniques

If a child discloses information about abuse or neglect, it means that they want to tell you about it.

Research indicates that young children are more likely to disclose to a parent, particularly their mother, and that older children and young people are more likely to disclose to their friends.

If this happens you should provide immediate support.

The Australian Government's Institute of Family Studies recommends that when a child discloses information about abuse, adults should listen, reassure and respect. Shame and embarrassment, feeling responsible for the abuse, fear of not being believed or of negative consequences, lack of confidentiality and mistrust of adults are all potential reasons for stopping a person from disclosing abuse or neglect.

With the reasons for not disclosure in mind, it is important that the child or young person:

- is actively listened to
- is supported to express their views
- has their views taken into account
- is involved in the decision-making process.

The following strategies help ensure that disclosed information is handled in a way that supports the child while keeping in mind that the information may form part of an investigation. Remember that while you must be a supportive listener, it is not your role to counsel the child or investigate their claims. Child protection workers undertake investigations and professional counsellors provide counselling.



<p>Ask open, non-leading questions</p>	<ul style="list-style-type: none"> • An open question is one where the answer is a detailed response; yes or no is not an option. 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?", "What did the person do?", "Where did this happen?". • A non-leading question is a question that does not give hints. For example, if you asked, "Did mum 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. • If a child becomes distressed at the questions you are asking, it is best to stop as it may be re-traumatising the child. This means that it is causing them psychological and emotional harm. • You must always remember you are not investigating the allegation.
<p>Use active listening techniques</p>	<ul style="list-style-type: none"> • Use words and actions that show that you are listening such as using body language like nodding your head and leaning in to listen. • 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 meant.
<p>Develop a rapport with the child</p>	<ul style="list-style-type: none"> • Let the child know you can be trusted. • 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. • Let the child take their time. • Avoid 'quizzing' the child about details of the abuse. • Explain what you plan to do next, who you plan to tell, and why. • Do not make promises. Avoid saying, "Everything will be okay", "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 need to tell you more. • Never make comments or judgments about the abuser.



Record what the child says	<ul style="list-style-type: none">• Follow your organisation’s guidelines and procedures for documenting information.• Be aware of child protection procedures. For example, your notes might be used as evidence in a legal case (if appropriate).• Use as many of the child’s own words in your notes as possible.• Describe any signs you notice.• Be objective and only record what you are told and what you have observed.• Note the time, place and date.• Avoid using subjective language and do not add your own opinions or thoughts.
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You can read more about ways to respond to disclosures of child abuse at:

- aspirelr.link/khl-responding-disclosure-child-abuse
- aspirelr.link/bh-responding-disclosure-child-abuse
- aspirelr.link/vic-disclosure-guide
- aspirelr.link/aifs-responding-disclosure-child-abuse
- aspirelr.link/aifs-disclosure-child-abuse

Encourage participation in decision-making

When age appropriate, a child should be involved in decisions that affect them.

The underpinning principles of the *Child Protection Act 1999*, section 5, emphasise participation by children and young people, respect for their rights, consideration of their views and, where possible, involvement in decision-making processes on issues that affect their lives.

Therefore, children and young people should be encouraged to be part of decision-making but their age, ability to understand and psychological state must always be considered. In some circumstances it may not be appropriate for children and young people to actively participate in the process, such as if it concerns a disability, or alcohol or drug abuse.

For example, a younger child may not have the cognitive capacity to understand what is happening or what they are being asked. When possible, teenagers and young adults should be given the opportunity to make choices and decisions as part of their **self-determination**. This is important because when choice is taken away it can undermine self-confidence and self-esteem.

Self-determination
A person’s right to have control over their own life, able to make independent choices about decisions that affect them.

Example

Child-focused approach to decision-making

The local council wants to start a local drop-in service for teenagers and young people. This is because several schools are reporting mental health struggles after a rise in unemployment in the area due to workforce cuts at the local manufacturing plant.

Community service workers hold a few information, participation and engagement sessions for all age groups covering the local youth community. To get a sense of what the local teen community requires there are online surveys they can complete on their smartphones, as well as face-to-face sessions.

The top three issues are identified as being: stress at home, mental health issues such as depression and anxiety, and needing a safe place to go to when things get difficult at home.

Practice Task 3

Question 1

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

- “You said 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.”



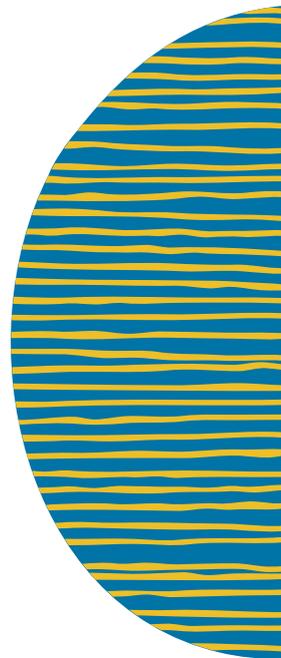
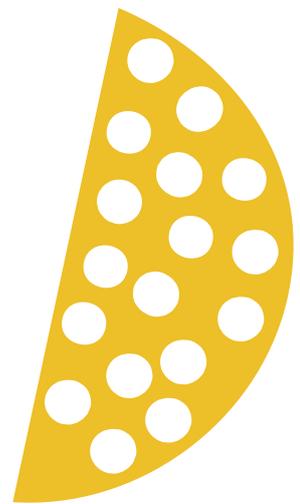
Question 2

Provide at least two examples of engagement techniques to use when communicating with children and young people when they disclose information about abuse and neglect.



Summary

- 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 identifiable by their heritage, temperament or cultural identity.
- There are societal, parental, family and other factors that increase a child's risk of abuse.
- A child-focused practice places the rights of the child before the needs of other people.
- There are laws, standards, guidelines and conventions relating to children's rights that lead daily practice.
- You must be aware of children's rights legislation to adequately support and protect them.
- You must comply with policies and understand your role in following processes for reporting child abuse and neglect.
- Community services workers all have an obligation to protect clients' privacy and maintain confidentiality.
- Listening to and reassuring the child when they disclose information is essential.





Learning Checkpoint 1

Identify children and young people at risk

Part A

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 at a program upset. One of their parents has left for a work trip. You tell them they should put on a brave face and keep busy. There is no need to be upset.	Yes / No
c. A child has experienced abuse in the past and you think they may need trauma-informed care. You mention this to your supervisor, but she says it is too much trouble and that the parent should organise it if they want it.	Yes / No
d. You are concerned a child is being abused. You have noticed indicators of harm and risk factors, and you notice that the child is shying away from their parent. You decide to continue monitoring the situation before mentioning it to your supervisor.	Yes / No
e. Everyone is thirsty after a sporting activity but the bus is waiting. You stop packing up and make sure everyone has a drink before boarding the bus.	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 that these rights ensure that children have all their needs met and are respected.	Yes / No



2. Match the type of harm with the indicator of abuse.

Parental abuse	The child does not receive adequate medical or dental care.
Prenatal abuse	The child has unexplained bruises, welts, bites, broken bones or burns.
Sexual abuse	The child is blamed, belittled or berated by their parent or carer.
Psychological abuse	The child receives sexual attention or an adult uses sexual mannerisms when approaching them.
Emotional abuse	The child feels scared, distressed or bad about themselves.
Neglect	The child lives with family violence which in turn affects the child.
Physical abuse	An unborn child is harmed or placed at risk of harm as a result of maternal drug or alcohol use.

3. In which of the following situations would you need to refer to a workplace 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. You notice four small round bruises on a young person's upper arm. When the young person is picked up by their parent you notice they push the young person into the car, holding them firmly on the arm in the same location 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 open. The parent brings the child in to get first aid and tells you that the child fell over outside.	Yes / No
d. A child discloses to you that his parent has touched him inappropriately and provides many details. The parent is well-known in the community. He seems stable and financially secure and recently made a large donation to the service's fundraising campaign.	Yes / No



4. Which of the following statements are the most appropriate child-focused practices taken in each situation? Tick all that apply.
- 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 kept an eye on them to make sure no other burns occurred.
 - I treated the burn with first aid and wrote down what I had 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 the procedure for reporting the situation.
 - I asked what to do about this on an internet forum I’m part of, where workers can ask questions.
 - d. 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 for themselves. I will wait until then.



5. Identify at least one example of a document outlining obligations for reporting abuse and neglect in each of the following areas.

- Child protection legislation
- Codes of practice
- Service agreements
- Employee obligations in a job description

6. Provide at least one example of the characteristics of children, parental and social/environmental factors that can be protective against abuse and neglect of children and young people.



7. Provide at least one example of the characteristics of children, parental and social/environmental factors that can be seen as increasing the risk of a child or young person experiencing abuse and neglect.

Part B

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

Case study

A young person stays back after the other children have left. You see them lingering and looking like they want to speak to you.

During the conversation they seem edgy and nervous. When you ask if there is anything wrong, they disclose that they have been told by their parents to sleep outside in the garden because they can't be 'controlled' and their behaviour is upsetting the other children in the house. The young person is visibly shaking and upset.

1. Which of the following are open and non-leading questions you should use with the young person? Select all that apply.
 - What happened?
 - Where did this happen?
 - Who was there?
 - Did they hurt you?
 - Did your dad or mum do this to you?



- 2.** List at least three different places or ways you can find information and advice if you are unsure of your ethical and legal requirements to protect the child from further abuse and neglect.

- 3.** Provide two examples of ways to develop rapport and to show the person you are actively listening when asking them about their situation.



- 4.** You know that the family have experienced poverty and rely on donations for food and assistance with housing. Briefly describe why this could have been a trauma for this young person.

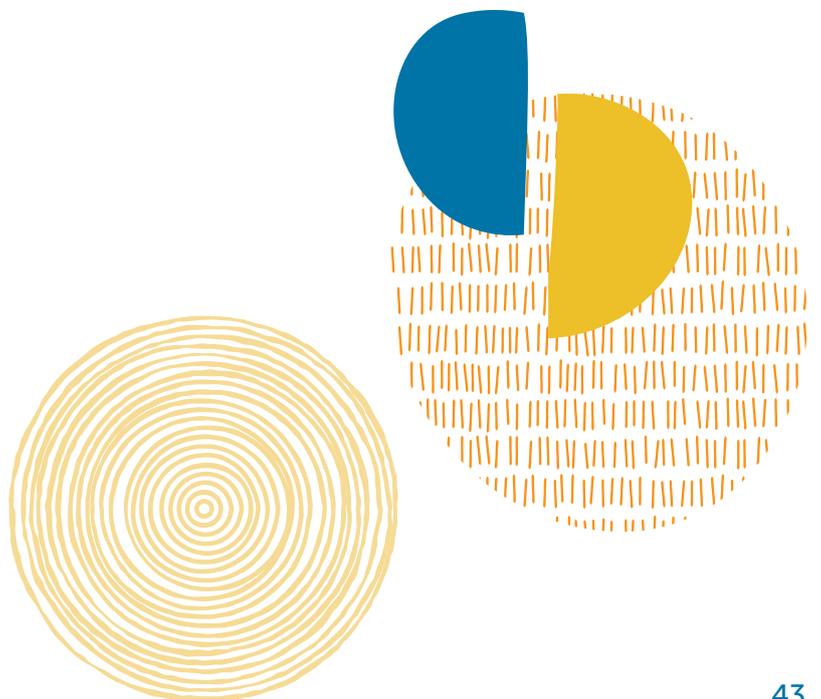
- 5.** Provide at least three examples of how organisational policies and procedures will provide guidance in protecting the young person after she has disclosed abuse and neglect.



Topic 2: Report indications of possible risk of harm

2A Report risk of harm indicators

2B Ensure documentation is accurate and factual



2A

Report risk of harm indicators

Every organisation will have a set of policies and procedures relating to reporting requirements when children and young people are at risk of harm. These will be based on the child protection legislation of the relevant state or territory.

You have a legal obligation to report if you believe a child may be in danger of being harmed, is being abused or you have any concerns about a child. Everyone has a duty of care towards children. Never assume that someone else will make a report and don't wait until you have more evidence. You will be advised as to whether you need more evidence when you make your initial report.

Depending on your job role and your organisation's procedures for mandatory reporting, your first report may be to a supervisor or manager and/or to child protection authorities.

Mandatory reporting

It is a legislative requirement that selected classes of people report suspected child abuse and neglect to government authorities. This is known as mandatory reporting.

The legislation in each state and territory differs in:

- who has to report (mandatory reporter)
- the types of abuse and neglect that must be reported
- the reasons for reporting, such as 'suspect', 'have a concern' or 'reasonable grounds'.

The age for mandatory reporting of young people varies depending on the state or territory but is generally up to 18 years old. The exceptions are New South Wales, where the young person must be under 16 years old; and Victoria, where they must be under 17 years old.

Different types of abuse must be reported in accordance with the legislation of each state and territory. In general, the legislation specifies the reporting of all five recognised types of abuse and neglect. These are: physical abuse, sexual abuse, emotional abuse, neglect, and exposure to family violence. However, in some states and territories it is mandatory to report only some of the abuse types.

Some state or territories also require workers and professionals to report instances of exposure to sexual, domestic and family violence. This acknowledges the seriousness of this type of harm to a developing child.



State or territory	Types of abuse and neglect that must be reported
ACT	<ul style="list-style-type: none"> • Physical abuse • Sexual abuse or other exploitation of the child
NSW	<ul style="list-style-type: none"> • Physical abuse • Sexual abuse or other exploitation of the child • Emotional/psychological abuse • Neglect • Exposure to domestic violence
NT	<ul style="list-style-type: none"> • Physical abuse • Sexual abuse or other exploitation of the child • Emotional/psychological abuse • Neglect • Exposure to physical violence
Qld	<ul style="list-style-type: none"> • Physical abuse • Sexual abuse
SA	<ul style="list-style-type: none"> • Physical abuse • Sexual abuse or other exploitation of the child • Mental or emotional abuse • Neglect
Tas.	<ul style="list-style-type: none"> • Physical abuse • Sexual abuse (any) • Emotional/psychological abuse • Neglect • Exposure to family violence
Vic.	<ul style="list-style-type: none"> • Physical injury • Sexual abuse
WA	<ul style="list-style-type: none"> • Sexual abuse

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

Mandated reporters

Most states and territories have laws that specify certain occupations that must report suspected abuse. For example, teachers, early childhood education and care practitioners, doctors, nurses and police are mandated to report because they interact with children in the course of their work.

Again, the requirements are different across the country. Queensland only specifies a limited number of occupations while Victoria and NSW have more extensive lists. In the Northern Territory it is mandatory that any adult who believes a child has been/ is likely to suffer harm or exploitation, or be a victim of a sexual offence, makes a report.

The Child Family Community Australia (CFCA) resources state that service providers do not need to be certain beyond doubt that there has been abuse or neglect of a child or young person before contacting a child protection authority. If you suspect a child is at risk of harm, you should call the authority to discuss your concerns. The authority will decide whether an investigation is required.

More details on mandated reporters and their responsibilities are provided here: aspirelr.link/child-abuse-reporting-procedures

Child protection authorities

All state and territory governments have a child protection authority that provides support services and information. These are shown in the table below.

ACT	ACT Community Services, Child and Youth Protection Services: <ul style="list-style-type: none"> aspirelr.link/act-child-protection-services
NT	Department of Territory Families, Housing and Communities: <ul style="list-style-type: none"> aspirelr.link/housing-nt
NSW	Department of Communities and Justice: <ul style="list-style-type: none"> aspirelr.link/nsw-reporting-child-at-risk
Qld	Department of Children, Youth Justice and Multicultural Affairs: <ul style="list-style-type: none"> aspirelr.link/qld-cyjma
SA	Department for Child Protection: <ul style="list-style-type: none"> aspirelr.link/report-child-abuse-sa
Tas.	Department of Communities Tasmania: <ul style="list-style-type: none"> aspirelr.link/tas-communities
Vic.	Department of Families, Fairness and Housing: <ul style="list-style-type: none"> aspirelr.link/vic-families-and-children



WA	Department of Communities: <ul style="list-style-type: none">• aspirelr.link/wa-child-protection
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A list of reporting authorities in each state and territory can also be found here: aspirelr.link/aifs-cfca-resource-sheet

Example

Notifying a child protection agency

Gavin is a specialist family support case worker. He supports families, teens and young people in their homes and at his organisation. Gavin is seeing two regular clients: Tanisha, who is 14, and her father, Theo. Theo was given full custody of Tanisha because she was neglected by her mother.

Tanisha was placed into kinship care with her grandmother while the custody issues were being sorted out. Tanisha has different behaviours that indicate the trauma she has seen and experienced.

Today Gavin is concerned about bruising on her face. Gavin asks Theo and Tanisha about the bruising and they look at each other and attempt to laugh it off. They say she fell down the stairs during a party at their house the previous weekend.

Gavin speaks to Tanisha on her own and asks how she got the bruising. Tanisha tells him that two drunk and high friends of her father bashed their way into the party.

Gavin tells Tanisha he will be notifying child protection about what happened.



Practice Task 4

Question 1

Briefly outline three features of the requirements for mandatory reporting.

Question 2

Provide at least three examples of abuse and neglect protocols and processes that must be followed as a part of your job role.



Question 3

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

a. 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
b. I will call the child protection agency and take some notes if they ask me to.	Yes / No
c. 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
d. 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
e. 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

Question 4

Identify the name of the relevant child protection authority in your state or territory.

2 B

Ensure documentation is accurate and factual

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

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

To make a useful report you must gather accurate information. This means writing what you observe in a clear and objective manner. Reports must be non-judgmental and only record what you see or hear (the facts). Do not add your own thoughts and ideas such as personal opinions, make derogatory comments or describe your feelings.

The Victorian government recommends preparing the following information before reporting, to be able to answer the questions of the child protection worker from the appropriate authority.

General details	The child or young person's general details; including who they live with and where they live, their date of birth, their school (if they attend)
Indicators of harm	The things you have noticed that make you think the child is being harmed Think of each of the types of harm and any indicators of risk
Reasons for reporting	The reason why you are reporting at this time
Safety assessment	An assessment of the level of danger to the child and the whereabouts of the alleged abuser
Description	Description of the injury or behaviour you have observed
Child's whereabouts	The child or young person's whereabouts at this time
Other services	If you know of any other services involved with the family of the child
Family information	Other information you have about the child or young person's family
Cultural characteristics	Any specific information on the child or young person's cultural requirements, disability or other factors that may support the child



How to make a report

Child protection authorities require reports to be made by phone.

Serious concerns should be reported by phone rather than online or via email.

Serious concerns include when you suspect a child or young person is in imminent or immediate danger of serious harm, serious injury or chronic neglect.

In all states and territories, the legislation protects the mandatory reporter's identity from disclosure to other parties. This also includes following your organisational policies and procedures for confidentiality and obligation to protect clients' privacy. In addition, the legislation provides that as long as the report is made in good faith, the reporter cannot be liable in any civil, criminal or administrative proceedings.

After a report has been made, you still have a duty of care to the family and the child or young person at risk. Depending on your job role and level of responsibility, you may need to continue to offer support such as:

- acting as support person for the child or young person
- continuing to monitor the child or young person's behaviour
- providing further reports

Always check with a supervisor about your concerns, and what actions you can take to support the family.

Listen to this podcast from the CFCA information exchange about child-aware approaches to keep children safe and well: aspirelr.link/aifs-child-aware-approaches-podcast

It is aimed at service managers and staff who work with vulnerable children and families, including workers in adult-focused service sectors.

Example

Making observational notes

Vera thinks that two-year-old Stan is being abused and is 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 at the weekends. • He and his grandmother live in an apartment in Sydney.
Description	<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 she slapped him across the face.
Family information	<ul style="list-style-type: none"> • Stan's mother has a drug addiction and Stan was addicted at birth. • Stan is living in poverty.

Work with relevant authorities

After a report has been made, the case worker who deals with reports will assess the situation and manage it with the child's best interests in mind.

You may or may not have further involvement. In some states and territories, you may become involved with an inter-agency body which works 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 inter-agency body to support the child's needs.

You may be asked to:

- provide your notes
- add to the information you have provided with more details
- recall past events
- observe further



- discuss or add to the notes you have already provided
- fill in and submit forms and reports
- stay in touch with child protection case worker/s in the short, medium or long term while the case is being investigated and where intervention occurs.

Intervention from child protection authorities

Mandatory reporting laws define the types of situations that must be reported to statutory child protection services. There are legislative grounds for government intervention that define the circumstances and, importantly, the threshold at which the statutory child protection service is legally able to intervene to protect a child. This means that not all reports of child abuse and neglect lead to immediate action from child protection services.

According to the Australian Institute of Family Studies:

A single report may not meet the threshold for intervention; however, this report grouped with other information on file (or that is yet to be collected) may meet the threshold and result in action being taken. Reports are not looked at in isolation, instead they work to form a body of information that determine if and how child protection services are legally able to intervene.

Source: <https://aifs.gov.au/cfca/publications/mandatory-reporting-child-abuse-and-neglect>

Example

Notifying a child protection agency

Elle works for an organisation which provides a range of support for families. She has been working with a family, who have had significant issues with poverty and unemployment, for a long time. Elle is concerned that their child is at risk of neglect because the child does not have any food. She develops some notes and calls her local child protection agency. The agency worker asks Elle many questions about what has happened, what she has noticed, and about the evidence of neglect she has. After listening to Elle's concerns, the agency worker states that she believes the child is currently safe, but that the family may need additional support and education about healthy eating for children. They may also require assistance with food vouchers and material aid support. Elle confirms that her organisation can continue to provide this material aid.



Example

Working with directions from a child protection agency

After many notifications from teachers, community services supervisors, families and friends regarding the two Smith children, Child Protection begin an investigation of numerous types of abuse. Child Protection determine that the children; Shelby, aged 6, and her brother Nathan, aged 7, are not safe around their father, Dan. Child Protection get an order of protection for the children and notify their school, and their after-school community support program, that Dan is not allowed to collect Shelby or Nathan. The supervisor at the community support program ensures all workers understand this new order. However, not long after the order was made, Dan shows up wanting to take the children. Workers Mark and James tell Dan that he is not allowed to take them due to the protection order.

Practice Task 5

Question 1

Consider the following comments about Steph, a four-year-old child. Which comments are appropriate to include in notes being used for a report on abuse?

- 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 use the toilet overnight, 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.



Question 2

Match the details about a child at risk of harm to the correct heading for the report.

Description	Belinda is five years old and lives with her parents and two sisters, aged 12 and 14 years.
Child's whereabouts	Belinda has become very quiet and is not joining in with her friends.
General details	Belinda has several bruises on her left arm and the front of her neck.
Indicators of harm	Belinda goes to her grandmother's house after the program.



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 community workers 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 indications of possible risk of harm

Part A

1. Identify 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.

Part B

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

Case study

Ronald, a respite support worker, has noticed bruising and burns on Caleb, who is 15. 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 while we were playing football. When Caleb removed his 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.



1. Identify which two sentences in Ronald's notes are judgmental.

2. Identify the statement that provides details about the type of abuse Ronald has noticed.

3. If Ronald was mandated to report, how would information about Caleb's suspected abuse be shared?



Part C

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

Case study

Extract from a child protection policy statement:

Workers should keep note of the concerns that have led them to form a belief that a child is being abused.

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 always remembered 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 worker with concerns should make a report to the relevant child protection agency within 24 hours of their concerns arising. If the agency asks for additional details, or asks the worker to comply with a particular action, the worker will cooperate with support from their team leader or manager.

After making a report the worker 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.

1. Number each step from 1 to 5 in the order you would follow the requirements outlined in the child protection policy.

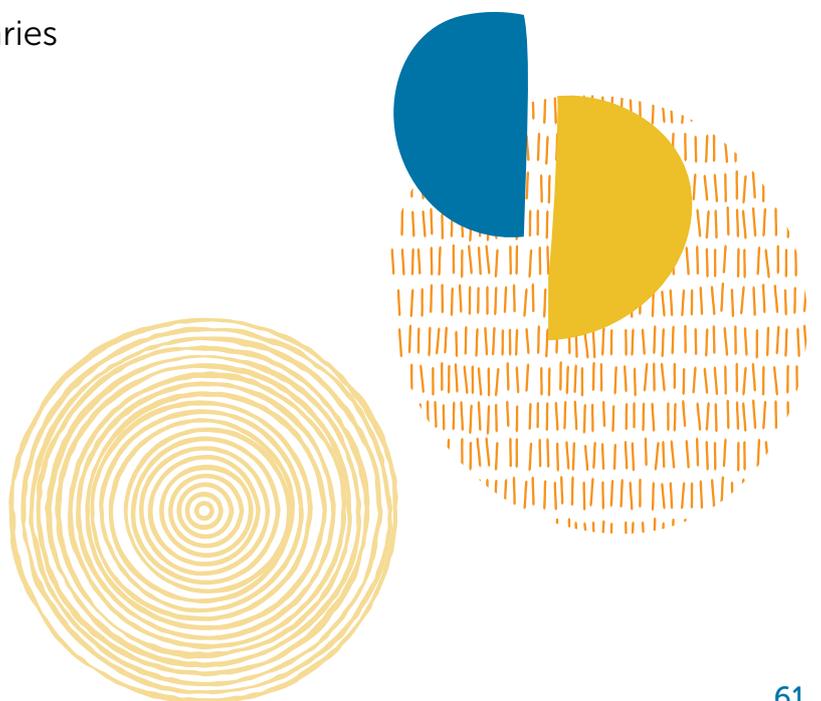
	Report my concerns to the child protection agency within 24 hours.
	Continue to take notes if I notice additional concerns.
	Cooperate with the child protection agency if they need more information or action to be taken.
	Keep notes of concerns about a child's safety or signs I notice.
	Discuss my concerns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



Topic 3: Apply ethical practices in work with children and young people

3A Employ ethical practices

3B Observe professional boundaries



3A

Employ ethical practices

By providing a safe environment for children and young people, you are reducing the possibility that they will be harmed.

In your daily work there may be many examples of safety concerns relating to the protection of children and young people. Sometimes you will have to make an ethical decision that protects the safety of the child. For example:

- the actions to take when you are due to leave and a young person has not been collected by a parent or guardian
- there is an accident or emergency involving a parent or guardian
- a person responsible for a child is affected by drugs or alcohol
- a person who has a court order preventing them from contacting the child or young person wants to speak to them
- a staff member or colleague is providing support to a child or young person outside work hours.

Code of ethics

A code of ethics does not provide the answers to ethical dilemmas but does provide guidelines for appropriate behaviour. This is especially helpful when there are no obvious right or wrong answers.

A code of ethics is a written set of guidelines for those in professional roles to use to help them make decisions that are in the best interests of those they work for.

Community workers can use these ethical guidelines to help them:

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

The Australian Community Workers Association (ACWA) is the professional peak body for community workers across Australia. It produces a code of ethics document that outlines several human rights and inclusion principles that underpin the code; responsibilities to clients, colleagues and employers; as well as a list of ways to protect the reputation of the profession.



You can access the ACWA Code of Ethics document here: aspirelr.link/acwa-ethics-standards

Ethical decisions

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

Usually there are two or more possible solutions to an ethical dilemma and it is not obvious which option is better. When you are faced with an ethical dilemma you will usually be dealing with an issue that requires you to make a decision where:

- each potential action has a negative or difficult consequence
- policies or procedures do not provide a clear solution to the problem
- people, relationships and/or people’s rights are affected.

Ethical dilemmas can involve clients and families but also may apply to work colleagues or other professionals you interact with in your work. It can be difficult to report a potential ethical issue or concerns to a manager when there is a chance a work relationship with a co-worker will be damaged. However, a child-focused approach means your priority must always be your duty of care to protect a young person.

The following ethical dilemmas are examples of the kind of difficult choices you might have to make.

Scenario	Ethical dilemma 1	Ethical dilemma 2
A family member has asked you to keep a child awake all day, so he sleeps through the night. You know the child needs a daytime sleep.	You feel that it is in the best interests of the child to have a daytime sleep.	Letting the child sleep is going against the parent’s wishes and they might complain.
You hear your supervisor making hurtful remarks to a young person he is meant to be supporting.	You know that his comments are upsetting the child and other members of staff and you should say something.	You don’t have the confidence to confront your supervisor about their actions.



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 the decision	<ul style="list-style-type: none"> • Is this within your job role and responsibilities or is the situation one that should be handled by another staff member or a supervisor? • What do the policies and procedures say? • Should you report this to another staff member/supervisor?

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
<ul style="list-style-type: none"> • Refer to your organisation’s code of ethics for guidance. • Draw on your knowledge of the people and the situation. • Ask your supervisor or a colleague for advice.
Think about which option gives the greatest respect to everyone’s rights
<ul style="list-style-type: none"> • Families have the right to make decisions about their children. Community workers must show respect by implementing the family’s decisions where possible. • Place the child or young person’s welfare first. • Refer to the organisational policies and procedures for help.
Think about which options are fair
<ul style="list-style-type: none"> • Consider the outcomes of any situation; what are the long-term impacts of each decision? Would a particular decision break trust?
Think about which options demonstrate your values and the service’s values
<ul style="list-style-type: none"> • Are you comfortable with making a particular decision? • If someone you respected asked what you did, would you feel you made the right choice?



Example

Solving an ethical dilemma

Rodriguez works as a disability support worker at an after-school support program for children with disabilities. Rodriguez is one of the last support workers at the program one afternoon. 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 her office 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 could 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 change the situation.



Practice Task 6

Question 1

Match the code of practice guideline to the ethical situation.

In relation to families, I will respect families' rights to privacy and maintain confidentiality.	A family member comments that staff don't need any special qualifications to do what a parent does every day. You offer to provide information to the family member.
In relation to colleagues, I will maintain ethical relationships in my online interactions.	After some quiet activities, one teenager wants to play music. The others in the group like it being quiet. You offer headphones so the young person can play their music.
In relation to my profession, I will advocate for my profession and the provision of quality support work.	A parent tells you that he has a serious illness and will be leaving his work soon. He confides that he may have trouble paying the program fees. You decide to keep this information private to respect the parent's wishes.
In relation to children, I will act in the best interests of all children.	One of your colleagues has posted something negative about you on the staff social media page. They suggest you handled a situation poorly. You speak to a supervisor and ask for the post to be removed.

3B

Observe professional boundaries

It can be challenging to find a balance between becoming too involved, or not involved enough, when working with children and young people.

When friendship, support and nurturing are involved, some workers find it difficult to set and maintain professional boundaries. As a community service worker who interacts with children and young people it is likely you will develop a caring relationship with them. You must be clear about what is appropriate for your job role and the tasks, as a professional, you are required to perform.

Finding a middle ground ensures the right boundaries for your relationships with young clients and their families.

Here are some tips for working within professional boundaries with children and young people.

Sharing information about personal problems or issues	<ul style="list-style-type: none">• If children share their problems and issues with you, they probably want you to either help them solve a situation or just listen to them.• Children do not need to know about your problems or personal details as this may cause them to become stressed or fearful. They may even take on responsibility for your feelings.
Drawing on your own life experience to show empathy	<ul style="list-style-type: none">• When children share difficult life experiences, your first priority is to listen.• If the child's experience links with a situation you have experienced, you must carefully consider how appropriate it would be 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.• When unsure, choose not to share information.
Personal intimacy	<ul style="list-style-type: none">• It is expected that you will have a friendly and caring relationship with children. For some workers this relationship will be very close and may include close physical contact like hugging.• Many workers find the boundaries between close physical contact and inappropriate physical contact unclear.• Sometimes it is the child who might overstep the boundaries of physical contact.• If you are unsure, seek advice from a supervisor or co-worker to help you find an appropriate balance between caring and professionalism.



Video: Support boundaries

Watch this video produced for support workers that outlines why boundaries are needed when working in a supporting role with clients: aspirelr.link/yt-maintain-boundaries



What are the some of the benefits of setting boundaries with clients?

Example

Maintaining professional boundaries

Kai is ten years old and tells his support worker, Monique, that his mother and father are getting a divorce, and that there was a bad argument the previous night.

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 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 and he worries that his parents will not be friends anymore.

Families and boundaries

Find a balance between becoming too involved, or not involved enough, with family members.

Professional boundaries can also be unclear in some situations with family members. The following table describes how to maintain professional boundaries with family members.

<p>Sharing information about your life</p>	<p>Family members or carers may share their personal problems or issues with 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 own personal problems and issues private.</p> <ul style="list-style-type: none"> • Prioritise the parent’s situation in your discussion, rather than overshadowing it with your own story or experiences. • Never enlist a family member or carer to become your support person. • If you need to talk to someone approach your supervisor, a trusted person outside your work, or make an appointment with a counselling service.
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Personal intimacy	<p>Clients and work colleagues may encourage you to become closer to them on a personal level.</p> <p>Professional boundaries allow for a trusting and friendly relationship; however, when you extend the relationship outside these boundaries there can be negative consequences.</p> <p>For example:</p> <ul style="list-style-type: none"> • 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. <p>If you cross the line between professional boundaries and personal intimacy, you will involve yourself in a range of service and family issues that may not be easily resolved.</p>
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Seeking support

Your job description will outline reporting lines, your responsibilities and the boundaries of your role.

Many ethical dilemmas will involve you, and a client or colleague. Seeking advice from a supervisor or another senior staff member means you can:

- reduce your responsibility and spread the responsibility for any decisions made
- gain feedback to make sure that your actions are appropriate
- be understood and supported
- prepare a supervisor for an issue or complaint.

Example

Professional conduct in the workplace

Levi is seven years old and has Level 1 autism. He likes to touch and hug everything he encounters, and he enjoys placing objects in his mouth.

Levi is particularly fond of a worker, Ruth, at a disability service he attends once per week. Levi wants to kiss and cuddle Ruth the whole time he is there. Ruth knows that it is not appropriate, and she needs to discourage this behaviour to maintain professional boundaries with him. Ruth gets a big teddy bear from the organisation's toy cupboard and encourages Levi to kiss and cuddle the teddy bear instead. Over a few weeks, Ruth makes sure that Levi feels safe and comfortable using this strategy to meet his tactile needs.



Practice Task 7

Question 1

A parent arrives to pick up their child. You have a court order stating they are not legally allowed to come within 500m of the child. Which of the following statements are actions you should take in this situation? Select all that apply.

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

Question 2

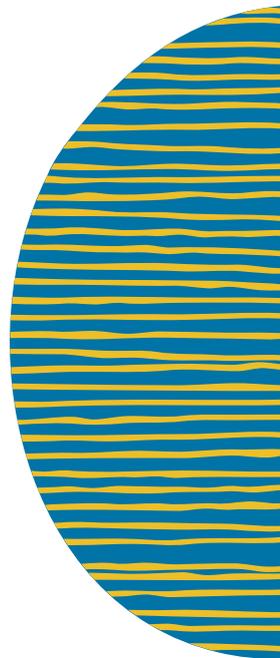
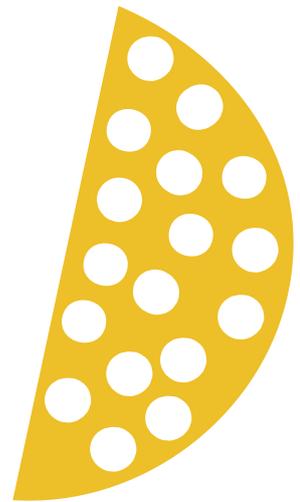
Which of the following situations demonstrate that professional boundaries have been kept? Select yes or no for each one.

a. A parent tells you they have been made redundant and need to sell the family car. You empathise and tell them how your dad was made redundant last year and explain the details of his situation and how difficult it was for your family.	Yes / No
b. You are reading a story with a child sitting beside you when 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."	Yes / No
c. A child tells you they are worried about their mother smoking cigarettes. You tell the child that you used to smoke but gave up.	Yes / No
d. A child tells you that their parents are fighting a lot. You listen and ask the child how they are feeling.	Yes / No



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 ACWA's Code of Ethics and the support of your colleagues.
- 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 in work with children and young people

Part A

1. Match each ethical practice to its description.

A staff member offers a job to her niece without following the usual processes.	Seeking support from a supervisor.
You notice a staff member becomes angry towards some children when no-one is watching.	Reporting potential ethical concerns.
You are unsure about what to do about a confidentiality issue and seek advice from a manager.	Protecting the rights of children.
You see a staff member provide food for all children in the group except one. You report this to the team leader.	Breaching professional boundaries.

2. Suggest at least three ways a worker can maintain professional boundaries with children and young people while maintaining a friendly and caring relationship.



3. Provide at least two ways workers can work within their professional boundaries with family members of children who have been abused or neglected.

Part B

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

Case study

Disability support worker Harley is supporting twins Charlie and Phoenix in their home for a respite shift, while their father Dave goes out for the morning. Dave returns with groceries but as he is unpacking the groceries, a packet of what looks like drugs falls out of a bag. Harley sees the packet and Dave puts it in his pocket. Dave then says to Harley, "I will give you \$100 if you don't say anything."

1. Suggest at least three people the worker can speak to if they are unsure or worried about the safety of a child and need advice.



Glossary

Abuse

Any intentional action that harms or injures another person.

Child-centred work practice

Making the needs of the child the priority.

Duty of care

A moral or legal obligation to ensure the safety and wellbeing of other persons.

Human rights

Fundamental rights and freedoms that apply to all people, setting norms for standards of human behaviour.

Neglect

Failing to properly care for a person.

Self-determination

A person's right to have control over their own life, able to make independent choices about decisions that affect them.

Trauma

Distressing or disturbing experience/event, where a threat or the perception of threat overwhelms a person's capacity to cope.

