

Speak Up

Understanding and responding to child abuse



About Child Wise

Established in 1991, Child Wise is one of Australia's leading not-for-profit child sexual abuse prevention organisations. Our vision is of a society in which children can grow up free from abuse and exploitation. Child Wise works to build awareness, deliver education, and provide the tools to empower individuals and communities around Australia so they can actively prevent child abuse.

Purpose of the Speak Up booklet

The purpose of this booklet is to provide parents, carers and professionals who work with children, information about the importance of preventing and reporting instances of child abuse.

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Child Wise values feedback and comments in order to improve our programs. Please contact us if you would like to make any suggestions regarding this guide.

Table of Contents

<u>Types of child abuse</u>	<u>2</u>
<u>Australian child protection data</u>	<u>3</u>
<u>Impacts of child abuse and trauma</u>	<u>4</u>
<u>Particularly vulnerable groups</u>	<u>6</u>
<u>Common sex offender behaviours</u>	<u>6</u>
<u>Child Safer organisations and communities</u>	<u>7</u>
<u>Child abuse trauma indicators by age group</u>	<u>8</u>
<u>Sexual development in children</u>	<u>10</u>
<u>United Nations Convention on the Rights of the Child</u>	<u>13</u>
<u>Child safe screening legislation in each State & Territory</u>	<u>14</u>
<u>Child safe screening systems used in each State & Territory</u>	<u>16</u>
<u>Reporting child abuse</u>	<u>19</u>
<u>Child Protection authorities</u>	<u>20</u>
<u>Support services</u>	<u>22</u>

Types of child abuse

Child abuse is an act that endangers a child or young person's health and wellbeing. Child abuse comes in different forms, all of which can have an impact on a child or young person's social, physical, intellectual and/or emotional development. Child abuse can be a single event or a series of traumatic events, both of which can have long lasting impacts on the victim.

Sexual Abuse

Occurs when a person uses power, force or authority to involve a child or young person in any form of unwanted or illegal sexual activity. These behaviours may take the form of touching or fondling, obscene or suggestive phone calls, taking or exposing children to sexually explicit images and videos, penetration (with penis, finger or other object), and forcing or coercing children to have sex or engage in sexual acts with other children or adults.

Physical Abuse

Occurs when a child or young person suffers significant harm from an injury. The injury may be intentionally inflicted, or may be the inadvertent consequence of physical punishment or physically aggressive treatment of a child or young person. Physical abuse may take the form of hitting, punching, beating, shaking, burning, restraining, poisoning or otherwise causing harm to the child.

Emotional Abuse

Also referred to as 'psychological abuse', emotional abuse affects a child's self-esteem and can have a significant impact on a child's mental, social and emotional development. Emotional abuse can include being repeatedly isolated, rejected, continual coldness, excluding and distancing of a child, or putting down and calling a child demeaning names.

Neglect

Occurs when there is a failure to provide or cater for a child or young person's basic needs for life, such as food, clothing, shelter, medical attention, supervision or care, to the extent that the child's health and development is, or is likely to be, placed at risk.

Exposure to Family Violence

Occurs when children and young people witness or experience the chronic domination, coercion, intimidation and victimisation of one person by another by physical, sexual or emotional means within a domestic relationship. Exposure to domestic violence can include watching or hearing a family member assault or threaten another member of the family, direct involvement (for example, trying to intervene or calling the police), or experiencing the aftermath of family violence, such as seeing physical indicators of abuse or observing parental depression.

Grooming

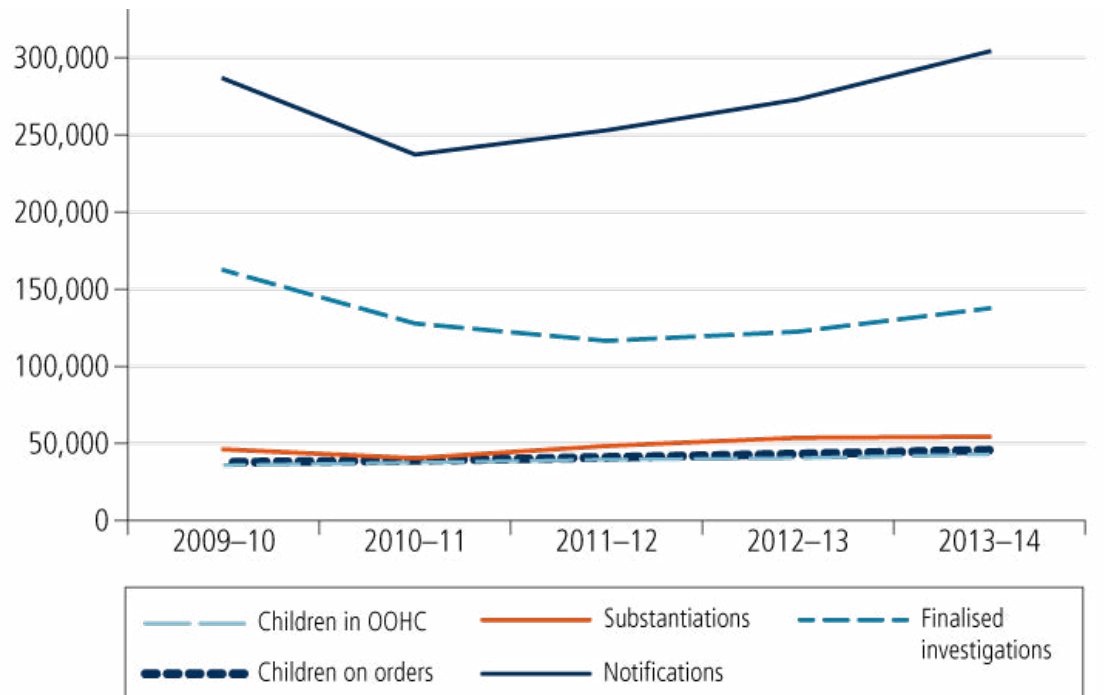
Occurs when communication or conduct is linked to the intention of facilitating the involvement of a child in sexual behaviour with an adult. It can include, but is not limited to, developing special relationships with a child; favouring or giving gifts to a child or young person; inappropriate interactions with children either in person or via forms of media and electronic devices; asking a child or young person to keep a secret of any aspect of their relationship; and testing of, or ignoring, professional boundaries or rules.

Australian child protection data

The graph below outlines national statutory child protection data. The data shows the magnitude of child protection in Australia over the past five years. It is important to remember that these are only the reports that are made to child protection authorities. Unfortunately too many instances of child abuse go unreported.

In 2013 - 2014 across Australia:

- Total number of notifications: **304,097**
- Children the subject of substantiations: **54,438**
- Children on Orders: **45,746**
- Children in Out of Home Care: **43,009**



Australian Institute of Health and Welfare Canberra, Child Protection Australia 2013-14

Impacts of child abuse and trauma

A child's primary drive is towards attachment rather than safety.



Children and young people need stable, sensitive, loving and stimulating relationships and environments in order to reach their full potential. Child abuse can have significant and long lasting impact on a child's development. Home life, culture, family and community dynamics play an essential role in children's development, as they impact on a child's experiences and opportunities.

A child's primary drive is towards attachment rather than safety - they will accommodate to the parenting style they experience.

It is crucial to keep in mind that children are particularly vulnerable when witnessing and/or experiencing violence, abuse and/or neglectful circumstances. Given their age and vulnerability, witnessing or being a victim of abuse can lead children to have and display complex traumatic responses. Accordingly, infants and children adapt to frightening and overwhelming circumstances through the body's survival response. Their autonomic nervous system will become activated and switch on their natural flight/fight/freeze response.

Repeated and prolonged exposure to these experiences can lead to toxic stress for a child, which:

- alters the child's brain development,
- sensitises the child to further stress,
- leads to heightened activity levels and hypervigilance,
- consequently affects future learning and concentration.

Most importantly, abuse and trauma impairs a child's ability to trust and relate to others. When children are traumatised, they find it difficult to regulate their mood and behaviour,

and to self-soothe, which can have a lifelong effect.

Traumatic memories are stored differently to everyday memories. They are instead encoded in vivid imagery and sensations and lack verbal narrative and context. As they are unprocessed, they are likely to flood the child when triggers such as smells, sounds or internal and/or external reminders present at a later stage. Moreover, children can experience severe sleep disruption and intrusive nightmares, which contribute to their changed behaviour.

It is particularly important that attention is given to understanding the complexity of a child's experience. The recovery process for children is enhanced by the support of non-offending family members and significant others. Survivors of child abuse are often diagnosed with post-traumatic stress and other mental illnesses as adults due to their adverse childhood experiences.

It is also important to acknowledge that parents can have similar post-traumatic responses, as they feel overwhelmed and suffer shock and grief from their child's trauma and may need ongoing support as well.

The recovery process for children is enhanced by the support of non-offending family members and significant others.



Particularly vulnerable groups

Infants and pre-school children are at higher risk of abuse than older children. The leading cause of death amongst this age group is from injury and assault - the rate of child homicide is highest among infants less than 1 year old.

Indigenous children are over-represented across the child protection system compared with non-Indigenous children. In 2013-14, Indigenous children were:

- Approximately 7 times more likely to be the subject of substantiated abuse or neglect.
- Almost 10 times more likely to be on a care and protection order.
- Over 10 times more likely to be in out-of-home care.

It is estimated that children with a disability are 3 times more likely to be sexually abused - but the actual rate is probably far higher. There is early evidence to suggest that children from a culturally and linguistically diverse (CaLD) or migrant background are also at higher risk of sexual abuse.

Australian Institute of Health & Welfare, 2015.

Common sex offender behaviours

Methods used to develop trust

- Spending a lot of time with children and possibly their families.
- Touching the child in a non-sexual way and then progressively touching the child in a sexual way.
- Giving the child a lot of special attention, more than what would be regarded as usual.
- Complimenting and saying loving things to children.
- Doing things the child wants to do or buying gifts.
- Testing their ability to keep secrets.
- Filling a void perceived to be left by primary parents or carers.

Common locations for sexual offending

- At the child's home or the home of a friend or family member.
- Through organised sports or community activities.
- In child-related organisations and businesses.

Means for organising time alone

- Babysitting/looking after children.
- Taking a child on an outing, going for car rides or walks.
- Offering to provide tutoring, coaching or other extra curricular activities.

Child Safer organisations and communities

The Child Wise Standards aim to prevent, minimise and end child abuse in an organisational and institutional context.

12 Standards for a Child Safer Organisation

1 An open & aware culture	7 Screening of representatives
2 Understanding child abuse	8 Support & supervision
3 Managing risk to minimise abuse	9 Empowering children & young people
4 Child protection policies & procedures	10 Training & education
5 Clear boundaries	11 Complaints & disclosures
6 Recruitment & selection	12 Legal responsibilities

Child Wise established the '12 Standards for a Child Safer Organisation' to create a framework for building open, transparent, and accountable organisations. If fully adopted, the Standards will act to combat the barriers to establishing a child safe organisation – fear, denial, lack of resources, complacency, group think, and an entrenched culture.

Child Wise has been active in its engagement with state and federal governments to help develop a national set of child safety standards. We are confident that these standards align with current and pending child safety standards in Australia. Just as all organisations are expected to meet Occupational Health and Safety standards through OHS regulations (i.e. WorkCover), organisations with a duty of care for children should be expected to meet standards for the protection and wellbeing children.

The Standards work together - by understanding child abuse organisations will be better able to identify any risks to children; by accounting for known risks through clear boundaries and codes of conduct they will enable better support and supervision of staff; better training in offender grooming behaviours will lead to more effective recruitment processes, and so on.

The Standards aim to prevent, minimise and end child abuse in an organisational and institutional context. They employ situational crime prevention tools to create environments that are 'child safe'. This does not seek to have a direct effect on the behaviour of offenders but aims to eliminate or reduce their inappropriate behaviour within organisations. It is about creating safer environments, rather than safer individuals; the goal of a child safe environment is to create a culture where opportunities for abuse are unable to take place.

Recognising that there is no fool-proof system for the complete prevention of all forms of abuse, the Standards also incorporate elements of public health interventions to prevent the abuse of children, heighten the likelihood that abuse will be detected, and to reduce the long term impacts of abuse on children.

Child abuse trauma indicators by age group

Age Group	Trauma Indicators	Trauma Impacts
0 – 12 months	<ul style="list-style-type: none"> • Increased tension, irritability, reactivity and inability to relax • Increased startle response • Lack of eye contact • Sleep and eating disruption • Loss of acquired skills • Back arching • Aggression • Touch avoidance 	<ul style="list-style-type: none"> • Neurobiology of brain and central nervous system altered by switched on alarm response • Behavioural changes • Regression in acquired developmental gains • Lowered stress threshold • Lower immune system
12 months – 3 years	<ul style="list-style-type: none"> • Lack of eye contact • Inability to be soothed • Increased tension, irritability, reactivity and inability to relax • Loss of eating skills • Alarmed by trauma related reminders • Uncharacteristic aggression • Touch avoidance • Sexualised play with toys 	<ul style="list-style-type: none"> • Neurobiology of brain and central nervous system altered by switched on alarm response • Sleep disruption • Behavioural changes • Greater food sensitivities • Lowered stress threshold • Lower immune system
3 – 5 years	<ul style="list-style-type: none"> • Regression to younger behaviour • Bodily aches, pains and illness complaints with no explanation • Loss of skills (toileting, eating, self-care) • Lack of eye contact • Sleep disturbance, nightmares, night terrors • Withdrawal and quietening • General fearfulness • Separation anxiety • Sexualised drawings and demonstrated sexual knowledge 	<ul style="list-style-type: none"> • Behavioural changes • Hyperactive, hyper-arousal • Tiredness and lack of concentration • Delayed gross motor and visual perceptual skills • Greater food sensitivities • Fear of trauma reoccurrence • Low self-esteem and self-confidence • Loss of focus, lack of concentration and increased inattentiveness
5 – 7 years	<ul style="list-style-type: none"> • Lack of eye contact • Spacey, distractible or hyperactive • Increased tension, irritability, reactivity and inability to relax • Accident prone • Absconding/truanting from school • Hurting animals, fire lighting • Toileting accidents/smearing of faeces 	<ul style="list-style-type: none"> • Loss of concentration and memory • Eating disturbances • Risk taking behaviour triggered by previous experience of trauma • Sleep disturbance due to intrusive imagery • Mood or personality changes • Wish for revenge and action oriented responses triggered by trauma • Fearful of closeness and love

Age Group	Trauma Indicators	Trauma Impacts
7 – 9 years	<ul style="list-style-type: none"> • Frightened by intensity of own feelings • Distant and withdrawn • Feelings of shame, guilt and humiliation • Spacey, distractible, blanking out, loss of ability to concentrate • Increased tension, irritability, hyperactive, reactivity and inability to relax • Lowered school performance • Bodily aches and pains with no reason • Hurting animals, fire lighting • Retelling of traumatic events 	<ul style="list-style-type: none"> • Fear of trauma reoccurrence • Lowered self-esteem • Loss of concentration and memory • Speech or cognitive delays • Risk taking behaviour triggered by previous experience of trauma • Sleep disturbance due to intrusive imagery • Detailed memory of traumatic events • Wish for revenge and action oriented responses triggered by trauma • Fearful of closeness and love
9 – 12 years	<ul style="list-style-type: none"> • Feelings of shame, guilt and humiliation • Spacey, distractible, blanking out, loss of ability to concentrate • Reduced capacity to feel emotions – may appear numb or apathetic, distant and withdrawn • Depressed • Vulnerable to anniversary reactions caused by seasonal events, holidays • Lowered school performance • Retelling of traumatic event • Sexualised drawings or written stories 	<ul style="list-style-type: none"> • Risk taking behaviour triggered by previous experience of trauma • Fear of trauma reoccurrence • Lowered self-esteem • Lack of concentration and memory loss • Speech or cognitive delays • Factual and accurate memory may be embellished by elements of fear or wishes • Flashbacks of traumatic events • Wish for revenge and action oriented responses triggered by trauma • Concerned about personal responsibility for trauma
12 – 18 years	<ul style="list-style-type: none"> • Feelings of shame, guilt and humiliation • Eating disorders/disturbances • Sleep disturbance, nightmares • Distant and withdrawn • Depressed • Spacey, distractible, blanking out, loss of ability to concentrate • Challenging behaviours • Substance abuse • Aggressive/violent behaviour • Self-harming eg. cutting, burning • Suicidal ideation • Hurting animals, fire lighting 	<ul style="list-style-type: none"> • Flight into activity and involvement with others or retreat from others in order to manage inner turmoil • Pessimistic and vulnerable to withdrawal • Adulthood seen as a way of escaping impact and memory of trauma • Fear of growing up and need to stay in family orbit • Loss of, or reduced capacity to attune with caregiver • Acute distress when encountering any reminder of trauma

Sexual development in children

Traffic Light Model

The following model can be used to help parents and carers to assess if a child is displaying normal or concerning sexual development behaviours.

Green: Sexual behaviours that are considered 'normal', healthy, spontaneous, curious, light-hearted, easily distracted, experimental, and that are in line with age and ability level.
Action: opportunity to give the child or adolescent positive feedback and information.

Yellow: Sexual behaviours that are outside the norm in terms of persistence, frequency or disparity in age/development.

Action: gather more information to assess the most appropriate action.

Red: Sexual behaviours outside the norm – behaviour that is excessive, secretive, compulsive, coercive or degrading.

Action: requires immediate intervention and action.

When using the traffic light model it is important to remember the model is evidence based and outlines what research shows is normal and irregular sexual behaviours in children at various ages and stages of development.

Considerations

There are various influences on children's sexual behaviour and development, including:

- Parents and family relationships
- Media - television, internet, radio, magazines, etc
- Peer relationships
- How adults treat each other
- Children's services
- School environments
- Cultural background and norms

Social overlays or judgements should be managed carefully in order to appropriately respond to the behaviours in the first instance.

When assessing a child's sexualised behaviour it is important to consider the following variables:

- Is the behaviour age appropriate or concerning?
- What is the context of the behaviour?
- What is the age difference and relationship between children?
- What is the vulnerability of the child? (age, cognitive ability, socio economic status)

0 - 5 Years	
Green	<ul style="list-style-type: none"> • Thumb-sucking, body-stroking, genital holding • Curious - wants to touch others' private parts, e.g. when in bath • Games, e.g. doctor/nurse, 'show me yours, I'll show you mine' • Enjoyment being nude, using slang language for toilet functions
Yellow	<ul style="list-style-type: none"> • Preoccupation with adult sexual behaviour • Preoccupation with touching others' genitals • Use of adult sexual language • Peeping at others' private body parts, pulling others pants down/skirt up • Sexualised play with dolls
Red	<ul style="list-style-type: none"> • Simulation of foreplay/sexual behaviour in play • Persistent masturbation, touching or attempting to touch others' genitals • Sexual behaviour between children involving penetration with objects • Forcing other children to engage in sexual play
5 - 9 Years	
Green	<ul style="list-style-type: none"> • Self-touching, masturbation to self-soothe • Increased curiosity about other children's genitals and adult sexuality (e.g. babies, gender differences) • Using 'toilet words', body parts as swear words to be silly, telling dirty jokes • Increased sense of privacy about bodies
Yellow	<ul style="list-style-type: none"> • Persistent/recurrent questions about sexual activity • Writing sexually threatening notes • Engaging in mutual masturbation • Constant public touching of own genitals • Use of adult language to discuss sex i.e., "do I look sexy?" • Persistent use of dirty words
Red	<ul style="list-style-type: none"> • Persistent masturbation, especially in front of others • Sexual behaviours engaging younger/less able children (e.g. sneaking into room of sleeping younger children to touch or engage in sexual play) • Simulation of sexual acts sophisticated for age e.g. oral sex • Persistent sexual themes in talk, play, art, etc
9 - 12 Years	
Green	<ul style="list-style-type: none"> • Use of sexual language and dirty words/jokes with peers • Having girlfriends/boyfriends; consensual kissing with known peers • Some exhibitionism e.g. flashing/mooning to same age peers • Increased need for privacy • Occasional masturbation • Use of internet to chat online
Yellow	<ul style="list-style-type: none"> • Sudden change in behavior or dress • Mixing with new and/or older people • Bullying involving sexual aggression • Pseudo maturity, inappropriate knowledge, discussion of sexuality • Preoccupation with online chat or pornography • Persistent expression of fear of pregnancy or STIs • Mutual masturbation, preoccupation with masturbation
Red	<ul style="list-style-type: none"> • Persistent masturbation, particularly in front of others • Sexual activity, oral sex, intercourse, coercion of others into sexual acts • Sending nude/sexually provocative images of self or others online • Degradation/humiliation of self or others using sexual themes • Presence of STI • Penetration of children, animals, dolls or other objects

13 - 18 Years	
Green	<ul style="list-style-type: none"> • Sexually explicit conversations with peers; obscenities/jokes within norm • Solitary masturbation • Interest in erotica • Use of internet to chat online • Sexual activity: flirting, hugging, kissing, foreplay, hand-holding, consensual oral sex, intercourse with partner of similar age and development
Yellow	<ul style="list-style-type: none"> • Sexual preoccupation • Anxiety interferes with daily function • Preoccupation with pornography, online chat, meeting online acquaintance • Sexually aggressive themes, obscenities or graffiti • Peeping, exposing, non-consensual sexual touch, violation of others' space • Unsafe sexual behaviour i.e. unprotected, intoxicated, multiple partners
Red	<ul style="list-style-type: none"> • Compulsive masturbation (especially chronic or public) • Degradation of self or others with sexual themes • Preoccupation with sexually aggressive pornography • Sexual harassment, attempt or force others to expose genitals • Sexual contact or talk with others of a significantly different age developmental status • Sending nude or sexually provocative images of self to others online • Genital injury to self or others • Sexual penetration or contact with animals

*Traffic Lights: Family Planning Queensland (2006), adapted from the Child at Risk Assessment Unit (2000).
Age Appropriate Sexual Play and Behaviour in Children*

United Nations Convention on the Rights of the Child

Parents share the responsibility for bringing up their children and should always consider what is best for each child.

ARTICLE 1 (Definition Of The Child)

Everyone under 18 years of age has all the rights in this Convention.

ARTICLE 2 (Non-discrimination)

The Convention applies to all children; whatever their race, religion, abilities, wherever they come from, or whether they are a boy or girl.

ARTICLE 3 (Best interests of the child)

The best interests of children must be the primary concern in making decisions that may affect them. All adults should do what is best for children.

ARTICLE 4 (Protection of rights)

Governments should make sure these rights are respected, protected and fulfilled.

ARTICLE 5 (Parental guidance)

Governments should respect the rights and responsibilities of families to guide their children so that, as they grow up, they learn to use their rights properly.

ARTICLE 6 (Survival & development)

Children have the right to live a full life. Governments should ensure that children survive and develop healthily.

ARTICLE 7 (Identity & belonging)

Children have the right to a legally registered name and nationality. Children also have the right to know their parents and, as far as possible, to be cared for by them.

ARTICLE 8 (Preservation of identity)

Governments should respect a child's right to a name, a nationality and family ties.

ARTICLE 9 (Separation from parents)

Children have the right to live with their parent(s), unless it is bad for them. Children whose parents do not live together have the right to stay in contact with both parents, unless this might hurt the child.

ARTICLE 10 (Family reunification)

Families who live in different countries should be allowed to move between those countries so that parents and children can stay in contact or reunify as a family.

ARTICLE 11 (Kidnapping)

Governments should take steps to stop children being taken out of their own country illegally.

ARTICLE 12 (Respect child's opinion)

Children have the right to say what they think should happen when adults are making decisions that affect them and to have their opinions taken into account

ARTICLE 13 (Freedom of expression)

Children have the right to get and to share information, as long as the information is not damaging to them or to others.

ARTICLE 14 (Freedom of beliefs)

Children have the right to think and believe what they want and to practise their religion, as long as they are not stopping other people from enjoying their rights. Parents should guide children on these matters.

ARTICLE 15 (Freedom of association)

Children have the right to meet with other children and young people and to join

groups and organisations, as long as this does not stop other people from enjoying their rights.

ARTICLE 16 (Privacy)

Children have the right to privacy. The law should protect them from attacks against their way of life, their good name, their family and their home.

ARTICLE 17 (Access to information)

Children have the right to information that is important to their development and wellbeing. Mass media such as television, radio and newspapers should provide information that children can understand and should not promote materials that could harm children.

ARTICLE 18 (Parental responsibilities)

Both parents share responsibility for bringing up their children and should always consider what is best for each child. Governments should help parents by providing services to support them.

ARTICLE 19 (Protection from violence)

Governments should ensure that children are properly cared for and protect them from violence, abuse and neglect by their parents, or anyone else who cares for them.

ARTICLE 20 (Out-of-home care)

Children who cannot be looked after by their own family must be looked after properly by people who respect their religion, culture and language.

ARTICLE 21 (Adoption)

When children are adopted, the first concern must be what is best for them. The same rules should apply whether children are adopted in the country of their birth or if they are taken to live in another country.

ARTICLE 22 (Refugee children)

Children who come into a country as refugees should have the same rights as children who are born in that country.

ARTICLE 23 (Children with disabilities)

Children who have any kind of disability should receive special care and support so that they can live a full and independent life.

ARTICLE 24 (Health)

Children have the right to good quality health care, clean water, nutritious food and a clean environment.

ARTICLE 25 (Review of treatment in care)

Children who are looked after by local authorities rather than their parents should have their situation reviewed regularly.

ARTICLE 26 (Social security)

Children have the right to financial help from the government if they are poor or in need.

ARTICLE 27 (Adequate living standards)

Children have the right to a standard of living that is good enough to meet their physical and mental needs. The government should help families who cannot afford to provide this.

ARTICLE 28 (Education)

Children have the right to an education. Discipline in schools should respect children's dignity. Young people should be

encouraged to reach the highest level of education of which they are capable.

ARTICLE 29 (Goals of education)

Children's education should develop each child's personality, talents and abilities to the fullest. It should encourage children to respect the rights of others and their own.

ARTICLE 30 (Children of minorities)

Children have the right to learn and use the language and customs of their families, whether or not these are shared by the majority of the people in the country where they live, as long as it does not harm others.

ARTICLE 31 (Leisure, play and culture)

Children have the right to relax, play and to join in a wide range of leisure activities.

ARTICLE 32 (Child labour)

Governments should protect children from work that is dangerous or that might harm their health, education or wellbeing.

ARTICLE 33 (Drug abuse)

Governments should use all means possible to protect children from dangerous drugs.

ARTICLE 34 (Sexual abuse)

Governments should protect children from all forms of sexual abuse and exploitation.

ARTICLE 35 (Abduction & trafficking)

Governments should make sure that children are not abducted or sold.

ARTICLE 36 (Exploitation)

Children should be protected from any activity that could harm their development.

ARTICLE 37 (Detention & punishment)

Children who break the law should not be treated cruelly. They should not be put in a prison with adults and should be able to keep in contact with their family.

ARTICLE 38 (War & armed conflict)

Governments should not allow children under 15 to join the army. Children in war zones should receive special protection.

ARTICLE 39 (Rehabilitation of child victims)

Children who have been abused or neglected should receive special help to recover and restore their self-respect.

ARTICLE 40 (Juvenile justice)

Children who are accused of breaking the law should receive legal help. Governments are required to set a minimum age below which children cannot be held criminally responsible.

ARTICLE 41 (National laws)

If the laws of a country protect children better than the articles of the Convention, then those laws should override the Convention.

ARTICLE 42 (Knowledge of rights)

Governments should make the Convention known to all parents and children.

ARTICLES 43 TO 54 (Implementation measures)

These articles discuss how governments and international organisations like Child Wise should work to ensure children are protected in their rights.

Child Safe screening legislation in each State & Territory

Jurisdiction	Act	Type of program
VIC	<i>Working With Children Act 2005</i>	Individuals are required to apply for a Working With Children Check. Valid for 5 years, the check entitles individuals to engage in child-related organisations, occupations, volunteering and practical training. The WWCC Act was amended in 2014 and is now seen as a minimum standard in Victoria.
NSW	<i>Child Protection (Working with Children) Act 2012</i>	The NSW Working With Children Check resulted in a move from an employer driven “point-in-time” system to a system where individuals, including volunteers, are responsible for their own application for certification. Employers operating within a child-related industry are required to register online with the NSW Office of the Children’s Guardian and to subsequently conduct online verification of new paid employees clearance. Existing paid workers and all volunteers (new and current) also need to have clearance validated online as they are phased in to the new check system. The check is valid for 5 years and subject to ongoing monitoring.
QLD	<i>Commission for Children and Young People and Child Guardian Act 2000</i>	Individuals are required to apply for a Working With Children Check, known as a ‘Blue Card’ in Queensland. Valid for 2 years, Blue Cards entitle individuals to engage in child-related occupations and volunteering. Organisations providing child-related services must also have policies and procedures in place to identify and minimise risk of harm to children, which are monitored by the Commissions for Children and Young People and Child Guardian.
WA	<i>Working with Children (Criminal Record Checking) Act 2004</i>	Individuals are required to apply for a Working With Children Check. Valid for 3 years, the check entitles individuals to engage in child-related occupations and volunteering.
SA	<i>Children’s Protection Act 1993</i>	The South Australian system is an employer driven point-in-time system requiring employers and responsible authorities to obtain National Police Checks and conduct wider screening assessment for those engaging in child-related occupations and volunteering.

Jurisdiction	Act	Type of program
ACT	<i>Working with Vulnerable People (Background Checking) Act 2011</i>	The ACT Working with Vulnerable People Background Check requires that individuals engaging in regulated activities or services, including where these are provided to children, must be registered. A statutory Screening Unit within the Office of Regulatory Services, Justice and Community Safety Directorate is responsible for applications for registration. The registration is valid for 3 years and is subject to ongoing monitoring. There are three types of registration administered to individuals under the Working with Vulnerable People Background Check: general registration, which is transferable across all roles and organisations; role-based registration; and conditional registration.
NT	<i>Care and Protection of Children Act 2007</i>	Individuals are required to apply for a Working With Children Check, known as an 'Ochre Card' in the NT. The Ochre Card, which is also known as a Clearance Notice, is valid for 2 years and applies to employers and volunteers in child-related employment settings.
TAS	<i>Education and Care Services National Law (Application) Act 2011</i>	The Good Character Check screening program requires that staff members, volunteers and students on practicum placement obtain a security screen clearance in order to engage in work with regulated education and care services only. The Good Character Check includes consideration of crimes of violence; sex-related offences; serious drug offences; crimes involving dishonesty; and serious traffic offences. Employers in other child-related work may require police checks at their discretion.

Child safe screening systems used in each State & Territory

Jurisdiction	Information considered
VIC	<p>The Working With Children Check is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check - offences with most significance include serious sexual offences, serious violent offences, serious drug related offences, offences against the <i>Working with Children Act 2005</i>. • A review of relevant findings from prescribed professional disciplinary bodies. • Information sought from other bodies, such as courts, the Director of Public Prosecutions and any employee within the meaning of the <i>Public Administration Act 2004</i>, Corrections Victoria and employers. It includes where a court made a formal finding of guilt in relation to an offence, convicted the applicant of an offence, accepted a plea of guilt from the applicant, or acquitted the applicant of an offence because of mental impairment. • Information about any spent convictions, juvenile convictions and findings of guilt, pending charges, and the circumstances surrounding any charges or convictions. <p>In addition, the following individuals are ineligible to apply for a Working With Children Check:</p> <ul style="list-style-type: none"> • Registered sex offenders within the meaning of the <i>Sex Offenders Registration Act 2004</i>, or subject to an extended or interim extended supervision order under the <i>Serious Sex Offenders Monitoring Act 2005</i>. • Individuals subject to a detention order, including an interim detention order or a supervision order, including an interim supervision order under the <i>Serious Sex Offenders (Detention and Supervision) Act 2009</i>.
QLD	<p>The Blue Card screening system is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check. • Consideration of any charge or conviction for an offence, whether or not a conviction is recorded. • Consideration of whether a person is a respondent to or subject to an application for a child protection prohibition or disqualification order; or whether a person is subject to reporting obligations under the <i>Child Protection (Offender Reporting) Act 2004</i>. • Disciplinary information from professional organisations associated with teachers, childcare service providers, foster carers, nurses, midwives and certain health practitioners. • Information from police investigations into allegations of serious child-related offences will be taken into account, even if no charges were laid because the child was unwilling or unable to proceed.

Jurisdiction	Information considered
NSW	<p>The Working With Children Check is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check for charges and convictions (including spent convictions) for any sexual offence (including but not limited to, sexual assault, acts of indecency, child pornography, child sexual exploitation and carnal knowledge); any assault, ill treatment, neglect of, or psychological harm to a child; any registrable offence; offences of attempting, or of conspiracy or incitement, to commit any of the above offences. • Consideration of whether any of the above offences were committed in New South Wales and were punishable by penal servitude or imprisonment for 12 months or more; or whether any of the above offences were committed elsewhere and would have been an offence punishable by penal servitude or imprisonment for 12 months or more if the offence had been committed in New South Wales. • Consideration of relevant matters, including all matters irrespective of whether they are considered spent or were committed as a juvenile (relevant matters include charges that may not have been heard or finalised by a court; are proven but have not led to a conviction; or have been dismissed, withdrawn or discharged by a court). • Consideration of relevant Apprehended Violence Orders. • Consideration of relevant employment proceedings, reportable conduct, any sexual offences or sexual misconduct committed against, with, or in the presence of a child, including a child pornography offence; any child-related personal violence offence; any assault, ill treatment or neglect of a child; any behaviour that causes psychological harm to a child; or an act of violence committed by an employee in the course of employment and in the presence of a child. As part of an additional risk assessment, the Children's Guardian may give consideration to a range of different factors regarding previous matters that triggered the risk assessment. The Children's Guardian may also consider any other matters deemed necessary for an assessment to be made.
WA	<p>The Working With Children Check is comprised of:</p> <ul style="list-style-type: none"> • Relevant national criminal record information to see if the applicant has charges or convictions that indicate that he or she may be of harm to a child (relevant criminal records include information about convictions for any offence, whether committed as an adult or a juvenile; any spent convictions; any pending charge for a Class 1 or Class 2* offence; and any charge that has been finalised by a court for a Class 1 or Class 2 offence but which did not result in a conviction). • Information may also be obtained from authorised bodies in WA and similar authorities in other states and territories, such as the police, the Director of Public Prosecutions, the Department of Corrective Services, the Department of the Attorney General and courts. <p>* Class 1 and 2 offences include various sexual offences against a child, as well as offences such as murder, manslaughter, grievous bodily harm, indecent assault, making/viewing child pornography and involvement in child sexual exploitation and other offences.</p>

Jurisdiction	Information considered
SA	<p>Under the Children's Protection Regulations 2010, the Department of Communities and Social Inclusion provides a wider screening assessment which includes:</p> <ul style="list-style-type: none"> • A National Police Check. • South Australian Police information regarding alleged offences regardless of outcome, including spent convictions; pending charges and non-conviction charges; and circumstantial information around charges and convictions. • Information from other jurisdictions. • Information sourced from professional registration bodies.
ACT	<p>The Vulnerable People Background Check is comprised of:</p> <ul style="list-style-type: none"> • A risk assessment conducted by the Commissioner for Fair Trade, which can include checking for charges and convictions, whether committed in the ACT or elsewhere for any sexual offence; offence against the person; offence involving violence; offence involving dishonesty or fraud; offence relating to property; offence involving possession of or trafficking in a drug of dependence or controlled drug; an offence against an animal; and a driving offence. • Consideration is given to non-conviction information in relation to a relevant offence (or an alleged relevant offence) involving the following: where a person has been charged with the offence but a proceeding is not finalised; the charge has lapsed, been withdrawn or discharged, or struck out; the person has been acquitted of an alleged offence; a conviction for an alleged offence has been quashed or set aside; an infringement notice for an alleged offence has been served, or the person has a spent conviction for the offence. • Consideration may also be given to apprehended violence orders; care and protection orders for a child for whom the person has or had parental responsibility; and professional disciplinary proceedings against the person.
NT	<p>The Working with Children Clearance Screening (Ochre Card) is comprised of:</p> <ul style="list-style-type: none"> • A National Police Check - offences of most significance included sexual offences involving children, violent offences involving children and drug related offences involving children. • An analysis of employment history, including an assessment of references and/or disciplinary proceedings instigated as a result of malpractice. • Other material, which may include assessing whether an individual has attempted to change behaviours or address triggers to behaviours if they have a criminal history.

Reporting child abuse

Children have a right to protection from being hurt, and from violence, abuse and neglect. No one likes to think of children being abused, but unfortunately child abuse is a reality. It is important that all those involved with children or young people are alert to the possibility of abuse and know what to do if they have concerns about a child's safety or welfare.

In Australia, state and territory governments are responsible for receiving reports of suspected child maltreatment from members of the public. Anyone who suspects, on reasonable grounds, that a child or young person is at risk of being neglected or physically, sexually or emotionally abused, should report it to the authority in their state or territory.

How do I know if a child is at risk of abuse?

Abuse can take many forms – physical, emotional, sexual, neglect. You may see suspicious marks or bruises, you may notice a change in the child's behaviour, or a child may say something directly about ill treatment.

What should I do if I am worried about a child?

If you think a child may be suffering (or has suffered) abuse or neglect, you must take action – the safety and welfare of the child must come first and may depend on you reporting your concerns.

- Act promptly, particularly in cases of suspected abuse or neglect which could be life threatening.
- Make a confidential, factual record of what you have seen or heard. Do this at the time of the event. Have this record with you when you make a report.
- Contact your local Child Protection agency or Child Wise.

When should I make a report to Child Protection?

- A child makes a disclosure of sexual or physical abuse.
- A child has a concerning or suspicious physical injury.

When should I contact the Police?

- If you believe a child to be in life threatening or imminent danger.

It is important to note that in Victoria, certain groups of people are required by law to report any suspicion of abuse and neglect of a child. Further guidelines regarding mandatory reporting can be found in Mandatory Reporting of Child Abuse and Neglect (<http://www.aifs.gov.au/cfca/pubs/factsheets/a141787/index.html>).

Child Protection authorities

State	Reporting authority	Phone	Address
VIC	Department of Human Services – Children, Youth and Families www.dhs.vic.gov.au	<p>Metropolitan East: 1300 360 391 South: 1300 655 795 North & West: 1300 664 977</p> <p>Rural Barwon South Western: 1800 075 599 Gippsland: 1800 020 202 Grampians: 1800 000 551 Hume: 1800 650 227 Loddon Mallee: 1800 675 598</p> <p>After hours (all regions) 131 278</p>	Level 9 50 Lonsdale St Melbourne, 3000
NSW	Department of Family and Community Services www.facs.nsw.gov.au	All hours 132 111	219-241 Cleveland St Redfern, 2016 Locked Bag 10 Strawberry Hills, 2012
QLD	Department of Communities Child Safety and Disability Services – Child Safety Services www.communities.qld.gov.au	<p>During business hours South East: 1300 679 849 South West: 1300 683 390 Far North: 1300 684 062 North: 1300 706 147 North Coast: 1300 703 921 Brisbane: 1300 682 254 Central: 1300 703 762</p> <p>After hours (all regions) 1800 177 135</p>	111 George St Brisbane, 4000 PO Box 806 Brisbane, 4002
WA	Department for Child Protection www.dcp.wa.gov.au	<p>During business hours (08) 9222 2555 1800 622 258 (toll free)</p> <p>After hours (08) 9223 1111 1800 199 008 (toll free)</p> <p>If you are a mandatory reporter: 1800 708 704 (24 hours)</p>	189 Royal St East Perth, 6004 PO Box 6334 East Perth, 6892

State	Reporting authority	Phone	Address
SA	Department for Education and Child Development <i>www.families.sa.gov.au</i>	All hours 131 478	31 Flinders St Adelaide, 5000 GPO Box 1152 Adelaide, 5001
ACT	Department of Human Services – Child and Youth Protection Services <i>www.humanservices.gov.au</i>	All hours 1300 556 729 If you are a mandatory reporter: 1300 556 728	219-241 Cleveland St Redfern, 2016 Locked Bag 10 Strawberry Hills, 2012
NT	Department of Children and Families <i>www.childrenandfamilies.nt.gov.au</i>	All hours 1800 700 250	PO Box 40596 Casuarina, 0810
TAS	Department of Health and Human Services - Child Protection Services <i>www.dhhs.tas.gov.au</i>	All hours 1300 737 639	GPO Box 125 Hobart, 7001

Support services

If a child is in immediate danger, contact the Police on 000

Other Support Services	Phone	Website	Email
Child Wise National Child Abuse Helpline	1800 99 10 99	www.childwise.org.au	helpline@childwise.org.au
Australian Federal Police	+61 262 233 000	www.afp.gov.au	
Kids Helpline	1800 551 800	www.kidshelp.com.au	counsellor@kidshelp.com.au
Life Line	13 11 14	www.lifeline.org.au	
Parentline	13 22 89	www.parentline.com.au	parentline@boystown.com.au
Child FIRST	1300 775 160 (Victoria)	www.dhs.vic.gov.au	

Location	Hospital	Phone	Address
Melbourne, VIC	Royal Children's Hospital	(03) 9345 5522	50 Flemington Rd Parkville, 3052
Sydney NSW	The Children's Hospital at Westmead	(02) 9845 0000	212 Hawkesbury Rd Westmead, 2145
Brisbane, QLD	Royal Brisbane and Women's Hospital	(07) 3646 8111	Butterfield st Herston, 4006
Perth, WA	Princess Margaret Hospital for Children	(08) 9340 8222	Roberts Rd Subiaco, 6008
Adelaide, SA	Women's and Children's Hospital	(08) 8161 7000	72 King William Rd North Adelaide, 5006
Canberra, ACT	Centenary Hospital for Women and Children	(02) 6244 2712 AH: (02) 6244 2222	Hospital Rd Tiwi, 2605
Darwin, NT	Royal Darwin Hospital	(08) 8922 8888	Rocklands Dr Casuarina, 0810
Hobart TAS	Royal Hobart Hospital	(03) 6222 8308	48 Liverpool St Hobart, 7000



Helpline: 1800 99 10 99

Phone: 03 9826 6344

www.childwise.org.au