Training Manual
For the Religious Sector on Child Protection
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FOREWORD FROM THE EXECUTIVE COMMITTEE OF THE FAITH BASED CHILD PROTECTION MOVEMENT

Since the advent of democracy in 1994, South Africa has made remarkable progress in efforts to improve the wellbeing of its citizens. South Africa is recognised for its strong legislative framework and policies, including those aimed at protecting and promoting children’s rights as articulated in the United Nations Convention on the Rights of the Child, enshrined in the Constitution of the Republic of South Africa and the Children’s Act No. 38 of 2005. South Africa is faced with the triple challenge of enduring poverty, inequality, and unemployment, which impacts the lives of children. Almost two thirds of the South African children live below the upper bound poverty line with children in rural areas and those living in female headed households being particularly at risk.

This training manual has been developed jointly by the religious sector of South Africa comprising of various denominations, faith based organisations, government, various child protection organisations, and community organisations with the support of UNICEF. The purpose being to capacitate the sector to protect children, develop sector policies and report cases of violation on children’s rights.

“There can be no keener revelation of a society’s soul than the way in which it treats its children.”
-Nelson Mandela: Former President of South Africa
MESSAGE FROM UNICEF

It is a privilege for UNICEF South Africa to partner on the production of this important, and timely, training manual on child protection that is specifically for representatives from faith-based organisations.

For several decades and across many countries, UNICEF has worked with faith-based organizations to harness the unique voice and role of religious leaders to promote child protection in local communities. This commitment to leaving no child behind has motivated our support for the development of this comprehensive and necessary guide.

We recognize the influence, both globally and in South Africa, that this sector holds in convening communities in prayer, song, cultural gatherings, and dance while building and strengthening social cohesion. With this manual we hope to further strengthen the role and capacity of faith-based communities to foster a nurturing and protective framework for children and their families.

UNICEF is committed to engage with all our partners to ensure that children are protected from violence, abuse, neglect and exploitation. Together, we can reimagine, and work towards, a world where all children can survive, develop and thrive with opportunity to reach their fullest potential.

Christine Muhigana
Representative
UNICEF South Africa
ACKNOWLEDGEMENTS

The Faith Based Child protection Movement would like to acknowledge the following organisations and individuals for their contributors:

- UNICEF South Africa (Funding and Technical support)
- Religious leaders in the various provinces of South Africa
- Department of Social Development: National and Provincial levels
- Dr Antoinette Basson: University of South Africa
- Faith Based Child protection Movement:
  - Thembelani Ngqikasi, Bishop Bhekimi Mchunu and Professor Mbulelo Dyasi
  - Vanessa Chetty and Angel Arends (Compilation of the manual)
<table>
<thead>
<tr>
<th>Abbreviation</th>
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<tr>
<td>AIDS</td>
<td>Acquired Immunodeficiency Syndrome</td>
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<tr>
<td>CBO</td>
<td>Community Based organisation</td>
</tr>
<tr>
<td>CDW</td>
<td>Child Domestic Worker</td>
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<td>CHH</td>
<td>Child Headed Household</td>
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<td>CPW</td>
<td>Child Protection Week</td>
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<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>CSAM</td>
<td>Child Sexual Abuse Materials</td>
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<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
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<td>DCPO</td>
<td>Designated Child Protection Organisation</td>
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<td>DSD</td>
<td>Department of Social Development</td>
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<td>FBCPM</td>
<td>Faith Based Child Protection Movement</td>
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<td>FBO</td>
<td>Faith Based Organisation</td>
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<td>FGM</td>
<td>Female Genital Mutilation</td>
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<td>GBV</td>
<td>Gender-based violence</td>
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<td>GBVF</td>
<td>Gender-based Violence and Femicide</td>
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<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<td>NCCAN</td>
<td>National Committee on Child Abuse and Neglect</td>
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<td>NCPR</td>
<td>National Child Protection Register</td>
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<td>NPAC</td>
<td>National Plan of Action for Children</td>
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<td>POPIA</td>
<td>Protection of Personal Information Act</td>
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<tr>
<td>SDG</td>
<td>Sustainable Development Goals</td>
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<tr>
<td>STI</td>
<td>Sexually Transmitted Infections</td>
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<td>SAPS</td>
<td>South African Police Service</td>
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<tr>
<td>TIP</td>
<td>Trafficking in Persons</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
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<td>UNCRC</td>
<td>United Nations Convention on the Rights of the Child</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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A. INTRODUCTION

The high level of violence is a challenge to the country and South Africa continues to make efforts to ensure that violence against children is addressed. The religious sector has also identified the critical contributions the sector can make to fight the scourge of violence and join other stakeholders to work together in addressing violence against women and children. The religious sector has always played a critical role in the development of a child and for this reason this manual has been developed to enhance and improve services rendered to a child in the religious space. The need for a collaborative effort in ensuring safe spaces for a child has been the vision and motivation in the development of a comprehensive document that promotes child safety. This manual has been developed to empower the sector to perform this role with the required skills and knowledge. It also serves to inform the religious sector about the various role players in child protection and to work within the CARE Network to promote the best interest of a child. The CARE Network provides a collaborative and holistic approach to create safe spaces for children by involving all role players.

1. Background

In the quest to develop this manual, the religious sector and UNICEF South Africa held several workshops since 2017, to establish a working relationship or partnership within the sector to address high levels of violence against children. The sector recognised the fundamental role the sector can play and the power of influence they hold in contributing towards building a safer South Africa for children. Workshops were held in Gauteng, KwaZulu-Natal, and Cape Town where the sector was capacitated on global, regional, and country level instruments and legal frameworks on the rights and welfare of children. Another critical partner in the process was the Department of Social Development (DSD) at national and provincial levels. Of great emphasis was the protection of children from violence and using the Doctrines of religious institutions to promote teachings within the sector to create societies that will care and look after children. The purpose was to build a network of religious leaders that will develop and share tools to identify and report child abuse. These workshops were attended by faith leaders from various religions, united by a common purpose of working together to protect children.

The workshop that was held at Indaba Hotel Gauteng on the 16th and 17th September 2019 took a concrete resolution of establishing a movement on child protection. The objective of the movement would be to empower and capacitate the religious sector on child protection matters. Subsequently, the Faith Based Child Protection Movement (FBCPM) was created and a partnership was formed with UNICEF South Africa to develop a toolkit for training the sector. This manual is a resource that has been developed
by the religious sector to improve its services aimed at protecting children and can be amended periodically to align with the developments in the child protection sector within the country.

At the series of workshops held, various challenges were also identified. These included:

- Minimal understanding of the different legislations relating to child protection and child abuse
- How does a religious leader respond to child protection matters?
- How to compile an internal child protection policy.
- How to support the child, the family, and the community.
- How to contribute to the effective referral system?
- How to sensitize religious communities on child protection within their organisation and the religious communities at large.
- What services are available to a child victims of violence
- How to prevent violence against children and build safer communities.

Taking into consideration the numerous challenges that were identified, the religious sector took an immediate decision to address these challenges by formalizing the Faith Based Child Protection Movement. A team was appointed within the Movement to further consult broadly with religious leaders, Government organisations and non-Government organisations to develop a tool to address the identified gaps.

After various consultative workshops, the team then began to develop the training manual with a range of tools on child protection. This manual is a means to respond to the call made by the sector, calling for more empowerment, knowledge building and building systems of working together with other actors to contribute towards creating safety nets for children within communities and their churches. The 365 days Child Protection Programme of Action on No Violence Against Children was launched by the Department of Social Development (DSD) in December 2019 and the need for the religious sector to participate in the 365 days Child protection campaign as a key stakeholder became evident. UNICEF South Africa’s support in cementing the role of the religious sector as a key stakeholder in the safety, care, and protection of all children in South Africa is invaluable.

In developing this manual, various child protection training manuals were consulted, and relevant materials were extracted and adapted therefrom. All efforts have been taken to acknowledge properly those relevant sources of information.
2. Target Group and Approach

The targeted groups that will benefit from the contents of this manual include multi- faith religious leaders, staff within religious organisations, volunteers within the sector including church committees and community-based child protection role players who interface and work with the religious sector.

Putting children at the centre of this manual will ensure that all role players work in consultation and consideration of the children and their families. This approach also creates a more holistic approach to child protection without compromising services offered to children.

A child-centred and child-focused approach was adopted when developing this tool. This means that the primary focus is on protecting and promoting children's safety and wellbeing and ensuring that they are heard in situations that directly affect them. The manual is designed to help religious leaders and religious organisations, keep issues of child safety, protection, and wellbeing at the centre of their policies and practices. Children are directly and indirectly affected by decisions and policies made on their behalf and it is particularly important that children be consulted depending on their age and level of maturity. Being child-centred is about elevating the status of children's interests, rights, and views in the work of our organisations as the religious sector. It involves considering the impact of decisions and processes on children and seeking their input when appropriate to inform our work.

Putting children at the centre of this manual will ensure that all role players work in consultation and consideration of the children and their families. This approach also creates a more holistic approach to child protection without compromising services offered to children.

3. About the Training

The “Training for the Religious Sector on Child Protection” will be covered in 3 days. It is broken down into 11 sessions, which are:

**Session 1:** Introduction to the Training for the Religious Sector on Child Protection  
**Session 2:** International and National Legal Framework for Child Protection  
**Session 3:** Understanding Child Protection  
**Session 4:** Understanding Factors that put children at risk  
**Session 5:** Religious leaders’ responses to various forms of child protection concerns  
**Session 6:** Protection for special categories of children  
**Session 7:** The religious organisation as a place of healing  
**Session 8:** Technology, Social Media and Online Violence  
**Session 9:** Preventing Child Abuse within Religious Organisations  
**Session 10:** Developing Referral Pathways for Religious Organisations  
**Session 11:** Plan of Action and Conclusion
The training is interactive in nature and builds on pre-existing knowledge and experiences of participants.

What you will need for the training:

- The attendance register
- Flipchart paper, pens and stand
- Prestik
- Blank sheets of paper
- Post-it, multi-colored sticky notes
- Different pictures from magazines depicting children in different situations and environments. Provide a mix of pictures, ensuring that they reflect the society and culture of the training group and that they reflect the range of concepts that you want to draw out
- PowerPoint presentation with all session notes and the necessary equipment
4. Guidelines for Facilitators

This training should be conducted by two facilitators, one of them should have a good understanding of child protection as a subject. The following are important guidelines for facilitators to adhere to for a successful training:

**Planning**

As a facilitator be emotionally and psychologically prepared to deliver this training. We all have issues we deal with from our childhood and our experiences as adults. Ensure that you are in the right frame of mind to engage in an emotive subject like child protection and that you are ready to deal with issues should some of the participants in your group express themselves emotionally during the training. Know what to do and have support ready should there be a need for it. Preparation also goes with studying the content of the training. Be mindful of the language you use and be culturally sensitive. At the same time, it is important to use the appropriate labels and words for body parts and other aspects of sexuality.

This training manual contains several supportive notes, handouts, and exercise sheets to help facilitators feel comfortable and knowledgeable about the subject. Each session has activities and materials to be presented. Make sure that you understand all the activities you will be using and have all the relevant materials and tools you need to present the manual. Ensure that you have definitions of concepts and not be caught off-guard if participants ask for definition. Be prepared and do not appear disorganised in front of the participants as they might lose confidence in you.

**Presentation Skills**

Being a facilitator requires skills and experience. If you are new in training, ensure that you pair up with an experienced facilitator who will support and mentor you. Make sure that you undergo the necessary preparation to enable you to present the material in this training manual. Key skills are listening and reflection skills. Encourage participants to reflect on what they are being taught and remember that as a facilitator you are not expected to know all the answers. Feel free to ask for participants’ views too. If as a facilitator you are not in a position to answer a question from a participant, it is alright to say you are not sure of the answer, but you will look it up and come back to the group with a response. It is also important to be respectful and gracious about any inputs made by participants. Always thank participants for their inputs and remember “no input is wrong” – facilitators always find a way to make any input worthwhile. Another skill is to start from strengths. Avoid being critical of any inputs. Always ask for positive inputs first, i.e. what works and what is good before moving to what could be negative as this sets the tone for a positive learning environment.
Creating a Conducive Learning Environment

Develop a learning agreement/ground rules/disciplines with the group to make sure that the training environment has the right atmosphere for learning. Adults participate more if they are comfortable, therefore, as the facilitator, you need to think about possible different learning styles. Remember that people retain 10% of what they see, 30 – 40% of what they see and hear and 90% of what they see, hear, and do. Take note of any specific learning needs of the participants and adapt your training to the group to make sure it is appropriate. Find out beforehand if any of the participant have hearing, visual or mobility impairments before the training and prepare the training room in such a way as to accommodate those special needs.
B. SESSION 1: INTRODUCTION TO THE TRAINING FOR THE RELIGIOUS SECTOR ON CHILD PROTECTION

1. Welcome and Session Opening Procedures

- Welcome all the participants to the training.
- Ask everyone to complete the attendance register
- Give each participant a name tag to complete and ask them to write the names they prefer to be called by. (The handwriting must be legible and in large letter, written with black or blue ink not red).
- Introduce yourself to the group.
- Deal with housekeeping issues, such as location of toilets, water sources, breaks. Include the Occupational Health and Safety requirements such as safety, evacuation plan, fire drill etc. If this training is conducted under COVID-19 conditions, make sure that all the necessary safety protocols are adhered to.
- Check with the group how they would like to start the session, e.g. prayer, song, moment of silence, etc.
- Ask participants to turn to the person seated next to them and each must read out the name of the other person.
- Then ask each participant to introduce himself or herself to the big group, stating where they come from and the organisation they represent.
- Develop a Learning Agreement. Mention that the subject and issues you will be discussing on the training programme can be exceedingly difficult and provoke strong emotions and memories. Therefore, it is important that everyone agrees rules and boundaries for the training so that everyone in the group feels safe and supported and can learn effectively. Lead this exercise mentioning what you would like the group to commit too, such as keeping cell phones off and listening attentively to one another. Ask participants to add their points and once you have exhausted all, pin the rules on the wall for everyone to see.
- Expectations: Explain to the group that they will now reflect on and discuss their expectations for the training:
  - Put up two pieces of flipchart paper on opposite walls
  - Write the following:
    - “My expectations and hopes” on one paper
    - “My fears / concerns” on the second paper
  - Explain that the group will now write their expectations on the appropriate piece of flipchart paper
If they find someone has already written what they wanted to, they can think of another expectation or concern, if they like. They should try not to repeat what is on the paper.

Hand out flipchart pens and pieces of blank paper to the group.

When people have written their input, they must stick it on the relevant flipchart paper.

When the activity is finished, work through the expectations and explain whether the training programme will address these expectations.

Work through the fears / concerns paper and discuss each one in terms of how it can be addressed during the course of the training.

2. Training Overview

- Give a brief overview of the entire training. In brief, introduce all training modules and training objectives, including how long each module will take as well as the duration of the entire training.

- Explain that the training will be presented in English and that the notes will be in English. However, emphasize that participants should be free to communicate in any language that they feel comfortable with. Translations should be provided where necessary.

- Explain sessions that will be covered today. In a flip chart, share how the day will be structured (prepare this a day before so that it is clear for everybody).

- Explain the overall objectives of the training. Display this on PowerPoint and go through each point, making sure that participants understand before moving to the next point.

Read out the Objectives of the Training and Learning Outcomes

Mention that through this training, religious leaders will be able to:

- Identify applicable sections in the relevant legislation that relates to Child Protection
- Know the different forms of violence, child abuse, exploitation, and neglect
- Understand the barriers that deter some religious organisations from responding to Child protection issues effectively and timeously
- Understand the barriers that may prevent children from reporting abuse and neglect to religious leaders
- Describe how to respond to the different forms of abuse
- Develop an internal Child Protection Policy for a religious organisation
- Compile a basic reporting and referral system for their religious organisation
- Have a basic understanding of how their religious organisation should respond to child protection matters and how to support the child, the family, the community, and government in the child protection system.
Exercise: Setting the scene visualization

- The aim of this exercise is to help participants focus on children and begin to examine their own attitudes and values about children and childhood. The exercise will also help participants share a bit of themselves with the group.
- Ask participants to choose one picture that appeals to them in some way or that they feel attracted to in some way. Ask participants to think about the picture they have chosen for a few moments and ask themselves:
  - What are my thoughts and feelings about the picture? They must identify the feeling the picture evokes, e.g. joy, anger, sadness, etc. and think about the reason they chose the picture
  - Then ask participants to find a partner and talk about the picture. In pairs they must take turns to share what made them choose the picture; what the picture made them feel and/or think and why?
  - Let the pairs discuss this for about 5-10 minutes
  - Bring the group back for feedback. Then ask what they think about children and childhood generally, based on their discussions on the selected pictures
  - Ask for their thoughts on child abuse based on the pictures they discussed

3. Introduction to the Rights of Children

- Read out this session’s introductory remarks and go through each point carefully.
  - The United Nations Convention on the Rights of the Child (UNCRC/CRC)\(^1\) recognises the human rights of all children, including those with disabilities. All children need a safe and secure childhood as it provides them with the best chance of achieving a healthy, well-adjusted adulthood
  - Adverse childhood experiences, including violence, are known to be related to a wide range of negative health and social outcomes later in life
  - Children with disabilities encounter different forms of exclusion and are affected by them to varying degrees depending on the type of disability they have, where they live and the culture or class to which they belong
  - Children with disabilities are often regarded as inferior, and this exposes them to increased vulnerability. Discrimination against and exclusion of children with disabilities renders them disproportionately vulnerable to violence, neglect, and abuse
  - All children therefore need their rights to be understood and addressed both in practice and at policy level. The CRC outlines the fundamental rights of children, including the right to be protected from economic exploitation and harmful work, from all forms of sexual exploitation and abuse, and from physical or mental violence, as well as ensuring that children will not be separated from their family against their will.

\(^1\) Convention on the Rights of the Child: Adopted and opened for signature, ratification and accession by General Assembly resolution 44/25 of 20 November 1989; entry into force 2 September 1990, in accordance with article 49.
Let us now go through some of the key guiding principles for our work with children as articulated in the CRC.

**a) Non-discrimination**

Article 2 of the UNCRC: A child has the right to protection against discrimination. This means that nobody can treat a child badly because of colour, sex or religion, if he/she speaks another language, has a disability, or is rich or poor. This principle as identified by the Committee on the Rights of the Child is that all children should enjoy their rights and should never be subjected to any discrimination.

**b) Best interest of the child**

Article 3 as per the UNCRC: In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration. The best interest principle means that any decision made regarding a child, should be aimed at fostering and promoting the child’s wellbeing, safety, security, emotional and physical development. Therefore, services and facilities responsible for the care and protection of children shall conform to the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision.

**c) The right to survival and development**

Article 6 as per the UNCRC: A child has the right to life. This principle is related to children's economic and social rights. This is about promoting the development of children to their full potential, to the maximum possible extent.

**d) The views of the child**

Article 12 of the UNCRC: A child has the right to an opinion and for it to be listened to and taken seriously. This principle is about respecting the views of the child. In order to know what is in the interest of the child it is logical and desirable to listen to him or her. This guiding principle promotes the participation of children in matters and decisions involving them. This principle does not mean that everything that children say or want will be done. However, It is about giving weight to their views and respecting them as citizens who can contribute to decisions affecting their lives.

Once you have gone through all these points tell participants that there will now be a lengthy discussion on the UNCRC and other legal instruments as we start to engage with the issues in-depth in Session 2.
C. SESSION 2: CHILD PROTECTION LEGAL FRAMEWORK

1. Session Aim and Learning Outcomes

Aim:
To raise awareness on international and local legislation and procedures for protecting children.

Learning Outcomes:
- At the end of this session, participants will be able to:
  - Identify key international instruments/frameworks and national local laws and that influence the protection of children.
  - Describe how these instruments and laws can help protect children.

- For this session, the facilitator will need:
  - To prepare by reading and gathering information about the laws on protecting children, and procedures in South Africa.
  - Prepare a PowerPoint presentation highlighting key discussion points for this session.

- Begin the session by pointing out that:
  - Every country has different laws and systems designed to help protect children. South Africa has its own systems that articulate what different stakeholders are legally mandated to do to protect children.
  - It is the responsibility of religious leaders and religious institutions to understand these laws and processes so that at a local institutional level, they also design policies and procedures to promote the protection of children.

- Mention that we are now going to talk about international and national instruments for the promotion of child protection. For this section, use the brainstorming method by asking participants to first mention key international instruments that they know of or have heard of that protect children.

- Write them down on the flipchart. Ask participants to mention key points about instruments they have identified. Once these have been listed, take participants through points on each of the instruments they have mentioned and add those they did not mention, using the material below.
### 2. International Legal Framework

| UN Convention on the Rights of the Child (UNCRC/CRC)² | - South Africa ratified the CRC on 16th June 1995  
- Highlights the basic principles of the United Nations and specific provisions to certain relevant human rights treaties and proclamations such as the Universal Declaration of Human Rights  
- Reaffirms the fact that children, because of their vulnerability, need special care and protection; and,  
- Places special emphasis on the primary caring and protective responsibility of the family, the need for legal and other protection of the child, the importance of respect for the cultural values of the child’s community, and the vital role of international co-operation in achieving the realisation of children’s rights.  

The CRC articulates key principles of:  
- a. Non-discrimination  
- b. Best Interest of the child  
- c. The right to survival and development  
- d. The views of the child  


Responsibilities of the child: The Charter sets out responsibilities of children too. Article 31 states that: Children have responsibilities towards their families and societies, to respect their parents, superiors and elders, to preserve and strengthen African cultural values in their relationship with other members of their families.  

The African Charter also articulates General Principles as outlined in the UNCRC. |

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<table>
<thead>
<tr>
<th>Kyoto Declaration</th>
<th>The Kyoto Declaration was an outcome of discussions with multiple religious organisations. The “Religious Commitment to Confront Violence against Children” was formally adopted at the Eighth World Assembly of Religions for Peace in Kyoto, Japan, August 2006. The Kyoto Declaration has served as an invaluable resource for those engaged in multi-religious cooperation and advocacy for children. It explicitly recommends prohibition of corporal punishment and has provided a guide for religious leaders working with others towards the prohibition of corporal punishment and other forms violence against children.</th>
</tr>
</thead>
</table>
| Sustainable Development Goals (SDGs) | The Sustainable Development Goals or Global Goals are a collection of 17 interlinked goals designed to be a "blueprint to achieve a better and more sustainable future for all by 2030. For children there are specific child protection related indicators that UNICEF as the custodian of children’s rights is monitoring and these include:  
- Early childhood development  
- Under-5 mortality  
- Child marriages  
- Female Genital Mutilation  
- Child discipline  
- Sexual violence against children. |
3. National Legal Framework

- Begin this section by stating that national laws contain practical provisions for protecting all children, including the provision of concrete implementation measures and processes. In South Africa, the Constitution guarantees some of the standards contained in international instruments already mentioned in the previous section.

Exercise: Small group discussion

- Break participants into smaller groups and give each group Handout 1 (Scenarios for legal framework). Encourage participants to fill in the correct Law/Act in the provided blank column, without helping them with any hints/answers. Give participants 7 minutes to fill in the handout. Then discuss the correct answers once everyone has finished writing in order to help them learn and test their knowledge on different Acts and Laws.

- After this exercise, present the material on national legislative frameworks using a power-point presentation or by reading through the notes below.
**Notes on National Frameworks**

| The Constitution of the Republic of South Africa (1996)⁴ | Contained in the Constitution is the Bill of Rights, which is a cornerstone of democracy in South Africa. It enshrines the rights of all people in the country and affirms the democratic values of human dignity, equality and freedom. With specific reference to children, section 28 enshrines the rights of children in particular: right to a name, shelter, care and protection and the best interest of the child etc. The Constitution states that: A child's best interests are of paramount importance in every matter concerning the child. According to the Constitution a "child" means a person under the age of 18 years. | Section 28 in the Constitution of South Africa is devoted to children and outlines the rights that they are entitled to. This does not mean that other rights enshrined in our constitution do not apply to them - Section 28 is specifically for SA citizens under the age of 18. It states that: 1. Every child has the right - a) to a name and a nationality from birth. b) to family care or parental care, or to appropriate alternative care when removed from the family environment. c) to basic nutrition, shelter, basic health care services and social services. d) to be protected from maltreatment, neglect, abuse, or degradation. e) to be protected from exploitative labour practices. f) not to be required or permitted to perform work or provide services that - (i) are inappropriate for a person of that child's age; or (ii) place at risk the child's well-being, education, physical or mental health or spiritual, moral or social development. g) not to be detained except as a measure of last resort, in which case, in addition to the rights a child enjoys under... |

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⁴ Constitution of the Republic of South Africa, 1996
Continuation of The Constitution of the Republic of South Africa (1996)\(^5\)

<table>
<thead>
<tr>
<th>Sections 12 and 35, the child may be detained only for the shortest appropriate period, and has the right to be – (i) kept separately from detained persons over the age of 18 years; and (ii) treated in a manner, and kept in conditions, that take account of the child’s age. h) to have a legal practitioner assigned to the child by the state, and at state expense, in civil proceedings affecting the child, if substantial injustice would otherwise result; and i) not to be used directly in armed conflict, and to be protected in times of armed conflict.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Children’s Act No. 38 of 2005</td>
</tr>
<tr>
<td>It gives effect to certain rights of children as contained in the Constitution; It sets out principles relating to the care and protection of children; it creates certain new offences relating to children; and provides for matters connected with modalities of care and protection of children including custody issues, surrogacy and parental responsibilities and rights.</td>
</tr>
<tr>
<td>Section 110 provides a list of persons who are legally obliged to make a formal report to a designated child protection organisation or the provincial Department of Social Development or a police official. The formal report must be made on the relevant form, Form 22 (Handout 2). This form is a formal way to report child abuse of any form. Abuse can be physical, emotional, and sexual as well as child neglect.</td>
</tr>
<tr>
<td>The National Child Protection Register (NCPR)</td>
</tr>
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\(^5\) Constitution of the Republic of South Africa, 1996
### Continuation of The Children’s Act

The National Child Protection Register consists of Part A and Part B. **Part A** is used to record information about the child and key documentation, reports of abuse and deliberate neglect and services the child received where possible, details about the incidents etc.

**Part B** of the Register keeps details of persons declared unsuitable to work with children.

**Form 30** is the application you make to the Department of Social Development to confirm that your name is not in the NCPR.

### Sexual Offences and Related Matters Act, Amendment Act 32 of 2007⁶

The Sexual Offences Act (SOA) deals with all legal aspects of or relating to sexual offences in a single statute. Enacting comprehensive provisions dealing with the creation of certain new, expanded or amended sexual offences against children and persons who are mentally disabled, including offences relating to sexual exploitation; sexual grooming; and child sex tourism and child pornography.

In addition to the Children’s Act, the Sexual Offences Act also places a legal obligation on people to report sexual abuse of children. The Act compels a person who knows or who has a ‘reasonable

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| **Continuation of Sexual Offences and Related Matters Act, Amendment Act 32 of 2007**<sup>7</sup> | belief or suspicion of any form of sexual abuse against a child or mentally challenged individual to report it to a police official. | Sexual offences take different forms, including:
- Rape
- Compelled rape
- Sexual assault
- Compelled sexual assault
- Compelled self-sexual assault
- Any unwanted or coerced sexual contact
Persons 18 years or older: compelling or causing persons 18 years or older to witness sexual offences, sexual acts or self-masturbation, exposure or display of or causing exposure of genital organs, anus, or female breast (“flashing”), child pornography to persons 18 years or older or engaging sexual services of persons 18 years or older. |
| **Protection of Personal Information Act, 2013 (POPIA)**<sup>8</sup> | The purpose of this Act is to: give effect to the constitutional right to privacy, by safeguarding personal information when processed by a responsible party, subject to justifiable limitations that are aimed at:
- balancing the right to privacy against other rights, particularly the right | Whilst all sections are important, Chapter 7 on the Issuing of Codes of Conduct is critically important for Religious Institutions. The Regulator may from time-to-time issue codes of conduct which must:
- incorporate all the conditions for the lawful processing of personal information or set out |

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<sup>8</sup> Please note that the enforcement of this Act has been staggered over the years. Parliament assented to POPIA on 19 November 2013. The commencement date of section 1, Part A of Chapter 5, section 112 and section 113 is 11 April 2014. The commencement date of the other sections is 1 July 2020 (with the exception of section 110 and 114(4)). The President of South Africa has proclaimed the POPIA commencement date to be 1 July 2020. Due to COVID-19 the 2020 commencement date has now been shifted to July 1, 2021.
<table>
<thead>
<tr>
<th><strong>Continuation of Protection of Personal Information Act, 2013 (POPIA)</strong></th>
<th>of access to information; and • protecting important interests, including the free flow of information within the Republic and across international borders.</th>
<th>obligations that provide a functional equivalent of all the obligations set out in those conditions; and •Prescribe how the conditions for the lawful processing of personal information are to be applied, or are to be complied with, given the features of the sector or sectors of society in which the relevant responsible parties are operating.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Domestic Violence Act No 116 of 1998</strong></td>
<td>The purpose of the Act is to afford victims of domestic violence the maximum protection from domestic abuse the law can provide and to introduce measures which seek to ensure that the relevant organs of state give full effect to the Act. The Act also provides for the issuing of protection orders with regard to domestic violence; and for matters connected therewith.</td>
<td>Section 1 of the Act defines domestic violence to include (among others) physical abuse; sexual abuse; emotional, verbal, and psychological abuse; economic abuse; and intimidation.</td>
</tr>
<tr>
<td><strong>Criminal Procedure Act 51 of 1977</strong></td>
<td>The aim of this Act is to make provision for procedures and related matters in criminal proceedings. This is to emphasize that any physical and sexual form of abuse is a criminal matter that needs to be investigated by the appropriate officials.</td>
<td>Pertinent to this Act is J88, which is a legal document that is completed by a medical doctor or registered nurse, documenting injuries sustained by the victim in any circumstance where a legal investigation is to follow. It may</td>
</tr>
</tbody>
</table>

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9 Please note that the enforcement of this Act has been staggered over the years. Parliament assented to POPIA on 19 November 2013. The commencement date of section 1, Part A of Chapter 5, section 112 and section 113 is 11 April 2014. The commencement date of the other sections is 1 July 2020 (with the exception of section 110 and 114(4). The President of South Africa has proclaimed the POPIA commencement date to be 1 July 2020. Due to COVID-19 the 2020 commencement date has now been shifted to July 1, 2021.
Continuation of Criminal Procedure Act 51 of 1977

be the only objective information available in a legal case.

4. Other Key National Policy Frameworks and Guidelines for Child Protection

- The National Plan of Action for Children (NPAC) (2012-2017)\(^{10}\) provides a holistic framework for the integration of all policies and plans developed by government departments and civil society to promote the well-being of children. It is important to focus on the status and well-being of children as it speaks volumes about the values and quality of life in any society. The NPAC aims to bring together existing international and national priorities for the survival, protection, development, and participation of children in South Africa in one coherent framework.

The NPAC 2012-2017 is directly aligned to the following 5 government priorities:

- Education
- Health
- The fight against crime and corruption
- Economic growth, decent work and sustainable livelihoods
- Rural development, food security and land reform

- Child abuse is a multi-faceted problem, that is, no single factor can explain the causes of abuse. Responding to child abuse therefore requires a multi-sectoral approach, partnerships between government and civil society and co-operation between all spheres of government and between government and civil society.


The main objectives of this Programme of Action are to:

(i) Prevent violence against women and children from occurring through a sustained strategy for transforming attitudes, practices and behaviours. Prevention and protection are at the core of this Programme of Action, with the emphasis on addressing the root and underlying causes of violence against women and children to stop it before it occurs. Through the Programme, a specific focus will therefore be placed on transforming attitudes, practices and behaviours to ensure that all South Africans reject violence against women and children. This will involve actions across different environments and targeting a range of groups, including local communities and schools, as well as working with individuals, particularly men and boys. The Programme provides a range of examples of prevention programmes such as:

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\(^{10}\) The NPCA is still relevant to children’s planning until the revised one is published by the Department of Social Development
• Support for ongoing communication campaigns and community mobilisation to address violence against women and children; increase awareness through community dialogues on harmful cultural and traditional practices, such as ‘ukuthwala’.

• Provide support to strengthen and capacitate families, especially in relation to parenting responsibilities to decrease the vulnerability of children to abuse, neglect and exploitation; prioritise safety in urban and rural municipality planning to enable local government to play an active role in the planning and implementation of violence prevention programmes. This will include the establishment of safe parks, sport and recreational facilities and firearm-free zones, clearing bushy areas, and providing adequate lighting, including on buses and in taxi ranks, streets, public toilets, marketplaces, clubs, and taverns and along pathways to and from schools.

(ii) Respond to violence in an integrated and coordinated manner by ensuring a comprehensive package of services to affected women and children. The Programme proposes the development of a national prevention strategy linked to a planned violence root cause analysis and inclusive of all existing government strategic frameworks following the three-pronged approach – violence, gender-based violence and violence against children.

Other proposed interventions include:

• Carrying out systematic and evidence-based awareness-raising and advocacy to address the underlying causes of violence against women and children and to promote positive, respectful, and non-violent behaviour.

• Strengthening school-based and after-school programmes to promote human rights, gender equality and peaceful conflict resolution, including in relation to peer-to-peer violence, and interpersonal relationships; rolling out of training programmes targeting provincial trainers and school-based officials and all relevant stakeholders on the prevention and management of bullying in schools; developing, strengthening and rolling out positive parenting courses through early childhood development (ECD) programmes to promote healthy childhood development and positive, non-violent parenting.

• Rolling out community dialogues and mobilisation to engage local authorities and civil society organisations in promoting non-violent communities.

• Establishing a structured programme for the safe transportation of children, including children with disabilities, to and from school utilising pedestrian crossing officers.

• Improving timely issuing of papers that identify undocumented children who have entered the borders of South Africa in line with section 32 of the Refugees Act (No 130 of 1998).

• Educating communities on inter-country diversity and an appreciation for human rights to prevent ethnocentricity of citizens.

(iii) Ensure provision of long-term care, support and empowerment of survivors of violence.

(iv) Ensure provision of reintegration and rehabilitation services for perpetrators of violence; and
(v) Strengthen the system at all levels that prevent and respond to violence to ensure accountable and coordinated action across sectors.

- **The Draft National Strategy on Child Abuse, Neglect and Exploitation.** The Strategic Plan was a coordinated and integrated response to child abuse. Child abuse was recognised as far back as 1996, when the National Committee on Child Abuse and Neglect (NCCAN) developed this draft document. The NCCAN comprised all the government departments with responsible for providing services to children, as well the key Non-Governmental Organisations and operated under the auspices of the then Inter-Ministerial Committee on Children and the National Programme of Action. In the draft Strategy the complexities of child abuse were explored in a single, comprehensive document drawn up by government and the non-governmental sector.

The Strategy provides useful definitions including:

Child abuse: Any non-accidental action or failure to act, which adversely affects the physical, mental or emotional well-being of the child. The abuse can be of a physical, sexual or emotional nature. Non-circumstantial child neglect also is a form of child abuse.

Child neglect: Failure by those responsible for the child to meet his or her basic physical, emotional, intellectual and social needs. Neglect is a form of abuse where those responsible do have the means to meet the basic needs. Neglect can be circumstantial when those responsible lack the necessary material, practical or intellectual resources to meet the needs of the child.

Emotional abuse: A pattern of destructive behaviour involving rejecting, isolating, terrorizing, ignoring or corrupting a child, or exposing a child to family violence.

Although the document was not adopted formally, it informed many of the initiatives implemented since then, and many aspects of the draft strategy remain relevant today.

- **The National Policy Guidelines for Victim Empowerment,** a policy document of the Department of Social Development, which provides guidelines for victim empowerment programmes. The aims and objectives of this policy are to build a society in which the rights and needs of victims of crime and violence are acknowledged and effectively addressed within a restorative justice framework. The policy seeks to restore the loss or damage created by criminal acts and their consequences through a variety of actions intended to empower the victim to deal with the impact of the traumatic event. This policy is premised on the belief that all people have the right to privacy, safety and human dignity.

In terms of this policy, victim empowerment is defined as an approach used to facilitate access to a range of services for all people who have individually or collectively suffered harm, trauma and/or material loss through violence, crime, natural disaster, human accident and/or through socio-economic conditions. This approach is used to rebuild the confidence of the victim, provide opportunities to access resources available to them, as well as to provide support structures for
victims to enable them (victims) to take back control of their lives and have a say, be heard, have a choice, be respected and recognised as an individual.

Thus the objectives borne from this vision are to:
- Give strategic direction on the development of management structures for effective coordination of the programme at all government levels
- Identify and clarify sector specific roles and responsibilities at all government levels of the management structures
- Guide the process of monitoring, evaluation and reporting by the implementing structures
- Serve as a framework for the development of sector specific policies and strategies
- Identify roles and responsibilities of relevant government departments
- Create a common understanding of victim empowerment amongst various State Departments, victims, perpetrators, Non-profit Organisations (NPOs), including Non-governmental Organisations (NGOs) and community-based organisations (CBOs), and individual members of the community.

- The National Development Plan 2030 (NDP) aims to eliminate poverty and reduce inequality. It propels government to grow the economy faster and in ways that benefit all South Africans, particularly young people and children as they deserve better educational and economic opportunities. Creating opportunities for young people and adults also promotes a sense of safety for children and young people. This is because a lack of opportunities and work can lead to frustration and destabilizing environment contributing to violence, crime, alcohol abuse, neglect, family instability and other social ills.

“Child Protection is Everyone’s Business.”
– Department of Social Development South Africa
• **National Strategic Plan on Gender-based Violence and Femicide, 2020 (NSP):** The aim of the NSP is to provide a multi-sectoral, coherent strategic policy and programming framework to ensure a coordinated national response to the crisis of gender-based violence and femicide by the government of South Africa and the country as a whole.

• The NSP provides a number of useful definitions, however for the purpose of this manual the following are noted:
  
  o **Femicide:** also known as female homicide, is generally understood to involve intentional murder of women because they are women, but broader definitions include any killing of women or girls. In South Africa, it is defined as the killing of a female person, or person perceived as a female on the basis of gender identity, whether committed within the domestic relationship, interpersonal relationship or by any other person, or whether perpetrated or tolerated by the State or its’ agents. Private intimate femicide is defined as the murder of women by intimate partners, i.e. “a current or former husband or boyfriend, same-sex partner, or a rejected would-be lover”
  
  o **Gender-Based Violence (GBV):** This is a general term used to capture violence that occurs as a result of the normative role expectations associated with gender, as well as the unequal power relations between the genders within the context of a specific society. GBV includes physical, sexual, verbal, emotional, and psychological abuse or threats of such acts or abuse, coercion, and economic or educational deprivation, whether occurring in public or private life, in peace time and during armed or other forms of conflict, and may cause physical, sexual, psychological, emotional or economic harm
  
  o **Violence Against Children:** Violence against children includes all forms of violence against people under 18 years old, including abuse, exploitation, neglect and maltreatment, whether perpetrated by parents or other caregivers, peers, romantic partners or strangers.
To achieve the vision of a South Africa free from gender-based violence directed at women, children and LGBTQI+, The NSP identifies 6 pillars to achieve the vision.

**Pillar 1:** Accountability, coordination and leadership is mainly focusing on government to respond to violence against women and children strategically

**Pillar 2:** Prevention and rebuilding social cohesion is about strengthening the delivery capacity in South Africa to roll out prevention programmes

**Pillar 3:** Justice, safety and protection focuses on all GBV survivors to be able to access efficient and sensitive criminal justice

**Pillar 4:** Response, care, support and healing is about strengthening existing responses, care and support services by state and civil society in ways that are victim centred and survivor focused, to facilitate recovery and healing

**Pillar 5:** Economic power. This is aimed at accelerating initiatives that address women’s unequal economic and social position through access to government and private sector procurement, employment, housing, access to land, financial resources and other income generating activities

**Pillar 6:** Research information management is about improving understanding of the extent and nature of GBVF broadly and in relation to specific groups.

The NSP further identifies civil society organisations (CSOs) which include faith-based organisation, as having a role to play in implementing interventions to address GBVF.

**The National Child Care and Protection Policy (NCCPP) 2020.**

One of the main purposes of this policy is: To strengthen the developmental childcare and protection system. The policy does so by providing the conceptual, legal and systemic foundations and mandate for collective action by responsible child protection roleplays to ensure the well-being of all children in South Africa, especially the most vulnerable, by ensuring that they all survive, develop and thrive to their full potential and are protected from violence, abuse, neglect and exploitation.

- The policy proposes amongst other things, a child protection system that provides a combination of material, parental, psychosocial support services to support the development of all children and build the resilience of children and their families and caregivers.
- Where preventative safety net services fail, the child protection system must ensure the provision of early responsive protection services that minimise harm, protect children from further harm and restore their nurturing caregiving environment. The policy mentions a range of services including basic support services for parents of young children, safe and supportive play and recreational services, creation of opportunities for the participation of children, prevention, and early intervention services with a focus also on parental education, services to victims of domestic violence and other support services to families. Responsive protection services to protect children from harmful practices and provision of psychosocial support services are also highlighted.
- Another feature of the policy is its focus on targeted preventative services for vulnerable children who are at risk of poor development, or violence or abuse. The policy identifies programmatic
measures that include universal promotive programmes focusing on children with disabilities and younger children.

- Prevention and early intervention services are highlighted targeting vulnerable children. Screening for violence, abuse, neglect, and exploitation is encouraged by this policy as well as the provision of psychosocial support services after screening.
- The policy outlines a national service development care and protection framework comprising promotive, preventative and response, care and protection interventions for children and their families.
- Keep checking that participants understand all these frameworks as there is a lot of background information to be shared in this session.

5. **Specific Provision from the Children’s Act Relevant to Religious Leaders**

Explain to the group that they will now review the most relevant sections of the Children’s Act that apply to the religious sector with regards to child protection. Explain that no pre-democracy laws that protect children ever mentioned the role of the religious sector in child protection. The Children’s Act however, makes specific mention of the religious sector as is seen in Section 110 of the Act.

1. **Reporting of abused or neglected child and child in need of care and protection**
   - Mention that the first area of focus will be on: Reporting of abused or neglected child and child in need of care and protection.
   - Read out Section 110 below and highlight/emphasize the Minister of Religion and the religious leader.

![Photo from Shutterstock](image-url)
Section 110 states that the following people are required to report all suspected and actual cases of child abuse and neglect to the relevant authorities:

a. Any correctional official
b. Dentist
c. Homeopath
d. Immigration official
e. Labour inspector
f. Legal practitioner
g. Medical practitioner
h. Member of staff or volunteer worker at a partial care facility drop-in centre or child and youth care centre
i. Midwife
j. Minister of religion
k. Nurse
l. Occupational therapist
m. Physiotherapists
n. Psychologist
o. Religious leader
p. Social service professional
q. Social worker
r. Speech therapist
s. Teacher
t. Traditional health practitioner
u. Traditional leaders

- Mention that this section of the Act identifies the minister of religion and the religious leader as persons legally obliged to report child abuse.
- Check amongst the group if anyone was aware of this provision, by a show of hands.
- Then indicate that the formal report must be made on the relevant form, Form 22. (Handout 2)
- Ask if any of the participants have had any experience with reporting a case using Form 22. If there is a participant or participants with this experience, ask them to volunteer for 5 minutes to share their knowledge and experience of using this form.
- If participants do not have such knowledge and experience, take Handout 2 and summarize its contents.
- Explain to the group that making the report should take place as soon as possible, and when there is a suspicion that the child is in immediate danger, the report must be made immediately.
- Also explain that Form 22 should be completed by someone who has done a thorough investigation into the matter and has all the relevant information to complete the form. Religious
leaders by virtue of their contact and relationship with members and beneficiaries of their organisations may have such knowledge. However, it is not the duty of a religious leader to conduct an investigation on child abuse.

- Some religious organisations may have social workers and/or social auxiliary workers who are able to gather the necessary information required to complete this Form.
- Once the form is completed, it should be stamped and handed to the District of Provincial Department of Social Development for further action. Because the stamp is a legal requirement, religious organisations are urged to acquire one.
- Explain that often people, including officials are in a dilemma when they are faced with knowledge of child abuse cases, including sexual abuse, they might be reluctant to report. This could be based on their relationships with children or even with offenders.

**Exercise: Brain teaser**

- Imagine if the head of the religious organisation is suspected of abuse and the junior worker has some reasons to be suspicious. Facilitate a brief conversation on this by asking participants to share their experiences of this without mentioning names.
- In such cases, the junior worker is still legally obliged to report the matter to the child protection focal person of the religious organisation. If the focal person is the person suspected to be abusing children, the junior worker is still obliged to notify the police or the Department of Social Development (without completing Form 22). The fact that the junior worker in a religious organisation has knowledge of possible abuse, is something to be taken seriously.
- Explain that both the Children’s Act and the Sexual Offences Act state that if a report is made in good faith, the person making the report cannot be held liable in civil proceedings [Children’s Act section 110: 3 (b) and Sexual Offences Act section 54: 2 (c)].
- Indicate to participants that it is important to understand the definitions of different forms of abuse to be able to complete this form.
- Distribute the Handout and go through it with the participants.

5.2 The National Child Protection Register

- Now introduce the participants to the second most important and relevant aspect of the Children’s Act for religious leaders, namely: The National Child Protection Register (NCPR)
- Explain that the session will now look briefly at the National Child Protection Register (NCPR). This Register is maintained by the Department of Social Development
The Register contains two parts:

**Part A:** The purpose of Part A of the Register is—
- To have a record of abuse or deliberate neglect inflicted on specific children.
- To have a record of the circumstances surrounding the abuse or deliberate neglect inflicted on children.
- To have a record of the circumstances surrounding the abuse or deliberate neglect inflicted on children.
- To use the information in the register in order to protect these children from further abuse or neglect.
- To monitor cases and services to such children.
- To share information between professionals that are part of the child protection team.
- To determine patterns and trends of abuse or deliberate neglect of children.
- To use the information in the register for planning and budgetary purposes to prevent the abuse and deliberate neglect of children and protect children on a national, provincial, and municipal level.

- Then introduce **Part B** of the Register: The purpose of Part B of the Register is to have a record of persons who are unsuitable to work with children and to use the information in the Register in order to protect children in general against abuse from these persons.

- Explain that Part B is especially important for all organisations and institutions that work with children.

- The Act states that no person whose name appears in Part B of the Register may—
  - a. Manage or operate, or participate or assist in managing or operating, an institution providing welfare services to children, including a child and youth care centre, a partial care facility, a shelter or drop-in centre, a cluster foster care scheme, a school, club or association providing services to children.
  - b. Work with or have access to children at an institution providing welfare services to children, including a child and youth care centre, a partial care facility, a shelter or drop-in centre, a school, club or association providing services to children, or in implementing a cluster foster care scheme, either as an employee, volunteer or in any other capacity.
  - c. Be permitted to become the foster parent or adoptive parent of a child.
  - d. Work in any unit of the South African Police Service tasked with child protection.
  - e. Be employed in terms of the Public Service Act in a position where that person works or has access to children.
  - f. Be employed in terms of the Municipal Systems Act in a position where that person works or has access to children.
  - g. Work in any other form of employment or activity as may be prescribed.
• Explain that the Children’s Act therefore requires all organisations working with children as listed above to ensure that all staff and volunteers who work with or have access to children are checked against the NCPR. Explain that many religious organisations operate early childhood development centres, drop-in centres and other services for children. This means that employers must do the right thing by ensuring that employees are checked and cleared against the Register before they can be allowed to work with children. This also includes board members.

• To achieve this, Form 29: Inquiry by Employer (Handout 3) must be completed and submitted to the DSD, with two certified identity documents. These must be submitted by the employer and not by the employee.

• Organisations can also require that prospective employees check their own names against the NCPR. Form 30: Inquiry by person to establish whether his/her name is included in Part B of National Child Protection Register (Handout 4) is used.

• Processing of the Forms by the DSD can take several months. Steps are currently being taken to reduce the turnaround time, something that the DSD is trying to improve.

• Some suggestions are shared about steps to be undertaken by employers, e.g.:
  o When a new prospective employee is about to be made an offer, include a template affidavit that they must sign and return with the contract
  o The affidavit must state that the person (fills in full name and ID number) states that they do not have any criminal convictions for any offence related to child abuse or neglect, and that a clear record regarding for any offence related to child abuse or neglect is a mandatory requirement for the job
  o The contract must also state clearly that the offer is subject to clearance against the NCPR. Should the employee fail to be cleared against the NCPR, the employee’s employment will be terminated after following the standard disciplinary procedures
  o Also include the statement that the organisation reserves the right to lay criminal charges of perjury against the employee in the event that a criminal conviction for any offence related to child abuse or neglect is found on the NCPR. (This means that all religious organisations should review their Human Resource Policies)
  o Some organisations ask for Police Clearance Certificates in the interim. It is the responsibility of the organisation to organize that prospective employees and Board members obtain Police Clearance Certificates.

• When a person assumes duties then Form 29 is submitted

• When the formal response from the DSD is received and it turns out that that the employee does in fact, have a conviction, the employee can be dismissed with ease as they (i) clearly do not meet the requirements for the post, (ii) knowingly provided false information that materially affects the validity of the offer of employment.
Exercise: Brainstorming

- Once you have completed the presentation, ask if participants have any questions and list them on the flipchart. Provide them with responses to their questions and where you are not sure, indicate that you will seek answers from people with appropriate legal knowledge on the subject.

- Also use this opportunity to check if any participants have gone through the process of being checked against the NCPR. For those who have not been checked, emphasize the importance of going through the process to be legally compliant and to also ensure that the rights of children are protected.

- Conclude the session by asking if everyone what new information they have learned from this session as well as what they plan to do differently in their organisations because of the session. List all these on the flipchart.

- Display the slide with Session Objectives and Learning Outcomes. Go through each, checking if the session has met those aims and achieved stated outcomes. If participants raise something critical that was not in the session objectives, develop a “Parking Lot” flipchart paper and list those things for later attention, if possible

- Then introduce the topic for the next session and thank the participants for their cooperation and participation in the session covered.
D. SESSION 3: UNDERSTANDING CHILD PROTECTION

1. Session Aim and Learning Outcomes

**Aim:**
To promote an understanding of what constitutes child protection

**Learning Outcomes:**
- At the end of the session participants should be able to:
  - Define the concept of child protection.
  - To help participants build skills and confidence in recognising situations that may put children at risk and responding appropriately.
  - To identify different forms of child protection concerns that religious leaders might come across and be able to define what they are.
  - Define the concept of child abuse and the different forms that child abuse manifest in.
  - Demonstrate an understanding of why religious organisations should be doing child protection work.

Begin the session by going through the aims of the session and the Learning Outcomes.

**Exercise: Group discussion**

- Inform participants that there will be a group discussion on what “child protection” means. Explain that participants have heard this concept before and have probably used it in different conversations.
- Explain that it is important to have a common understanding of the concept.
- Divide the group into three smaller groups and put these groups in different parts of the training room with their own table.
- Hand each group a sheet of flip-chart paper, prestik and pens.
- Ask each group to select a group facilitator and scribe.
- Each group must then have a discussion aimed at defining what they think the “child protection” means.
- At the end of the exercise pin all the flip chart paper with definitions on the wall for all to see.
- Allocate approximately 7 minutes for this exercise.
- Keeping in mind the definition of child protection provided below, read each of the definitions on the flip chart out loud to the group. Identify or underline anything in each definition that resonates with the formal definition provided in this manual. Validate group inputs and then read out the formal definition provided below:
2. Defining Child Protection

**What is child protection?**
UNICEF uses the term ‘child protection’ to refer to preventing and responding to violence, exploitation, and abuse against children – including commercial sexual exploitation, trafficking, child labour and harmful traditional practices, such as female genital mutilation/cutting and child marriages.

- Explain further that during the consultations with the religious sector, the following working definition of child abuse was agreed upon and it resonates with the UNICEF definition:
  
  *Child protection is safeguarding children from abuse, neglect, exploitation, and violence against children. National and international legislation views the goal of child protection as being to promote, protect and fulfil children’s rights to protect the child from abuse, neglect, exploitation and violence*.

- Write these definitions on a flipchart and list them along the definitions developed by the group.

**Exercise: Small group discussion**

- Now, let us take the definition further. Ask participants to go back to their original smaller groups and give them the following question to discuss in groups:
  
  “*What are the situations we need to protect children from?*”

- Participants must use their experience and encounters with children in their religious contexts. No names of actual children or people should be used but the situation must be explained clearly. Each group must come up with five situations. Give them 10 minutes for this exercise.

- Take feedback from groups and as you listen to feedback take note and write on a flipchart paper responses relevant to different forms of child protection concerns. For instance, if a scenario presented concerns a child who was physically abused, note “physical abuse”; if the situation is about child trafficking, write that down on the flip chart.

- Once all groups have presented their scenarios and you have taken note of the different forms of child protection concerns raised or encountered.

- To summarize, validate all the inputs received and tell participants how important it is to know what children should be protected from. Refer participants back to the earlier discussion on international and national legislation. Point out that the laws are meant to protect children’s rights and to deal with any violation of their rights as articulated in these instruments.
• Inform participants that you are now going to take them through formal definitions of situations that children should be protected from as defined in the Children’s Act and other relevant instruments and policies. Present the following points:

3. Definition of a Child
There is often a difference in understanding of who the child between various religious and cultural contexts is, which often contrasts with the legal framework of who a child is. For the purposes of aligning the religious sector with legal statutes it is recommended that the religious leaders acknowledge that in matters relating to child protection, a child is defined by legal frameworks as “a person under the age of 18 years.” Child protection therefore refers to measures aimed at protecting a child (any person under the age of 18) from the following situations as defined in the Children’s Act and other instruments.

4. Different Forms of Abuse
Child Abuse/ Child Maltreatment
The World Health Organisation (WHO)\textsuperscript{11} defines child maltreatment as: “All forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.”

According to the Children’s Act, “abuse” in relation to a child, means any form of harm or ill-treatment deliberately inflicted on a child, and includes—
- Assaulting a child or inflicting any other form of deliberate injury to a child
- Sexually abusing a child or allowing a child to be sexually abused
- Bullying by another child
- A labour practice that exploits a child
- Exposing or subjecting a child to behaviour that may harm the child psychologically or emotionally.

\textsuperscript{11} World Health Organisation and the International Society for Prevention of Child Abuse and Neglect (2006)
From the above definition, we can further articulate different forms of abuse:

**Physical Abuse:**
- Also referred to as physical violence, physical abuse can also be defined as a deliberate act of inflicting physical violence onto a child. It is generally considered an intentional act of inflicting physical harm to a child by an adult; and results in some form of trauma or injury to a child.
- Some acts of physical abuse are visible or obvious (e.g. a child is repeatedly beaten to the point that they have physical wounds, bruises or broken bones), while other forms of physical abuse are more subtle. This can happen when the abuser identifies a spot in a child’s body that does not scar easily, e.g. pulling strands of a child’s hair as punishment.
- Physical abuse includes physical bullying by adults or by other children, corporal punishment, and all other forms of torture, cruel, inhuman or degrading treatment or punishment.

**Sexual Abuse:**
According to the Children’s Act, “sexual abuse”, in relation to a child, means:
- Sexually molesting or assaulting a child or allowing a child to be sexually molested or assaulted
- Encouraging, inducing, or forcing a child to be used for the sexual gratification of another person
- Using a child in or deliberately exposing a child to sexual activities or pornography; or procuring or allowing a child to be procured for commercial sexual exploitation or in any way participating or assisting in the commercial sexual exploitation of a child.
- When a child (i.e. any person under age 18 years) is involved in a sexual activity with an adult or another (often older) child, this constitutes sexual abuse. This involves having sexual intercourse, exposing a child’s private parts or genitalia, fondling the child for sexual pleasure, or making a child fondle the adult for his or her own sexual gratification.
- Sexual activities are also considered abuse when committed against a child by another child if the offender is significantly older than the victim or uses power, threat, or other means of pressure. When this happens and the matter is reported to the police and ends up in court. The matter is dealt with using another piece of legislation called the Child Justice Act No. 75 of 2008 which prescribes how child offenders are dealt with.
- When a child is used as a commodity and is procured for commercial sexual purposes. This is when money or other material or nonmaterial gains (e.g. a position at work or within an organisation) are given or promised in exchange for sexual activities involving a child. This can happen in families that appear to have stable relationships or be facilitated by parents/caregivers/guardians with strangers. The main aim of sexual abuse is to gain commercially.
- What is important to note with sexual abuse is that the act of allowing a child to be sexually exploited, constitutes sexual abuse.
Exploitation
Child abuse also happens in the form of exploitation. The Children’s Act defines “exploitation”, in relation to a child, to include:

- All forms of slavery or practices similar to slavery, including debt bondage or forced marriage; (forced marriage in some of our communities is through the act of Ukuthwala)
- Sexual exploitation
- Servitude: (servitude means a condition in which a child lacks liberty or freedom to determine one’s course of action or way of life.)
- Forced labour or services
- Child labour prohibited in terms of Section 141 of the Children’s Act; and
- The removal of body parts.

In essence, exploitation refers to the use of children for someone else’s advantage, gratification or profit often resulting in unjust, cruel and harmful treatment of the child. These activities are to the detriment of the child’s physical or mental health, education, moral or social-emotional development.

Child Labour
As mentioned in the definition of exploitation, the Children’s Act defines “child labour” as work by a child which:

- Is exploitative, hazardous or otherwise inappropriate for a person of that age; and
- Places at risk the child’s well-being, education, physical or mental health, or spiritual, moral, emotional, or social development.

Trafficking
The Children’s Act defines “trafficking”, in relation to a child means the recruitment, sale, supply, transportation, transfer, harboring or receipt of children, within or across the borders of the Republic:

- By any means, including the use of threat, force or other forms of coercion, abduction, fraud, deception, abuse of power or the giving or receiving of payments or benefits to achieve the consent of a person having control of a child; or
- Due to a position of vulnerability, for the purpose of exploitation; and
- Includes the adoption of a child facilitated or secured through illegal means.
Bullying by another child

The Children’s Act definition of abuse includes bullying by another child. Bullying is not only a global phenomenon but a serious South African phenomenon, affecting a number of children particularly in schools. Although the Act does not provide a definition of bullying. Olweus “Olweus, D. (2007). Bullying Prevention Programme: Schoolwide Guide. Hazelden” defines bullying as follows:

A person is bullied when he or she is exposed, repeatedly and over time, to negative actions on the part of one or more other persons, and he or she has difficulty defending himself or herself.

Laas and Boezaart (2014) identify three critical elements that pay a part in bullying:

a. Violence.

b. Harassment, a conduct aimed at causing harm through following or watching the victim in their home.

c. Communication with the victim verbally, in written form or electronically.

Neglect

According to the Children’s Act, “neglect”, in relation to a child, means a failure in the exercise of parental responsibilities to provide for the child’s basic physical, intellectual, emotional or social needs. This includes any act or failure to act on the part of a parent or caregiver of the child that presents a risk of serious harm to the child’s well-being, including a failure to thrive emotionally and socially. Neglect can be intentional, or through carelessness or negligence, failing to provide for, or secure for a child, their rights to physical safety and development. Neglect is sometimes referred to as the ‘passive’ form of abuse, as it is a typical result of omission of parental responsibility. The consequences on the child however, are serious.

Types of Neglect

<table>
<thead>
<tr>
<th>Physical Neglect</th>
<th>Psychological/ Emotional Neglect</th>
</tr>
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<tbody>
<tr>
<td>This refers to failure to protect a child from harm, including through lack of supervision, or failure to provide a child with necessities such as food, shelter and clothing.</td>
<td>This refers to depriving a child of any emotional support creating an environment of fear, denying the child attention and social interaction that a child needs to thrive.</td>
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<tr>
<th>Educational Neglect</th>
<th>Medical Neglect</th>
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<tr>
<td>This refers to failure to comply with laws requiring caregivers to secure their children’s education through attendance at school or any other appropriate learning opportunity e.g. home schooling.</td>
<td>This refers to a parent or caregiver’s deliberate act of depriving a child of medical care or denying the child of treatment that could lead to a life-threatening illness, disability or even death.</td>
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Emotional Abuse
Emotional abuse presents itself as a pattern of behaviour that impairs a child’s emotional development and sense of self-worth. It may include constant criticism, teasing, threats, belittling, insults, rejection, ignoring, and isolating the child. It also includes failure of the parent or caregiver to provide their children with love, emotional support or guidance.

Spiritual Abuse
Whilst there is no legal definition of spiritual abuse in South African legislation as well as internationally, the Children’s Act acknowledges that programmes for children must meet the emotional, cognitive, sensory, spiritual, moral, physical and other related developmental needs of children. There is recognition of the spiritual needs of children, something that religious organisations have a bigger role in. Oakly and Humphreys (2020) who published “Escaping the Maze of Spiritual Abuse: Creating Healthy Christian Cultures”, provide a useful definition of spiritual abuse, as “A form of emotional and psychological abuse, characterized by a systematic pattern of coercive and controlling behaviour in a religious context”

Misuse of power, authority and trust by any person in a position of spiritual power or authority (whether within an organisation, institution, or family), through controlling, coercing, manipulating and/or dominating a child’s spiritual development, constitute spiritual abuse. This includes labelling children as child witches or using children as sexual slaves for spiritual cleansing purposes.

Verbal Abuse
Verbal abuse includes acts of forcefully criticizing, insulting, or denouncing a child. It is characterized by underlying anger and hostility, and it is a destructive form of communication intended to harm the self-worth of the child. It includes yelling, belittling, swearing at, threatening the child (I wish you were not born), name calling (you are a useless and stupid child), scapegoating or blaming the child (this family is in such a mess all because of you), threatening the child even if the adult does not act on those threats, they still instill fear and distrust in a child. All these acts produce negative emotions on the child.

Corporal Punishment
Corporal punishment is ‘any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light. Most involves hitting (‘smacking’, ‘slapping’, ‘spanking’) children, with the hand or with an object such as a whip, stick, belt, shoe, wooden spoon, etc. But it can also involve kicking, shaking or throwing children, scratching, pinching, burning, scalding or forced ingestion’ (UN Committee on the Rights of the Child, 2006: 4).

On 18 September 2019, the Constitutional Court of South Africa ruled that the common law defense of ‘reasonable and moderate chastisement’ was unconstitutional, effectively banning all corporal punishment of children.

14 L. Oakley & J. Humphreys. (2020) Escaping the Maze of Spiritual Abuse: Creating Healthy Christian Cultures
The Court found that:

“The right to be free from all forms of violence or to be treated with dignity, coupled with what chastisement does in reality entail, as well as the availability of less restrictive means, speak quite forcefully against the preservation of the common law defense of reasonable and moderate parental chastisement. There is, on the material before us, therefore, no justification for its continued existence, for it does not only limit the rights in sections 10 and 12 of the Constitution, but it also violates them unjustifiably.”

- Once you have finished presenting the section on different forms of abuse, check if there are any questions and address them.
- Break the groups into smaller groups, you can change the groups from earlier activities and mix participants around.
- To conclude the section, inform participants that in smaller groups they will discuss this question:

  **Are religious organisations required to do child protection work and be deemed child safe?**

**Exercise: Small group discussion**

To answer the above question, groups must address the following:

  a) What is a child safe religious environment and what are the benefits of having a child safe religious environment?
  b) How can religious organisations prevent the negative impact of child abuse in families, community and religious organisations?

Duration of this exercise is approximately 15 minutes.

- Take feedback and facilitate a discussion to conclude the session. Conclude the session by sharing the points below:
  - There are many benefits to having a child safe religious environment. It enables the religious organisation to prevent instead of only reacting to situations of child abuse and neglect.
  - There exist many moral binding imperatives of protecting children in our care as religious organisations. Organisations, including religious organisations working with children have a legally binding, non-negotiable duty to protect children from abuse, maltreatment, and exploitation from within their respective organisations. This has been shown by the inclusion of religious leaders in the Children’s Act.
  - Being pro-active in preventing the negative impact of abuse on children, their families, community, and the religious organisation is best practice, and enables the religious organisation to gain trust within the context it finds itself and the people it seeks to serve.
  - Inability to have legally and morally sufficient standards and mechanisms for child protection in place does not only reflect failure in the sector’s primary duty of care but may also be responsible for fostering an environment of abuse.
- Check if participants understand the discussions and address any questions raised
- Provide a summary of what the session has covered.
- Thank participants for their participation and introduce the next session.
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• Provide a summary of what the session has covered.
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Photo by Rene Bernal on Unsplash
E. SESSION 4: UNDERSTANDING FACTORS THAT PUT CHILDREN AT RISK

1. Session Aim and Learning Outcomes

Aim:
To raise awareness about the impact of violence on children, and to help participants build skills and confidence in recognizing situations that may put children at risk and responding appropriately.

Learning Outcomes:
- At the end of the session participants will be able to:
  - Describe factors that put children at risk of abuse.
  - Demonstrate an understanding of concepts of “risk factors” and “protective factors”.
  - Identify and recognise signs of abuse in children and in a parent/caregiver or adult.

2. Understanding Risk and Protective Factors

Risk factors
- Introduce this section by stating that now that we have discussed the different forms of child protection concerns, it is important to understand the context in which children grow, develop and thrive.
- Firstly, children are individuals in their own rights and come into this world with a package of characteristics, including their personalities, their characters, behaviours, attitudes, etc. They are born into and raised by families which are also diverse in nature and character.
- Families are also part of communities and the larger society.
- Things happen in families, communities and society that may put children at risk of being abused or neglected.
- The things that put children at risk are called “risk factors”. Put another way, a risk factor is anything that increases the probability that a person will suffer harm.
• To understand child protection, it is important that we begin by understanding factors that put children at risk of abuse, neglect and maltreatment as well as those that might lead to the removal of children from their families through statutory processes.
• Introduce participants to the “Ecological Model of a Thriving Child” image as a summary of the context in which children develop.

3. The Ecological Model of a Thriving Child

Diagram 1: The Ecological model of a Thriving Child
● The ecological model of a child clearly emphasizes the following:
  o A child-centered approach is necessary to secure the welfare and wellbeing of a child
  o The linkages between these systems need to be interfaced so that the child could benefit positively directly and indirectly
  o The need to create spaces for children whilst ensuring a loving and caring environment
  o The need for role players to support each other to strengthen their impact on a child
  o The layers of protection are necessary to prevent violence against children.

Exercise: small group discussion

● Ask participants to work in small groups and identify what they understand to be risk factors based on their knowledge and experience on every level. Each group should write responses on a flip chart. Ask groups to give feedback and as they give feedback, use the opportunity to highlight the level of each of the risk factors identified.

4. Understand the Levels of Risk Factors

● Child abuse is multifaceted, with causes at the individual, close relationship, community, and societal levels. Risk factors are found at:

  Individual level:
  Biological and personal aspects such as sex and age (think about abuse against girl children just because of their gender)
  o Lower levels of education
  o Poverty and low income
  o Having a disability or mental health problems
  o Identifying as or being identified as lesbian, gay, bisexual, or transgender
  o Harmful use of alcohol and drugs
  o A history of exposure to violence/abuse.
Close-relationship level:
- Lack of emotional bonding between children and parents or caregivers
- Poor parenting practices
- Family dysfunction and separation
- Being associated with peers whose behaviour is challenging
- Witnessing violence between parents or caregivers
- Early or forced marriage

Community level:
- Poverty
- High population density
- Low social cohesion and transient populations
- Easy access to alcohol and firearms
- Lack of or ineffective community structures/organisations to deal with violence against children effectively
- High concentration of gangs and illicit drug dealing

Government level:
- Poor on non-existing laws and policies for the protection of children
- Poor or ineffective implementation of any laws to protect children
- Lack of coordination amongst different government sectors
- Poor planning and lack of resources to support the Non-profit sector to deliver services at community level

Societal level:
- Social and gender norms that create a climate in which violence is normalized
- Health, economic, educational and social policies that maintain economic, gender and social inequalities
- Absent or inadequate social protection
- Post-conflict situations or natural disaster
- Settings with weak governance and poor law enforcement
- Migration for better opportunities

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• Once you have covered all the risk factors, randomly allow participants to share brief examples of families they know or have worked with, presenting specific risk factors, to enhance understanding and learning. (Please let there be no mention of family names or areas where things happened but rather just share the details of the case).

• To conclude this section, ask participants what the opposite of “risk factors” is. Go around the room and take different inputs.

• Point out that the opposite of “risk factors” is “protective factor”.

• Explain that protective factors are aspect of a person, group or environment that makes it less likely that the person or group will develop serious problems. In other words, protective factors are buffers or cushions that help children who might otherwise be at risk of abuse, maltreatment, or neglect, to find supportive resources, learn coping skills and protect children from harmful effects of risk factors.

5. Understanding Protective Factors

• Explain to participants that protective factors are also found in the levels of risk factors as follows:

  **Individual level:**
  - Sound intellectual and cognitive abilities. Cognitive abilities are core skills that the brain uses to process information. Reasoning, paying attention and memory as some examples of cognitive abilities
  - Good physical, emotional and mental health
  - Positive social skills
  - Positive social and religious affiliations
  - No use of alcohol and drugs
  - No history of exposure to violence/abuse.

  **Family level**
  - Positive emotional bonding between children and parents or caregivers
  - Positive parenting practices
  - Good communication where children and parents can discuss problems and come up with solution
  - Stable family relationships
  - Association with positive peers who do not engage in negative behaviours
  - Presence of a positive adult in the family to mentor and be supportive to a child.
Community level
- Commitment and buy-in to the protection of children
- Good laws and policies developed for the protection of children
- Coordinated and effective implementation of laws, good monitoring, and accountability by different government sectors
- Allocation of resources to enable government and support Non-profit Organisations
- Good partnership established between government.

Societal level
- Social and gender norms that do not tolerate or normalize violence
- Health, economic, educational and social policies that promote economic, gender and social equalities
- Clear policies and systems that promote social protection
- Settings with strong governance and law enforcement systems.
  - Explain that the role of religious organisations is to help promote protective factors for children to develop in safe and healthy environments.
  - Explain that religious organisations have a role to play in each of the circles of the Ecological Model.
  - Brainstorm with participants what religious organisations can do starting from the level of a child up to the global level. Note responses on a flipchart.
  - Once completed, do a PowerPoint presentation on the point below to conclude this part of the session.
6. **Signs of Abuse in a Child**

- Explain to participants that these signs are only guidelines, and their presence may or may not necessarily guarantee that the child is being abused but are rather a call for us to look deeper into the matter while practicing caution.
- Furthermore, it is not in every case of child abuse that one is able to note the red flags, but they often exist in instances of child abuse.
- Explain to participants that these indicator lists have been developed to assist with the identification of children potentially in need of interventions. They should not be used as a “diagnostic” tool by religious leaders.16
- These signs are meant for religious leaders to assist children in accessing early intervention and support services.
- Now take participants through the different signs below, making examples in the process. Make sure that participants understand the concepts used by making examples. As you facilitate, also call for relevant examples from participants.
- Display the points below on a projector and as you go through them illustrate the points with examples, and invite participants to share their knowledge too.

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### Possible Signs of Emotional Abuse

- Stunted development
- Self-loathing
- Extreme fear of change
- Inappropriate response to pain
- Extremes of passivity or aggression
- Withdrawal
- Bedwetting (in a child that is able to control himself/herself, suddenly they regress to bedwetting)
- Sudden speech disorders
- Overreaction to mistakes
- Attention seeking behavior

### Possible Signs of Sexual Abuse

- Being overly affectionate
- Knowledge of sexual acts and detail that are age inappropriate
- Medical problems such as chronic pain in the genitals
- Depression
- Suicide attempts
- Regressing to younger behavior patterns such as thumb sucking
- Sudden loss of appetite or compulsive eating
- Being isolated or withdrawn
- Inability to concentrate
- Lack of trust or fear of someone they know well

### Possible Signs of Physical Abuse

- Problems in school
- Bite marks: grasp or grab marks
- Is bullied, bullies other children
- Timidity or excessive aggression
- Frequent reports injury by a parent or other caregiver
- Bruises or marks on the skin in the shape of an object
- Hurting or injuring animals
- Anti-social behavior in the religious meetings
- Frequently dressed in weather inappropriate clothes
- Engaging in sexually suggestive behavior towards children, adults or older children
- Cuts
- Unusual injuries
- Unexplained bruises
7. **Recognizing Possible Signs of an Abusive Parent/Caregiver/Guardian**

- Ask participants if they can think of signs to recognise a potentially abusive parent/caregiver/guardian.
- Ask them to explain using simple examples, not revealing real identities in case they are drawing examples from experience. List the points on the flipchart and add the following points if they have not been mentioned:
  - How the child behaves toward the adult, with extreme fear
  - Sometimes the child withdraws from an adult and emotionally disengage
  - The adult may behave in an openly aggressive or violent way towards the child
  - Using physical discipline and yelling at the child
  - Sometimes a child may wet himself or herself when seeing the adult.
- Inform participants that child abuse has lifelong impacts on the health and well-being of children, families, communities, and nations. Violence against children can:
  - Result in death (homicide), which often involves weapons such as knives and firearms, is among the top four causes of death in adolescents, with boys comprising over 80% of victims and perpetrators17
  - Lead to severe injuries. For every homicide, there are hundreds of predominantly male victims of youth violence who sustain injuries because of physical fighting and assault
  - Impaired brain and nervous system development. Exposure to violence at an early age can impair brain development and damage other parts of the nervous system, as well as the endocrine, circulatory, musculoskeletal, reproductive, and respiratory and immune systems, with lifelong consequences. As such, violence against children can negatively affect cognitive development and results in educational and vocational underachievement
  - Result in negative coping and health risk behaviours. Children exposed to violence and other adversities are substantially more likely to smoke, misuse alcohol and drugs, and engage in high risk sexual behaviour. They also have higher rates of anxiety, depression, other mental health problems and suicide
  - Lead to unintended pregnancies, induced abortions, gynecological problems, and sexually transmitted infections, including HIV
  - Contribute to a wide range of non-communicable diseases as children grow older. The increased risk for cardiovascular disease, cancer, diabetes, and other health conditions is largely due to the negative coping and health risk behaviours associated with violence.
  - Impact opportunities and future generations. Children exposed to violence and other adversities are more likely to drop out of school, have difficulty finding and keeping a job, and are at heightened risk for later victimization and/or perpetration of interpersonal and self-directed violence, by which violence against children can affect the next generation.

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17 World Health Organisation: Violence Against Children Key Facts (2020)
• Begin the last part of the session by reflecting on the “Ecological Model of a Thriving Child” again and the role of the religious leader in building a protective environment. Prepare a PowerPoint presentation for this session as the method of facilitation will be a lecture.

• This ecological model of a child clearly emphasizes the following:
  o A child-centered approach is necessary to secure the welfare and wellbeing of a child
  o The linkages between this system need to be interfaced so that the child could benefit positively, directly, and indirectly
  o The need to create spaces for children whilst ensuring a loving and caring environment
  o The need for role players to support each other to strengthen their impact on a child
  o The layers of protection are necessary to prevent violence against children.

• Go through the following points on the role of the religious leader at different levels of the Model.

8. **The Role of the Religious Leader in the Life of a Child**

The religious leader is encouraged to:

- Provide services and support to a child whose rights have been violated.
- Develop and implement programmes to support vulnerable children.
- Create a safe space place for the child within the organisation.
- Spiritually mentor the child.
- Offer counselling and guidance.
- Educate the child about child protection during the programmes of the religious organisation.
- Because some children come from backgrounds with no clear moral code, expose children to programmes that promote positive morals and moral development.

9. **The Role of the Religious Leader in the Family**

*Reflecting on recommendation 5 of the Kyoto Declaration, we are committed to inter-religious cooperation to address violence and will make use of the synergies among our religious communities to promote methodologies, experiences, and practices in preventing violence against children. Inter-religious cooperation enables people to work towards a common goal and share skills and expertise.*

- Family relationships impact a child in various ways so interventions and programmes that would improve these relationships can be run by religious leaders.
- Religious leaders have positive relationship with many families, therefore mentorship programmes for parents are impactful.
• Religious leaders can provide parenting workshops and interventions that provide safe spaces for children.
• Many families with problems can benefit from spiritual and psychological counselling from religious leaders.
• The absence of fathers or father figures has proven to be one of the contributors to the vulnerability of children, therefore religious leaders can run mentoring programmes to address this gap. Where fathers exist but have poor parenting skills, religious leaders can build support systems for them.
• The religious leader also has the skills to facilitate the restoration of family relationships which inevitably affects the wellbeing of a child.
• The religious leader can provide immediate response to abuse and refer accordingly.
• The religious leader can offer much needed spiritual support to the family during the trauma of abuse and related experiences.
• Abuse affects the victim and their families, and religious leaders can provide essential re-integration programmes to assist.

10. The Role of the Religious Leader in the Community

• Community members are to be encouraged to adopt the IT TAKES A VILLAGE TO RAISE A CHILD model to create safe spaces for children. Communities must take ownership and be responsible to build safety nets in their communities, to care for and protect their own children. This is a process that can be led by a religious leader.
• Religious leaders can train community workers and other community structures to identify, report and support affected children and families.
• The religious leader can mobilize the community regularly on the issues of child protection.
• Capacity building programmes for the community in respect of prevention and management of violence, child abuse, neglect and exploitation can be implemented by the religious leader.
• The religious leader has the power to engage the community on Child Protection on many levels being prevention, reporting and after care of victims.
• Religious leaders have the influence to engage with other religious leaders to collaborate community based and other religious organisations to socially cohesively address.
• Build community ownership to carry out prevention activities and set up reporting systems.
• Through initiatives such as Children’s Clubs, create safe places for children and youth to raise awareness on trafficking and its dangers, and share what they learn with their friends.
• Mobilise communities to STOP harmful practices to children.

I seek protection in you (for our children) with perfect words
I seek protection from the devil and poisonous things
And from every influential evil eye
11. The Role of the Religious Leader in Government

- Religious leaders must implement government policies and programmes to strength family units and to support families of vulnerable children.
- Religious leaders can conduct advocacy activities and advocate that that jobs, assistance programmes, housing, food, medical and other social amenities are developed to cater for the poor in any community.
- Religious leaders have a role in intensifying their involvement and in the development, reviews and drafting of relevant national child protection policies.
- Religious leaders are encouraged to collaborate with child protection organisations and structures within the government.
- The religious leader is an excellent “eye on the ground” and therefore, being able to report community challenges to government is encouraged.
- Religious leaders can give moral and spiritual inputs to government policies and programmes as needed.

12. The Role of the Religious Leader Globally

- Religious leaders are encouraged to participate in relevant international forums on child protection. They can submit inputs to consultations for reports to United Nations Committees and other global structures.
- Advocating for children’s rights on international platforms will galvanize the role of the religious leader in the space of a child.
- Raise awareness of children’s rights, their protection and spiritual wellbeing through participation in international awareness days such as the World Children’s Day which is celebrated on 20 November each year, to promote international togetherness, awareness among children worldwide, and improving children's welfare.
F. SESSION 5: RELIGIOUS LEADERS’ RESPONSE TO VARIOUS FORMS OF
CHILD ABUSE

1. Session Aim and Learning Outcomes

Aim:
To identify appropriate responses by religious leaders to different forms of child abuse, maltreatment, and neglect.

Learning Outcomes:
At the end of the session, participants will be able to:
• Define different forms of abuses and harms to children.
• Describe the impact of such abuses on children, their development and wellbeing.
• Identify appropriate responses to such abuses by religious leaders.

The facilitator must prepare thoroughly for this session by reading the material and thinking of examples to use when presenting the material. Prepare a PowerPoint presentation for this session as the method of facilitation will be a lecture.

• Start by referring participants to material covered in Session 2: Understanding Child Protection.
• Remind participants that several definitions were covered in that session and most of them were taken from the Children’s Act.
• Using the brainstorming method, ask participants to name some of the child protection abuses discussed in Session 2 and note them on a flipchart.
• Build on the responses of the participants and use practical examples to illustrate some points.

2. Exploitation

The Prevention and Combating of Trafficking in Person’s Act No. 7 of 2013 defines child exploitation as:

(a) All forms of slavery or practices similar to slavery, including debt bondage or forced marriage;
(b) Sexual exploitation;
(c) Servitude;
(d) Forced labour or services;
(e) Child labour prohibited in terms of section 141; and
(f) The removal of body parts;
(g) The impregnation of a female person against her will for the purpose of selling her child when the child is born.
3. **Child Marriage**

- According to UNICEF, child marriage is defined as a marriage of a girl or boy before the age of 18 and refers to both formal marriages and informal unions in which children under the age of 18 live with the partner as if married.
- Marriage before the age of 18 is a fundamental violation of human rights.
- Different factors may put a child at risk of being in a child marriage. These include poverty, the perception that marriage will provide ‘protection’, family honor, social norms, customary or religious laws that condone the practice, an inadequate legislative framework, and the state of a country’s civil registration system.
- While the practice is more common among girls than boys, it is a violation of rights regardless of sex.
- Child marriage often compromises a girl’s development by resulting in early pregnancy and social isolation, interrupting her schooling, and limiting her opportunities for career and vocational advancement.
- Although the impact of child marriage on boys has not been extensively studied, it may similarly place boys in an adult role for which they are unprepared and may place economic pressures on them and curtail their opportunities for further education or career advancement.

**Impact of child marriage on a child:**

- Child marriage effectively ends a girl’s childhood, curtails her education, minimizes her economic opportunities, increases her risk of domestic violence, and puts her at risk for early, frequent, and very high-risk pregnancies.
- Girls under 15 are five times more likely to die in childbirth than women in their 20s and face higher risk of pregnancy-related injuries, such as obstetric fistula.\(^{18}\)
- Child brides are often unable to negotiate safer sexual practices and are therefore at a higher risk of HIV and other sexually transmitted infections.
- The negative consequences of child marriage reach beyond the girls themselves: children of child brides are 60 percent more likely to die in the first year of life than those born to mothers older than 19, and families of child brides are more likely to be poor and unhealthy.\(^{19}\)

**How do we respond as religious leaders?**

- Do not agree to formalize the marriage of any girl/boy who is younger than the age of 18. Further discussion should be taken with all parties, including parents or caregivers of child or children concerned.
- Request birth certificates to prove the age of both parties before performing a marriage ceremony.

\(^{18}\) Facts on Child Marriage: International Women’s Health Coalition viewed on iwhc.org/resources/facts-child-marriage
\(^{19}\) ibid
• Pre-marital counselling including interventions with the parents will be critical and might even provide an opportunity to “assess” if there are issues of concern to be addressed.
• Raise awareness about the health risks of early pregnancy.

4. **Sexual Exploitation**

According to the Children’s Act commercial sexual exploitation in relation to a child, means—

a. The procurement of a child to perform sexual activities for financial or other reward, including acts of prostitution or pornography, irrespective of whether that reward is claimed by, payable to or shared with the procurer, the child, the parent or caregiver of the child, or any other person; or

b. Trafficking in a child for use in sexual activities, including prostitution or pornography.

Point (b) of the above definition relates to trafficking, which was defined in addressed in Session 3

It is important to note that the Section 4 of the Prevention and Combating of Trafficking in Persons Act No.7 of 2013 provides a more elaborate definition of trafficking in persons and this definition related to children as well. This definition integrated various aspects of exploitation and is as follows:

(1) Any person who delivers, recruits, transports, transfers, harbours, sells, exchanges, leases, or receives another person within or across the borders of the Republic of South Africa, by means of –

(a) A threat of harm;
(b) The threat or use of force or other forms of coercion;
(c) The abuse of vulnerability;
(d) Fraud;
(e) Deception;
(f) Abduction;
(g) Kidnapping;
(h) Abuse of power;
(i) The direct or indirect giving of or receiving of payments or benefits to obtain the consent of a person having control or authority over another person; or
(j) The direct or indirect giving or receiving of payments, compensation, rewards, benefits or any other advantage, aimed at either the person or an immediate family member of that person or any other person in close relationship to that person for the purpose of any form or manner of exploitation, is guilty of trafficking in persons.
(2) Any person who-

(a) Adopts a child, facilitated or secured through legal or illegal means, or
(b) concludes a forced marriage with another person within or across the borders of the Republic, for the purpose of the exploitation of that child or other person in any form or manner, is guilty of an offence.

- Therefore, commercial sex exploitation and child trafficking can be seen as a modern form of slavery that involves displacing a child (i.e. any person under age 18 years) for the purpose of exploitation.
- A child is considered to be merchandise and can be moved from one country to another or within a country’s own borders.
- With exploitation in its different forms, it is sufficient to show that there was an action by someone to place a child in an exploitative situation. There is no need to show that a child was forced or controlled to be considered an exploitation matter.

Harm to the Child

- When a child is exploited, he/she often does not have access to basic services and cannot access protection from abuse or any other harm.
- An exploited child’s right to survival including the right to food, health care and shelter can be violated.
- A child’s right to protection including the protection from physical abuse and violence, sexual abuse and other forms of exploitation are often violated.
- An exploited child may not be able to have their right to play and right to parental care met.
- He/she may be denied the right to participation, including the right to express his/her opinions or be heard.

How do we respond as religious leaders?

- Ensure that the child is being kept in the safe place and report the case to the police.
- Ensure children’s rights are protected and respected throughout all the processes (e.g. pre-reporting and post reporting). This can be done through providing support with necessities as well as supporting with a safety plan where possible.
- Raise awareness with parents and children on the dangers of trafficking, situations that might expose children to trafficking and what to do when there is a suspicion of trafficking.
- As religious organisations, support initiatives to ensure the children’s births are registered and that all the necessary citizenship documents are available, to prevent them from leaving the country undetected.
- Look at programmes and partnerships to strengthen family ties and to keeping children in schools as these are good preventative measures against trafficking of children.
5. Child Labour

The term “child labour” is often defined as work that deprives children of their childhood, their potential and their dignity, and that is harmful to physical and mental development. It refers to work that:

- Is mentally, physically, socially, or morally dangerous and harmful to children; and/or
- Interferes with their schooling by depriving them of the opportunity to attend school; obliging them to leave school prematurely; or requiring them to attempt to combine school attendance with excessively long and heavy work.

Section 43 of the Basic Conditions of Employment Act prohibits the employment of children by stating:

1. No person may employ a child— 30 (a) who is under 15 years of age; or (b) who is under the minimum school-leaving age in terms of any law. If this is 15 or older.”
2. No person may employ a child in employment— (a) that is inappropriate for a person of that age; 35 (b) that places at risk the child’s well-being, education, physical or mental health, or spiritual, moral, or social development.

A person who employs a child in contravention of subsection (1) or (2) commits an offence.

Employment of children of 15 years or older:

1. Subject to section 43(2) states: The Minister may, on the advice of the Commission, make regulations to prohibit or place conditions on the employment of children who are at least 15 years of age and no longer subject to compulsory schooling in terms of any law.
2. A person who employs a child in contravention of subsection (1) commits a 45 offence.

Description

- Child domestic labour may be considered one of the worst forms of child labour due to its rampant exploitation and different forms of abuse.
- Child domestic workers (CDWs) may not have a contract of employment and are very often forced to work long hours and exposed to hazardous working conditions such as cleaning chemicals.
- They are also at higher risk of physical and sexual harassment and abuse. In the world there are about 15.5 million CDWs: 60 percent in Asia and 90 percent girls. In Cambodia there are about 28,000 domestic workers aged seven to 17: about 10 of all children.
- Child domestic work is one of the most widespread, exploitative forms of child labour and is difficult to tackle because it is hidden from the public view and is linked with child trafficking.

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**Difference between Child Labour and Child Work**

- Not all work done by children should be classified as child labour and targeted for elimination. Children’s or adolescents’ participation in work that does not affect their health and personal development or interfere with their schooling is generally regarded as being something positive.

- This includes activities such as helping their parents around the home, assisting in a family business, or earning pocket money outside school hours and during school holidays.

- These kinds of activities contribute to children’s development and to the welfare of their families; they provide them with skills and experience and help to prepare them to be productive members of society during their adult life.

- Sometimes household work or chores can overshadow other important activities and result in exploitation within the home. A good way to know if the work has gone too far is if the work (e.g. household chores) takes them out of school. As started in the Bill of Rights, children have a right to an education. In some circumstances, children must work so that they can afford an education.

- Poverty is the most prevalent underlying cause for child labour. It is also a common practice in pre-industrialized societies. However, the widespread occurrence of children who work should never deceive us from seeing the dangers of child labour and the damage it causes.

- Once children work for an employer, especially away from home, they are extremely vulnerable to exploitation and abuse. Girls are particularly at risk of being sent to work instead of going to school.

- Work with dangerous machinery, equipment, and tools, or which involves the manual handling or transport of heavy loads is detrimental to children.

- Working in an unhealthy environment which may, for example, expose children to hazardous substances, agents or processes or to temperatures, noise levels or vibrations damaging to their health; work that is under particularly difficult conditions such as work for long hours or during the night or work where the child is, puts children at risk.
How do we respond as religious leaders?

- Drive community awareness campaigns about child labour and the laws that govern it
- Report any child labour concerns and suspicions
- Develop programmes to allow children to catch up in their education and or vocation training so they can aspire to safer jobs
- Have a targeted campaign for community members, including children and business owners, around children’s rights.
- Address poverty by linking young people with youth skills development programmes in the community. [“Teaching to fish instead of giving fish”]

6. Corporal Punishment

Corporal punishment is ‘any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light. Most involves hitting (‘smacking’, ‘slapping’, ‘spanking’) children, with the hand or with an object such as a whip, stick, belt, shoe, wooden spoon, etc. But it can also involve, for example, kicking, shaking, or throwing children, scratching, pinching, burning, scalding or forced ingestion’ (UN Committee on the Rights of the Child, 2006: 4)

Corporal punishment may also be imposed by forcing children to stand in uncomfortable positions for extended periods of time.

Reasons to avoid corporal punishment:
- Has been reported by children as being humiliating
- Has been proven to be far less effective in changing behaviour than more child inclusive discipline styles
- Children report to choosing to follow the rules as means of avoiding pain. This impacts on their self-esteem and development of some coping mechanisms that are socially positive.
- Corporal punishment sends the message to children that physical force is an appropriate response to problems or opposition.

Remember: The Constitutional Court ruling of 18 September 2019, effectively banned all corporal punishment of children.
Religious leaders should be aware of signs that the child could possibly be getting corporal punishment as discipline. These include a child:\(^\text{21}\):

- Avoiding physical contact with others
- That seems apprehensive when other children cry
- Wearing clothing to purposely conceal injury, such as long sleeves in hot weather
- Refusing to undress for sport or for required physical exams at school
- Giving inconsistent versions about occurrences of injuries
- That seems frightened of parents
- Frequently late/absent from school
- Coming to school early and seems reluctant to go home afterwards
- Has difficulty getting along with others
- Playing aggressively and often hurts peers
- Complaining of pain upon movement or contact.

**How do we respond as religious leaders?**

Religious leaders can respond by:

- Holding parenting workshops on alternative forms of discipline and mentor parents
- Hold parents accountable for any form of violence against children when the perpetrators are the parents by reporting them using prescribed procedures
- Promote anti abuse discipline in all counselling and programmes
- Establish and run support groups for single parents and vulnerable families
- Having sermons and religious messages promote NO VIOLENCE AGAINST CHILDREN.

7. **Bullying**

Bullying is exceedingly difficult for children, or anyone, to deal with. It makes a child feel afraid and degraded and often it makes a person feel like they are worthless. Unfortunately, bullying also makes a child to isolate from family and friends for fear of also encountering the person who is bullying him/her.

**BULLYING IS UNACCEPTABLE** and these are some forms of bullying tendencies:

- People calling the child names
- Making things up to get the child into trouble
- Hitting, pinching, biting, pushing, and shoving
- Taking things away from the child under duress
- Damaging a child’s belongings deliberately
- Spreading rumors about a child
- If the child bullies other children, this may happen because someone is bullying them.

\(^\text{21}\) Adapted from Community Systems Strengthening Partnership: Training for Transition by the Learning Network, University of Cape Town
What can religious leaders do?

- Know the signs and indicators for bullying. The following are some of the indicators that a child could be bullied: The child:
  - Comes home from school with damaged or missing items of clothing or belongings
  - Has bruises, cuts, and other injuries they cannot explain
  - Seems socially isolated
  - Does not want to go to school
  - Appears moody, depressed, or sad
  - Complains about headaches or stomach aches
  - Has trouble sleeping
  - Reports to have nightmares
  - No longer has interest in his/her hobbies and schoolwork
  - Appears anxious or stressed.
- If the child has two or more of the above indicators, he/she must be referred for a full assessment.
- Contact a suitable designated local child protection organisation or a social worker from the DSD. Helping a child victim will inevitably prevent that child from becoming a potential perpetrator.
- Teach these signs to parents as part of parental skills programmes.
- Use children's programmes such as Sunday school activities and other youth programmes to teach children about bullying. Below are examples of what a child who is bullied can do.
  - In most instances the child who is bullied is unable to defend himself or herself
  - The child will have to tell someone. The child may not want to do this because it means showing that the child is vulnerable, for fear of letting someone get the better of him/her. But it is especially important for the child to tell someone otherwise, it may not stop. The child should speak to a friend, parent, brother or sister, uncle, or aunt and most importantly, if it happens at school, the child must speak to a teacher. Encourage children to identify someone they trust to tell them if something is bothering them
  - Other protective measures may include trying to stay in safe areas of the school at break and lunchtime where there are plenty of other people. Bullies don’t like anyone seeing what they are doing. If a child is hurt at school, the child must report to a teacher immediately and ask for it to be written down. Parents must be informed
  - On the school transport, advise the child to try to sit near the driver. In a public transport like a bus, encourage the child to sit next to other adults
  - If the child has to walk part of the way, and the child is afraid of the bully finding him/her, then the child should be encouraged to change the route, encourage the child to leave
home and school a bit later or a bit earlier, or walk with other children or adults. Religious leaders must work with parents and community network to ensure that children are safe should they take alternative routes or walk at odd hours to avoid being bullied

- If the child has a cell phone, teach him/her to be careful about who they give their number to. If the child receives threatening phone calls or emails, then the child should disclose to the parents or a trusted adult. It is against the law for anyone to send offensive or threatening phone messages and if it continues, it can also amount to harassment. If this comes to the attention of the religious leader, then the child and family can be assisted to report the matter to the police for action. The police can, and do, take action.

**Exercise: Case Study**

- This exercise is to assist participants to identify child protection violations and appropriate actions by religious leaders. It is also to help participants demonstrate what they have learned from this session so far.
- Divide the group into half.
- Give each group a case study to discuss ([Handout 5](#)).
- Ask groups to read through the case study quietly in the group.
- Ask them to answer the following questions:
  - What forms of child protection violations are at play in this scenario?
  - Is it ok for the father to sleep in the same bed as her daughter, and to give her a bath?
  - As religious leaders, what steps will you take to support the grandmother and assist the child?
- Groups must note their responses on the flipchart paper.
- Ask one group to give feedback.
- Once completed, the second group must add any other relevant responses that were not mentioned by the first group.
- This activity can take approximately between 25 - 30 minutes.
- After the activity, check if participants have any questions and address them.
- Thank participants for their participation and introduce the next session.
G. SESSION 6: PROTECTIVE MEASURES FOR SPECIAL CATEGORIES OF CHILDREN

1. Session Aim and Learning Outcomes

Aim:
To raise awareness about the protections for specific vulnerable children

Learning Outcomes:
At the end of the session participants should be able to:
- Identify three categories of vulnerable children who need special protection
- Demonstrate an understanding of the legal provisions for the protection of these special categories of children
- Articulate actions by religious leaders to promote the protection of these groups of children

2. Child Headed Households (CHH)

Introduce the session by mentioning that:
- Child-headed households are a reality in many South African communities
- Section 137 of the Children’s Act provides for protection of children in child headed households.
- This section was added with the realisation of challenges faced by these children due to the impact of HIV and AIDS leaving children orphaned
- The religious sector has a critical role in identifying, reporting, and providing psychosocial support to child-headed households.

Definition of a child-headed household:
Section 137 provides for the recognition of a child-headed household. It gives the Department of Social Development a responsibility to recognise a household as a child-headed household under certain conditions. These include, if:
- The parent, guardian or caregiver of the household is terminally ill, has died or has abandoned the children in the household.
- No adult family member is available to provide care for children in the household.
- A child over the age of 16 years has assumed the role of caregiver in respect of the children in the household.
- It is in the best interest of the children in the household.
Why do we have these households?

- When no known relatives can be found to take the children
- When existing relatives refuse to take care of the children
- When relatives do not want to move in with children in their parental homes following the death of parents
- When children do not want to move away
- When it was the wish of the (dying) parent or parents for children to stay together
- To retain family assets like family home and other property and prevent property grabbing by relatives
- When it is the wish of the children to stay together
- When there is an older child to take care of the younger siblings.

Challenges facing child-headed households:

- The needs of vulnerable children are generally similar. However, when vulnerability factors such as poverty and violence are combined with HIV and AIDS, the threats to children are even higher.
- Abuse can take place because the family environment that served as a safety net has been eroded. Some children could be forced into exploitative work, including commercial sexual exploitation in exchange for food and shelter.
- Exposure to health hazards.
- Poverty, children often live-in poor conditions and are exposed to hard labour.
- They are at risk of poor education as they quite often lack money to pay school fees.
- Other risks are employability because of poor education and lack of skills, diseases, commercial sex work, crime, pregnancy, poor or no shelter and no knowledge about their rights.
- Children have to leave school due to the pressure of having to care for ailing parents and young siblings. When one or both parents die, the pressure to leave school becomes even greater.
- Research has also found that orphans more than non-orphans, are absent from formal schooling.
- Where they attend school, it is characterized by constant absenteeism and poor performance.
- Orphans and other affected children are most likely to be malnourished or fall ill. They are less likely to receive the medical attention and health care that they need. Poverty is a big factor coupled with discrimination, neglect, and vulnerability by adults in whose care they are left after the death of their parents.
- Loss of inheritance also occurs when orphans are cheated out of their rightful property by relatives and other people.
- They are exposed to emotional trauma, as they may have to cope with multiple losses in the form of death, sibling dispersal, relocation, and reconstitution of the family after the death of their parents.
• Fear and isolation because of stigma and self-stigmatization which occurs when an individual avoids situations that they assume will lead to stigmatization, such as, not going to the clinic or to collect food parcels because of the association with HIV and AIDS.
• Taking on a parental role is another challenge facing children heading households.
• This phenomenon is referred to as “parentification” of responsibilities and taking on adult responsibilities affect children’s socialization processes. On the surface some children may appear to be doing well but because they do not have outlets such as recreation and adequate emotional support, they may exhibit symptoms such as depression and stress.

Responsibilities of a child who heads a household:
• The Act and the regulations place certain responsibilities specifically on the child heading the household. These include the responsibility to:
  • collect and administer for the child-headed household any social security grants or grants in terms of the Social Assistance Act No. 13 of 2004 or any other assistance to which the household is entitled – section 137(5)(a)
  • to make day-to-day decisions relating to the household and the children in the household – section 137 (7)
  • together with other children in the child-headed household, given their age and maturity, to report the supervising adult to the organ of state or nongovernmental organisation if the child or children are not satisfied with the way the supervising adult is performing his or her duties – section 137 (8).

How do we respond as religious leaders?
• Section 137 (2) of the Children’s Act provides that a child-headed household must function under the general supervision of an adult designated by the court. This is a role that can be played by religious leader if they work closely with the Department of Social Development. Religious leaders can perform duties of “supervising adult” as provided for in the Act. Other services that can be offered by religious organisations include:
  • Offering spiritual, financial, and social support for the child who is heading the household.
  • Offering such support to other children in the household
  • Assisting the household by facilitating the application for financial support offered by the government
  • Offering counselling and spiritual support to the entire family
  • Assisting in encouraging other family members to help the household
  • Offering babysitting and other household maintenance services to the family
  • Keeping a database of child-headed households in the community
  • Considering running programmes such as Drop-in Centres to help children from child-headed households with homework and other basic services after school.
3. Protection of Children with Disabilities

- Children and adolescents with disabilities can be vulnerable to violence, abuse, exploitation, and neglect\textsuperscript{22}.
- Religious organisations working with children should be aware of the particular vulnerabilities of children with disabilities.
- They should also be aware of the specific challenge to their participation in the development and monitoring of policies aimed at protecting them.
- The Convention on the Rights of the Child (CRC)\textsuperscript{23} affirms that all children are entitled to protection from all forms of violence and this is reinforced by the Convention on the Rights of Persons with Disabilities (CRPD)\textsuperscript{24} which introduces specific measures in recognition of the fact that women and girls with disabilities are often at greater risk of violence, injury or abuse, neglect or negligent treatment, maltreatment, or exploitation.
- Article 14 of the CRPD states that disability should never justify deprivation of liberty. It recognizes the right of children with disabilities to live in the community, backed up with the necessary support and services to make that possible.
- Definition of disability: read out the definition below:

“Disabled children include those with movement, speech, visual, hearing, intellectual, hidden, and multiple impairment, and they are further disabled by being discriminated against and excluded. Children with mid impairments can be severely disabled by lack of access to their basic needs and rights”.\textsuperscript{25}

- Using the brainstorming method, ask participant this question: why are disabled children particularly vulnerable to abuse? Write answers on a flip chart paper and add the following points if they have been missed out:
  - are dependent on other people for their care
  - They sometimes don’t understand that they are being abused due to the nature of disability or intellectual capacities
  - They may not have the opportunity to tell people what is happening
  - Their difficulties with communication can make it hard to tell what is happening to them.
- Mention the different ways that children with disabilities are abused, and ask participants to add ideas from their knowledge and experience
  - Lack of basic care- inadequate food, shelter, or healthcare
  - Lack of opportunities to develop, restriction of freedom, or lack of social interaction
  - Abandonment

\textsuperscript{22} United Nations Children’s Fund, 2013. The State of the World’s Children
\textsuperscript{23} \url{http://www.unicef.org/crc/index.html}
- Degraded treatment - ostracism, name calling or other verbal abuse or insults
- Excessive medical or rehabilitative “treatment” that can be harmful
- Violence (including violence masked as punishment)
- Sexual abuse

What are possible signs that a child with disabilities could be abused? Mention to participants that in Session 3 we covered signs of child abuse and mentioned that the presence of these signs does not necessarily mean that the child is abuse. The same goes for children with disabilities. However, because disabled children may not be able to tell you they are being abused, we are encouraged to be extra vigilant here are a few things to be aware of. Look out for the following signs:

- Sudden unexplained changed in behaviour
- Soiling
- Sexualized behaviour
- Loss of appetite
- Self-harming
- New or unexplained marks or bruising
- Sign of general distress or agitation.

How do we respond as religious leaders?

The religious sector is encouraged to:

- Be proactive to prevent abuse from taking place.
- Provide a warm, friendly, and welcoming environment:

Talk to children with disabilities as you would any other child. Communicate that people affected by disability are loved, belong, and are included in your organisation. Emphasize non-discrimination

- Provide basic disability awareness training for youth, staff, and volunteers
- Review basic disability etiquette tips. Invite a disability expert to your organisation. Obtain disability resources. Ask children with disabilities what they need
- Improve accessibility. Provide modifications and adjustments as required!
  Consult children with disabilities on what difficulties they have in the organisation’s building and make the necessary changes. If necessary, modify access to the main entrance, restrooms, classrooms, and other key areas
- Provide disability-friendly materials
  Have large printed religious materials available. Consider providing assistive listening devices for hearing impaired children.
- Provide space for wheelchair users throughout the facility
  Shorten a few pews/ benches or take chairs away from some of the rows so wheelchair users can sit with their families and friends.
• Provide a sign interpreter for people who are deaf or hard of hearing. Place a sign interpreter in a well-lit area, which can be seen throughout the place of meeting.

• General communication and interaction tips
   Treat children with disabilities with the same respect as you would any other child. Where children can communicate, speak directly to them, not through their family members or caregivers.

• Provide assistance in parking area
   Accessible parking close to the entrance is ideal. Have an attendant available to help children with disabilities from their vehicles. Have a spare wheelchair available to assist those with difficulty in mobility.

• Provide a ‘buddy’ or mentor for those who might need assistance
   Utilize assistants to help children with disabilities participate in services. Have a ‘buddy’ system for children with disabilities in Sunday school classrooms.

4. Children Living Under Customary Law

• Start this section by pointing out that: South Africa is a legal pluralist state, with the Constitution having given legal force to both “state” and customary law.

• Customary law is defined in section 1 of the Recognition of Customary Marriages Act as the “usages and customs traditionally observed among the indigenous African peoples of South Africa”, which “forms part of the culture of those peoples”.

• Customary law is derived from social practices that the community accepts as obligatory. While many South Africans live according to customary law, the law (or norms) regulating the lives of people will vary across communities, ethnic groups, and provinces.

• Culture is the sum total of ways of living built up by a group of human beings and transmitted from one generation to another.” Cultural anthropologist Clyde Kluckhohn defined culture as:
   o A total way of life and a way of thinking for particular groups of people
   o The social legacy that the individual acquires from the group.

• Whilst the Constitution allows citizens to practice their customs, (section 30 and 31) it is important to note that there are some cultural practices that are deemed harmful to children.

• Harmful cultural practices are violating practices that have been taking place over a long period of time and are now considered culture and acceptable.
5. Cultural, Traditional and Customary Practices which are Harmful to Children

The revival of traditions, culture and customs, and practices so attached, after colonialism, imperialism and apartheid will definitely require us to enter into a dialogue on the character of what is really indigenous. However, the process should take the context into consideration. Some cultural practices that were necessary then are not as effective and conducive to wellbeing due to development, globalization and other factors. Some cultural practices that need to be discussed further are discussed below.

1. Virginity testing

- Virginity testing is the practice and process of inspecting the genitalia of girls and women to determine if they are sexually chaste. It is based on the false assumption that a woman's hymen can be torn only as a result of sexual intercourse. It is a very controversial practice, both because of its implications for the girls tested and because it is not necessarily accurate.
- There are two schools of thought with regards to virginity testing. One school of thought submits that it is a form of sex education and it enforces abstinence from sexual activities before marriage. Girls are taught not to allow boys or men to take away their pride by having sexual intercourse with them before marriage. It is believed that young women will abstain from sex because they fear being discovered to be no longer virgins. This is a stigma not only for the girl but for her entire family. Proponents of virginity testing also believe that virginity testing substantially reduces the spread of sexually transmitted diseases, including HIV and AIDS, and further, that it reduces teenage and unplanned pregnancies.
- To be in line with the Constitution and give cultural communities the right to practice their culture and belief with regards to certain practices, some of these practices have been regulated in the Act. The law recognise that some cultural practices could be harmful to children and their regulation in law was aimed at ensuring that children are protected from harmful effects of certain practices which could not be completely abolished.
- Section 12 of the Children’s Act deals mostly with virginity tests and circumcision, but the first paragraph has wider implications. It states that “Every child has the right not to be subjected to social, cultural and religious practices which are detrimental to his or her well-being”.
- Virginity testing of children under the age of 16 is prohibited and may only be performed on children over 16 with their consent, obtained after proper counselling. Further, the results of a virginity test may not be disclosed without the child’s consent. According to the Act the child should sign a consent form and the parent or guardian should assent to the child’s virginity testing.

2. Ukuthwala

_Ukuthwala_ is a form of abduction that involves the kidnapping of a girl or a young woman by a man and his friends or peers with the intention of compelling the girl or young woman’s family to endorse marriage negotiations. In ancient Africa _ukuthwala_ was a condoned, albeit abnormal, path to marriage targeted at certain women of marriageable age. It did not involve raping or having sex with the woman until the
marriage requirements had been met. *Ukuthwala* was not performed, however, with impunity; it incurred liability for the culprit in the form of the payment of a herd of cattle to the father or legal guardian of the girl. Today *ukuthwala* involves the kidnapping, rape and forced marriage of minor girls by grown men who are old enough to be their grandfathers. This is not in line with the initial intent of the practice and thus constitute a crime if targeting minor girls for forced marriages and at times even just blatant abuse

**Impact of ukuthwala on children:**
- Ukuthwala may retard childhood development processes
- It burdens the girl child with the responsibility of being a wife with a husband and in most instances children and in-laws to serve or look after
- It is a health hazard, with problems ranging from contracting HIV and other sexually transmitted infections (STIs) to pregnancy-related complications such as infant and maternal mortality and fistula-related diseases.
- The development of the child is stunted because early marriage forces the child to skip other normal developmental milestones.
- The abducted child is often removed from school and this deprives the child of their right to education.

3. **Female Genital Mutilation (FGM)**
Female genital mutilation (FGM) is disfigurement that includes cutting of the clitoris. It also includes changing the form of the labia or elongating them. In some societies FGM marks an important rite of passage into womanhood, while others believe it guarantees virginity, curbs female sexual desires, maintains hygiene, prevents promiscuity, and increases fertility.

Whatever the reasons for practicing FGM, the consequences are a health hazard. The practice is normally performed without anesthesia, using unhygienic methods and instruments. Its consequences include sickness or death due to infection, hemorrhage, or even blood poisoning. This is torture, and the prohibition against torture is contained in s 12(1)(b) of the *Constitution*, and article 5 of the *African Charter on Human and Peoples’ Rights*.

*NB:* Female Genital Mutilation is prohibited in South Africa.

4. **Male Circumcision:**
Circumcision is the removal of the foreskin from the human penis. In the most common procedure, the foreskin is opened, adhesions are removed, and the foreskin is separated from the glans. After that, a circumcision device may be placed, and then the foreskin is cut off. Although the precise origin of male circumcision is unknown it is generally perceived as a religious practice. In many cultures and religions, it is a norm.
The challenge with ritual circumcisions in South Africa is the number of fatalities resulting from botched circumcisions and the spreading of sexually transmitted diseases through the use of unhygienic procedures. Go through the following points:

- The Children’s Act states that male circumcision is prohibited for boys under the age of 16, unless it conforms to prescribed religious practices or is medically necessary.
- Circumcision of boys of 16 and over must be carried out in a prescribed manner and only with the boy’s consent, given after appropriate counselling.
- The Act further states that: “Taking into consideration the child’s age, maturity and stage of development, every male child has the right to refuse circumcision”.
- Circumcision for religious or medical purposes must only be carried out after a prescribed consent form, Handout 6 has been signed by a parent or guardian. Circumcision on a boy aged 16 or over for social and cultural reasons requires both the boy and his parents to sign Form 3.

**Consequences on unregulated male circumcision:**

Some of the physical consequences that may result from circumcisions may be summarized as follows:

- Hemorrhage due to the crossing of many veins in the penis, which, if left undetected or untreated, can be fatal
- Infection, since the injury caused by circumcision may be exposed to urine and feces thus provoking infections and other conditions including:
  - Urinary infection which can be caused by the trauma of the operation
  - Necrosis of the glans, which is the death of body tissue due to an overly tight bandage over the wound
  - Injury and loss of glans
  - Excessive penile skin loss, the damage depending on the quantity of skin removed
  - External deformity of the penis since the healing of the wound may result in an unpleasant external appearance
  - Loss of penis which may be due to infection.

**How do we respond as religious leaders?**

- Create awareness about harmful cultural practices and those that are prohibited, such as the practice of FGM and circumcision.
- Facilitate inter-generational dialogues to sensitize older generations about the dangers of FGM, circumcision, *ukuthwala* and other such practices.
- Create safe spaces for children to be able to talk confidentially should they be exposed to harmful cultural practices
- Reach out to victims of these harmful practices by creating support structures for victims.
- Conduct advocacy campaigns to challenge these practices at community and government levels
• Encourage healthy conversation about harmful cultural practices in an informed way to change the attitudes of people around these practices.
• Engaging youth and children (mindful of age and stage of development) in constructive discussions around these issues and support young people’s groups dialogues
• Refer victims of harmful cultural practices to appropriate authorities for investigation and support.
6. **Unaccompanied Minors and Migrant Children**

- General Comment No. 6 (2005) to the UN Convention on the Rights of the Child defines ‘unaccompanied children’ as “children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so”.
- In the South African context, being categorized as an ‘unaccompanied minor’ has a bearing on a foreign child’s admission to the Republic and the ability to legalize immigration status subsequent to entry.
- In the context of border control, the Regulations to the Immigration Act (No.11, 2002) narrowly define an unaccompanied child as “a child under the age of 18 years who travels alone.”
- With regards to child protection, unaccompanied children are highly vulnerable as they are unable to access child protection services.
- Migrant (refugee) children and unaccompanied minors mainly from Zimbabwe, Mozambique, Swaziland and Lesotho regularly migrate to South Africa. During the 2008/2009 period it is estimated that nearly 4,000 migrant children were living independently of close relatives and outside of their country of origin.
- Girls are slightly more likely to migrate independently compared with boys. The likelihood that a child will migrate independently also increases substantially with age.
- Unfortunately, the exact figures of unaccompanied and separated children, including refugee and asylum-seeking children in the sub-Saharan region are not known.

**What are the challenges faced by these children?**

- Although there are laws to protect all children, both internationally and in South Africa, these protection instruments may not necessarily filter through to unaccompanied minors and refugee children and this may thus have multiple negative consequences. For many of these children, challenges begin before they enter the country. They face challenges on their journeys out of their countries of origin which include exploitation (sexual and non-sexual) by truck drivers, border officials and police officers, who are initially viewed as their protectors. Research also shows that children experience exploitation by officials and police officers at the border post.

- Some of the other challenges faced by child refugees and unaccompanied minors are:
  - Rights violations and lack of access to education
  - Lack of access to adequate food, water, and shelter
  - The risk of harassment, robbery, extortion, and exploitation
  - The possibility of becoming stranded and destitute in a foreign country
  - While these factors would place any person at risk, the risk for unaccompanied minors and migrant children is considerably increased

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Upon their arrival in South Africa children face further challenges including language barriers, insecurity, discrimination, inadequate housing, and problems with integration into schools as they are perceived to be "different" from the local population. They are often unable to access to social services and other services as well as legal documentation.

How do we respond as religious leaders?

- The law requires that when one sees or suspects seeing an unaccompanied minor or refugee child, the matter should be reported immediately to the Department of Social Development so that appropriate steps are taken to ensure their safety. Referral is therefore critical.
- Advocacy and raising awareness on the plight of unaccompanied minors and refugee children
- Run programmes to support children meet their most basic needs, where funds permit
- Facilitate access to education and other services for unaccompanied minors and refugee children
- Support efforts aimed at reintegration of children in communities
- Religious organisations are regarded as safe spaces for emotional and spiritual healing, which transcend language or cultural background. Integrating and embracing these children not only provide healing but also hope for their future.
- Check if participants have any additional points to add to this section. Check for questions and address them where possible.
- Give a summary of what the session has covered, thank participants for their participation and introduce the next session.
H. SESSION 7: THE RELIGIOUS ORGANISATION AS A PLACE OF HEALING

1. Session Aim and Learning Outcomes

**Aim** To raise awareness on the role of religious organisations in bringing healing to victims of abuse and their families, and to support perpetrators of abuses

**Learning Outcomes:**
At the end of this session participants will be able to:

- Explain how the religious organisation is a place of healing
- Reflect on religious leaders and their experiences of abuse directly and indirectly
- Describe services that religious organisations can offer to support the healing of survivors of abuse
- Understand the role of religious organisations in healing families of abuse survivors and helping families of perpetrators
- Identify the role of religious organisations in providing services to perpetrators of abuse to children

- Prepare a summary of what was covered in the previous 2 sessions and present it on a flipchart. These sessions covered different forms of abuse experienced by children, as well as categories of children that are particularly vulnerable and at risk.
- Mention that this session will be more inward-looking for religious organisations and religious leaders.
- Go through the relevant learning points and with each with each section brainstorm with the group to come out with concrete examples of services and programmes they will implement.
- Use the session to share experiences of participants and best practices relevant to the topics of the session.
- Prepare examples to illustrate the points and engage the participants to also share their views and experiences without mentioning real names if they have real life examples.
2. The religious Organisation as a Place of Healing

- Many people view religious spaces as environments of healing and restoration, and people with religious convictions are likely to turn to religious organisations around them for support
- The religious sector enjoys a unique level of influence that is recognised and subscribed to by individuals, families and communities in most cultures around the world
- This willingness to subscribe and make qualified recommendations to their congregation members

3. The Healed Religious Leader

- There are many religious leaders who are either themselves survivors or known survivors of child abuse within their religious organisation
- The religious sector, unlike most sectors involves a lot of active participation from its service users, and this usually means managing many activities, volunteers, and workers
- This presents a great need and opportunity for religious leaders who have been affected by child abuse as children or as secondary observers to undergo a healing process
- It is essential for religious organisations to adopt in-house interventions in group and individual settings.

4. The Religious Organisation as a Place of Healing for the Victim

- Religious organisations are advised to set up healing programmes within their annual calendars for victims of child abuse, these can be a combination of group sessions, coursework, and individual counselling
- While some religious organisations make such provision, children are unfortunately often left out. Engaging with children on matters of abuse must involve educating children within the religious organisation on abuse, neglect, and exploitation through age appropriate delivery. When tending to a child who is a survivor of abuse, individual counselling by qualified and designated personnel within the religious organisation
- In instances where such services are not available, it is recommended for the less capacititated religious organisation to engage with service providers within their geographical areas and principles wherever possible.
5. The Religious Organisation as a Place of Healing for Families of Victims and Perpetrators

- Families of victims and/or perpetrators typically lean towards social isolation, however, the religious organisation can give support by empowering the family environment to create links with extended family members and their community.

- Families identified as being at risk can be served through religious leaders collaborating with child protection agencies to build capacity within the family to engage in child protection.

- The religious leader must aim to reduce stress caused by the incident of abuse, neglect and/or exploitation by and enhancing the coping skills of caregivers, thus reducing or eliminating any further risks of abuse and/or neglect.

- Furthermore, the religious sector can help families eliminate or reduce exploitation, including commercial sexual exploitation and child labour by ensuring that families are able to access to social security and other available social protection measures.

5. The Religious Organisation as a Place of Redemption for Former Perpetrators

- Whilst the idea of spending any resources on people who have caused harm to children may be appalling to some parts of society, most religious statutes appeal for the higher goal of second chances.

- Besides the moral law religious leaders are likely to use to qualify rehabilitation for the perpetrator, it is in the interest of the wellbeing of children who are possible future victims to rehabilitate the offender.

- Religious organisations are often not capacitated to deal with the clinical way these interventions are undertaken. Should the religious organisation have relevant professional personnel, the religious leaders would still have to ensure that services are properly underwritten and that none of the legal means are obstructed.

- The religious organisation may offer support in a form of counselling and spiritual support.

- In the scenario where the perpetrator subscribes to the same religious organisation as the victim, it is advised for the perpetrator to be referred elsewhere, and the information on the offence be shared with the new relevant religious organisation.

After the presentation and discussions, check if participants have any questions and address them. Thank participants for their participation and introduce the next session.
I. SESSION 8: TECHNOLOGY, SOCIAL MEDIA AND ONLINE VIOLENCE

1. Session Aim and Learning Outcomes

Aim:
To promote a clear understanding of what constitute online violence and its effects on children.

Learning outcomes:
At the end of the session participants should be able to:

- Define the concept of online violence
- Be better prepared with knowledge on what to do when faced with challenges related to online violence and be able to help protect their children.
- Identify the different forms of online violence
- Be able to identify and explain the effects that online violence can have on children
- Demonstrate an understanding of how religious organisations can be involved in fighting online violence.
- Begin the session by going through the aims of the session and the Learning Outcomes.

2. Online Violence

- Inform participants that there will be a short discussion about what “online violence” is.
- Explain that participants have heard this concept before and have probably used it in different conversations. However, it is important to have an open discussion about it as online violence is a serious problem that can take on different forms.
- Depending on how large the group is, each person should say out loud what their understanding of “online violence” is. Write the different responses on a flipchart
- Explain that it is important to have a common understanding of the concepts in order to know how to deal with them accordingly.
- Explain that there are other concepts that are related to online violence which will be defined in this session. These include online safety, online dangers, etc.
- Taking into consideration all the definitions given, read out the definitions below and make practical examples as you present them.
- \textit{What is Online Violence?}
Online violence refers to the use of online digital devices or services to engage in activities that result in physical, psychological and emotional self-harm or cause harm to another person. Although it is extremely critical to appreciate the opportunities that online has presented, it is also critical to promote the safety of children online. Child Sexual Abuse Material (CSAM), also referred to as “child pornography” has contributed greatly to online vulnerability of children.

- **What is Online Safety?**
- Online safety refers to the act of staying safe online. Being safe online means individuals are protecting themselves and others from online harms and risks which may jeopardize their personal information, lead to unsafe communications, or even affect their mental health and wellbeing.

### 3. Online Danger

- **What is an Online Danger?**
  An online danger can be defined as anything that may cause harm to an internet user. This harm can come in many forms (e.g. physical, emotional, psychological, financial, social, and reputational)
  - Do a group brainstorming session. Think of a range of scenarios and ask participants what the impact of the scenario could be on a person/child
  - Your photo has been displayed and circulated online and people have been making several rude comments about your image: What is the impact of this on you? (Possible answer Depression)
  - Your 13-year-old daughter has been posting her photos on Facebook hoping that someone will comment (including “likes”). However, after a few days you notice that your child is not eating well. She is fussy about her appearances and appears to have lost interest in her grooming. What could be the impact of lack of comment on your child? (Low self-esteem)
    - A teenager is in a WhatsApp group, but no one is including her in the conversation. If she comments, no one responds. What is the possible impact on the child? (Social Exclusion)
    - A girl in a social network has posted something online, an innocent dance that online users find to be “sexually suggestive”. She begins to receive a number of “views” and invitations to parties with a sexual theme. These views and invitations are now affecting her because she did not mean the dance moves to be sexually suggestive. What could be a possible impact of this on her? (Anxiety, risk of trafficking, dropping in academic performance, ruined reputation, emotional abuse)
  - Ask participants to share other online scenarios and their impact on children
  - Increased risk of online exploitation during the COVID-19 pandemic
    - COVID-19 has prompted widespread school closures and physical distancing measures and made online platforms and communities essential to maintaining a sense of
normalcy. Children and their families are turning to digital solutions more than ever to support children’s learning, socialization, and play. While digital solutions provide huge opportunities for sustaining and promoting children’s rights, these same tools may also increase children’s exposure to online risks.

- COVID-19 has abruptly pushed children’s daily lives online as of the April 2020. It has led to country-wide school closures and impacting negatively on children’s educational rights.
- Many children’s learning experiences are being reshaped by the sudden introduction of remote learning, using virtual platforms as a substitute for the classroom and schoolyard.
- Online games, social media and video chat programmes are providing opportunities for children to connect with and play with their friends, parents, and relatives. These opportunities also come with dangers in the form of cyberbullying.

4. What is Cyberbullying?

- Cyber bullying, also known as electronic aggression, could include being bullied, mocked, ridiculed, and humiliated online.
- It takes place over digital devices like cell phones, computers, and tablets.
- Cyberbullying can occur through short message system, i.e. SMS, and apps (including Instagram, Facebook, WhatsApp, and other social media platforms), forums, or online gaming websites where people can view, participate in, or share content.
- Cyberbullying includes sending, posting, or sharing negative, harmful, false, or mean content about someone else.
- It can include sharing personal or private information about someone else causing embarrassment or humiliation.
- Some cyberbullying crosses the line into unlawful or criminal behaviour.

- List of different forms of cyberbullying:
  - **Harassment**: sustained and intentional bullying where threatening messages are sent directly to your child or a group.
  - **Cyberstalking**: a dangerous form of cyberbullying where the predator harasses the victim through online communications like email or social media. Also referring to adult who talk to children online with the intention of abusive/sexual purposes.
  - **Fraping**: when someone logs into your child’s social media account and impersonates them, posting inappropriate content in their name.
  - **Fake profile**: can be created by someone to hide their real identity with the intention of bullying your child/victim. The cyberbully may even use someone else’s email or mobile phone to harm them.
  - **Dissing**: posting or sending cruel information about victim to damage their reputation or friendships. This also includes posting inappropriate images, screen shots, videos or conversations online.

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- **Trickery**: involves gaining the victims trust so that the predator can share secrets online or use those secrets to extort the victim
- **Trolling**: meaning deliberately provoking a response through the use of insults online with the aim of making victim angry and getting a response
- **Catfishing**: similar to fake profiles, the predator creates a fake persona with the intention of luring its victims
5. Cyber Predators

- Sexual and other predators use social media, online gaming to exploit vulnerable online victims.
- Keeping in mind the list of different forms of cyberbullying, it becomes apparent that predators have a huge amount of online power. This is how to identify online predators:
  - They use fake profiles and information e.g. a 40-year-old man can pose as a 14-year-old boy by using a fake picture as a profile
  - Predators use a process called “grooming” to gain the trust of the victim and build a relationship with the child
  - They often gain critical information with no difficulty and research their victims before engaging them in a conversation
  - Predators can be also be other children.
  - They can extort money from their victims (e.g. children can find themselves sharing their parents’ credit card details)
  - Predators can engage in online sexual exploitation, where children under 18 are either forced or manipulated into having online sex and/or performing sexual acts in exchange for money
  - Predators can be known to the victim.
- After going through the notes on cyberbullying, the facilitator must make sure all the participants are on track and understand everything that has been discussed so far.
- The facilitator should inform the participants that they will now be doing a short activity in groups.

Exercise: Small group discussion

- Participants should then be divided into smaller groups depending on the number of images to be used in the activity. For example, if there are 5 images provided by the facilitator then there should be five groups.
- Each group should pick 1 or 2 group leaders who will present feedback on behalf of the group.
- Facilitators should then go around and provide each group with a single image depicting a type of cyberbullying along with a blank paper to write on (All the images will be different). These images are found in Handout 7 with cyber images.
- The image should not indicate anywhere on it’s what kind of cyberbullying it represents.
- On the blank paper provided, participants in their respective groups will write down the type of cyberbullying they believe the image represents along with an explanation of the cyberbullying type. They will also have to indicate as much as possible what it is about the picture that suggests the type of cyberbullying, they have written about.
- When they have written their notes, ask group leaders to present their picture and information to all participants. Then the facilitator would correct them if they identified the wrong type of cyberbullying.
• Once everyone has presented, the facilitator should thank them for participating. And allow for people to ask a few questions before moving on.

• This exercise will take about 10-15 minutes

• Now the facilitator must talk about the different codes that are part of the cyberbullying world. Alert participants that it is important for any adult/parent/person working with children to be aware of these.

• Using Handout 8, select a few cyberbullying acronyms or codes and write them on a flip chart paper. Ask participants what they think the acronym stand for. Give this exercise about 8 minutes then distribute Handout 8, and alert participants to the hidden meaning behind the codes.

• Now that participants are aware of these codes, ask them how they are going to use this information in their families, with their children, colleagues, children they work with and in the community.

• Advise them to be always on the lookout for new codes as the cyber world is changing every day. What can religious leaders help parents do?
  o It is extremely important that religious organisations, private, public and parents work together in trying to protect their children from online violence. As the well-being of our children is not the job of a single person but all people united. And this is how religious leaders can help:
    o Adjust the privacy settings on any mobile device or computer.
    o Adjust the browsing options to safe browsing.
    o Adjust the settings on a mobile device to permit or prohibit certain sites
    o Download parental control apps from the play store.
    o Be cautious about posting and sharing personal information, especially information that could be used to identify you or locate you offline, such as your address or telephone number.
    o Block and report anyone that sends unwanted or inappropriate communications (check if participants know how to block. As a facilitator always make sure that you know how to do this and be confident in demonstrating different functionalities of technology)
    o Check out mutual friends and verify information before accepting friend requests on Facebook
    o Be careful when posting pictures of any child or adult, consider the information in the background of the picture e.g.: house address, car registration, school logo etc.
    o Pictures of adults or children can be edited and manipulated to be reposted on porn sites and other social platforms
    o ‘CHECKING IN” online places any person in a place of vulnerability especially if in a public place
    o Never meet anyone in person that you have met online especially if a child is present
- All children should have supervised time on the internet including online gaming where live chats are accessible.
- Educate children about online dangers and safety.
- Watch for a child’s behavioral changes after spending time online.
- Limit and monitor the child’s use of the internet. Unmonitored screen time can result in addiction and minimize attention and alertness.

- To close the session, check that participants have any question and address any outstanding questions. Where no answers can be addressed ad the issue is pertinent, put it under the “Parking Lot” issues.
- Thank the participants for their participation and introduce the next session.

“If we want to reach real peace in this world, we should start educating children.”
-Mahatma Gandhi.
J: SESSION 9: PREVENTING ABUSE WITHIN RELIGIOUS ORGANISATIONS

1. Session Aim and Learning Outcomes

Aim:
To create an environment that enables children to report abuses and that allows children and adults within religious organisations to report child protection abuses

Learning Outcomes:
At the end of the session participants will be able to:
• Examine factors that stop children from reporting abuse
• Identify factors that stop adults within religious organisations from reporting abuse
• Acknowledge fears and risks to reporting.
• Describe policies, procedures, and practices to be adopted by religious organisations to promote a safe environment for children
• Establish agreement on acceptable behaviour towards children.
• To outline the key benefits to an organisation of having a written child protection policy.

• Begin this session by stating that so far, we have been talking about abuses committed by adults on children and looking at understanding signs of abuse.
• We now want to look inwardly within our religious environments and ascertain whether they are child friendly and safe for children.
• Children who have been abused go through so much and having to report to someone about what is happening to them takes its toll on them emotionally.
• Mention that there are many ways that religious organisations can help protect children
• In this session we are going to address two of the critical ways to achieve this, namely through:
  (a) Prevention and awareness
  (b) Developing and implementing internal child protection policies and procedures
2. Prevention and Awareness

- With regards to prevention services, the Children’s Act in section 143, defines prevention programmes as those services provided to children with families to strengthen and build their capacity and self-reliance to address problems that may or are bound to occur in the family environment, which if not attended to, may lead to statutory intervention.

- Religious organisations have a major role to play in rendering prevention programmes aimed at preventing the neglect, exploitation, abuse, or inadequate supervision of children. This would assist in preventing the recurrence of problems in the family environment that may cause harm to children or affect their development negatively.

- The following are some of the prevention programmes that religious organisations may offer:
  - Produce literature, posters, flyers and offer advice on available resources
  - Equip both the disadvantaged and advantaged communities with skills, information, and resources to fight child abuse (empowerment)
  - Train persons who are in contact with children who reside in rural and urban communities
  - Co-ordinate and network with local, regional provincial and national teams and resource centres aiming at prevention of violence, child abuse, neglect, and exploitation
  - Have visual displays of Child Protection Resources accessible to the community.

3. Developing and Implementing Internal Child Protection Policies and Procedures

- To further protect children and create safe spaces for children, religious organisations must develop and implement the necessary by having all legal child safeguarding policies and procedures.

**Exercise: Group discussion**

Introduce an Exercise\(^{28}\)

- Divide the group into 2 groups. Give one group a question: *what stops children from reporting abuse?* Ask participants to think about situations they have encountered in religious environments without mentioning names.
- Give the second group a question: *what stops adults within religious organisations from reporting child abuse?* As with the first group, ask participants to think about situations they have encountered in religious environments without mentioning names
  - Participants can write their points on the flipchart paper or use post it sticky notes and paste them on a flipchart paper
  - Bring the whole group back together. Take feedback from the first group. Ask members of the second group to add to the points presented by the first group
- Ask second group to give their feedback on what stops adults from reporting abuse. First group must also add their points to the second group.

\(^{28}\) Adapted from “Training for Child Protection Toolkit developed by the Keeping Children Safe Coalition, UK (2011)
• Emphasize on how difficult it can be for a disabled child to speak about abuse, and to be believed. In a big group brainstorm ways religious leader can assist children with disabilities to report and list responses on a flipchart paper.

• By a show of hands ask participants to indicate if their organisations have a child protection policy.

• Use the checklist on Handout 9 to get an overall idea of where most participating organisations are with regards to this policy. Read out statements from the Handout and note the responses on it.

• Explain that: Many organisations are doing their best and are committed to improving the lives of children by promoting children’s rights and a child safe environment (always start by reflecting on positives)

• Organisations have some informal and unwritten procedures for how concerns about child abuse are managed.

• However, if you don’t have clear written policies and procedures on child protection it is hard to respond appropriately and consistently when concerns are raised.

• All staff need clear guidance on what to do and who to tell when they have a concern about a child.

• Managers in all organisations need to recognise their responsibility to support the development of written policies and procedures to keep children safe.

• It is mandatory for a religious organisation to have in place an internal child protection policy to help create safe spaces for children within and outside the organisation. The religious organisation should ideally be a registered entity that has its own constitution. The constitution should cater for child protection and advocacy.

• The religious organisation’s internal Child Protection Policy must make provision for the following:
  o All leaders, staff members and volunteers who work in the space of a child must be vetted against the Child Protection Register (Form 30), this procedure should be followed when recruiting. Refer to the detailed discussion on this in Session
  o All Facilities at the organisation must be child safe and child friendly.
  o Specific individuals should be appointed to implement internal child protection policies and be responsible for updating such policies.
  o All activities including excursions must provide child protection mechanisms.
  o Leaders are encouraged to promote child protection awareness campaigns even in their weekly interaction.
  o The responsibility is on the religious leader that all personal information of a child is always protected including personal details, photographs and any other information pertaining to the child. Any photographs used in the marketing of an organisation or to solicit funding can be deemed as exploitation of a child.
  o Advertising of the organisation’s events using images of a child without the written consent of the parent or guardian is illegal.
4. Guidelines for Developing a Child Protection Policy

Present the following key points:

- **Personnel Recruitment**
  o All employees, contractors, trustees, officers, interns, and volunteers, whether paid or unpaid, full time or part time, temporary or long-term, having direct or indirect contact with children should undergo a thorough and standardized recruitment process.

- **Education and Training**
  o There should be opportunities within the organisation to develop and maintain the necessary skills and understanding to safeguard children. This is to ensure that all personnel and children themselves understand the importance of child protection.
  o This enables all personnel to know how to implement policies and procedures and work to the same high standards and that children know best how to protect themselves and make use of the policies and procedures in place.

- **Management Structure**
  o A management process should be adopted to facilitate the implementation of the child protection policy and procedures.
  o Without effective management support, staff working on child protection may feel isolated and be unaware of where responsibilities lie, and policies and procedures may fall through the gaps / not be taken seriously / not be acted on / not be fully implemented / not run smoothly.

- **Behaviour Protocols**
  o Organisations should have written guidelines for all employees, contractors, trustees, interns, volunteers, and visitors, detailing appropriate behaviour with children.
  o Child participation in the development of the Policy is critical. Organisation might want to consider developing behaviour guidelines with children for appropriate behaviour by children towards children.
  o These protocols help to clarify what constitutes appropriate and inappropriate behaviour towards children and to ensure that all personnel understand and abide by behaviours which create a ‘child safe environment’ that respects children’s physical and mental integrity / space / privacy
  o Behaviour guidelines also allow children to know what behaviour to expect from personnel and from each other, to know the difference between ‘good touch’ and ‘bad touch’ and when to speak out if they feel uncomfortable
  o This helps to avoid potential misunderstandings which may lead to false allegations of child abuse.

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29 UNICEF: Developing Child Protection Policy and Procedures
https://www.unicef.org/tdahd/cpmanual5stage3.pdf
• **Communication Guidelines**
  o There should be a set of guidelines to control confidential information regarding children and to prevent the presentation of degrading images of children through the organisation’s publications and website.
  o These guidelines assist to clarify what constitutes appropriate and inappropriate use of written, visual, and verbal information relating to children and to ensure that all personnel understand the importance of protecting and respecting children’s dignity and privacy and which safeguards them from being identified by those who may wish to harm them.
  o Communication guidelines also allow children to know what rights they have regarding the use of information that relates to them, to introduce them to the concept of ‘informed consent’ regarding such information and when to speak out if they feel uncomfortable.

• **Reporting and Reaction Protocols**
  o There should be a process for reporting and reacting to witnessed, suspected or alleged child abuse and/or violation of the child protection policy, which is made available to, and understood by, all employees, contractors, trustees, interns, volunteers and children themselves.
  o In the case of an incident, reporting and reaction protocols ensure that immediate and appropriate action is taken in the best interests of the child. They allow a child to be treated with dignity and be protected from harm.
  o It is important for all personnel and children are clear about what they should do to report and react to an incident.
  o There should be a standard, transparent procedure that ensures that staff do not panic and act inappropriately, that they feel supported by senior staff and they are aware of confidentiality guidelines.

• **Ramifications of Misconduct**
  o The policy must articulate steps taken because of any investigation of an allegation of a violation of the policies, guidelines, principles or practice of child protection.
  o Clearly articulated consequences signal that the organisation takes child protection seriously.
  o They also help to deter personnel from violating child protection policies and procedures, to ensure that those who do violate child protection are held accountable for their actions, with possibilities for further training (in the case of minor violations) or dismissal and potentially legal action.

• For an example of a Child Protection Policy refer to [Handout 10](#).
5. Steps to Follow When Developing a Child Protection Policy

- Need identification: A child protection policy is critical for any organisation that work with children. Assess the organisations activities and services, as well as those of your close partners and your external environment. Check if there is anything that concerns you about the way children are treated and note this for inclusion in your policy. This should be an internal exercise aimed at building consensus that there is a need for the policy.

- Delegate an individual or working group to take lead responsibility in developing the policy. This individual or group should be given a clear timeline to produce the policy.

- Gather information and ensure that you understand any legal responsibilities in the area of child safeguarding. Collect templates to draw knowledge from.

- Develop a draft policy and prepare for consultations on it.

- Consult with appropriate stakeholders. Map out your key stakeholders (e.g. staff, volunteers, children, beneficiaries of your services, parents, etc.). There are different methods that can be used for consultations – meetings, focus group discussions, invite written comments, open stakeholder meetings). Record all the views and make sure they are considered when finalising the draft.

- Finalize the policy and use appropriate organisational structures (e.g. Executive Committee, Board of Management) to approve the policy.

- Implement the policy. This begins with publicizing the policy to all relevant stakeholders. Provide training to staff and volunteers on implementation.

- Monitor and review the policy. Set indicators and measures to gauge whether the policy is in use and effective in addressing what it was aimed at. Conduct periodic reviews of the policy and if there are any legislative, policy and practical changes that affect the policy, conduct the necessary updates. Another internal protocol that religious organisations should develop alongside the Child Protection Policy is the Code of Conduct.

- For an example of a Code of Conduct refer to Handout 11.

- Ask participants to go back to their organisations and use the example of the Code of Conduct to develop theirs.

- Remind participants that all staff members and volunteers in an organisation must sign the Code of Conduct and that it should be filed confidentially.
6. Avoiding Behaviors that May Lead to Allegations

Tell participants that there are actions that should be avoided as means of protecting both the child and religious workers. In as it is possible, it is best practice to:

- Engage with the child in the presence of another person even when transporting the child.
- When it is necessary to speak privately with a child, make use of spaces that are out of earshot, but within sight of others for your conference.
- Respect the child’s privacy, toileting, showering, and changing clothes. When it is necessary to supervise children in these situations, at least two adults should be present and intrude only to the extent that the health and safety of the children are required. Adult volunteers should preserve their own privacy in these situations also.
- Never touch a child in areas that are normally covered by clothes, these include breasts, buttocks, and groin. When hugging is appropriate, hug from the side over the shoulders, not from the front.
- In the event of overnight activities, the protection and wellbeing of a child should be a high priority in the planning of the activity.
- Never use corporal punishment in any form with a child, you may be charged criminally.

7. Handling Disclosures and Allegations of Abuse from a Child

- Handle disclosures and allegations from a child with sensitivity and professionalism. When a child tells you about something that worries them or makes them uncomfortable make sure that your behaviour is appropriate. Dealing with disclosures is very sensitive and can either support or break the child even more.
- Ask participants to raise their hands if they have handled abuse disclosure by a child. Note the hands and they ask how should adults who hear disclosure should react and handle themselves. Note responses on a flipchart. Below are the additional points you can add:

<table>
<thead>
<tr>
<th>Accept what the child says</th>
<th>Never push for information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stay calm</td>
<td>Be aware that the child may have been threatened</td>
</tr>
<tr>
<td>Don’t panic</td>
<td>Make certain you distinguish between what the child has said and the inference you may have made</td>
</tr>
<tr>
<td>Be honest</td>
<td>Let the child know what you are going to do next and that you will let them know what happens</td>
</tr>
<tr>
<td>Do not appear shocked</td>
<td>Ensure the child’s safety</td>
</tr>
<tr>
<td>Let the child know that you need to tell someone else</td>
<td></td>
</tr>
<tr>
<td>Assure the child that they are not to blame for the abuse</td>
<td></td>
</tr>
<tr>
<td>Do not fill in words, finish the child’s sentences, or make assumptions</td>
<td></td>
</tr>
</tbody>
</table>

30UNICEF: Developing a child protection policy and procedures
Below is a checklist of things to say and not to say\textsuperscript{31}:

<table>
<thead>
<tr>
<th>Things to say</th>
<th>Things not to say</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I believe you”</td>
<td>“you should have told someone before”</td>
</tr>
<tr>
<td>▪ “I am going to try to help you”</td>
<td>▪ “I can’t believe it! I’m shocked!”</td>
</tr>
<tr>
<td>▪ “I will help you”</td>
<td>▪ “Oh, that explains a lot”</td>
</tr>
<tr>
<td>▪ “I am glad that you told me”</td>
<td>▪ “no, not so and so; he’s a friend of mine”</td>
</tr>
<tr>
<td>▪ “You are not to blame”</td>
<td>▪ “I won’t tell anyone else”</td>
</tr>
</tbody>
</table>

- Take participants through what they must do at the end of the disclosure.
  - Reassure the child that it was right to tell you.
  - Let the child know what you are going to do next.
  - Immediately seek help.
  - Write down accurately what the child has told you. Sign and date, your notes. Keep all notes in a secure place for an indefinite period. These are essential in helping your organisation and the authorities decide what is best for the child and can serve as evidence if necessary.
  - Seek help for yourself if you feel you need support.
  - Ensure the child’s immediate safety. Learn how to develop a child safety plan and collaborate with your nearest child protection organisations to learn more about this and refer the child as soon as possible for medical treatment or to a social worker or psychologist.
  - Document all facts well and keep records confidentially. These will come in handy when you have to do a referral, or if you have to complete Form 22 to report child abuse and neglect.
  - If the matter is referred for investigation and you hear that charges have been dropped, get reasons for withdrawal of charges, and communicate these to the person who reported the matter.

K. SESSION 10: RESPONDING TO CHILD ABUSE - DEVELOPING REFERRAL PATHWAYS FOR RELIGIOUS ORGANISATIONS

1. Session Aims and Learning Outcomes

Aim:

- To outline the various supports and networks Religious leaders can refer to address child protection concerns

Learning Outcomes:
At the end of this session participants will be able to:

- Understand referral mechanisms to address child protection concerns
- To identify role players external to the organisation that can effectively respond to child protection concerns
- Understand the role of Religious leaders in statutory services to children, including understanding what they can and cannot do
- Develop an internal system for the organisation to respond the child protection matters

- Start this section by going through the aims and learning outcomes
- Mention that in Session 3 we identified different forms of abuse and child protection concerns
- In Session 4 we identified different categories of children who need special protections due to their vulnerability.
- We then discussed the role of religious organisations and religious leaders in responding to child protection concerns.
- We also looked at internal mechanisms that religious organisations should have to respond to and address child protection concerns, such as the Child Protection Policy and other human resource processes mandated by the Children’s Act when employing people to work with children.
- We are now going to talk about steps to be followed when referring children for external support.

2. The Referral Process

- It is important for religious organisations to have clear Referral Forms (see example on Handout 12)
- It is also important for the Faith-based Child Protection Movement and its partners to develop a referral pathway to serve as a guide to religious leaders to follow when referring children externally for child protection services. This referral pathway provides a compass for a religious leader to navigate his/her way to the process of the various interventions in child protection
3. Referral Pathways and Service Directories at Local Level

- The referral pathway illustrates the journey of the child in the child protection system and shows how the religious leader can play a role in this system.
- We are now going to go through an exercise for the development of a referral pathway at a local level.

Exercise: Group activity

- Distribute the scenarios handout (Handout 13)
- Explain that the aim of this activity is to help participants understand their local referral pathways
- Divide participants in smaller groups of 4 or 5
- Ask them to read each scenario and indicate what they would do for each scenario.

Then ask participants to:

- Identify and notice concerns about a child or family
- make decisions to take action and describe the action they will take
- If they decide to refer or report the case, identify who to report to and why
- Based on the discussion, the groups must define the referral pathways to seeking help for cases referred in the scenario. They must think about their communities.
- They must discuss how easy or difficult it is to refer formally or informally to stakeholders and service providers in their localities
- Where referrals are challenging, identify what are the challenges and develop a plan of addressing these challenges.
- Take feedback, allowing groups to add their opinions after each group feedback
- At the end of the session, emphasize the importance of building relationships with referral networks and to have clear referral pathways.
- After the session share Handout 14 on Government and non-governmental organisations’ child protection services.
- Ask participants to develop their own directory of services for child protection when they return to their organisations (if they do not have these). Handout 15 will help them to localise their directories. Advise them to also liaise with other local providers and learn about other available local service providers
- The Directory must be displayed at a visible spot within the organisation.
4. Illustration of the Referral Pathway for Child Protection

- Explain to participants that the referral pathway can start at different points.
- This is because children live in different circumstances and that the first responders also differ.
- Sometimes the religious leader who is the first to receive the report of abuse, may, due to circumstances of the child, refer the matter first to the police, who then refer the matter further to the social worker or another child protection role player.
- This could be due to the severity of the matter or when the religious leader suspects that the child may be at greater harm if the police do not intervene.
- Display the referral pathway diagram below on a projector and have a brainstorming session with the group, noting key points from the discussion on a flip chart.

Photo by Charlein Geacia on Unsplash
Diagram 2: Referral Pathway

A 12 year old girl is sexually abused. She is from a child headed household

Religious leaders/dedicated focal person supports CHH and continues to support the child as part of the response team

Religious Organisation
- Where there is no dedicated child protection focal person the religious leader is the first responder
- Where there is a dedicated person he/she is the first

Religious leaders/Focal person conducts initial assessment ensures child is safe from harm and takes all necessary details

Religious Leader/Focal Person refers the child to any provider below

Police / social worker
Thuthuzela Care Centre

Health for medical support to the child

Childline for Psychosocial support services to the child
5. Understanding How the Religious Leader Works with other child protection Service Providers

- Inform participants that throughout the training, the role of religious leaders in addressing child protection includes working from the level of prevention.
- The role of the religious leader/representative in the statutory process is to ensure that the best interest of the child is served by following due reporting mechanisms, and to offer continued spiritual support to the child and/ the concerned family during the process.
- This role is contained within the Children’s Act and failure to report cases of violation of children’s rights can lead to imprisonment of the religious leader for a minimum of three months. Remind participants that reporting child abuse was covered in Session 1.
- Upon disclosure or suspicion of child abuse, the religious leader may follow the following steps:

<table>
<thead>
<tr>
<th>Steps</th>
<th>Basic &amp; process requirements by religious leaders</th>
</tr>
</thead>
</table>
| 1: The first contact individual must outline the identifying details of the child: Full names, address, contact information, names of parent/guardian as well as reasons for concern, observe any signs and symptoms that are observable. The religious leader should not carry out any physical examination on the child in any way as this can temper with the evidence that is crucial to the police investigation. Keep a record of visible signs of abuse and any relevant statements made by the child in the reporting document | • Record in full  
• Support the child  
• Listen to the child  
• Report as soon as possible  
• Observe and practice confidentiality  
• Ensure that the child is not exposed to secondary trauma by relating what happened to him or her to different people. The person who talks to the child and obtains details of the incident should be the appropriately appointed person for this task |
| 2: In cases where a religious organisation has designated personnel, engage the individual as soon as possible. Please note that the religious organisation may not carry out an investigation. In case of a disclosure having to be communicated to the designated personnel, you are advised to inform the child that you need to talk to someone else to assist, this is to not erode the trust of the child, ensure safekeeping of the report. | • Relevant personnel must lead the process  
• Keeping internal records in a secure filing system |
3: The designated personnel should contact a Social Worker from a child protection organisation such as a Child Welfare Society or the Department of Social Development, or the childcare hotline. South African Police Services -Family Violence, Child Protection and Sexual Offences Investigations (FCS) Unit handles child abuse, exploitation, and neglect cases within the South African Police Services.

Requirements for networking:
- Understanding that you can reach out to a multidisciplinary child protection team
- Follow-up until the child is assisted

4: The social worker (and the police in some cases) will interview the child as soon as possible.

- Not interfering with the legal process
- Follow up until the child is assisted
- As a first responder to the matter, the social worker or police might reach out to you to obtain further information as they investigate the matter

5: A social worker and/or the Police may interview the alleged abuser and sometimes family members as well. A decision concerning the child’s safety will be made by the relevant social worker at this time. Should the child be moved you may negotiate your involvement in rendering support services to the child and the family with the designated social worker and SAPS personnel

- Maintain confidentiality
- Provision of support to the victim and their family

6: If the matter goes to court, the religious leader/designated personnel may be called to court to testify. The court will issue a subpoena in the form of J901 (Refer to Handout 16)

- A subpoena is a court demand that the person must come to court to give oral evidence and a person who is subpoenaed is legally obliged to comply. Failure to comply is regarded as contempt of court
- It might take a couple of years to be subpoenaed due to the slow pace of legal proceedings in sexual offences cases. It is important to keep clear records of the incident and keep them safe for later use
Continuation of 6: If the matter goes to court, the religious leader/designated personnel may be called to court to testify. The court will issue a subpoena in the form of J901 (Refer to Handout 16)

- Prepare yourself emotionally and with facts too
- Seek assistance from either the social worker or the police to tell you more about what goes on in court and what you should expect when giving evidence
- At this stage, do not contact the child to very any of the evidence or to obtain any information as that will be tampering with the legal process

7: At the end of the initial investigation the religious personnel, the family or the parents may request to meet with the social worker to outline the steps the religious organisation may take to assist the child. Should response be slow, especially if the child remains at risk, the religious leader should continuously follow up until the child is safe

Discuss and clarify with response personnel the support you are able to offer to the family and the victim

8: Support for healing and reintegration

- The reintegration of the child back into the community post any abuse is a process that can be supervised and supported by the religious leader/s
- Multi-disciplinary team approach to be adopted

- In summary, the religious leader has an important role to play in the provision of support services aimed at healing and reintegration of a child survivor of abuse. Share the following points:
  - Counselling and rehabilitation should be a joint effort of psychological professionals and the religious leader.
  - Creating community support structures for the child should be an initiative driven by religious leader so that the child can access physical, mental, emotional, and spiritual support
  - Preparing family members for reintegration is a task that religious leaders can perform with ease as it demands spiritual guidance and intervention.
  - It is the role of the religious leader to provide a moral, ethical, and spiritual foundation of a child in the family structure
o Religious leaders often have a significant amount of influence over a child and this creates an ideal opportunity to mentor and role model a child
o Healing programmes and support groups can be provided for restoration of a child victim
o Religious leaders have provided counselling and spiritual support and upliftment to survivors of abuse
o The implementation of safe spaces for children can be initiated by Religious leaders
o Religious leaders can provide a referral system that would give a child/victim access to a comprehensive list of services, including Thuthuzela Care Centres, social workers, doctors, and other mental health professionals

○ In addition, many religious organisations have their own counsellor or mental health nurse on site and young people can often benefit hugely from having this kind of support in religious organisations
○ Counsellors and therapists are available privately—it can seem quite overwhelming trying to find someone you think is suitable, so check on bona fide directories and look for recommendations.

6. The CARE Network

- The last section for this session is the CARE Network.
- Display the CARE Network Diagram on the projector.
- Inform participants that the CARE Network shows how the religious organisation interphases with a range of role-players at local level.
- Explain that the diagram gives guidance on the basic structure of the network model.
- It also provides guidance on the cross pollination of all the child protection role players. The model also provides a collaborative and holistic approach to create safe spaces for children. The sustainability of such a model is only achieved when all the stakeholders understand and operate within their mandates and boundaries.
- The aim of this network is to ensure that violence, child abuse, neglect and exploitation is minimized as much as possible. When stakeholders can capacitate and support each other, their individual interventions are more effective and impactful.
- Whilst each stakeholder has a critical role to play in the life of a child, no role player can work in isolation. Religious leaders often provide valuable spiritual and psychological support to a victim; however, this forms only a part of the required intervention and not the whole.
- This Care Network also creates the roadmap for the collaborations of the Faith Based Child Protection Movement and other role players in the protection of children.
- Distribute Handout 17 and take participants through it
- Keep checking that participants understand and then introduce the next session
The role of the religious leaders within this network

The religious leader is encouraged to:

1. To introduce themselves to the other stakeholders (meet and greet). A portfolio of the services that FBO provides can be introduced.
2. Ideally be a registered entity for the sake of accountability.
3. Form a link between child protection organisations and the family and whilst focusing on their primary mandate which is to spiritually support and mentor families.
4. To be a mediator in certain circumstances as described in the case study below.
5. Familiarize themselves with the statutory services that are offered in that community and should be able to access those services on a partnership basis.
6. To offer resources by offering their places of worship for community awareness events. Can even extend this to support group meetings.
7. To engage with other religious leaders and form an interfaith cohesive platform for social ills to be addressed.
8. Can encourage the spirit of UBUNTU thus cementing the ‘IT TAKES A VILLAGE TO RAISE A CHILD’ modality.

This CARE network also creates a protective shield from potential perpetrators and also offers an accountability structure for parents, legal guardians, caregivers, FBOs, CBOs and government agencies.

1. To ensure that the modality of Ubuntu does not create a place of vulnerability for a child
2. To support government and non-government agencies in the advocacy of Child Protection on broader platforms.
3. By means of collaboration in this network, the religious leader will be able to provide a child with holistic services and programmes
4. Develop a roadmap for monitoring, evaluation and voluntary accountability.
1. Session Aim and Learning Outcomes

**Aim:**
- To assess if the training objective and learning outcomes have been met

**Learning Outcomes:**
At the end of the session, participants will be able to:
- Assess if their expectations for the training were met
- Identify areas where new learning has taken place
- Identify the strength of the training
- Identify weaknesses of the training
- Make recommendations for improvement of training
- Identify actions and activities they will undertake after the training to implement what they have learned

- Display the objectives for the training that were displayed at the beginning of Session 1. Go through each of the points, checking if participants feel each of these objectives were achieved.
- Clarify and respond if there are queries and gaps that participants feel were not met
- Then go through the list of expectations and fears listed during Session 1, and check if they have been met.
- Check the “parking lot” paper and see if some of the issues listed there have been addressed. Provide an explanation if some have not been met (e.g. the issues may not have been part of this training, or more information will be shared with participants in later stages.
- Do a round of checking in, asking how participants are feeling at the end of a grueling three day training. Ask each participant to indicate new things they have learned and what they will be taking back to their organisations.

2. Developing a Plan of Action

- Inform participants that they are now going to do a brief exercise of developing a Plan of Action for their respective organisations. Inform them that this Plan of Action will be based on key aspects covered in this training.
- If there are more than one participant from the same organisation, they will work together to develop this Plan. If there is one participant from an organisation, they will work individually.
• Distribute **Handout 18** and give this exercise 20 – 30 minutes. Explain that participants may add more relevant items for action in their Plan.

• After the participants have finished the exercise, suggest that they take the draft Plan of Action they have developed back to their respective organisations. Suggest that the organisation take time to develop the Plan of Action further and adopt it. Once adopted a copy of the Plan should be sent back to the FBCPM for support and monitoring. These are just suggestions.

• Do a formal evaluation of the training and distribute **Handout 19** to participants. This evaluation should take approximately 15 minutes.

• Once all participants have handed over their evaluation forms, thank everybody and formally close the training.


“**There is no community where everyone is rich; neither is there a community where everyone is poor.**”

-Jerusalem Talmud, Gitten 3:7
CONCLUSION

• The religious community has a crucial role to play in ending violence against children, which is regarded as an unacceptable reality for most of the world’s legal, philosophical, and spiritual persuasions. While governments have the primary responsibility in implementing the recommendations of the Convention on the Rights of the Child and the United Nations Secretary-General’s Study on Violence against Children, engagement and support of civil society and other actors at international, regional, and national levels is crucial.

• A socially cohesive society is the only way social transformation can take place. When the religious sector collaborates with the government agencies, with civil society, with other religious organisations, with community organisations and with non-government organisations, then a protective garment can be woven to ensure the well-being of a child. The religious sector has the capacity to morally transform our society through many interventions which they have been mandated to do within their area of influence.

• The vision of this training is to plug linkages between existing structures of child protection and the religious sector. The development of a road map will form a sustainable structure to eradicate violence against children. We can conclude that for us to effectively impact society we need to speak to each instead of speaking about each other and we need to speak to the problem instead of speaking about the problem.

“*The cause of making the world a better place for children unites us all.*”

- Liam Neeson – Actor and UNICEF Goodwill Ambassador
REFERENCES


   Guidelines and Protocol for Fostering a Safe School Environment for Children and Youth


6. Community Systems Strengthening Partnership: Training for Transition by the Learning Network
   (2016 – 2019). University of Cape Town


11. Migrant Domestic Workers Across the World: Global and Regional Estimates Based on the ILO


13. Oakley, L and Humphreys, J. (2020) Escaping the maze of spiritual abuse: Creating Healthy
    Christian Cultures

    Evidence from Ethiopia, India, Peru and Viet Nam, Innocenti Discussion Papers UNICEF Office of
    substance misuse and child protection: Overview, indicators, impacts, risk and protective factors


17. The National Protocols on VCANE February 2020. Department of Social Development

18. Training for Child Protection Toolkit developed by the Keeping Children Safe Coalition (2011). United Kingdom


24. UNICEF Data: Monitoring the situation of children and women (April 2020) Child Marriage


### Handout 1: Child Protection Scenarios and Legal Framework

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Law/Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>A child is raped</td>
<td>The Children’s Act No. 38 of 2005</td>
</tr>
<tr>
<td></td>
<td>Sexual Offences Act 32 of 2007</td>
</tr>
<tr>
<td>A child has been found at the door-step of a church early in the morning</td>
<td>The Children’s Act No 38 of 2005, as amended</td>
</tr>
<tr>
<td>A child is reported to the Religious Leader for not attending school due to lack of birth certificate. On top of this this child had a physical disability</td>
<td>The Constitution of the Republic of South Africa (1995)</td>
</tr>
<tr>
<td>The parent of a child has approached the RL with a problem. Her child came back home with severe bruises inflicted by a teacher because she came to school late and not having done his homework</td>
<td>South African Schools Act 84 of 1996 (articulates sanctions for the teacher e.g. suspension or expulsion)</td>
</tr>
<tr>
<td>A female member of the congregation has approached the RL asking for help. She is a mother of 3 young children and is seeking shelter following a series of abuse at home</td>
<td>Domestic violence Act 116 of 1998</td>
</tr>
</tbody>
</table>
Handout 2

FORM 22
REPORTING OF ABUSE OR DELIBERATE NEGLECT OF CHILD
(Regulation 33)
[SECTION 110 OF THE CHILDREN’S ACT 38 OF 2005]

REPORTING OF ABUSE TO PROVINCIAL DEPARTMENT OF SOCIAL DEVELOPMENT,
DESIGNATED CHILD PROTECTION ORGANISATION OR POLICE OFFICIAL

NOTE: A SEPARATE FORM MUST BE COMPLETED FOR EACH CHILD

TO: The Head of the Department

Pursuant to section 110 of the Children’s Act, 2005, and for purposes of section 114(1)(a) of the Act, you are hereby advised that a child has been abused in a manner causing physical injury/ sexually abused/ deliberately neglected or is in need of care and protection.

Source of report (do not identify person)

□ Victim □ Relative □ Parent □ Neighbour/friend

□ Professional (specify) ........................................................................................................................................

□ Other (specify) ...................................................................................................................................................

Date Reported to child protection organisation: DD MM CCYY
### 1. CHILD: (COMPLETE PER CHILD)

<table>
<thead>
<tr>
<th>Surname</th>
<th>Full name(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Gender:</th>
<th>M</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Birth:</th>
<th>DD</th>
<th>MM</th>
<th>CCYY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>School Name:</th>
<th>Grade:</th>
<th>Age / Estimated Age:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* ID no:  * Passport no:

Contact no:

### 2. CATEGORY OF CHILD IN NEED OF CARE AND PROTECTION

- [ ] Street child
- [ ] Child labour
- [ ] Child trafficking
- [ ] Commercial sexual exploitation
- [ ] Exploited children
- [ ] Child abduction

### 3. OTHER INTERVENTION – CONTACT PERSON TRUSTED BY CHILD

<table>
<thead>
<tr>
<th>Surname:</th>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>Telephone number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Other children interviewed:  [ ] Yes  [ ] No  Number:

(*) = Complete if available or applicable
### 4. ALLEGED ABUSER

<table>
<thead>
<tr>
<th>4.1) Surname</th>
<th>Full Name(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Birth:</th>
<th>DD</th>
<th>MM</th>
<th>CCYY</th>
<th>Gender:</th>
<th>M</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ID No:</th>
<th>Age:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Passport No: * Drivers license:

Also known as:

Relationship to child:
- □ Father
- □ Grand father
- □ Step father
- □ Foster father
- □ Uncle
- □ Sibling
- □ Professional: social worker/police officer/teacher/caregiver/priest/dr/volunteer
- □ Other (specify)

Street Address (include postal code):

Postal Code:

### 4.2) WHEREABOUTS OF ALLEGED PERPETRATOR:

- □ Section 153 (Request for removal by SAPS)
- □ Still in home
5. PARENTS OF CHILD (If other than above)

<table>
<thead>
<tr>
<th>Surname: Father / Step-father</th>
<th>Full name(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth:</td>
<td>DD</td>
</tr>
<tr>
<td>ID no:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Surname: Mother / Step-mother</th>
<th>Full name(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth:</td>
<td>DD</td>
</tr>
<tr>
<td>ID no:</td>
<td></td>
</tr>
</tbody>
</table>

Also known as: | Names and ages of siblings or other children if helpful for tracking

Street Address (include postal code): | Postal Code:

(*) = Complete if available or applicable
6. ABUSE

<table>
<thead>
<tr>
<th>Date of Incident:</th>
<th>Date unknown:</th>
<th>Episodic/ongoing from (date)</th>
<th>Reported to CPR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>DD MM CCYY</td>
<td>DD MM CCYY</td>
<td>DD MM CCYY</td>
<td>DD MM CCYY</td>
</tr>
</tbody>
</table>

Place of incident:
- [ ] Child’s home
- [ ] Field
- [ ] Tavern
- [ ] School
- [ ] Friend’s place
- [ ] Partial Care
- [ ] ECD Centre
- [ ] Neighbour
- [ ] Child and youth care centre
- [ ] Other (specify)
- [ ] Foster home
- [ ] Temporary safe care

6.1) TYPE OF ABUSE (Tick only the one that indicates the key motive of intent)

<table>
<thead>
<tr>
<th>Physical</th>
<th>Emotional</th>
<th>Sexual</th>
<th>Deliberate neglect</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6.2) INDICATORS (Check any that apply)

**PHYSICAL:**
- [ ] Abrasions
- [ ] Bruises
- [ ] Burns/Scalding
- [ ] Fractures
- [ ] Other physical illness
- [ ] Cuts
- [ ] Welts
- [ ] Repeated injuries
- [ ] Fatal injury (date of death)
- [ ] Injury to internal organs
- [ ] Head injuries
- [ ] No visible injuries (elaborate)
- [ ] Poisoning (specify)
- [ ] Other Behavioural or physical (specify)

**EMOTIONAL:**
- [ ] Withdrawal
- [ ] Depression
- [ ] Self destructive aggressive behaviour
- Corruption through exposure to illegal activities
- Deprivation of affection
- Exposure to anti-social activities
- Exposure to family violence
- Parent or care giver negative mental condition
- Inappropriate and continued criticism
- Humiliation
- Isolation
- Threats
- Development Delays
- Oppression
- Rejection
- Accusations
- Anxiety
- Lack of cognitive stimulation
- Mental, emotional or developmental condition requiring treatment (specify)

**SEXUAL:**
- Contact abuse
- Rape
- Sodomy
- Masturbation
- Oral sex area
- Molestation
- Non contact abuse (flashing, peeping)
- Irritation, pain, injury to genital
- Other indicators of sexual molestation or exploitation (specify)

**DELIBERATE NEGLECT:**
- Malnutrition
- Medical
- Physical
- Educational
- Refusal to assume parental responsibility
- Neglectful supervision
- Abandonment

6.3) Indicate overall degree of Risk to child:
- Mild
- Moderate
- Severe
- Unknown

6.4) When applicable, tick the secondary type of abuse Multiple Abuse: Yes No

<table>
<thead>
<tr>
<th>Sexual</th>
<th>Physical</th>
<th>Emotional</th>
<th>Deliberate Neglect</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Brief explanation of occurrence(s) (including a statement describing frequency and duration)

(*) = Complete if information is available or applicable
### 7. MEDICAL INTERVENTION (*)

<table>
<thead>
<tr>
<th>Treated outside hospital:</th>
<th>Examined by:</th>
<th>Hospitalised:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Yes</td>
<td>□ Doctor</td>
<td>□ For assessment</td>
</tr>
<tr>
<td>□ No</td>
<td>□ Reg. Nurse</td>
<td>□ For treatment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ As place of safety</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Where (name of Hospital)</th>
<th>Contact person</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 8. CHILDREN’S COURT INTERVENTION (*)

<table>
<thead>
<tr>
<th>Removal of child to temporary safe care (Section 152):</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Yes</td>
<td>MM</td>
</tr>
<tr>
<td>□ No</td>
<td>DD</td>
</tr>
<tr>
<td></td>
<td>CCYY</td>
</tr>
</tbody>
</table>

### 9. SAPS: (ACTION RELATED TO ALLEGED ABUSER(S)) (*)

<table>
<thead>
<tr>
<th>Reported to SAPS:</th>
<th>Charges laid:</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Yes</td>
<td>□ Yes</td>
<td>DD</td>
</tr>
<tr>
<td>□ No</td>
<td>□ No</td>
<td>MM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CCYY</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CASE NR</th>
<th>Police Station</th>
<th>Telephone Nr</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Police Officer</th>
<th>Rank of Police Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
10. CHILD KNOWN TO WELFARE ORGANISATION/ SOCIAL DEVELOPMENT?

10.1) Child known to welfare?: □ Yes □ No

<table>
<thead>
<tr>
<th>Name of Organisation</th>
<th>Contact number</th>
<th>Reference number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

11. DETAILS OF PERSON WHO REPORTS ALLEGED ABUSE (Refers to a profession, mandatory obliged to report child abuse)

<table>
<thead>
<tr>
<th>Name of informant</th>
<th>Employer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employer Address</th>
<th>Work Telephone Nr</th>
<th>Fax Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Email Address

(*) = Complete if information is available or applicable
Handout 3

FORM 29

INQUIRY BY EMPLOYER TO ESTABLISH WHETHER PERSON'S NAME APPEARS IN PART B OF NATIONAL CHILD PROTECTION REGISTER

(Regulation 44)

[SECTION 126 OF THE CHILDREN'S ACT 38 OF 2005]

TO: The Director-General
Department of Social Development
Private Bag X901
PRETORIA
0001

Dear Sir / Madam

In terms of section 126 of the Children's Act, 38 of 2005, I ……………………………………………………………………………………………
(full names and surname) wish to inquire whether the name of a person in my employ or that I wish to employ appears in Part B of the National Child Protection Register. A certified copy of one of the following documents is attached as verification of my identity (mark with an "x"): □ birth certificate (only if not in possession of identity document or passport) □ identity document □ passport

In the event that his/her name is included in Part B of the Register, kindly furnish reason why this was done.

Please note that section 126 of the Act requires you to respond to this inquiry within 21 working days.

Name of business:

Physical address of business:

Postal address of business:

Telephone numbers of business:

Position held or to be held by person:

Personal details of person employed or to be employed.

Full names:

Surname:

Physical address:

Postal address:

Telephone number:

Alias or nickname:

ID number:

Passport number:

Yours sincerely
(Signature)
Date}
Handout 4

FORM 30

INQUIRY BY PERSON TO ESTABLISH IF HIS / HER NAME IS INCLUDED IN PART B OF NATIONAL CHILD PROTECTION REGISTER (REGULATION 50(1)(b)) [SECTION 126(3) OF THE CHILDREN’S ACT, (No 38 OF 2005)]

TO:
The Director-General
Department of Social Development
Child Protection Register
Private Bag X901
Pretoria
0001

Dear Sir / Madam

In terms of section 126(3) of the Children’s Act, (No. 38 of 2005), I _______________________________(full names and surname) wish to enquire whether my name is included in Part B of the National Child Protection Register. A certified copy of one of the following documents is attached as verification of my identity.

1. IDENTIFYING DOCUMENTS:

☐ birth certificate (only if not in possession of identity document or passport)
☐ identity document
☐ passport
☐ other

In the event that my name has been included in Part B of the Register, kindly furnish reason why this was done. My personal details are:

2. CONTACT DETAILS:

<table>
<thead>
<tr>
<th>Postal address:</th>
<th>Physical address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Email:

<table>
<thead>
<tr>
<th>Telephone No:</th>
<th>* Cellular No:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(* - if applicable)

Please note that section 126 of the Act requires you to respond to this inquiry within 21 working days.

Yours sincerely

________________________________________
(Signature)

________________________________________
(Date)

Kindly note that in the event that information becomes available that you are unsuitable to work with children, the Director-General reserves the right to enter your name on Part B of the Register, of which you will be duly notified. In terms of section 121 of the Children’s Act, you have the right to appeal against such finding, or have the finding reviewed by a Court of Law.
Handout 5: Case Study

A grandmother seeks help from a female Religious Leader (Pastor) about her seven-year-old granddaughter who is not attending school. The grandmother and her granddaughter are members of the church. The Pastor then informs the Sunday school teacher and during a Sunday school class the teacher does a lesson on the importance of attending school and the games kids play at school. The granddaughter had very little to contribute to the lesson and when asked why, she said that she does not go to school because her dad does not want her to. The Sunday school teacher then informs the Pastor. The Pastor then decided to visit the home to meet the dad. Upon visiting the home, the dad said that his ex-wife abandoned the home, leaving behind the seven-year-old. Upon further discussion the dad confessed that he has a substance abuse problem. He also mentions in passing that he is extremely close to his daughter and that they sleep on the same bed. He said he does this so that the child knows that he loves her, unlike the mother who abandoned her. The grandmother then told the Pastor that her son takes the child “somewhere” every morning and only returns with her in the afternoon. The Pastor, having knowledge of human trafficking and substance abuse, decided to investigate further. She also said that once a week the dad takes his daughter to the salon and allows her to use makeup every day. The grandmother further revealed that the father also gives her daughter a bath daily. It was established that the dad takes the child to the local shopping centre every day to sell small items to the public. He allows her to use makeup because “the people will be enticed to buy”

Discussion questions:
- What forms of child protection violations are at play in this scenario?
- Is it ok for the father to sleep in the same bed as her daughter, and to give her a bath?
- As religious leaders, what steps will you take to support the grandmother and assist the child?
Handout 6

**FORM 3**

**CONSENT TO RELIGIOUS CIRCUMCISION**

(Regulation 6)

[SECTION 12(8) OF THE CHILDREN’S ACT 38 OF 2005]

**PART A: PARTICULARS OF CHILD**

<table>
<thead>
<tr>
<th>Full name of child</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of birth/ID number</td>
<td></td>
</tr>
<tr>
<td>Residential address of child</td>
<td></td>
</tr>
<tr>
<td>Postal address</td>
<td></td>
</tr>
<tr>
<td>Telephone contact details</td>
<td>Phone:</td>
</tr>
<tr>
<td></td>
<td>Fax:</td>
</tr>
<tr>
<td></td>
<td>E-mail:</td>
</tr>
<tr>
<td>Cell phone number</td>
<td></td>
</tr>
<tr>
<td>Age of child</td>
<td></td>
</tr>
</tbody>
</table>

**PART B: MEDICAL PRACTITIONER OR PERSON ADMINISTERING CIRCUMCISION**

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ID number</td>
<td></td>
</tr>
<tr>
<td>Address of practice</td>
<td></td>
</tr>
<tr>
<td>HPCSA registration number (in the case of a medical practitioner)</td>
<td></td>
</tr>
<tr>
<td>Contact details</td>
<td>Phone:</td>
</tr>
<tr>
<td></td>
<td>Fax:</td>
</tr>
<tr>
<td></td>
<td>E-mail:</td>
</tr>
<tr>
<td>Date of circumcision</td>
<td></td>
</tr>
</tbody>
</table>
I have explained to the person consenting the following:
- The nature of a circumcision
- Any risks associated with a circumcision
- Any complications associated with a circumcision
- Any other implications or possible consequences of a circumcision

- Other information (if any):

...............................................................................................................................
...............................................................................................................................
..........................................................................

I have given the person giving consent an opportunity to ask questions.
I confirm that appropriate anesthesia will be used

................................................................................

Signature of* medical practitioner/person
administering the circumcision

Date:

PART C: CONSENT BY PARENTS OR GUARDIAN WHERE CHILD IS UNDER THE AGE OF 16

We/I,

.................................................................................................................................

- understand that a religious circumcision is going to be performed.
- understand the nature and implications as well as any risks and possible consequences of a circumcision that have been explained to me/us.
- confirm that I/we have been given an opportunity to ask questions.
- consent to a religious circumcision but understand that I/we may at any time before the procedure withdraw my/our consent.

Parent/Guardian.................................................................
Date:..............................................................................................................

Signature of witness.................................................................
Date:..............................................................................................................
HANDOUT 7 – Cyberbullying images

NOTE- The images with the headings are there to demonstrate to the facilitator ONLY so they have a clear understanding of the type of cyberbullying each image represents. Thus the images handed over to participants should have the headings removed.

Dissing
Trickery
Cyberstalking

A Picture doesn’t make a profile real

Photo from resource.uknowkids.com

Photo from Shutterstock
Harassment
Handout 8 - Cyber predator codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFK</td>
<td>Away from keyboard</td>
</tr>
<tr>
<td>ASL</td>
<td>age/sex/location</td>
</tr>
<tr>
<td>BOL</td>
<td>Be on later</td>
</tr>
<tr>
<td>CTN</td>
<td>Can’t talk now</td>
</tr>
<tr>
<td>FWB</td>
<td>Friends with benefits</td>
</tr>
<tr>
<td>FYEO</td>
<td>For your eyes only</td>
</tr>
<tr>
<td>GYPO</td>
<td>Get your pants off</td>
</tr>
<tr>
<td>IWSN</td>
<td>I want sex now</td>
</tr>
<tr>
<td>IU2U</td>
<td>It’s up to you</td>
</tr>
<tr>
<td>KPC</td>
<td>Keeping parents clueless</td>
</tr>
<tr>
<td>LMIRL</td>
<td>Let’s meet in real life</td>
</tr>
<tr>
<td>MOS</td>
<td>Mom over shoulder</td>
</tr>
<tr>
<td>NIFOC</td>
<td>Nude in front of computer</td>
</tr>
<tr>
<td>PAW</td>
<td>Parents are watching</td>
</tr>
<tr>
<td>TDTM</td>
<td>Talk dirty to me</td>
</tr>
<tr>
<td>YOLO</td>
<td>You only live once</td>
</tr>
<tr>
<td>TMI</td>
<td>Too much information</td>
</tr>
<tr>
<td>NAGI</td>
<td>Not a good idea</td>
</tr>
<tr>
<td>P911</td>
<td>Parent alert</td>
</tr>
<tr>
<td>SANP</td>
<td>Send a nude picture</td>
</tr>
<tr>
<td>MMN</td>
<td>Meet me now</td>
</tr>
</tbody>
</table>
Handout 9: Child Protection Policy Checklist

<table>
<thead>
<tr>
<th>Protection aspect</th>
<th>Yes (note how many)</th>
<th>No (note how many)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The organisation has policies and procedures or agreed ways of recruiting representatives and for assessing their suitability to work with children, including where possible, police and reference checks.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The organisation has a written child protection policy or has some clear arrangements to make sure that children are kept safe from harm.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The policy or arrangements are approved and endorsed by the relevant management board/executive committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The policy or arrangements have been signed by everyone and are followed by everyone.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are clear child protection procedures in place that provide step-by-step guidance on what action to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Task</td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>take if there are concerns about a child’s safety or welfare.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is a dedicated child protection focal person/s with clearly</td>
<td>defined roles and responsibilities.</td>
<td></td>
</tr>
<tr>
<td>There are well-publicized ways in which staff and key partners can</td>
<td>raise concerns, confidentially if necessary, about unacceptable behaviour by other staff or other key partners of the organisation.</td>
<td></td>
</tr>
</tbody>
</table>
Handout 10: Samples of Child Protection Policy

SAMPLE 1 OF CHILD PROTECTION POLICY

UNICEF USA Child Safeguarding and Participation Policy, Guidelines and Best Practices

INTRODUCTION

It is the mission of the U.S. Fund for UNICEF d/b/a UNICEF USA (“UUSA”) and UNICEF, grounded in the United Nations Convention on the Rights of the Child, to promote the rights and wellbeing of every child, in everything we do at UUSA. UUSA is committed to actively safeguarding children from harm as a result of UUSA’s activities, its people and its associates. UUSA has a zero-tolerance policy with respect to child abuse or harm. This Policy and Guidelines must be taken into consideration when planning any activities, especially when they involve children directly or indirectly.

Everyone associated with UUSA has child safeguarding responsibilities, including volunteers and professionals who work with UUSA. Child safeguarding is the paramount consideration in all our work and operations, and the organisation places utmost importance on creating the most secure environment possible for children as we advocate for children and promote their rights locally, nationally and internationally through our work in the United States. Building guidelines around child safeguarding allows UUSA to enhance all of its work for the benefit of every child, including its work with children by providing a safe environment for children to be agents of change and actively participate in decisions that affect them and their future.
To this end, all UUSA constituents should:

- Read and acknowledge UUSA’s Child Safeguarding and Participation Policy, Guidelines and Best Practices (“Policy and Guidelines”)
- Familiarize themselves with situations that may present risks and learn how to deal with those situations
- Commit to child safeguarding best practices and model safe behaviors
- Contribute to an environment where everyone, including children, can recognise unacceptable behavior and feel able to discuss their rights and concerns

UUSA will always be aware, vigilant, and uncompromising when it comes to the wellbeing and safeguarding of children. The best interest of the child will always be the deciding factor in all situations. Any activities involving child participation should also require adherence to applicable child participation principles (including voluntary participation, safe and sensitive to risk, child-friendly, inclusive, respectful, relevant, informative, transparent environments, supported by trained adults who are accountable and follow best practices). The following are some examples of when this Policy and Guidelines should be considered in the context of UNICEF USA activities:

- When engaging in activities involving children (whether directly or indirectly)
- When planning or implementing UNICEF USA activities
- When facilitating staff/sponsor/donor/supporter visits to UNICEF programme countries
- When developing activities involving children including third party events and partner-led events
- When processing, storing and distributing information on children – such as family profiles and personal data in accordance with our data protection and privacy agreement
- When promoting our work through the use of images and quotes or stories of children
- While volunteering or staffing events

SCOPES
This Policy and Guidelines apply to all UUSA staff members and non-staff personnel (including temporary employees, interns, consultants and independent contractors), volunteers, donors, prospective donors (prospect), vendors and any others in the context of the work of UUSA through any national office, regional office or other method while supporting, working, or officially traveling for UUSA and prohibits any conduct that exposes children to harm, abuse, neglect, or exploitation in any form. Inappropriate behavior toward children (directly, or
indirectly, physically, or verbally, in person, digitally or otherwise) is grounds for discipline, up to and including dismissal from the assignment, employment, termination, termination of agreements and/or permanent removal. Vendors will be made aware of this Policy and Guidelines and vendor staff who interact with or engage with children in collaboration with UNICEF USA will agree to and acknowledge UNICEF USA’s child safeguarding Code of Conduct.

This Policy and Guidelines are also not comprehensive to every interaction with children that UUSA undertakes. For this reason, each team that is working directly or indirectly with children should have a documented standard operating procedure (SOPs) that outlines how they will implement the Policy and Guidelines through their operation. These SOPs should be reviewed and updated every 2 to 3 years by the Child Safeguarding Officers and added to the annex of this document.

DEFINITIONS

▪ “Constituent” – An entity who has relevance to UNICEF USA.
▪ “Chaperone” – a parent, caregiver, or designee who has received explicit written consent from parents/guardians of children to be responsible for a child for any event or activity or is the parent/legal guardian of the child.
▪ “Child” or “children” – an individual constituent under the age of 18.
▪ “Child abuse” includes all forms of physical abuse, emotional ill-treatment, sexual abuse and exploitation, neglect, or negligent treatment, commercial or other exploitation of a child, including any actions that result in actual or potential harm to a child. Child abuse may be a deliberate act, or it may be a failure to act to prevent harm.
▪ “Board member” – a volunteer member of the UNICEF USA National Board or a member of any of the nine UNICEF USA regional office boards.
▪ “Child safeguarding” – Proactive measures UNICEF USA puts in place to limit direct and indirect collateral risks of harm to children, arising from UNICEF USA work, its personnel, or associates.
▪ “Child protection” – Actions UNICEF USA takes when we have specific concerns that a particular child is at risk of significant harm or UNICEF’s Child Protection programmes supported by UNICEF USA that are aimed at promoting polices and expanding access to services that protect all children.
▪ “Non-staff personnel” – temporary employees, interns, consultants, independent contractors, vendors, and vendor staff, etc.
- “Staff member” – a member of staff or management of UNICEF USA, permanent or temporary.
- “Volunteer” – a supporter who offers their time, knowledge and/or abilities to UNICEF USA on a non-paid basis. This could include a national or regional Board member, celebrity ambassador, any other adult, or someone under the age of 18.
- “Vendor” – any entity or individual with which UNICEF USA has contracted for paid work.
- “Donor” – a known constituent who has contributed to UNICEF USA.
- “Prospect” or “prospective donor” – a constituent which UNICEF USA has identified as relevant but not yet demonstrated interest in UNICEF USA.

REPORTING
Mandatory reporting of child abuse. All involved in UUSA are personally responsible to immediately report any belief or good faith suspicion that any child is or has been subject to child abuse of any kind, in any circumstance, within or outside UNICEF USA activities. The person making such report must notify their supervisor, the UUSA Child Safeguarding Officer, UUSA Human Resources staff, or by submitting an incident through Ethics Point. UUSA is required to follow up on the incident.

unicefusa.org

Allegations involving UUSA or UNICEF personnel. All involved in UUSA (and everyone covered by this Policy and Guidelines) are required to report to the Chief People Officer any reasonable suspicion that UUSA or UNICEF personnel (including non-staff personnel as listed above) have violated this Policy and Guidelines or otherwise engaged in conduct that undermines the protection or safeguarding of children, including, but not limited to, violations of the best practices listed below. UUSA will investigate any allegations and determine the appropriate response regarding UUSA personnel and refer any allegations regarding UNICEF personnel to the appropriate UNICEF officials. Allegations of abuse about UNICEF Personnel also should be reported to the UNICEF Office of Internal Audit and Investigation at integrity1@unicef.org.
Business practices for child-friendly behavior while working, volunteering or officially traveling for UUSA

UNICEF USA has a zero-tolerance policy with respect to child abuse or harm and these guidelines will be taken into consideration when planning any activities involving children. Before attending UUSA sponsored events, all children participants must have permission slips and photo release forms/waivers signed by themselves (informing of their consent), and their parent(s) or guardian(s). If approval is given for travel but not a photo, the box on the approval form should be left blank and the child not included in any photos, images, or stories.

Children participating in UUSA events lasting longer than a day are also required to submit health forms that highlight allergies, medical conditions, etc., and release staff to seek medical treatment in the event of an emergency. As part of planning, transportation and insurance arrangements should be considered and recorded. For events that are shorter than a day, it is advised that chaperones have permission slips with emergency contact and health information with them for the duration of the event. Also, specific health conditions, medical needs and emergency contact information should be identified and recorded ahead of the event.

UUSA has developed the best business practices listed below. These are primarily for the safeguarding of children; however, they also serve to protect adults and the organisation. Any questions of clarification, concerns, or report of incidents should be directed to the Child Safeguarding Officer, Focal Point, supervisor, or Senior Management Team member as appropriate.

COMMUNICATIONS ABOUT AND WITH CHILDREN
Child safeguarding should be considered in planning of activities, risks assessed, and mitigation actions agreed. Some key risk mitigations may involve:

- Communication with children should always take place over monitored channels and all digital and tele-communications with children should include parents/caregivers at every stage of the project - ranging from outreach, to calls, emails, online or direct surveys (before/after the event).
- Adults should not be ‘alone with a child’ (physically or digitally) outside of monitored channels.
• Some communication with children may be verbal or written, and should be inclusive, avoiding discrimination and singling out individual children.
• No digital or electronic communication should happen between UNICEF USA Staff and children under the age of 13.
• Communications about children should use pictures, video and language that are respectful and protect the dignity and rights of children and comply with any UNICEF Division of Communication guidelines.
• UUSA publications, blogs, stories etc., should not include personal information, addresses, social media handles or contact information or any combination that would risk violating the privacy and/or safety of the child.
• Personal addresses or contact information such as addition to a mailing distribution list, should not be distributed unless proper authorization from all parties is given.
• Other than first name, age, and area of residence (but not specific address), children’s personal information should not be disclosed on our website or in other mass communications, including information that could be used to identify the location of children within their country or any combination that would risk violating the privacy and/or safety of the child.
• Photos of children or quotes, images and stories should include as many diverse backgrounds as possible.
  o The informed consent of a chaperone, parent/guardian or designee should always be obtained before recording information or obtaining images, and the intended use(s) of such materials explained: Informed verbal consent is always required except for example, where (a) images are made in the public sphere; (b) the subjects are not recognizable in the photo. Informed verbal consent occurs when any videographer or photographer or UNICEF contact person on the ground discusses the intention of the documentation project at hand with the subjects and children’s guardians, including where the materials will be released and the impact of potentially being recognized globally. Permission is then obtained verbally that the subject understands how UNICEF/UNICEF USA will be using the materials (to advocate for their rights and to generate public support for our work and their circumstances) and where they will potentially be placed, including print, global broadcasters, and digital media outlets. Additionally, when videotaping first person stories, it is good practice to obtain verbal consent on camera. The subject can briefly acknowledge that they understand these materials will be used and distributed.
Written informed consent is necessary only under some conditions clearly outlined below. Further written consent may be required depending on the laws of specific countries. For example, in the US, with images of children under 18, a parent or legal guardian must also sign the release, whereas in other countries the principal of a school is considered the guardian and can give written or verbal consent. Although not strictly required, it is also sometimes wise to secure subject releases from documentary subjects photographed in private settings. Especially if their stories are sensitive or controversial, this release ensures that they have reflected on their consent to be photographed and will not subsequently legally challenge its veracity.

- Communications between children encountered during UNICEF USA business and anyone covered by this Policy and Guidelines should be limited to official UUSA business, including for youth engagement, youth empowerment, and volunteer organizing business and be conducted over monitored channels.
- Communications with children should be conducted through official UNICEF USA platforms on email, SMS and other comms tools sanctioned and governed by UNICEF USA. Any communications that cannot take place on official platforms of email and SMS must be conducted via official UUSA-supported devices.
- Emails should be sent through official volunteer accounts where multiple staff can view and track conversations (volunteer@unicefusa.org, advocacy@unicefusa.org, regional office email accounts, UNICEFUNITE.org email accounts monitored by staff or UNICEFClubs.org email accounts monitored by staff).
- All email communication with children should have 2 staff/emails monitored by staff or 1 staff and 1 parent/guardian/advisor.
- Communications may also be conducted through approved communication channels monitored by 2 or more staff.
- SMS comms should take place on SMS platforms integrated with UUSA’s databases of record (BBCRM or Salesforce). If SMS platforms integrated with CRM are unavailable or not fit for a particular use case, staff should include other staff in the SMS exchange.
- A parent/guardian should be included in or informed of individualized communications with children.
- Children and their parents must be briefed on their roles in public events and feel comfortable and prepared. Events should be scripted and moderated. Dialogues, Q & As or interviews with children that will be public must be planned and conducted in a child-friendly manner.
• Children’s personal information in mass audience events or digital recordings should be anonymized to avoid identifying children publicly.

• Children and parents need a way to provide feedback or concerns post event unless written consent is given by parent/guardian to remove them from a specific communication requesting that feedback. If parent/guardian is unknown, advisor/teacher/authorized chaperone can be used to collect feedback.

• All communication pertaining travel, final event logistics, and/or additional responsibilities being requested of the child should copy parent/guardian/authorize chaperone/advisor/teacher.

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UNICEF USA

SAMPLE 2 OF CHILD PROTECTION POLICY

About the organisation briefly

Vision for Child Protection
To create an environment where children associated with our programmes are free from abuse, neglect and exploitation and are empowered to raise their voice against it.

Definitions

Child:
For the purposes of this document, a “child” is defined as anyone under the age of 18, in line with the UN Convention on the Rights of the Child and the Constitution of the Republic of South Africa.

Child abuse:
According to the World Health Organisation, “child abuse” or “maltreatment” constitutes “all forms of physical and/or emotional ill-treatment, sexual abuse, neglect, or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development, or dignity in the context of a relationship of responsibility, trust, or power.”
**Child Protection**
A broad term to describe behaviors, philosophies, policies, standards, guidelines, and procedures to protect children from both intentional and unintentional harm. In the current context, it applies particularly to the duty of organisations – and individuals associated with those organisations – to protect children in their care.

**Corporal Punishment:**
The use of physical force causing pain, but not wounds, as a means of discipline (includes spanking, rapping on the head and slapping).

**Direct contact with children:**
Being in the physical presence of a child or children in the context of the organisation’s work, whether contact is occasional or regular, short, or long term.

**Indirect contact with children:**
- Having access to information on children in the context of the organisation’s work, such as children’s names, locations (addresses of individuals or projects), photographs and case studies.
- Providing funding for organisations that work “directly” with children. Albeit indirectly, this nonetheless has an impact on children, and therefore confers upon the donor organisation responsibility for child protection issues.

[Please note: this list of examples is not exhaustive.]

**Child Protection Policy:**
A framework of principles, standards, and guidelines to create a safe and positive environment for children that protects them from intentional and unintentional harm.

**Informed consent:**
Capacity to freely give consent based on all available information, according to the age and evolving capacities of the child. For example, if you seek consent from a child regarding taking their photograph and using it for publicity purposes, the child is informed as to how the photograph will be used and is given the opportunity to refuse. If a child is invited to provide input into the development of a child protection policy, they must be made aware of the time it will take, what exactly will be involved, their roles and responsibilities, and only then will they be able to give their “informed consent”.

Guiding Principles

- Child-centeredness: The investigation of child abuse will be child centered, i.e. keeping in mind the needs of the child and the priority in terms of his/her growth and development.
- Child-sensitive behavior: Relating to children in a way that accommodates their developmental age, their rights and protects their dignity.
- Key Reporting Principles: Reporting immediately, acting swiftly, and responding to the immediate needs of the child.
- Culture of Child Protection: All staff will be made aware of the policy and all existing staff will be trained on it. Additionally, all children will undergo sessions to raise their level of awareness on child abuse. A culture of child protection will be built through open discussions, feedback and raising awareness. This we expect will contribute to prevention of child abuse and minimize the risk to children.

Four Key Areas of Intervention

1. **Awareness**: We will ensure that all staff, children, and others coming in direct contact with children are aware of the definition and signs of child abuse, the risks, and proper reporting procedures.

   (a) **Staff Training**
      
      i. Awareness of Abuse
      ii. Identification of Abuse (early indicators of neglect and maltreatment)
      iii. Talking to Children about Abuse
      iv. Orientation of Child Protection Policy
      vi. Responding to Abuse Claims

   (b) **Child Training**
      
      i. Awareness of Abuse
      ii. Orientation of Child Protection Policy
      iii. Helping Children Be Strong (good touch/bad touch; just say no; stranger danger)
      iv. Reporting Abuse
2. **Prevention**: We will ensure through awareness, good practice, and proper infrastructure, that staff and others minimize the risk to children.

   a. Limiting Access
      i. Barring of male and non-childcare staff from being alone with a child or in an area where others cannot see them.
   b. Signed Code of Conduct by anyone coming in contact with the children.
   c. Copies of the Code of Conduct and Child Protection Policy are readily available to all staff and volunteers.
   d. Proper Supervision/Well Lit Areas/Proper Privacy

2. **Reporting**: We will ensure that staff and children are clear what steps to take where concerns arise regarding safety of children.

   a. **Child Reporting Methods**
      i. Child Abuse Hotline appropriate to the locale displayed in a common area and at a child friendly height
      ii. Other Local Reporting Methods (Child Protection Resources, Police, Hospital) displayed in a common area and at a child friendly height
      iii. Phone accessible and located in a common place for children’s purposes
      iv. Suggestion boxes placed in a common area where children can confidentially report abuse claims
      v. Opportunities for a child to tell a trusted adult

   b. **Staff Reporting Protocol**
      i. Immediately after being aware of abuse, write down everything the child has told you or you have seen, facts only.
      ii. Report any incidents of abuse/abuse claim to the Management Committee, In Charge, or Social Worker.
      iii. Contact the local Child Welfare Committee and/or local police to register a case, take due cognizance of such occurrences and conduct necessary investigations.
      iv. Report any infractions of the code of conduct with the In Charge and/or Social Worker.
4. **Responding**: We will ensure action is taken to support and protect children where concerns arise regarding possible abuse.

   a) Establish local linkages with the police department, child welfare committees, or other qualified organisations.

   b) Consult with Social Worker and Senior Management whenever abuse claims are made for proper guidance.

   c) Take necessary actions to prevent abuse from happening in the future (i.e. termination of abuser).

   d) Support children, staff or other adults who raise concerns or who are the subject of any concerns.

   e) Ensure children receive proper counselling and resources necessary after abuse occurs.

Where concerns of child abuse arise your organisation’s name will consider its legal obligations to report those concerns to relevant, competent authorities. It is not our job to prove/disprove but to report the abuse claim.
Handout 11: Code of Conduct

CODE OF CONDUCT FOR WORKING WITH CHILDREN

There is an imbalance of power in any interaction between adults and children, tilting in favour of adults. As a result, children are susceptible to various forms of abuse, neglect, and exploitation. The child protection policy consists of guidelines and a framework that will guide the behavior of staff and associates who work with children to provide a safe and positive environment, free from abuse.

Staff will:

• Have a female staff member accompany children on travels outside the organisation.
• As much as possible, work with children in a place in view of others.
• Seek permission of children and staff prior to taking any photos.
• Take seriously any concerns raised by children.
• Act on children’s concerns and problems immediately.
• Report any child abuse and protection concerns they have to the In-Charge Social Worker.
• Cooperate fully and confidentially in any investigation of concerns or allegations.
• Empower children by discussing their rights, acceptable and unacceptable behavior with adults, and methods to report abuse or concerns confidentially.
Staff will not:

- Use discipline and teaching techniques that harm the dignity of the child.
- Use corporal punishment (slapping, hitting, or other physical means that inflict pain).
- Use language, make suggestions, or offer advice, which is inappropriate, offensive, or abusive.
- Use slang words or abusive language in front of the child.
- Bind or tie a child to restrict movement.
- Withhold food or other basic needs from a child.
- Act in ways intended to shame, humiliate, or belittle the child.
- Discriminate against, show differential treatment, or favor particular children to the exclusion of others.
- Behave in a manner which is physically inappropriate or sexually provocative.
- Kiss, hug, fondle, rub or touch a child in an inappropriate or culturally insensitive way.
- Sleep alone in a room with a child.
- Allow any non-care giving staff to be alone with a child in an area where others cannot be seen.
- Take photographs of the children while they are bathing, sleeping, changing, or not wearing proper clothing.

I have read the above policy and it has been explained to me in detail, and I hereby agree to abide by the rules and regulations stated above. I also understand that my failure to follow these guidelines can result in disciplinary action or immediate termination.

---------------------------------------------------------------------
Signature of Employee/Volunteer                                      Signature of Director
---------------------------------------------------------------------
---------------------------------------------------------------------
Printed Name of Employee/Volunteer                                    Printed Name of Director
---------------------------------------------------------------------
---------------------------------------------------------------------
Date                                                                 Date
PUBLICITY, MEDIA & COMMUNICATIONS REGARDING CHILDREN

(Sample from The Miracle Foundation)

Purpose:

To outline the guidelines for depiction of children and the organisation on social networking sites (Facebook, Twitter, blogs, etc.), donor communications, and general media (reporting, broadcasting, publication of news, programmes, documentaries, etc.). Guiding Principle:

The Organisation’s guiding principle is to ensure that the privacy, dignity, and physical/emotional development of children will be always protected. The Miracle Foundation takes into consideration long-term consequences, always envisioning how the children themselves might perceive the exposure, both now and in the future.

Publicity, Media & Communications Guidelines:

● When you post photos and videos of children in groups, you will not share those photos that are taken at our organisation name.
● The last names, background, and city where the children reside should never be disclosed.
● Share stories that reflect on the children positively, keeping in mind they may see the communications in the future.
● Obtain written permission from the family, staff, and children for all photos.
● When posting on social media sites using your smartphone, disable the location services by going into the settings and privacy options on your phone.
● Share photographs and videos taken of the children with the organisation via email, CD, USB drive. Please tag us on
● All allowed pictures you share on social media sites, so we can give these back to the children and share them with other supporters.
● If you’re a professional photographer, please consider giving a copyright of professional photographs to the organisation
● Any media coverage of children and the Organisation will be conducted only under the following parameters
● The expressed permission of the organisation
● A signed agreement to change the names and other identifying information of children.
● A staff member must be present during interviews of children.
● The purpose of photos, videos and interviews should be explained to the child and their parent/guardian consent obtained.
● Ensure all communications surrounding children and the organisation abide by local laws.
**Handout 12: Referral Report Template for Religious Organisations**

Attention:

__________________________________________________________

Name of the Organisation matter is referred to:

__________________________________________________________

Did Child/Caregiver agree with the referral? YES: ☐ NO: ☐

Child’s Name: _____________________________________________

Age: _______________________________________________________

Sex: M: ☐ F: ☐

Date of referral: ________________________________

Reasons for Referral:

_________________________________________________________

_________________________________________________________

_________________________________________________________

Referring Person __________________________________________

Designation of Referring Personnel: __________________________

Address of Referral: _______________________________________

Contact No.: _____________________________________________

Follow up Plan:

_________________________________________________________

_________________________________________________________

_________________________________________________________
## Handout 13: Scenarios for referrals

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Referral and Action (What will you do and where would you refer to and why?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nono is a 13 year old girl. She is brought in by her grandmother because she came home from school crying and she does not tell granny what is wrong with her. When you manage to keep her calm she tells you that she was raped on her way from school.</td>
<td></td>
</tr>
<tr>
<td>The Sunday school teacher reports that 2 little girls aged 9 and 11 from the same family that attend her class told her they are scared to go home. This is because they have been told an elderly grandmother from the village is coming to conduct a virginity test on them. What will you do?</td>
<td></td>
</tr>
<tr>
<td>You have been concerned about this boy in your neighbourhood. He is about 9 years old but has never been to school. He is often filthy and recently you heard an old man screaming at him for not bringing enough money. What do you do?</td>
<td></td>
</tr>
<tr>
<td>You notice that the child of one of your colleagues who is part of the Mother’s Union is always looking unkept. You are concerned that she may not be properly cared for. What do you do?</td>
<td></td>
</tr>
<tr>
<td>There is a 15 year old boy in the neighborhood. You see him hanging out with bad people, sniffing glue and behaving and speaking rudely to young girls. You are afraid for what may happen to your own children. Your 10 year old son seems to admire him and you have seen how this boy looks at the young girls in the neighbourhood, including your own 14 year old daughter. What will you do?</td>
<td></td>
</tr>
</tbody>
</table>
**Handout 14: Directory of Government Child Protection Services**

**SOUTH AFRICAN POLICE SERVICES**

<table>
<thead>
<tr>
<th>Provincial Commander</th>
<th>Office Number</th>
<th>Cell Phone</th>
<th>Email Adress (office hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Office</td>
<td>012-3932107</td>
<td></td>
<td><a href="mailto:Head.fcs@saps.gov.za">Head.fcs@saps.gov.za</a></td>
</tr>
<tr>
<td>Eastern Cape</td>
<td>040-6088498</td>
<td>082 4420 651</td>
<td>GovanL@<a href="mailto:fcs@saps.gov.za">fcs@saps.gov.za</a></td>
</tr>
<tr>
<td>Free State</td>
<td>051-5076628</td>
<td>082 8547 501</td>
<td><a href="mailto:LekheleMA@saps.gov.za">LekheleMA@saps.gov.za</a>, <a href="mailto:fs.prov.cmdr@saps.gov.za">fs.prov.cmdr@saps.gov.za</a></td>
</tr>
<tr>
<td>Gauteng</td>
<td>011-3096016</td>
<td>082 4125 988</td>
<td><a href="mailto:PetsaneMW@saps.gov.za">PetsaneMW@saps.gov.za</a></td>
</tr>
<tr>
<td>KwaZuluNatal</td>
<td>031-3254941</td>
<td>082 8268 976</td>
<td><a href="mailto:gounderD@saps.gov.za">gounderD@saps.gov.za</a></td>
</tr>
<tr>
<td>Limpopo</td>
<td>015-2906180</td>
<td>082 4517 170</td>
<td><a href="mailto:limprov.fcs.coordinator@saps.gov.za">limprov.fcs.coordinator@saps.gov.za</a></td>
</tr>
<tr>
<td>Mpumalanga</td>
<td>013-7624770</td>
<td>082 4652 359</td>
<td><a href="mailto:NgutshaniT@saps.gov.za">NgutshaniT@saps.gov.za</a></td>
</tr>
<tr>
<td>North West</td>
<td>018-2997159</td>
<td>071 3539 137</td>
<td><a href="mailto:nw.detectives.fcscommander@saps.gov.za">nw.detectives.fcscommander@saps.gov.za</a></td>
</tr>
<tr>
<td>Western Cape</td>
<td>021-4678390</td>
<td>082 8509 674</td>
<td><a href="mailto:wc.fcscommander@saps.gov.za">wc.fcscommander@saps.gov.za</a></td>
</tr>
</tbody>
</table>
The Gender-Based Violence Command Centre (GBVCC)

The GBCCC operates under the Department of Social Development. The Centre operates a National, 24hr/7days-a-week Call Centre facility. The facility employs social workers who are responsible for call-taking and call referrals. The Centre operates an Emergency Line number – 0800 428 428. This is supported by a USSD, “please call me” facility: *120*7867#. A Skype Line ‘Helpme GBV’ for members of the deaf community also exists. (Add ‘Helpme GBV’ to your Skype contacts). An SMS based Line 31531 for persons with disabilities (SMS ‘help’ to 31531) also exists. The Centre is able to refer calls directly to SAPS (10111) and field Social Workers who respond to victims of GBV.
## THUTHUZELA CARE CENTRES CONTACT DETAILS

### EASTERN CAPE

<table>
<thead>
<tr>
<th>PROVINCIAL MANAGER/S</th>
<th>TCC SITE - HOSPITAL ADDRESS</th>
<th>CONTACT DETAILS</th>
<th>CASE MANAGER</th>
<th>SITE COORDINATOR (SC)/ VICTIM ASSISTANCE OFFICER (VAO)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>St Patricks Hospital Bizana TCC Bizana,</td>
<td>Tel: 039 251 0236 ext 3066 Fax: 039 251 0286</td>
<td>N/A</td>
<td>Ms Anela Nontso (SC)</td>
</tr>
<tr>
<td>2.</td>
<td>Butterworth TCC Butterworth Hospital, Bizana,</td>
<td>Tel: 039 251 0236 ext 3066 Fax: 039 251 0286</td>
<td>N/A</td>
<td>Ms Anela Nontso (SC)</td>
</tr>
<tr>
<td>3.</td>
<td>Dora Nginza TCC Dora Nginza Hospital: Port Elizabeth</td>
<td>Tel: 041 406 4112 Email: <a href="mailto:ZBULA@npa.gov.za">ZBULA@npa.gov.za</a></td>
<td>Ms Linda Le Roux</td>
<td>Ms Zimkitha Bula (SC)</td>
</tr>
<tr>
<td>4.</td>
<td>Libode TCC (Mthatha) St Barnabas Hospital, Nyandeni Region,</td>
<td>Tel: 047 568 6274 Email: <a href="mailto:nsithole@npa.gov.za">nsithole@npa.gov.za</a></td>
<td>Mr David Pudikabekwa</td>
<td>Ms Nolwandle Sithole (SC)</td>
</tr>
<tr>
<td>5.</td>
<td>Adv Mkhuxeli Jokani Cell: 076 815 8894 <a href="mailto:mjokani@npa.gov.za">mjokani@npa.gov.za</a></td>
<td>Tel: 039 253 5000 Fax : 039 253 1116 Email: <a href="mailto:nomantombazanambena@yahoo.com">nomantombazanambena@yahoo.com</a></td>
<td>Ms Vatiswa Blayi</td>
<td>Ms Bulelwa Mareketla (SC)</td>
</tr>
<tr>
<td>6.</td>
<td>Mdantsane TCC Cecilia Makiwane Hospital, Mdantsane, East London</td>
<td>Tel: 043 761 2023 Fax: 043 761 6277 Email: <a href="mailto:nosisinangu@gmail.com">nosisinangu@gmail.com</a></td>
<td>Ms Vatiswa Blayi</td>
<td>Ms Nosisi Nangu (SC)</td>
</tr>
<tr>
<td>7.</td>
<td>Mthatha TCC Mthatha General</td>
<td>Tel: 047 502 4000 Fax: 047 502 4126</td>
<td>Mr David Pudikabekwa</td>
<td>Ms Vatiswa Mtiya (SC)</td>
</tr>
<tr>
<td>8.</td>
<td>Taylor Bequest TCC Taylor Bequest Hospital,</td>
<td>Tel: 039 737 3186 Fax: 039 737 4134 Email: <a href="mailto:NPutuzo@npa.gov.za">NPutuzo@npa.gov.za</a></td>
<td>Ms Ninzikazi Putuzo (SC)</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Grey Hospital TCC King's Road, King William's Town</td>
<td>Tel: 043 643 3300 Email: <a href="mailto:kwezi.nyani@yahoo.com">kwezi.nyani@yahoo.com</a></td>
<td>Ms Nokhwezi Masakane</td>
<td></td>
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# FREE STATE

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<th>PROVINCIAL MANAGER/S</th>
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</thead>
<tbody>
<tr>
<td>1. Adv Johanna Mabote Cell: 084 874 5302 <a href="mailto:njmabote@npa.gov.za">njmabote@npa.gov.za</a></td>
<td>Bongani TCC Health Complex (Old Provincial Hospital) Long Road Street, Welkom</td>
<td>Tel: 057 355 4106 Fax: 057 355 4109 Email: <a href="mailto:estherkhoza459@gmail.com">estherkhoza459@gmail.com</a></td>
<td>Ms Lisle Nel</td>
<td>Ms Esther Khoza (SC)</td>
</tr>
<tr>
<td>2. Adv Johanna Mabote Cell: 084 874 5302 <a href="mailto:njmabote@npa.gov.za">njmabote@npa.gov.za</a></td>
<td>Metsimaholo TCC Metsimaholo District Hospital, 8 Langenhoven Street, Sasolburg</td>
<td>Tel: 016 973 3997 Fax: 016 970 9401 E-mail: <a href="mailto:Metsimaholotcc@gmail.com">Metsimaholotcc@gmail.com</a></td>
<td>Ms Mafusi P Lekeka</td>
<td>Ms Sannah Thole (SC)</td>
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<tr>
<td>3. Adv Johanna Mabote Cell: 084 874 5302 <a href="mailto:njmabote@npa.gov.za">njmabote@npa.gov.za</a></td>
<td>Phekolong TCC Phekolong Hospital 2117 Riemland Road Bohlokong Bethlehem 9701</td>
<td>Tel: 058 304 3023 Fax: 058 304 2672 Email: <a href="mailto:PMpatane@npa.gov.za">PMpatane@npa.gov.za</a></td>
<td>Ms Palesa Mpatane</td>
<td>Ms Dimakatso Manong (SC)</td>
</tr>
<tr>
<td>4. Adv Johanna Mabote Cell: 084 874 5302 <a href="mailto:njmabote@npa.gov.za">njmabote@npa.gov.za</a></td>
<td>Tshepong TCC National District Hospital, Roth Avenue, Willows Bloemfontein 9301</td>
<td>Tel: 051 448 6023 Fax: 051 403 2232</td>
<td>Ms Michelle Nel</td>
<td>Ms Paulina Mochaka</td>
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# GAUTENG

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<tr>
<td>1. Adv Joyce Xakaza Cell: 084 623 2621 <a href="mailto:tsxakaza@npa.gov.za">tsxakaza@npa.gov.za</a></td>
<td>Baragwanath/Nthabiseng TCC Chris Hani Bara Hospital, Chris Hani Road, Diepkloof</td>
<td>Tel: 011 933 1140 Fax: 011 933 1140 Cell:073 289 0990 Email: <a href="mailto:CLekgoathoane@gmail.com">CLekgoathoane@gmail.com</a></td>
<td>Mr. Chris Lekgoathoane (SC)</td>
<td>Mr Thabo Moemise (SC)</td>
</tr>
<tr>
<td>2. Kopanong TCC Kopanong Hospital, No. 2 Casino Road, Duncanville, Vereeniging</td>
<td>Tel: 016 428 5959 Fax: 016 428 5625 Email: <a href="mailto:TMoemise@npa.gov.za">TMoemise@npa.gov.za</a></td>
<td>Ms Paulina Mochaka</td>
<td>Ms Millicent Motsoari (SC)</td>
<td></td>
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<tr>
<td>3. Laudium TCC Laudium Hospital &amp; Community Health Centre, Corner Bengal &amp; 25th Avenue, Laudium</td>
<td>Tel: 012 374 3710 Fax: 012 374 2621 <a href="mailto:laudiumtcc@gmail.com">laudiumtcc@gmail.com</a></td>
<td>Ms Paulina Mochaka</td>
<td>Ms Millicent Motsoari (SC)</td>
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<td>#</td>
<td>TCC</td>
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<td>Contact Details</td>
<td>Case Manager</td>
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<td>4</td>
<td>Lenasia TCC</td>
<td>Lenasia Hospital, Cosmos Street, Lenasia South Johannesburg</td>
<td>Tel: 011 211 0632 Fax: 011 909 3015</td>
<td>Mr George Mahlo (SC)</td>
</tr>
<tr>
<td>5</td>
<td>Mamelodi TCC</td>
<td>Mamelodi Day Hospital, Tsamaya Road, Mamelodi East</td>
<td>Tel: 012 841 8413 Cell: 073 857 0603 Email: <a href="mailto:Nndombo@npa.gov.za">Nndombo@npa.gov.za</a></td>
<td>Ms. Lida Van Schalkwyk</td>
</tr>
<tr>
<td>6</td>
<td>Masakhane TCC</td>
<td>Tembisa Hospital, Industrial &amp; Clint Mazibuko Road, Tembisa</td>
<td>Tel: 011 923 2180 Fax: 011 920 1195 Email: <a href="mailto:tndala@npa.gov.za">tndala@npa.gov.za</a></td>
<td>Mr Pule Mathah</td>
</tr>
<tr>
<td>7</td>
<td>Sinakekelwe TCC</td>
<td>Natalspruit Hospital, 1 Alrode Street, Katlehong, Alrode</td>
<td>Tel: 011 909 5832 Fax: 011 909 8375</td>
<td>Ms Ncumisa Maj</td>
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### KWA-ZULU NATAL

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<tr>
<th>Provincial Manager/Site Coordinator</th>
<th>TCC Site - Hospital Address</th>
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<th>Case Manager</th>
<th>Site Coordinator</th>
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| 1. Adv Dawn Coleman-Malinga  
Cell: 084 264 4780  
Dcoleman@npa.gov.za  | Edendale TCC  
Edendale Hospital, Moses Mabhida Rd, Plessislaer, Edendale, Pietermaritzburg | Tel: 033 395 4325 Fax: 033 395 4060 Email: nrntlahla@gmail.com | Ms Siindlele Mkhize | Ms Nomonde Ntlanhla(SC) |
|  | Port Shepstone TCC  
Port Shepstone Regional Hospital, Bazley Street, Port Shepstone | Tel: 039 688 6021 Fax: 039 688 6034 Email: Lsonkosi@npa.gov.za | Mr Kankeleso Mosoetsa | Ms Lorrinda Sonkosi (SC) |
| 2 | Madadeni TCC  
Madadeni Hospital, Section 5 Madadeni, Newcastle | Tel: 034 328 8508 ext 8514 Email: enel3001@gmail.com | n/a | Mrs Elma Nel (SC) |
| 3 | Empangeni TCC  
Ngwelenzana Hospital, Cnr Thanduyi & Ngwelenzana Road, Empangeni | Tel: 035 794 1471 Fax: 035 794 1684 Email: Gloria.Ndwandwe@kznhealth.gov.za | Ms Vuyisile Mafuna | Ms Gloria Ndwandwe(SC) |
| 4 | Umlazi TCC  
Prince Mshiyeni | Tel: 031 907 8496 Fax: 031 906 1836 Email: jlanga@npa.gov.za | Mr Bonokuhle Mthembu | Ms Jabulisile Langa (SC) |
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<td>6</td>
<td>Adv Omashani Naidoo</td>
<td>Phoenix TCC Mahatma Ghandi</td>
<td>Tel: 031 502 2338 Fax: 031 502 7345</td>
<td>Ms Cheryl Pillay</td>
<td>Ms Zama Mbili (SC)</td>
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<tr>
<td></td>
<td>Cell: 082 415 7716</td>
<td>Memorial Hospital, 100 Phoenix Highway, Phoenix</td>
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<td><a href="mailto:onaidoo@npa.gov.za">onaidoo@npa.gov.za</a></td>
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<td>7</td>
<td>RK Khan TCC</td>
<td>RK Khan Hospital, RK Khan</td>
<td>Tel: 031 401 0394 Tel/Fax: 031 401 0394 Email:<a href="mailto:nmpanza@gov.za">nmpanza@gov.za</a></td>
<td>Mr Sizwe Khanyile</td>
<td>Ms Nombuso Mpanza (SC)</td>
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<td>Circle, Westcliffe</td>
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<td></td>
<td>Stanger TCC</td>
<td>Stanger Provincial Hospital, Corner King Shaka St &amp; Patterson Rd, Stanger</td>
<td>Tel: 032 551 6632 Email: <a href="mailto:MNdlovu@npa.gov.za">MNdlovu@npa.gov.za</a></td>
<td>Ms Ronita Lutchman</td>
<td>Mr Mzwandile Ndlovu (SC)</td>
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### FAITH BASED CHILD PROTECTION MOVEMENT: TRAINING MANUAL FOR THE RELIGIOUS SECTOR

**MPUMALANGA**

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<tr>
<td>Ms Sanette Lotter</td>
<td>Ermelo TCC Ermelo Hospital, 1 Joubert St, Ermelo</td>
<td>Tel: 017 811 2031 Fax: 017 811 5104 Email: <a href="mailto:spmkhonza@npa.gov.za">spmkhonza@npa.gov.za</a></td>
<td>n/a</td>
<td>Mr Sipho Mkhoza (SC)</td>
</tr>
<tr>
<td>Ms Sanette Lotter</td>
<td>Themb TCC Themb TCC Hospital, Main Road, Kabokweni</td>
<td>Tel: 013 796 9623 Email: <a href="mailto:zkoza@npa.gov.za">zkoza@npa.gov.za</a></td>
<td>Ms Christa du Plessis</td>
<td>Ms Zulaika Khoza (SC)</td>
</tr>
<tr>
<td>Ms Sanette Lotter</td>
<td>Tonga TCC Tonga Hospital, Tonga View, Kwalugedlane, Nkomazi</td>
<td>Tel: 013 780 9231 Fax: 013 780 0733 Email: <a href="mailto:constancee19@gmail.com">constancee19@gmail.com</a></td>
<td>n/a</td>
<td>Ms Cindy Sambo (SC)</td>
</tr>
<tr>
<td>Ms Sanette Lotter</td>
<td>Witbank TCC Witbank Hospital, Mandela Street, Witbank</td>
<td>Tel: 013 653 2208 Fax: 013 656 1316 <a href="mailto:emailahnitcc@gmail.com">emailahnitcc@gmail.com</a></td>
<td>Ms Shedene McComans</td>
<td>Ms Cynthia Mkhatshwa (SC)</td>
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**NORTHERN CAPE**

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<tr>
<td>Adv Mark Kenny</td>
<td>De Aar TCC Central Karoo Hospital, Visser Street, De Aar</td>
<td>Tel: 053 631 7093 Fax: 053 631 7093 Email: <a href="mailto:simon-dilthebe@gmail.com">simon-dilthebe@gmail.com</a></td>
<td>n/a</td>
<td>Mr Simon Dilthebe (SC)</td>
</tr>
<tr>
<td>Adv Mark Kenny</td>
<td>Galeshewe TCC Galeshewe Day Hospital Hospital, Tyson Road Kimberley</td>
<td>Tel: 053 830 8900 Email: molokoramathakela89 mail.com</td>
<td>n/a</td>
<td>Mrs Deyi Zandile (SC)</td>
</tr>
<tr>
<td>Adv Mark Kenny</td>
<td>Kuruman TCC Kuruman Hospital, Main Street, Kuruman</td>
<td>Tel: 053 712 8133 Fax: 053 712 8118</td>
<td>n/a</td>
<td>Ms Nokonwaba Nowewe (SC)</td>
</tr>
<tr>
<td>Adv Mark Kenny</td>
<td>Springbok TCC Van Niekerk Hospital (Springbok Hospital) Hospital Street,</td>
<td>Tel: 027 712 1551 Fax: 027 712 1560 Email: <a href="mailto:babalwapetelo@gmail.com">babalwapetelo@gmail.com</a></td>
<td>n/a</td>
<td>Ms Babalwa Petelo (SC)</td>
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**NORTH WEST**

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<tr>
<td>1. Adv Ilse Bezuidenhout Cell: 084 821 1854 <a href="mailto:ibezuidenhout@npa.gov.za">ibezuidenhout@npa.gov.za</a></td>
<td>Job Shimankane Tabane TCC Job Shimankana Tabane Hospital, Corner Heystek &amp; Bosch Street, Rustenburg</td>
<td>Tel: 014 590 5474 Email: <a href="mailto:estherkhoza459@gmail.mn">estherkhoza459@gmail.mn</a></td>
<td>n/a</td>
<td>Ms Esther Khoza(SC)</td>
</tr>
<tr>
<td>2. Adv Ilse Bezuidenhout Cell: 084 821 1854 <a href="mailto:ibezuidenhout@npa.gov.za">ibezuidenhout@npa.gov.za</a></td>
<td>Klerksdorp TCC Klerksdorp Hospital, Benji Oliph Road Jouberton, Klerksdorp</td>
<td>Tel: 018 465 2828 Fax:018 465 2041 Email: <a href="mailto:thandi.kraai@webmail.c.za">thandi.kraai@webmail.c.za</a></td>
<td>Ms Susanna Krause</td>
<td>Ms Thandiwe Kraai (SC)</td>
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<tr>
<td>3. Adv Vuyo Mhlanga Cell: 074 114 8878 <a href="mailto:vmhlanga@npa.gov.za">vmhlanga@npa.gov.za</a></td>
<td>Mafikeng TCC Mafikeng Provincial Hospital, Lichtenburg Road, Mafikeng</td>
<td>Tel: 018 383 7000 Email: <a href="mailto:thekgotele@gmail.com">thekgotele@gmail.com</a>/thekwelela@npa.gov.za</td>
<td>Mr Ronald Ngako</td>
<td>Ms Grace Modiba (SC)</td>
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<tr>
<td>4. Adv Vuyo Mhlanga Cell: 074 114 8878 <a href="mailto:vmhlanga@npa.gov.za">vmhlanga@npa.gov.za</a></td>
<td>Potchefstroom TCC Potchefstroom Hospital, Cnr Botha &amp; Chris Hani Street, Potchefstroom</td>
<td>Tel: 018 293 4659 Email: <a href="mailto:DMojaki@npa.gov.za">DMojaki@npa.gov.za</a></td>
<td>n/a</td>
<td>Ms Dintletse Mojaki (SC)</td>
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<tr>
<td>5. Adv Vuyo Mhlanga Cell: 074 114 8878 <a href="mailto:vmhlanga@npa.gov.za">vmhlanga@npa.gov.za</a></td>
<td>Taung TCC Taung District Hospital, Office 005 Trauma Counseling Unit, Magistrate Street, Taung</td>
<td>Tel: 053 994 1206 Tel/Fax: 053 994 1206 Email: <a href="mailto:mkujane@npa.gov.za">mkujane@npa.gov.za</a></td>
<td>n/a</td>
<td>Ms Maud Kujane (SC)</td>
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## PROVINCIAL MANAGER/S

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<tr>
<td>1. Adv Mark Kenny Tel: 0842514417 <a href="mailto:mken@npa.gov.za">mken@npa.gov.za</a></td>
<td>George TCC George Provincial Hospital, Davidson Road, Glen Barrie, George</td>
<td>Tel: 044 873 4858 Fax: 044 873 6748 Email: <a href="mailto:vezasie@yahoo.com">vezasie@yahoo.com</a></td>
<td>Ms Gerda Marx</td>
<td>Ms Angelique Vezasie (SC)</td>
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<tr>
<td>2. Adv Lizelle Africa Cell: 0842612641 <a href="mailto:lafrica@npa.gov.za">lafrica@npa.gov.za</a></td>
<td>Karl Bremer TCC Karl Bremer Hospital, Corner Mike Pienaar Boulevard &amp; Frans Conradie Avenue, Belville</td>
<td>Tel: 021 948 0861 Fax: 021 918 1341</td>
<td>Ms Waldette Packery</td>
<td>Ms Nobuhle Malunga (SC)</td>
</tr>
<tr>
<td>3. Adv Garry Titus Cell: 0724566746 <a href="mailto:gtitus@npa.gov.za">gtitus@npa.gov.za</a></td>
<td>Khayelitsha TC Khayelitsha Hospital Khayelitsha Community Health Centre Lwandle Road, Site B, Khayelitsha</td>
<td>Tel: 021 360 4570 Email: <a href="mailto:boni.mogale@gmail.co">boni.mogale@gmail.co</a></td>
<td>Ms Audrey Ziervogel</td>
<td>Ms Boniswa Mogale (SC)</td>
</tr>
<tr>
<td>4. Adv Garry Titus Cell: 0724566746 <a href="mailto:gtitus@npa.gov.za">gtitus@npa.gov.za</a></td>
<td>Mannenburg TCC GF Jooste Hospital, Duinefontein Road, Mannenburg</td>
<td>Tel: 021 699 0474</td>
<td>Mr Deon Ruiters</td>
<td>Ms Mandisa Ngonongono (SC)</td>
</tr>
<tr>
<td>Adv Garry Titus Cell: 0724566746 <a href="mailto:gtitus@npa.gov.za">gtitus@npa.gov.za</a></td>
<td>Worcester TCC Worcester Hospital, Murray Street, Worcester</td>
<td>Tel: 023 348 1294 Fax: 023 342 265 Email: <a href="mailto:worcester_tcc@gmail.co">worcester_tcc@gmail.co</a></td>
<td>Ms Cindy Abdol</td>
<td>Ms. Cindy Williams (VAO)</td>
</tr>
</tbody>
</table>
HANDOUT 15

DIRECTORY OF NONGOVERNMENTAL CHILD PROTECTION ORGANISATIONS

Childline Regional Offices

24 Hour Line - 08000 55 555

Childline Eastern Cape
Tel: (+27)-(0)43 722 1382
P. O. Box 11127, Southernwood, 5213
Email: admin@childlineec.org.za

Childline Free State
Tel: (+27)-(0)51-4303311
PO Box 1011, Bloemfontein, 9300
Email: reception@cwcl.org.za Web: www.childwelfarebfm.org.za

Childline Gauteng
Tel: (+27)-(0)11-6452000
PO Box 32453, Braamfontein
Email: admingauteng@childline.org.za
Web: www.childlinegauteng.co.za Sub offices

Katorus:
Katlehong Resource Centre, 824
Ramokunopi West, Katlehong.

Soweto/Pfunanani:
Chris Hani / Baragwanath, Old
Potchefstroom Road, Soweto Thembisa:

Rabasotho Community Centre,
2 Qaqa Street, Cnr. Andrew Mapheto
Drive,
Thembisa

Sebokeng:
Moshoeshoe Road, Sebokeng.

Orange Farm:
14356 Main Road Ext. 8B, Orange Farm.

Diepsloot:
Winds of Life Community Centre, 6 Peach
Road, Ext. 6, Diepsloot.

Childline KwaZulu Natal
Tel: (+27)-(0)31-3120904
P O Box 37875, Overport, 4067
Email: reception@childlinekzn.org.za
Web: www.childlinekzn.org.za

Sub offices
Pietermaritzburg:
383 Bulwer Street, Pietermaritzburg

Umlazi:
Prince Mshiyeni Hospital, Comfort Zone

Kwa Mashu:
Kwa Mashu Police Station

Chatsworth:
Chatsworth Crisis Care Centre Port

Shepstone:
1 Voortrekker Place Outer West
Mobile Unit in Other West / Pinetown areas Ndwedwe:
Ndwedwe Justice Centre, Ndwedwe
Inanda
Mobile Unit in Inanda

Child Welfare South Africa
Child Welfare National Office Noordwyk Midrand
164, 14th Road.
Whitby Manor Office Estate,
Mekan House, Noordwyk Midrand
TEL. 087 822 1516
Email: national@childwelfaresa.org.za
Postal Address. P O Box 2846, Edenvale 1610

Life Line Southern Africa
24-hour crisis intervention service. "Emotional First Aid station". Free, confidential telephone counselling, rape counselling, trauma counselling, Aids counselling, and a range of other services.
National counselling line: 0861-322-322

Handout 16

REPUBLIC OF SOUTH AFRICA

No. 24 - Subpoena

IN THE MAGISTRATE’S COURT FOR THE DISTRICT/REGION OF ..........................................................

HELD AT .................................................................................................................. CASE NO: ......................................................

In the matter between: .................................................................................................................. Plaintiff
and .............................................................................................................................................. Defendant

To: the Sheriff/Deputy Sheriff:

INFORM:

(1) ..............................................................................................................................

(2) ..............................................................................................................................

(3) ..............................................................................................................................

(4) ..............................................................................................................................

that each of them is hereby required to appear in person before this court at

.............................................................. on the ................ day of ................................., 20........,
at

....................... (time) in the above-mentioned action to give evidence or to produce books, papers or
documents on behalf of the ................................................................. (Where documents are
required to be produced, add: ) and to bring with each one of them and then produce to the court the several
books, papers or documents specified in the list hereunder.

Dated at ........................................ this ................ day of ............................., 20..............,

..............................................................

Registrar/Clerk of the Court.

LIST OF BOOKS, PAPERS OR DOCUMENTS TO BE PRODUCED
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<th>Date</th>
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Handout 17: Care Network
The CARE Network

The above diagram gives guidance to the basic structure of a community development model. This also provides guidance on the cross pollination of all the child protection role players. The model also provides a collaborative and holistic approach to create safe spaces for children. The sustainability of such a model is only achieved when all the stakeholders understand and operate within their mandates and boundaries. The aim of this network is to ensure that violence, child abuse, neglect and exploitation is minimized as much as possible. When stakeholders can capacitate and support each other, their individual interventions are more effective and impactful.

We must realize that whilst each stakeholder has a critical role to play in the life of a child, no role player can work in isolation. Religious leaders often provide valuable spiritual and psychological support to a victim, however this forms only a part of the required intervention and not the whole. When we can create the spirit of “UBUNTU” we are essentially providing safety nets for our children, our families, and our communities. This Care Network also creates the roadmap for the collaborations of the Faith Based Child Protection Movement and other role players in the protection of children.
Name of Organisation: ______________________________________________________
Date: ____________________________________________________________________
Compiled by: _______________________________________________________________
To be submitted to: __________________________________________________________

<table>
<thead>
<tr>
<th>Issue</th>
<th>Action to take</th>
<th>Short-term (within 3 months)</th>
<th>Long-term (within a year)</th>
<th>Responsibility</th>
<th>Resources needed</th>
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<tbody>
<tr>
<td>Child Protection Training</td>
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<td>Vetting staff against the National Child Protection Register</td>
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<td>Developing/Revising organisational policies</td>
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<td>Child protection programmes and services</td>
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<td>Referral Pathways and protocols</td>
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Form 19: Training and Evaluation Form

Programme objectives

1. The programme objectives were clearly defined
   - Yes
   - No
   - N/A

2. The programme objectives were covered by the facilitator
   - Yes
   - No
   - N/A

Course content and relevance

3. The material was defined in a clear and simple way for me to understand
   - Yes
   - No
   - N/A

4. The course materials were well organised?
   - Yes
   - No
   - N/A

5. The course material help support the course objectives
   - Yes
   - No
   - N/A

6. I found the handouts given helpful
   - Yes
   - No
   - N/A

7. The content was relevant to my role (As parent/ leader/community member etc.)
   - Yes
   - No
   - N/A
Facilitator knowledge and effectiveness

8. The facilitator demonstrated a good understanding and effectively delivered the programme material

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</thead>
</table>

9. The facilitator shared clear examples with the participants to be able to relate to the content being discussed

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</thead>
</table>

10. The facilitator did a good job of generating participant interaction while keeping it a safe learning environment

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</table>

11. The pace of the programme was good

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</table>

12. The duration of the learning session was appropriate for the content objectives and complexity

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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13. The breaks were spaced at the right time during the sessions

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</table>

Programme evaluation

14. The assessment was a fair representation of the programme content

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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15. The activities or role players were a fair representation of the programme content

<table>
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<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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Facility

16. The training area had adequate space and sitting area

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<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</table>
17. The training facility has all the necessary equipment conducive to have a learning session

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<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</table>

18. The participants had access to board or /and computer/tools to simulate and have kinesthetic practice

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<th>Yes</th>
<th>No</th>
<th>N/A</th>
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**Final thoughts**

19 What did you like the most about the learning session(s)?

__________________________________________________________________________

__________________________________________________________________________

20 What new information did you find most informative or stuck out most for you?

__________________________________________________________________________

__________________________________________________________________________

21 What do you think needs to be changed or improved?

__________________________________________________________________________

__________________________________________________________________________

22 Please share your thoughts on the learning session(s) and/ facilitator

__________________________________________________________________________

__________________________________________________________________________
The Pledge

I pledge today to create a safe and nurturing environment for every child.
Every child is my child

Complied by Vanessa Chetty and Angel Arends