

BCSA / CHILD PROTECTION SOLUTIONS
CHILD PROTECTION UPDATE / REFRESHER
PRE REQUISITE READING MATERIAL



**PLEASE NOTE THAT THIS MATERIAL MUST BE READ
PRIOR TO ATTENDING THE SEMINAR**

**IT WILL BE SUBJECT TO FURTHER DISCUSSION AND
ASSESSMENT**

The Office of Professional Standards for the Baptist Churches SA & NT operates under the absolute belief that churches should be safe places where people of all ages not only feel safe, but as far as humanly possible are safe. The Office of Professional Standards is responsible for the design and oversight of specialist child protection training, along with the implementation of a wide range of child protection and professional standards strategies.

Carl Collins was appointed the Independent Director of Professional Standards for Baptist Churches SA & NT in May 2006. He is a former senior child protection investigator, team leader and departmental children's court prosecutor with Protective Services Victoria (DHS). Carl later became the associate minister of the Marion Church of Christ-Adelaide for just over a decade.

Carl was a co founding Director of CACET Global (Child Abuse Consultancy Education & Training), and is now the founding Director of Child Protection Solutions (CPS). Carl has provided specialist training and consultancy to churches, schools, colleges, welfare agencies, government and non-government organisations, as well as police forces throughout Australia, the Asia Pacific Region and UAE for over two decades. Carl is highly experienced in the profiling of child sex offenders and is passionate about keeping children and the church/organisation safe.

THE BCSA/CPS CHILD PROTECTION TRAINING STRATEGY:

- The BCSA & NT strategy includes an initial 6 Hour Child Protection Training seminar for those identified within the BCSA & NT Child Protection Policy.
 - This seminar includes the accredited SA Department of Child Protection Mandated Notification Training certificate, however also includes additional modules that the basic Mandated Notification Training does not include.
 - Selected modules are also addressed at a far more in depth level, by highly experienced presenters consisting of former child protection investigators, prosecutors, counselors, and practitioners.
 - Additional modules that have formed a significant part of the BCSA/CPS Child Protection Training Strategy include - "The different types of child sex offenders and how they think, operate, groom and infiltrate churches, with an emphasis on **MAKING CHILDREN AND THE CHURCH SAFE**."

- Upon completion of the full day seminar, participants are then required to attend an update/refresher seminar every three years in order to keep the certificate current, which is a BCSA established standard.

PLEASE NOTE:

The above training is complimented and supported by a range of additional training seminars for selected pastors and leaders which include:

- The different types of child sex offenders and how they think, operate, groom and infiltrate churches, at advanced levels
- The identification of, assessment of and management of known offenders within churches. (Persons of Concern)
- Specific Person of Concern policy briefings/training seminars
- Child Protection & Professional Standards Policy briefings/seminars
- Child Protection Contact Officer (CPCO’s) briefing/support sessions.
 - In 2016 CPCO’s were appointed in all BCSA churches.
- Responding to critical incidents seminars

The Office of Professional Standards provides unlimited “on tap” Child Protection and Professional Standards support and consultancy to all BCSA & NT churches.

BCSA/CPS CHILD PROTECTION SEMINARS ARE NOT SIMPLY ABOUT CREATING A SAFE, WARM AND FUZZY ENVIRONMENT FOR YOUNG PEOPLE. THEY ARE DESIGNED TO “PROTECT” YOUNG PEOPLE AND THE CHURCH.

“The only thing necessary for the triumph of evil is for good men to do nothing”
Edmund Burke (1729-97)

PRE REQUISITE UPDATE / REFRESHER SEMNAR READING:

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Why Respond to Child Abuse and Neglect?

◆ Child abuse can kill children

Every year in Australia and overseas, a large number of children, particularly babies and infants, are killed by persons usually entrusted with their care or welfare, often by parents or step-parents

◆ Child abuse injures children

There is no doubt that physical injuries inflicted on children and infants can cause minor or serious injury, often causing permanent physical handicaps. The emotional damage to children can last a lifetime

◆ Abused children may feel worthless

Abused children suffer from an increased lack of self-esteem and worth. They believe they are of little value. Why else would their parents or other adults misuse them physically, emotionally or sexually?

◆ Child abuse breaks down trust

It is normal human nature that children trust those from within their own families. Abused children who learn that they cannot trust their parents or family, may well have difficulties in adult relationships when trust is required

◆ Abusive behaviors are transmitted to the next generation

It is well documented that abused children may go on to be abusing adults. Children learn about parenting from their own parents. Abused and exploited children are more likely than others to abuse their own or other children

◆ Child abuse is expensive to the community

The investigation of child abuse coupled with medical expenses, assessment and treatment of child abuse is a long-term commitment which is expensive. It also consumes a great deal of medical and counselling services that could be utilised in other areas

◆ Prevention of child abuse is better than treatment

Treating abused children is difficult and time consuming and in many cases, not overly effective. Similarly, the cost in both monetary and emotional terms in launching criminal investigations and subsequent court hearings is high. Preventative methods and programs would be more effective.

◆ Child abuse prevention programs work

There is evidence that the provision of adequate parental support, parental and community education can assist in reducing the incidence of child abuse

◆ Preventing child abuse will reduce other social problems

There is a strong correlation between child abuse and later involvement in crime, drug abuse, antisocial behaviour, poor social and mental adjustment skills and sexual difficulties. Some of these problems may not have arisen had they not been abused as children

◆ Commitment to child abuse prevention is a sign of a society's maturity

Naturally, we want children to grow free from abuse and exploitation. Our society's future depends on it

(Professor Kim Oates - Head of Paediatrics and Child Health. Sydney University)

Why are child abuse cases difficult and hard to prove?

Child abuse cases are always difficult and involve a great deal of emotional trauma for the victims, their families and friends, the witnesses, the investigators and even the offender's family and friends. Specifically though, there are a number of reasons why child abuse cases are difficult and hard to prove. They include:

- ◆ The abuse often occurs in a one on one situation
- ◆ Children are usually unable to protect themselves
- ◆ Offenders do not usually brag about abuse
- ◆ Cases can cross state and international boundaries



- ◆ The allegation is often investigated by inexperienced investigators or inexperienced police
- ◆ Children are not considered credible
- ◆ Interviewing children requires special skills
- ◆ Many children do not want the offender punished, they just want the abuse stopped
- ◆ Crimes often do not provide physical evidence
- ◆ Incidents occur over lengthy periods of time
- ◆ Children are often reluctant to provide disclosure
- ◆ The criminal justice system was not designed for the special needs of children
- ◆ Family members and friends are often in denial over abuse
- ◆ People do not want to become involved

(Professor Kim Oates - Head of Paediatrics and Child Health. - Sydney University)

The Rule of Optimism

The rule of optimism is the temptation to focus on the positive elements of a situation ignoring or minimising the negative effects. In many child protection situations, people feel more comfortable searching for the positives or strengths that distract them from acting on the negative effects of child abuse

The Discount Model

The discount model highlights four levels at which we may attribute the significance of the event or experience. These four levels are existence, significance, solvability and self. Work experiences, the experiences of those close to us and even this training program may all contribute to our own level of discounting when this is applied to child abuse and neglect.

EXISTENCE- “I think there is no problem”. At this level, a person does not accept that child abuse or neglect exists. Statements that children lie about sexual abuse, often reflect a refusal by an adult to accept that these problems exist.

SIGNIFICANCE- “The problem is not serious”. At this level, a person accepts that child abuse or neglect exists but refuses to accept that they are serious problems. Statements about them only happening in certain “types of families” etc are often attempts to discount the problem, to see it as something that affects a limited group of people and certainly not anyone in their own circle. Statements about abuse and neglect being harmless to children also deny the significance of the problems. Refusing to see these problems as significant is another level of resistance that may be used to justify inaction.

SOLVABILITY- “**There is nothing that can be done**”. The significance of the problem is acknowledged but is seen as too overwhelming to tackle. It is out of society’s control. Believing there is no solution to the problem justifies the refusal to even attempt to find one. The problem ends up in the “too hard basket”.

SELF- “**I can’t do anything – that’s for the experts**”. At this level a person accepts that child abuse or neglect exists, that it is a significant problem and that it may be solved. However the individual does not wish to be involved or is unable to see how one person can make a difference. Child protection is not seen as a personal responsibility but instead is that of governments and experts. This level resists personal investment.

(Families SA –Child Safe Environments Workbook)

What is child abuse?

Most child protection agencies and organisations throughout the world now recognise four types of child abuse. Some jurisdictions now also recognise domestic violence as a form of child abuse whilst others may also include self-destructive behaviours.

- Physical abuse
- Emotional Abuse
- Neglect
- Sexual abuse
- Domestic Violence

Physical abuse

Definition: Physical abuse occurs when a child suffers or is likely to suffer significant harm from an injury inflicted by a child's parent or caregiver. The injury may be inflicted intentionally or may be the inadvertent consequence of physical punishment or physically aggressive treatment of a child.

- Bruises
- Beatings
- Shaking
- Burns -heat
-dry
-wet
-friction
- Human bite or grab marks
- Pinching
- Fractures
- Lacerations
- Head or internal injuries
- Poisoning
- Smothering
- Strangling
- Neurological – shaken infant syndrome or other head trauma
- Animal attacks
- Normal versus abnormal (suspect) injury
- Munchausen's Syndrome by Proxy
- Death.

Behavioural indicators

- Wearing long sleeved clothes on hot days
- Demonstrating fear of parents
- Becoming fearful when other children cry or shout
- Being excessively friendly to strangers
- Being very passive and compliant

(Lt. Richard Tyler – Presentation package 1998)

Munchausen's Syndrome by Proxy

Whilst uncommon in Australia, Munchausen's Syndrome by Proxy cannot be overlooked. It is a baffling and obscure form of child abuse and can generally be said to manifest itself in four ways:

- **Perceived illness** – child taken to doctor time and time again and subjected to ongoing unpleasant treatments and examinations at the mother's insistence
- **Doctor shopping** – seeking help from a large number of doctors and persisting that their child is ill
- **Enforced invalidism** – some parents who have an ill or disabled child may seek to keep that child ill or increase their degree of illness or disability even when the child is not sick
- **Fabricated illness** – Fabricated or fictitious illnesses or symptoms resulting from parents who lie to doctors about their child's health, physical signs or alter health records.

(Article - Detective Senior Sergeant Joe Stanioch – Australasian Police Journal – September, 1994)

The term *Fabricated or Induced Illness by Carers or FIIC* (Royal College of Paediatrics and Child Health - 2002) is gaining popular use now as opposed to Munchausen's Syndrome by Proxy. It is seen as being more accurate as it describes a pattern of behaviour as opposed to an underlying psychiatric syndrome.

Emotional Abuse

EMOTIONAL ABUSE involves excessive or unreasonable parental demands that place expectations on children beyond their capabilities. Examples of emotional abuse include:

- Continual verbal abuse
- Put downs
- Rejections
- Isolation
- Threats
- Persistent teasing
- Ignoring or passive rejection of the child
- Withholding praise or affection.

Behavioural indicators

- Lack of self-esteem
- Habit disorders such as
 - thumb sucking
 - biting
 - rocking
 - feeding disorders
- Learning problems
- Extremes in behaviour
- Destructive behaviours to self or others
- Inappropriately seeks attention and affection
- Developmental problems
 - intellectual
 - physical
 - maturity (physical and emotional)

- Suicidal tendencies
- Overly compliant
- Sleeping disorders
- Speech disorders
- Extremely passive or aggressive
- Very demanding or undemanding
- Conduct disorders
 - withdrawal
 - antisocial behaviours
 - Stealing
 - Destructiveness
 - Cruelty to animals, peers, other children

Neglect

NEGLECT is the failure to provide a child with the basic necessities of life. It includes food, shelter, emotional security, medical and dental care and the inadequate supervision needed for the development of the child.

Indicators

- Frequent hunger
- Malnutrition
- Poor hygiene
- Inappropriate clothing
- Left unsupervised for long periods
- Medical needs not attended to
- Abandoned by parents
- Stealing food
- Staying at school outside school hours
- Often being tired, falling asleep in class
- Abusing alcohol
- Displaying aggressive behaviour
- Not getting on well with peers

Domestic Violence

Domestic violence can include a combination of physical, emotional and sexual abuse with an element of neglect. The violence may be carried out by a parent, caregiver, sibling, or another family member or person present in the home. Triggers to domestic violence include:

- Drug and alcohol abuse
- Lack of parenting skills
- Stress caused by financial, job or medical reasons
- Physical disabilities
- Poor childhood experiences
- Isolation

Indicators

- Low self-esteem
- Demonstrating fear of parents or of going home
- Aggressive or demanding behaviour at home or school
- Alcohol or drug abuse
- Nervous and withdrawn
- Anxious and fearful behaviours especially towards adults
- Developmental delays
- Bedwetting and other regressed behaviours
- Ongoing illnesses such as headaches, stomachaches
- Cruelty to animals
- A combination of behaviours
- Long-term effects such as violent behaviour passed on through generations

Sexual Abuse

SEXUAL ABUSE occurs when a person uses power or authority over a child to involve the child in sexual activity and the child's parent or caregiver has not protected the child. It is the exploitation of a child by an older person or an adult for the sexual stimulation/gratification of that person. Physical force is sometimes used. Sexual abuse includes:

- fondling,
- masturbation
- oral sex
- vaginal/anal penetration (sexual intercourse)
- digital penetration
- exposure to pornographic materials
- involvement in making pornographic materials
- child prostitution

Physical Indicators

- Trauma to genitals/anus
- Genital infection/discharge
- Sexually transmitted disease
- Painful urination/defecation
- Uncontrolled stooling (diarrhea)
- Painful to sit or walk
- Neck or other body part bruising from bites (love bites/hickeys)
- Presence of foreign matter (saliva, semen, pubic hair etc)
- Uninhibited and excessive masturbation

Other Behavioural Indicators

- A child telling someone that abuse has occurred
- Constant complaints of ill health
- Experiencing problems at school
- Inappropriate knowledge and or sexual play for their age
- Aggressive sexual behaviour
- Sexual aggressiveness towards peers/adults
- Seductive behaviour
- Sleep disturbances (Insomnia/nightmares)

- Resumption of bedwetting (enuresis)
- Excessive hygiene/washing
- Poor hygiene
- Withdrawal
- Overly compliant behaviour
- Alcohol/drug abuse
- Poor peer to peer relationships
- Runaway or delinquent behaviour
- Spontaneous crying
- Sudden and unexplained quantity of money or gifts (often expensive)

Why children don't report abuse

Children have certain characteristics that make them ideal victims from an offender's point of view. This includes the fact children are naturally curious, they are easily led by adults, they have a need for attention and affection, they often have a need to defy their parents and children generally make poor witnesses. The child victims themselves have a number of characteristics which often prevent them from disclosing abuse and exploitation. These include:

- Embarrassment
- Fear of being blamed/held responsible
- Fear of being punished
- Fear of exposure or labelling
- Fear that no one will believe them
- Blackmail
- Problems for boys with disclosure
- Family members involved
- Threats implied or expressed
- Guilt
- Secret
- Feeling of complicity or enjoyment
- **They just want the abuse to stop!**



Myths surrounding child sexual abuse

There are a number of myths and fallacies that surround child abuse cases and affect not only law enforcement officers, but the general public at large.

- **We only need to warn girls about being molested** – *girls are not the only targets; an equal number of boys may be victimised*
- **Children don't mind too much about sexual abuse or they would not allow it to continue** – *an understanding of the dynamics of child abuse and the Accommodation Syndrome clearly dispels this myth*
- **Children are somehow to blame** – *the child is never to blame. The abuse of a child is a volitional act by adults*
- **A mother would always know if her child was being abused** – *a mother is often the last person to know or realise her child is being abused*
- **It is the mother's fault if her daughter is sexually abused** – *in most cases where the mother is not a party to the offence, this statement is a complete fallacy*
- **Children are more likely to be abused by strangers** – *worldwide research and statistical data show that most children are abused by people they know or trust*
- **It is better not to report abuse to authorities as this will be more traumatic for children than continued abuse** – *failing to report abuse will allow the abuse to be*

ongoing with the likelihood of more victims being targeted. Early intervention is the key to ending child abuse

(The Sexual Exploitation of Children – CRC 1987 - Seth Goldstein)

FACE TO FACE training components of the update / refresher seminar will include:

- The BCSA Child Protection and Code of Conduct Policies
- South Australian Legislation
- South Australian Government Compliance requirements
- The BCSA Child Protection strategy
- Mandated notifiers
- Making a report/procedures
- Responding to suspicions / disclosures - What to do / what not to do
- Operating and staying within your framework
- How not to contaminate an investigation
- A range of frequently asked questions
- A snapshot of the different types of offenders and how they think, operate and infiltrate churches. (Introductory level only)
- Paedophile case study/example - Bob: How and I why I chose this church.

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