

# Kaupapa Tūkino Me Te Wareware Abuse And Neglect Policy and Guidelines

# Introduction

Presbyterian Support Upper South Island (PSUSI) is committed to the safety and well-being of all tangata whaiora (clients) and will provide a secure and nurturing environment where tamariki (children), rangatahi (young person) and vulnerable adults can thrive.

PSUSI is dedicated to identifying, preventing and responding appropriately to any form of abuse or neglect within our services and the community.

PSUSI will take immediate and appropriate action if abuse is disclosed.

Through clear guidelines and a commitment to thorough investigation and accountability, PSUSI strives to foster an environment of respect, transparency, and safety for all.

This document is intended as a guideline only. Any instance of suspected or actual abuse/neglect must be promptly reported to a manager and managed on an individual basis.

For the purposes of this policy rangatahi are referred to as tamariki.

Scope: Applies to all PSUSI kaimahi, contractors, volunteers and students on placement.

# **References:**

Child Matters

Age Concern New Zealand

Family Works New Zealand operations manual

Royal Commission Inquiry into Faith based abuse in care report/recommendations

# Responding to claims of historical abuse in care

Refer to Historical Abuse In Care policy

# **Training and Professional Development**

Refer to professional development policy

Abuse and neglect prevention awareness is included in the orientation process for all employees, volunteers and students on placement.

Regular training is required to ensure all Kaimahi have recent and relevant knowledge of appropriate legislation as well as gaining and retaining knowledge to better support tangata whaiora.

Managers and Team leaders are responsible for ensuring Kaimahi receive training appropriate to the service being provided.

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# Te Tūkino Tamaiti Me Te Wareware -Child Abuse and Neglect

# Definitions

The Children Young Persons and Their Families Act defines child abuse as "the harming (whether physically, emotionally or sexually), ill-treatment, abuse, neglect or deprivation of any child or young person." It includes:

#### **Emotional Abuse**

When tamariki emotional, psychological or social well-being and sense of worth is continually battered. E.g. criticising, degrading, ignoring, isolating, corrupting, exploiting and terrorising tamariki.

#### **Physical Abuse**

May be the result of a single episode or a series of episodes. Can be a result of excessive or inappropriate discipline or violence within the family whether harm was intended or not. E.g. punching, beating, kicking, shaking, biting, burning, throwing the tamaiti.

#### Sexual Abuse

Acts of behaviour where an adult, older or more powerful person uses tamariki for a sexual purpose. E.g. any touching for sexual purposes, sexual intercourse, oral sex, adult exposing themselves or seeking to have tamariki touch them for sexual purposes, pornographic activities including using internet and phone to initiate sexual conversations with tamariki or sharing inappropriate photographs.

#### Neglect

A pattern of behaviour which occurs over a period of time resulting in impaired functioning or development of tamariki. Failing to provide for tamariki basic needs. E.g. Failing to provide food, shelter and warmth, failure to seek and follow medical advice, leaving tamariki in situations without necessary care or intention of returning, failure to provide developmentally appropriate or legally required supervision, unwillingness or inability to provide parental care for tamariki.

# **Risk Factors**

While there are many issues that contribute to child abuse the factors listed below can make tamariki more vulnerable to abuse.

#### **Parental factors**

- unwanted pregnancy
- young unsupported mother/father/grandparent caring for tamariki/family whanau placement
- history of abuse
- mental illness, drug and alcohol abuse
- isolation and or limited support

- unrealistic expectations of tamariki
- lack of parenting knowledge

#### **Environmental factors**

- overcrowding
- poverty
- family violence
- non biological adult living in the home
- family experiencing multiple stresses

#### **Child factors**

- sickly, colicky or unwanted baby
- Tamaiti is the result of an abusive relationship
- lack of attachment between child and parent
- Tamati has physical or developmental disability

#### **Spiritual/Cultural factors**

• Spiritual/cultural factors do not override care and protection for tamariki. All tamariki in NZ are covered by the CYPF Act 1989 regardless of the spiritual or cultural belief of the parent/caregiver etc.

# **Recognise Physical and Behavioural Signs of Child Abuse & Neglect**

Indicators for tamariki can be physical or behavioural. The following signs **may** indicate a tamariki is being abused. It is important that the entire situation is taken into account. These signs of abuse are not exclusive and may include others.

#### **Physical abuse**

- unexplained bruises, welts, cuts and abrasions.
- unexplained burns.
- unexplained fractures.
- wary of adults.
- violent towards other tamariki or animals.
- dressed inappropriately to hide injuries.
- extreme aggression or extreme withdrawal.
- inconsistent explanations.

#### Sexual abuse

- torn, stained or bloody clothing.
- bruises, lacerations, redness, swelling, itchiness or bleeding injury in the genital area.
- blood in urine or faeces.
- sexually transmitted disease.

#### Younger children

- age-inappropriate sexual play with toys, self or others.
- sophisticated sexual knowledge.
- comments e.g. "I've got a secret" or "I don't like Uncle".
- Fear of certain places e.g. bedroom or bathroom.

#### Older children

- eating disorders.
- promiscuity or prostitution.
- using younger tamariki in sexual acts.
- trying to make self as unattractive as possible.

#### Emotional abuse

- bedwetting or soiling without a medical cause.
- frequent psychosomatic complaints e.g. headaches, nausea, stomach pain
- not attaining significant milestones.
- deprived living conditions compared with other members of family.
- severe developmental gaps.
- severe symptoms of depression, anxiety, aggression or withdrawal.
- overly compliant.
- attention seeking behaviour.
- when playing, model or copy negative behaviour and language that is used at home.

#### Neglect

- inappropriate dress for the weather.
- extremely dirty or unbathed.
- left alone for unacceptable periods of time.
- inadequately supervised.
- Malnourished.
- severe nappy rash or skin disorders resulting from improper care and hygiene.
- severe lack of attachment to other adults.
- poor school attendance and school performance
- poor social skills.
- may steal food.
- very demanding of affection or attention.
- no understanding of basic hygiene.

#### Adult behaviours which may indicate child abuse is occurring:

- vague about details or cause of tamaiti's injury.
- may blame accidents on other tamariki, relative or friend.
- aggressive towards tamariki in front of others
- may delay seeking medical attention for tamariki.

- may be overly protective of tamariki.
- jealous of tamariki relationships with others.
- may favour victim over other tamariki.
- may demonstrate affection or physical contact which appears sexual in nature or has sexual overtones.
- constantly calls tamariki names or publicly humiliates tamariki.
- threatens tamariki with physical harm or tamariki are forced to watch physical harm inflicted on another person.
- unrealistic expectations
- involves tamariki in adult issues e.g. separation or access issues.
- keeps the tamaiti at home in a subservient or surrogate parental role.
- fails to provide basic needs e.g. housing, nutrition, medical and psychological care.
- fails to enrol tamariki in school or permits truancy.
- leaves younger tamariki home alone.
- overwhelmed with own problems and puts own needs ahead of tamariki needs.

## Abuse Suspected

Child abuse or potential child abuse is suspected, witnessed, reported or disclosed. If the tamariki or rangatahi is in danger or unsafe, act immediately to secure their safety by phoning the police.

# Listen, Record and Consult

**Listen** - and reassure but do not make promises or commitments you cannot keep. Do not formally interview the tamariki or rangatahi - obtain only necessary and relevant facts if and when clarification is required.

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**Carefully record** any physical or behavioural observations and anything said by the child (use the tamariki or rangatahi own words as far as possible and include date, time, who was present etc)

**Consult** immediately with a manager or team leader. Discuss and agree on an appropriate course of action, including whether a Report of Concern is to be made. If the Manager is not available consult with any Family Works Manager or the General Manager Social Services (designated care and protection manager).

# **Report Concern**

The manager or social worker is required to contact Oranga Tamariki or the police and report the concerns.

Initial contact should be made to Oranga Tamariki by phone. 0508 326 459.

Alternatively a report can be made by email: <u>contact@ot.govt.nz</u> using the Report of Concern form.

Consultation will take place to decide who will provide follow up and support.

A debriefing meeting for all staff involved will be held by the manager or team leader. Additional support will be provided to all staff involved as required. E.g. EAP, external supervision.

# **Record Keeping**

The following information is required to be securely stored in SharePoint with restricted access):

The record of the concern; held within the client's file

Oranga Tamariki acknowledgement of receipt of notification

A record of any related discussions (written or verbal)

A record of any advice received by Oranga Tamariki

The action PSUSI took including any rationale

Managers and team leaders will keep a register of all reports of concern made.

# Ko Te Mahi Kino Me Te Warewaretanga O Nga Kaumatua – Elder Abuse and Neglect

# **Definition:**

Elder Abuse and Neglect is a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person. (*Definition adopted from WHO Toronto Declaration on the Global Prevention of Elder Abuse, 2002*)

### **Psychological Abuse:**

• Behaviour causing mental anguish, stress or fear. E.g. ridicule or threats, humiliation, preventing choice, withholding affection.

#### **Financial Abuse:**

• Illegal or improper use of money, property or other resources. E.g. unauthorised taking of money or possessions, misuse of power of attorney, use of home and/or utilities without contributing to costs

#### **Physical Abuse:**

• Infliction of pain, injury or use of force. E.g. hitting, pushing, rough handling, over medication, inappropriate use of restraints or confinement.

#### Neglect

• Not providing for physical, emotional or social needs. E.g. inadequate food, clothing or shelter, lack of social contact & support, health needs not attended to.

#### **Sexual Abuse**

• Non-consensual sexual acts or exploitive behaviours. E.g. inappropriate touching, sexual acts with someone unable to give consent.

# Spiritual/Cultural Abuse

• Stopping someone from expressing their spiritual or religious beliefs, forcing someone to go to church/temple/mosque, insulting or making fun of their beliefs or culture, forcing someone to eat food they don't want to or wear something they don't want to.

#### **Institutional Abuse**

• A policy or accepted practice within an organisation that disregards the rights of or harms an older person. E.g. routines that do not respect a person's culture or customs.

# **Risk Factors**

Older people are particularly vulnerable to abuse when they are dependent on others. Abuse often happens because of an imbalance of power. The older person may fear that if they complain they will get more abuse or poorer care.

- memory loss
- physical disabilities

- depression, loneliness, isolation
- alcohol or substance abuse
- verbally or combative with caregiver
- Share living situation

Several risk factors increase the likelihood that a caregiver will abuse an older person in their care.

- feeling overwhelmed or resentful
- history of alcohol or substance abuse
- history of abusing others
- dependant on older person for housing & finance
- mental health problems
- unemployment
- shared living situation
- criminal history

# **Recognise Signs of Abuse & Neglect in Older Persons**

The following signs **may** indicate an older person is being abused. It is important that the entire situation is taken into account.

- unexplained behaviour, sleeping or eating habits
- withdrawal or edginess
- fear of a particular person
- confusion
- unexplained injuries
- dishevelled or change in appearance
- drowsiness due to over-medication
- recoiling from touch
- unusual withdrawals from bank accounts
- unpaid bills, lack of money for necessities

# Responding to Suspected or Actual Abuse of an Older Person

#### **Abuse Suspected**

Abuse or potential abuse is suspected, witnessed, reported or disclosed

If there is risk of immediate harm act promptly to secure the persons safety

# Listen, Record and Consult

**Listen** - and reassure but do not make promises or commitments you cannot keep. Do not interview formally - obtain only necessary and relevant facts if and when clarification is required.

**Carefully record** any physical or behavioural observations and anything said by the person (use the persons own words as far as possible and include date, time, who was present etc)

**Consult** immediately with the manager or nominated senior person in charge. Discuss and agree on an appropriate course of action, including whether a notification is to be made.

# **Report Concern -**

The manager or senior person in charge should contact Age Concern or the police and make a notification.

Consultation with Age Concern or police will take place to decide who will provide follow up and support.

A debriefing meeting will be held, and additional support will be provided to all staff involved as required. e.g. EAP

Age Concern contact numbers National: 04 801 9338 Christchurch/ West Coast: 03 366 0903 Marlborough: 03-579 3457 Mid Canterbury: 03 308 6817

Nelson: 03 544 7624