<table>
<thead>
<tr>
<th>Child Protection Policy</th>
<th>Effective Date: March 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Next Review Date: March 2016</td>
</tr>
<tr>
<td>Approved by the Minister of Education</td>
<td>Signed:</td>
</tr>
<tr>
<td></td>
<td>Date:</td>
</tr>
</tbody>
</table>
1. RMI Ministry of Education
The Ministry of Education (MOE) is responsible for the administration and implementation of all elementary and secondary educational programs in the Republic, including provision of educational programs for children with special needs.

2. Guiding Principles
The MOE promotes a rights-based approach to child protection, in accordance with the UN Convention on the Rights of the Child, ratified by the Government of the Republic of Marshall Islands in 1993. MOE is committed to safeguarding and protecting children, maintaining vigilance and acting in their best interests.

3. RMI Child Protection Policy
This policy outlines the framework that the MOE uses to assess and manage the risk to the children participating in all of its programs, including any donor-funded programs, and the measures and systems put in place to respond to concerns about their wellbeing.

Children in educational settings, especially children with disabilities, are dependant on their teachers to care for and protect them. This policy covers RMI regular teachers, volunteer teachers and other staff engaged by the MOE to work with all children, including children with disabilities. The MOE will respond to concerns raised by staff, teachers and volunteers concerning non-volunteers through existing child protection procedures.

This policy is subject to review on a regular basis, as required, but not less than every two years.

4. Recruitment of teachers and volunteer teachers
The MOE will take all reasonable precautions to ensure that regular teachers and volunteer teachers have passed screening procedures and do not pose an unacceptable risk to children. Robust recruitment procedures will include criminal record checks, referee checks, interviews and self-disclosure.

5. Induction program
All regular and volunteer teachers are required to participate in an induction program that includes details of this policy as well as training in child protection issues, including recognising and responding to signs of abuse. Induction training materials are included in the annex to this policy.

---

1 For the purposes of this policy, a child is defined as any person under the age of 18 years
6. Code of Conduct

All regular and volunteer teachers are required to make a signed declaration of compliance with the Code of Conduct for Working with Children as a condition of their engagement. This includes an agreement to report to the designated child protection officer at MOE whenever they have a reasonable belief that a child has been harmed or is at potential risk of harm.

Under the code of conduct, all regular and volunteer teachers and staff must:

- Treat children with respect regardless of race, color, gender, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status,
- Not use language or behavior towards children that is inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate,
- Not engage children under the age of 18 in any form of sexual intercourse or sexual activity, including paying for sexual services or acts,
- Wherever possible, ensure that another adult is present when working in the proximity of children,
- Not invite unaccompanied children into my home, unless they are at immediate risk of injury or in physical danger,
- Not sleep close to unsupervised children unless absolutely necessary, in which case I must obtain my supervisor’s permission, and ensure that another adult is present if possible,
- Use any computers, mobile phones, video cameras, cameras or social media appropriately, and never to exploit or harass children or access child exploitation material through any medium,
- Not use or threat to use physical punishment on children,
- Not hire children for domestic or other labor which is inappropriate given their age or developmental stage, which interferes with their time available for education and recreational activities, or which places them at significant risk of injury,
- Comply with all relevant international and local legislation, including labor laws in relation to child labor,
- Immediately report concerns or allegations of child exploitation and abuse and policy non-compliance in accordance with appropriate procedures,
- Immediately disclose all charges, convictions and other outcomes of an offence, which occurred before or occurs during my association with the RMI MOE that relate to child exploitation and abuse.

When taking photographs or filming children for work purposes, teachers and volunteer teachers must,

- Assess and endeavor to comply with local traditions or restrictions for reproducing personal images before photographing or filming a child,
- Obtain informed consent from the child and parent or guardian of the child before photographing or filming a child. As part of this it must be explained how the photograph or film will be used,
- Ensure photographs, films, videos and DVDs present children in a dignified and respectful manner and not in a vulnerable or submissive manner. Children should be adequately clothed and not in poses that could be seen as sexually suggestive,
• Ensure images are honest representations of the context and the facts,
• Ensure file labels, meta data or text descriptions do not reveal identifying information about a child when sending images electronically or publishing images in any form.

Teachers and volunteer teachers and staff should understand that the onus is on them, as a person associated with the MOE, to use common sense and avoid actions or behaviors that could be construed as child exploitation and abuse.

7. Incident Reporting
In the course of their work, teachers and volunteer teachers may observe incidents where children are harmed or at risk of harm. MOE teachers, volunteer teachers and staff must immediately report to the designated child protection officer at MOE when they have a reasonable belief that a child is at risk or has been harmed.

8. Consequences
The MOE is responsible for managing and responding to any child protection concerns.

If, following a formal investigation, a person covered by this policy is judged to pose an unacceptable risk to children the MOE will take appropriate action. This may involve termination and legal proceedings.

9. Children with disabilities
A child with a disability is potentially more vulnerable to physical, emotional or sexual abuse or neglect than other children. MOE teachers and volunteer teachers and staff working with children with disabilities are required participate in induction training that raises their awareness of particular risk factors and provides examples of good practice.

10. Risk assessment
The MOE will conduct a risk assessment prior to the placement of RMI teachers and volunteer teachers\(^2\). This will assess the nature of the placement and identify any issues that represent a high risk. Mitigation measures will be put in place to reduce or remove any risks identified.

Annexes and Induction Program Training Materials
RMI MOE Code of Conduct for Working with Children

I…………………………………………… acknowledge that I have read and received a copy of the RMI Child Protection Policy, 2014. I agree that as a teacher or volunteer teacher, I must at all times comply with the RMI MOE Code of Conduct for Working with Children.

I agree to:

- Treat children with respect regardless of race, color, gender, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status,
- Not use language or behavior towards children that is inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate,
- Not engage children under the age of 18 in any form of sexual intercourse or sexual activity, including paying for sexual services or acts,
- Wherever possible, ensure that another adult is present when working in the proximity of children,
- Not invite unaccompanied children into my home, unless they are at immediate risk of injury or in physical danger,
- Not sleep close to unsupervised children unless absolutely necessary, in which case I must obtain my supervisor’s permission, and ensure that another adult is present if possible,
- Use any computers, mobile phones, video cameras, cameras or social media appropriately, and never to exploit or harass children or access child exploitation material through any medium,
- Not use or threat to use physical punishment on children,
- Not hire children for domestic or other labor which is inappropriate given their age or developmental stage, which interferes with their time available for education and recreational activities, or which places them at significant risk of injury,
- Comply with all relevant international and local legislation, including labor laws in relation to child labor,
- Immediately report concerns or allegations of child exploitation and abuse and policy non-compliance in accordance with appropriate procedures,
- Immediately disclose all charges, convictions and other outcomes of an offence, which occurred before or occurs during my association with RMI Dream that relate to child exploitation and abuse.

When taking photographs or filming children for work purposes, I agree to:

- Assess and endeavor to comply with local traditions or restrictions for reproducing personal images before photographing or filming a child,
- Obtain informed consent from the child and parent or guardian of the child before photographing or filming a child. As part of this it must be explained how the photograph or film will be used,
- Ensure photographs, films, videos and DVDs present children in a dignified and respectful manner and not in a vulnerable or submissive manner. Children should be adequately clothed and not in poses that could be seen as sexually suggestive,
- Ensure images are honest representations of the context and the facts,
- Ensure file labels, meta data or text descriptions do not reveal identifying information about a child when sending images electronically or publishing images in any form.

Signed:……………………………………… Date:……………………………………
Definitions and signs of abuse

1. Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to, a child whom they are looking after. A person might do this because they enjoy or need the attention they get through having a sick child. Physical abuse, as well as being a result of an act of commission can also be caused through omission or the failure to act to protect.

Signs of physical abuse may include:
- Any injuries not consistent with the explanation given for them,
- Injuries which occur to the body in places which are not normally exposed to falls or games,
- Unexplained bruising, marks or injuries on any part of the body,
- Bruises which reflect hand marks or fingertips (from slapping or pinching),
- Cigarette burns,
- Bite marks,
- Broken bones,
- Scalds,
- Injuries which have not received medical attention,
- Neglect-under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care,
- Repeated urinary infections or unexplained stomach pains.

Changes in behavior which can also indicate physical abuse:
- Fear of parents being approached for an explanation,
- Aggressive behaviour or severe temper outbursts,
- Flinching when approached or touched,
- Reluctance to get changed, for example, wearing long sleeves in hot weather,
- Depression,
- Withdrawn behaviour,
- Running away from home.
2. Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve making conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Signs of emotional abuse may include:
- A failure to thrive or grow particularly if a child puts on weight in other circumstances: e.g. in hospital or away from their parents’ care,
- Sudden speech disorders,
- Persistent tiredness,
- Development delay, either in terms of physical or emotional progress.

Changes in behavior which can also indicate emotional abuse:
- Obsessions or phobias,
- Sudden under-achievement or lack of concentration,
- Inappropriate relationships with peers and/or adults,
- Being unable to play,
- Attention seeking behaviour,
- Fear of making mistakes,
- Self-harm,
- Fear of parent being approached regarding their behaviour.
3. Sexual Abuse
Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual on-line images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Boys and girls can be sexually abused by males and/or females, by adults and by other young people. This includes people from all different walks of life.

Signs of sexual abuse may include:
- Pain or itching in the genital/anal area,
- Bruising or bleeding near genital/anal areas,
- Sexually transmitted disease,
- Vaginal discharge or infection,
- Stomach pains,
- Discomfort when walking or sitting down,
- Pregnancy.

Changes in behavior which can also indicate sexual abuse include:
- Sudden or unexplained changes in behaviour e.g. becoming withdrawn or aggressive,
- Fear of being left with a specific person or group of people,
- Having nightmares,
- Running away from home,
- Sexual knowledge which is beyond their age or developmental level,
- Sexual drawings or language,
- Bedwetting,
- Eating problems such as over-eating or anorexia,
- Self-harm or mutilation, sometimes leading to suicide attempts,
- Saying they have secrets they can not tell anyone about,
- Substance or drug abuse,
- Suddenly having unexplained sources of money,
- Not allowed to have friends (particularly in adolescence),
- Acting in a sexually explicit way with adults.
4. Neglect
Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born it may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, failure to ensure adequate supervision (including the use of inadequate care givers) or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Physical signs of neglect may include:
- Constant hunger, sometimes stealing food from other children,
- Constantly dirty or smelly,
- Loss of weight or being constantly underweight,
- Inappropriate dress for the conditions.

Changes in behavior which can also indicate neglect include:
- Complaining of being tired all the time,
- Not requesting medical assistance and/or failing to attend appointments,
- Having few friends,
- Mentioning being left alone or unsupervised.
Responding to a disclosure of abuse

The following guidance should be followed when responding to a disclosure of abuse:

- Do treat any allegations extremely seriously and act at all times towards the child as if you believe what they are saying,
- Do tell the child they are right to tell you,
- Do reassure them that they are not to blame,
- Do be honest about your own position, who you have to tell and why,
- Do tell the child what you are doing and when, and keep them up to date with what is happening,
- Do take further action (you may be the only person in a position to prevent future abuse),
- Do write down everything said and what was done,
- Submit a written report to your MOE designated child protection officer or a law enforcement officer immediately.

- Don’t make promises you can’t keep,
- Don’t interrogate the child – it is not your job to carry out an investigation – this will be up to the police and social services, who have experience in this,
- Don’t cast doubt on what the child has told you, don’t interrupt or change the subject,
- Don’t say anything that makes the child feel responsible for the abuse,
- Don’t fail to act and submit a written report.
Reporting suspected abuse

An accurate report should be made by a teacher or a volunteer teacher who becomes aware of a possible case of abuse. This should include:

- The date and time of what has occurred and the time the disclosure was made,
- Names of people who were involved,
- What was observed,
- What was said by whom,
- Name of person reporting and to whom reported.

The designated MOE child protection officer or law enforcement officer should then use the appropriate systems for the situation. Recording all information impartially and accurately is vital as this could be used as evidence later.
| **RMI MOE Teacher**  
<table>
<thead>
<tr>
<th><strong>Incident record form</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Your Name</strong></td>
</tr>
<tr>
<td><strong>School Name</strong></td>
</tr>
<tr>
<td><strong>Child’s Name</strong></td>
</tr>
<tr>
<td><strong>Date and Time of Incident</strong></td>
</tr>
<tr>
<td><strong>Observations</strong></td>
</tr>
<tr>
<td><strong>Record of what was said</strong></td>
</tr>
<tr>
<td><strong>Action Taken</strong></td>
</tr>
<tr>
<td><strong>Designated MOE child protection officer Informed (Date and Time)</strong></td>
</tr>
<tr>
<td><strong>External Agencies Contacted (Date &amp; Time)</strong></td>
</tr>
</tbody>
</table>
| **Police** | **Name and Contact Number:**  
| | **Details of Advice Received:** |
Children with disabilities

Children with disabilities are potentially more vulnerable to physical, emotional or sexual abuse or neglect than other children. Particular risk factors include:

- A need for practical assistance in daily living, including intimate care,
- A lack of continuity in care leading to an increased risk that behavioural changes may go unnoticed,
- Physical dependency with consequent reduction in ability to be able to resist abuse,
- An increased likelihood that the child is socially isolated,
- Lack of access to ‘keep safe’ strategies available to others,
- Communication or learning difficulties preventing disclosure.

In addition to the universal indicators of abuse or neglect the following abusive behaviours must be considered:

- Force feeding,
- Unjustified or excessive physical restraint,
- Rough handling,
- Extreme behaviour modification including the deprivation of liquid, medication, food or clothing,
- Misuse of medication, sedation, heavy tranquillisation,
- Invasive procedures against the child’s will,
- Deliberate failure to follow medically recommended regimes,
- Misapplication of programmes or regimes,
- Ill fitting equipment e.g. callipers, sleep board which may cause injury or pain,
- Some sex offenders may target disabled children in the belief that they are less likely to be detected.
Examples of good practice in child protection

- Always work in an open environment (e.g. avoiding private or unobserved situations and encouraging open communication with no secrets),
- Treat all children equally, and with respect and dignity,
- Always put the welfare of each child first,
- Maintain a safe and appropriate distance with children. For example, it is not appropriate for a volunteer teacher to have an intimate relationship with a child or to share a room with them,
- Build balanced relationships based on mutual trust which empowers children to share in the decision-making process,
- Make activities and other off site activities fun, enjoyable and safe,
- Involve parents and carers wherever possible. For example, encourage them to take responsibility for their children in the changing rooms. If groups have to be supervised in the changing rooms, always ensure parents, teachers, coaches or officials work in pairs,
- Ensure that if mixed groups are taken away on a residential trip, they should always be accompanied by a male and female member of staff. However, remember that same gender abuse can also occur,
- Ensure that at tournaments or residential events, adults should not enter children’s rooms or invite children into their rooms,
- Be an excellent adult role model. This includes not smoking or drinking alcohol in the company of children,
- Give enthusiastic and constructive feedback rather than negative criticism.
- Recognise the developmental needs and capacity of children and do not push them against their will,
- Secure parental consent in writing to act in loco parentis, if the need arises to administer emergency first aid or other medical treatment,
- Report to the appropriate MOE authority in writing a record of any injury that occurs to a child, along with the details of any treatment given.
Learning materials and resources

UNICEF publishes a wide range of relevant learning materials and other resources on its child protection website:

http://www.unicef.org/protection/

Additional learning materials and resources can be found on the following websites:


https://www.childwelfare.gov/outofhome/casework/children/disabilities.cfm