Protecting Children
Active Prevention and Immediate Response

Compassion International’s Guide to Protecting Children From Abuse
Protecting Children: Active Prevention and Immediate Response

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to Protecting Children From Abuse

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## Contents

**Foreword**  
5

**Introduction**  
9

- God and Child Protection  
10
- Child Abuse and Domestic Violence  
11
- Child Abuse and Poverty  
11

**Hurting Children**  
13

- What Is Child Abuse?  
13
- Four Types of Abuse  
14
- Recognizing Child Abuse  
17
- Who Commits Child Abuse?  
22

**Restoring Hope**  
25

- Compassion’s Commitment to Child Protection  
25
- How Does Compassion International Provide a Safe and Nurturing Environment for Children?  
26

**Active Prevention and Immediate Response**  
28

- How Does Compassion International Protect Children From Abuse Within the Organization?  
28
- Child Protection Policies  
28
- Component of Child Protection Implementation  
29
- Code of Conduct  
30
- What You Can Do: Key Steps in Responding to Child Abuse  
31
- Listening Well  
32
- Responding Immediately and Appropriately  
35

**References**  
40
When will it ever stop? From olden times children have been abused. In *The Battered Jewish Child in Antiquity*, Meir Bar-Ilan investigated the early Jewish literature and concludes:

> Among the Jewish people as among other peoples, children were beaten or even killed – a practice which gained the approval and encouragement of the social authorities. In fact, battered children were found in all social strata, from the lowliest child to the royal prince.¹

History is eyewitness to children beaten, hurt, lashed, insulted, raped, murdered, neglected and abandoned to die. This is not an issue Compassion International could simply turn its back against because the victims are our very own. In Kenya a young child is being repeatedly bitten by her mother; in Honduras the pastor of a church partner is accused of sexual misconduct against a child; in Haiti a visitor could hear the sound of a teacher beating a child with a stick; in the Philippines a young girl bears a child from rape; in Thailand a 14-year-old girl is regularly used by her father whenever he is drunk. The horror list goes on and on.
While the commission of the abuse itself is appalling enough, what is truly troubling is that children have no way to fight back. The Bible could not describe them any better—“those who cannot speak for themselves.”

Below are the words of a grown man who as a child was abused and needed many years of healing from deep physical, emotional and spiritual wounds:

“…my spirit sank lower and lower. I developed a slurred speech pattern in the presence of adults; too frightened to speak, I began to talk without moving my lips…. I was trying to express myself when (our teacher) grabbed the front of my shirt, picked me off the ground, and screamed into my face, ‘Enunciate, you idiot!’

“I can still hear the screeching of her voice and feel her breath on my face and the stranglehold on my neck. My classmates sat petrified. She finally dropped me to the floor again. I stumbled back to my seat, choking back my tears, sat down, and wet my pants. What she didn’t recognize was that my spirit had been destroyed.”

These are the words of Dr. Wess Stafford, president of Compassion International. In his book Too Small to Ignore he narrates how as a young boy growing up in Africa he was hurt and abused by people who claimed to be servants of the heavenly Father. Dr. Stafford admits that he “endured such treatment only by the grace of God and the care and kindness of the other children.”

If child abuse is not confronted and prevented, the screeching voice of insult and defamation, the stranglehold of abuse on the neck and the hurts that penetrate the spirit shall be heard by the children for many, many years to come. They shall continue to “choke back their tears” and “wet their pants.” Many shall fall by the wayside and would grow up unlike Dr. Stafford, victorious only by the grace of God.
Protecting Children: Active Prevention and Immediate Response is an orientation booklet that provides essential information for Compassion International staff, church partners and supporters on child abuse and child protection. It tells how we can detect various forms of child abuse, what we can do to prevent it, and how we can respond appropriately to assist children in actual cases of abuse.
You can be an instrument of God’s grace and put a stop to this vicious cycle of cruelty. Safeguard the children in Compassion-assisted projects from all forms of abuse and exploitation by:

• Providing a positive and safe environment for children that enables them to fulfill their potential;
• Engaging the active commitment of “caring adults” (family members, local church project staff, Compassion International employees, donors and sponsors) that surround them, to care for children with dignity, respect and integrity at all times; and
• Preventing and/or reducing the risks of incidence of abuse through enforcing policies, strategies and procedures on child protection.

All children under Compassion’s ministry will be treated with dignity, respect and integrity by Compassion employees, church partner staff, parents/guardians and sponsors/donors. Our employees and local church partners are enjoined to pursue all measures of prevention and appropriate response so that all our assisted children will thrive in a nurturing and child-safe environment where they can develop fully into all that God wants them to be.
Introduction

It is very easy to take advantage of a child. Children are so tiny and cannot fight back, even if they try.

Miriam (not her real name) and her younger siblings are no match for their father. He regularly picks them up and throws them out the door or down the stairs. He does this because he can. Miriam is careful not to burn the rice or break the dishes or else she will get a terrible beating from her mother. During the day, their mother usually ties her two littlest children while the older children go to school. She does this because she can.

Nine-year-old Miriam could not do anything but cry to her mentor, Anna (not her real name), who would later rescue the children from their parents’ abusive ways. In the process, a much more horrifying story surfaces: Miriam was sexually abused by her own father and uncle!

Miriam was a Compassion-sponsored child and Anna was her project director.

Today Miriam and her siblings are happily living with foster parents who love them so much. Their father is in jail while her mother is now living with another man. Miriam is forever thankful to her project director and to Compassion for rescuing her and her siblings.

Compassion cares for the children and will not tolerate child abuse. Compassion values little children because they are important to God. Because the Bible must have the final authority in regulating human treatment including children, these little ones must be treated with dignity, care and much love. “Over and over again God’s warning throughout the Bible is ‘Don’t touch My precious children.’” (Taken from the Oxford Statement on Children at Risk.)
One of man’s innate longings is the protection and preservation of his dignity. Human dignity does not come from wealth, skin color or family name. It is a gift from God. Our heavenly Father formed us in our mother’s womb with intricate precision (Psalm 139:13-17; Psalm 22:9-11). He uniquely and specially formed and fashioned each and every child that enters into the world, and this is the beginning of man’s significance and dignity. Each child matters to God.

God specifically instructed His people to honor the children in the congregation and to include them in the discussion of scriptures. (Deuteronomy 6:7, 11:19-21; 31:12-13; Psalm 78:4)

Children exude a kind of praise that only they can give God (Psalm 8:2; Matthew 21:14-16)! Jesus enjoys this kind of praise and does not want them stifled and harmed. He defended children when they were discriminated against by the disciples (Matthew 19:14). Our Lord Jesus even warns grown-ups against mistreating children and admonishes them to become like children because the kingdom of heaven belongs to the little ones.

When children are harmed and abused, the heavenly Father comes to their rescue. “He defends the cause of the fatherless” (Deuteronomy 10:18) because He is “a father to the fatherless” (Psalm 68:5).

As Compassion assists more than 870,000 children in 24 developing countries – cutting across vast cultural diversity – it shall create a cohesive front against child abuse that is based on scriptural principles. Cultural differences can present a challenge to forming a united stand against child abuse. Ideas about what comprises child maltreatments and proper parental behavior vary markedly among cultures. However, cultural customs and traditional practices must not take precedence over the biblical guidance for human relationships.
CHILD ABUSE AND DOMESTIC VIOLENCE

Many abusive practices are rooted in culturally accepted child-rearing dogma passed from generation to generation. Accepted cultural practices allow and in fact encourage parents to hurt their children in the name of discipline. In parts of Asia, children are tied inside rice sacks and hit with sticks; in parts of Africa, children are lashed in school; while in South America, children are made to kneel on beans for a period of time. “Spare the rod and spoil the child” becomes abusive when extended to broken bones and infected cuts.

While original intentions of parents or caregivers may be laudable, condoning such practices often leads to child abuse. The more a parent hurts a child, the easier it gets to abuse that child because all he can do is absorb the blows. He cannot defend himself. Research studies show that 80 percent of child abuse perpetrators are the biological parents of or known by the abused child.

Domestic violence often leads to child abuse. Another global study on violence reveals that “in 30 to 60 percent of families where either domestic violence or child abuse is found, the other is also found.”

When father and mother fight, the children suffer. After Miriam’s father discovered her mother’s infidelity, the poor little girl was beaten black and blue.

CHILD ABUSE AND POVERTY

A family breakdown takes a heavier toll on the children than on the warring couples. Much like domestic violence, poverty is rife with stressors that can easily hinder healthy family dynamics and lead to child abuse. Daniel Goleman, author of *Emotional Intelligence: Why It Can Matter More Than IQ*, writes, “The press of poverty corrodes family life. There tend to be fewer expressions of parental warmth, more depression in mothers (who are often single and jobless) and a greater reliance on harsh punishments such as yelling, hitting and physical threat.”
While child abuse can surface in any home – wealthy or poor – children growing up in poverty are especially vulnerable to its effects. Incest is also common in very densely populated slum areas. Poverty forces fathers (and in many cases uncles and grandfathers) to live together with girl children and teenagers in small, one-room home, sharing common beds, closets and toilets.

In most cases, children in poverty are neglected because the parent is not in a position to provide for the child’s health, education, emotional development, nutrition, shelter and safe living conditions. Because the family does not have reasonable resources available, the abuses children suffer cannot be blamed on a perpetrator but on the evils of poverty. This is why Compassion ministers to children in poverty. They are most vulnerable to the disparaging fruits of poverty, which include child abuse. Poverty breeds an environment suitable for child abuse to thrive, but it is never an excuse to deny the protection and nurture that children need.
Hurting Children

“People were bringing little children to Jesus to have him touch them, but the disciples rebuked them. When Jesus saw this, he was indignant.”

Mark 10:13-14

WHAT IS CHILD ABUSE?

Miriam’s story is true. It is true not only because it actually happened to a helpless, little girl but also because it is still happening to many children today.

The World Health Organization (WHO) published these startling findings:

• An estimated one in 5,000 to one in 10,000 children – under 5 – die each year from physical violence.
• Nearly one in 1,000 children each year are either brought to a health-care facility or reported to child welfare services as suffering consequences of abuse.

WHO offers a comprehensive definition of child abuse detailing the many forms of child mistreatment:

Child abuse and maltreatment constitute all forms of physical and/or emotional ill treatment, sexual abuse, neglect, negligent treatment, commercial or other exploitation that result in actual or potential harm to the child’s health, survival, development or dignity — within the context of a relationship of responsibility, trust or power.

The abuse Miriam and her siblings suffered could be classified as physical and sexual. However, the hurt goes beyond physical pain. The brunt of the abuse penetrates deep into the soul affecting the child’s entire outlook in life. Although Miriam has been rescued, she occasionally exhibits inappropriate affection toward the opposite sex, a tendency observed among many victims of sexual abuse. She continues to require counseling.
There are four types of abuse:

1. **Physical abuse**: Acts of commission by a caregiver that cause physical harm or have the potential for harm.

   At 16 years old, Geraldine (not her real name) volunteered to be departed from Compass’ program. She could still have had five good years at the center but she could not wait. She could not wait to move to another town...away from her grandmother. Geraldine’s parents separated when she was little and she was left under the care of her grandmother. But she did not get the care she needed because she would get beaten every day for no apparent reason.

   Just before Geraldine left the program, she was nearly completely deaf in her left ear. People at the center thought it was inborn – a rare deafness that got worse as she aged. Only after she was departed did Geraldine narrate how her grandmother would beat her and bang her head to the wall every day. Her left ear almost always got the worst beating. Sometimes people need to shout out to her or make gestures just so she can understand what they’re saying.

   Geraldine could not understand why her grandmother enjoyed hitting her. She thought perhaps her grandmother still could not get over the idea that she had to bear the responsibility of raising a granddaughter. Geraldine is not at all sorry for leaving her or the program. Although she misses her friends and activities at the center, she’s just happy to be out of harm’s way.

2. **Sexual abuse**: When a caregiver uses a child for sexual gratification.

   Nine-year-old Frenda (not her real name) was sexually abused by her grandfather. According to the program facilitator assigned to the area, the abuse came as no surprise because “all the ingredients to brew sexual abuse were there: Frenda is left alone with her grandfather every day inside a small, one-room shanty. Her father has left them for another woman and her mother works all day at a pub.”
No one in the center suspected the abuse. There were no explicit behavioral signs except that Frenda was exceptionally shy. Compassion’s church partner only learned about it from reports coming from the community. Frenda’s neighbors have heard her grandfather’s threats, “Don’t tell anyone about our secret or else I will kill you and your mother.”

Today, Frenda’s grandfather has gone hiding. The church is pursuing legal help with the support of Compassion’s country office. Frenda is undergoing trauma and psychological counseling.

3. Emotional abuse: The failure of a caregiver to provide an appropriate and caring environment; this includes behavior that has an adverse effect on the emotional health and development of a child. Examples of this include denigration, ridicule, threats and intimidation, discrimination, rejection and other nonphysical forms of hostile treatment.

Cristina (not her real name) wants to be a singer someday but is afraid she may not have the voice for it. When Winnie, her caseworker at the student center, tried to encourage her she responded, “Are you sure I can be successful someday?”

“Yes, of course, if you work hard,” Winnie reassured.

Cristina said, “That’s not possible. I’m stupid.”

Winnie was taken aback. She gathered her words and asked, “Who told you that?”

“My father,” Cristina said. “Every day he tells me I’m stupid. Oh not every day. Every time he sees me. He shouts at me ‘Stupid!’ and hits me on the head. When he is drunk he yells louder and hits harder.”

“You’re not at all stupid, Cristina,” Winnie said, hoping to lift up the young girl’s spirits. “I know you very well, don’t I? And I see you are bright, fun and wonderful.”

Cristina smiled and said, “Thank you. But I am stupid. I know I am.”

Dr. Wess Stafford has much to say about the evil of emotional abuse to a child:

“The spirit of a little child is a lot like wet cement. … All it takes is a single unkind word, an isolated act of cruelty or abuse to destroy a life! Again,
Satan knows this all too well. As I have shared these thoughts with people over the years, I have often seen their eyes well up with tears. They can remember exactly who almost destroyed them as a child.

“Tragically, it is usually easier to name this destructive person than someone who impacted your life positively. Someone somewhere looked at you and said you were ugly. Someone said you were stupid, clumsy, worthless or naughty – and the words made an impression on your soul with which you still struggle.”

Instances of emotional abuse go on undocumented and are taken lightly. Almost always the perpetrator gets his way. No one can press charges against this kind of abuse nor be jailed for it. It can be committed against a child and the effects may linger unchecked for a good number of years, nibbling on the young soul as termites on wood.

4. Neglect: The failure of a parent to provide for the development of a child – when the parent is in a position to do so – in one or more of the following areas: health, education, emotional development, nutrition, shelter and safe living conditions. (Neglect can be considered only in such cases where reasonable resources are available to the family or caregiver.)

Nerwin comes from a poor family that just got poorer after his mother left them for another man. She had enough of her husband’s drinking. He has been out of work for a long time. The father takes Nerwin’s gifts from his sponsor and sells them for his own use. Nerwin’s father stole from him and exhausted the little resource they had to satisfy his riotous living and therefore is guilty of child abuse: the neglect of his son.
RECOGNIZING CHILD ABUSE

Anna realized Miriam’s predicament when the child insisted on staying at the project director’s home. Miriam would not explain why but Anna sensed the child was bothered. Miriam stayed with Anna until late into the evening when the project director took her home. Miriam held tightly to Anna’s hand until they arrived at Miriam’s home. Anna could have easily dismissed this as nothing more than a child wanting to stay up late to play. Instead, she considered Miriam’s actions as signs of deep pain and trouble.

One does not need to be an expert in child psychology to recognize that a child is suffering from abuse. One only needs to exhibit genuine care – the willingness to give a child the attention he so deserves. And as you devote your time in caring for the little ones, always be on the lookout for these physical and behavioral signs.

Physical and behavioral signs of child abuse

<table>
<thead>
<tr>
<th>Types of abuse</th>
<th>Physical signs</th>
<th>Behavioral signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Abuse</td>
<td>Bruises or welts in various stages of healing or other visible injuries that appear on a child recurrently and cannot be explained by developmentally expected behavior.</td>
<td>Explanation for a physical injury that is inconsistent with the injury or the child’s developmental age.</td>
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<tr>
<td>Types of abuse</td>
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<tr>
<td>Physical Abuse</td>
<td>Unexplained or multiple broken bones, especially broken rib, severe skull fracture or other major head injury.</td>
<td>Persistent or repetitive physical complaints of unclear case, such as headache or belly pain.</td>
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<td>Burns or injuries in the shape of an object used to cause the injury such as bite marks, hand prints, cigar or cigarette burns, belt-buckle markings. Burns from immersion in scalding water or other hot liquids.</td>
<td>The parent/caregiver reports that a significant injury was self-inflicted or the child reports being injured by a parent or caregiver.</td>
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<td></td>
<td>Unexplained or repetitive dental injuries.</td>
<td>The parent/caregivers have delayed seeking appropriate medical care.</td>
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<td></td>
<td>Failure to grow at the expected rate in a child who seems hungry and eager to eat when offered food.</td>
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<tr>
<td>Sexual Abuse</td>
<td>Pain, itching, bruises or bleeding around the genitalia. Stained or bloody underclothing.</td>
<td>Bizarre, too sophisticated or unusual knowledge or behavior for the child’s age such as</td>
</tr>
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<tr>
<td>Sexual Abuse</td>
<td></td>
<td>asking others to do sex acts, putting mouth on sex parts, trying to have intercourse.</td>
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<tr>
<td></td>
<td>Venereal disease.</td>
<td>Child reports sexual abuse by a parent or adult.</td>
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<td></td>
<td>Difficulty walking or sitting.</td>
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<td></td>
<td>Discharge from the vagina or urine openings.</td>
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</table>

Physical and sexual abuses often leave marks on the child’s body. Caregivers will sometimes try to excuse injuries, suggesting that they are the result of normal childhood accidents. But there is a difference between injuries children incur from rough play and injuries that are symptomatic of physical abuse. And we need to learn to recognize these differences:
## Types of abuse

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<tr>
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<th>Behavioral signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Abuse</td>
<td>Delayed physical, emotional or intellectual development that is not otherwise explicable.</td>
<td>Impaired sense of worth, depression, withdrawal.</td>
</tr>
<tr>
<td>Neglect</td>
<td>Habits such as rocking or sucking on fingers in excess of expectation for developmental stage.</td>
<td>Extremes of behavior, such as overly aggressive or passive apathetic, empty facial appearance, decreased social interaction with others, phobias, generalized fearfulness or fear of parent.</td>
</tr>
<tr>
<td>Neglect</td>
<td>Constant hunger, begging for food or hoarding food. Fatigue or listlessness. Poor hygiene such as dirty hair, skin and clothes. Inappropriate dress. Malnutrition or failure to thrive not explained by physical illness. Delayed seeking professional attention for physical or dental problems.</td>
<td>Lack of supervision for long periods of time, inappropriate to the child's age or developmental stage.</td>
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<td>Neglect</td>
<td>Impairment of parent or caregiver due to substance abuse, physical or mental illness.</td>
<td>Over- and undercompliance of the child. Lack of selectivity in friendly approach to adults. Developmental regression, such as previously toilet-trained child reverting to incontinence. Sleep and appetite disturbances. Depression. Self-destructive behavior. Excessive and/or inappropriate fears.</td>
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<tr>
<td>Any Type of Abuse</td>
<td>Substance abuse. Unexplained absences from the child-care program.</td>
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</table>

**Types of abuse:**
- Neglect
- Any Type of Abuse

**Physical signs:**
- Impairment of parent or caregiver due to substance abuse, physical or mental illness.
- Substance abuse. Unexplained absences from the child-care program.

**Behavioral signs:**
- Over- and undercompliance of the child. Lack of selectivity in friendly approach to adults. Developmental regression, such as previously toilet-trained child reverting to incontinence. Sleep and appetite disturbances. Depression. Self-destructive behavior. Excessive and/or inappropriate fears.
Who Commits Child Abuse?7

1. Society commits Societal Abuse when it accepts a social, political, economic and cultural environment that actively encourages or tacitly condones violence against children, such as:

   a) political campaigns that encourage “clearances” of “street children”; 
   b) religions and cultures that encourage physical and humiliating punishment of children as acceptable child-rearing practices; 
   c) harmful traditional practices such as female genital mutilation, ritual sanctification, etc.; 
   d) high prevalence of violence in media; and 
   e) cultural attitudes that condone ideas of children as being the “property” of parents rather than regarding children as human beings deserving of equal rights.

2. The child himself could commit Self Harm by deliberately cutting or harming himself; pursuing suicidal thoughts or attempting suicide; or engaging in drug or substance abuse. In such cases the child needs to be protected from himself.
3. Peers commit **Peer Abuse** by bullying (physical and/or psychological); committing physical and sexual abuse, and gang violence.

4. **Adults.** It could be anyone: parents, relatives, neighbors, police, teachers, gangs and so on.

Abuse and violence against children may be perpetrated by adults within an organization that is supposed to be protecting these children such as local church project staff and volunteers, social workers, church leaders, teachers, house parents, sponsors, visitors or Compassion staff. Sadly, those who wish to sexually abuse children often seek out opportunities to work with children. Some researchers point out that pedophiles, on average, have molested 130 children before they are caught.

You may be sitting beside a child molester and you won’t even know it. You could be working with a child beater and not recognize it. Some common misconceptions about the profile of a child sexual abuser include: child sex offenders are creepy or weird looking, they are “dirty old men,” strangers are the biggest threat, and women never sexually abuse children. In most cases they appear to be normal people like you and me.

Any adult who sees the vulnerability of a child could abuse that child. It is very easy to mistreat children and be cruel to them; to hurt them and regard them as insignificant in society. Children are so little and powerless. They could not defend themselves even if they try.
Restoring Hope

“He said to them, ‘Let the children come to me, and do not hinder them for the kingdom of God belongs to such as these.’”

Mark 10:14

COMPASSION’S COMMITMENT TO CHILD PROTECTION

In support of Christ’s mandate to care for and protect His little ones, Compassion International is committed to safeguarding children in our programs from all forms of abuse and exploitation. In partnership with the local church, we do this by:

• Providing a positive and safe environment for children to learn and play.
• Engaging the active commitment of caring adults who surround them, to care for children with dignity, respect and integrity at all times.
• Preventing and/or reducing the risks of the incidence of abuse through enforcing child protection policies, strategies and procedures.

Cultural customs and traditional practices do not take precedence over the biblical guidelines for human relationships. God declares the value and dignity of human life. Adults and children are made in the image of God (Genesis 1:1; Psalm 139). God’s Word must have the final authority in regulating compassionate treatment of every human being, including children.
HOW DOES COMPASSION INTERNATIONAL PROVIDE A SAFE AND NURTURING ENVIRONMENT FOR CHILDREN?

While it may be impossible to prevent all cases of domestic violence and child abuse – especially those committed in the home – Compassion’s programs are intrinsically designed to care for the child by providing a community – whether at home, at church, in school, in the center or in society – that honors his God-given dignity thereby eliminating the chance for abuse and maltreatment.

Compassion’s programs challenge adults to interact with the child, guide him, pray for him, and always be there for him. The engagement of caring adults in the lives of children is central to Compassion’s programs. Our programs encourage and support parents and caregivers of the child as they have been given primary responsibility for his nurture and development. Such philosophy strengthens the family. The support, prayers and presence of a sponsor do not take over the responsibility and rights of parents or belittle the significance of family but rather enhance the care for children.

Very early in a child’s life, the Child Survival Program (CSP) inculcates in the heart and mind of each parent that a child is a gift from God and therefore the family should work together in ensuring his or her survival. The mother is taught practical skills in caring for the unborn, delivering
her baby, and nurturing an infant. The father is challenged to support the mother as she undergoes the beautiful process of bringing a child to life.

The Child Development Through Sponsorship Program (CDSP) shouts from its very core that children are important in the eyes of God and therefore should be loved, cared for and protected. One of its standards is to provide individual attention to each and every child. Compassion International assists nearly 1 million children worldwide. This means each and every one of these children receives individual attention. These are special times adults spend with them. In these times they are nurtured in an atmosphere wherein they are free to tell stories of their hurts, concerns and of possible maltreatment.

The Leadership Development Program (LDP) educates, trains and disciples youth leaders. They are taught how to handle their emotions and to speak up for what is right. They are given leadership opportunities that could empower them to speak up against child abuse.

Compassion believes that a child is of great value because he or she was created by God. It will therefore not tolerate child abuse.
Active Prevention and Immediate Response

How Does Compassion International Protect Children From Abuse Within the Organization?

Child Protection Policies

We believe that all of Compassion International’s staff and church partners and the vast majority of our sponsors and donors share and support the organization’s values of respecting and caring for children. But we must regrettably acknowledge that some people might seek to use our child sponsorship program to gain access to children for inappropriate purposes. In response, the following policies have been developed to direct all interactions of assisted children among Compassion employees, church project staff, project visitors and sponsors.

- Child Protection – Employee Interaction With Compassion-Assisted Children
- Child Protection – Project Staff Interactions With Compassion-Assisted Children
- Appropriate Visitor and Child Interactions
- Allegations of Child Abuse Against an Employee
- Travel of a Young Person Outside of His or Her Home Country
- Travel of Sponsored Children to Visit Donors Outside of Their Home Country
Components of Child Protection Implementation

• *Training and Education.* All Compassion employees, church partner staff and volunteers, assisted children and parents will receive training on principles and guidelines of child protection.

• *Screening and Recruitment.* All Compassion employees and job applicants at the Compassion-assisted church projects will undergo appropriate character reference checks before hiring.

• *Local Plan of Action.* All Compassion field offices and all Compassion-assisted church partners will develop a local plan of action.

• *Child Visitation Guidelines.* Visitors to Compassion sponsorship projects will be informed of child protection measures prior to visiting any of the church-based projects and assisted children. Guidelines will be made available through brochures and the Compassion Web site, compassion.com.

• *Communication.* Compassion is committed to child protection in
its publicity and external communications. All communications shall seek to preserve the child’s dignity and protect each family’s privacy.

- *Allegations of Child Abuse.* All complaints of child abuse will be handled with strict confidentiality and investigated immediately. We will thoroughly investigate every allegation of child abuse against a Compassion employee and make a determination about the validity of the allegation. Church partners will likewise develop a local plan of action to respond to allegation of abuse by their staff or volunteers.

**Code of Conduct**

Compassion staff and local church partners shall sign and adhere to a code of conduct and behavior that defines appropriate behavior and interactions with Compassion-assisted children.

The following guidelines shall be observed and practiced by Compassion officers and employees, local project staff and volunteers, church leaders, sponsors and donors and project visitors.

- I will promote proper respect and dignity for all children, and will demonstrate Christian love and care to them, regardless of their race, gender, age, religion or disability, social background and culture.
- I will never act in ways that will shame, humiliate or perpetrate any form of verbal, emotional, sexual or physical abuse on a child.
- I will promote the enforcement of disciplinary measures that: are based on biblical principles of dignity and value of children, teach children responsibility and reflect reasonable expectations for the age of the child.
- I will never use inappropriate language, physically strike children or develop physical or sexual relationships with them.
- I will avoid being alone or traveling alone with a child. I will be engaged in children’s activities in open or visible places.
• I will not solicit a dating relationship with a Compassion-assisted child or youth.
• I recognize that I may face substantial adverse consequences for breach of this code of conduct.
• I am aware that allegations of abuse will be reviewed and, as determined necessary by Compassion, investigated. I recognize that, if I violate this code of conduct, I may be subject to applicable local laws and to organizational disciplinary measures.

WHAT YOU CAN DO: KEY STEPS IN RESPONDING TO CHILD ABUSE

After that night when Anna accompanied Miriam home, she did not see her for the next two days. Worried, she visited the family. To her surprise, she saw the young girl black and blue with bruises. Miriam tearfully narrated that her mother ran away with another man and her father vented his anger and rage on her. Miriam pleaded to her project director to take her away along with her siblings.

Not sure what to do, Anna called Compassion’s country office. Immediately, Compassion staff arrived at the project and initiated the following interventions after proper assessment of the situation:

1. Moved Miriam to a temporary shelter where she is not at risk of further abuse and where she could receive treatment for her injuries.
2. Later referred her to a Christian social services agency with expertise in assessment and interventions in child abuse cases. This group also provided legal services and psychological help.
3. Filed a police report that later resulted in the arrest of Miriam’s father.
4. Located a nearby relative to take care of Miriam’s four younger siblings who were not at risk of abuse.
5. Prayed for and comforted Miriam.

Anna did the right thing by calling the country office. She did not play the role of hero but instead admitted her lack of expertise. The country office also did the best thing, which was to elevate the case to a Christian agency that specializes in assessing and intervening in child abuse situations.
As we are committed to “speak up for those who cannot speak for themselves” (Proverbs 31:8) – to support the weak and the little ones – our mandate is not limited to Compassion-assisted children alone. Below are key steps in responding to child abuse situations, inside or outside Compassion.

As a minister for children, the following two scenarios may happen to you:

1. Someone may come to you with an allegation of child abuse. That someone could be the abused child.
2. You yourself may witness an incident of abuse.

In both situations, what would you do? Listen to a child when he discloses to you an alleged abuse and respond accordingly.

Listening Well

Sometimes children or young people will want to talk about abuse. This may follow some specific activity. It may be that the individual feels safe with you as a worker. It may be that you know the child and his or her family well and have difficulty in believing what is being shared. At the time the child or young person approaches you to disclose that she suffered an abuse, here are some listening suggestions.¹

1. General points
   • Keep calm.
   • Don’t panic.
   • Don’t seek help while the child is talking to you.
   • Be honest.
   • Look at the child directly.
   • Do not appear shocked.
   • Let the child know that you need to tell someone else.
   • Assure the child that he or she is not to blame for the abuse.
   • Never ask leading questions.
   • Try not to repeat the same questions to the child.
   • Never push for information.
• Do not fill in words; do not finish the child’s sentences; do not make assumptions.
• Be aware that the child may have been threatened.
• Take proper steps to ensure the physical safety and psychological well-being of the child. This may include referring him or her for medical treatment or to a psychologist.
• Make certain that you distinguish what the child has actually said and the inferences you have made. Accuracy is paramount in this stage of the procedure.
• Do not let personal doubt prevent you from reporting the allegation to the designated child protection officer or social worker.
• Let the child know what you are going to do next and that you will let them know what happens.

2. Things to say:
   • Repeat the last few words in a questioning manner.
   • “I believe you.”
   • “I am going to try to help you.”
   • “I will help you.”
   • “I am glad that you told me.”
   • “You are not to blame.”

3. Things not to say:
   • “You should have told someone before.”
   • “I can’t believe it. I’m shocked.”
   • “Oh, that explains a lot.”
   • “No, not (the name of the accused). He’s a friend of mine.”
   • “I won’t tell anyone else.”

4. At the end of the disclosure:
   • Assure the child that it was right to tell you.
   • Let them know what you are going to do next.
   • Immediately seek help; in the first phase from the designated child protection coordinator or social worker.
• Write down accurately what the child told you. Sign and date your notes. Keep all notes in a secure place for an indefinite period. These are essential in helping social services or the police decide what is best for the child, and as evidence if necessary.
• Seek help for yourself if you feel you need support.

Always consider the best interest of the child. Keep in mind that when in doubt, you must make a decision that is in the best interest of the child. Ensure the immediate physical and psychological safety of the child.

Learn also to “listen” to children who may not be verbalizing their ordeals but could be reaching out to you through other means. The hurts and pains an abused child suffered could echo through physical and behavioral signs. Be keen and always genuinely caring so you could “hear” what they are “saying.”

Listen to children by recognizing abuse through their unusual behavior:

Maria (not her real name) was observed to be unusually shy and elusive. Luz (not her real name), her project director, often tried to break her shell but failed. Somehow the project director could sense something was wrong but could not exactly pin down the problem. Finally the day came when Maria finally divulged her problem to her trusted teacher. She told the painful story of being molested by her own father!

Immediately the teacher told Luz, who made a “random” visit to Maria’s home, not revealing to Maria that she already knew her sad story. During the visit, Luz could only observe a normal father-daughter relationship. The evil being committed in that little home was beyond the detection of untrained eyes.

Looking closely into the story, Maria exhibited behavioral signs of her ordeal: withdrawal and a report of sexual abuse committed by her father. When in doubt, you must make a decision that is in the best interest of the child. Any story or report of abuse must not be overlooked.

If you wish to assist children in holistic development, you are responsible for protecting the children from abuse and therefore need to know how to recognize abuse, respond to abuse and avoid situations that increase the probability of abuse.
Responding Immediately and Appropriately

Accusations or suspicions of child abuse demand a response.

In Maria’s story, Luz did not hesitate to visit the child’s home, although unsure what she was looking for. The next day, the project director met with the teacher and learned the details of Maria’s story. She later informed the pastor and the pastor made fervent prayer for Maria. Soon, Maria volunteered to tell her story to Luz. It turned out that her father, along with two neighbors, convinced the girl to “play” with them. They sexually molested Maria. Tests would later prove there were lacerations in the girl’s genitalia.

Maria’s mother would not help because she would rather protect her husband’s reputation. It turned out that Maria is not her husband’s daughter. Without the mother’s support, Luz would not let the matter just slide. She secured the help of the city social worker and acquired evidence of the molestation. A criminal case was filed and Maria was rescued. She moved to a Christian shelter and began to live a normal life.

Maria recently celebrated her 11th birthday in her new home. She has become very friendly to people although sometimes she still withdraws to be alone.

While abuse in the family may not be easily preventable by Compassion, it is important that you are (1) diligent to recognize abuse, (2) sincere in displaying genuine love and care for each child so that she can easily tell you her stories and (3) quick to respond.

As Luz did, solicit the help of an expert: the city social worker, a Christian counselor or the child protection coordinator in the country office. Even if you feel you can handle the situation, child abuse cases are best handled by many concerned individuals who could provide specific and necessary interventions for the child.
As a good response to the alleged abuse, plan when and how to approach people. Below is a flowchart to guide you:

Response Flowchart:

1. **Disclosure**
   - **Ask yourself, “How serious is the incident?”**
     - **Serious**
       - Seek help and advice from an expert (child protection coordinator, local social worker, police) or if necessary a group of individuals who can provide necessary help.
     - **Not sure**
       - Assess yourself:
         - “Have I handled something similar before?”
         - “Have I had training to handle something like this?”
         - “Do I feel comfortable handling this?”
     - **Not serious**
       - Handle it then inform a social worker or child protection coordinator.
   - **No**
   - **Yes**
Different responses to different actors of the abuse:

If the case involves a non-Compassion child, for instance in your community or church, consult the city social services, church leaders or the local police. (You may also seek expert advice from the country office.)

If the abuse was committed on a Compassion-assisted child and/or the alleged perpetrator involves non-Compassion personnel (e.g., father, neighbor, teacher) involve the country office immediately. Complete an Incident Report and immediately send to the concerned partnership facilitator by the most direct means.

Church leadership and Compassion as represented by the partnership facilitator shall seek assistance to create a plan to address the needs of known victims of abuse that may include counseling and legal assistance. Determine if the child is in need of psychological, trauma, financial, physical and legal interventions.

If the abuse was committed on a Compassion-assisted child and/or the alleged perpetrator involves personnel connected with Compassion (e.g., project staff, country office staff, sponsor), an immediate and careful response is required. The response takes the following form:

1. Complete an Incident Report. A written and signed incident report is the first item entered into a file document.
2. Country or Area Director, accompanied by a member of the country office management team, conducts a site visit to investigate alleged abuse.
3. Within 24 hours, a written report is provided to the next level of management.
4. The investigating group will take action to confront and immediately remove the alleged offender from contact with children. (This is not an indication of guilt.)
5. If appropriate, seek repentance and treatment for the perpetrator. Under no circumstances should the abuser be allowed to assume a position working with or around children.
6. If criminal action has occurred, work with Human Resources to engage local police action.
7. In the instance of a confirmed case of abuse, all external communications will be coordinated and cleared with the country office.

Church leadership, with help from Compassion, shall create a plan to address the needs of known victims of abuse that may include counseling, legal assistance, and psychological, trauma, financial, physical and legal interventions.

Below are further guidelines in reacting and responding to child abuse allegations:

• If your concern involves immediate harm to a child, act without delay, as inaction may place the child in further danger – for instance, if the child tells you he does not want to go home because he will surely get a harmful beating or perhaps bring about possible threat to his life.

• If you know any information about the maltreatment of a child, it is your responsibility to tell someone. Silence condones the act of abuse and encourages the perpetrator to go on.

• The responsibility of investigating allegations of child abuse in many countries lies with the police and local social services department. If you do not have access to these, you may ask the assistance of Compassion’s country office.

• Reports that are made maliciously or not in good faith are a mockery to the entire child protection process and could prove harmful to the children.

• The process leading to decision-making should be well documented and all facts or written allegations and responses kept on file.
• When a case is immediately dropped, the reasons for doing so shall be communicated to the person who reported the matter.

Keep in mind that if a child approaches you and discloses an abuse, the child is entrusting his life in your hands. Compassion International commits to support you as you pursue your role in restoring hope to that child. Compassion will support anyone who, in good faith, takes steps to protect children from a situation or a relationship that appears to place a child at risk.
References

1 Bar-Ilan, Meir. *The Battered Jewish Child in Antiquity*, online [http://www.biu.ac.il/~barilm/battered.html]


5 WHO Fact Sheet N150, 1997

6 *Caring for Children, National Health and Safety Performance Standards*, Appendix K, American Academy of Pediatrics, page 420


8 Elanor Jackson and Marie Wernham, page 149

9 Elanor Jackson and Marie Wernham, page 93

10 Elanor Jackson and Marie Wernham, page 151