



CHILD PROTECTION POLICY

Child Protection Policy document describes ETP good practice to ensure our programmes, operations, staff, volunteers or partners do not put children at risk of harm. It describes how to respond appropriately when concerns and incidents arise. All actions on child safeguarding are taken in the best interests of the child, which are paramount. ETP staff and volunteers treat children with dignity and respect, both in attitude and actions.

The policy reflects the rights of children to protection from abuse and exploitation as outlined in the United Nations Convention of the Rights of the Child (UNCRC).

Section A: Introduction

The ETP Slovakia values young people and children as being a vital part of the organisation and desires to see them grow, mature and be challenged in a healthy and safe environment.

ETP works with two focus groups:

- 1. Children & youth from Roma socially excluded communities**
- 2. Children & youth of refugees**

The purpose of ETP programmes is to offer the children a safe and welcoming environment with developing activities where the children can grow and learn. Programmes are regularly held in:

- Community Centres (preschool education, afterschool clubs, trainings and personal development courses, leisure time activities, creative workshops, artistic public performances, mentoring program and others)
- Evacuation Transition Centre (comprehensive social, medical, education and humanitarian services)

Community Centres (CC) are easily accessible and safe facilities. Children coming from marginalized Roma communities can meet here with professional social workers, teachers and mentors, who guide them through the process of realizing their potential and provide them with tools, resources and knowledge that empower them towards taking control of their own lives for the sake of a better future.

Since 2009, ETP has partnered with the UNHCR, the IOM and the Government Office of the Slovak Republic to provide comprehensive services to people under the protection of the UNHCR in **the Evacuation Transit Centre (ETC). The ETC provides temporary shelter to refugees who fled their homes**, where their lives would still be at risk or where they might possibly be threatened with deportation. The refugees stay at the ETC for up to six months, during which the resettlement procedures to their destination country take place.



Section B: ETP policy commitment

Within our **philosophy of empowerment**, we do not approach our clients as mere victims of their unfavourable circumstances. We strive to provide them with space and tools to find their way to succeed in their lives.

- ETP assists the children in integrating into the community.
- ETP supports the children to express themselves.
- ETP helps children appreciate the diversity of their cultures.

ETP commits to keep children safe from harm and, where appropriate, to promote their well-being and development.

Section C: Children safeguard procedures

Registration of children

1. Each child and young person is formally registered in ETP database. The information includes an information/consent form, which their parent/guardian must complete.
2. Attendance register: a register of the children attending activities is kept for each session. A corresponding register of staff and volunteers (including arrival and departure times) is kept.
3. Each CC and ETC keep a record of any unusual events/accidents/incidents. This information could be vital if any claims are made.

Child Safety

1. There is always active adult supervision to support responsible learning and play.
2. No one member of staff (or volunteer) should ever be alone with a child, although we understand that there may be situations when this might be necessary or helpful. If a child wants to speak confidentially, there should still be someone else in the room, just out of earshot - or at least there should be a window/glass door so that people in a neighbouring room have chance to observe what happens there.
3. The child rather than the staff member should initiate physical contact with children (e.g. hugs). If possible, the staff member should only use side hugs (i.e. one arm round the shoulder). However, due to the unhealthy family relations some children experience and the fact they may starve for this type of attention, in such a case the staff member uses his or her discretion. Physical touch between adults and children can be healthy and acceptable in public places. Staff members should be given advice on what is appropriate physical contact and what is inappropriate, and should be discouraged from contact in circumstances where an adult and child are left alone.
4. Staff do not let children go home without an adult unless the parent has specifically said they may do so. Staff never let a child go with another adult unless the parent has informed that this will happen.

5. ETP makes sure that the premises used for activities are fit for the purpose. A well-planned area includes active, open and quiet areas. Staff encourage children to use these areas appropriately and respect the needs of others. ETP creates a safe environment for children to play and learn (e.g. staff keep the outside door/gate closed and secured, watch and instruct children when using scissors or other tools and equipment, keep the place clean, maintenance is of fundamental importance in eliminating latent dangers and others).
6. Premises used for ETP programmes' purposes were registered at the relevant offices of Self-Governing Regions. The registrations include permission from Regional Office of Public Health Authority of Slovak Republic.
7. ETP makes sure that all workers and assistants know
 - Where the emergency phone is and how to operate it
 - Where the First Aid Kit is
 - Who is responsible for First Aid and how to record accidents or injuries in the incident book
 - What to do in the event of a fire or other emergency

Trips/Outings

1. When ETP organizes a trip/outing staff make sure a trip/outing slip is completed. This includes details about the trip and a section for parents to give their consent. These slips must be returned before the event takes place and must be brought on the trip with the completed group information/consent forms.
2. Parents of children going for a trip must provide staff with child's copy of public health insurance card.
3. Children who are taken for an outing or trip with their mentors (external partners) are requested to coordinate this activity with parents of the child and programme coordinator. They must provide all necessary information before the outing and are fully responsible for the child during the time of the outing.
4. ETP ensures that there is adequate insurance for the work and activities, especially during trips and outings.

Personal/Personnel Safety during trips/outings

- A group of children or young people under eighteen are not left unattended at any time.
- Staff members avoid being alone with an individual child or young person for a long time. If there is a need to be alone with a child or young person (e.g. first aid or he/she is distressed) staff member makes sure that another worker knows where they are and why (also apply point No. 3 in Child safety section).
- At no time should a volunteer or worker from any external organisation arrange to meet a young person away from the activity without permission of manager of the event.
- Teenage assistants are always supervised.
- If private cars are used for an outing, the drivers must be approved by the ETP director, be properly insured, have rested before driving, and should have valid licenses. There should



always be at least one other responsible person (18 or over) in each vehicle. All vehicles should be fitted with full seatbelts, child car seats and should always be used.

Using pictures for educational or PR purposes

1. ETP seeks the written permission from the parents for children's images/photographs to be used for educational/PR purposes.
2. Images of children must not show them in states of undress or in inappropriate poses.
3. Details attached to images and included in stories must not allow that child to be traced to his or her home, unless the child parents invite the staff member for a visit.
4. Distinctive buildings, street signs or landmarks should not be included in an image if they identify where a child lives.

Section D: Staff recruitment

New Workers

Workers and assistants are by far the most valuable resource ETP Slovakia for working with children and young people. When recruiting and selecting paid workers and volunteers, the following steps are taken:

- Providing of CV and motivation letter
- An interview by two people from the management, who will take the final decision
- Identifying reasons for gaps in employment, and other inconsistencies in the application
- Checking of the applicants' identity (passport, driving license, etc.)
- Taking up references prior to the person starting work. A written or telephone reference will be obtained from someone who has known the newly hired person for at least 3 years and specifically the following question "Do you know of any reason why they should not be allowed to work with children?" has to be asked.
- All job and volunteer applicants need to be informed about the ETP child protection policy and asked whether or not they have had any convictions or cases brought against them for child abuse. A written declaration should be prepared and signed, and this declaration should be taken into account when deciding if the applicant is to be employed or working as a volunteer.
- A probationary period of 3 months for new paid workers and volunteers applies.
- On-going supervision of paid workers and volunteers is conducted regularly.
- Ensuring good practice is followed in working with children and young people by providing appropriate training and guidance

Special attention is paid when selecting mentors within ETP Online and Local Mentoring Program. Each potential mentor needs to write motivational letter, send CV and afterwards is interviewed by program coordinator via Skype (personal meeting is recommended if possible). Program coordinator was trained by professionals in order to be able to verify the suitability of the potential candidate. Above mentioned principles (references, on-going supervision, training) are applicable also while recruiting and working with mentors.



Section E: Staff Training and Guidelines (regarding Child Safety and Child Abuse)

It is a great benefit if staff members undertake regular training. ETP keeps staff members informed of relevant courses, as well as organizes the courses for the staff.

There are several training courses, which are organized for a new staff member (including volunteers) shortly after he/she joins the team and are part of his/her induction process. Relevant to this policy are the following ones:

1. **“What is child protection?”** training course (see the Appendix No.1)
2. **“Safety at Work” training course** (according the law No. 124/2006 Z. z. SR). This course is organized for all current staff members regularly once per 24 months.

Section F: Child Protection Representative

A Child Protection Representative is nominated by the Director of ETP. The role of this person is:

1. To handle any concerns (relevant to the child protection) that have occurred within our organisation. If any staff member has any child safety concerns, they should discuss them with him/her.
2. To record and assess the information quickly and carefully and ask for further information as appropriate. Then, if necessary, consult with or refer the case to a local social services/child protection agency.
3. To ensure that everyone involved with the organisation is aware of the identity of the Child Protection Representative and that the policy is being put into practice.

Suspicious of child abuse within our organisation should not be discussed with anyone other than this nominated person. Where emergency medical attention is necessary it should be sought immediately. The designated person will inform the doctor of any suspicions of abuse.



The policy is reviewed on an annual basis to ensure that it is meeting its aims.

The policy is approved by ETP Board of Directors and applies to all the organisation's staff and associates. The policy is publicised in an appropriate manner in the office room in each community centre, Evacuation Transition Centre and in the main office at ETP head office. Each newly hired staff member signs that he or she was instructed about the child protection policy and other policies of the organization. The Child Protection Policy is publicly available at ETP Slovakia web site: www.etp.sk (section Documents – Downloads).

Community Centres Leaders and Evacuation Transition Centre manager have specific responsibility for overseeing the implementation of the policy.

This policy was adopted by the **ETP Slovakia** on 9. January 2008



APPENDIX 1

Training guidelines

What is child protection?

Child protection is the response to the different ways in which a young person's or child's physical, emotional, intellectual and spiritual health are damaged by the actions of another person.

Definitions of Abuse

Physical abuse: may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described as factitious illness, fabricated or induced illness in children or "Munchausen Syndrome by proxy" after the person who first identified this situation. Physical abuse, as well as being the result of a deliberate act, can also be caused through omission or the failure to act to protect.

Emotional abuse: persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve making a child feel or believe they are worthless or unloved, inadequate or valued only insofar as they meet the needs of the other person. It may feature age or developmentally inappropriate expectations being imposed on children. It may also involve causing children to feel frequently frightened or in danger, or the exploitation or corruption of a child. Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone.

Sexual abuse: Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of, or consents to, what is happening. The activities may involve physical contact, including penetrative acts such as rape, buggery or oral sex, or non-penetrative acts such as fondling. Sexual abuse may also include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Boys and girls can be sexually abused by males and or females, by adults and by other young people.

Neglect: Neglect is the persistent failure to meet a child's basic physical and or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or a carer failing to provide adequate food, shelter and clothing, leaving a young child home

alone or the failure to ensure that a child gets appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

It is accepted that in all forms of abuse there are elements of emotional abuse, and that some children are subjected to more than one form of abuse at any time. These four definitions do not minimise other forms of maltreatment.

Note: Recent guidance notes other sources of stress for children and families, such as social exclusion, domestic violence, the mental illness of a parent or carer, or drug and alcohol misuse. These may have a negative impact on a child's health and development and may be noticed by an organisation caring for a child. If it is felt that a child's well-being is adversely affected by any of these areas, the same procedures should be followed.

Recognising the Abuse

The following signs may or may not be indicators that abuse has taken place, but the possibility should be considered.

Physical signs of abuse:

- Any injuries not consistent with the explanation given for them;
- Injuries, which occur to the body in places which are not normally exposed to falls or games;
- Unexplained bruising, marks or injuries on any part of the body;
- Bruises which reflect hand marks or fingertips (from slapping or pinching);
- Cigarette burns;
- Bite marks;
- Broken bones;
- Scalds;
- Injuries which have not received medical attention;
- Neglect-under nourishment;
- Failure to grow;
- Constant hunger, stealing or gorging food;
- Untreated illnesses;
- Inadequate care;
- Repeated urinary infections or unexplained stomach pains.

Changes in behaviour, which can also indicate physical abuse: Fear of parents being approached for an explanation; aggressive behaviour or severe temper outbursts; flinching when approached or touched; reluctance to get changed, for example wearing long sleeves in hot weather; depression; withdrawn behaviour; running away from home.



The physical signs of emotional abuse may include: A failure to thrive or grow, particularly if a child puts on weight in other circumstances e.g. in hospital or away from their parents' care; sudden speech disorders; persistent tiredness; development delay, either in terms of physical or emotional progress.

Changes in behaviour which can also indicate emotional abuse include: Obsessions or phobias; sudden under-achievement or lack of concentration; inappropriate relationships with peers and/or adults; being unable to play; attention seeking behaviour; fear of making mistakes; self-harm; fear of parent being approached regarding their behaviour.

The physical signs of sexual abuse may include: Pain or itching in the genital/anal area; bruising or bleeding near genital/anal areas; sexually transmitted disease; vaginal discharge or infection; stomach pains; discomfort when walking or sitting down; pregnancy.

Changes in behaviour which can also indicate sexual abuse include: Sudden or unexplained changes in behaviour e.g. becoming withdrawn or aggressive; fear of being left with a specific person or group of people; having nightmares; running away from home; sexual knowledge which is beyond their age or developmental level; sexual drawings or language; bedwetting; eating problems such as over-eating or anorexia; self-harm or mutilation, sometimes leading to suicide attempts; saying they have secrets they cannot tell anyone about; substance or drug abuse; suddenly having unexplained sources of money; not allowed to have friends (particularly in adolescence); acting in a sexually explicit way with adults.

The physical signs of neglect may include: Constant hunger, sometimes stealing food from other children; constantly dirty or smelly; loss of weight or being constantly underweight; inappropriate dress for the conditions.

Changes in behaviour which can also indicate neglect include: Complaining of being tired all the time; not requesting medical assistance and/or failing to attend appointments; having few friends; mentioning being left alone or unsupervised.

Responding to a child making an allegation of abuse

What you should do:

1. Stay calm and listen to the child/young person
2. Look at them directly and do not promise to keep any secrets before you know what they are, but always let the child/young person know if, and why, you are going to tell anyone (tell them what you will do next and with whom the information will be shared).
3. Take whatever is said to you seriously and help the child/young person to trust his/her own feelings. Take notes of exactly what is said to you avoiding assumptions and conjecture.
4. Ask questions for clarification only, and at all time avoid asking questions that suggest a particular answer
5. Record in writing what was said using the child's own words as soon as possible, note the date and time (of incident(s)) and any names mentioned. You should also note what was happening immediately before being told (i.e. the activity being delivered), and the dates, times, to whom the information was given and when the record was made. All hand written notes and other records should be kept securely, and ensure that the record is signed.



6. It is not the role of the worker to investigate any allegations (this would contaminate evidence if a situation went to court). Any disclosure by a child/young person must be reported to the nominated Child Protection Representative. This action will also be recorded.
7. Where emergency medical attention is necessary, it should be sought immediately.
8. In coordination with Child Protection Representative - speak immediately with the representative of the relevant Local Authorities (Office of the Labour, Social Issues and Family) for further advice and guidance.

What you should *not* do:

1. Project workers/volunteers should not begin investigating the matter themselves.
2. Do not discuss the matter with anyone except the correct people in authority.
3. Do not form your own opinions and decide to do nothing.

Things to say or do:

- “What you are telling me is very important”
- “This is not your fault”
- “I am sorry that this has happened/is happening”
- “You were right to tell someone”
- “What you are telling me should not be happening to you and I will find out the best way to help you”
- Make notes soon after the event. Try to write down exactly what the young person or child said. Avoid assumptions or conjecture.

Things *not* to say or do:

- Do not ask leading questions – Why? How? What?
- Do not say “Are you sure?”
- Do not show your own emotions e.g. shock/disbelief
- Do not make false promises

Information given to members of staff about possible child abuse cannot be held “in confidence”. In the interests of the child, staff have a responsibility to share relevant information about the protection of children with other professionals particularly the investigative agencies.