An interagency guide

WORKING TOGETHER

ME MUTU TĀ TĀTOU TŪKINO TAMARIKI
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INTRODUCTION

Everyone has a role to play in making sure New Zealand children are in loving families and communities where they can be safe, strong, connected and able to flourish.

Oranga Tamariki—Ministry for Children, is a new ministry dedicated to supporting any child whose wellbeing is at significant risk of harm now, or in the future.

- Our vision is that New Zealand values the wellbeing of tamariki above all else.
- Our purpose is to ensure that all tamariki are in loving whānau and communities, where oranga tamariki can be realised.
- Our belief is that in the right environment, with the right people surrounding and nurturing them, any child can and should flourish.

Guarding the wellbeing of our children is a huge and exciting challenge, and one that we know we can’t face on our own. It requires the involvement of multiple agencies working together, all playing their part in ensuring children and families can easily access the support they need, when they need it.

Vulnerable children and families also need the support of communities and iwi who are closest to them, who can bring them the connections, support and care required to support vulnerable children.

As a professional working with children and families, you play a valuable role in helping keep children safe. We need you to know what to look out for, and how to help the children and families you are worried about.

If you’re concerned a child may be at risk, call us on 0508 326 459.
By working together, we can achieve so much more to make sure children and young people are well cared for and thriving as part of their family and community.
About this guide

This guide is for people in social service agencies, schools, healthcare organisations, community and other groups who have contact with children and families. You may be the first to notice when things are not going right for families and when there are concerns about children.

The guide is designed to sit alongside your own policies for protecting children. It also complements the free one-day ‘Working Together’ child protection seminars that we run nationwide in partnership with Child Matters, and the free training and eLearning sessions run by Safeguarding Children Initiative.

Both this guide and the child protection seminars and training sessions aim to help you:

— understand your role in supporting vulnerable children and young people and keeping them safe
— recognise the signs that something could be wrong
— gain knowledge of how to respond and offer support
— understand what happens when we receive a report of concern
— build a network with others in your community.

To find out more about the ‘Working Together’ seminars, or to register your interest, go to www.childmatters.org.nz or contact the team on info@childmatters.org

To find out more about Safeguarding Children Initiative free seminars and eLearning modules, go to www.safeguardingchildren.org.nz
LOOKING OUT FOR VULNERABLE CHILDREN AND YOUNG PEOPLE

Take care of our children
Take care of what they hear
Take care of what they see
Take care of what they feel
For how the children grow
so will be the shape of Aotearoa.

*Dame Whina Cooper*

Vulnerable children or young people are those who are at significant risk of harm now and into the future. This can result from their family environment, their own complex needs, or because they have offended or may offend in the future. At any one time, 15% of children in New Zealand can be considered vulnerable.

**Factors contributing to vulnerability**

Every parent knows that raising children is a big job, and most people need a helping hand from time to time.

Families from any background can have problems that put their children at risk of abuse or neglect. Parents might feel stressed, there may be extra challenges in their family, or they might be trying to manage on their own.
There are some things though that can make families extra vulnerable:

- higher levels of deprivation, unemployment, housing struggles
- parents who have grown up in a violent or abusive environment
- family violence happening in their home
- problems with drug or substance abuse
- history of offending behaviours
- young parents raising children on their own, without support. This is more to do with the circumstances associated with being a young parent, like an unplanned pregnancy, low income or a lack of parenting knowledge
- no support and social isolation, particularly during times when there is a relationship breakup, or breakdown in support from extended family
- problems bonding with their children, or parents suffering from depression or mental health problems
- children with disabilities, emotional and/or behavioural difficulties
- unrealistic expectations or understanding of normal child behaviour, viewing children as disobedient or defiant
- little children – they’re more vulnerable and can get hurt easily.

Vulnerability often occurs within the context of multiple risk factors, which can increase the likelihood of child abuse and neglect.

Having these features of vulnerability doesn’t automatically mean children are in danger, but it might mean families need extra help, or we need to be keeping an eye out for worrying signs.

Sometimes, there won’t be obvious signs of something being wrong. You might just have a sense they are struggling.
Under-fives

Children under five can be an invisible group and sometimes they may rarely be seen outside of the immediate family.

In particular, babies under two are the most vulnerable, because they’re fully dependent on adults to care for them. It is also easier for parents to become isolated at this time, as children haven’t begun preschool and they don’t have as much contact with the outside world. This can make it harder for professionals or others in the community to spot when things are going wrong.

There are five key areas to think about with this group:

- **Vulnerability** – they are particularly vulnerable as they are dependent on adults, have limited ability to protect themselves and can’t seek help for themselves.

- **Visibility** – they can lose visibility among brothers and sisters as their needs become lost within the more obvious or vocal needs of the older children.

- **Attachment** – a secure and stable attachment is a key developmental need of this age group.

- **Brain development** – we know the first five years of a child’s life is a critical time in brain development; disruptions can have long-term impacts.

- **Cumulative harm** – repeat episodes of abuse can have a profound impact on a child’s development.
The earliest help is the best help

Whether it’s inside or outside work, as family members, friends, neighbours or workmates, we all have opportunities to support parents and help keep children safe.

If we notice things starting to go wrong for a child or the people caring for them, there are some helpful ways to get involved – by listening and supporting them, or putting them in touch with people who can help.

Things to look out for

Often children are neglected or harmed when parents don’t have the skills and knowledge to care for their children safely, or when the family system is not working well. Some things to look out for include:

– parents seem stressed or not coping or not bonded with their child
– they have employment or housing problems
– there are signs of drug or alcohol problems
– parents don’t have friends or family to help
– isolating, controlling and/or threatening behaviours
– adults are hitting or yelling or showing aggressive behaviour
– there are mental health problems
– there is a history of offending
– children are left home alone or seem to be neglected
– physical injuries
– children displaying bullying, aggressive behaviour
– parents haven’t accessed services that could help
– the family or child is socially and/or culturally isolated.
Ways to help

The sooner we reach out, the sooner they can get help, and we might stop more serious harm down the track. Ways you can help include:

— listening, and letting them know you’re there to help
— providing encouragement and offering practical support
— linking them with others who can offer the support they need
— talking to someone experienced, for a different point of view or ideas for helping
— if the family won’t accept your help, letting someone in the community know you’re concerned; this could be someone like a family support worker, or church leader.

You can call us if you’re worried about a child. You will be able to talk to a trained social worker who will listen to your concerns. We can work out what the problems are and whether we need to work with the family, or put them in touch with people in the community who can give them the right support.
See more information about ways to help in the ‘Your role in keeping children safe’ section of this guide.
UNDERSTANDING ABUSE AND NEGLECT

What is child abuse?

“Child abuse means the harming (whether physically, emotionally or sexually), ill-treatment, abuse, neglect or deprivation of any child or young person.”

This is the legal definition of child abuse, from section two of the Oranga Tamariki Act 1989 (this Act was previously known as the Children, Young Persons, and Their Families Act 1989).

While there are different definitions of abuse, the important thing to think about is the overall wellbeing or risk of harm to the child.

Clusters of signs

If you’re concerned about a child, it’s not so important to be able to categorise the type of abuse you think may be going on – it’s normal to feel uncertain. However, if you notice a pattern forming or several signs that worry you, this could be an indication something is wrong.

All types of abuse tend to involve some form of emotional abuse. For example, a child who is physically assaulted will likely also suffer emotionally from the adult’s behaviour, and will probably also experience neglect.

Harm is often cumulative. A child’s sense of safety, stability and wellbeing is often reduced by a series or pattern of harmful events and experiences. These may be interrelated, and maltreatment may recur over prolonged periods. The daily impact on the child can be profound and exponential.
Clusters of signs may include:

- physical injuries
- behavioural concerns including bullying and aggressive behaviour
- developmental delays, changes or signs
- ongoing persistent neglect
- the child talking about things that may indicate abuse (sometimes called an allegation or disclosure)
- high levels of anxiety or lack of self-esteem
- risk taking and/or harmful behaviour
- the family environment.

**Some things to think about**

Every situation is different, so it’s important to consider the child’s whole life and environment. Sometimes these signs could be the result of life events, such as divorce, accidental injury, the arrival of a new sibling and so on.

If ever you are concerned though, ask yourself the following questions:

**What is going on in the family or child’s life that could be affecting them?**

- Is the child’s behaviour a sign of abuse, or are there other things going on in the family (eg dad is depressed, or the family have been evicted from their home and don’t have anywhere else to go)?
How is the child behaving?

– Children can’t easily describe what they are feeling, so their emotions often come out in their behaviour.

– If a child seems unusually difficult or withdrawn, aggressive or anxious, this may be a sign something is not right at home.

How is the child developing?

– If a child is suffering from abuse or neglect, this may affect their development in a number of areas.

– This should be assessed by professionals, whether it is abuse or not, so they can get the right help.

Has the child or family hinted at, or said, something is wrong?

– The child may be looking for ways to tell you something is wrong, so listen and watch them carefully and take what they say seriously.

Are there signs of family violence?

– People experiencing family violence may seem fearful or nervous, lack confidence, and feel sad or angry a lot.

– Children need to be protected from family violence, so need the help of adults around them.

Do you sense the family is struggling, or the child is at risk in some way?

– You might have a feeling that things aren’t right, but there are no actual signs of abuse, and you can’t quite put your finger on the problem.

– If you’re worried, talk to someone.

Maybe talking with the family will put your mind at rest, or give you a steer on what’s happening. Or you could talk with colleagues or others working with the family.
If you see something that concerns you, give us a call. We’ll be happy to talk it through with you.
Types of child abuse and spotting the signs

This section gives you information about the different types of abuse, and the warning signs associated with them. For more detailed descriptions, check out the appendices section at the back of this book.

**Neglect**

Neglect is the persistent failure to meet a child or young person’s basic needs when reasonably able to do so. It may involve, but is not limited to:

- physical neglect - not providing the necessities of life like a warm place to live, enough food and clothing
- neglectful supervision - leaving children home alone, or without someone safe looking after them during the day or night
- emotional neglect - not giving children and young people the comfort, attention and love they need through play, talk, and everyday affection
- neglect of medical care - the failure to take care of their health needs
- educational neglect - allowing chronic truancy, failure to enrol children and young people in school, or inattention to special education needs.

Neglect is the most common form of abuse and although the effects may not be as obvious as physical abuse, they are just as serious, leading to damaged self-esteem and a lost opportunity to thrive in the world.

Children who are neglected may show a combination of behavioural and physical signs. As with every type of abuse, look for an overall pattern
telling you something’s just not right for this child, and think about what you can do to help:

- **Looking ‘rough’ and uncared for** – kids might be extremely dirty and not have the right clothes to keep warm and dry. Neglected children may also be underweight or small for their age because they’re not getting enough, or the right sort of, food.

- **Persistent nappy rash or skin disorders** – can be an indication children aren’t being well cared for.

- **Out and about unsupervised** – if the child is left alone or doesn’t have a safe home to go to, they might spend lots of time at the neighbours, steal food, or regularly hang out at school or on the streets. Neglected and abused kids are at greater risk of drug and alcohol abuse, and can drift onto a dangerous pathway to offending.

- **Falling behind in their school work and attendance** – sometimes coupled with poor speech and social skills, or other developmental delays - is a sign kids are not getting the support and nurturing they need.

- **Indiscriminate attachment to adults** – strong attention and affection seeking, or a severe lack of attachment to their own parents can be a sign of neglect.

It’s important to think about neglect within the context of other things that might be happening, including parental physical or mental health issues, substance abuse, the family being unwilling or unable to make changes, or being disengaged or isolated.
Emotional abuse

Emotional abuse is often a persistent pattern of behaviour towards a child or young person, but can also include a single severe incident (such as witnessing a serious assault). It may involve, but is not limited to:

- persistently withholding affection
- eroding their sense of self-worth and self-respect
- conveying they are worthless, unloved or inadequate, or valued only if they meet another person’s needs
- causing them to live in fear
- having expectations that are significantly inappropriate for their development or age
- deliberate or persistent disregard for their cultural identity and wellbeing.

This list is not exhaustive and you should always consider the actual or potential impact on a child or young person. As emotional abuse is a component of all abuse and neglect, the signs are often encompassed in the other abuse types. You may often see the same indicators as you would for neglect, along with other signs particular to emotional abuse.

A child who is emotionally abused may show the following signs in addition to what you’d expect to see from neglect:

- sleep problems like bedwetting or soiling with no medical cause, nightmares and poor sleeping patterns
- extreme attention seeking behaviours
- being overly compliant
— frequent physical complaints – real or imagined such as headaches, nausea and vomiting, and abdominal pains. This might coincide with the child being very underweight or dehydrated
— signs of anxiety – including poor self-esteem, being unable to cope in social settings and sometimes obsessive behaviour
— talking about hurting themselves or ending their lives.

The effects of emotional abuse may only become evident as the child gets older and begins to show difficult or disturbing behaviours.

Note that these signs could also point to other things going on in the child’s life, so think about the wider context. As with neglect, in situations where the potential harm to a child is significant, the concerns are persistent and/or the parents are disengaged or isolated, call us to talk about or report your concern.
Physical abuse

Physical abuse is a non-accidental act resulting in physical harm to a child. It may involve hitting, shaking, throwing, burning, biting, poisoning, cutting, strangling or anything else that could cause a physical injury.

If you’re worried about a child being physically abused, the signs to look out for are:

- unexplained bruises, welts, cuts and abrasions – particularly in unusual places like the face, on their back or tummy, buttocks, or the backs of their legs. Also look out for the regularity of these injuries to see if there is a pattern forming

- unexplained fractures or dislocations – many kids are active resulting in bumps and breaks, but people need to be thinking about how and why these injuries happen. Especially worrying are fractures to the head or face, and hip or shoulder dislocations. Be very concerned if this is happening in young babies, who are not moving around enough to accidentally hurt themselves

- scalding or burn marks anywhere on the body are concerning, and if not easily explained need to be notified. Be mindful of burns in the shape of an object like a stove ring or iron, cigarette marks or rope burn

- the child or their parent can’t recall how the injuries occurred, or their explanations change or don’t make sense

- behavioural concerns – including aggression, destructive nature, mistrust of adults, anxiety and restlessness, relationship difficulties.
Call us if you have concerns around physical abuse of a child or young person.
**Sexual abuse**

Sexual abuse can involve, but is not limited to, forcing or enticing a child or young person to take part in sexual activities.

The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

It also includes non-contact activities, such as involving a child or young person in looking at offensive materials, or producing sexual images, watching sexual activities, or encouraging them to behave in sexually inappropriate ways.

It often begins with some form of grooming, which is when the person prepares the child for sexual contact by lowering their inhibitions and gaining their trust – this includes via the internet and social media.
The following signs may indicate a child is being sexually abused, so call us straight away if you notice:

- Physical indicators – like unusual or excessive itching, bruising, lacerations, redness, swelling or bleeding in the genital or anal area, and urinary tract infections. Be concerned and ask questions if there is ever blood in a child’s urine or faeces, it’s painful for them to go to the toilet, or if a child is showing signs of being sexually active. When pregnancy or a sexually transmitted disease is identified, abuse must always be considered, especially in girls under 16.

- Torn, stained or bloody underclothing.

- Age inappropriate sexual play or interest and other unusual behaviour like sexually explicit drawings, descriptions and talk about sex.

- Fear of a certain person or place – children might be trying to express their fear without saying exactly what they are frightened of, so listen carefully, and take what they say seriously.

- Exposure to or involvement in pornography or prostitution.

Some children may also purposefully try to make themselves unattractive, or try to feel clean through obsessive washing.
ENCOURAGE CHILDREN TO SPEAK UP

As adults, we consider sexual experiences to be very private and we don’t usually talk about them openly. It’s useful to think about how extremely difficult it must be for a child to talk about these – especially if they’re feeling confused, or being threatened by a person.

Children may not know what to say, and may try to find different ways to express what is going on. Encourage children to talk to you or another trusted adult if they feel bad or uncomfortable about any relationships – whether a friendship, a relationship with an adult, or an online interaction.
See Appendix 1 for more detailed descriptions of the warning signs of abuse and neglect, including:

- physical signs
- behavioural signs
- developmental signs
- family signs.

As well as the signs outlined in Appendix 1, keep a careful eye out for children:

- with eating disorders and substance abuse
- who are disengaged or needy of adult attention and acceptance
- with very aggressive behaviour towards toys, people or pets – they may be acting out what’s happening to them
- who don’t want to go home or be with certain people
- with feelings of low self-worth and loneliness.
Everyone in a family should feel safe and nurtured. Any behaviour that makes someone feel controlled or fearful is never okay. Family violence includes yelling and hitting, as well as threatening to harm people, pets or property. It covers the range of abuse types – it can be physical, emotional and sexual – and victims suffer in all these ways.

Children are always affected when there is violence in the family. Even if they’re not being physically harmed themselves, they will be emotionally harmed. Children might fail to get the love and attention they need because parents are caught up in their own troubles, or they’ll be frightened and insecure from the violence they’re seeing or hearing. They may fall behind in school, bully others, or show a range of other behaviours and warning signs.

As well as children, you may be concerned about their parents or caregivers. Research shows women and children are the most likely victims of family violence, although men can be victims too.
Some warning signs in adult victims:

- physical injuries including bruising on the chest and abdomen, injuries during pregnancy, multiple injuries, or patterns of a repeated injury
- depression, headaches, sleeping and eating disorders
- panic attacks, drug abuse and dependency on tranquilisers and alcohol
- the person gives explanations that do not fit the other signs, and is fearful, lacking in autonomy or self-worth.

Some likely behaviours by perpetrators include:

- isolates and controls their family, and may force them to move frequently
- threatens, criticises, intimidates, and uses aggressive and physical abuse towards their partner and children
- threatens to, or actually harms pets
- is sexually controlling and may force sex on their partner
- minimises and denies their own behaviour, or blames the victim for their own behaviour.

No one should ever feel scared or unsafe in their own family. Together, we can help stop family violence in New Zealand, and help children to be safe, strong and thrive in their own families and whānau.

Children can’t speak up for themselves, and struggling families may be too ashamed to ask for help. If a child needs to be kept safe, they need someone to speak up for them.
COMMON SCENARIOS

This section includes some common scenarios at different ages and stages of development, to help you work out if things are wrong and how to help.

A baby has a bruise or other injuries; when should I be worried?

- It’s unusual for a baby who’s not walking or crawling to have a bruise. There may be a simple explanation for the occasional bruise, but remember until they’re able to move about it’s hard for a baby to hurt themselves.
- If something seems odd about the bruises, they are recurring, they are in an unusual place, or the caregiver’s explanation doesn’t seem quite right, there may be cause for concern.
- If a baby has serious cuts and abrasions, or you suspect injuries around the head or face or a fracture, you should definitely call a doctor.
- Trust your instincts and give us a call if you’re worried. It’s the job of our trained social workers to assess whether the baby is safe, the family needs help or a community group can support them.

A baby seems floppy and unresponsive; are they ill or has an adult harmed them?

- Something is wrong if a baby is floppy, overly drowsy, pale, or has cold extremities.
- These signs are serious, and you need to get help urgently. Call the doctor or 111 for emergency medical help.
- If there are symptoms of dehydration it could mean that the baby is underfed; the doctor will be able to assess this. This does not mean an adult has deliberately harmed them, but it could mean the parents are struggling to care for them.
- Whatever the reason, signs like floppiness, unresponsiveness, rapid pulse and rapid breathing are serious. It may indicate shaken baby syndrome, so always get medical help straight away.
WHAT IS SHAKEN BABY SYNDROME?

This is the name given to injuries that can happen when a baby is shaken. A single shake can cause bleeding in and around the brain. This can lead to permanent brain damage, leave a baby blind, deaf, paralysed, with seizures, delays in development, or even death.

Babies who have been shaken might be vomiting and could have signs of bleeding in their eyes. They might seem floppy and unresponsive. There can be a delay between shaking and seeing the signs, so if you think a baby has been shaken, get medical help straight away, even if it doesn’t look serious at first.

How can you help keep babies safe?

Talk to the parents you work with about shaken baby syndrome, and about making sure they never leave their baby with someone who has a problem with anger or violence.

Teach them how to handle their baby’s head and neck with great care.

Help parents to make a ‘crying plan’. Injuries to children, including shaken baby syndrome, are most often caused because a baby won’t stop crying and caregivers become frustrated and can’t cope.
What about a child who has bruises or injuries - when should I be worried?

This can be a confusing area, as scrapes, bruises, cuts and even the occasional broken bone is all part of growing up. There's no easy answer to this question, so trust your instincts and talk to us if you're in doubt.

If you're concerned, think about the following things:

- Are the injuries on several areas of the body?
- Are they in unusual places – like the softer parts of the body such as the inside of arms and legs?
- Is there a pattern to the bruises, scrapes or cuts, or do they look suspicious; for example, bruises with defined edges or in the shape of an object?
- Do the injuries reoccur?
- If there are burns, do they look like there has been force, or immersion? Remember, a child would normally pull away from an accidental burn.
- Fractures, head injuries and abdominal injuries are always serious – you need to make sure the child sees a doctor, and talk with the doctor about your worries.
- What does the child say about how they got their injury?

Keep a record of when and where you notice these injuries, and ask the parents how they happened. If there seems to be a pattern over time, or the family's explanations don't add up, then contact us. If you're worried, please don't wait – call us, and we will assess the situation to see if the child needs help to be kept safe and well cared for.
A child is turning up to school or kindy looking scruffy and dirty – what’s normal, and what should I worry about?

It’s very normal for children to have bruises, scrapes and they may even look a bit dirty and unkempt. This doesn’t mean they’re not being well cared for. It can help to ask yourself the following questions:

— Does the child have suitable clothing for the weather? Do they have shoes and protection against the cold, and lighter clothing when it is warmer?

— Do they seem hungry, or are they taking food from others?

— Is the child being kept adequately clean and hygienic? Remember that kids do get dirty, and people have different ideas about hygiene.

— Over time, does the child seem to be well cared for? How often does the child seem to be cold, hungry or dirty?

— Are they reluctant to go home, or are younger children left to find their own way home?

— Are they often sleepy or distracted at school?

If you’re worried the family is struggling to provide for their child, ask how they are doing and show you care. Offer to help – you may be able to put them in touch with a social worker in their school, or community service that can help with food, clothing and other basics. They may just need some parenting support, and there are lots of community groups that can offer this.

Check out the contacts list at the back of this guide, or you can give us a call to talk through your concerns.
A child is often missing from school or kindy, not turning up or away for days at a time. Should I be worried about them?

As a professional, you should talk to the family about why the child is away from school so often. There may be a valid explanation, such as the child’s health, in which case you are in a good position to get them extra support if needed.

It could also be a sign the family is struggling or becoming isolated, especially if the family is very negative towards your enquiry. Families having trouble may not want professional help but it’s our job to make sure all children are protected and kept safe.

I can’t put my finger on it, but the child doesn’t seem to be acting as I’d expect for their age. They seem immature, withdrawn and they are generally sad. What does this mean?

Part of growing and developing is learning how to manage your feelings, but if something is going wrong in a child’s life it will come out in their emotions and behaviour. If a child is withdrawn, aggressive, anxious, fearful or even overly responsible, it could be a sign things are not right. It may not indicate abuse and could be the result of other life situations.

If there are life issues, such as a death or upheaval, the family will likely be responsive to your help. Be mindful of the child and, if possible, work with the family to help them through. If you suspect it could be abuse, give us a call and talk about your worries.
Look for clusters of signs:

What physical, behavioural or emotional problems are you seeing? Is there a pattern emerging?

Don’t assume, but do care enough to take note and call us if you’re worried.
A child or young person’s explanations for their injuries don’t seem to add up. I’m not sure though, and I don’t want to interfere. Should I say something?

Most children will readily give you an explanation for their injuries. If they don’t seem sure of what to say, don’t want to talk about it, or their explanations seem unlikely, it’s concerning. Many professionals feel anxious about coming to the wrong conclusions, and it’s natural to feel uncertain about what’s going on.

Even if you’re not entirely sure about what is happening in a child’s life, it’s your responsibility to think of the child’s safety and the law tells us this must always be your first consideration.

You’re not interfering if you’re acting with professional integrity and, even as a member of your community, it’s your role to help keep children safe. Trust your instincts and talk through your concerns with us – it’s our job to work out whether these concerns might indicate abuse.

**A young person is self-harming and seems depressed. What’s going on and how can I help them?**

Unfortunately self-harming is not uncommon for young people, and sometimes it can be about abuse. Whether it is or not, the young person needs professional help and a support network to surround them.

People who self-harm will usually try to keep it a secret. They might injure themselves in places that can be easily hidden, and will be very careful not to show the damage. Signs a young person is self-harming include:

- unexplained cuts, bruises or cigarette burns, usually on the wrists, arms, thighs and chest
- insisting on keeping fully covered at all times, even in hot weather
- signs of depression, such as low mood, tearfulness, a lack of motivation, or lack of interest in anything
— changes in eating habits, or being secretive about eating, and any unusual weight loss, or weight gain
— signs of low self-esteem, such as blaming themselves for any problems, or not thinking they’re good enough for something.

Self-harming and other destructive behaviours, like eating disorders or abusing drugs and alcohol, need professional long-term help. As a professional, you need to be mindful young people in this space may be at risk of suicide. Talk to their parents and support them to seek help. There are also people like school guidance counsellors and social workers in schools who can provide support. Just take action, and don’t assume it’s not serious.

If this behaviour is part of a cluster of signs making you think the young person may be suffering from abuse, or the parents are not supporting them to get help, please call us.

**A teenager is pregnant. When should I assume it’s the result of a teenage relationship, and when should I worry they may have been sexually abused?**

If a young woman is pregnant she will need help and support and the opportunity to talk about the circumstances with someone they trust. Her family will also need support. Pregnancy in younger girls should be followed up by professionals such as a school guidance counsellor, doctor or a social worker.

If you have any worries or concerns about her safety, or the circumstances around her pregnancy, call us or the Police.
YOUR ROLE IN KEEPING CHILDREN AND YOUNG PEOPLE SAFE

Children and young people will only be safe when the whole community surrounds them and cares. We all have a role to play in making sure our children are safe and surrounded by people who care. As friends, family and professionals, you’re often the best people to give a helping hand.

If you know the child, young person or their family, or are involved with the services and supports available to them, you’re likely to be asked to come together around the family group conference table.

Professionals may also be taking part in Children’s Teams and local community groups. Shared accountability means more people are responsible for reshaping services for better outcomes for our country’s vulnerable children.

When we each play our part in looking out for children, we can do so much more to provide help early, stop things getting worse for families who are struggling, and make sure our children can grow up safe and strong.
When children talk about abuse

A child may try to find different ways to tell you they are suffering from abuse or neglect. Talking about what has happened is really scary for children. This means they may try to say things in a way that is tentative, vague or uses other people’s names or places.

Sometimes they’ll say things very quietly or simply make hints. They might act out with dolls or toys, or use words that aren’t right or right for their age. They might tell you through art work, stories and poems, or by their behavior. It’s really important to listen to what they’re trying to say, be understanding and take what they say seriously. It is unusual for children or young people to make up situations of abuse.

It’s important to be vigilant to all the ways children tell us. More important than understanding what each type of abuse is, is doing something if you’re worried. Even if you’re not sure what’s wrong it’s important to talk with someone.
If a child tells you about abuse, here are some guidelines to follow:

**Listen and be reassuring**

It’s really important to make a child feel safe in telling you. Listen to them and:

— accept what they have to say (make sure you don’t say anything critical like, ‘Why didn’t you tell me sooner?’)

— don’t question or be too quick to fill the silences – give them time to talk

— let them know it’s good they told you about it

— let them know it’s not their fault

— let them know it’s not okay for things like this to happen to kids

— remain calm yet confident and keep your voice low and gentle

— tell them you will get help.

**Don’t promise confidentiality**

The best response might be ‘thank you for telling me about that, now I need to talk to someone so we can make sure you’re safe’.
Write it down
As soon as possible, write down what the child tells you, using the same words they used, and how you responded.

Don’t question or interview the child
Make sure you don’t question the child further, as this may interfere with the information they’ve given.

Call us or the Police
Call the Ministry on 0508 326 459 or the Police on 111 as soon as possible. You can ask for whatever advice, assistance and support you need.

Keep the child safe
Make sure the child knows they’re safe, and have done the right thing in telling you.

Don’t let anyone who may be involved in the abuse know the child has said anything to you. You can talk to us about how to manage this.
What to do if you're worried about a child

As a professional, you will likely come across difficult situations where you have worries about a child or young person. Usually your instinct will tell you something is wrong, but you can be unsure of the best thing to do. Sometimes there are no black and white answers.

Think about the situation from the child’s view – what do they need to be safe and well cared for, and who are the people who can help make that happen?

How well you know the family, or your role in working with them, will help you make a judgement about what sort of help will be best, or who else might need to be involved in helping them. It can be helpful to talk to other professionals like a GP, teacher, or nurse who might already be working with them. This might help build a stronger picture of what’s happening, what supports might already be in place, and what level of help they might need.

The main thing is that you take notice and take action.

If you are worried about a child:

- Trust your instincts – if you sense something is wrong, trust your instincts and don’t be afraid of getting it wrong.
- Spot the warning signs – familiarise yourself with the signs talked about in this book.
- Listen – take notice and listen carefully to what people say. Are you picking up signs that the family is struggling or trying to ask for help?
— Talk to other professionals — are your health and education colleagues working with this family? Are they also noticing signs that build a picture that something’s not right, and that the family needs professional help and support?

— Contact a Children’s Team if there’s one in your area, or other agencies and helplines that can provide advice and put you in touch with people who can help. See the list of contacts at the back of this guide.

— Talk to us — our social workers are trained to work out what kinds of problems a family might be having, and find the best ways to help keep their children safe. You might want to talk your concerns through with one of our hospital based social workers, someone from your local site, or our contact centre social workers.

A final point to remember is you’re not going to make something worse by taking action. You might worry about ‘what if I’m wrong’, but what if you’re right? Just think, ‘Can I sleep at night with this information? If I were to wake up in the morning and something had happened to this child, would I be confident that I did everything I could have done?’

When you suspect there’s serious harm, or risk of serious harm, to a child or young person call us on 0508 326 459

If you believe a child to be in immediate danger call the Police on 111
Offering help to families

The best help is early help, prevention and building relationships. By recognising a family may be struggling and linking them up with the right help early, we can prevent things from getting worse down the track.

If you have concerns, sometimes all it takes is talking to the parents and offering your help. As a professional, you can:

— be a listening ear
— offer encouragement
— talk to someone to get further advice and support
— put people in touch with those who are there to help.

If you’re working with families it’s good to be part of a network of organisations who offer a range of services. Other people might already be working with the family, and be able to provide some context into what’s happening and the best way to help.

Check out the contact list at the back of this guide for more information about what help is available.

Whether it’s as family members, friends, neighbours or workmates, we all have an opportunity to support parents and help keep kids safe.

Speaking up for our children

As professionals and members of our community, we’re responsible for protecting our children and young people. We need to speak up because children may be scared, not know how to speak up for themselves, or the people they should be going to for help may be the ones harming them.

Don’t assume someone else will take care of it, or things will straighten themselves out.
The things to look out for in children will vary, and might not be specific to one particular type of abuse. If they’re being maltreated, kids will show a range of signs telling you they are sad, frightened, and not being cared for in a way all children deserve.

'Five sets of eyes on under fives'

When children are young, especially before they start school, it’s easy for parents to become isolated and for problems to go unnoticed. The more people there are looking out for children, the safer they’ll be.

‘Five sets of eyes’ focused on looking out for the under fives will help ensure their safety and wellbeing. They might include a household member, someone from extended whānau, a healthcare professional like a Well Child nurse or the family GP, a teacher, or someone from the community.

Even if you work with older children, as a professional working in your community you are in a great position to be a ‘pair of eyes’ looking out for our children and young people.

If you have concerns, sometimes all it takes is talking to the parents and offering your help. If you are worried about a child, give us a call.

**VOYCE - Whakarongo Mai**

This is a new and independent connection and advocacy service for children and young people in care. VOYCE - Whakarongo Mai helps give care experienced young people a community to belong to and ensures their voices and views are more clearly heard when decisions are made, and that they have a bigger influence in developing systems.

If you’re working with a child or young person in care, make sure they know about this service.

Check out the website to find out more [www.voyce.org.nz](http://www.voyce.org.nz)
CONTACTING US WHEN YOU’RE CONCERNED

Child abuse is really hard for most of us to think about and we struggle to believe it might happen to someone we know. While there may be other reasons for the signs you’re noticing, the most important thing is to make sure children are safe.

Call us anytime on 0508 326 459 if you:

— are concerned about a child or young person and want some advice
— think a child or young person may be unsafe or in danger of harm
— think a child or young person may be suffering from ill-treatment, abuse or neglect
— are not sure whether you need to be concerned, and want to talk things through.

Useful hints for when you call

When you call us, it helps to have as much information to pass on as possible.

It’s often helpful to write down all the information you want to give us, and then check off your list as you talk it through. This might include:

— your concerns
— details of incidents including dates
— details about the child or young person and their family, for example names and addresses
— the reasons why you think this child is at risk, or suffering abuse or neglect
— if you’re aware of any other times when the family or child has been involved with us or the Police.
You may have been keeping a diary of events, and noticed patterns or clusters of signs emerging. Please share with us all the information you have about your concerns.

**How we respond**

When you call us with concerns, a social worker follows up your call to assess what needs to happen to keep the child or young person safe. There’s a range of ways we can respond, to find out the family’s problems, strengths and solutions so they can be supported. Depending on your work and your involvement with a child or their whānau, we may involve you in some of our work, for example Gateway Assessments or attending the family group conference.

**Initial contact**

When you call us on 0508 326 459, you’ll be able to talk to one of our social workers. They’ll ask you questions to find out what’s going on with the family or children you’re worried about. They will:

- enter the information you give us into our database
- make an initial assessment of the child and family's situation
- determine the urgency of the concern
- determine whether we need to do anything further, or if the child or young person's needs could be better met by another agency
- make a note of your call, and contact you to let you know how we have responded to your concern.

If we need to look into the matter further, the contact centre will refer your call to the local Ministry site office, where social workers will follow up your concerns.
Following up your concerns

If the site office has no immediate concerns for the child, but the family needs some support, we’ll put them in touch with groups in the community who can help.

If we’re at all worried about the children, we’ll work out the best way to support the family while keeping the children safe.

Depending on our level of concern, we might partner with someone in the community to link the family to the right services, or continue working with the family ourselves.

Investigations

In very serious situations of abuse, we carry out a formal investigation with Police.

We have a special protocol in place with Police to make sure we are working closely together to protect the child, and hold the perpetrator to account.

An investigation involves us:

- consulting with the Police and agreeing what actions need to be taken in the investigation plan, including whether we need to get more evidence and how we’ll do that
— working with the Police to establish the facts
— engaging directly with the child or young person to establish their safety and wellbeing.

This is usually done with Police as part of the investigation plan.

**Assessing wellbeing**

When we are worried about children, we work with their whole family to understand their strengths and vulnerabilities. This involves assessing the child’s needs, their parents’ capacity to safely care for them, and their environment.

We use the Tuituia framework to guide our assessments and help us understand what’s going on for the family, and the best way to help.


We also have specific frameworks we use to ensure our work is culturally responsive:
— Te Toka Tumoana within a Māori context
— Va’aifetu within a Pacific context

You can find out more about these and other assessment tools on our Practice Centre [www.practice.ot.govt.nz](http://www.practice.ot.govt.nz)
How we work with families

Depending on the level of our concern, and the needs and strengths of the child and their whānau, there are different ways we might work with the family:

**Partnered response**

This is a less formal way of working with families, whānau and their tamariki. Sometimes it just means helping families and whānau find and use services that the community already provides. This happens after an assessment has been completed. If the caregiver agrees, we’ll make a referral to a community service provider.

We’ll then work with the provider of the services being used – to make sure the child or young person and their family is getting the help they need, and consider any other services or support that might be required.

**Children's Teams**

Children's Teams are established in a number of key areas across the country, making sure vulnerable kids are safe from harm and that they can thrive, achieve and belong. They are made up of practitioners and professionals from across government agencies, NGOs, iwi and the community. They come together to accept referrals and make the best quality decisions for a child, ensuring the right mix of services is delivered earlier and better.

The Children's Team assigns a Lead Professional to each child identified as needing further support. They become the main point of contact for a child, who is likely to already have a number of relationships with different services. The Lead Professional brings together all of the different people involved in a child’s life to form a Child Action Network. They look at the whole picture to develop and implement a Child’s Plan, which the Lead Professional takes to the Children's Team.

A child and their family must agree to being supported through the Children's Team.
Family group conference

The family group conference is at the heart of the way we work with families. It ensures the whole whānau is supported to make their own decisions about the best way to ensure safe, stable and loving care for the child or young person.

It’s a formal meeting where family and extended whānau come together with professionals to talk about the concerns we have for their child. Together, they come up with a plan to ensure the child can be kept safe and well cared for, and the family gets the help they need.

When children need to come into our care

Where there are serious concerns about harm or wellbeing, we’ll prioritise children’s need for a stable and loving family at the earliest opportunity.

Whenever possible, we support families so they can care safely for their own children. However, there are times when children aren’t safe at home and they need to live somewhere else for a while.

The only reason social workers or the Police can remove children from their home is to make them safe. When they take a child or young person into care they must have good reason to believe the child or young person has been harmed or is in danger of harm, and the Family Court must agree with this.

Our first priority is to find family members or someone they know well to care for them. We look for people within the child’s whānau, hapū or iwi.

When there’s no one in the extended family who can provide the right care and support for the child, we have caregivers who open their home to children and young people.

Whether whānau or non-whānau, all caregivers are assessed before a child or young person is placed with them.
Working with families so their children can return home

We work with families so they can make the changes they need for their children to be able to return home, and be safe and well cared for with them.

Depending on how serious the issues are, children can be away from home for just a short time or for a while, as we work with their family to help them make the changes they need.

If they can’t make these changes, and it’s not safe for the child to go home, we work to find the children a home for life with extended whānau or a family where they will be cared for and nurtured and feel a sense of identity, belonging and connection.

Finding out more about the way we work

We have policies, frameworks, guidance and resources to guide the way we work with families and support children and young people. You can find these here: www.practice.ot.govt.nz
FOSTERING YOUNG LIVES

One of the biggest ways communities partner with us, is through the many caregivers who open up their hearts and homes to care for children.

We have around 4000 caregivers who provide day-to-day care for children when they can’t live at home. Around half our foster parents are looking after children from their extended family.

Caregivers take on this important job because they care about children and young people. We provide financial support to cover the costs of looking after a child, and caregivers have their own social worker to support them in their role.

To find out about the different ways you can care, check out our website, or ask for our Ways you can care brochure by calling us on 0508 CARERS (0508 227 377).
Some frequently asked questions

When is a statutory ‘care and protection’ response required?

— When there is serious harm or risk of serious harm: A single traumatic event can constitute serious harm, for example a violent assault. More often a build up of events will affect the child or young person and significantly interrupt their normal development.

— When there is child abuse “…the harming (whether physically, emotionally, sexually), ill treatment, abuse, neglect or deprivation of any child or young person”, Section 2, Oranga Tamariki Act 1989 (previously known as the Children, Young Persons, and Their Families Act 1989).

What if I get it wrong?

— Don’t be afraid of getting it wrong or try to deal with your worries alone. Sometimes people feel worried about calling us, wonder if they are interfering, and try to find other reasons for what they are noticing.

— By referring to this guide and getting to know the signs of abuse, you can feel more confident about the signs you are seeing.

— Your responsibility is to act in the best interests of the child, and talk to us if you’re worried.

— Our responsibility is to assess what needs to happen to keep the child safe, and the law will protect you for acting in good faith.

Could I make things worse?

— By talking to us you’re putting the decision about what to do in the hands of experienced professionals who will assess the concerns and make decisions about what needs to happen next.

— If it turns out the family doesn’t need help, we won’t stay involved. But if they do, we’ll work with them to make sure their children are kept safe and well cared for.

— If you feel a child is suffering or unsafe, and your call helps prevent this, you have already made a positive difference to their life.
Will my call be treated as confidential?

— If you ask us to, we’ll keep the details of your call as confidential as possible.

— Although the law doesn’t allow us to guarantee total confidentiality, we wouldn’t normally release the name of a person who reported a concern.

— It’s good to keep in mind the child’s safety is the most important thing and it’s often helpful to talk with the family about your concerns, and how we and others can help them.

— We know calling us could be worrying for you. We’re here to help and you can ask the social worker any questions you have.

What you can expect from us

We’re here to help you, and you can talk to us whenever you have concerns about a child. We’re also happy to come to your organisation to talk about ways we can work together to keep kids safe.

As well as the services outlined in this guide, you can expect the Ministry to:

— provide a courteous and sensitive response to your concerns

— keep your confidentiality wherever possible

— tell you the outcome of your report of concern, unless we’re not able to do so.

We always work with families to help them find their own strengths, so they can care safely for their children. This process can take a little while, so please don’t expect immediate results.

We’ll contact you within four weeks to let you know how we followed up on your call. You can also phone us anytime to see what’s happening with your report of concern.
Feedback and complaints

We value your feedback – good and bad – and are committed to responding to you and working with you to resolve concerns you might have. Feedback helps us understand what’s working (and what’s not) so we can keep on improving. It helps us identify and deal with issues when they happen – so please tell us what you think.

- The easiest way to sort out a problem is usually to contact your local office. Either talk to the person you’ve been dealing with or ask for the manager. Otherwise, use our feedback form, available from your local office or our website www.orangatamariki.govt.nz

We’ll get back to you within five days – just make sure you give us your contact details.

If you don’t want to use the online form you can:

- Call 0508 326 459
- Email feedback@ot.govt.nz
- Complete a feedback form at your local Oranga Tamariki—Ministry for Children, office
If after talking to us, you feel your concern is still unresolved, we'll talk to you about what else we can do. You can ask for a review by the Chief Executive's Advisory Panel. To apply for a review, write to:

National Manager
Review Secretariat
Oranga Tamariki—Ministry for Children
PO Box 1556
Wellington 6140

You can also take your concern to:

Office of the Children's Commissioner
Phone: (04) 471 1410

Social Workers Registration Board
Phone: (04) 931 2650

Office of the Ombudsman
Phone: 0800 802 602
APPENDICES
In the earlier section we described the types of abuse, along with some signs you may see associated with these. However, a child may show a range of physical, emotional and behavioural warning signs that could indicate any kind of abuse or neglect. This section gives a detailed description of the warning signs. It’s important you seek professional help if you think what you are seeing is concerning and keep track of any clusters or emerging patterns.

**Physical signs of abuse and neglect**

**Bruises and welts**

It’s relatively normal for children over two to have bruising on places like their knees and arms, as part of their normal play.

Suspicious bruising could include:

- bruises on the softer parts of the body such as on the insides of the arms and legs or on the buttocks. These are less likely to be the result of normal childhood activities
- several bruises at the same time, but on several different parts of the body. It would be unusual for a child to accidentally receive bruises all over their body at one time
- black eyes can be accidental but it’s always best to think about it in the context of what else is going on with the child. Any head injury can be serious so seek help for the child straight away.

The shape, size and colour of bruises can reveal their cause. It’s important to report your concerns so a doctor can examine the child and take any necessary action.

Most schools and early childhood centres keep an incident log to note injuries. Sometimes a pattern of injuries or bruises can appear which may indicate abuse or perhaps something else, such as co-ordination problems. Either way, this will help you to get the right assistance for the child.
**Mongolian blue spots**

Mongolian blue spots can be easily mistaken for bruises, but are actually natural birth marks, and are not a sign of abuse. These marks, typically a slate-grey colour, are found in 15-20 percent of European babies and almost all babies with darker skin. They are typically found over the lower back, but may cover an extensive area.

These marks may or may not fade with time.

**Cuts and abrasions**

Cuts and scrapes are a natural part of childhood accidents. If you notice repeated cuts and abrasions, this may be a cause for concern. Scratches can be a sign a child or young person has been harmed, or has harmed themselves using finger nails or sharp implements.

If you see cuts appear in a pattern, this could indicate self-harm in an older child.

Cuts and bruises around the mouth of an infant or the tearing of the attachment between the lip and the gum is concerning and should be investigated.

**Scalds and burns**

Burns are caused by dry heat, and scalds are caused by wet heat or hot liquids. Most burns and scalds are accidental, and will usually be superficial since the child will pull away from the heat.

Burns due to abuse are often deeper, as the child may have been held there. Suspicious burns include:

- cigarette burns that are circular and frequently multiple
- an identifiable mark from an object
— burns on areas of the body that can be hidden, like the soles of the feet or back of the neck

— scalds involving immersion. If this is deliberately done, it will usually leave a distinctive margin, rather than splash marks. For example, you might see scalds on hands and feet with a 'glove' or 'stocking-like' appearance, or a saddle mark where a child has been made to sit in hot water.

**Fractures**

While fractures in children are common due to normal accidents, they are very uncommon in infants or babies before they can walk. Fractures could be suspicious, so make sure the child has seen a doctor, and talk to the health professional about any worries. Keep a record; if there seems to be a pattern over time, or the family’s explanations don’t add up, then please contact us.

**Head injuries including shaken baby syndrome**

Head injuries are serious and can result in severe disability and even death. The great danger from head injuries is bleeding into or around the brain. Significant bleeding is indicated by:

— irritability
— vomiting
— increasing drowsiness
— loss of consciousness
— fits
— irregular breathing.

Any of these signs are serious and urgent help should be sought. Skull fractures are rarely caused by falls of less than a metre high. Shaking a young child or baby can also result in severe head injuries. Bleeding visible at the back of the eye strongly suggests a shaking injury.
Abdominal or stomach injuries

Abdominal injuries are a common cause of death from abuse, and are usually due to a blunt force being applied either accidentally or deliberately. Bruising may not be evident. Signs of significant abdominal injury include pain, restlessness, fever and vomiting. These signs may also mimic those of a head injury and urgent medical attention should be sought.

Genital injuries

The detailed assessment of genital injuries requires specialist skills. If required, the Ministry or the Police will make a referral to a DSAC (Doctors for Sexual Abuse Care) trained doctor.

Sexually transmitted infections

Sexually transmitted infections (STIs) occurring in children and young people could also indicate sexual abuse. Non-sexual transmission of STIs is rare except in newborn babies, up to a few weeks of age.

Pregnancy

Pregnancy in younger girls should be followed up and they should be given an opportunity to discuss the circumstances around the pregnancy with a trusted person. The Ministry or the Police should be consulted immediately if the young person indicates the pregnancy is the result of unwanted sexual contact, or they are young.

Failure to thrive and malnutrition

Failure to thrive is when a toddler fails to grow in the first three years of life. This may appear as a form of malnutrition, and could be because of emotional abuse or neglect.
Fluctuations in growth are not uncommon, particularly with an illness. The signs of ‘failure to thrive’, however, may include strange eating habits, hoarding and stealing food, or a steady fall-off in growth. These signs are concerning and a further assessment will be needed – please contact the Ministry.

**Dehydration**

Dehydrated infants are typically drowsy and quiet, pale with cold extremities, and have a rapid pulse and breathing rate. If you notice these symptoms, the child is very unwell and urgent medical attention is required.

**Inadequate hygiene and clothing**

An active playful child will often have a natural level of dirtiness. But a young child who is continually dirty, appears unhygienic and unkempt, is hungry or doesn’t have warm clothing, may be neglected. Constant cases of nits or scabies can be a concern and should be looked into.

Children who are constantly dirty will suffer from physical symptoms such as skin infections and severe nappy rashes, which can develop into life-threatening infections.

A child without adequate clothing or nourishment could become inactive, have poor circulation, chilblains and be generally unwell.

**Poisoning**

Accidental poisoning is relatively common in toddlers and children aged 2-4 years.

Deliberate poisoning is rare, but a victim is most commonly 2 ½ years old. It may be the result of using a poisonous substance to try and sedate an overactive or uncooperative child. A child suffering from deliberate poisoning may have an unexplained set of symptoms, particularly if these are repeated and increasing in severity.
Behavioural signs of abuse and neglect

**Aggression**

Most children can behave aggressively in some circumstances. A child showing a pattern of aggressive behaviour or language, or who is frequently aggressive, needs to be looked into further. They may pick on siblings, peers, other adults, animals or property. This behaviour can be a child or young person’s response to an abusive environment, or it could be their way of dealing with other difficult life circumstances.

**Withdrawal**

Children and young people can withdraw from social contact for a number of reasons.

Younger children exposed to emotional abuse and neglect may show passivity and watchfulness and they may isolate themselves from others. This can sometimes look like ‘frozen watchfulness’, where the child or young person stares into space, almost mesmerised, in a trance-like state.

A child who flinches or withdraws from physical approaches by adults, especially if they are reprimanded or told off, may be a cause for concern.

**Anxiety, fear and regression**

Anxiety may be linked to one particular environment or person, or it may be general, reflecting a loss of self-esteem and confidence. Anxious children can regress to more immature behaviour and emotions. Some examples are bedwetting in a child who has previously been dry at night (a frequent consequence of any form of abuse), the reoccurrence of thumb sucking, temper tantrums, nightmares and separation problems.

Fear of unusual situations or unknown people is common for many young children and is a normal developmental stage. Less common is a persistent fear of familiar people or situations, or a fear of something
they previously enjoyed. This should be taken seriously. If possible, talk it through with the child’s parents.

**Sadness**

Although children can experience sadness from time to time, acute or ongoing sadness indicates something is not right for the child or young person. They may show sadness by being constantly quiet and withdrawing from social contact. Older children frequently reveal emotions through their drawing or writing. Many children and young people find it difficult to talk about their sadness, and they may need time and encouragement to express themselves.

**Being overly responsible**

As part of their normal development, many children will attempt to model adult behaviours. When this behaviour is extreme and consistent it could be a sign the young person is seeking parental attention and approval.

Sometimes children and young people who consistently act older than their years have developed these behaviours as the result of unrealistic parental expectations, or to avoid emotional, sexual or physical abuse. Exaggerated concern for younger siblings may be an attempt to protect them from abuse. Wherever possible, talk through your concerns with the child’s parents.

**Attachment problems**

Children who are loved and nurtured show a positive attachment to parents and caregivers in their lives. Sometimes abuse or neglect results in a lack of attachment.

Behaviour indicating an attachment problem includes indiscriminate affection-seeking from any available person, even strangers.
Obsessions

Repeated behaviours are relatively common in children, and are often present in children with autism. Some extreme or very persistent behaviours or obsessions may be a reflection of rigid parental expectations or abuse.

An obsession with cleanliness or washing or other repetitive actions can be a cause for concern. It is important not to make assumptions though, as the behaviour may be due to other reasons, such as a death in the family.

Drug and alcohol abuse

Substance abuse in children and young people may occur for a number of reasons, including adolescent experimentation. Parents may include children in their own drug or alcohol habits, sometimes to gain the child’s cooperation or to encourage illegal activities.

Older children or adolescents may use drug and alcohol abuse as a way of expressing defiance and anger, or as a method of escape. It’s important to consider the possibility of abuse of any child or young person found to be abusing drugs, alcohol or solvents.

Depression, self-harming and suicidal thoughts

Young people may suffer a variety of emotional issues such as depression, especially as a result of past abuse or neglect. Some signs a young person may be suffering from depression include:

- feeling sad, grumpy or miserable most of the time
- feeling restless or lacking in energy
- crying, or getting angry or upset for no reason
- losing interest in things that they used to enjoy
- self-isolation from friends and family
- feeling worthless or guilty about things
— losing or gaining a lot of weight
— having sleep problems
— self-harming
— thinking about death or having suicidal thoughts.


Suicidal thoughts, actions or self-harm can occur even in younger children. They may hint at or talk about thoughts of suicide, or even make a plan. If you suspect a child or young person is suicidal, get help urgently – contact us or the Police.

**Developmental signs of abuse and neglect**

**Global delay**

Global delay is the term used when the child or young person’s general development is below average. This can be caused through a head injury as the result of abuse, or can be a result of severe neglect in early childhood. Delays or different behaviours can also be due to other factors such as autism spectrum disorder. Seek a professional assessment if you’re concerned about a child’s developmental delay.

**Specific delays**

If delays are a result of abuse, it’s more common to see delays across several areas of development. A child may experience delays in speech, language, movement (motor), vision or hearing. They may also experience social delays, including cognitive (thinking) delay, a delay in building attachments to parents, or in developing a sense of self-worth. This may be a result of emotional abuse, or being exposed to constant and unpredictable chaos or violence. There may also be unusual developmental patterns such as the unusual development of speech or a withdrawal into a fantasy world.
Family signs of abuse and neglect

Family violence, addictions to drug and alcohol, mental health problems or a failure to bond well with their children are all factors impacting on a family’s ability to care safely for their children. When these things are present, children are at greater risk of abuse and neglect. Below are signs of family behaviour that could indicate all is not well.

Unrealistic expectations

Unrealistic expectations of an older child’s ability to care for younger siblings may indicate neglect. It can cause stress and anxiety to children not capable of taking on these responsibilities.

Humiliation

The humiliation of children or young people is a powerful form of emotional abuse.

Children may be subjected to fierce and personal criticism, often in front of siblings or peers, or they may be given demeaning tasks to carry out. The purpose of humiliation is often to exert control over a child or young person.

Isolation

Sometimes families isolate their children and young people from other family members or outside contact. When a family, or an adult and child, are isolated it is hard for them to get support, which makes them more vulnerable to harm or neglect.

If a family isolates themselves from help – for example failing to keep appointments or refusing to let a social worker visit, they may be attempting to gain control over their lives by avoiding external scrutiny.
Sometimes these families move frequently, which you can notice in their school and health or welfare records. Sadly isolation like this often happens before serious or fatal episodes of abuse. It must be treated seriously, and we need to ensure the children are safe.

**Dependency**

Sometimes families can become reliant on professionals or agencies entering their lives to help them overcome abuse, harm or neglect. Professionals can unsuspectingly become involved in meeting the increasing demands from parents for practical and emotional support. This focus on the parents often overshadows the children’s needs and the parents sometimes compete with their children to be the main subjects of concern. By law, the safety of the child should always be our primary focus.
APPENDIX 2: CHILD PROTECTION POLICIES

Child protection policies help build a strong culture of child protection across a workplace by encouraging early identification and referral of vulnerable children.

This commitment is reinforced by the Vulnerable Children Act 2014. This places obligations on State services, district health boards, schools and organisations contracted or funded by State services, to have child protection policies, to review them, and (in some cases) to report on these requirements regularly.

If you’re from one of these organisations, you need to familiarise yourself with their child protection policy or write a new one.

Even if they’re not obligated under the Vulnerable Children Act, we encourage organisations to have child protection policies to ensure our tamariki are safe. To find out how to write a good quality child protection policy, check out our ‘Safer Organisations, Safer Children’ guidelines for child protection policies, available on our website: www.orangatamariki.govt.nz/working-with-children/vulnerable-children-act-requirements/child-protection-policies.
The guidelines include information about:

- operation of the Vulnerable Children Act 2014
- child protection cultures and policy development
- child protection policy checklist
- developing a child protection policy
- example policies.

We’re also happy to talk to your people about what we can all do every day to protect and care for children. Just call us on 0508 326 459, and ask to be put through to your local site. We’ll be happy to help.
There are lots of groups who help and support families. For help, further information and resources check out:

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<tr>
<th>Organisation</th>
<th>Website/Link</th>
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<tr>
<td>Alcohol Drug Helpline</td>
<td><a href="http://www.alcoholdrughelp.org.nz/">http://www.alcoholdrughelp.org.nz/</a></td>
<td>0800 787 797</td>
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<td>Barnardos New Zealand</td>
<td><a href="http://www.barnardos.org.nz">www.barnardos.org.nz</a></td>
<td>0800 4BARNARDO 0800 422 762</td>
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<tr>
<td>Brainwave Trust</td>
<td><a href="http://www.brainwave.org.nz">www.brainwave.org.nz</a></td>
<td>09 528 3981</td>
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<tr>
<td>Campaign for Action on Family Violence NZ</td>
<td><a href="http://www.areyouok.org.nz">www.areyouok.org.nz</a></td>
<td>0800 456 450</td>
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<tr>
<td>Child Matters</td>
<td><a href="http://www.childmatters.org.nz">www.childmatters.org.nz</a></td>
<td>07 838 3370</td>
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<td>Citizens Advice Bureau</td>
<td><a href="http://www.cab.org.nz">www.cab.org.nz</a></td>
<td>0800 FOR CAB 0800 367 222</td>
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<td>Clinical Advisory Services Aotearoa</td>
<td><a href="http://www.casa.org.nz">www.casa.org.nz</a></td>
<td>0800 448 908</td>
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<td>Family Services Directory</td>
<td><a href="http://www.familyservices.govt.nz/directory">www.familyservices.govt.nz/directory</a></td>
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<td>Fostering Kids</td>
<td><a href="http://www.fosteringkids.org.nz">www.fosteringkids.org.nz</a></td>
<td>0800 693 323 04 566 0294</td>
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<tr>
<td>Healthline</td>
<td><a href="http://www.health.govt.nz">www.health.govt.nz</a></td>
<td>0800 611 116</td>
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<td>Mental Health Foundation of New Zealand</td>
<td><a href="http://www.mentalhealth.org.nz">www.mentalhealth.org.nz</a></td>
<td>09 300 7010 04 384 4002 03 366 6936</td>
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<td>National Youth Helpline (Youthline)</td>
<td><a href="http://www.youthline.co.nz">www.youthline.co.nz</a></td>
<td>0800 376 633</td>
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<td>NetSafe</td>
<td><a href="http://www.netsafe.org.nz">www.netsafe.org.nz</a></td>
<td>0508 NETSAFE 0508 638 723</td>
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<td>New Zealand Family Violence Clearinghouse</td>
<td><a href="http://www.nzfvc.org.nz">www.nzfvc.org.nz</a></td>
<td>04 916 3720</td>
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<td>New Zealand Police</td>
<td><a href="http://www.police.govt.nz">www.police.govt.nz</a></td>
<td>04 474 9499</td>
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<td>Parent to Parent New Zealand</td>
<td><a href="http://www.parent2parent.org.nz">www.parent2parent.org.nz</a></td>
<td>0508 236 236</td>
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<td>Parenting Resource</td>
<td><a href="http://www.parentingresource.nz">www.parentingresource.nz</a></td>
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<td>Problem Gambling Foundation</td>
<td><a href="http://www.pgfnz.co.nz/">www.pgfnz.co.nz/</a></td>
<td>0800 664 262</td>
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<td>Plunket Society</td>
<td><a href="http://www.plunket.org.nz">www.plunket.org.nz</a></td>
<td>0800 933 922</td>
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<td>SKIP</td>
<td><a href="http://www.skip.org.nz">www.skip.org.nz</a></td>
<td>04 916 3385</td>
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<td>Skylight Trust</td>
<td><a href="http://www.skylight.org.nz">www.skylight.org.nz</a></td>
<td>0800 299 100</td>
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<td>The Lowdown</td>
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<td>Victim Support</td>
<td><a href="http://www.victimsupport.org.nz">www.victimsupport.org.nz</a></td>
<td>0800 VICTIM 0800 842 846</td>
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<td>Women’s Refuge</td>
<td><a href="http://www.womensrefuge.org.nz">www.womensrefuge.org.nz</a></td>
<td>0800 REFUGE 0800 733843</td>
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<td>Youthlaw</td>
<td><a href="http://www.youthlaw.co.nz">www.youthlaw.co.nz</a></td>
<td>0800 UTHLAW 0800 884 529</td>
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<td>Youthline</td>
<td><a href="http://www.youthline.co.nz">www.youthline.co.nz</a></td>
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**Oranga Tamariki—Ministry for Children**

**0508 326 459**

Call us. We’re here to help.
# MY CONTACTS

Use this page to start your own list of local contact names, addresses, emails and phone numbers for staff at Oranga Tamariki—Ministry for Children, Police, health and other related services in your area.

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