



Pwojè Espwa Sud (ESPWA) Child Protection Policy

About Pwojè Espwa Sud (ESPWA)

Espwa's mission is to alleviate the devastating effects of poverty on vulnerable children in Southern Haiti.

Pwojè Espwa Sud (ESPWA) was founded in 1998 as a traditional orphanage in Southern Haiti. After 20-years, ESPWA evolved from an orphanage to a child development center – to make every attempt to keep children in the most natural and supportive environment possible – the family. ESPWA is committed to strengthen families, providing the best opportunity for children to develop.

ESPWA provides vital programs for children and support for their families with the ultimate goal of keeping the family unit together.

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Declaration of Principle

The **Child Protection Policy of ESPWA** is based on the **United Nations Convention on the Rights of Children**, which stipulates in **Article 19** that:

Children have the right to be protected from malicious and ill-treatment, physical or mental. Governments should ensure that children are treated appropriately and are protected from violence, abuse or neglect from their parents, or any other person who takes care of them. Any form of discipline that includes violence is unacceptable.

Haiti ratified the **United Nations Convention on the Rights of Children** in December 1994, without declaration or reservation.

The **Child Protection Policy of ESPWA** is also based on a set of Haitian laws on child protection. We especially consider:

1. The law of 29 April 2003, on the elimination of all forms of abuse, violence, child abuse: **Article 2**,
2. The law of 6 July 2005, amending the sexual assault regime and eliminating discrimination against women: **Articles 2 and 3**,
3. The law of 22 December 1971, on who manages social activities in Haiti. This law gives **IBESR** the power to control all types of activities carried out in children's homes, their functioning, and the conditions for taking care of children. The **Act** also gives **IBESR** the authority to close any center that practices abuse and violence against children living in that center, including orphans, abandoned, and vulnerable children. And,
4. The law against human trafficking ratified by **Parliament** on 28 May 2014. This law provides a program of prevention, protection, and coordination against any person while considering the different categories of victims. **Section 2** applies particularly to children.

ESPWA undertakes to ensure that all children with whom they work are protected regardless of age, disability, gender, racial heritage, religious belief, sexual orientation, or identity. The organization explicitly recognizes the additional needs of children living in poverty, those from minority ethnic groups, and children with disabilities who face traditional barriers, specifically on discrimination and communication. The **Child Protection Policy of ESPWA** applies equally to all children without discrimination.

The following considerations are the key components of the approach taken by ESPWA in forming their Policy:

1. The well-being of children is paramount,
2. Prevention is vital,
3. Risk is actively managed,
4. Openness and responsibility are mandatory,
5. Appropriate partnership work is maintained with the State and other partners,
6. A culture of informed and equitable vigilance is promoted,
7. Staff skills are developed and updated regularly, and
8. The practice is regularly evaluated.

Concepts and Definitions

For the purposes of this Policy, and in concurrence with the **United Nations Convention On the Rights of Children**, a child is defined as any person under the age of eighteen (18).

A **vulnerable adult** is *"a person over the age of 18 who is, or could, be in need of community care services for mental health reasons, learning disabilities, physical handicaps, age or illnesses which, as a result, makes it more vulnerable to maltreatment or abuse. This includes young people who have left the institutions, who have lived in difficult and dangerous conditions such as living on the streets or living in situations of slavery."* In this document, all child-related procedures should also be applied in the protection actions of vulnerable adults.

Child abuse or **"abuse"** is *"Any form of physical and/or emotional abuse, sexual abuse, neglect or improper treatment, or commercial exploitation or any other form of exploitation, compromising the health, survival, development or dignity of the child in a context of responsibility, trust or power ».* (Definition of WHO, 2020).

There are different forms of child abuse. A person may abuse or harm a child, or fail to prevent the nuisance that may be done to the child. Children may be abused by the family, in an institution or in an environment formed by people they know, or more rarely, by strangers (e.g. through the Internet). They may be abused by one or more adults, or by another or other children.

Physical abuse is a form of abuse that involves striking, shaking, violently pushing, poisoning, burning or scalding, drowning, choking, or any other form of physical nuisance to the child. Physical abuse can be caused by a parent or someone in charge of the child who is at the source or causes the symptoms of illness in the child.

Emotional abuse is a persistent form of child abuse that affects his or her emotional development. Emotional abuse can:

1. Consist of words or behaviors that show a child that it is useless or unloved, inadequate, or that it has a value only if it satisfies the needs of another person,
2. Consist in not giving the child the opportunity to express his or her point of view, silence them, or make fun of what they say, or how they communicate. This may be due to inappropriate expectations for the child's age or development.
3. Include interactions that are beyond the child's developmental capacity, as well as over protection and limitations in learning opportunities, or the prohibition of participation in normal social interaction.
4. Include being a witness or hearing about other abuse.
5. Involve harassment (or cyber harassment) where the child often feels exposed or in danger, or exploitation or corruption of children.

It is important to understand that a certain level of emotional abuse is present in all types of child abuse, but it can exist alone.

Sexual abuse involves a child or young person who takes part in sexual activities, even if this does not necessarily imply a high level of violence, whether or not the child is aware of what is happening. These activities may involve physical contact, including penetration (e.g. rape or oral sex) or non-penetrating acts such as masturbation, kissing the child, rubbing or touching clothing. This may also include non-contact activities, such as when children have to observe, or are part of the production of sexual images, or when children are encouraged to behave sexually inappropriately or are flattered in preparation for acts of abuse (including via the Internet). Sexual abuse is not only perpetrated by adult males. Women can also commit sexual abuse as well as other children.

Sexual exploitation of the child is a form of child sexual abuse. This happens when an individual or group takes advantage of a power imbalance to coerce, manipulate, or deceive a child or young person younger than 18 years in a sexual activity in exchange for something the victim wants or needs, or for an advantage over the victim. The victim can be exploited even if the sexual activity seems consensual. The sexual exploitation of the child does not always involve physical contact; this can happen through the use of technology.

Negligence is a permanent failure to meet the basic physical and/or psychological needs of the child, most often resulting in a disability of the child's health or development. Neglect may occur during pregnancy as a result of substance abuse of the mother.

Once the child is born, negligence may imply that a parent or person in charge of the child neglects to:

1. Provide adequate food, clothing, or shelter, including exclusion from home and abandonment,
2. Protect the child from suffering or from physical and emotional danger,
3. Ensure adequate supervision, including the use of inadequately responsible persons,
4. Ensure access to appropriate medical care or treatment, and
5. Meet, or lack of response to, the child's basic emotional needs.

The historical abuse: It is not unusual for people to talk about experiences of physical, sexual and/or emotional abuse, and/or neglect, only when they reach adulthood or when they feel safe. Historical abuse is defined as a situation where the child as a person, suffered a certain degree of physical, sexual and/or emotional suffering (through abuse or neglect), which was so intense that there should have been intervention of protective agencies in the life of the child and his family.

Online abuse is any form of abuse occurring online – including through internet browsing, social media, online games, mobile phones and applications. Children may be at risk on the part of foreigners, or people they know. Children may experience sexual abuse, be coaxed, sexually exploited, harassed online or emotionally abused. Abuse can be online, or may occur partly in the real world.

Intentional abuse can be defined as abuse or abuse by negligence or by individuals in any care facility. Neglect and lack of ethics in professional practice must be considered. This can take the form of isolated incidents or can turn into systematic and visible abuse. Abusive actions include non-standardization of care; neglect to meet urgent needs, rigid routines; inadequate staff, incompetent or lacking in experience.

Discriminatory abuse is inappropriate behaviour based on the social identity of the person and affecting the dignity of the victim. This can be a persistent behavior or an isolated incident. The main problem is that actions or comments are perceived as diminishing or unacceptable by the person when motivated by discriminatory attitudes, feelings or comments. Abusive actions include racism, sexism, harassment based on disability or sexual preference.

Child trafficking is, according to International Law, "the recruitment, transport, transfer, maintenance, or reception of a child for the sole purpose of exploitation". A child is tampered with when he or she has been moved in or out of the country, by force or not, in order to exploit the child.

Child labor *"is often defined as the work that removes children from their childhood, their potential and their dignity, and which violates their physical and mental development. This refers to work that: is mentally, physically, socially or morally dangerous and bad for children; and interferes with their education by taking away the opportunity to go to school or forcing them to leave school prematurely, or asking them to combine their presence at*

school with long days of hard work. In these most extreme forms, child labor involves slavery, separation from their families, exposure to diseases and dangers and/or having to fend for themselves on the streets of big cities – often at a very young age.

Other vulnerabilities

There are some factors that can put children at greater risk of being abused. The presence of one or more of these factors does not necessarily imply that the abuse will occur, but rather increases the chances.

1. When there is an imbalance of power and control,
2. When there is a dependency on other people,
3. When there is a need for intimate care
4. When the burden of caring for a child becomes too heavy,
5. Living in the same house as a known abuser,
6. When there is a history of abuse in the family,
7. When there are people with a history of abuse of alcohol, drugs, or other substances, or mental health problems,
8. When there is a lack of knowledge of the rights of the child or what constitutes abuse,
9. In institutions that lack staff or training for staff, and/or supervision is inadequate,
10. Financial problems,
11. When there is a deterioration in the quality of life of adults in the home, for example, through the loss of a job, or through a disease,
12. When there are cultural differences and language barriers, and
13. When the behavior of a child or someone taking care of the child, is difficult or unpredictable.

Indicators or Symptoms of Abuse

It is important to remember that the presence of one or more of the following risk factors does not necessarily mean that a child is abused. However, that increases the possibility.

Physical abuse

Most children will show cuts or bruises resulting from the usual activities of a child's life. However, an important indicator of physical abuse is the presence of bruises or injuries that cannot be explained, not matching with the explanations provided, or visible on parts of the body generally not exposed to this type of injury. A delay in seeking medical treatment can be a source of concern.

1. Open wounds, bruises, dents, black eyes, burns, bite marks, broken bones,
2. Untreated injuries to different degrees of healing or not treated properly,
3. Dehydration and/or malnutrition not related to a disease,
4. Weight loss
5. Dirty clothes or bed linens
6. Frame or lenses of eyeglasses damaged or broken and remaining unrepaired,
7. Physical signs of having been subjected to punishment or to have been attacked,
8. Improper use of drugs, overdose or under dosage,
9. Proof of self-inflicted injuries, sign of severe blood loss,
10. Depression or distant or emotionally removed behavior, and
11. Aggressive behavior.

Emotional abuse

Signs and symptoms of emotional abuse include:

1. Feeling of impotence or powerlessness,
2. Hesitation to speak openly,
3. Confusion or disorientation,
4. Anger without apparent cause,
5. Sudden changes in behavior,
6. Unusual behavior – sucking, biting, swaying,
7. Unexplained fear,
8. Becomes extremely withdrawn, non-communicative, or non-responsive,
9. Unable to play,
10. Afraid to make mistakes,
11. Harms self or others, and
12. Delay in emotional development.

Negligence

1. Smell of feces or urine,
2. Dirty – specifically deep dirt – evidence of not bathing for a long time,
3. Redness, sores, lice,
4. Inadequate clothing for weather conditions,
5. Untreated medical conditions,
6. Weight loss or constant low weight,
7. Excessive consumption of free food,
8. Complaint of feeling tired,
9. Having few friends, and
10. Mention of being alone frequently or without supervision.

Sexual abuse

1. Complaint of pain close to breasts or genitals,

2. Evidence of vaginal discharge or bleeding from anus,
3. Torn or stained underwear,
4. Irritation and scratching of the genitals,
5. A child saying he was attacked sexually, or raped, or that someone did something wrong,
6. Afraid of being left with a particular person or group,
7. Having nightmares,
8. Running away from home,
9. Have knowledge of sexual activities, or abuse, beyond their age or level of development,
10. Making sexual drawings,
11. Urinating at night,
12. Self-mutilation or suicide ideas,
13. To say that he/she has secrets that he/she cannot share,
14. Substance abuse,
15. Having sudden sources of money or gifts, and
16. Sexually explicit behavior towards adults.

Institutional abuse

The standards of care vary enormously throughout the world as well as the quality of supervision and regulations. ESPWA, as well as its partners, encourages governments to minimize the use of residential care and seeks to demonstrate that institutions demonstrating the following facts can be considered as not respecting the rights of Children:

1. Lack of flexibility, choices, or options,
2. Lack of opportunities for drinks or snacks,
3. Lack of dignity and respect,
4. Wounds, tears in the skin, dehydration,
5. Child looks neglected and smells bad,
6. Lack of clothing and toilet preparations for common use,
7. Inappropriate constraint,
8. Inadequate procedures for financial management,
9. Frequent change of staff,
10. Dirty and smelly infrastructure, especially toilets,
11. A staff member has a history of often changing jobs,
12. Intercepting mail and restricting visits,
13. Children subject to disparaging remarks,
14. Public discussion of personal topics,
15. Delayed response to requests for medical or personal care,
16. Missing or lack of documentation,
17. Excessive control of children and their activities,
18. Children are abusive towards the staff and towards each other,
19. High mortality rate,
20. Recurring diseases,
21. Children spending their days on their beds,
22. Lack of formal educational program,
23. Unsafe environment – beds close to radiators, beds too small or inappropriate size, no emergency evacuation procedures in place, no fire extinguishers, children sharing their beds with other children with significant age differences or different sex, and
24. Unsafe practices such as children with disabilities eating unsupervised or alone.

Discriminatory abuse

Discriminatory indicators of abuse take the form of many other types of abuses mentioned earlier. The difference is that abuse is motivated by discriminatory attitudes, feelings or behaviour towards individuals or a group of children. There may, however, be non-intentional

discrimination such as lack of access to disabled children or lack of answers to their particular needs.

Online abuse

Many signs that a child is abused are the same regardless of the type of abuse that occurs. A child may be a victim of online abuse if he or she:

1. Spends a lot of time online, texting, playing online, or using social networks,
2. Is withdrawn, annoyed or angry after using the Internet or having texted,
3. Remains secret about the people he/she is talking to, and what he/she is doing online or on their mobile phone, and
4. Has a lot of new phone numbers, texts, or email addresses on mobile phone, laptop, or tablet.

The Conditioning

The conditioning of a child is the establishment of an emotional bond with him to gain his confidence for the purposes of sexual abuse, sexual exploitation or trafficking. Many children and young people do not understand that they have been conditioned or that there has been exploitation or abuse.

An aggressor can have any age – it may even be the same age as the child. Often, during conditioning, the aggressor offers something to the child; for example, food, drugs, alcohol, gifts, or simply affection, and the victim is led to believe that the perpetrator is a close and trusted friend. The following behaviours – although most are typical adolescent behaviour – may be signs of conditioning, especially when there are more and more changes in these behaviours in children or young people:

1. Being secretive about where he/she goes and with whom he/she speaks,
2. Often goes home late or does not go home at night,
3. Sudden change of appearance and wearing revealing or age inappropriate garments,
4. Having new possessions, such as clothes or cell phones, and not being able or wanting to explain how they were received,
5. Getting involved in drugs or alcohol,
6. Becomes emotionally unstable,
7. Uses sexual language or displays age inappropriate knowledge of sexual activities,
8. Has less contact with usual friends and spends more time with older friends or girlfriends,
9. Seems to be controlled by or obsessed with the cell phone, and
10. Switches to a new screen when someone approaches the computer they are using.

Other signs and symptoms of abuse

Here are other clues that might indicate that abuse is occurring or has occurred:

1. The child has no right to speak for himself or to see other people without the Guardian being present,
2. The Guardian shows an attitude of indifference or irrational anger towards the child,
3. The Guardian blames the child for things that are out of the control of the child (eg, incontinence),
4. There is a history of other people's abuse by the Guardian,
5. Guardian shows inappropriate signs of affection,
6. The Guardian causes excessive social isolation of the child,
7. In the case of an incident, the report of the Guardian and the child are incompatible or do not match, and
8. There are indications of unusual containment or constraint, for example, the child is in a room tied to a piece of furniture.

Roles and Responsibilities of ESPWA

The Manager of Child Protection or the Manager of Operations for ESPWA (in that order) are the **designated point of contact** for the organization. As such both managers should have a good knowledge of child protection, and who has the overall responsibility for child protection issues.

All child protection issues of abuse and violence must be reported to the designated point of contact through the chain of command. As senior managers, these individuals are responsible for referring all incidents and reports to the Institute of Welfare and Research (IBESR) and the juvenile Protection Brigade (BPM) after a full investigation is completed (usually within 48 hours).

The designated point of contact in the ESPWA framework must have good knowledge of this child protection policy and the direct experience of working with children and young people. All employees must receive child protection training each year and upon onboarding of new employees.

The role and responsibility of this designated point of contact is to provide support to staff who work directly with children and youth, and to provide advice and response to any staff member who raises issues related to the protection of the children.

Depending on the level of comfort and experience of the designated point of contact, direct referrals may be made to the IBESR and BPM, and they can then inform ESPWA the proper direction.

In case of absence for leave, or illness, the ESPWA designated point of contact may designate another officer in the framework of the organization to take lead responsibility.

The personnel and volunteers at ESPWA all have a responsibility to identify and report any concerns of abuse or suspicion of abuse. Failure to report an observation, a report of an incident from a third party, an allegation that has been received, albeit uncertain, could result in disciplinary action.

If only one person who works for or with ESPWA is aware of a situation in which a child suffers, or is at risk of suffering, that person must always act.

It is not the responsibility of particular person who works for ESPWA to conduct an investigation process to determine the veracity of an allegation or concern.

Any concerns regarding child protection and the well-being of children should be reported as soon as possible to the ESPWA designated point of contact.

Any person who has these concerns or fears should report such to the ESPWA designated point of contact:

1. Fears that a child is suffering or is likely to suffer abuse,
2. Has been informed by a child that he/she has been abused or is likely to be abused,
3. Is aware of an allegation that a child has been abused, or is at a serious risk of being abused should immediately inform the designated point of contact of ESPWA. The designated point of contact of ESPWA should collect all relevant information in order to process it and follow up with the IBESR and/or BPM.

4. ESPWA should respond to allegations of abuse of an abuse that would have occurred during childhood (an historical abuse) in the same way (and with the same concern and attention) as it responds to a current allegation of abuse because:
 - a. It is likely that a person who mistreated a child or children in the past has continued and continues to do so,
 - b. It is likely that the person who has been abused needs support, and
 - c. A criminal prosecution could be started if sufficient evidence can be gathered.

A staff member who has a concern about a risk posed to children should report this concern to the designated point of contact of ESPWA. The designated point of contact is available to provide advice and direction. The staff member should not feel embarrassed to raise backup issues, and if it is not possible to contact the appropriate person in the chain of responsibility, the staff member should not hesitate to contact the next person in the chain of responsibility.

If a child is believed to be exposed to an RIFA because of a member of ESPWA, or a member of the staff of the latter, it is necessary to inform the designated point of contact of ESPWA immediately.

Reporting a colleague's behavior is often awkward. The employee may be concerned that he is overreacting or that he is wrong to act on his concern. It is important to consider the possible consequences of inaction if the concerns are well-founded. An information policy is used to protect the staff member if a well-established concern is found to be wrong.

Responding to a Report of Abuse or Neglect

Often a child does not disclose his or her concerns about abuse to senior staff, but rather to the members of the staff he knows and whom he trusts. It is then important for staff to know how to respond if a child discloses abuse or neglect, or if the general behaviour of the child leads to a staff member asking if all is well and the child is making a disclosure. The staff member should:

1. **Listen carefully.** The majority of children have difficulty talking about abuse. If the child has found the courage to talk to you it is because he believes that you can help him. It is not during this important conversation with the child that one must try to guess whether what he is saying is true or not.
2. **Let the child set the tone of the conversation.** Try not to ask questions (unless you need to clarify what the child says). Do not step in to fill breaks in the conversation. Let the child tell you as much as he wants without interrupting. Encourage him to continue the conversation by nodding his head and keeping eye contact with him.
3. **Once is enough.** Once it is obvious that you will have to report what the child told you, do not ask him to repeat his story. Make sure that the child knows that you are taking what he is telling you seriously and that you are going to ask for help from someone who knows what to do in this kind of situation.
4. **Be honest.** Answer as honestly as possible to the questions the child asks you. If you do not know the answer to a question, tell the child that you do not know but that you will try to find the answer.
5. **Do not investigate or confront.** You are responsible for the transmission of information-not for an investigation. Do not confront the alleged aggressor as this could lead to difficulties for the police in a possible investigation.
6. **Privacy.** Do not promise the child to keep secret what he tells you about an abuse. You will surely need to share this information to keep the child safe. If the child only wants to talk to you if you guarantee that the conversation will be confidential, tell them that if they or someone else is in danger of being injured, you will have to share what they say.
7. **Injury.** If the child is proposing to show you injuries, illustrate the locations of the wounds on a diagram of the body map. Discourage the child if he wants to show you injuries on the intimate parts of his body.
8. **Reassure.** Reassure the child that he was right to report his concerns and that the case will be taken seriously. Tell him what you will do as the next step. Tell him who will be there to support him in the process, and keep him informed of what is going on.

Generally, you should listen, offer your support, and transmit any pertinent information.

If an adult discloses a historical abuse, the same rules apply: The staff member should listen and gather information in a neat manner, reassuring the adult that is believed and taken seriously. The adult should be told that the case will be reported to the local child welfare services in order to protect the other children.

Reporting and response process

The recording of the details is important and should be completed as soon as possible after disclosure. We should use an ESPWA report form to report any concerns about child protection by providing as much information as possible. Instructions for filling the form will be attached to this one. The key elements are as follows:

1. Record the date, time and place of disclosure.
2. Save the date and time that you created the report document.
3. Sign the report document including your name and position in capital letters.
4. Make sure that the document is readable.
5. Keep your personal copy of the document in a safe place where no one else has access to it.

6. Make sure that the document is as correct as possible. Do your best to remember words used by the storyteller and save them, without being bothered by vulgar words or trying to clean up the language that was used.
7. Distinguish clearly between the facts that the storyteller has told and any comments you wish to make about these facts.

This process should be followed for historical abuse reports such as for children or vulnerable adults.

Within 48 hours after disclosure, any concerns should be recorded on a report form and sent to the designated point of contact of ESPWA. The documents in question must be kept safe so that only the designated point of contact of ESPWA and the members of ESPWA Management have access. The designated point of contact of ESPWA should keep records of all incidents and concerns, actions taken and results. We will trust all this to inform the development of a good backup practice.

Support for staff and volunteers

Staff members who respond to a child protection concern, especially those who respond to an abuse disclosure in children or adults, will have the opportunity to report on their responses and discuss, if they wish, the feelings and emotions that the experience has caused for them. The designated point of contact of ESPWA and other members of ESPWA management will offer support. If requested, and if appropriate in the circumstances, a referral to an external agency could also be made for counselling and support services.

Code of Conduct

No ESPWA staff members or volunteers should behave or act in a way that could be a bad practice or could harm vulnerable children or adults. We have to consider the damage that could be caused directly and indirectly.

All staff members and volunteers must have read and understood the child protection policy and must sign an agreement to implement the policy in all the work they do.

Physical contact with Children

1. Always wait for the child to start any physical contact, if any.
2. Never strike a child or punish him physically (including the use of restraints to contain behaviour).
3. Never participate in fighting or wrestling games.
4. Never help the child with his or her personal care activities (such as dressing, bathing, etc.)
5. Never participate in games of a sexually provocative character, nor allow them, and never behave in a way that could be seen as inappropriate or sexually provocative.
6. Never sleep in the same room or bed as a child you work with.

Interactions with Children

1. Always be aware of the power relationship between an adult and a child and avoid any action that might exploit it.
2. Be aware of the body language of the child or young person when communicating with him or her and pay special attention to any anxiety or discomfort that he or she demonstrates by responding appropriately. Discuss any concerns with the focal point (abuse and violence).
3. Never discriminate, or show a different or preferential treatment towards particular children by excluding others.
4. Never give gifts to a particular child. If it is appropriate to offer a gift, offer it to the whole group. Do this only with the prior approval of the local agency.
5. Treat all children equally, regardless of age, sex, disability, religion, sexuality, etc.
6. Do not make suggestions, advice or promises, or use language, which is inappropriate, offensive or abusive to or against children.
7. Never exchange money, goods or services for sexual intercourse with a child.
8. Never participate in any activity or behaviour that is illegal, aggressive, abusive, or that could constitute a danger, or tolerate this type of activity or behaviour.
9. Never consume alcohol or smoke in the presence of children.
10. Do not take pictures or videos of children unless you adhere to the media guidelines.
11. All staff who work directly with children and young people should have a working mobile phone. They should use this phone exclusively to communicate with children and young people.
12. Staff should never give their personal phone numbers to the children and youth they work with.
13. The above rule also applies to e-mail addresses. Staff should use their computers and work email addresses to communicate with children and youth and not give them their personal addresses.
14. To the extent possible, communication with children and young people should be done during normal business hours.

Social media

1. Do not post images or share personal information about beneficiaries in your social media accounts.
2. Don't be ' friends ' with children in your personal social media accounts.

3. Do not post images or share personal information with the children you work with.
4. In all your communication with children and young people, act in a professional way.

Risk Management

1. Be aware of situations that might pose risks and take active steps to reduce them.
2. Report concerns or suspicions of abuse or abuse in a child immediately, following the reporting process described in this document.

General behavior

Staff members must not:

1. Consume alcohol while they are responsible for children or young people (including evenings while children are asleep as members may be called in case of an emergency).
2. Discuss their own personal relationships with or in the presence of children or their families.
3. Discuss their personal relationships in inappropriate places or contexts.
4. Discuss any confidential information about the children, their families or ESPWA In inappropriate places or contexts.

If, in spite of the measures mentioned above, a staff member fears that a child has developed a relationship with him that he deems inappropriate, for example, a relationship of dependency, parental figure or sexual feelings, the staff member should speak immediately with the designated point of contact of ESPWA.

The situation needs to be treated in a discreet manner to avoid anxiety or discomfort to the child or young person. In most cases where the child has been attached to a staff member, this member should stop working with the child and the child should continue to work with another staff member.

The concept of professional boundaries should be explained to the child, but only if he is old enough to understand it and if the explanation will be beneficial to him so that he does not feel abandoned. There is also a need to provide support to the staff member in question.

The likelihood of this happening can be reduced if staff members follow the Code of Conduct above, if they are candid from the outset with children and young people that their role is a professional role, if they do not share their addresses or personal telephone numbers, and if they avoid divulging personal information to their charges.

Institutional Care

1. All children who are resident in a room, should have their own care plan and an updated personal assessment, including a risk assessment and a plan to address the identified risks. Staff should read the assessment and the child care plan before working with them.
2. All staff members should respond consistently and in an agreed manner when working with a child who demonstrates a difficult behaviour.
3. Staff should have an opportunity to report with a manager following a situation or incident in which they reacted to a child's difficult behaviour.
4. Staff should know where all children and youth are at any time and should report a disappearance to the organization's management as soon as they find out. The management of the organization will decide whether to report the child's disappearance to the competent authorities and/or the child's family according to the situation of the child.
5. There should always be at least two staff members working in each room, including night staff.
6. There should always be a guard manager who can support the staff in case of an emergency.
7. Children should be listened to well and given the opportunity to report any allegations as soon as possible. Staff members should immediately report any allegation of abuse to the focal point (abuse and violence).
8. All staff should be aware of child protection procedures and know how to report a concern about it.
9. Management should make it very clear to staff that it will support them if they raise a child protection concern for another staff member, even if the concern is found to be wrong.
10. The manager should work to build a strong backup culture in the home, where children are listened to, respected and involved in the development of the home and in making decisions about it.
11. Staff should encourage children to express their views as to whether they feel safe at home and outside. Staff should support children in understanding how to seek help in order to stay safe and that the home is an environment that promotes this.
12. Staff should support children to understand what abuse is. They should be given information on how to report abuse and any concerns about possible abuse.
13. All staff will have a monthly conversation with a manager in which child protection is permanently included on the agenda.

Recruitment and Training of Staff

One of the basics of the ESPWA approach is to prevent incompetent and/or perverted persons from being in situations of trust with children. As a result, the organization adopts the principles of safer recruitment to minimize the risk of this happening.

The following guarantees are implemented in the recruitment of any staff member:

1. Candidates will have to explain any career interruptions.
2. A police check will be completed for each member of the ESPWA Staff, and any job offer will be conditional on an acceptable audit.
3. Staff members will have to undergo a police check every three years.
4. When it is not possible to complete a police audit, references will be asked to be interviewed by telephone to determine the candidate's suitability.
5. Two references will be required, including one from the candidate's last employer. The candidate's family members and those who have known him for less than two years are not acceptable references. The references that the candidate could contact with children will be told and they will be asked to raise any possible child protection concerns.
6. Proof of identity and certificates of qualification will be requested.

There will be an initial training on the Child Protection Policy for all new ESPWA staff members. Child Protection officials will receive specialized training. There will be an annual update for all staff members as well as an annual update for specialists.