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Abuse

## 2. ABUSE

### 2.1 WHAT IS CHILD ABUSE?

There are many reasons why a perpetrator abuses children.



**Whatever the reason, abuse is always wrong, and it is never the child's fault. It is a fact that the majority of abusers are known to their victims.**

It is very important that abuse is stopped as soon as it is discovered for the sake of both the victim and the abuser. The sooner action is taken, the more likely it is that the abuse will stop and that the child will recover from his or her experiences.

It is not only adults who abuse children. Teenage abuse is a growing concern; this is when older children abuse younger children or their peers.

Child abuse does not refer solely to sexual abuse; there are four main types of child abuse. The following definitions of abuse are taken from, 'Working Together to Safeguard Children'.<sup>2</sup> We have included some of the signs which can act as clues to tell us that abuse has taken place. This list is by no means definitive nor does it mean that if a child shows one or more of the signs they have definitely been abused.

#### 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 fabricates the symptoms of, or deliberately induces illness in a child.

Signs may include:

- ⚡ Unexplained recurrent injuries or burns
- ⚡ Improbable excuses or refusal to explain injuries
- ⚡ Self-destructive tendencies
- ⚡ Fear of physical contact, a shrinking back if touched

<sup>2</sup>Working Together to Safeguard Children March 2010 (Department of Children, Schools and Families).

### 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 and development.

Neglect may occur during pregnancy as a result of maternal substance misuse.

Once a child is born, neglect may involve a parent or carer failing to:

- ⌘ provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- ⌘ protect a child from physical and emotional harm or danger
- ⌘ ensure adequate supervision (including the use of inadequate care-takers)
- ⌘ ensure access to appropriate medical care or treatment
- ⌘ it may also include neglect of, or unresponsiveness to, a child's basic emotional needs

Signs may include:

- ⌘ Constant hunger
- ⌘ Inadequate clothing
- ⌘ Constant tiredness
- ⌘ Poor personal hygiene

### 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 conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. 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 (including cyber 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 may include:

- ⌘ Delays in physical, mental and emotional development
- ⌘ Continual belittling of oneself
- ⌘ Over-reaction to mistakes
- ⌘ Extreme fear of any new situation
- ⌘ Inappropriate response to pain
- ⌘ Neurotic behaviour

### Sexual Abuse

**Sexual abuse** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Signs may include:

- ⚡ Sexual knowledge, including drawing sexually explicit pictures, or use of language inappropriate for the child's age
- ⚡ Being over affectionate in a sexual way that is inappropriate to the child's age
- ⚡ Regression to younger behavioural patterns such as thumb sucking
- ⚡ Self-mutilation, suicide attempts, running away, overdosing, anorexia
- ⚡ Sudden loss of appetite or compulsive eating

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### ⚡2.2 SUBSTANCE ABUSE

Young people attending church organisations are also at risk of being exposed to substance abuse. This can range from smoking to experimenting with solvents, alcohol and drugs. It is important that leaders are aware of the danger signs and include awareness training in their programme planning for high risk groups. For contact details of useful organisations in this field see Section 12.

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### ⚡2.3 DOMESTIC ABUSE AND CHILDREN

Violence against women and men in the home is a serious crime, which causes enormous health and social problems and emotional and psychological damage, not only to the victims, but also to their children. Children are often witnesses and are necessarily affected by the anxiety and personal threat to themselves. Domestic violence is the most common form of interpersonal crime and also the least reported.

Leaders should be aware that children may not only overhear or observe violence in the home, but may become direct victims, either accidentally or deliberately. The social pressures to remain within a violent home and the stigma which parents perceive in relation to living in refuges or temporary accommodation as single parents should not be underestimated. It is important for leaders of church organisations to be aware that agencies such as PSNI/An Garda Síochána and Health & Social Care Trusts have developed policies to help in situations of domestic violence and that advice, support and help are available from the Women's Aid Federation (NI & RoI). Men experiencing domestic violence may also have to seek refuge; accommodation may be available in the Simon Community (NI & RoI).

The impact of domestic violence on children can lead to physical, psychological and behavioural disorders and may subsequently affect them when they become parents. Many of these concerns will have a pastoral response from the Church.

## ::2.4 BULLYING



**All kinds of bullying are wrong and should not be tolerated within organisations of the Presbyterian Church in Ireland.**

Our organisations should be a safe and welcoming place for all children. All organisations should develop a culture of openness where children and leaders feel able to say if they or their friends are being bullied.

### **What is bullying?**

The government defines bullying as, “Deliberately hurtful behaviour repeated often over a period of time”.<sup>3</sup> Bullying can happen anywhere to anyone; anyone has the potential to bully others.

### **What forms does it take?**

Bullying can be name calling or teasing. Bullying is often physical; victims are pushed, punched, kicked and hit. Victims can be forced to do things they don't want to do or are left out of games or ignored by others. Cyber bullying is when bullies contact their victims via text messaging or the internet. This often intensifies the bullying as victims have little escape from their bullies.

### **Preventative Measures**

All leaders should try to prevent bullying within their organisation. However, if it does happen, leaders must deal with it and not ignore it. All organisations are encouraged to write an anti-bullying policy based on these guidelines to suit their own needs (a sample policy is available in Section 12). Children and young people should be a part of that process. There is also an anti-bullying factsheet in Section 12 designed specifically for children.

If children are new to the group or spend a lot of time on their own, leaders should encourage others to befriend them. Having friends is one of the best defences against bullying. Leaders should always reward and acknowledge positive behaviour, especially young people who befriend others or prevent or stop bullying. Bullying should be discussed openly within the group and young people should be regularly encouraged to talk to the leaders about anything that is bothering them.

<sup>3</sup>[www.direct.gov.uk/en/Parents/Yourchildshealthandsafety/WorriedAbout/DG\\_10015786](http://www.direct.gov.uk/en/Parents/Yourchildshealthandsafety/WorriedAbout/DG_10015786)

### How to deal with bullying

- ⚡ Talk to the victim(s) and find out what has happened. Reassure them that it is not their fault and they have made the right decision in telling you. Make sure they are supported throughout the process.
- ⚡ Meet with those involved. It might be suitable to discuss the issue with all members of the group, not just those who are bullying. It is not necessary to mention the victim by name. Talk about how they would feel if they were being left out/called names etc.
- ⚡ Discuss how the situation could be improved - if bullying is happening how it can be stopped and how can everyone feel happier in the group. Make sure everyone within the group is adhering to the code of conduct or anti-bullying policy. Once everyone has agreed that bullying should not take place, agree what the consequences should be if it were to continue.
- ⚡ If the bullying continues, make sure the agreed consequences are carried out.
- ⚡ If the bullying is serious, report it to the Designated Person and to parents.
- ⚡ Ensure that adequate support is in place for the one who has been doing the bullying and all attempts have been made for them to be discouraged from repeating this behaviour.
- ⚡ Keep the situation under constant review.

### ⚡2.5 SELF-HARM AND SUICIDE

Increasingly people who work with children and young people are being faced with the issue of self-harm. In very basic terms it is 'the inflicting of physical pain to mask an emotional imbalance'. Anyone in this situation needs to be supported.

In 2004 the Royal College of Psychiatrists observed, 'Deliberate self-harm is a term used when someone injures or harms themselves on purpose. Common examples include "overdosing" (self-poisoning), hitting, cutting, or burning oneself, pulling hair, or picking skin, or self-strangulation. It can also include taking illegal drugs and excessive amounts of alcohol. Self-harm is always a sign of something being seriously wrong."<sup>4</sup> Disclosure of any self-harm should never be ignored; it is a clear sign that someone needs help and that self-esteem is low. Care should always be taken in how this problem is managed and advice should be sought at all times.



**The Social Issues and Resources Committee of the Board of Social Witness have produced a leaflet on self-harm; contact the office for a copy.**

For contact details of useful organisations in this field see Section 12.

<sup>4</sup>Royal College of Psychiatrists Self Harm factsheet 26, 2004

## Suicide

Whilst self-harm does not always lead to suicide, nor do those who attempt suicide self-harm, suicide can at times be seen as the ultimate act of self-harm.



**If a young person does disclose that they have suicidal thoughts then this should be treated as a child protection issue and thus the reporting process followed.**

Leaders must be aware that if a child discloses that they are suicidal then the leaders have a duty to inform parents or make sure they are informed. As in the case of all other pastoral concerns, ensure that individuals of any age are safe and have a network of support.

Signs of suicide:

- ⌘ Withdrawing from friends and family
- ⌘ Loss of interest in usual activities
- ⌘ Signs of sadness, hopelessness and irritability
- ⌘ Making negative remarks about themselves
- ⌘ Talking or writing about suicide
- ⌘ Putting their affairs in order
- ⌘ Giving away personal items
- ⌘ A sudden change from extreme depression to appearing to cope and being calm

These signs are not definitive but are possibly some of the signs displayed by someone who is suicidal. Others may show no sign of their pain at all. The only way to address our concern is to ask.

### **What to do if you think or know that a young person is suicidal?**

- ⌘ Listen to how they feel
- ⌘ Take them seriously
- ⌘ Offer your support
- ⌘ Encourage them to seek further help ie a doctor, professional counsellor, family member or friend
- ⌘ Follow the reporting process (See Section 3.2)
- ⌘ If they appear acutely suicidal and unable to talk, it may be necessary to seek immediate help through hospital casualty department

The Social Issues and Resources Committee of the Board of Social Witness has produced a leaflet on suicide; contact the office for a copy. For contact details of useful organisations in this area see Section 12.