

HOW CAN I TELL?

Recognising
child abuse



**Child
Matters**

EDUCATING TO PREVENT CHILD ABUSE

Children are our most
valuable natural resource. *Herbert Hoover.*

Tiaki O Mokopuna



A GUIDE TO
**KEEPING
CHILDREN
SAFE**



Child Matters would like to thank the NAR Foundation, whose generosity allows for this resource to be produced.

The adult population does not own this planet. Rather, we hold it in trust for all future generations.

Every time an incident of child abuse happens, we breach that trust.

There are many forms of child abuse.

As a community, our first responsibility is to identify and stop every case before it becomes life-threatening and life-scarring. Our greater responsibility is to stop child abuse from ever happening.

We all dream of making New Zealand a genuine safe haven for children. To achieve this goal requires all adults to take personal responsibility for identifying, reporting and ultimately stopping all forms of child abuse. This is our responsibility as individuals and as a nation.

Our problem is not a desire to act, but often a lack of understanding and ability to recognise child abuse, particularly in its early stages. For all adults, the key issue is how to identify actual cases in their earliest stages and what action to then take.

This booklet provides that information. In simple language it outlines the key indicators of child abuse and then deciding what action to take.

Please take the time to read this important information.

Neil A. Richardson

MC, JD, JP
NAR Foundation



It is with real pleasure that I write the foreword to this helpful little booklet, which provides straightforward guidance regarding the indicators of child abuse and neglect.

As former Principal Youth Court Judge for New Zealand, dealing with 14, 15 and 16 year olds, it may well be asked why I am so supportive of this booklet, dealing as it does, with the recognition of abuse or potential abuse of children rather than young people.

The simple answer is that many of our serious young offenders before the Youth Court share a history of longstanding physical and/or sexual abuse and/or neglect.

In November 2006, 27% of youth offenders remanded to residential youth justice institutions in New Zealand were the subject of existing care and protection orders and were in the custody of Child, Youth and Family because of past parental abuse and neglect.

It seems to me, and to other Youth Court Judges, that there is a clear link between childhood ill-treatment, abuse and later adverse life outcomes, including the risk of criminal offending.

The more I work in the Youth Court, the more I am convinced that youth justice really "begins" at infancy, if not from birth.

Physical and sexual abuse and neglect experienced in those early years has potentially disastrous consequences in terms of positive life development.

It is for this reason that I am so pleased to support this book, predicated as it is on the basis that not only do children require the care and protection of the community and their families, but that they are our most precious resource. Indeed, they are our future. The avoidance of child abuse and neglect, and an individual and communitarian commitment to stamp it out, whenever it is recognised, would have huge long-term benefits, not only for the individuals concerned, but for our country.

As a thought provoking Indian observes:

To plan for a year – sow a rice paddy field

To plan for a decade – plant trees

To plan for a future – nurture youth

Judge Becroft

Former Principal Youth Court Judge 2001-2015
Children's Commissioner 2016 –

Contents

- 7 Indicators of child abuse and neglect
- 9 Taking action and reporting suspected abuse
- 12 Physical abuse
- 17 Sexual abuse
- 23 Neglect
- 27 Emotional abuse
- 31 Family Violence
- 32 What makes a child more vulnerable to abuse?
- 34 About Child Matters

Indicators of CHILD ABUSE & NEGLECT

It is not always easy to recognise that a child is being harmed, or is at risk, so abuse often goes undetected. Adults may deny or attempt to justify their abusive behaviour.

Indicators, when found either on their own or in various combinations, point to possible abuse, family violence or neglect.

Indicators can be physical or behavioural.

Physical indicators – such as bruises or burns, relate to the child's physical condition.

Behavioural indicators – such as a child cringing or flinching if touched unexpectedly, or a caregiver constantly calling a child 'stupid' or 'dumb', can be displayed by the child or by the alleged abuser.

In many cases indicators are found in combinations or clusters.

Indicators do not necessarily prove that a child has been harmed. They are clues that alert us that abuse may have occurred and that a child may require help or protection.

Sometimes, indicators can result from life events which do not involve abuse. For example – divorce, accidental injury, the arrival of new sibling, etc.

Adults have a duty to protect children.

Children require the care and protection of the community as well as their families. Children are our most precious resource – they are our future. As adult members of society we have a moral duty to protect children and intervene when they need our help. When abuse is suspected, concerns should always be reported.

Although there is no legal requirement to do so, those who work with, or care for children have a responsibility to report suspected child abuse. Most organisations have agreed on procedures for their staff to follow if they suspect abuse.

When a report or concern has been made, it is the responsibility of the Police and/or the Ministry for Children, Oranga Tamariki to carry out an investigation or assessment of the indicators to determine the safety of the child.

Children need you to **SPEAK UP FOR THEM**

IT'S EVERYONE'S JOB TO HELP KEEP CHILDREN SAFE.

Trust your instincts. If you are worried that a child is being harmed or that they're not being well looked after, don't just hope someone else will speak up. You can do something to help.

It's not always easy and it takes courage. But don't be afraid of getting it wrong. Instead, ask yourself, "What if I'm right?"

Children may need help in families and whānau where:

- There is violence and controlling behaviour from one adult towards another, or to the children
- There is known drug-taking, drug manufacture, or drug dealing
- There is excessive use of alcohol
- Animals are harmed or neglected
- Children are left alone, appear neglected, or uncared for
- There is a high focus on keeping the family private or isolated and detached from the community

In such a situation you may be the key person who could make a difference and keep a child safe.

- Take action
- Do not look the other way
- Do not assume that someone else has acted

The importance of taking action when harm is suspected:

Often children do not disclose that they are being harmed. They frequently suffer in silence, and many experience repeated abuse. Most require help to recover from physical and emotional effects.

The common factor underlying all forms of child abuse is the **abuse of power or authority**. Most often the abuser is a person who is **known and trusted by the child**.



Prompt action or reporting of suspected abuse may:

- Ensure that the abuse stops
- Protect children from further harm
- Ensure children receive professional help as soon as possible
- Save a child's life

TAKE ACTION

STEP UP – Do something personally to help

It can take just one person to make a real difference. By lending a hand or a listening ear at an early stage you may prevent something more serious from occurring.

- Provide a listening ear
- Give helpful or supportive information
- Explain that violence is not okay
- Talk it over with an experienced person
- You can learn more about how to help at www.childmatters.org.nz.

STEP OUT – Look for community support for the family

It is important that families under stress get extra support when they need it. If you are worried about a family, whānau or a child, you can help connect them with support. There are a number of organisations that support children, families and whānau. You can find information about them in your local directory pages or on the Family Services directory online:

www.familyservices.govt.nz.

A number of useful helplines and organisations are outlined on the back cover of this resource.

Or contact your local Citizen's Advice Bureau for other agencies in your area.

If in doubt, call the Ministry for Children, Oranga Tamariki (0508 326 459) to seek advice.

**Children cannot stop child abuse.
Adults can.**

TAKE ACTION

SPEAK UP – Report your concerns

If you have any suspicions that a child is at risk of harm, report your concerns.

To report your concerns call:

- Ministry for Children, Oranga Tamariki free on 0508 326 459, or
- Contact your local Police Station

Both agencies offer 24-hour service, so if you suspect that a child is at risk, make that call regardless of the hour.

Remember, if it's an emergency and you suspect a child is at serious risk, or a crime against a child has been committed, REPORT IT!

In an emergency call 111 and ask for Police

REPORTING

What to report

You should report suspected abuse. This means reporting any suspicion that a child has been or is being abused.

You do not need to have proof of abuse before reporting. It is the responsibility of the authorities to investigate the situation and determine the child's safety and wellbeing. You can call the Ministry for Children, Oranga Tamariki on 0508 326 459 to discuss your concerns any time.



Your suspicions may include:

- What you saw
- What you heard
- What the child told you
- What someone else told you

REPORTING

When to report

It is best to report your suspicions immediately. The child may need immediate protection or medical attention. As well, there may be certain physical signs of abuse such as bruising or scars, which could be used as evidence. These may fade if reporting is delayed.

It is a good idea to keep a written record of all telephone calls, letters and conversations. When reporting what a child has said, it is essential to give the exact words a child uses. Include dates, times and observations in your notes.

Will my report be kept anonymous?

A report can be made anonymously. However, there are almost always very good reasons for identifying yourself. The Ministry for Children, Oranga Tamariki needs to ensure that the information is credible and they may need to speak with you again. You can request your details are not released and are made confidential.

What if I make a mistake?

Many people decide not to act through fear of being wrong. They may be afraid of repercussions, being thought insensitive, of breaking confidence, or of being disloyal.

Even if an assessment or investigation does not go any further, the law protects you if you supplied information in good faith.

Remember, children have the right to be protected from harm. You don't have to have conclusive proof, so even if you are not quite sure, call the Ministry for Children, Oranga Tamariki and discuss your concerns with one of their trained social workers.

What happens after I make a report?

You can expect confirmation of your report of concern, and to be advised of the outcome. You have the right to contact the social worker or their supervisor if you are not satisfied.

For more detailed information look on the Ministry for Children, Oranga Tamariki website www.mvcot.govt.nz.

What is PHYSICAL ABUSE?

Physical abuse is a non-accidental act on a child that results in physical harm.

Ways in which children can be physically abused can include smacking, punching, beating, kicking, shaking, biting, burning or throwing the child. Physical abuse may also result from excessive or inappropriate discipline, or violence within the family.

Physical abuse may be the result of a single episode, or of a series of episodes.

Although the injury may be non-accidental, the caregiver may not have intended to hurt the child – e.g. the injury may have resulted from over-discipline inappropriate to the child's age or condition, or the result of unintentional anger or rage.

The injuries to the child may vary in severity and range from minor bruising, burns, welts, or bite marks, fractured or broken bones, to its most extreme form, the death of a child.



Remember:

Indicators do not necessarily prove that a child has been abused. They are **clues that alert us** that abuse may have occurred and that a child may require help or protection. The more knowledge we have, the more likely we are to pick up these clues and understand their significance.

Many signs could well be the results of something other than abuse and

should be viewed in the context of the child's whole situation, and in relation to other indicators.

It is important to remember that it is the responsibility of the Ministry for Children, Oranga Tamariki, or Police to conduct an assessment or investigation of the indicators to determine their cause.

We must not overlook, ignore,
or condone violence to children.

PHYSICAL ABUSE

PHYSICAL INDICATORS OF PHYSICAL ABUSE – CHILD

UNEXPLAINED BRUISES, WELTS, CUTS, ABRASIONS

Suspicious locations include:

Face, lips, gums, mouth, eyes, ears

Torso, back, buttocks, back of legs, external genitalia

Shapes of suspicious injuries:

Clustered, form regular patterns

Teeth marks, hand prints, fingertips

A recognisable imprint left by a hand, belt or other item

UNEXPLAINED BURNS

Small circular burns particularly on soles of feet, palms of hands, buttocks

Immersion burns – where a part of the child's body has been placed or held in hot water

Burns showing a distinct pattern or outline where a part of the child's body has been held against a hot object like a stove, or an iron

Rope burns on arms, legs, neck, torso

UNEXPLAINED FRACTURES OR DISLOCATIONS

Skull, facial bones, spinal fractures, dislocations, particularly of hip or shoulders

Multiple fractures at different stages of healing

Fractures in very young children (those who are not walking)

Bald patches on scalp resulting from hair pulling

PHYSICAL ABUSE

CHILDREN'S BEHAVIOUR THAT COULD INDICATE PHYSICAL ABUSE

Cannot recall how the injuries occurred, or offers inconsistent explanations.

Is wary of adults, or of a particular individual.

May cringe or flinch if touched unexpectedly.

May display a vacant stare, or frozen watchfulness.

May be extremely aggressive, or extremely withdrawn.

Displays indiscriminate affection-seeking behaviour. For example, goes readily to strangers for nurturing.

May be compliant or eager to please.

Tries to take care of, or protect the parents or caregiver.

When at play, imitates negative behaviour or language e.g. smacks or yells at a doll.

Frequently behaves in a way that provokes punishment.

Is dressed inappropriately to hide bruises or other injuries (e.g. long sleeved shirt or pants in summer).

Runs away from home, or is afraid to go home.

Describes abusive situations.

May regress e.g. bed wetting.

May indicate a general sadness. May show this in drawing and play.

Is violent to animals or other children.

Our goal is for a community where everyone looks out for children.

PHYSICAL ABUSE

ADULT BEHAVIOUR THAT COULD INDICATE PHYSICAL ABUSE

May be vague about details of the cause of injury, and the account of the injury may change from time to time.

May appear unconcerned about child's well-being.

May blame the accident on a sibling, friend, or relative, or on the injured child.

May provide an explanation which is not believable given the child's age, or the nature of the child's injuries.

If more than one parent or caregiver claims to have been present at the accident or time of injury, there may be disagreement as to how it happened.

May state that the child is prone to injuries, or always lies about how injuries occur.

May have little or no knowledge of child development, or may have unrealistic expectations about the child.

May delay in seeking medical attention for the child.

Shakes a child.

Threatens or attempts to injure the child.

Is aggressive or violent towards other family members.

Is aggressive towards the child in front of others.

On average, a child is killed in New Zealand approximately every 5 weeks.

Sexual abuse is an act or acts that result in the sexual exploitation of a child or young person, whether consensual or not.



What is SEXUAL ABUSE?

Sexual abuse is an act or acts that result in the sexual exploitation of a child or young person, whether consensual or not.*

Sexual abuse can be committed by a relative, a trusted friend, an associate, or someone unknown to the child. Most sexual abuse is perpetrated by someone the child knows and trusts, such as a caregiver, a family friend, or someone in a position of authority like a school teacher, sports coach or church member.

Examples of sexual abuse include:

- Any touching for sexual purpose
- Fondling of breasts, buttocks, genitals
- Oral sex
- Sexual intercourse – anal or vaginal
- The adult exposing themselves to the child
- Voyeurism and exhibitionism
- Use of internet, text messages and social media to initiate sexual conversations with a child

Sexual abuse also includes situations where the adult seeks to have the child touch them for a sexual purpose, and where they involve the child in pornographic activities or prostitution.

* Fanslow, J.L. 2002. Family Violence Intervention Guidelines: Child and Partner Abuse. Ministry of Health, Wellington.

Early warning signs

Children can be alerted to possible sexual abuse grooming. They should be encouraged to tell an adult if someone:

- Asks them to do things in private that involve physical contact – backrubs, massages, etc.
- Looks at or touches their body saying it is to "see how they are developing..."
- "Accidentally" touches or brushes up against their body
- Comes into their bedroom or bathroom when they are undressed
- Says sexual things about their body, or how they dress, either directly, or by phone or internet
- Comes into their bedroom at night
- Asks them to keep any of these things a secret
- Makes them feel uncomfortable



Remember:

Indicators do not necessarily prove that a child has been abused. They are clues that alert us that abuse may have occurred and that a child may require help or protection.

SEXUAL ABUSE

PHYSICAL INDICATORS OF SEXUAL ABUSE – CHILD

Unusual or excessive itching, or pain in the genital or anal area.

Torn, stained, or bloody underclothing.

Bruises, lacerations, redness, swelling or bleeding in genital, vaginal or anal area.

Blood in urine or stools.

Pain experienced in urination or elimination.

Sexually transmitted disease.

Pregnancy.

Sexual abuse affects children, women and men of any ethnicity, religion, educational background or socio-economic status.

SEXUAL ABUSE

YOUNG CHILDREN'S BEHAVIOUR THAT COULD INDICATE SEXUAL ABUSE

Age-inappropriate sexual play with toys, self, others, e.g. demonstration of explicit sexual acts.

Age-inappropriate, sexually-explicit drawings or descriptions.

Bizarre, sophisticated, or unusual sexual knowledge.

Refuses to go home, or to home of relative or friend for no apparent reason.

States that they have been abused, or describes activities which are sexually abusive, or hints about such activities.

Comments such as, "I've got a secret", or, "I don't like Uncle".

Fear of certain people, or of a particular person.

Fear of certain places (e.g. bathroom, bedroom).

Regression to an earlier stage of play and development.

Fire lighting, particularly by boys.

SEXUAL ABUSE

OLDER CHILDREN'S BEHAVIOUR THAT COULD INDICATE SEXUAL ABUSE

Age-inappropriate play, or sexually-explicit drawings or descriptions.

Bizarre, sophisticated, or unusual sexual knowledge.

Refuses to go home, or to home of relative or friend for no apparent reason.

Recurring physical complaints without physiological basis (abdominal pain, headaches, sore throat, nausea, etc.).

Fear of a particular area of house, a particular family member, or is afraid of being left alone with a person of a particular sex.

May suffer from depression, withdrawal.

Engages in self-destructive behaviour, e.g. suicidal feelings or behaviour, drug or alcohol abuse, cutting and self-mutilation.

Acts out, or behaves aggressively.

Promiscuity.

Eating disorders (anorexia, bulimia).

Compulsive behaviours (e.g. hand washing).

Sudden and pervasive interest in sex.

Pregnancy, sexually-transmitted diseases.

States that they have been abused, or describes activities which are sexually abusive, or hints about such activities.

Tries to make self as unattractive as possible.

Sexualised behaviour with younger children, e.g. inappropriate touching, games with sexual overtones.

SEXUAL ABUSE

ADULT BEHAVIOUR THAT COULD INDICATE SEXUAL ABUSE

May be unusually over-protective of the child.
Is jealous of the child's relationships with peers or other adults, or is controlling of the child.
Discourages the child from unsupervised contact with peers.
Accuses the child of being sexually provocative.
Misuses alcohol or drugs.
Invades the child's privacy – e.g. during dressing, when in bathroom, etc.
Demonstrates physical contact or affection to the child which appears sexual in nature, or has sexual overtones.
Displays an inappropriate relationship with the child. For example, treats the child as a 'partner' or 'girlfriend'.
May favour the victim over other children.
Uses the internet, text messages and social media to initiate conversations of a sexual nature with children and/or young people.
Buying a child gifts or giving money

Around 90 percent of child sexual abuse is committed by someone known to the child or their family.

Neglect is the failure to provide for the child's basic needs such as housing, nutrition, adequate supervision, medical and psychological care, and education.



What is NEGLECT?

Neglect is any act or omission that results in impaired physical functioning, injury and/or development of a child or young person.*

Neglect is one of the most prevalent forms of abuse to children and one of the most difficult to define.

Neglect can also be a one-off event, as in abandonment.

Neglect is usually the result of a parent or caregiver omitting to do something, rather than a deliberate act to harm a child. Neglect can cause long term serious harm to a child's health or development.

Neglect causes both physical and emotional harm to the child.

Neglect can be characterised by:

- **Physical neglect** – failure to provide the necessities to sustain the life or health of the child or young person
- **Neglectful supervision** – failure to provide developmentally appropriate or legally required supervision of the child or young person, leading to an increased risk of harm
- **Medical neglect** – failure to seek, obtain, or follow through with medical care for the child or young person, resulting in their impaired function or development
- **Abandonment** – leaving a child or young person in any situation without arranging necessary care for them and with no intention of returning
- **Educational neglect** – failure of a parent or caregiver to meet a child's education needs.
- **Refusal to assume parental responsibility** – unwillingness or inability to provide appropriate care or control for a child

* Fanslow, J.L. & Kelly, P., 2016. Family Violence Intervention Guidelines: Child and Partner Abuse. Ministry of Health, Wellington.

NEGLECT

PHYSICAL INDICATORS OF NEGLECT – CHILD

Can be dressed inappropriately for the season or the weather. This could result in recurrent colds, pneumonia, sunburn, frostbite, etc.

Is often extremely dirty or unbathed. (Not to be confused with the 'healthy dirtyness' of an active child.)

May have severe nappy rash or other persistent skin disorders, or rashes resulting from improper hygiene, or lack of it.

Is inadequately supervised, or left unattended frequently, or for longer periods of time than is normally accepted.

May be left in the care of an inappropriate caregiver – e.g. one that is too young, or too old, to care for and protect the child.

Does not receive adequate medical or dental care and has unattended health problems.

Malnourished – may be undersized, have low weight, sallow complexion, lack of body tone.

Lacks adequate shelter – lives in housing that is unsafe, inadequately heated, or is unsanitary.

Child suffers from a condition called non-organic failure to thrive. This occurs when the child (infant or very young child) falls behind in weight, height and development with no medical explanation (this condition may also be the result of emotional abuse).

NEGLECT

CHILDREN'S BEHAVIOUR THAT COULD INDICATE NEGLECT

Suffers from severe developmental lags (speech, motor, sensory) without an obvious physical cause. Children may exhibit global delays.

Demonstrates lack of attachment to parents.

Demonstrates indiscriminate attachment to other adults.

Poor school performance, or school attendance.

Has frequent unsupervised absences from home, or is left at home alone or unsupervised.

Is very demanding of affection or attention.

Engages in delinquent acts, or abuses alcohol or drugs.

May steal food.

Has poor social skills.

Has no understanding of basic hygiene.

Discloses that parents are absent, or basic needs are not being met.

For most children, New Zealand Aotearoa is a wonderful place to grow up. Some are not so lucky.

NEGLECT

ADULT BEHAVIOUR THAT COULD INDICATE NEGLECT

Is overwhelmed with own problems and puts own needs ahead of those of the child.

Fails to provide for the child's basic needs, such as housing, nutrition, medical and psychological care.

Does not provide routine supervision for the child.
Is frequently unaware of and has no concern for the child's whereabouts or activities.

Fails to enrol a child in school, permits truancy from school, or fails to provide for the special educational needs of the child.

Demonstrates little or no involvement in child's life – does not attend recreation events, school activities, etc.

Leaves the child alone, unattended or fails to adequately supervise the child, or abandons the child.

Drug and alcohol abuse.

If you think a child is not getting the care they need, trust your instincts

What is EMOTIONAL ABUSE?

Emotional abuse is any act or omission that results in impaired psychological, social, intellectual and/or emotional functioning and development of a child or young person.*

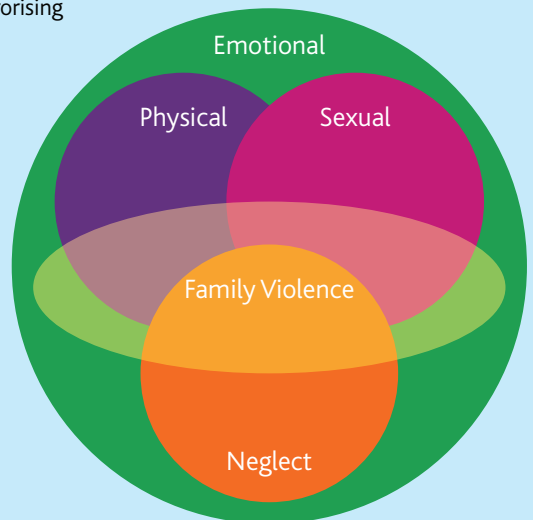
The effects of emotional abuse are not always immediate or visible. The long-lasting effects may only become evident as a child becomes older and begins to show challenging behaviours or symptoms.

Emotionally abusive behaviour on the part of the caregiver can include verbal abuse, a pattern of rejecting, degrading, ignoring, isolating, corrupting, exploiting or terrorising a child.

Emotional abuse may result from exposure to family violence, or involvement in illegal or anti-social activities.

Children who are sexually abused, physically abused or neglected are always victims of emotional harm as well.

The different types of abuse are interrelated



* Fanslow, J.L. 2002. Family Violence Intervention Guidelines: Child and Partner Abuse. Ministry of Health, Wellington.

EMOTIONAL ABUSE

PHYSICAL INDICATORS OF EMOTIONAL ABUSE – CHILD

Bed-wetting, or bed soiling that has no medical cause.

Frequent psychosomatic complaints (eg. headaches, nausea, abdominal pains).

The child suffers from a condition called non-organic failure to thrive. This may indicate neglect and occurs when the child (infant or very young child) falls behind in weight, height and development with no medical explanation.

Appears pale, emaciated, has 'sunken cheeks'.

Body fat ratio is extremely low – e.g. wrinkled buttocks.

Skin may feel like parchment or paper resulting from dehydration.

Prolonged vomiting and/or diarrhoea.

Has not attained developmental milestones within the child's age range – e.g. cannot hold head up at six months of age, cannot walk at 18 months of age.

Suffers from malnutrition.

Dressed differently from other children in the family.

Has deprived physical living conditions compared to other children in the family.

Don't be afraid to offend an adult
to protect a child.

EMOTIONAL ABUSE

CHILDREN'S BEHAVIOUR THAT COULD INDICATE EMOTIONAL ABUSE

Suffers from severe developmental lags (speech, motor, sensory) without an obvious physical cause.

Severe symptoms of depression, anxiety, withdrawal or aggression.

Severe symptoms of self-destructive behaviour. May threaten or attempt suicide. May engage in drug or alcohol abuse.

Overly compliant, too well-mannered, too neat and clean.

Displays extreme attention-seeking behaviours, or displays extreme inhibition in play.

When at play, behaviour may model or copy negative behaviours and language used at home (e.g. smacking or yelling at doll).

Recurring physical complaints without medical cause (e.g. abdominal pain, headaches, sore throat, nausea, etc).

Runs away from home.

Nightmares, poor sleeping patterns.

Antisocial behaviours. May not cope well in social settings.

Lack of self esteem.

Obsessive behaviours.

Developing psychotic symptoms.

Appears generally as a 'sad' child.

Indicates they have witnessed family violence or violence is occurring in their home.

Child abuse is a community problem that needs a community solution.

EMOTIONAL ABUSE

ADULT BEHAVIOUR THAT COULD INDICATE EMOTIONAL ABUSE

Labels the child as inferior, or publicly humiliates the child.

Treats the child differently from siblings or peers.

Actively refuses to help the child, or acknowledge the child's request for help.

Threatens the child with physical harm or death, or forces the child to observe physical harm inflicted on a loved one.

Locks the child in a closet or room for extended periods of time.

Refuses to allow interactions or relationships with peers or adults outside the family.

Teaches or reinforces criminal behaviour.

Withholds physical and verbal affection from the child and ignores the child's attempts to interact.

Has unrealistic expectations of the child.

Involves a child in 'adult issues' such as separation or disputes over the child's care.

What is FAMILY VIOLENCE/HARM

Family violence is not only acts of physical violence, it also includes intimidating behaviour such as threatening to harm people, pets or property. Children are always affected either emotionally or physically where there is family violence, even if they are not physically present.

The indications that children have been affected by family violence include those covered in the physical, sexual, neglect and emotional abuse sections of this book.

While some men experience violence from partners and family members, women and children are the most common victims of family violence.

Indicators of Family violence – in the child include:

- May present with physical injuries
- May experience problems at school
- Child discloses or describes violent actions
- May display bullying or aggressive behaviour
- May display signs of depression

Indicators of Family violence – in adult victims include:

- May have physical injuries including:
 - Facial injuries
 - Bruising in chest and abdomen
 - Injuries during pregnancy
 - Multiple injuries, and patterns of repeated injury

- May have emotional responses including:
 - Depression, headaches, sleeping and eating disorders
 - Panic attacks, drug abuse and dependency on alcohol
- May give excuses for injuries or their partner's aggressive behaviour in an attempt to not draw attention to the violence
- Is fearful and appears to have no autonomy or self-worth

Indicators of Family violence – in perpetrators include:

- Isolates partner from family, friends, associates and wider community
- May move frequently
- Exhibits controlling behaviour over both partner and children
- Uses aggressive and physical violence towards partner and children
- Threatens, criticises, intimidates partner and children
- Uses subtle intimidation tactics such as threatening to, or actually harming pets
- Is sexually controlling and may force sex on their partner
- Minimises or denies own behaviour, or blames the victim for the perpetrator's own behaviour

What makes a child more **VULNERABLE TO ABUSE?**

Research and analysis both in New Zealand and internationally have identified a number of factors that are associated with children's increased vulnerability to abuse. There is a general consensus, that as the number of such factors increase, so the likelihood of child abuse and neglect increases.

In the same way that one or two symptoms of abuse do not prove that the child has been abused, the presence of any one or two vulnerability or risk factors does not mean that abuse becomes a certainty.

These factors alert us to the probability or chance that some form of abuse *may* occur.

Overall, the more vulnerability and/or risk factors there are, the greater the likelihood of abuse. Obviously, although the likelihood might be greater, it is not inevitable, and with other strengths, invulnerabilities and protective factors, most children can do very well.

The presence of factors that increase vulnerability should alert us that a situation might be serious, and that help and support could be needed.

Every morning thousands of children wake up to child abuse.

It's time we all did.

What makes a child more **VULNERABLE TO ABUSE?**

There are a number of factors that can make a child more vulnerable to abuse. Factors that can increase vulnerability include:

- **Young Mother**
 - mother is under 18 years
 - may have little or no support
 - may have no educational qualifications
 - may have low self esteem and poor coping skills
- **Parent has psychiatric history or untreated mental illness**
- **Child is living with an unrelated adult**
- **Family history of abuse.**
A parent or family member may have:
 - been suspected of physical abuse in the past
 - been the victim of abuse as a child
 - a history of mistreating animals
- **Family Violence/Harm**
 - abusive or neglectful partner
 - violent outbursts, poor impulse control
- **Child is unwanted, or at risk of poor bonding**
 - early separation from mother
 - low maternal involvement
 - dissatisfaction with the child
 - child gets very little attention in the first two years
- **Social isolation**
 - minimal antenatal care
 - frequent change of address
 - lack of family support
- **Drug and/or alcohol misuse**
 - known drug taking, drug manufacture, or drug-dealing
 - excessive use of alcohol
- **Unrealistic expectations of child's behaviour**
 - harsh or inappropriate punishment
 - poor parenting skills, lack of understanding of child development or child care
- **Multiple crises or stresses**
 - poverty
 - lack of essential resources
 - children with special needs
 - overcrowding
 - multiple birth

About CHILD MATTERS

Unlike many other countries, in New Zealand child protection training is not mandatory for professionals or volunteers who work with children and young people. This means teachers, sports coaches and even social workers may never have received training relating to child abuse and neglect, how to recognise the signs of abuse, and how to respond if risk is identified.

This is the reason Child Matters exists – to upskill those working and interacting with children, young people and their families and whānau so they are able to identify risks concerning vulnerability and abuse and have the knowledge and confidence to take appropriate action.

Child Matters works with all sectors including professional, community organisations, families and whānau, to deliver training, provide advice regarding policy and procedures, and recommend resources regarding child protection issues. For the many people Child Matters deliver these services to, it is the only child protection training they have received.

Educating all sectors of our community how to protect our tamaraki is essential to reducing abuse and neglect in New Zealand.

Children rely on adults
to keep them safe.



EDUCATING TO PREVENT CHILD ABUSE



Help Child Matters **HELP CHILDREN**

HOW CAN YOU SUPPORT US?

Please go to our website:

<http://www.childmatters.org.nz/61/supporting-child-matters/ways-to-support-us>

or contact us on:

Child Matters
PO Box 679, Hamilton 3240
Phone (07) 838 3370
Website www.childmatters.org.nz
Email info@childmatters.org.nz

If you have a concern about a child or family, call:

Ministry for Children, Oranga Tamariki

0508 326 459

Or

Police:

Contact your local Police Station

In an emergency call 111 and ask for Police

If you require further assistance

Parenthelp – free national parent helpline providing compassionate, friendly, non-judgmental support and advice on all parenting issues.

0800 568 856

PlunketLine – free parent helpline and advice service available 24 hours a day, 7 days a week to all parents who need help.

0800 933 922

Healthline – provide free health advice to parents about babies and children.

0800 611 116

Rape crisis – regional support centres for survivors of rape and sexual abuse, their families, friends and whānau.

0800 88 33 00

The Salvation Army – provide budgeting advice, food and clothing assistance, life skills programmes and other comfort and support nationwide.

www.salvationarmy.org.nz

Barnardos – provide child and family support services, early learning and childcare nationwide.

www.barnardos.org.nz

Family Works – offer a range of social services for children, young people, families and whānau, facing challenges in their lives, which they are not able to overcome on their own.

www.familyworks.org.nz

Women's Refuge – national organisation working to end domestic violence towards women and children.

www.womensrefuge.org.nz

Le Va – support Pasifika families and communities to unleash their full potential and have the best possible health and wellbeing outcomes.

www.leva.co.nz

Care NZ – committed to helping people to live a life free from the harms of alcohol or other drugs.

www.carenz.co.nz



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