



THE GLOBAL ALLIANCE
FOR LGBT EDUCATION

Child Protection Policy



POLICY STATEMENT

The GALE Foundation is committed to protect children from harm. Staff and volunteers within this organization accept and recognize our responsibilities to develop awareness of the issues which cause children harm.

GALE is also committed to reviewing our Child Protection Policy and Procedures at regular intervals.

This Child Protection Policy was approved by the GALE Supervisory Council on 16 March 2018. It is an edited version of the Example Child Protection Policy on [Wikimedia](#), who we would like to thank gracefully for the inspiration.

Inhoud

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WHO TO CONTACT

The GALE Foundation has designated a senior member of staff to take specific responsibility for child protection matters within the Foundation. This Child Protection Representative is:

Peter Dankmeijer, director

Vinkenstraat 116-A, 1013 JV Netherlands

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All cases of alleged or suspected abuse should be immediately reported to your designated Child Protection Representative, or to the Director in their absence. The appropriate external contacts are:

Police Station

Local Social Services Office

LEGISLATION AND GUIDANCE

These documents are based on the Convention of the Rights of the Child and on Dutch legislation on child abuse (GALE's headquarters is in The Netherlands).

Link to overview of Dutch legislation (Dutch):

http://www.huiselijkgeweld.nl/dossiers/seksueel_kindermisbruik/wetgeving

These laws prohibit:

- Art. 242: using violence or threats to penetrate someone's body
- Art. 243: sexual contact of penetration of someone who is unconscious, or mentally or otherwise unable to respond
- Art. 244: sexual contact of penetration of someone who is below the age of 12
- Art. 245: sexual contact of penetration outside of a marriage/relationship of someone who is between ages 12 and 16
- Art. 246: lechery by using violence or threat
- Art. 247: lechery with someone who is unconscious, or mentally or otherwise unable to respond, or below age 16, or seduce a third party to such
- Art. 284a: seduce someone below age 18 to lechery by offering money or gifts or misuse of a power relationship
- Art 248b: being purposely present during lecherous acts with a person whom can be reasonably be expected to be below age 18, or showing such acts to others
- Art. 249: lechery with a minor, a child or someone who has been entrusted with someone else in governance, medical or social care, education, civil service or well

being services

- Art. 250: enabling the said in article 249 by someone else

WHO DOES THIS AFFECT?

These documents are designed for the guidance of all staff and volunteers of the GALE Foundation, as well as all children and their families and caretakers who are utilizing the services of the Foundation. The policy and procedures will be made available to the above-mentioned individuals/groups.

A child is defined as any individual under the age of 16 years. The policy and procedures may also be relevant for use in the case of any vulnerable young person over the age of 18 years who is utilizing the services of the Foundation.

The Foundation's Child Protection policy and procedures apply to all children and young people regardless of gender, ethnicity, disability, sexuality, sexual orientation, gender identity or religion.

PROCEDURES

1. Sharing information about concerns with agencies who need to know, and involving parents and children appropriately

DEFINITIONS OF ABUSE

Child abuse occurs when the behavior of someone in a position of greater power than a child causes harm. Harm cannot always be easily categorized as children can be abused in several ways, but four broad definitions of abuse can be identified:

Physical – where children are hurt by ill-treatment, or deliberate or neglectful failure to prevent injury or harm.

Emotional – where children are persistently or severely emotionally neglected or rejected, for example, by not being given enough love or attention, made to feel worthless, or being intimidated by threats or taunts.

Sexual – where children are encouraged or forced to observe or participate in any form of sexual activity.

Neglect – where children’s physical and/or psychological needs are persistently or severely neglected, or the failure to protect a child from exposure to any kind of danger.

DISABLED CHILDREN

Disabled children, including the visually impaired, may be more vulnerable to abuse than other children. Safeguards are essentially the same as those for non-disabled children.

Where a child has communication or learning difficulties, attention must be paid to the child’s special needs and to ways of ascertaining his/her perception of events. The child’s wishes may be identified by use of non-verbal communication systems, interpreters or facilitators.

Particular attention needs to be paid to promoting high standards of care and raising awareness of the risks to disabled children in order to strengthen the capacity of children and their families to protect themselves.

Measures include:

Helping disabled children make their wishes and feelings about their care and treatment known. Ensuring that all disabled children know how to raise concerns if they are worried or angry about something. They should have access to people with whom they can communicate. Disabled children with communication difficulties should have a means of being heard available to them at all times. Commitment to and understanding of all children’s safety and welfare needs among providers of services. Close contact with parents and

caretakers and a culture of openness on the part of services.

CHILDREN WITH SAME SEX ORIENTATION, TRANSGENDER IDENTITY OR INTERSEXUAL VARIATION

Children with a same sex orientation, transgender identity or an intersexual variation may be more vulnerable than heteronormatively defined children. They "deviant" characteristics may make peer or adults think that they can be legitimately targeted with violence or sexual abuse. They also may be lonelier and longing for friendship, support and intimacy and may mistake sex for intimacy and support.

In working with LGBTI (Lesbian, Gay, Bisexual, Transgender and Intersex) children, caretakers need to be sensitive to these issues. This may be difficult when parents or legal guardians reject sexual diversity and are among the abusers. The GALE Foundation prefers the support to be organized in close cooperation with parents or legal guardians, but when the child signals that their parents or legal guardians are (potential) abusers, other venues of support need to be looked for. The safety and needs of the child are primary.

AWARENESS OF ABUSE

Awareness is the key issue in both the detection and prevention of abuse. A staff member, volunteer, parent or caretaker may become aware or suspicious of abuse of a child by:

- i) being told in confidence by the individual child
- ii) being told by another person as hearsay or as a witness
- iii) observing symptomatic behavior
- iv) observing outward signs of physical abuse/injury

The abuse may:

- a) have take place a long time ago – even in early childhood and the child may still be suffering the consequences
- b) be an on-going form of abuse which takes place outside the Foundation – e.g. typically at home
- c) be a current or very recent abuse that has taken place within the Foundation

HOW TO RECOGNISE SIGNS OF ABUSE

Possible indicators may include:

Physical Abuse

- Any visible injuries, particularly not normal child-like bumps and scrapes.
- Children who find it painful to walk, sit down, to move their jaws or demonstrate other pain.
- Being furtive or secretive, or displaying uncharacteristic aggression or withdrawn behavior.
- Compulsive eating or sudden loss of appetite.
- Having difficulty in staying awake or suddenly becoming un-coordinated.
- Giving confused or conflicting explanations of injuries.

Emotional Abuse

- Poor attachment relationship between the child and parent/caretaker.
- Parent/caretaker displaying unresponsive or neglectful behavior towards the child or making negative comments about the child.
- The child may be demonstrating emotional indicators such as low self esteem, unhappiness, fear, distress or anxiety and demonstrating behavioral indicators such as attention seeking, opposing, withdrawing or insecurity.

Sexual Abuse

- Awkwardness in walking or sitting down, tummy pains, tiredness.
- Extreme variations in behavior; such as anxiety, aggression or withdrawal.
- Sexually provocative behavior or knowledge that is incompatible with the child's age and understanding.
- Drawings and/or written work which are sexually explicit.
- Direct disclosure – it is important to recognize that children have neither the experience nor the understanding to be able to make up stories about sexual assault.

Neglect

- Underweight or obese.
- Unkempt dirty appearance
- Inadequate/unwashed clothes
- Hunger
- Listlessness
- Indiscriminate friendliness or poor social relationships
- Poor concentration
- Low self-esteem.

RESPONDING TO SUSPECTED ABUSE

No member of staff, volunteer, parent or caretaker should investigate reports of physical or sexual abuse him/herself. Alleged victims, perpetrators, those reporting abuse and others involved should not be interviewed beyond the point at which it is clear that there is an allegation. Medical attention should be sought immediately for the child if required.

Any individual to whom an allegation of child abuse is made should then:

Step 1: Limit any questioning to the minimum necessary to seek clarification only, strictly avoiding “leading” the child by making suggestions or asking questions that introduce their own ideas about what may have happened.

Step 2: Stop asking any more questions as soon as the child has disclosed that he/she believes that something abusive has happened to him/her or to someone else.

Step 3: Tell the child that the relevant designated Child Protection Representative or Authority will now be made aware of the issue.

Step 4: Depending on the age of the child, ask the child what steps he/she would like taken to protect him/her now that an allegation has been made and assure him/her that the Foundation will try to follow those wishes.

Step 5: Report the information immediately to the designated Child Protection Representative for that area (or to HR or Director at Head Office). If the allegation or suspicion is about the designated person, the report should be made to Head Office. If the volunteer or member of staff would prefer to speak to someone other than designated persons within the Foundation, he/she should contact Social Services directly. All contact details are as given on pages 3 and 4 of this document.

Step 6: Complete a Record of Concern form and pass this to the designated Child Protection Representative, or relevant Authority if required. Records of Concern must be stored confidentially, in a secure place accessed only by a designated Child Protection Representative.

Step 7: If the report has been made to a staff member or volunteer, inform the child’s parents/caretakers unless there is a suspicion of their involvement.

Additionally, any staff member, volunteer, parent or caretaker who is told indirectly of any incident or witnesses or suspects any form of child abuse must report the information immediately, as detailed in Step 5.

DO'S AND DON'TS

Treat any allegation seriously. Make no promises you can't keep. Display belief in what the child is telling you. Interrogate the child. Tell the child he/she is right to tell you. Reassure that he/she is not to blame. Be honest about who you have to tell and why. Write down everything said and what was done. Seek medical attention immediately if necessary. Inform parents/caretakers unless there is suspicion of their involvement
Don't cast doubt on what the child tells you. Don't interrupt or change the subject. Don't say anything that makes the child feel responsible for the abuse.

CONFIDENTIALITY

Staff members, volunteers, parents or caretakers should never give absolute guarantees of confidentiality to children or other colleagues wishing to tell them something serious. They should, however, guarantee that they will only pass on information to the minimum number of people who must be told to ensure proper action is taken. They should guarantee that they will not tell anyone who does not have a clear "need to know" and that confidentiality will be respected within the designated team. If any staff member, volunteer, parent or caretaker has any suspicion, allegation or disclosure that a child is suffering or is likely to suffer significant harm, then this must always be referred to the relevant Child Protection Representative or Social Services.

2. Adopting child protection guidelines through a code of behavior for staff and volunteers

It is essential that children and young people involved with the Foundation are:
Valued and respected as individuals, listened to
Involved in decision making as appropriate,
encouraged and praised as appropriate.

APPROPRIATE CONDUCT AND BEHAVIOR

Staff members, volunteers, parents and caretakers should:
Be aware of a visually impaired child's need for physical contact, but ensure that contact is appropriate and given only with the consent of the child or young person – in the case of

restraining a child to prevent injury or comforting a distressed child, ensure physical contact is ceased at the earliest possible moment. Avoid initiating physical expressions of emotion such as kissing or hugging but remember that a visually impaired child or young person may need to physically express emotion in these ways – if a child initiates such expressions, cease it at the earliest possible moment without causing the child to feel rejected. Avoid intrusive forms of play (i.e. tickling, horseplay) – if physical contact is offered from a child, cease it at the earliest possible moment without causing the child to feel rejected.

Not allow children and young people to use inappropriate language unchallenged. Ensure that at least two adults are present when supervising children or young people. Not spend excessive amounts of time alone with children, away from others – meetings with individual children or young people should take place as openly as possible. If privacy is required, the door should be left open and other staff or volunteers informed of the meeting. Avoid taking individual children on car journeys, however short – where this is unavoidable, it should be with the full knowledge and consent of parents/caretakers and a member of management. Not meet with children outside organized activities, unless it is with the knowledge and consent of parents and a member of management. Never do things of a personal nature for a child or young person that they can do themselves. Never let allegations a child or young person makes go without being addressed and recorded.

The following forms of behavior between staff members or volunteers and children or young people are not allowed under any circumstances: sexual conduct, lending or borrowing of money or property, giving or receiving gifts, exclusive or secretive relationships.

RELATIONSHIPS BETWEEN PERSONNEL

Relationships between both paid staff and volunteers should be based on mutual respect. All staff and volunteers are expected to contribute and take responsibility to ensure a positive working environment and to conduct themselves accordingly.

Following the procedures for safeguarding children on trips

Trips involving children and young people will normally also include parents and caretakers. However, it is important that the following procedures are adhered to in order to keep children and young people safe:

Ensure children and young people are aware of how they are expected to behave Gain written consent from parents/caretakers for children to participate in an outing, as well as a written statement of any specific needs or requirements for their child Ensure at least one staff member or volunteer participating in the outing is trained in first aid and has access to

first aid equipment Ensure all those attending are aware of their roles and responsibilities and are appropriately qualified and experienced

If using an activity centre or another external provider:

Use reputable organizations which have in place any licenses or accreditation required (some adventure activities require specific licenses). Visit the centre beforehand wherever possible. Gain agreement from parents/caretakers and the children and young people on the trip on the activities to be undertaken. Ensure external providers have proper safety procedures in place (e.g. insurance, equipment/transport maintenance, health and safety policy, Child Protection Policy etc) Ensure the accommodation is suitable.

All planned activities and trips must be appropriate for the group of children and/or young people participating.

Sharing information about child protection and good practice with children, parents, staff and volunteers

It is essential that children and young people understand that any concerns they may have will be listened to and taken seriously. It is also essential that parents and caretakers are aware of and understand the procedures the Foundation has in place for maintaining the welfare of children and young people using its services.

The Foundation management is responsible for ensuring that relevant information is available to and exchanged between all those involved in the operation of the Foundation and its activities. Confidential information should only be shared on a need to know basis.

Management and staff are responsible for:

Ensuring children and young people have information about how and with whom they can share their concerns, complaints and anxieties. This information must be shared in a manner appropriate to the age of the child/young person. Ensuring all information is available in multiple formats for the blind and visually impaired. Ensuring parents and caretakers are aware of the nature of relationships with adults with whom their children form friendships. Publicizing information to parents and caretakers about the Foundation's activities, its Child Protection Policy and Procedures, and the name of the person(s) to contact in the event of concerns or complaints. Ensuring all staff and volunteers have the information required to deal with emergencies and child protection issues.

Following carefully the procedures for recruitment and selection of staff and volunteers

When a vacancy is identified, a job description or task/project brief must be drawn up which should identify the skills required for that post. The vacancy should be advertised as widely as possible through the most appropriate means.

All volunteers and staff, including temporary or casual workers, must be subject to the Foundation's selection and recruitment procedures as follows:

All candidates must complete an application form. The recruiting manager should verify the person's identity by his/her birth certificate, passport or other formal document, preferably something bearing their photograph. The recruiting manager should verify any qualifications stated on the application form. All suitable candidates must have an interview or meeting, with the recruiting manager and one other senior staff member. Any gaps in employment or inconsistencies in the candidate's history must be identified and reasons given. Written references should be taken up prior to the employment of the successful candidate and verified by a telephone call. All successful candidates must be subject to a check by the Criminal Records Bureau (in Dutch: Verklaring van Goed gedrag). No unsupervised access to children is to be allowed until references have been reviewed. Advice should be sought prior to recruiting someone with a criminal record or record of other offences. New members of staff or volunteers must undergo a supervised probationary period including a comprehensive induction which must cover the Child Protection Policy and Procedures.

Providing effective management for staff and volunteers through supervision, support and training

The Foundation will ensure that all staff and volunteers are well informed and supported, by the following process:

Induction

As part of their general induction, new staff and volunteers will be familiarized with this Policy and Procedures document, as well as other policies such as Health and Safety. This may include training in child protection issues.

Probationary Period

The development and suitability of the employee or volunteer will be reviewed during the first six months of taking up the post.

Supervision and Support

Regular meetings, whether individual or on a group basis, will provide an opportunity for staff/volunteers to share concerns, anxieties or worries about their work or the environment. Meetings should also be an opportunity to identify areas of concern and/or training needs. Specific training will be provided for all Designated Child Protection Representatives.

APPENDIX I: RECORD OF CONCERN

Name of Child:

Age:

Child's Address:

Name of Parent/Caretaker:

Telephone no:

Is the person making this report expressing his/her own concerns or passing on those of someone else?

What is said to have happened or what was seen?

When and where did it occur?

Has the child been spoken to? If so, what was said?

Who else, if anyone, was involved and how?

What was said by those involved?

Were there any obvious signs, e.g. bruising, bleeding, changed behavior ?

Has anybody been alleged to be the abuser?

Have the child's parents been contacted?

Who else has been told about it and when?

Signed..... Date.....

NAME.....

APPENDIX 2: GUIDELINES FOR CHILD PROTECTION REPRESENTATIVES

The responsibilities of a designated Child Protection Representative are:

1. To ensure that the Foundation's Child Protection Policy and Procedures are followed
2. To undertake training in the recognition and investigation of child abuse
3. To develop knowledge of the procedures involved in reporting abuse
4. To make this knowledge available to all staff, volunteers, parents, caretakers and children as appropriate
5. To manage the process of referring cases or suspected cases of abuse to Social Services by:
 - i. Ensuring all staff, volunteers, parents, caretakers and children know who is the designated Child Protection (CP) Representative
 - ii. Ensuring that all staff, volunteers, parents, caretakers and children know that concerns about abuse or possible abuse must be brought to the designated CP Representative or in his/her absence, the most senior member of staff
 - iii. Deciding, after discussion with the relevant parties, if the case should be referred or not, or if further clarification should be sought from the parents/caretakers at any point
 - iv. Ensuring decisions and facts are recorded using a Record of Concern
 - v. Reporting the case to Social Services, confirming the referral in writing under confidential cover
6. To ensure all staff and volunteers undergo basic Child Protection awareness training as appropriate
7. To be a contact point for external agencies needing to contact the Foundation about child protection matters
8. To ensure written records are stored securely with access available to designated people only
9. To ensure Foundation recruitment procedures are followed and a "Verklaring van Goed Gedrag" is obtained for all new staff
10. Identify the need for support that any employee or volunteer may have when involved in an abuse case and to liaise with necessary parties to establish how this support can be offered.