

VICTIM CENTRIC RESPONSE STRATEGY

In Cases of Child Sexual Abuse and Exploitation

— For law enforcement



CHILD CENTRIC RESPONSE STRATEGY
IN CASES OF CHILD SEXUAL ABUSE AND EXPLOITATION

This is a training manual (textbook) developed under the Working Together for Children in Cambodia (WATCH) project that aims to prevent and tackle Sexual Exploitation of Children in Travel and Tourism (SECTT).

Author: Ms. Do Ngoc Thao (APPLE Consultant)

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— For law enforcement

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terre des hommes 
stops child exploitation

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APLE

Criminal Justice Development Program: capacity building activity lot

FOREWORD

The increased tourism, high rate of poverty, and the use of technology have heightened the risks of child sexual abuse and exploitation, and increased the vulnerabilities of children of Cambodia. Cambodia continues to be one of the most targeted destinations for traveling child sex offenders.

Under the 3-year Terres des Hommes Netherlands funded WATCH (Working Together for Children in Cambodia), this project aims to contribute to better protection of children through enhancing capacity of the law enforcement officials who are mandated to respond to such cases, following international standards and practices.

The development of this training manual was carried out with careful consultation with the law enforcement officials at different levels, and tailored to the local context and international standards. The purpose of this training manual is to equip the law enforcement officials with necessary skills and knowledge in responding to Sexual Exploitation of Children in Travel and Tourism (SECTT) in a victim centric approach, ensuring full respect of children's rights.

With the initial pilot in Phnom Penh, Siem Riep, and Sihanoukville, the project is expected to extend to other 11 provinces in Cambodia. By the end of the project, APLE Cambodia hope to spread the victim centric practices and culture, lobby for the national authority to adopt a legislation or national standards on victim centric response, and build inter-agency protocol in coordination and collaboration between law enforcement officials and NGOs, Department of Social Welfare, Hospitals, Clinics, etc. in the multi-disciplinary team responding effectively to child sexual abuse and exploitation cases.

This project, along with many different ongoing researches, programs, and activities signifies the commitment of APLE in protecting the most vulnerable children against sexual abuse and exploitation, and reaffirms the role of APLE in providing technical assistance in the work of Cambodian National Police, especially the Department of Anti Human Trafficking and Juvenile Protection.

I hope that the law enforcement officials will find this training manual helpful and shall use it effectively in training other law enforcement officials and promoting victim centric response strategy and culture.

Phnom Penh, 29 January 2019



Seila Samleang
Executive Director
APLE Cambodia

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This training manual is developed by Ms. Do Ngoc Thao, APLE Consultant. The design of this training manual benefits greatly from inputs of Mr. Samleang Seila — Executive Diretor, Mr. Khoem Vando - Child Protection Specialist, Ms. Orha Avigal — Training Resource Developer, Mr. Yi Moden – Case Officer, and Mr. Phay Sopheak — Criminal Justice Development Team Leader.

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A CRONYMS

ASEAN	The Association of Southeast Asian Nations
BID	Best interests determination
CBO	Community-based organization
CRC	Convention on the Rights of the Child
CSAM	Child Sexual Abuse Material
ILO	International Labor Organization
ISP	Internet Service Providers
NGO	Non-governmental organization
PTSD	Post-traumatic stress disorder
ToT	Training of trainers
UNICEF	United Nations Children's Fund
UNODC	United Nations Office on Drugs and Crime
UNTOC	The United Nations Convention against Transnational Organized Crime

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I NTRODUCTION

“Child-friendly justice” refers to justice systems which guarantee the respect and the effective implementation of all children’s rights at the highest attainable level, bearing in mind the guiding principles working with children and giving due consideration to the child’s level of maturity and understanding and the circumstances of the case. It is, in particular, justice that is accessible, age appropriate, speedy, diligent, adapted to and focused on the needs and rights of the child. This applies to children in conflict with the law, children who are victims or witness of crime, and children who may be at risk of entering into justice system.

Council of Europe. (2010). Guidelines of the Committee of the Council of Europe on child-friendly justice.

Project background

Research from the ground indicates that the law enforcement still lacks of sufficient capacity in terms of following child-friendly procedures, ensuring privacy and confidentiality of child-victims, and responding timely to reports and investigation of SECTT. A research of HAGAR in 2015¹ documenting the experiences of child-victims in contact with justice system showed the need to improve the knowledge, skills, and attitude of the law enforcement in respecting the child-victim’s rights and promoting child-friendly practices at the police unit. Thus, this project aims to improving the implementation of victim-focused approaches to addressing SECTT in the justice system, from reporting, intelligence gathering, throughout the court process, and following release. This will be achieved through the development/facilitation of capacity strengthening of the law enforcement agencies (LEAs) addressing proactive policing techniques, and the strengthening of community based reporting and referral mechanisms to ensure children’s best interests are served throughout the process.

The intermediate outcomes of the project are listed as follows:

- Intermediate Outcomes (IO) 2.1: National police have child-centric investigation skills to ensure adequate protection, child-friendly procedures, confidentiality and best interest for child victims and witnesses of SECTT during the investigations.
- IO 2.2: National police implement child-centric investigation standards in close coordination and collaboration with international law enforcement agencies on SECTT investigations.
- IO 2.3: National Committee for Counter Trafficking in Persons (NCCT) members have greater knowledge and commitment to sensitise and promote effective response towards SECTT.

¹ Hagar. (2015). A system just for children. Voices of child victims and witnesses about their experiences in the Cambodian Criminal Justice System.

In the end, the Government institutions relevant to criminal justice system have capacity to undertake child-centric investigations for better protection of SECTT victims and SECTT witnesses throughout the criminal justice process.

Foundations of the design of training manual – Results of Training Needs Assessment (TNAs)

Based on the requirements, the study team had conducted TNAs in 7 provinces among 11 selected provinces in the project, naming Sihanoukville, Kampot, Kep, Battambang, Siem Riep, Kandal, and Phnom Penh. The 7 provinces were selected based on: (1) the importance/seriousness of the CSAE issues in the area (high/low/potential risk areas); (2) the exposure of the Police Unit to the CSAE issues (more/less experiences); (3) geographic locations (urban/rural areas, centre/north-south/east-west), and (4) the availability of the Unit (working schedule). Focus group discussions (FGDs), In-depth interviews and Questionnaires are used methodology in the study.

Totally, there were 61 participants in the study, 11 at managerial level (Deputy and Chief) (18%), and 50 at non-managerial level (83%). 7 in-depth interviews with Deputy and Chief, and 7 FGDs with the implementing officers were conducted, and 58 questionnaires were collected.

The findings of the TNAs implied that:

Regarding to the content: The training manual shall be designed to cover from basic to advanced level to meet the different needs of the participants. The results of TNAs implies that (1) the Deputy and Chief had received different trainings on the topics, thus, advanced and add-on topics on CSAE shall add values to their work; (2) on the other hands, many implementing officers still lack of knowledge and practices on the basics of CSAE, thus, basic and core topics shall be incorporated in the manual for the later follow-up training.

Regarding to the methodology: Mixed methods shall be used in the training: case studies, pair discussions, brainstorming, etc. Applying adult learning principles, the training shall be more practical and resolve real-life issues rather than theoretical. The training is designed to balance the theoretical and practical aspects. After each lesson, exercises, case studies, additional information are provided to make the lessons more interactive and resourceful. The materials are designed to be visual, interactive, brief, and informative.

Regarding to the trainers: Trainer plays a critical role in disseminating the knowledge, facilitating the discussions, and assisting in the learning process. The trainer to be selected for the training is preferred one who have practical experiences on the ground, excel in facilitation and communication skills, and is flexible in delivering the lessons.

Regarding to the timeline: The duration for the training for the Trainers shall be from 3 to 4 days to cover all topics. However, for the follow-up training, depending on the needs and available resources of each Unit, the training can last from 2 to 3 days.

Regarding to the resources: The training is updated with the latest research training and methods in the field. The format of textbook, workbook, and facilitator's guide are adapted following the format of trainings of ILO and UN GIFT (Global Initiative to Fight Human Trafficking) Training Manual to Fight Trafficking in Children for Labor, Sexual and other Forms of Exploitation (including three textbooks, a workbook, and a facilitator's guide), and UNICEF Justice for Children Handbook and Manual.

The references used in the training manual are referred to international training standards and widely accepted materials such as UNODC Training Programme on the Treatment of Child Victims and Child Witnesses of Crime for Law Enforcement Officials, The Economic and Social Council Guidelines on Justice in Matters involving child victims and witnesses of crime, and Council of Europe Guidelines of the Committee of Ministers of the Ministers of the Council of Europe on child-friendly justice. The training manual also employs the best practices, and case study from the experiences of APLE and police officers in the Anti-human trafficking Department.

Objectives of the training manual

This training manual aims at:

- Strengthening knowledge, attitude, and practices of law enforcement officials in applying child-friendly principles in responding to child sexual abuse and exploitation (CSAE);
- Contributing to cultural change of police practices in responding to child sexual abuse and exploitation, toward building images of child-friendly police officials, and police stations to child victims, family/caregivers, and community;
- Strengthening the collaborations of law enforcement officials and other related child protection agencies such as NGOs, Department of Social Welfare Department, Hospitals, Schools, etc in responding effectively toward CSAE cases;
- Advocating for and piloting child-friendly practices at police station Unit, hence, gather evidences to advocate for establishing child-friendly procedures in responding to CSAE at national level.

In order to achieve these objective, the training manual aims to equip the participants with:

- Essential knowledge and practices in responding to CSAE in general and understanding child victims' rights and guiding working principles in international, regional, and national instruments (module 1);
- In-depth knowledge on the psychology of the child victims and offenders and the mechanism of how CSAE works, and special skills in working with child victims with disabilities (module 2);
- Techniques and skills in responding to CSAE following child-centric approach, skills in dealing with common issues, and using effectively resources and collaboration with child protection agencies (module 3);
- Managerial skills in planning for action change, and understanding of cultural change, thus, take a further step in changing practices at the participants' unit (module 4); and
- Facilitation skills in organising follow-up training skills for the participant's officers (module 5).

Composition of training manual

The training manual is composed of a Textbook, a Workbook, and a Facilitator's Guide.

The **Textbook** covers essential knowledge, attitudes, and practices to be used in the training course. The Facilitator shall use the Textbook to get familiar with the content and methodology of the training. Additionally, the Textbook is also used as a resource kit, with additional materials of documents, good practice notes, cases studies, and guidelines for websites, for further references of the participants, later Trainers, to design his/her own training course, as well as to acquire wider perspectives on the CSAE in particular.

The **Workbook** is designed for the participants to use during the course. This includes case studies, questions for discussions, quiz, and exercises. The participants can use the Workbook to take notes key contents from the lectures, results from discussions with fellows, as well as check answers of self-assessment test. The Workbook is used along the two above learning materials and assist the participants in marking his/her progress in the learning process.

The **Facilitator's Guide** is aimed at individuals and agencies delivering training courses using the manual; it includes lessons plans, timetable and methods of organizing activities, as well as suggested answers for each exercise. The Facilitator's Guide assist the Facilitator in customizing the contents of the training manuals to the needs of the particular groups of participants. The participants can later use the Facilitator's Guide to assist in designing their training course.

Structure of the training manual

The training manual is structured from basic to in-depth understanding of the issues, and from theory to applying theories into practice.

The training module is composed of five modules:

MODULE 1 cover basic concepts of child sexual abuse and exploitation. This includes definition of child sexual abuse and exploitation (CSAE), detecting signs of CSAE, its effects on children, and how to appropriately handle disclose of children. Additional, it highlights the rights and guiding principles of working with child victims specified in international, regional, and national instruments. The Module 1 also provides the “snapshot” of the issues of CSAE in Cambodia, raising awareness of the participants on the alarms of the issues. These are the essential knowledge and practices necessary for the work of any law enforcement officials in the field of CSAE.

MODULE 2 is at the advanced level, provides insights and underlying mechanisms of CSAE through the introduction of the working of memory, the Finkelhor's four precondition model for the abuse to happen, the Child Sexual Abuse Accommodation Syndrome on how the child reacts to the abuse, and specific cases on working with children with different types of disabilities. These are all prominent and latest theory and practices in the field of CSAE that are applied worldwide, and specially designed to train special police task forces. Getting an understanding of psychology of the offenders and victims, and mechanisms of how CSAE works underlies the reasons why certain procedures and practices should be followed when working with child victims and their (non-offending) families, thus, motivates the law enforcement officials to put in practices what they have learnt.

MODULE 3 is to apply the child-centric approach in the procedures of working with child victims, from initial response, investigation, interview, to follow-up. The Module 3 equips the participants with the application of child-friendly practices in each stage of response to CSAE, promote experiences exchange on addressing common issues, as well as introduce good practices on child protection from other places, as well as from Cambodia. The participants are also enhancing their skills on communicating with child victims, using non-verbal communication aids, and collaborating effectively with different stakeholders, including child victims' parents. The Module also introduces samples of forms that can be useful in the whole process.

MODULE 4 highlights the importance of child-friendly culture, seeks out the consensus or agreement from the participants, who are the managers at the Unit, to set up the child-friendly practices indicators, thus, provide opportunities to review the child-friendly practices as well as self-assess the degree of child-friendly of the participants' Unit. The Module 4 then moves from introducing the theory of organizational culture and behavior change to put in practices by instructing steps of program design, implementation and monitoring and evaluation.

MODULE 5 equips the essential skills and knowledge for the participants to design a participatory training course on the following components of the programs in which the participants organize follow-up training course for their officers at their Units. The Module, thus, introduces the adult learning principles, training tools and methodology, and steps in designing a training course. Being aware that many participants have acquired facilitation skills and are the Trainers by her/his own, this Module is designed to reinforce their facilitation skills and opens for exchange experiences on designing the training course with specific focus on CSAE topics.

In sum, core and basic topics includes Key concepts on CSAE (module 1), and Applying child-centric approach in police response to CSAE (module 3). advanced and add-on topics include Children's psychology (module 2), and Planning for cultural and behavior change (module 4). Add-on topics which helps in facilitating the follow-up training will be incorporated in (module 5) on facilitation skills.

The training manual is designed to equip Cambodia's National Police Forces with the latest, updated, practical, and interactive methods, content, and techniques. Hope that the training manual will be as a useful and effective source of material for the work of the law enforcement officials.



Used for Activity



Used for Exercise



MODULE 1

UNDERSTANDING CHILD SEXUAL ABUSE AND EXPLOITATION

LEARNING OBJECTIVES:

At the end of this module, the trainees will have the necessary knowledge and skills to:

- Gain understanding of key concepts related to child sexual abuse and exploitation (CSAE): definition of CSAE, signs of CSAE, consequences of CSAE, and the grooming techniques used by the perpetrators;
- List the international, regional, and national legal framework that protect the rights of child victims, and four guiding working principles;
- Understand the current situation of experiences of child victims in contact with Cambodia's justice system; and
- Identify the obstacles/challenges of applying the child-friendly practices at their Units, and propose solutions to address those challenges.

MODULE 1: UNDERSTANDING CHILD SEXUAL ABUSE AND EXPLOITATION



Photo Credit:
Flickr/UNICEF
Ethiopia

1.1. Key concepts of child sexual abuse and exploitation

1.1.1. What is child sexual abuse and exploitation?

The World Health Organization (WHO) defines child sexual abuse as: “the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person.²”

Child sexual abuse involves both contact and non-contact behaviors. Abusive physical contact or touching includes:

- Inappropriately touching the child with a sexual intention (such as groping and fondling)
- Having the child masturbate another person
- Sexually penetrating the child (inserting objects into a child’s vagina or anus or inserting a sexual device into a child’s mouth)
- Raping the child (vaginal sex, anal sex and oral sex)
- Using the child as a pornographic object (such as taking pictures and videos of sexual activities with children)

² World Health Organization. (1999). Social Change and Mental Health, Violence and Injury Prevention. Report of the Consultation on Child Abuse Prevention, pp. 13-17, Geneva.

Acts of sexual abuse that do not involve contact or touching include:

- Performing sexual activities (masturbation or sex with another person) in front of the child
- Exhibitionism (such as showing one's erect penis to a child)
- Persuading the child to participate in sexual interaction and erotic play
- Showing the child pornographic materials depicting acts of sexual intercourse by other children or adults
- Using the child as a pornographic object (such as taking pictures of children in swimsuits for sexual arousal)
- Viewing or downloading sexualized images of children
- Talking to a child using sexual innuendos
- Grooming by engaging the child in sexual conversations

Child sexual abuse becomes exploitation when a child or a third-party benefit through a profit. An Optional Protocol to the Convention on the Rights of the Child, Article 2 addresses three forms of sexual exploitation: (1) the sale of children, defined as any act or transaction whereby a child is transferred by any person or group of persons to another for remuneration or any other consideration; (2) child prostitution, the use of a child in sexual activities for remuneration or any other form of consideration; and (3) child pornography, any representation, by whatever means, of a child engaged in real or simulated explicit sexual activities or any representation of the sexual parts of a child for primarily sexual purposes.

1.1.2. Detecting signs of sexual abuse

Law enforcement officials and other professionals such as parents, teachers, caregivers, NGOs workers, and health care professionals can rely on these indicators to assist in the detection of cases of child sexual abuse, especially in children who are non-verbal. Any one sign or symptom does not mean that a child has been abused, but the presence of several signs may suggest a child is at risk.



ACTIVITY 1.1: Detecting signs of sexual abuse (Facilitator's guide)

Table 1.1: Physical, behavioral, and emotional indicators of child sexual abuse

Physical Indicators	
<ul style="list-style-type: none"> • Bleeding in the genital and anal area • Bruises in the genital and anal area • Difficulty walking • Itching in the genital area • Pregnancy • Presence of sperm 	<ul style="list-style-type: none"> • Pain on urination and/or bowel movements • Self-harm injuries (such as from suicide attempts) • Significant weight gain or loss (from appetite disturbances) • Sleep problems • Urinary tract infection

Source: Adapted from IRC & UNICEF. (2012). Caring for child survivors of sexual abuse.

Behavioral Indicators	
<ul style="list-style-type: none"> • Alcohol and substance abuse • Aggression • Bed-wetting • Delinquency • Disrupted peer relations • Eating disorders • Hostility • Hyperactivity 	<ul style="list-style-type: none"> • Impaired trust • Lying • Nightmares • Phobias • Running away from home • Sexualized behavior • Self-harm or self-mutilation • Suicidal thoughts and attempts
Emotional Indicators	
<ul style="list-style-type: none"> • Anxiety • Anger • Blame • Denial • Depression • Distress • Frustration • Guilt 	<ul style="list-style-type: none"> • Low self-esteem • Self-hatred or self-loathing • Shock • Sympathy and pity toward offender • Vengefulness • Emotional withdrawal • Worthlessness

Source: Adapted from UNODC. (2010). Training programme on the treatment of child victims and child witnesses of crime for law enforcement officials.

Below is the summary table on the common signs and symptoms according to age:

Table 1.2: Common signs and symptoms of sexual abuse according to age

Behavioral Indicators	
Pre-school children (0–6)	<ul style="list-style-type: none"> • Crying, whimpering, screaming more than usual • Clinging or unusually attaching themselves to caregivers • Refusing to leave “safe” places • Difficulty sleeping or sleeping constantly • Losing the ability to converse, losing bladder control, and other developmental regression • Displaying knowledge or interest in sexual acts inappropriate to their age
School-aged children (6–13)	<ul style="list-style-type: none"> • Similar reactions to children ages 0-5 • Fear of particular people, places or activities, or of being attacked • Behaving like a baby (wetting the bed or wanting parents to dress them) • Suddenly refusing to go to school • Touching their private parts a lot • Avoiding family and friends or generally keeping to themselves. • Refusing to eat or wanting to eat all the time
Adolescents (13–18)	<ul style="list-style-type: none"> • Depression (chronic sadness), crying or emotional numbness • Nightmares (bad dreams) or sleep disorders • Problems in school or avoidance of school • Displaying anger or expressing difficulties with peer relationships, fighting with people, disobeying or disrespecting authority • Displaying avoidance behavior, incl. withdrawal from family and friends • Self-destructive behavior (drugs, alcohol, self-inflicted injuries) • Changes in school performance • Exhibiting eating problems, such as eating all the time or not wanting to eat. • Suicidal thoughts or tendencies

Although the majority of sexually abused children do not engage in sexualized behavior, the presence of inappropriate sexual behavior may be an indicator of sexual abuse. Sexualized behaviors include such activities as kissing with one's tongue thrust into the other person's mouth, fondling one's own or another person's breasts or genitals, masturbation, and rhythmic pelvic thrusting. Sexualized behavior in children could be defined as problematic when:

- It occurs at a greater frequency or at a much earlier stage than would be developmentally appropriate (e.g. a 10-year-old boy versus a 2-year-old boy playing with his penis in public, or a 6-year-old girl masturbating repeatedly in school);
- It interferes with the child's development (e.g. a child learning to use sexual behaviors as a way of engaging with other people);
- It is accompanied by the use of coercion, intimidation or force (e.g. a 4-year-old forcing another to engage in mutual fondling of the genitals or an imitation of intercourse);
- It is associated with emotional distress (e.g. eating or sleeping disturbances, aggressive or withdrawn behaviors); and
- It reoccurs in secrecy after intervention by caregivers³.

Box 1: Can a child abuse another child?

Yes. Some children, especially younger children, may not understand that his or her forceful sexual actions toward another child are harmful. They can be the victims in some ways. While most child victims rarely sexually harm another child, without treatment they may be more vulnerable to and confused about what is considered inappropriate behavior. Though this is not always the case that the victims of child sexual abuse grow up to be adult sex offenders, multiple factors are associated with the development of sexually offending behavior in youth.

Source: IRC/UNICEF. (2012). Caring for Child Survivors of Sexual abuse

³ Guidelines for medico-legal care for victims of sexual violence.

1.1.3. Consequences of child sexual abuse

Victims of child sexual abuse may experience a range of effects – both immediate (i.e. occurring within two years from the incident) and long-term until they enter adulthood. The immediate effects may occur in all areas of development: sexual, emotional, social, cognitive, and physical, and they depend largely on the child’s age (as some of the symptoms mentioned above).

Box 2: What are the differences between the term “victim” and “survivor”?

The terms “victim” and “survivor” can be used interchangeably, although “victim” is generally preferred in the legal and medical sectors, and “survivor” in the psychological and social support sectors. It should be recognized that “whether a child moves or not from victim to survivor status will depend on the measures and services provided to her/him to address and overcome the consequences of her/his victimization.”

Source: Inter-agency Working Group on Sexual Exploitation of children.
Luxembourg Guidelines, page 80.



EXERCISE 1.1: Stories of Kim, Pich, and Chann (Workbook)

Many studies have shown the long-term effects of child sexual abuse into adulthood. The most obvious effect is psychological harm which includes, but is not limited to, depression, post-traumatic stress disorder, behavioral problems, including sexualized behavior, poor self-esteem, academic problems and suicide. Compared with non-abused adults, those who experienced childhood abuse are more likely to engage in high-risk health behaviors including smoking, alcohol and drug use, and unsafe sex; to report an overall lower health status; and to use more health services .

Depression: Depression has been found to be the most common long-term symptom among survivors. Survivors may have difficulty in externalizing the abuse, thus thinking negatively about themselves. After years of negative self-thoughts, survivors have feelings of worthlessness and avoid others because they believe they have nothing to offer.

Guilt, shame, and self-blame: Survivors frequently take personal responsibility for the abuse. It may be hard for the children to view the perpetrator, especially an esteemed trusted adult, in a negative light, thus leaving them incapable of seeing what happened as not their fault. Survivors tend to display more self-destructive behaviors and experience more suicidal ideation than non-abused ones, and frequently internalize negative messages about themselves.

⁴ Springer, K., Sheridan, J., Kuo, D., and Carnes, M. (2003). The long-term health outcomes of childhood abuse. *Journal of General Internal Medicine*.

Body issues and eating disorders: The survivors' body image problems to be related to feeling dirty or ugly, dissatisfaction with body or appearance, eating disorders, and obesity. This may include pelvic pain, headaches, and difficulty swallowing.

Stress and anxiety: Childhood sexual abuse can be frightening and cause stress long after the experience or experiences have ceased. Many times survivors experience chronic anxiety, tension, anxiety attacks, and phobias.

Dissociation: As adults, they may still use this coping mechanism when they feel unsafe or threatened. This includes feelings of confusion, feelings of disorientation, nightmares, flashbacks, and difficulty experiencing feelings.

Difficulties in establishing interpersonal relationships: Symptoms correlated with childhood sexual abuse may hinder the development and growth of relationships. Common relationship difficulties that survivors may experience are difficulties with trust, fear of intimacy, fear of being different or weird, difficulty establishing interpersonal boundaries, passive behaviors, and getting involved in abusive relationships.

Sexual difficulties: Depression and dissociative patterns affect the survivors sexual functioning. This may include avoiding, fearing, or lacking interest in sex; approaching sex as an obligation; experiencing negative feelings such as anger, disgust, or guilt with touch; having difficulty becoming aroused or feeling sensation; feeling emotionally distant or not present during sex.

Box 3: What is post-traumatic stress disorder? (PTSD)

Extreme stress and trauma resulting from victimization or from witnessing the crime can lead to an identifiable long-term illness called post-traumatic stress disorder (PTSD). PTSD can be difficult to diagnose and to treat. It is characterized by the following symptoms:

- Denial of any involvement in any exploitative situation
- Inability to remember or recall things clearly
- Inability to recall events in a chronological or sequential way
- Re-living the event through dreams, nightmares, flash backs and intrusive thoughts
- Avoidance of reminders of the event
- The person's general responsiveness is numbed to current events
- Persistent symptoms of high arousal such as sleep disturbance, aggressive behavior and poor concentration

PTSD is known to affect memory in different ways. Children suffering from PTSD may even be unable to produce a description of what happened. Lack of cooperation, hostility and impaired ability to recall events in detail are all likely to occur as a result of trauma.

1.1.4. Grooming techniques of the perpetrators

Definition of grooming: Deliberately undertaken actions that aim to prepare and deceive a child, significant adults (e.g. family or caretakers), the community, organizations and institutions for the abuse of the child. Specific goals are to gain access to the child, lower the child's inhibitions towards sex and consequently gain the child's compliance, and prevent the child from disclosing the abuse.

Profiles of perpetrators: Although there is a myth that sexual assaults are committed by strangers, it is a fact that most sexual assaults are committed by someone known to the victim or the victim's family. They can be family members (fathers, grandparents, siblings, uncles, aunts, cousins, etc.), or neighbors, religious leaders, teachers, health workers, or anyone else with close contact to children. Although the vast majority of sex offenders are male, females can also commit sexual crimes.

See below the common characteristics of the perpetrators based on the past working experiences of APLE:

Table 1.3: Profile of perpetrators

Characteristics	Details	Frequency
History characteristics	Victim of child sexual abuse in the past.	Middle
	No or little social contact with peers during teenage years.	Middle
	Time gaps in employment without clear reason.	Middle
	Moved more than once from place to place without clear reason.	Middle
	Prior investigation or conviction against him concerning child abuse.	High
Relationship characteristics	Unmarried but does not seem to have interest in adult relationship.	Low
	If interested in adult relationship, only with woman who already have children.	Low
	If married, relationship that is more about friendship than love.	Low
	Likes to hang out with children.	Middle
	Likes to engage in child activities.	Middle
	Has mostly young (child) friends.	Middle
	Specific preference for "girls" or "boys".	Middle
	Specific preference for children in a certain age group.	Middle
	Limited adult friends.	Middle
Behavioral characteristics	Refers to children using angelic terms like "clean," or "pure".	High
	Identifies with children better than with adults.	Middle
	Finds ways to get access to children (e.g. work, friends, etc.).	Middle

	Participates in activities with children without other adults.	High
	Practices child-like hobbies.	Middle
	House is very child-friendly decorated.	High
	Takes pictures from children from unusual angles or specific poses.	High
	Collects child pornography or child erotica	High

Characteristics of grooming: Grooming is considered as power manipulation based on the perpetrator's age and experience, size and strength, adult status, and vulnerability of the children. A perpetrator may use that power to gain the youth's trust and confidence, or coerce the child using violence and threats.

Means of grooming: Grooming may be achieved through personal contact with the child, and/or the family and community, and organisations and institutions. It can be done through other means of communication via interaction through social networking sites, chat room, digital forums, or emails.



ACTIVITY 1.2: Steps of grooming process (Facilitator's guide) (optional)

Grooming process: The grooming process has five different stages:

1. Establish contact with the target
2. Create a special relationship and isolate the target.
3. Desensitize the target to sex.
4. Gradually introduce sexual contact to the target.
5. Keep the victim silent on abuse.

Table 1.4: Five stages of the grooming process

Stage	Actions Taken
Stage 1: Establish contact with the target	<ul style="list-style-type: none"> • Encounter the child • Find out the child's interests • Offer to help the child (e.g. English teaching) • Give the child small presents (e.g. food)
Stage 2: Create a special relationship and isolate the target.	<ul style="list-style-type: none"> • Take care of the child (e.g., babysitting, teaching English) • Give personal attention to the child • Help the child with problems • Give the child small and big gifts (e.g. food, clothing) • Play together with the child in activities the child likes • Take the child on trips
Stage 3: Desensitize the target to sex	<ul style="list-style-type: none"> • Curse • Tell the child dirty jokes • Talk to the child about sex • Show the child pornography • Non-sexual touching • Hug with the child • Kiss on cheek.

Stage 4: Gradually introduce sexual contact to the target	<ul style="list-style-type: none"> • Attempt an accidental touch • Offer the child a massage • Explore the child's boundaries • Misrepresent moral standards • Provide the child with false information • Use aggressive coercion • Present sex game as a play.
Stage 5: Keep the victim silent on abuse.	<ul style="list-style-type: none"> • Reward the child for sexual participation • Threaten the child that he or she will lose the "special relationship" • Threaten with the consequences when the child makes a disclosure • Use "our little secret" • Threaten the child will be the one to blame.

Source: APLE training materials

The perpetrators also groom family or community to win trust or create the dependence. He/she can offer the family and community assistance with his money or gifts, trying to create an image of a "good guy". This helps create an unsupervised situation where the perpetrator can easily abuse the child without being spotted, and strengthen the power of him/her over the child that the child will not be believed. More than often, the parents know well the perpetrators.

*"By being popular. Right until I said guilty, people wouldn't believe it was true. His mother didn't believe him at first. It was better that he was lying than believe I could do something like that. I'd wrapped everyone around my little finger."*⁵

By grooming organisations and institutions, the perpetrators can gain access to the children and be in a position of authoritative over the child (bishops, teachers, etc.) to easily manipulate the child. The perpetrators also groom all important involved in the process.

*"I was in a position where the girl could come to me. I had the keys to the school. Sometimes [before she left school] petting would develop into intercourse on the school premises as I was locking up. So many parents wrote in support of me. . . . I worked with the police with troublesome youngsters. I didn't hide anything away. I'd take her back to her house in the car. They [her parents] were aware that she was coming to my home for help with her work."*⁶

⁵ Interviews with the perpetrators. APLE sources.

⁶ Interviews with the perpetrators. APLE sources.

Summary for module 1.1:

Child sexual abuse is the involvement of a child in sexual activity that he or she does not fully comprehend, or is unable to give informed consent to, and the activity being intended to gratify or satisfy the needs of the other person.

Child sexual abuse involves both contact and non-contact behaviors
Child sexual abuse becomes exploitation when a child or a third-party benefit through a profit in the form of the sale of children, child prostitution, and child pornography.

Law enforcement officials can base on physical, behavioral, and emotional signs to detect the sexual abuse. The symptoms can vary depending on the child's age and developmental stage.

Child victims can experience immediate (within two years) and long-term effects (into adulthood) of sexual abuse. This can occur in all areas of sexual, emotional, social, cognitive, and physical development of the child.

There are basic 5 steps in the grooming process in which the perpetrators deliberately undertaken actions to gain access to the child, lower the child's inhibitions towards sex and consequently gain the child's compliance, and prevent the child from disclosing the abuse. They can use a wide range of techniques, and target not only the child but also family, community, and institutions.

1.2. Protection mechanism of child victims

1.2.1. International, regional, and national legal framework

A wide range of international legal standards set the framework for the development of domestic criminal justice responses to child sexual exploitation. The key international instruments are the Convention on the Rights of the Child (1989) (CRC) and its Optional Protocol on the sale of children, child prostitution and child pornography (2000) (CRC Optional Protocol), the United Nations Convention against Transnational Organized Crime (2000) (UNTOC) and its Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (2000) (United Nations Trafficking Protocol), and the International Labor Organization (ILO) Convention Concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labor (1999) (ILO Convention 182).

Table 1.5: International, regional, and national legal instruments

International and regional instruments	
<ul style="list-style-type: none"> Convention on the Rights of the Child (CRC, 1989) 	<ul style="list-style-type: none"> UN Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime (2005)
<ul style="list-style-type: none"> Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography (2000) (CRC Optional Protocol) 	<ul style="list-style-type: none"> Guidelines of the Committee of Ministers of the Council of Europe on Child-friendly Justice (2010)

<ul style="list-style-type: none"> • The United Nations Convention against Transnational Organized Crime (2000) (UNTOC) 	<ul style="list-style-type: none"> • Declaration of the Commitments for Children in Association of Southeast Asian Nations (2001)
<ul style="list-style-type: none"> • The Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and children (2000) (TIP Protocol) 	<ul style="list-style-type: none"> • ASEAN Convention against Trafficking in Persons, Especially Women and Children (2004)
<ul style="list-style-type: none"> • ILO Convention concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labor No. 182 (1999) 	<ul style="list-style-type: none"> • ASEAN Guidelines for the Protection of the Rights of Trafficked Children (2007)
<ul style="list-style-type: none"> • Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (2007) (the so-called Lanzarote Convention) 	<ul style="list-style-type: none"> • Memorandum of Understanding on Cooperation against Trafficking in Persons in the Greater Mekong Sub-Region (2004) (COMMIT Initiative)
National instruments	
<ul style="list-style-type: none"> • The Cambodian Criminal Code (2010) 	<ul style="list-style-type: none"> • Cambodia's Law on Suppression of Human Trafficking and Sexual Exploitation (2008) (The TIPSE Law)
<ul style="list-style-type: none"> • Guidelines on Forms and Procedures for Identification of Victim of Human Trafficking for Appropriate Service Provision (2016) 	<ul style="list-style-type: none"> • Policy and Minimum Standards for Protection of the Rights of Victims of Human Trafficking (2009)

For explanations of each instruments, please refer to Annex 1.

Cambodia ratified the Convention on the Rights of the Child 1989 (CRC) in 1992, the Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography 2000 (Optional Protocol) in 2005, the ILO Convention on the Worst Forms of Child Labor (No. 182, 1999) in 2006 and the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children 2000 (TIP Protocol) in 2007. Cambodia has not yet signed nor ratified the Optional Protocol on a Communications Procedure 2011 (OP3 CRC).

At regional level, Cambodia ratified the ASEAN Declaration against Trafficking in Persons, Particularly in Women and Children in 2008.

With its adoption of the Law on Suppression of Human Trafficking and Sexual Exploitation in 2008, Cambodia shows its notable progress and effort in addressing the commercial sexual exploitation of children, especially with regards to the prohibition of child prostitution and child trafficking. However, Cambodian legislation still needs to be improved, especially in the areas of child pornography and the sexual exploitation of children through the use of information and communication technologies⁷.

⁷ ECPAT International and ECPAT Cambodia. (2014). Alternative report: Following the initial report from Cambodia on the implementation of the Optional Protocol to the Convention on the Rights of the child on the sale of children, children prostitution, and child pornography.

Box 4: Gaps in the Cambodia's legal framework

Under Article 12 of the TIPSE Law, the recruitment of children for the purpose of exploitation is prohibited only if it is done using means of deception, force or coercion, which is not consistent with Article 3 of the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children. According to this provision, the recruitment of children for the purpose of exploitation should be criminalised regardless of the means used.

The TIPSE Law 2008 fails to provide a comprehensive definition of child pornography, especially as it does not cover images depicting sexual parts of children and does not cover written and audio materials involving child pornography. Additionally, mere possession of child pornography (without intention to distribute), and the intentional access to child pornography through the use of information and communication technologies, are not criminalised. The Law also does not criminalise the solicitation of children for sexual purposes (grooming), which is particularly critical due to increased risks of sexual exploitation of children through the use of information and communication technologies in Cambodia.

Source: APLE Cambodia and ECPAT International. (2018). Report on Sexual Exploitation of Children in Cambodia. In submission to the Universal Periodic Review of the Human Rights Situation in Cambodia.

**EXERCISE 1.2: Quick test on legal matters (Workbook)****1.2.2. The Four guiding principles****ACTIVITY 1.3: What do four guiding principles mean to you? (Facilitator's guide) (optional)**

Chapter III, UN Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime (2005) provides four guiding principles for professionals and those working with children to ensure the justice for the child victims and witnesses of crime.

(1) Dignity: Every child is a unique and valuable human being and as such his or her individual dignity, special needs, interests and privacy should be respected and protected;

(2) Non-discrimination: Every child has the right to be treated fairly and equally, regardless of his or her or the parent's or legal guardian's race, ethnicity, color, gender, language, religion, political or other opinion, national, ethnic or social origin, property, disability and birth or other status;

(3) Best interests of the child: While the rights of accused and convicted offenders should be safeguarded, every child has the right to have his or her best interests given primary consideration. This includes the right to protection and to a chance for harmonious development:

(i) **Protection:** Every child has the right to life and survival and to be shielded from any form of hardship, abuse or neglect, including physical, psychological, mental and emotional abuse and neglect;

(ii) Harmonious development: Every child has the right to a chance for harmonious development and to a standard of living adequate for physical, mental, spiritual, moral and social growth. In the case of a child who has been traumatized, every step should be taken to enable the child to enjoy healthy development;

(4) Right to participation: Every child has, subject to national procedural law, the right to express his or her views, opinions and beliefs freely, in his or her own words, and to contribute especially to the decisions affecting his or her life, including those taken in any judicial age, intellectual maturity, and evolving capacity processes, and to have those views taken into consideration according to his or her abilities.

Box 5: How to determine the best interests of the child?

UNHCR (2008) provides Guidelines on determining the best interests of the Child in three situations: (1) the identification of the most appropriate durable solution for unaccompanied and separated refugee children; (2) temporary care decisions for unaccompanied and separated children in certain exceptional circumstances; and (3) decisions which may involve the separation of a child from parents against their will.

The Guidelines provides detailed guidance on the procedure. This consists two key steps: firstly, collecting and analyzing all relevant information (verifying existing information on the child, exploring the views of the child, interviewing family members and other persons close to the child, relevant background information, and seeking the views of experts); secondly, balancing all relevant factors to determine which of the possible options is in the best interests of the child (views of the child, family and close relationship, safe environment, development and identity needs). Best interests determination (BID) procedures in the case that acts or omissions by parents expose severe harm to children, including but not limited to physical, emotional harm, or sexual abuse and exploitation can be referred to Annex 2.



EXERCISE 1.3: Determine the best interests of the child victims in the following case

1.2.3. Ten fundamental rights of child victims



ACTIVITY 1.4: Voices of children

Four guiding principles are interpreted into ten fundamental rights that children are entitled to have throughout the justice process, from their initial contact with the justice system to the final resolution of the case and the child's reintegration into the community.

1.2.3.1. Feeling humiliated — The right to be treated with dignity and compassion

The right to be treated with dignity implies that child victims and witnesses shall be approached as human beings who are entitled to full rights and not as passive recipients of adult care and protection.

It is important that professionals who work with child victims and witnesses of crime are aware of the various effects that experiencing and/or witnessing crime may have on children. Each child should be treated in accordance with her or his individual rights, special needs, wishes, feelings, and evolving capacities, and with full respect for the child's privacy, personal situation, gender, disability and his or her physical, mental and moral integrity.

“They think that, ‘you [children] are already spoiled. So, what kind of justice are you seeking?’ There can be no justice for sex workers who are the sickness of the society.” (Nepal, a child survivor)

“...started laughing unprofessionally when presented with the physical evidence of a used condom and women’s underwear. This is not the way to gain the trust of the public, nor is this shining example of the police respecting citizens’ human rights” (Huang, 2010, p. 29).

Males in positions of authority often ask inappropriate questions, probing for details that are unnecessary, insinuating things like, “You love the perpetrator, don’t you? So, you asked for this rape to happen?” Or, “It was good, wasn’t it? Why are you complaining?” (Cambodia)
“And when she did that [have a song for her to listen to after the hearing], she really won me over. (laughs) I adore her.” (Croatia, female, a 17-year-old victim with multiple disabilities)⁸

Strategies to ensure dignity and compassion:

- **Not in trouble:** Assure the child, especially if he or she is very young, that he or she has not done anything wrong and is not “in trouble”. Clearly explain to the child that the person who has inflicted harm upon him or her has violated the law. The child is not, and should not feel, responsible for other’s behavior and wrongdoing.
- **Trust and rapport:** Take time to establish trust and rapport. This is best done by listening and giving the child the opportunity to ask questions, and to share whatever he or she wants. If the child feels listened and respected, they are more likely to be cooperative and comfortable.
- **Respect:** As a result of their victimization, child victims maybe very sensitive to any hint of disrespect. Words should be chosen very carefully.
- **Uniqueness:** Never compare a child with other children—even to give an example.

⁸ European Union Agency for Fundamental Rights. (2017). Child-friendly justice. Perspectives and experiences of children involved in judicial proceedings as victims, witnesses or parties in nine EU Member States. Luxembourg: Publications Office of the European Union.

1.2.3.2. Feeling unsupported — The right to be protected from hardship during the justice process

‘Primary victimization’ refers to distress that children may suffer as a direct result of a crime.

‘Secondary victimization’ refers to the victimization that occurs, not as a direct result of the criminal act, but through the response of institutions and individuals to the victim.

Law enforcement professionals have the greatest responsibility for preventing secondary victimization of the child victim because they are the first responders to the crime scene and should therefore establish the welfare of the child as their first priority.

“The most difficult thing is that they have gone through a lot of trouble, difficulty and pain and they might not be willing to share their experience. Sharing such pain over and over again is hard. It is even harder when people have done wrong to you and you have to repeat it in front of people again and again. The feeling of being wronged is difficult to express because you cannot be sure who understand it and who doesn’t.” (Nepal, SEC Survivor)¹⁰

Box 6: What causes secondary victimization of a child?

- Intrusive or inappropriate conduct by police or other criminal justice personnel;
- The whole process of criminal investigation and trial itself;
- Difficulties in balancing the rights of the victim against the rights of the accused or the offender; and
- Those responsible for ordering criminal justice processes and procedures do so without taking into account the perspectives of the victim.

Strategies to protect child victims from hardship:

- Child support professional: A specially trained support person to assist children when necessary, and ensure emotional support for child victims;
- Expediting investigation and proceedings: Prioritizing the case involved children to help reduce the time child victims are exposed to potentially harmful consequences. Long-lasting investigations will also result in delayed trials and conclusions of cases, which ultimately prevents the child from moving beyond his/her experience of being a victim.
- Child-sensitive procedures at the investigation stage: Interdisciplinary services help address all concerns of the child in a consolidated manner and serves to improve communication among all the involved professionals. Limits the number of interviews and avoid unnecessary contacts, especially with the offender, help protect undue trauma to the child victims. Video recording is also help preventing repeated interviews and provides information to all professionals for future reference.
- Child-sensitive questioning and preventing intimidation: Medical examination shall be done where it is absolutely necessary and in the best interests of the child. If done, the medical examination should be minimally intrusive, and only conduct a single examination.

¹⁰ ECPAT International & Sida. (2017). Through the eyes of the child: Barriers to access to justice and remedies for child victims of sexual exploitation. Interviews with survivors and professionals in the criminal justice systems of Nepal, the Philippines, and Thailand.

1.2.3.3. Feeling unjust — The right to be protected from discrimination

Every child has the right to be treated fairly and equally, regardless of his or her or the parent's or legal guardian's race, ethnicity, color, gender, language, religion, political or other opinion, national, ethnic or social origin, property, disability and birth or other status.

Additional protection from discrimination implies that particular children and particular groups of children need additional protection from adults because of their particularly vulnerable status and disadvantaged situation. In other contexts, this form of protection is also called “positive discrimination” or “affirmative action”. A few examples of children in particularly disadvantaged situations are: adopted children; refugee children and children seeking refugee status; children with disabilities; minority or indigenous children; children deprived of liberty; child victims; and children in conflict with the law.

Box 7: What are the differences between ‘equality’ and ‘equity’?

- Equality generally refers to equal opportunity and the same levels of support for all segments of society. Equity goes a step further and refers offering varying levels of support depending upon needs to achieve greater fairness of outcomes.
- In another word, equity is a process and equality is an outcome of that process. The route to achieving equity will not be accomplished through treating everyone equally. It will be achieved by treating everyone equitably, or justly according to their circumstances

“If the police don’t have knowledge about...the issues about the trafficking. Some me they abuse the children twice. Because I got a case...the police complain the child [gained] entry the country like an illegal, and prosecutor also put the child [gained] illegal entry country like that. So, we also complain many, many [times]” (Thailand, service provider) ¹¹

“In Nepal, they don’t really understand the issue about gays. If they go to the police, the police are totally ignorant and they refuse to believe that a man can abuse a man.” (Nepal, child survivor)

Child: “It is not so bad to talk to the police, but for a girl it is not nice to talk to the police, they think... because afterwards people see her like a criminal, like a ... God knows what afterwards.”

Interviewer: “You mean that if a boy talked to the police there would be a difference?”

Child: “It would be different, because for a boy, a man it would be different from a personality perspective, but it would not be OK for a girl.” (Romania, female, 17 years old) ¹²

¹¹ Ibid

¹² European Union Agency for Fundamental Rights. (2017). Child-friendly justice. Perspectives and experiences of children involved in judicial proceedings as victims, witnesses or parties in nine EU Member States. Luxembourg: Publications Office of the European Union.

Strategies to protect child victims from discrimination:

- Street children: Consider children who live in the streets or in low-income neighborhoods as trustworthy victims and valuable and capable witnesses. Give them as much time, assistance and protection as is given to child victims and witnesses who have proper shelter and clothes and adequate personal hygiene.
- Children in institutions: Never take decisions on behalf of child victims and witnesses who live in institutions. Always ask for their consent and explain the details of the decision patiently, because such children are often not used to giving their opinion and consent for important decisions affecting them.
- Refugee children: Make sure that refugee and internally displaced child victims and witnesses have access to counselling and other rehabilitation services, even when their status makes it more difficult to organize such support. There might be community-based services or child support services to assist such children.
- Children without birth certificate: Make sure that medical treatment and other necessary services such as legal, financial, social and emotional assistance are provided to child victims and witnesses who are not registered at birth and are unable to present their birth certificates.

1.2.3.4. Feeling painful – The right to effective assistance

Respecting the right to effective assistance implies that law enforcement professionals assist child victims and child witnesses to overcome the harm they suffer as a consequence of the crime and enable them to participate in investigative interviews and other stages of the justice process without being secondarily victimized. This may include assistance and support services such as financial, legal, counselling, health, social and educational services, physical and psychological recovery services and other services necessary for the child's reintegration.

“In my anxiety, I still sleep with my hand positioned in a protective hold in an attempt to keep my private safe for fear of an intruder, scared someone will enter uninvited: my subconscious still attempts to protect my modesty” (Jaye, a child survivor from UK) ¹³

I started stealing from sweet shops and moved onto stealing money from my parents to be able to buy sweets and later drugs. Drugs abuse is the only thing that would make me feel good temporarily. I started smoking and drinking at 13, and continued to smoke cannabis daily since age 14 (Amy, a child survivor).

“I wanted to be normal, to be normal like my abusers pretended to be normal. Like nothing had happened, like they had never done those awful things to me; to pretend that they were really loving, kind, respectful, religious family men like they pretended to be to the outside world.” (Julie, a female survivor who was sexually abused by her dad and grandad at the age of five) ¹⁴

¹³ One in Four. (2015). Survivor's Voices: Breaking the silence on living with the impact of child sexual abuse in the family environment.

¹⁴ One in Four. (2015). Survivor's Voices: Breaking the silence on living with the impact of child sexual abuse in the family environment.

Strategies to ensure effective assistance:

- Assistance as early as possible and as long as needed: Assistance should be provided as early as possible after the crime has been committed and should continue after the conclusion of the proceedings for as long as the child needs support to fully recover from the injuries and harm and to fully reintegrate into society.
- Assistance tailored to the child's special needs: The law enforcement professionals have the responsibility to inform the children and their families about the available financial, legal, counselling, health, social and educational services, physical and psychological recovery services and all other services necessary for the child's reintegration.
- Coordinated assistance: Assistance has to be interdisciplinary or multidisciplinary. A multidisciplinary team may include social workers, prosecutors, court staff, psychologists, health professionals, CBOs and NGOs. Cooperation among professionals limits the contacts of child victims to a minimum and ensures that interviews and investigations are conducted in a child-sensitive manner. Law enforcement officials should make every effort to coordinate support so that child victims and witnesses are not subjected to excessive interventions. Having too much assistance can be counterproductive and might be disruptive to the child's life.

1.2.3.5. Feeling violated - The right to privacy

The release of information, in particular in the media, may have dramatic effects for the child: endanger the child's safety, cause the child intense shame and humiliation, put a strain on the child's relationships with family members, peers, and the community, etc. Thus, it is crucial for the law enforcement officials maintain confidentiality and restrict disclosure of information.

"I didn't think she [police officer] was going to tell, because I had made her promise that she wouldn't, but she did...I was really angry the whole time, I didn't want to say anything, but I had to... I felt like an awful person, because I thought I could have just put someone in jail, I hated it. But everyone was like, 'it's not your fault, he's put himself in jail'. But if I hadn't said... No, I wouldn't, even though I think it's good to tell, I wouldn't want anyone to have to go through the whole process." (female, 14 years old, a child survivor)

Child: "Yes, it was on TV."

Interviewer: "I see. And how did this make you feel?"

Child: "I did not watch when it was on."

Interviewer: "You did not watch, but the fact that you knew something about you had been on TV, how did that make you feel?"

Child: "Bad."

Interviewer: "Did anyone ask you for permission to be on TV?"

Child: "No."

Interviewer: "Nobody came to ask you if you wanted to be on TV?"

Child: "No."

Interviewer: "Nobody came to ask you if you wanted to appear?"

Child: "No." (female, 16 years old, child victims of sexual abuse case)

Box 8: Situations when it is needed to breach the confidentiality

- Legal requirement of the disclosure: when the child is in need of protection because his or her behavior threatens to cause harm to himself or herself such as drug use.
- Informed consent of the child: professionals need to share private information with their colleagues in the justice system. However, they should inform the child, as well as the parents or guardians about their intentions and possible consequences of sharing private information.
- Private information may only be shared on ‘need to know basis’ – to only those colleagues who are directly involved in the case.
- Considering the best interest of the child.

Strategies to protect the privacy of child victims:

- Maintaining confidentiality: Any names, addresses, workplaces, professions or any other information that could be used to identify the child should be removed from the public record. Organizations must ensure the permanent preservation of their records in a manner that guarantees confidentiality. They may decide to centralize their records under the responsibility of a competent authority.
- Breach of confidentiality in special situations: (1) Legal requirement of disclosure, (2) Informed consent of the child, and (3) Considering the best interests of the child.
- Restricting disclosure of information: Special attention should be given to disclosure of particularly sensitive materials such as psychological and medical reports. Children’s privacy should be safeguarded irrespective of the medium of potential disclosure, i.e. printed media, radio, television or Internet.

1.2.3.6. Feeling intimidated — The right to safety

The right to safety includes protection from any form of further harm, including physical, psychological, mental and emotional abuse and neglect, and any form of intimidation or retaliation. The law enforcement professionals are also responsible to protect the safety of the child’s families if necessary.

“Offender called often. [Her family members] were scared and told officer and police. They said there would be protection sent to them, but no protection. There were two persons kept calling and threatening if she did not drop case something could happen. They offered any amount she wants. She is tired... So, she agreed to what amount [her family] wants, so issue drop.” (Thailand, A child survivor)¹⁵

One girl, who stated her age as 17 (though a supporting NGO had the age of 19 on their records) experienced an exceptionally violent event. After raping her, the perpetrator slashed her throat in an attempt to kill the girl. She woke up in the hospital but didn’t remember how she got there. Upon release from the hospital, she went home... After giving her statement at the police station, she arrived back home to find the perpetrator there waiting for her. She immediately called the police who said, “Oh he is not there”, and refused to come to her house. (Cambodia, Child survivor)¹⁶.

¹⁵ Ibid

¹⁶ Hagar. (2015). A system just for children.

Strategies to protect the safety of children:

- Avoiding direct contact with the alleged offender: At any point of the justice process. For example, by means of pretrial videotaped interviews; separate waiting rooms in courts; one-way screens; removal of the accused from the courtroom; and closed court sessions.
- Restrictions of freedom of movement of the alleged offender: The use of police custody, pretrial detention and other restraining orders are common measures to ensure the safety of children. Restraining orders may also be issued after the perpetrator has been released from prison in order to guarantee the safety of a child victim/witness.
- Protection of the child victim/witness by police or other relevant agencies: through protection of safety of the child victim/witness and by taking all necessary steps towards such protection.
- Temporary removal of the child from home and placing him or her in a shelter or another temporary or emergency centre. However, this measure should only be applied when all other protective measures have been discussed and take into considerations the best interests of the child. Children, especially young children, may consider the decision a form of punishment.

Please refer to Annex 3 for Safety Assessment considerations

1.2.3.7. Feeling unprotected – The right to special preventive measures

In addition to preventive measures, special strategies are required for child victims and witnesses who are particularly vulnerable to recurring victimization or offending. Professionals should develop and implement comprehensive and specially tailored strategies and interventions in cases where there are risks that child victims may be victimized further. These strategies and interventions should take into account the nature of the victimization, including victimization related to abuse in the home, sexual exploitation, abuse in institutional settings and trafficking.

Measures are necessary to prevent children from potential risks, victimization and re-victimization:

- Awareness-raising, information and public education: Some examples are: children's rights programs; awareness-raising of the general public; information and public education; public service announcements and declarations; other media-based means of information dissemination.
- Combating risk factors: Focused prevention programs for children at risk or youth at risk. For example, such prevention programs may focus on street children, children with disabilities, girls, or children from ethnic minorities, refugee children and other displaced children.
- Strengthening protective factors: Protective factors strengthen children with the capacity to withstand the pressures from potential risk factors and decrease the possibility of primary victimization. Examples are programs to increase self-esteem; problem-solving and coping skills; parental support; school commitment and attachment; peers and an extensive social support system. In general, schools are considered an important setting for such preventive activities for children.

Box 9: The Big Brother Outreach Project in Chiang Mai, Thailand

The Big Brother Project is a joint initiative between the Royal Thai Police, the Chiang Mai Office of the Ministry of Social Development and Human Security, and the non-governmental agency, the HUG Project. The project's intent is to reach out to sexually exploited children and children at risk of exploitation and rebuild their trust in adults, including the police. Officers act like "big brothers" to the children, taking part in daily activities, such as guitar and football lessons, school work, and outings. The goal is to help children understand their exploitation, to show them that the police are there to support them, and to encourage them to seek help when they are ready. The program has a secondary benefit of helping children become stronger witnesses in the criminal case against their exploiters.

More information about the Big Brother Outreach Project in Chiang Mai, Thailand ¹⁷

1.2.3.8. Feeling neglected — The right to be informed

Not only the child victims, but their parents/guardians and legal representatives should be informed about the justice process, the choices they have and possible consequences of these choices, and the available services that they can access to. Information has to be provided regardless of the child's participation in the justice process. Information/materials should be designed in a child-friendly way that is easy to understand, and suitable to the age and maturity of the child.

*"It feels kind of strange. Especially with all these strangers. I didn't know these people and I needed to talk about private matter (Poland, male, 10 years old, child survivor)"*¹⁸

"It is scary when you suddenly go to the police and then you have to speak. So before going to police and start all that process, if the child is oriented about what's going to happen next, who to expect to see, what they are going to ask, and how to respond or how to behave, if such things are told beforehand, it would help a lot." (Nepal, SEC Survivor)

"I didn't understand what I was doing there. [...] I was questioned, I had just finished working, it was my mother who came to pick me up from work and who took me directly to the police questioning. So, I didn't even know I was going to be questioned." (France, female, 19 years old, witness)

Challenges in conveying the information and recommended solutions:

- An under-resourced justice system: If there are not enough professionals available, or the professionals are overloaded, or there is a lack of transport facilities for the victims to commute to the police station, the police officers can request the representatives of community-based organizations or NGOs to inform the children and their caregivers about the justice process, their possible role in the proceedings and particular aspects of their case.
- Lack of child-friendly materials: Child-sensitive brochures, leaflets and booklets for children involved in the justice system should be available in police stations. It is always more efficient to provide both oral and visual, including written, information .

¹⁷ See Facebook page, "Big Brother Project", at <https://www.facebook.com/BigBrother.Project.Thailand/info>; See also Cadigan, H. (2014). Undercover Brothers. Citylife Chiang Mai, accessed 2 December 2018, <http://www.chiangmaicitylife.com/citylife-articles/undercover-brothers/>

¹⁸ Ibid.

- Illiteracy of child victims and witnesses: In case brochures, leaflets and other written information do exist, professionals may face the problem that child victims and witnesses—and often also their parents—are illiterate. Professionals may sit beside the child and read the written information out loud.

Box 10: Child-friendly materials

Materials shall be designed in a child-friendly way and easy to understand with simple language for children. For references, please refer to materials developed by European Union Agency for Fundamental Rights, Children and Justice videos <https://fra.europa.eu/en/project/2012/children-and-justice/videos>, and Council of Europe, Child-friendly materials <https://www.coe.int/en/web/children/child-friendly-materials>

Box 11: Information packet for child victims

The Victim Services Division in Austin gives each victim a packet of information including a case information sheet (with a case number and contact information for the detective, Victim Services Counselor, and District Attorney's Victim Witness Assistance), an explanation of the criminal justice process, a sheet explaining the rights of victims, an explanation of access to court information, an application for financial compensation from the state for victims of violent crimes, health care information, information on emotional care for sexual assault survivors, information for family and friends on how to help and support a sexual assault survivor, referrals for counseling programs, a pseudonym form, and information about the Victim Services Division and the Austin Police Department.

Source: Human Rights Watch. (2010). Improving Police Response.

1.2.3.9. Feeling overlooked – The right to be heard and to express views and concerns

Participation implies that each child—and thus also each child victim and witness—should get the opportunity to express his or her views, beliefs, wishes, feelings and concerns freely in all decisions affecting his or her life. Direct participation may contribute to the well-being of child victims as to cope with the consequences of the crimes, to regain a sense of control, to understand the process, or to decrease the risk of secondary victimization, etc. This can benefit law enforcement officials as the child may be more willing to assist in the whole process.

Age should not be a barrier to the right of child victims and child witnesses to participate fully in the justice process. The right to fully participate in the justice process is not unconditional but linked to the age and maturity or evolving capacities of the child victim/witness.

“In relation to children, discrimination means that our opinions don't count because we're children and our opinions are not treated seriously. Adults think that children at the age of almost 14 don't know what they're talking about.” (Poland, female, 14 years old, victim)

“Among Cambodian adults, it is commonly asserted that children have no opinion of their own and cannot think independently.”²⁰

²⁰ Hagar. (2015). A system just for children.

*“The child respondent was flanked by her father and by the NGO social worker...Both adults consistently talked over the child, largely ignoring her presence. At times they answered the question directly before the girl could say anything at all; at other times they corrected the girl’s answer.”
(Cambodia)*

Box 12: Children’s age and ability to make decisions

Children’s abilities to form and express their opinions develop with age.

- Children 15 years and up are generally mature enough to make their own decisions.
- Children 13 to 14 years are presumed to be mature enough to make a major contribution to decisions affecting their care and treatment.
- Children 10 to 12 years can meaningfully participate in the decision-making process, but maturity must be assessed on an individual basis.
- Children 9 years and younger have the right to give their opinion and be heard. They may be able to participate in the decision-making process to a certain degree, but caution is advised to avoid burdening them with decisions beyond their ability to understand.

Nevertheless, a safe and trusted adult in the child’s life need to be consulted in care and treatment decisions.

The child victims should get the opportunity to express his or her views, beliefs, wishes, feelings and concerns freely in all decisions affecting his or her life. There are four stages in the decision-making process: being informed, expressing an informed view, having one’s view taken into account, and being the main or joint decision maker. In cases where the views of a child victim/witness cannot be accommodated, professionals have to give a clear explanation of the reasons.

Strategies to ensure the right to be heard of children:

- **Inform the child:** Clearly inform the child about the procedures, any potential risk during the justice process and available assistance. Explain to the child that he or she has the right to refuse to testify. Never try to convince a child victim/witness to give testimony.
- **Child sensitivity:** Allow for breaks. If the child seems tired or bored, allow him or her sometime to rest or play. Allow the child to express his or her views and concerns in his or her own manner and own words. Never show surprise, disapproval or confusion. Do not compare the child’s thoughts, opinions, with those of other children.
- **Paraphrasing:** Rephrase what the child has communicated, including what he or she has communicated about his or her feelings. Check if you have understood the child correctly.
- **Joint decision-maker:** Ask the child to jointly participate in the decision-making process; however, the final decisions shall be the responsibility of the law enforcement officials and other professionals. Leaving the final decision to the child may (1) put too much burden for the child, and (2) in some cases, the child may not aware of other conflicting interests.

1.2.3.10. Feeling unfair — The right to reparation

Reparation refers to measures that address the various harms children have suffered and re-establish the normal situation in which the child is physical and psychologically recovered and reintegrated into society. Reparation can be restitution from the offender as their obligations to compensate for the damages, aid from victim compensation programmes, payment of damages ordered in civil proceedings, and reimbursement of costs of social and educational reintegration, medical treatment, mental health care and legal services.

“He said that he himself he did not want to ask for compensation because he know this offender as well. But he was saying it would be good if he could have just small pay. He did not want to ask for millions and millions. Just small thing that he can help with their life to buy thing to live on.” (Thailand, SEC Survivor)

There is no legal way to enforce payment. Just one of the 54 research respondents said that they had received a portion of the officially awarded reparation money from the perpetrator. None of the other victims or families interviewed had received any compensation money (Cambodia)

As reparation is done at the trial and/or post-trial stage and law enforcement officials play limited role in this regard, however, the law enforcement officials may inform the child victims, parents or guardians of the reparation that maybe available at a later stage of the justice process, and assist them to apply for and receive full redress, reintegration and recovery

**EXERCISE 1.4: Case study (Workbook)**

Table 1.6: Summary of ten fundamental rights of child victims

THE BEST INTERESTS OF THE CHILD	
<ul style="list-style-type: none"> • Right to have his/her best interests given primary consideration. • Protecting the child from secondary victimization in the justice process (as victim or witness) & enhancing the child's capacity to contribute to that process. 	
RIGHT TO BE TREATED WITH DIGNITY AND COMPASSION AND TO BE PROTECTED FROM HARDSHIP DURING THE JUSTICE PROCESS	
<ul style="list-style-type: none"> • Reporting the crime / while recounting / while awaiting trial and while testifying in court. In accordance with child's immediate needs, age, gender, disability etc. • Reducing the number of professionals interviewing the child /interviews/ examination and other forms of investigation to be conducted by trained professionals with sensitivity and dignity in a child-friendly environment while ensuring that high standards of evidence collection are maintained so that justice is not compromised. • All interactions should take place in a language that the child uses and understands. • Medical examination should be ordered only where it is necessary for the investigation of the case & should be minimally intrusive. 	

RIGHT TO BE PROTECTED FROM DISCRIMINATION	RIGHT TO BE HEARD, EXPRESS VIEWS & CONCERNS
<ul style="list-style-type: none"> Ensuring the justice process and support services are available to child victims and witnesses and their families with sensitivity to the child's age, wishes, understanding, gender, sexual orientation, ethnic, cultural, religious, linguistic and social background, caste and socio-economic condition, special needs of the child etc through services by Trained & Educated Professionals. Every child to be treated as a capable witness, according to his/her age and level of maturity. 	<ul style="list-style-type: none"> With respect of matters affecting the child: being informed, expressing an informed view, having that view taken into account, and being the main or joint decision maker. When the expectations of the child cannot be met, it needs to be explained to the child in a child-friendly way eg. Why certain facts are not discussed or questioned in court?
THE RIGHT TO SPECIAL PREVENTIVE MEASURES & EFFECTIVE ASSISTANCE	THE RIGHT TO COMPENSATION
<ul style="list-style-type: none"> Due assessment before hiring of personnel working for children e.g. school teachers to reduce risk of re victimization. Assist child to address his/her needs and enable him/her to participate effectively at all stages of the justice process & receive services necessary for the child's healing. 	<ul style="list-style-type: none"> Awarding of compensation for child's relief and rehabilitation, can be interim stage, during the pendency of trial, as well as at the conclusion of the trial. Ensuring accessible & child friendly procedures for obtaining and enforcing compensation.
THE RIGHT TO PRIVACY	THE RIGHT TO BE INFORMED
<ul style="list-style-type: none"> Protection of child's privacy and identity at all stages of the pre-trial and trial process through restricted disclosure of information on child victims and witnesses and attendance of non-essential persons in courtrooms. Release of information may endanger the child's safety, cause shame and humiliation, & may strain relationship of the child with family, peers and lead to stigmatization by the community. 	<ul style="list-style-type: none"> Informing child victims / witnesses about the assistance they are entitled to, legal proceedings and the role they can play in those proceedings if they decide to do so. Updating the child with information about the progress of the case, scheduling of the proceedings, expectations from the child, decisions rendered & status of the offender.

1.2.4. Voices of Cambodian's child victims

Hagar (2011) conducted a study on The rights of child victims and witnesses in criminal justice proceedings, to analyse impediments to justice faced by children who are victims of trafficking, domestic violence and sexual abuse, in an attempt to gain redress through the formal criminal justice system. Highlight is provided in the following table:

Table 1.7: Impediments to child-friendly practices in Cambodia's justice system

	Shared impediments	Unique impediments
Police	Lack of knowledge about relevant laws and their application. Insufficient training on working with children.	Harsh interviewing techniques and intimidation of plaintiffs; corruption during investigation; lack of proper investigative procedures and techniques.
Judiciary	Insufficient awareness about special needs for victims of sexual and physical abuse. Insufficient communication of information to child victims (amount and type)	Lack of impartiality; corruption; insufficient notice to participants about trial dates; lack of confidentiality during trials; court delays and long duration; child cases not prioritised; forcing children to testify even if they do not want to; inadequate attention to the need for interpreters; judges and other court authorities speaking harshly to children.
Lawyers	Active gender discrimination (girls blamed by judges for the rape, judges use pejorative language when talking about rape of girls; judges mock boy victims of sexual violence). Inadequate gender sensitivity. Excessive frequency of interviews.	Unreliable – late to court, do not always show up for court, may drop the case without sufficient warning; not sharing information with their clients (the child victims); insufficient time to build rapport and trust; insufficient preparation time with child clients; do not inform children about court procedures and expectations of child's involvement.

Hagar (2015) conducted a research on the voices of child victims and witnesses documenting their experiences in the Cambodian Criminal Justice System. 54 children were interviewed; the majority (34) had suffered rape; other crimes included sexual abuse, trafficking, assault and domestic violence. The ages of the victims ranged from 10-19 years. Below is the summary of their findings related to experiences of child victims in contact with police officers.

Table 1.8: Measuring Cambodian practice against international standards

Theoretical rights of children	Reality for child victims and witnesses in Cambodia
Be treated with dignity and compassion	One-fifth of respondents (10 in total), especially girls older than 13 years and effeminate boys, were treated disrespectfully, or even mocked, especially by police. About 1/5 of respondents were also treated badly by medical personnel during forensic exams.

Be protected from discrimination	<p>Proceeding through the justice system is financially costly, and could be prohibitive for poor people.</p> <p>Police levy fees, forensic medical exam costs money, etc.</p> <p>Translation services for non-Khmer speaking children are very difficult to access.</p>
Be informed	<p>Not all families or children were aware of what steps to take to report the crime; this can result in delay of justice.</p> <p>Parents and family members of are seldom included in the preparation of children for their court appearance, and thus do not know what to expect.</p> <p>Some children did not know the status of their trial.</p> <p>Medical personnel never gave paper copy of forensic examination results to victims, and only sometimes provided a verbal explanation of results to victims and/or their guardian.</p>
Be heard and to express views and concerns	<p>The views and voices of children are not always solicited about matters directly affecting them. For example, often it is adults who decide for children that children will go to court and children are not necessarily consulted.</p>
Effective assistance	<p>There are frequent and consistent procedural errors/ violations made by various authorities (police, medical examiners, courts).</p> <p>Forensic medical exams are often performed long after the violation, and results are therefore not useful as evidence.</p> <p>For victims not associated with NGOs, it may be virtually impossible to access the mental health care or medical care necessary to recover.</p>
Privacy	<p>Child names are posted in the foyer of provincial court houses on schedule sheets.</p>
Be protected from hardship during the justice process	<p>Children are required to give their statement (tell their story) multiple times, each time risking re-traumatisation.</p> <p>There are virtually no special facilities in courthouses for young children – no private waiting rooms, no small chairs or tables, no stools to stand upon to equal their height with adults in the room, etc.</p> <p>Frequently, cases involving child victims are lengthy in duration.</p> <p>Though closed-circuit TV and video facilities are said to exist, no child in this study reported being able to use them.</p> <p>All were required to give testimony directly to adults in the courtroom.</p>
Safety	<p>Sometimes a child meets in a room with only one other non-related adult (e.g. police officer).</p> <p>Often perpetrators do not spend much time in jail but rather, return to the community where the child lives.</p> <p>Some children remain in NGO shelters even after court cases are completed, because they fear for their personal safety.</p> <p>Children are often placed in close physical proximity to the perpetrator during the court sessions.</p>

Reparation	Some children (and/or families) feel forced to settle out of court (as they are persuaded by police or other authorities). Thus, they may not receive appropriate reparation. Just one respondent had received any compensation though nearly all whose cases had a verdict, were awarded compensation.
Preventative measures	Virtually no effort is made by the authorities to protect child victims/witnesses, either during or after trial. Many girls are sexually violated by family members or people they know in their community.

Summary of section 1.2:

- There are four guiding principles: Dignity, non-discrimination, best interests of the child, and right to participation for the police officers to follow in responding to child sexual abuse and exploitation cases.
- Cambodia has ratified 5 international protocol on protecting the rights of child victims of sexual abuse and exploitation.
- There are ten fundamental rights that the child victims are entitled to have and to be respected by the law enforcement officials: (1) Right to be treated with dignity and compassion, (2) Right to be protected from hardship, (3) Right to be protected from discrimination, (4) Right to effective assistance, (5) Right to privacy, (6) Right to safety, (7) Right to special preventive measures, (8) Right to be informed, (9) Right to be heard and express views and concerns, and (10) Right to reparation.
- Improving the experience of child victims and witnesses in the Cambodian justice system will require disciplined planning and action from all stakeholders involved in this research, and continuing attention to the voices of children in this process.

“Don’t walk in front of me; I may not follow.
Don’t walk behind me; I may not lead.
Walk beside me and be my friend.”

Attributed to Albert Camus

“There is no trust more sacred than the one the world holds with children. There is no duty more important than ensuring that their rights are respected, that their welfare is protected, that their lives are free from fear and want and that they can grow up in peace.”

Kofi Annan
(Seventh Secretary-General of the United Nations)

KEY LEARNING POINTS FOR MODULE 1

- Child sexual abuse is defined as “the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, to gratify or satisfy the needs of adults or another child(ren)” (WHO, 1999). A child is a person under 18 years old.
- Child sexual abuse involves both contact and non-contact behaviors.
- Child sexual abuse becomes exploitation when a child or a third-party benefit through a profit.
- Police officers, NGOs workers, child-protection agencies, etc. can base on common signs and symptoms of physical (bleeding, pain, bruises, etc.), behavioral (bed wetting, eating disorders, sexualized behaviors, etc.), and emotional (anxiety, guilt, anger) indicators to detect signs of sexual abuse. The symptoms are also different across age groups. Most of the perpetrators are someone known to the victims or their families. They employ different grooming techniques to break down the resistance of the child, create dependency, and manipulate the relationship for their gratifying.
- Sexual abuse can have immediate effects (within two years) and long-term effects (till adulthood) to the child.
- Cambodia has ratified 5 international protocol on protecting the rights of child victims of sexual abuse and exploitation.
- There are four guiding principles: Dignity, non-discrimination, best interests of the child, and right to participation for the police officers to follow in responding to child sexual abuse and exploitation cases.
- There are ten fundamental rights that the child victims are entitled to have and to be respected by the law enforcement officials: (1) Right to be treated with dignity and compassion, (2) Right to be protected from hardship, (3) Right to be protected from discrimination, (4) Right to effective assistance, (5) Right to privacy, (6) Right to safety, (7) Right to special preventive measures, (8) Right to be informed, (9) Right to be heard and express views and concerns, and (10) Right to reparation.
- Despite recent improvement in the legal and institutional system, Cambodia’s justice system needs joint efforts to make the system more child-friendly to the child victims and their families.



MODULE 2

DYNAMICS OF CHILD SEXUAL ABUSE AND EXPLOITATION

LEARNING OBJECTIVES:

At the end of this module, the trainees will have the necessary knowledge and skills to:

- Understand how memory works, and how it links to the interviewing techniques with child victims;
- Explain pre-four conditions for the abuse to happen, understand the nature of the abuse, and the motivation of the perpetrators;
- Understand the principles of normal development, and how sexual abuse events can disrupt development process of the child;
- Understand how a child reacts to the abuse, thus, able to explain why the child does not or delays the disclosure, and how to resolve those situations; and
- Understand the different types of disabilities, guiding principles and communication tips in working with child victims with disabilities.

MODULE 2: DYNAMICS OF CHILD SEXUAL ABUSE AND EXPLOITATION



Photo Credit:
Flickr/UNICEF
Ethiopia

2.1. How memory works

An interview of a child victim is largely a memory task in which the interviewer elicits from the child all the details. The success of an investigation depends largely on the accuracy and completeness of the information he/she receives. Thus, an important task of the interviewer is to support the child to recall those details from their memory. Understanding how memory works, the circumstances under which it is fallible, and the emotional, developmental, and social forces affect the memory can assist thoroughly the police officers in their investigation work.



ACTIVITY 2.1: Memory & interview techniques (Facilitator's guide)

2.1.1. General memory processes

Memory, in order to be recalled, needs to pass three processes: (1) Encoding; (2) Storage; and (3) Retrieval. Encoding is when the information is stored in the short-term memory, storage is when the information moves from short-term memory to long-term memory, and retrieval is when the information is recalled.

2.1.1.1. Encoding

Firstly, information must be encoded. Then information will enter into short-term memories. The encoding process is affected by many factors:

(1) Firstly, the attention of the person at that time. The more attention a person pays to it, the more likely they will remember later. The degree of the attention a person pays to is affected by the degree of importance the person perceived at that time. If the child is not aware he/she was abused (abuse happens when they were sleeping), or the child did not know this was abuse (lack of knowledge), this can affect how the information is encoded and remembered.

(2) Secondly, the level of stress. As stress increases, the ability to process complex information is reduced. This means in those stressful situations, the child tends to ignore anything that is irrelevant at the time and break the situation down to the basics that relate to safety and survival. Encoding may be disrupted, leading to sparse information and fragmented memories. The child victims may temporarily, or entirely forget experiences of child sexual abuse or aspects of the abuse. Dissociation and complete forgetting were significant among a sample of child victims who experienced onset of abuse in their early childhood.

(3) Thirdly, the physical and mental state. Drugs, medications, alcohol, consciousness, and age affect how information is interpreted, and remembered.

Box 13: What is dissociation?

Dissociation is a mental process where a person disconnects from their thoughts, feelings, memories or sense of identity. People who experience a traumatic event will often have some degree of dissociation during the event itself, or in following hours, days, or weeks. The event seems “unreal” and the persons feels detached from their bodies/minds. For example, the child describes “standing or floating”, or “leaves their body during sex and watches from the ceiling” during the abuse.

Source: Schwartz, M. (1995). Post-traumatic stress, sexual trauma and dissociative disorder. US Department of Justice.

2.1.1.2. Storage

During storage stage, a memory that is resting in short-term sensitive memory (which is susceptible to change) convert into long-term memory ²¹.

This process can be disrupted if the memory is discussed with others, or the meaning of the event changes after each time it is recalled. This is called memory drift where subsequent interpretations are stored in addition to the original memory, or the interpretations alter the memory - over the top of the memory. This leads to an increase in errors in the memory.



EXERCISE 2.1: How memory changes (Workbook)

This has implications for multiple interviews of children by the police officers. Anything the police officers say to the child can have impacts on later interviews as new interpretations can add and distort their original memory. This explains why free call (free narrative) and avoid leading questions in the interview techniques is important for the interviewer to preserve the original memory of the child.

²¹ Alberini, C. (2011). The Role of Reconsolidation and the Dynamic Process of Long-Term Memory Formation and Storage. 5(12) Frontiers in Behavioral Neuroscience.

2.1.1.3. Retrieval

Retrieval is the process when stored memories are brought into conscious thought or recalled. This is affected by a range of factors including:

- The state of the person doing the retrieval. For example, if stressed or under pressure, retrieval can be hampered;
- The environment and context, for example, environments that are noisy, hot, cold or very distracting can hamper retrieval. Contexts that allow the person time and space to remember help retrieval;
- How much effort the person puts into the process. When people try and remember something, they can quickly scan the memory and provides the most salient facts; and
- Retrieval is often assisted when cues are provided. The cues may be generated internally, or externally (with the assistance of external physical environment).

While the interviewer has less influence on the encoding and storage process, he/she has significant impact on the retrieval of the memory of the child. Some good practices to help facilitate the retrieval of the memory:

- Controlling the environment (quiet, no interruptions, few distractions, etc.);
- Controlling the pace and structure of the interview to allow and encourage concentration and deep memory processing;
- Supporting the retrieval attempts of the victim/witness. For example, using the child's words as cues to support further detail retrieval;
- Demonstrating good listening skills (eye contact, respectful timing of questions, not interrupting); and
- Motivating the child to work hard, eg. Telling them its important they tell you everything they can remember, and that it's important that you know as much about what happened as possible.

2.1.2. Characteristics of memory

2.1.2.1. Suggestibility

Suggestibility refers to the degree to which a child's understanding is changeable by the words or actions of another. The younger the child, the more suggestible the memory is. Factors particularly associated with increased suggestibility include repeated and suggestive questioning, questioning after long delays, and questioning by authority figures seeking to obtain a desired answer. Children are more easily mislead about peripheral information than central aspects of events. For example, if asking "Did the man kiss you?" may mislead the child. Children are also more suggestible when they perceive interviewers as authoritarian, unfriendly, or intimidating, and ask leading questions.

2.1.2.2. Misinformation effect

Introducing incorrect information about an event during questioning or asking children to repeatedly imagine or think about a non-event can lead to confusion about the source of the memory. This is called "misinformation effect". Young children may not be skilled at source monitoring and be unable to distinguish whether they heard about or imagined the event or whether it really happened.

Use of open ended questions at the beginning of an interview will allow the child to access their memories without being corrupted. Once they have recalled the memories, those memories will be strengthened by the process of retrieving them (by asking focus questions), thus, reducing the risk of later specific questions having a corrupting effect.

2.1.2.3. Primacy and recency effect

Memory is generally stronger for the first time, the most recent time, and typical events something happens. The most recent and first time is better remembered because it has been stored for less time, and has not been subject to an interference to deteriorate. The typical events differ from the patterns and “stick out” from the general template. This can be the time the perpetrator used a video camera, or the time Mum came home and nearly caught them etc.

It implies that the best approach to interview a child who has been subject to a series of assaults is to ask about the most recent event first (and explore it in its entirety), and move onto the first event, then would ask the child to nominate any events that stand out, and explore each these in turn.

2.1.3. Implications for the interviewers

Studies show children’s memories are fragmented and brief, but basically accurate. Very young children are able to remember things with adult levels of accuracy. If asked open, non-leading questions, children’s accuracy runs at 97%. This number falls dramatically as questions become more specific and more leading.

Using open-ended prompts to practice providing information: The child who were given the opportunity to practice providing information about neutral topics during the rapport-building phase gave twice as much information compared to children who were asked many specific questions.

Introducing instructions in the beginning: Children are taught to admit not understanding, ask for clarification, and say they do not know the answer. The effect is greater when children have an opportunity to practice the skills.

Dealing with potential source monitoring errors: As children sometimes incorporate information from conversations or interviews into their accounts, they can be given an instruction to think carefully about how they know what they are remembering and sort out what they might have been told from what they actually recall from the event.

Using simple language and avoid misleading questions: Children make significantly fewer errors when questions are linguistically simple and do not contain legal or other jargon. Children interviewed in a warm, supportive manner are more accurate and resistant to misleading questioning than children interviewed in an intimidating fashion.

Memory is not an unchangeable recording, but tends to be fragmentary and is “re-constructed” when accessed. This process of constructing memory thus, is complex and effortful. It is also vulnerable to suggestibility and misinformation effect. This is important for the law enforcement officials to acknowledge how the memory works, thus, provide support for children to recall those events through using interview techniques, create a child-friendly environment, and using effectively communication aids. If the child victims are provided with the correct environment, they can recall their memories with a high level of accuracy.



EXERCISE 2.2: Why applying these interview techniques? (Workbook)

Summary of section 2.1:

- Interview is largely a memory task. The role of the interviewer is to support the child victims to recall the details.
- General memory process goes through three stages: encoding, storage, and retrieval. The information is first stored in the short-term memory in the encoding stage, then converted into long-term memory in the storage stage, and can be recalled in the retrieval stage. Memory of the child is distorted, fragmented, but remains accurate.
- Memory are subjected to suggestibility and misinformation effect. Memory is generally stronger for the first time, last time, and atypical time of an event.
- By asking open questions, using child's words, avoiding leading questions, introducing ground rules, creating a child-friendly environment, and demonstrating listening skills, the interviewers can help the child to recall the details.

2.2. Basics of child's development

As a professional interviewer of children, it is important to gain a well-rounded understanding of child development. This will help the law enforcement official in planning and conducting the interviews as well as making decisions about what questions to ask, how to ask the children, and what questions to avoid. Additionally, the law enforcement official will gain deeper understandings why a child is responding in a certain way in an interview, and where necessary, adapt his/her interviewing style to match. This will allow the interview to be conducted in a way that gives the child the opportunity to provide the best possible evidence.

2.2.1. Principles of normal development

There are four basic principles of child normal development:

- Development depends on a complex interaction between the child's genes and their experiences (nature and nurture);
- Development occurs across four domains;
- Development is incremental and step wise; and
- Children create their own understanding about how the world works ²².

Principle 1: Development depends on a complex interaction between the child's genes (nature) and their experiences (nurture).

Child's genes are their genetic inheritance and common to all normal children. For example, the ability to learn to walk, or learn language. However, it can vary in degree. Children live and grow within an environment which provides them a range of experiences. Factors such as social environment, education, culture, etc. influence the children's experiences and his/her interpretation about the world.

²² Royal Commission into Institutional Responses to Child sexual abuse. (2008). Training manual (2008). Accessed at <https://www.childabuseroyalcommission.gov.au/sites/default/files/VPOL.3027.004.0147.pdf>

These experiences work in combination with the child's genes to shape the child's development outcomes. A child who grows up in an impoverished community characterised by high levels of violence and alcohol abuse, low levels of formal education and poor diet may understand the world very differently from a child raised in an affluent, mainstream area. This forms core belief systems of the child about personal rights and responsibilities, social norms, justice, or how people interact in general. Core beliefs once formed are very resistant to change, even in the face of later personal experiences.

When interviewing, if the child is unskilled in narrating information, has disorganized thinking, or does not follow the social norms, the law enforcement officials shall understand that are the results of his/her surrounding environment on the child's development. Learning more about the environment and experiences the child have can prepare the law enforcement officials learn the way the child think, behave, or respond, and assist in the integration process. Do not expect the child behave or respond as a normal child due to the trauma he/she experiences and the environment the child is raised up.



EXERCISE 2.3: How environment affects a child (Workbook)

Principle 2: Development occurs across four domains

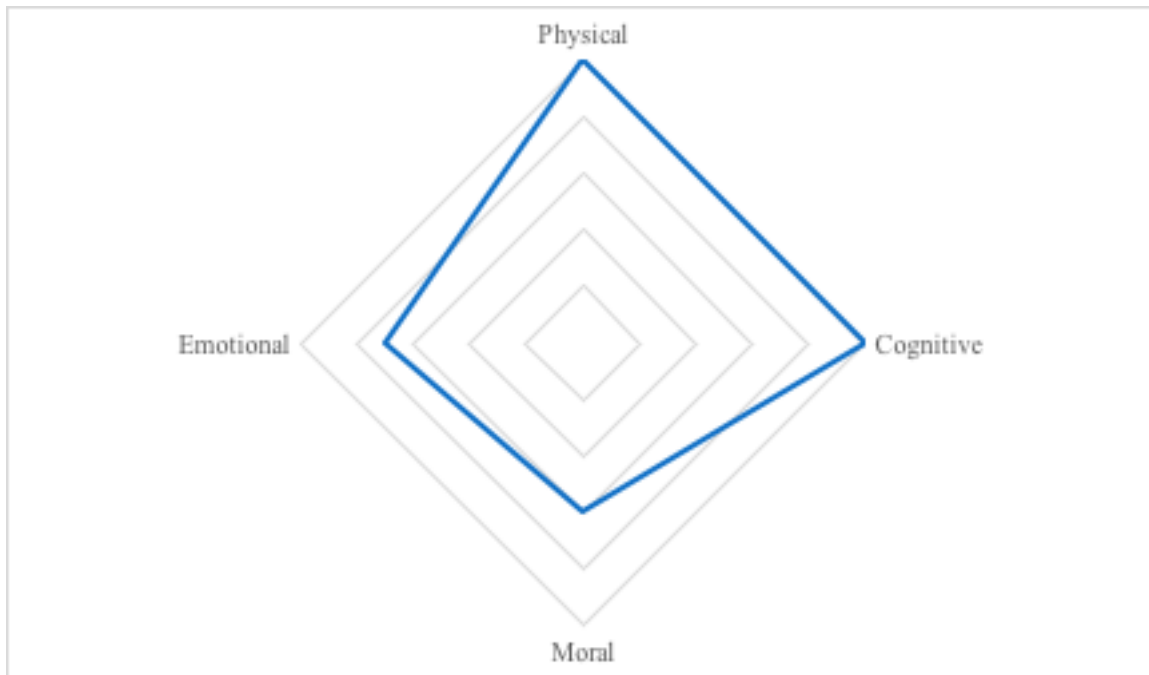
As children grow, they develop in four main areas: physical, cognitive, emotional, and moral.

- (1) Physical:** Refers to the physical development includes the child growing bigger and changes in the body;
- (2) Cognitive:** Refers to the mental process of knowing, thinking, remembering, reasoning, understanding, problem solving, evaluating, and using judgment;
- (3) Emotional:** Refers to feelings, emotional control, and understanding of what constitute of appropriate social behaviors;
- (4) Moral:** Refers to knowing what is right and wrong.

Different domains will develop at different speeds and at different times. If a child is advanced in the development in one domain, they might be behind on another domain. For example, the child is physically well developed, this does not mean he/she has the same expected intellectual or social emotional development. Vice versa, a child may appear undeveloped in one area, but this doesn't mean they are delayed across all domains.

A child also needs an environment that gives them the right things they need in order to develop fully rounded. If children do not get the right kind of input, their development will be affected and can be 'unbalanced' and "uneven". This explains why some children who have been persistently sexually abused can be very sexually advanced, but underdeveloped emotionally. For example, they can present as seductive and/or sexually provocative, but lack of social and emotional skills. They may not have the skills of making and keeping friends, but only interact with others through sexual ways.

Figure 1-1: “Uneven” child’s development



It is necessary to do a careful review of child’s domains development to assess their abilities before the interview. However, a child’s development in some domains does not necessarily inform the law enforcement official about his/her abilities in retrieving and narrating the details. When the law enforcement officials come across a child who appears advanced or delayed in some domains, he/she shall not judge a child’s development level in overall.

Principle 3: Development is incremental and step wise: Each new development skills builds on the last.

Development takes time, energy, and in order. The genetic part of a child’s development has built in critical periods, which means there is an internal timetable helps the child focus on one developmental area after another.

If the child’s experiences happen out of synch with this timetable, it can hamper development. If the children only experience one level, they will never develop skills beyond that level, or have gaps in their development. Their later development “skips a step” and is based on a poor foundation. For example, the child who is groomed and sexually abused by a teacher. They can expose to a whole range of advanced sexual behaviors before they know the basics of forming a relationship (first boyfriend/girlfriend) (holding hands, first date, etc.).

It can be a challenge for an interviewer to detect developmental gaps in the children, especially the consequences of gaps in their early development. Learn as much about the child as possible can assist in the interview and understand why the child behaves or responds in that way. Talk to adults in the child’s life, such as parents, teachers, etc. can help show up patterns of behaviors, especially unusual ones. By this way, the law enforcement official can adapt their interviewing strategy.

Principle 4: Children make their own understanding about how the world works.

Children make their own understanding about how the world works. As their experiences and background are different, they can have different interpretations for the same events. A child might ‘understand’ in a cognitive way, that a father abuses a child is ‘against the rules’ because they have been told this, but they might not ‘understand’ that it is ‘wrong’ in a moral sense. This can later affect how they understand and interpret wider concepts such as gender roles, masculinity, use of violence, etc. in future situations.

**EXERCISE 2.4: Story under the child’s lens (Workbook)**

As an interviewer, making assumptions about a child’s behaviors through the lens of an adult can lead to false assumptions, disregard important information, as well as misinterpret what the child trying to say. Some common errors are:

- Assuming children understand that their father having sex with them is wrong;
- Assuming that children who have been sexually abused or assaulted view it as unpleasant, undesirable or upsetting; and
- Assuming that parents love their children

Keep an open mind when interviewing the children. If you can understand the way the child sees the world, it can help unlock the information they have about what’s happened to them.

2.2.2. Working with children across age and developmental stage

Based on their developmental stage, children are categorised into three groups: pre-school, school-age, and adolescents. At certain developmental stage, the children can and cannot perform sets of different degrees of cognitive and linguistic abilities. However, if the child is in new environment and/or in trauma, they may regress to an earlier developmental stage, thus, affect their abilities. As a law enforcement official, acknowledging these characteristics may assist him/her in tailoring the interview techniques and questions to the specific developmental stage of the child.

**ACTIVITY 2.2: Three developmental stages of the child (Pair discussion) (optional)****2.2.2.1. Three developmental stages of the child****a. Pre-school stage (below 6)**

- Learn about the name of numbers, time (hours, days, months, years, etc.), distance, kinship, size, etc. before they can use them correctly. They can supply arbitrary answers without fully understanding them.
- Tend to supply a response to questions even if they have no knowledge. The common answer is “Yes”. For short-restricted choice question (“Was it red or blue?”), children may simply reply ‘Yes,’ rather than explicitly picking one option or rejecting both.
- Tend to supply the answers that the adults want, particularly in response to a tag question (e.g., ‘You like it, don’t you?’).
- Have difficulties in differentiating between truth and lies. Do better with simple concepts, objects, subjects rather than abstractions.
- Aren’t good at collecting things into adult-like categories. Questions such as “anything like this happened before?” may be hard for them to answer.
- Can only focus on one idea at the time.
- Have difficulty with pronoun references: he, she, we, they, etc.

- Believe in general that adults speak the truth, are sincere, and would not trick them. Adolescents and adults who have intellectual disabilities may perform the same degree of cognitive and linguistic skills as pre-school age children.

b. School-aged stage (aged 6-13)

- Be able to perform more sophisticated tasks and understand complex concepts than pre-school age children.
- Better usage of language and reasoning. However, still make errors with negatives, pronoun references, and handling abstract concepts.
- Develop logical thinking, which allow them to reason and think about the events
- Develop a sense of morality, however, still unequipped to deal with adult insincerity such as sarcasm, irony, etc. and generally believe that adults speak truth.

c. Adolescent stage (aged 13-18)

- Are very close to achieve the language level of adults, however, legal jargon may still be misunderstood.
- Develop a strong sense of justice. Can think about ethics and answer questions about whether actions were right or wrong.
- Can accurately estimate times, distances, physical dimensions, and better usage of time.

It is important to take into consideration adolescents' emotional and social development as well as their vulnerability. At this age, adolescents are very focused on the development of their own identities and are therefore often very self-aware and sensitive to the opinions of others.

2.2.2.2. Age-specific interview techniques

The law enforcement officials shall use simple and age-appropriate language, taking into consideration the developmental stage, apparent maturity, and intellectual development of the child. After asking questions, he/she can check whether the child understands what the interviewers say.

Table 2.1: Do and Don't for interviews for specific age groups

Pre-schoolers (below 6 years)	
Do	Don't
Conduct the interview in a room with a few toys, drawing equipment and soft furnishings	Conduct the interview in a non-child friendly environment
Check to see if the child has understood what you tell them	Assume the child will understand adult concepts
Plan breaks during the interview for the child to rest	Ask exactly the same question again as they will think they answered the previous question wrong
Ask specific questions rather than open questions	Ask 'yes' or 'no' questions
Try to establish times based on events that mean something to the child e.g. "lunchtime", "sleeping", "watching television" or in relation to specific people or places, or events like Christmas or their birthday	Do not ask the child how many times something happened as they are unable to define the frequency of events or use concepts such as "before", "after", "yesterday" or "tomorrow"

Introduce the concept of a lie and a truth and check that they understand it e.g. by saying “If I said I have purple hair would that be the truth or a lie?”	Exert pressure on the child or be accusatory with your tone of voice or facial expressions
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School-aged children (6-13 years)	
Do	Don't
Use open, general questions allowing the child to provide a free account	Ask leading or suggestive questions or “why?”
Introduce more elaborate or “grown-up” language with these children based on their maturity	Use legal terminology or jargon without first defining exactly what it means
Ask the child their interpretation of what you are saying to them when you are explaining what will happen to them	Assume the child understands what you are telling them
Use specific names e.g. Aunty Bopha	Use personal pronouns such as “she’, or “he”

Adolescents (13-18 years)	
Do	Don't
Talk to the child in a manner that does not patronise them or belittle them	Forget that they are children even if they present physically as an adult
Be clear about what is and what is not private in the interview	Do not promise that you are not going to tell anybody about the things you will hear from them
Understand that interviewer behavior will influence the answers they give to you as they will learn from your behavior what they think is expected and behave accordingly	Use negative phrasing such as “you can't remember anymore can you?”

Source: Justice Studio

2.2.3. Working with child victims with disabilities

2.2.3.1. Understanding disabilities

The World Health Organization defines disabilities as: “Disabilities are an umbrella term, covering impairments, activity limitations, and participation restrictions.

- (1) Impairment is a problem in body function or structure;
- (2) an activity limitation is a difficulty encountered by an individual in executing a task or action; and
- (3) while a participation restriction is a problem experienced by an individual in involvement in life situations.”. One of five persons have some kind of disabilities in their lifetime.

In Cambodia, estimated 192,000 persons have disabilities, accounting for nearly 2 percent of the population ²³. People with disabilities are considered as among the most vulnerable groups in Cambodia ²⁴.

There are different types of disabilities. Some common types are: vision impairment, deaf or hard of hearing, mental health conditions, intellectual disability, acquired brain injury, autism spectrum disorder, and physical disability. Disabilities can occur independently or co-occur together.

People with disabilities are far more likely to be sexually victimized than people without disabilities. Due to their vulnerabilities, they become the target of the offenders specifically. The offenders take advantage of such vulnerabilities and often deliberately strive to increase them (e.g., establishing emotional connection, isolating potential victims from outsiders, withholding communication aids, etc.). More than often, victims with disabilities rarely access victim services and their offenders are not held accountable.

Incorrect assumptions, negative attitudes, and lack of information and skills are common barriers that the law enforcements encounter in assisting people with disabilities equal access to the justice, facility, service, or activity that is available to others in the general public. Thus, understanding of people with disabilities' needs, and accommodations can assist in the work of the law enforcement official in working with people with disabilities.

2.2.3.2. Principles of working with victims with disabilities

Consult the victim with a disability what works best for them is essential. Usually, the person with disability is the expert on their situation. Below is the steps to be taken before the interview with the child victims with disabilities:

1. Determine if the victim has any kind of disability. (e.g., did the person attend Special Education classes in school? Does the person participate in services with a disability organization?).
2. Find out how this disability may affect the interview process; each person is unique so further information will be gathered when you meet the person.
3. Determine if the victim uses any adaptive equipment, such as a hearing aid, crutches or a wheelchair?
4. Determine if the victim has any attention difficulties.
5. Determine how the victim best communicates their wants and needs.
6. Determine what makes it easiest for the victim to understand what others communicate.
7. Assure the setting for the interview is accessible to the victim.
8. Arrange for a victim advocate to be present to support the victim, if possible.

Principles in working with victims with disabilities: Due to their vulnerabilities and special needs, victim with disabilities may need additional care and support. The law enforcement officials shall be sensitive to the needs of the victims, and equipped with special skills in communicating with victims with different types of disabilities:

²³ Cambodia Demographic and Health Survey. (2014). The Disabled in Cambodia. Accessed at unstats.un.org/, on 10 December 2018.

²⁴ International Labor Organisation. (2009). Inclusion of people with disabilities in Cambodia.

- Be aware of the effects of trauma on the victims: Never assume that people with disabilities suffer less emotional trauma and psychological injury than any other crime victim, they even suffer more. Evaluate how disabilities might affect the victim's ability to participate in the process. Their disabilities, plus the effects of trauma, may affect their cognitive and linguistic skills.
- Allow additional time: Allow plenty of time when working with child victims with disabilities. Schedule shorter interviews with breaks. Allow the victims to have more time to respond and take rests. Be prepared to schedule for follow-up interviews if necessary.
- Address accessibility: Victims with disabilities might need different accommodations to participate fully in the process. For victims with physical disabilities, accessibility includes getting access to places, using interior stairs, restrooms, etc. Victims who are blind and/or hard of hearing may need special communication aids and services such as sign language interpreters, assistive devices (hearing aids, electronic forms, screen readers, etc.), etc.
- Treat victims equally: Child victims with disabilities, like child victims, are entitled to have their rights respected during the justice process. Treat victims with respect and dignity. Ensure the child is informed, participate in the decision-making process, and have their views taken into considerations. Having a victim advocate may assist in the justice process.

2.2.3.3. Communication tips in working with people with disabilities

Below are some factors that can influence communication with victims with disabilities:

1. Following a trauma, it may be more difficult for a person to follow what is being said and to speak.
2. A person's ability to communicate what happened to them is not necessarily related to cognitive understanding or truth-telling.
3. It is easier for a victim to communicate what happened to them when speaking with someone they trust.
4. Some people communicate in nontraditional ways or ways that are not easy for us to understand; however, they can still communicate if we take the time to understand.
5. Some people can understand what is said; however, have difficulty expressing what they want to say.
6. We all have different ways of understanding others and expressing ourselves. Attempt to use multiple means of communication to increase the likelihood of being understood.
7. Some disabilities can impact how a person responds under stress. Do not be misled or misinterpret a person's affect.

Ten (10) general communication tips in working with victims with disabilities:

1. Focus on the "person" side of the victims, not the disability. Use People First Language to show respect to the victims:
*"I would talk to someone who would not judge me or treat me different because I have a disability. We are all people."*²⁵

²⁵ Illinois Family Violence Coordinating Council. (2011). Protocol for Law Enforcement: Responding to Victims with Disabilities who experience sexual assault and domestic violence.

“I would want to talk with someone who is comfortable with my disability and sees me as strong. I won’t talk to someone who just focuses on my disability or someone who thinks I’m not intelligent because I use a wheelchair.”

Box 14: People First Language

“People-First Language” is the preferred way to write and speak about people with disabilities. It refers to the person first and the disability second, and the person as having a disability, not as being a disability. For example, a person is referred to as “a person with an intellectual disability” or “a person who has a mental illness,” rather than “a disabled person” or “a mentally ill person”; “a person with autism” and not “an autistic person”; or “intellectual disability” rather than “retarded,” “crazy,” or “crippled” in everyday language. (For the extended list of People first language, please refer to Annex

2. Always speak directly to the person. Do not speak through a companion or a service provider.
3. Identify yourself when speaking to a person who is blind. Always announce when entering and/or leaving the room.
4. Wait for a response and instructions when offering assistance. Always wait until an individual accepts your offer, then listen to the instructions or ask for suggestions.
5. Do not hang or lean on a person’s wheelchair. A wheelchair is an “assistive technology” or a “mobility aid”, not furniture.
6. Speak to people at eye level. When interacting for a period of time with someone using a wheelchair, sit down to their eye level.
7. Wave your hand or tap a person who is deaf on the shoulder to get their attention. Speak in regular tone. Keep objects away from your mouth so the person can read your lips.
8. Listen attentively and do not pretend to understand. If a person speaks in a manner that is difficult for you to understand, be patient. Listen carefully and wait for her/him to finish. Clarify what the person said, reflect what you heard and let the individual respond. Ask short questions that can be answered by a “yes” or “no” (or a nod or shake of the head).
9. Relax, and do not be embarrassed when you use common expressions that seem related to a victim’s disability

For example, saying “Do you see my point?” to a person with a vision impairment; “I’m waiting to hear back from her,” to a person with a hearing loss; or “I need to run over there,” to someone who uses a wheelchair. Victims know what you mean and will not typically take offense.

10. Do not express more anger, frustration, or outrage than you normally would, simply because the victim is a person with a disability.

For example, avoid comments such as: “I can’t believe they did this to someone like you;” “She’s disabled, and he raped her anyway;” or “To steal from a blind man, that’s got to be the lowest.” Such phrases can send the wrong message – that you consider people who have disabilities as “less than” complete human beings.

Working with people with different types of disabilities (optional)

Be aware of different needs and communication types of each disabilities allows the law enforcement officials to communicate effectively and assist the child victims and their families appropriately. An extended version of these strategies is mentioned in the Annex 5.



ACTIVITY 2.3: Working with children with different types of disabilities

a. Children with vision impairment

Vision impairment refers to people who are blind or who have partial vision. When talking with a person who is blind or has a vision impairment:

- always identify yourself and any others with you
- ask if the person requires assistance, and listen for specific instructions, however be prepared for your offer to be refused.
- Be aware that glare and poor lighting may exacerbate vision impairment.

If guiding a person, let them take your arm, rather than taking theirs. Describe any changes in the environment such as steps, obstacles, etc.

b. Children who are deaf or hard of hearing

Hearing impairments can range from mild to profound. People who are hard of hearing may use a range of strategies and equipment including speech, lip-reading, writing notes, hearing aids or sign language interpreters. When talking to a person who is deaf or hard of hearing:

- look and speak directly to them, not just to the people accompanying them, including interpreters
- do not use friends or family members as Sign Language Interpreters
- do not take the interpreter aside to discuss background information or other case-related information
- observe the victim closely, because gestures and facial expressions are an important aspect of communication for people who are deaf.
- speak clearly and use a normal tone of voice unless otherwise instructed by the person with the hearing impairment
- if you don't understand what a person is saying, ask them to repeat or rephrase, or alternatively offer them a pen and paper.
- if the suspect also needs a sign language interpreter, use a different interpreter than is used with the victim

c. Children with mental health conditions

Mental illness is a general term for a group of illnesses that affect the mind or brain. These illnesses, which include bipolar disorder, depression, schizophrenia, anxiety and personality disorders, affect the way a person thinks, feels and acts. A person with a mental health condition may experience difficulty concentrating, which can sometimes be a result of medication. Try to avoid overly stressful situations wherever possible so that their condition is not exacerbated.

Tips

- Provide clear and thorough explanations and instructions, in writing if required.
- Ask the person how they would like to receive information.
- Allow more time and greater flexibility

d. Children with intellectual disability

A person with an intellectual disability may have significant limitations in the skills needed to live and work in the community, including difficulties with communication, self-care, social skills, safety and self-direction. The most important thing to remember is to treat each person as an individual:

- a person with an intellectual disability is just like everyone else - treat them as you would like to be treated
- be considerate of the extra time it might take for a person with an intellectual disability to do or say something
- be patient and give your undivided attention, especially with someone who speaks slowly or with great effort.
- keep the pressure of any given situation to a minimum as stress can affect a person's concentration and performance.
- keep instructions simple and in bite-size pieces use demonstration and increase complexity as progress is made.
- be aware that a person with intellectual disability may be less aware of social cues and may have less developed social skills.
- give verbal and written instructions or try giving examples to illustrate ideas and summarise ideas often.

e. Children with Autism Spectrum Disorder

There are different types of autism, includes: Autistic disorder, Asperger's syndrome and atypical autism. Autism affects the way information is taken in and stored in the brain. People with autism typically have difficulties in verbal and non-verbal communication, social interactions and other activities. Impairments usually exist across three main areas of functioning:

- social interaction
- communication, and
- behavior (restricted interests and repetitive behaviors).

Many people with an autism spectrum disorder also have sensory sensitivities, i.e. over or under sensitivity to sight, touch, taste, smell, sound, temperature or pain.

Some characteristics of children with autism

Those with autism are typically of average or above average intelligence, and can show a wide range of behaviors and social skills. People with autism may display some of the following characteristics:

- difficulty in forming friendships
- ability to talk well, either too much or too little, but difficulty with communication
- inability to understand that communication involves listening as well as talking
- a very literal understanding of what has been said. For example, when asked to 'get lost', as in go away, a person with autism will be confused and may literally try to 'get lost'
- inability to understand the rules of social behavior, the feelings of others and to 'read' body language. For example, a person with autism may not know that someone is showing that they are cross when frowning
- sensitivity to criticism
- a narrow field of interests. For example, a person with autism may focus on learning all there is to know about cars, trains or computers
- eccentricity

Tips

- Establish routines and predictable environments.
- Inform people with autism what is about to happen before it occurs.

f. Children with physical disability

The common characteristic in physical disability is that some aspect of a person's physical functioning, usually either their mobility, dexterity, or stamina, is affected. People with physical disability are usually experts in their own needs, and will understand the impact of their disability.

There are many different kinds of disability and a wide variety of situations people experience. The disability may be permanent or temporary. It may exist from birth or be acquired later in life. People with the same disability are as likely as anyone else to have different abilities.

Tips

- Always ask before offering assistance.
- Be at the same level when talking with the person.
- Never assume that a person with physical disability also has intellectual disability.
- Ask permission before touching a person's wheelchair or mobility aid.

Summary of section 2.2:

- There are four basic principles of child development: (1) Development depends on the interaction between the child's genes and their experiences; (2) Development occurs across four domains; (3) Development is incremental and step-wise; and (4) Children create their own understanding about how the world works. Understanding the principles of child development, the police officers gain insights how environment affects the ability of the child, and how the child may see the abuse events differently from the adult's thinking.
- Children at certain age group develop some certain cognitive linguistic abilities which characterize for this age group. Police officers shall be aware of these differences to adjust the interview questions and styles.
- There are guiding principles in working with child victims with disabilities. It is the fact that if the child has disabilities, he/she becomes more vulnerable to sexual abuse than those without. Regardless of which disabilities the child has, he/she is entitled to have full rights as child victims that the police officers shall acknowledge and respect. Each type of disabilities requires different communication tips in order for the interviewers to work with effectively.

2.3. How abuse happens – The Finkelhor’s four precondition model (optional)

Sex crimes involving children are seen as being among the most heinous of crimes, and as such, offenders are highly motivated to avoid detection. Having an understanding of the dynamics of abuse and the interactions between the perpetrators and victims will help the interviewers get insights of crimes, thus, prepare better for the forensic interview. Below is the four-precondition model, a theory developed by David Finkelhor, one of the most widely known and respected researchers in the child maltreatment field. The theory suggests four conditions to pre-exist before a person can be sexually assaulted:

- (1) The offender must be motivated to carry out the act;
- (2) The offender must overcome their own internal inhibitions;
- (3) The offender must overcome external barriers;
- (4) The offender must overcome the victim’s resistance.

2.3.1. Pre-condition 1: Motivation

The offender needs to be motivated to carry out the act. No one unintentionally or accidentally sexually assaults a child. This motivation may originate through:

- Sexual arousal, the offender is either aroused by this particular child, children in general or is sexually aroused, and the child is the available outlet;
- Meeting other needs of the offender. These might include a need for power, or control;
- Anger - Examples of this might include wanting to punish or hurt another or the desire to redress the offenders sense of fairness (ie: “People have taken advantage of me, I’m going to take what I want from another”).



EXERCISE 2.5: Motivation of the offender (Workbook)

2.3.2. Pre-condition 2: Overcoming internal inhibitors

The offender needs to overcome their internal inhibitions. Unless the offender suffers significant mental health problems or cognitive functioning problems, they will have some understandings that the offence is wrong. They will have some level of internal inhibition against committing the act. Some examples of internal inhibitors are:

- Knowing it is wrong, either morally or legally;
- Fear of getting caught;
- Fear of what it means for their self-concept (The offenders may think “If I do this, I’ll be a monster, pervert, or sicko”);
- May also fear of impacts on the victim (e.g., if they have their own children, the offenders may fear that they’ll stuff them up, turn them gay, etc.).

Some ways of combating these inhibitions:

- Using alcohol and/or drugs.
- Cognitive distortions, attitudes, or beliefs. Some offenders convince themselves it is alright. There are many ways they may do this, for example, convincing themselves that it doesn’t harm the child, telling themselves that it is not their fault, that the child wanted it or asked for it, telling themselves that they won’t get caught, etc.
- Avoidance. This is a very basic way the offenders protect themselves from unpleasant thoughts and feelings. Every time they start to worry, they simply distract themselves, sometimes using the thoughts of the assault (fantasy) to elevate their mood.

2.3.3. Pre-condition 3: Overcoming external inhibitors

Box 15: Example of Drunk Arun

35-year-old Arun sexually assaulted his 8-year-old niece over a period of 6 months before he was caught. To overcome his internal inhibitors, which were primarily guilt and fear of being caught, Arun would consume alcohol prior to offending. During his offending, we would also ensure his niece was facing away from him. He admitted later this was so that he didn't have to see her tears.

The offender needs to overcome the external inhibitors barriers. External inhibitors that may restrain the offender's action include family constellation, neighbors, peers, and societal sanctions as well as the level of supervision a child receives. In order to offend, the offender needs to be able to do it away from witnesses or under circumstances where they have a reasonable chance of not being caught. This might be achieved through:

- Isolating the family, for example forbidding their children to see friends outside of school, preventing their wife from having friends, restricting access to money so she can't do anything without him being there etc.;
- Grooming other family members, for example, telling other family members that the target child is unreliable, a liar, a slut, so that if the child discloses, the offender can blame "her lying ways";
- Forming a relationship with a family whereby unsupervised access is granted. For example, forming a relationship with a single mother and offering to care for the children while she's at work or out;
- Luring child into the toilet, or the car;
- Touching child while their parent is distracted; and
- Becoming a person of authority over the child (scoutmaster, teacher, swim teacher, etc.)

2.3.4. Pre-condition 4: Overcoming resistance by the child

The offender has to overcome child's potential resistance to being sexually abused. The offender may sense which children are good potential targets, who can be intimidated or coerced to keep a secret or otherwise manipulated. Frequently, these children may even be unaware that they are being sexually approached and have little or no capacity to resist. Pre-condition 4 has three possible outcomes:

- The child may resist by overtly saying no and running away, or covertly by displaying a confident and assertive manner which conveys strong messages to the offender not to try for fear of detection or exposure;
- The child may resist but still be abused through force or violence;
- A child may resist but be overcome through coercion.

Techniques used to overcome children's resistance include manipulation of the child's understanding of the activity (grooming):

Psychologically:

- "All Dad's do this"
- "I'm teaching you how adults.... (kiss, love, touch)"
- "You're so (beautiful, special) I can't help myself."
- "We're in a relationship, we're lovers and this is what lovers do"

- “That feels good doesn’t it, you like this don’t you” (used when the offender deliberately works to make the activity physically pleasurable, at least in the initial phases.)

Emotionally:

- “I love you, you’re special” - This is especially powerful in situations where the child is not receiving appropriate levels of love or attention from their family.
- “This is our special love/ relationship”
- If you tell, they’ll(hurt me, take me away, it will kill your mother)

Physically:

- Frottage - the child is unaware of the intent, the offender makes it look like an accident.
- Wrestling games where the fondling is disguised.
- Accidental (e.g., walking in on the child in the bath or shower)
- Rubbing on cream/ lotion/ “checking” to see if bits are fine
- Force and threats
- Bribes and awards

The four pre-conditions for sexual abuse come into play in a logical sequence. The offender must firstly have the motivation and be able to overcome any internal inhibitions. When these have been overcome the potential offender will need to overcome external inhibitors and finally the resistance of the child.

**EXERCISE 2.6: Applying the Finkelhor’s four precondition model to analyse CSAE cases.**

2.3.5. Implications for the interviewers

Box 16: Grooming techniques employed by the offenders

Peter (from the previous example) had a range of techniques he employed to overcome the resistance of the boys he assaulted. Firstly, by providing them with positive attention, he became someone they liked and trusted. He would then touch all of the boys in ways that were “borderline” appropriate. For example, putting his arm around them, hugging them and if the boys didn’t protest, this would progress to kissing them on the cheek or patting them on the bottom. Those boys who resisted or seemed uncomfortable, Peter would leave alone. Those that appeared unresisting or too shy to say or do anything, Peter would target for more intrusive touching, eventually working up to sex assault and sexual penetration. Peter would reward these boys with lots of positive attention, he would form strong relationships with their parents, and he would give them special treatment, trips away, gifts etc.

Understanding the psychology of the offenders can reveal some details about the crimes, the process of the abuse, how the children react, views of the children about the abuse, and why the children disclose/do not disclose.

Firstly, when interviewing the child, look for indications of how the offender overcame his/her own internal inhibitors. This can inform any subsequent interview with the offender by providing insight into how he/she sees the world and/or how he/she views his/her offending.

Secondly, understanding how the offender overcame the external barriers helps the interviewer investigate corroborating evidence and possibly uncover other victims. For example, if the offender accesses children through his role as a coach, maybe other children can provide evidence about a pattern of behavior regarding isolating children or other grooming behaviors.

Thirdly, finding out how the offender overcame the child's resistance can help the interviewers work out how the child views what happened to them and adjust their interview style to match. Many interviewers make the mistake of believing that the child found the abuse "painful" when in fact it might have been the only time in the child's life that they received what they saw as love, attention, and affection. It can also help the interviewer understand the difficulties some children experience in disclosing the abuse. For example, if the offender has made them feel responsible (many offenders are expert at this - training the child to "ask" for the abuse so that they can then turn around and say "but you asked me to do this, remember?"). The offender might also have threatened them and the child might be so preoccupied with the threat that they cannot disclose.

Fourthly, understanding how the offender overcame the resistance of the child can also be useful in probing the child's account during the interview. The child's memory will be encoded (and therefore retrieved) via the cues associated with the abuse. Those associations will relate to the meaning the child ascribes to the offences. Meanings that may be powerfully connected with the suspect's techniques regarding overcoming external inhibitors.

Summary of section 2.3:

According to Finkelhor's model, there are four pre-conditions for the abuse to happen that the perpetrator has to overcome: motivation, internal inhibitions, external barriers, and victims' resistance. Understanding the psychology of the perpetrators assists the interviewers in understanding the nature of events, the process of abuse, and reactions of the child, thus, reveal more insights about an abuse.

2.4. How a child reacts – The Child Sexual Abuse Accommodation Syndrome (CSAAS)

The Child Sexual Abuse Accommodation Syndrome was developed by Roland Summit, M.D. It is a simple and logical model which can be used to understand the way many children react to sexual abuse. The syndrome classifies the most typical reactions of child abuse victims, dividing them into five categories: secrecy, helplessness, entrapment and accommodation, delayed, conflicted, and unconvincing disclosure, and retraction.

2.4.1. Secrecy

Abused children tend to keep the abuse a secret. They know it is a secret. Whether they are told directly or it is impressed upon them in a more subtle or manipulative ways. This is achieved through threats, manipulation, or bribes. They may be afraid of the offender who may have threatened the child or someone whom the child loves. Physically abused children may be afraid of being beaten again. Neglected or emotionally abused children long for their parents' approval and affection – they may keep silent for fear of losing the parent's love.

2.4.2. Helplessness

Children are inherently helpless and subordinate. They are small, dependent, and emotionally immature. They are used to adults having authority and having the ultimate say. When an adult uses that authority to sexually abuse a child, there is very little that the child can do about it. When their attempts to protect themselves fail, they stop trying, and may withdraw, go physically limp or dissociate.

2.4.3. Entrapment and accommodation

Children who keep their abuse a secret and continue to feel helpless inevitable feel trapped. However, they learn to accept the situation and survive. They continue to go to school, continue to play sport, continue to function as best they can to achieve some sense of power and control. How the abuse has impacts on them depends on to what extent they struggle, thus, the signs of sexual abuse may not be specific and obvious. Many of them may also employ defensive mechanisms (e.g. dissociation or blocking the memory) in an attempt to accommodate to the abuse.

2.4.4. Delayed, conflicted and unconvincing disclosure

Adults who ask a child to disclose the abuse must recognize that this request may precipitate an acute crisis for the child. The same when the adults have to tell big secrets: the lost of a loved one, a serious health issue a friend has, or a sudden accident causing death, etc. You may decide to choose the right time to tell, or ease the message by using less direct language.

The same principle applies for a child. They may decide when, how, and indeed whether to tell about the abuse. They may wait a right time to tell, for example, when the offender is not around. Or they may try to ease the message indirectly by saying "Uncle B. does funny things sometimes".

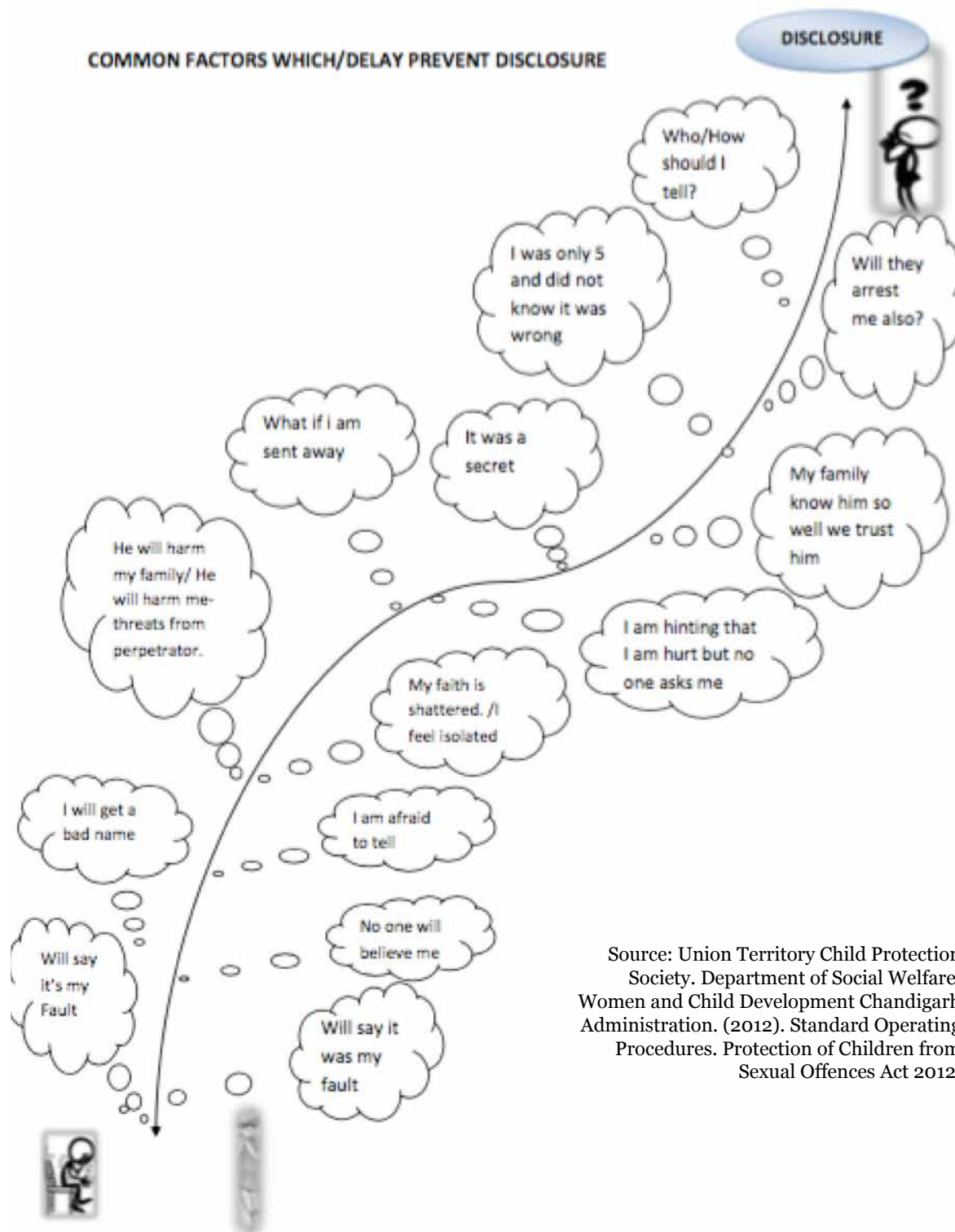
Initial disclosures may be fraught with anxiety, retractions, and inconsistencies. The child has used various defensive mechanisms to cope with the abuse, thus, memory may be fragmentary, perceptions may be altered, and information may be scattered and sparse.

2.4.5. Retraction

Children who do the abuse disclose may be flooded with guilt, fear, and feelings of betrayal or confusion. The immediate adult's response may frighten them further. For example, the child may be removed into foster care, the parent may be put in prison and members of the child's family may suffer. Children gravitate towards the safety of a familiar situation, no matter how painful it is. Most abused children remain loyal to their families, and if given a choice, frequently want to stay with their abusive parents.



EXERCISE 2.7: Applying CSAAS Theory in analyzing a CSAE case (Workbook)



Source: Union Territory Child Protection Society. Department of Social Welfare, Women and Child Development Chandigarh Administration. (2012). Standard Operating Procedures. Protection of Children from Sexual Offences Act 2012.

2.4.6. Implications for the interviewers

Firstly, if the interviewers can put himself/herself in the place of the child and understand the difficulties associated with telling a secret, it can help understand what the child says, why the child disclose/do not disclose, and frame the questions in a helpful way. Additionally, giving a new lens to see the information help explain the inconsistencies in the answers of the children.

Secondly, understanding how the child react, or resist to the abuse events, the interviewers get an insight of the broader functioning of the child. This helps to design the questions suitable to the age and developmental stage of the child. This also help explain the grooming process, not only the child, but also potentially other children and their family. It might give hints to the subsequent interviews with the alleged offender.

Thirdly, it gives implications for needs assessment and service referral in the later stage, which in turns help build the resilience to the challenges they are facing. Communicating with non-offending family in explaining the way the child act, or not act as expected help to formulate treatment programs and intervention.

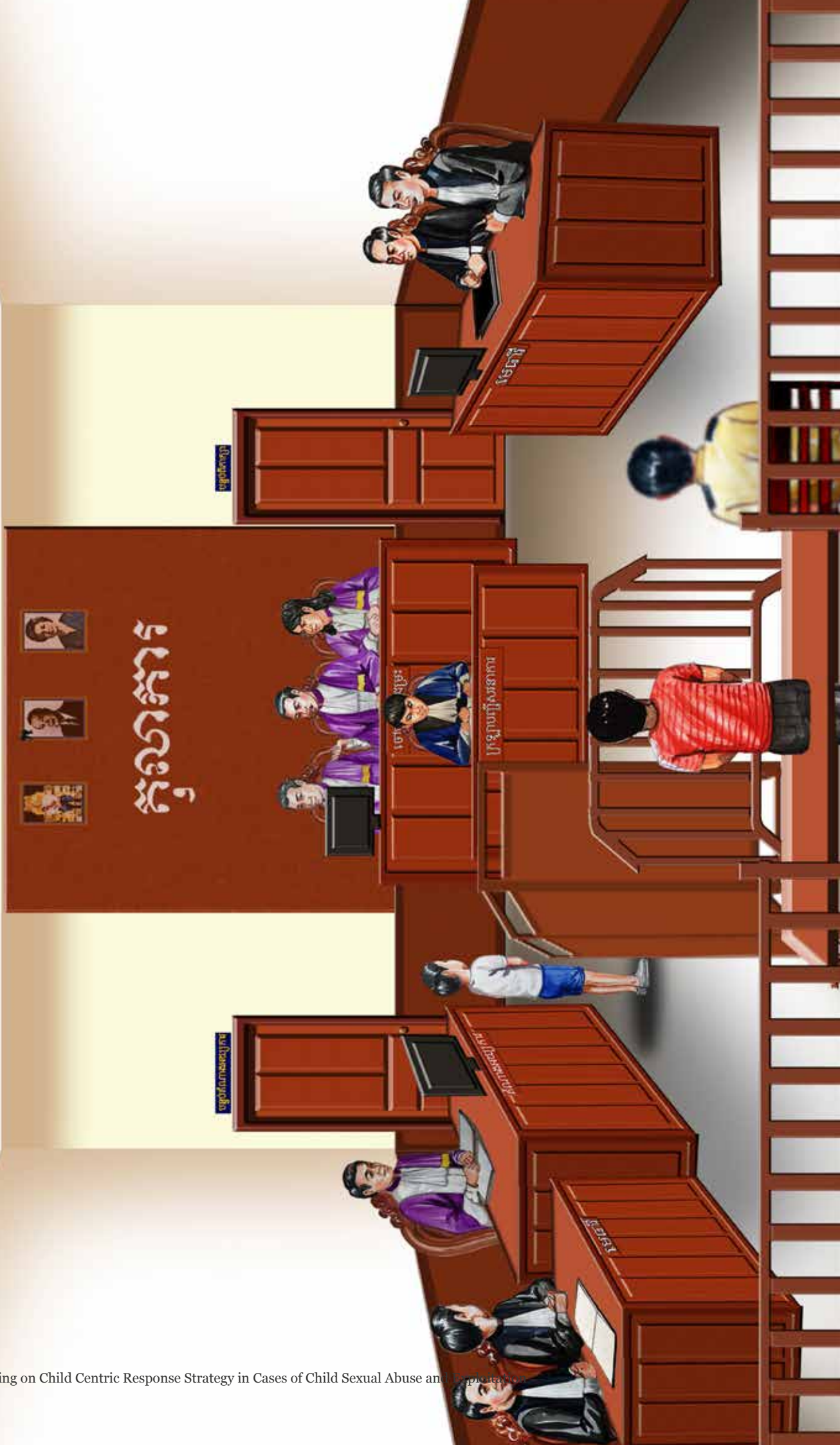
Some children do not show signs of abuse (bedwetting, pain, or weight loss/gain, etc.), just because they have developed defensive mechanism to protect themselves, but underlying the abuse, the psychology and minds of children still suffered. In another case, children did not disclose, sometimes for years till they grow up, because of fear, social stigma, self-blame, protection of loved ones. Understanding the difficulties of the child telling a secret helps the interviewers ask appropriate questions and frame the interview accordingly. This also provides essential information in psychology and social intervention program to help in reintegration process.

Summary of section 2.4:

The typical pattern of events is as follows: the child is forced to keep the sexual abuse a secret and initially feels trapped and helpless. These feelings of helplessness and the child's fear that no one will believe the disclosure of abuse lead to accommodative behavior. If the child does disclose, failure of family and professionals to protect and support the child adequately, augment the child's distress and may lead to retraction of the disclosure. The theory has been used widely to explain why children's disclosures are often delayed following abuse and why disclosure is sometimes problematic or retracted.

KEY LEARNING POINTS FOR MODULE 2

- General memory process goes through three stages: encoding, storage, and retrieval. The information is first stored in the encoding stage, then converted from short-term memory into long-term memory in the storage stage, and can be recalled and brought into conscious thought in the retrieval stage. Each stage is affected by different factors. For a child victim, experiencing trauma, awareness of the child about the events, influences from surrounding environment affect how the child encodes, stores, and retrieves his/her memory about the events. More than often, their memory is distorted, fragmented, but remains accurate.
- Memory, especially of the child, are subjected to suggestibility and misinformation effect, which can lead to false allegations. Memory is generally stronger for the first time, last time, and atypical time of an event. The interviewer can use those characteristics to apply suitable interviewing techniques: avoid leading questions, establish ground rules, or create favorable conditions for recalling the memory, etc.
- According to Finkelhor's model, there are four pre-conditions for the abuse to happen that the perpetrator has to overcome: motivation, internal inhibitions, external barriers, and victims' resistance. Understanding the psychology of the perpetrators assists the interviewers in understanding the nature of events, the process of abuse, and reactions of the child, thus, reveal more insights about an abuse.
- Children have complex feelings before he/she decide to disclose: secrecy, helplessness, entrapment and accommodation, delayed, conflicted, and unconvincing disclosure, and retraction. Acknowledging how a child reacts to the abuse, the police officers understand why the child do not or delay the disclosure, and can better assist the child in psychological support and integration program.



MODULE 3

APPLYING CHILD-CENTRIC APPROACH IN CHILD SEXUAL ABUSE AND EXPLOITATION CASES

LEARNING OBJECTIVES:

At the end of this module, the trainees will have the necessary knowledge and skills to:

- Uphold to guiding principles in responding to child sexual abuse and exploitation cases;
- Gain understanding of child-friendly standard operating procedures in responding to CSAE cases, and be able to put it in practice;
- Gain necessary skills in communicating and working with child victims in a sensitive manner;
- Acknowledge good practices of child protection against sexual abuse and exploitation from different places and lesson learned for their Units; and
- Principles and tips of working with different stakeholders and/or child protection agencies and ability to mobilise resources in assisting in CSAE cases.

MODULE 3: APPLYING CHILD-CENTRIC APPROACH IN RESPONDING TO CHILD SEXUAL ABUSE AND EXPLOITATION CASES



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Flickr/Child
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3.1. Guiding working principles

Guiding principles set out ethical responsibilities and standard behaviors of the law enforcement officials to ensure the best health and well-being's services are delivered to the children and families as possible.

These following guiding principles/approaches draw upon best practice principles outlined in the UNHCR Guidelines on Sexual Violence Response and Prevention, UNICEF Justice for Children, and Cambodia's best practices in consultation with National Cambodia Police Forces in the context of Cambodia and tailoring to the international standards.

Upholding children's rights - Rights-based approach

All children should be offered the same high-quality care and treatment, regardless of their race, religion, gender, family situation or the status of their caregivers, cultural background, financial situation, or unique abilities or disabilities. Victims have a right to be protected, consulted and informed of all actions being taken on their behalf. Children have the right to participate in decisions that have implications in their lives. Information about a child's experience of abuse should be collected, used, shared and stored in a confidential manner. 'Best interests shall be a primary consideration' in any decision where a child will be affected that police, judges and prosecutors should give priority to the child's best interest.

Adopting child-friendly procedures - Child-centric approach

Any action initiated by the law enforcement agencies should ensure that the victim is the pivotal/ focal point. In all cases involving child victims or witnesses, measures and safeguards should be implemented to protect them from intimidation, reprisals or secondary victimisation that may occur whilst participating in the justice process. For example, the victim is (1) not treated as an offender, (2) not re-victimised, (3) not stigmatized, and (4) is entitled to receive help and assistance as a matter of right.

Integrating multi-disciplinary services - Multi-disciplinary approach

Agencies and professionals work together with mutual responsibilities and joint accountability for managing different aspects of helping a child within the context of the family, community, and society. The management of child abuse cases is multi-sectoral (national and local government agencies, non-government and faith-based organizations, civic and private sectors) and multi-disciplinary (police, prosecutor, judge, lawyer, social worker, medical doctor, psychiatrist, psychologist, barangay officials, among others) working together as a team to provide appropriate protection, legal and social services to the child victims of abuse, neglect, and exploitation. The law enforcement agencies need to coordinate with these stakeholders to develop a synergy and partnership with them.

Addressing gender-bias - Gender-sensitive approach

The approach recognizes that girls and women's perceptions, experiences and interests may be different from those of boys and men, arising from an understanding of their different social position and gender roles. The provision of gender-sensitive services to abused children necessarily includes rights-based approach, i.e. responding to victims' peculiar needs at all times and in all stages, according them respect, and promoting dignity as their inherent right. The law enforcement officials recognize and address any gender bias he/she holds towards the child victims.

Strengthening children's resilience - Family and community-based approach

This approach recognizes that families and communities are the first line of response in dealing with problems of children, thus interventions should strengthen the capabilities of families and communities to care for them.

3.2. Child-friendly Standard Operating Procedures (SOP)**3.2.1. Characteristics of child-friendly SOP**

- **The child's well-being comes first:** If the child victim is too distraught to immediately give a statement, postpone the interview until the child is ready. Coordinate with the child's parents or guardian and any assisting social welfare officer or professional to determine the earliest opportunity that the child may be safely interviewed. Be thorough in the interview to avoid the need for multiple interviews and take breaks during the interview as often as the child requires.
- **Create a child-friendly environment:** Interviews with children should be conducted in a private, comfortable space that is free from distractions (e.g. ringing phones, people coming and going) and both physically and psychologically safe for children and non-offending family members. Toys and games are helpful to keep children occupied while they are waiting, but should be put away during the interview to avoid distraction. If there is no child-friendly space available within the police station, request the use of another stakeholder's child-friendly space (such as a social worker's space or an NGO). Police should sit beside the child rather than directly in front of him or her to avoid the appearance of confrontation.
- **Have a support person present:** The child's parent, guardian or relative is not obliged to be present for the interview, but may be comforting for the child. Ask if the child would like accompaniment and, if the child requests it and it is in the child's best interest, a parent, guardian, relative or supportive adult may sit as an observer in the interview. If a parent or guardian is present, remember that the focus of the interview is the child who was the victim and/or witness, not the parent or guardian.

The adult should not actively participate in the interview. A parent or other support person should not be present if the police have any concerns that s/he may try to influence the child's evidence.

- **Have a social welfare officer present:** As far as practicable, the interview should be conducted in the presence of a social welfare officer in order to minimise the child's trauma from multiple interviews and to provide support to the child as needed. If the child has a disability that impacts on his or her ability to communicate, it may be necessary to arrange for a specialist to be present (e.g. sign language interpreter, psychologist, etc.). In cases of sexual abuse, it is preferable that female victims be interviewed by a female officer. If none is available, the social welfare officer attending the interview should be female to ensure that a girl child is not interviewed in the presence of two men.
- **Minimise contact with the alleged suspect:** Under no circumstances should the child be present in the same room with the alleged suspect, nor should the alleged suspect have the opportunity to refute the child's narrative in the same room or at the scene of the crime. A child should not be in the same space nor required to communicate with the person accused of committing the crime against him or her. Interviews should never be conducted in the presence of the suspect or other adults who are not accompanying the child. If the child must formally identify the suspect, this should be done through photo line-up or through a two-way mirror, if available at the station, rather than in person.
- **Modify language to the child's age and level of development:** Questions must be tailored to the child's age and level of understanding. Ask questions using short, simple sentences and conveying only one main thought per sentence. A general rule of thumb is to match the number of words in a question to the age of the child (for example, a six-year old child will understand a question with no more than six words in it).
- **Be reassuring and non-judgmental:** Adopt a relaxed and friendly demeanour with the child, using language that is clear and appropriate for the child's age and development. Police may consider wearing civilian clothes if it would facilitate the child's comfort. Give the child your undivided attention and convey that you are listening, interested and can be trusted. Keep a calm composure, no matter what you hear. Under no circumstances should you express surprise, disbelief, disgust, anger or other emotional reactions to what you are hearing from the child. Be sensitive to the child's needs and feelings. Do not make any negative or judgmental comments. Keep in mind that children react differently to stress or traumatic events. Remember that the police officer's responsibility is to record the story during this interview and not engage in a debate with the child.
- **Use of interview aids/media:** The goal of the interview is to have the child verbally describe his or her experience. Yet a question exists as to whether limiting children to verbal responses allows all children to fully recount their experiences or whether media such as paper, markers, anatomically detailed drawings or dolls, may be used during the interview to aid in descriptions. The concern is that younger children will not be able to differentiate between the "real" and the "imagined" if toys are used. Decisions to use these devices or other local practices and tools should be made by senior officers at the local level.

- **Be mindful of the child’s physical and emotional needs:** Pay attention to the child’s attention span, nutritional needs and bodily functions by allowing regular breaks and providing food and drink, as required. As a general rule, interviews with children should last a maximum of 20-30 minutes for children under 10 years; one hour for children between 10 and 14 years of age; and approximately 90 minutes for a child between the ages of 14 and 18. Take regular breaks, stop or reschedule interviews if a child becomes too upset or too restless.
- **Documentation:** Electronic recordings are the most complete and accurate way to document interviews, capturing the exchange between the child and the interviewer, as well as the exact wording of questions. Where only written interviews are possible, write the questions asked in full and try to take down the child’s response word for word. Both of these documentation techniques will keep the number of interviews to a minimum, and respect the child’s age and attention span by keeping the interview as short as possible.
- **Ask the child to participate in decision-making:** Children have the right to actively participate in the decisions affecting their lives. In a police investigation, this includes informing children of the steps and purpose of the interview and giving the child the opportunity to participate in deciding who will be present, how the interview might be better adapted to his or her needs and what will happen after the interview.

3.2.2. Considerations for working with child victims

A child, and particularly smaller children, communicate differently from adults and may not be able to express thoughts, memories, ideas and concepts in the same way as adults. Having a good knowledge of the child and the context will assist the law enforcement official in understanding the child (eg when they refer to someone by and result in the less need for clarifying questions such as “who is ...?” that might distract the child). The more information the law enforcement official has on context of the disclosure or other elements of the incident(s) that lead to the concerns being raised, the more likely the interviewer will be able to build better rapport with the child and introduce the topic of concern in a non-leading manner.

Nature of the abuse: There are certain factors affect the severity of the reaction to abuse such as the perpetrator of the abuse, whether or not violence was involved, how long the abuse went on, whether the child told anyone, and what happens after the abuse. Victims of child trafficking may have developed attachments to their traffickers or may have completely lost trust in adults as a result of their experience. In these cases, police shall be sensitive to the child’s needs, including the need for multiple interviews in order to build a rapport with the child and gain sufficient trust from the child so that she or he feels comfortable speaking the truth.

Children’s responses to trauma: Children who have been victims of maltreatment or were witnesses to violent crimes will react uniquely to their experiences. Trauma symptoms may interfere with a child’s ability or willingness to report information about violent incidents. Memories of children who have suffered extreme forms of trauma may be impaired or distorted. Police may need to modify their expectations of what a traumatised child is able to report. Under no circumstances, should the police attempt to force a disclosure or continue an interview when a child becomes overly distressed, as this may re-victimise the child. Severely traumatised children may benefit from additional support and multiple, non-duplicative interview sessions.

Child age and developmental abilities: A child’s age and developmental abilities influence his or her perception of an experience and the amount of information that she or he can store in long-term memory. Young children find it difficult to focus their attention and search their memory effectively when interviewed. Assess the child’s level of understanding at the beginning of the case and at the start of the interview, including assessing the child’s developmental level, language skills, suggestibility and credibility, and habitual answering patterns. Do not exceed a child’s level of competence; if he/she does not understand, simplify the questions.

Gender, ethnicity and cultural considerations: Be aware of diversity in the community and language, cultural, and gender differences that might affect the working process. A child’s family, social network, socioeconomic environment and culture influence his or her development, linguistic style, perception of experiences and ability to focus attention. Cultural, gender and language differences also present communication challenges and can lead to misunderstandings during the interview. Police will have a plan to address linguistic and cultural differences, including using community members as interpreters or, if none available, using family, and paying attention to gender.

3.2.3. Child-friendly responses



ACTIVITY 3.2: “River of life” (Facilitator’s guide)

3.2.3.1. Initial response

All reports of child abuse are to be recorded and shall be fully investigated even if the alleged abuse occurred several months or years before the report. Any case of suspected child abuse, neglect, exploitation, abandonment or trafficking must be investigated as soon as possible by the police without delays. Report can be made by phone, or in-person by child victims, or third persons, or NGOs.

The law enforcement officials as first responders shall respond in a caring and trusting manner, and reassure the victim will not be judged. If treated respectfully and with empathy, the child and his or her family can feel trust in the law enforcement officials and better assist in the investigation process.

The first responders should not conduct a full interview with the child so as to minimise the number of times a child needs to provide information. The police officers obtain general information about the offence, but not going into great details. Information to be collected such as:

- The victim’s name, age, address, telephone number
- The time and place of the incident
- The name/s and/or a description of offender/s
- The direction and means of the offenders/s departure. The law enforcement officials may take the information of/from the parents or guardians as well. A contact detail or phone number of police officer in charge should be provided to the victim(s) and/or the family for emergency contact related to their safety issue.

In any cases, the primary consideration is the welfare and safety of the child.

(1) If the child is in danger, arrange a police patrol, and immediately remove the child away from the scene. When the child is at the police station, bring him/her to a child-friendly and private space.

(2) If the child is alone, locate a parent or guardian to come to the station as soon as possible (if the parent or parents are not the alleged perpetrators). If the suspect is the parent or guardian of the child, ask the child if he/she knows any adults or relatives who can be contacted to accompany the child. If there is no one available, contact the Department of Social Development/Welfare to send a social worker to accompany the child. Wait until the parent or guardians or social workers arrive. Do not leave the child alone. Provide transportation if necessary.

(3) Complete Needs Assessment and Safety Planning (reference form in the Annex) to ascertain child's care and needs. Consult the Multi-disciplinary team to provide the necessary care and support for the child (legal support, medical assistance, shelters, etc.).

Box 17: Review Needs Assessment

- Assess physical needs for safety, emergency needs, medical care, food, clothing, shelter, and transportation resources.
- Assess personal strengths, vulnerabilities, and family and friend support system.
- Assess personal functioning (e.g. whether under the voluntary or involuntary influence of alcohol or drugs).
- Assess personal capabilities (e.g. physical, developmental, and mental disabilities).
- Assess language and the need for a translator. Do not use family, friends, or children as translators.

(Please refer to Annex 6 for Needs Assessment Form)

The law enforcement official shall inform the victim about retaining forensic evidence. The police shall advise that the child victims should be asked to not change clothing or wash him or herself to preserve evidence. Types of evidence includes but are not limited to: semen and other bodily fluids; blood; saliva; hair; fibres; soil or vegetation; condoms; gloves; fingerprints; items used in the assault e.g. rope, restraints, weapons, objects; and bedding, towels, clothing, tissues or any other items that may have DNA evidence.

The victims should be encouraged to wait for police attendance and medical examinations. However, if the victim insists on showering, having a drink or going to the toilet, this must be allowed to occur. The welfare of the victim is paramount. If the victim does shower or change clothes, police should advise them on how to handle clothing, i.e., separate bag for each item of clothing to minimise the loss of evidence.

Medical examination shall be requested where necessary and should be minimally intrusive. Only one single examination should be made and free to the victims. If the medical examination is likely to provide corroborating evidence, explain that a complete medical examination is required. This requires the consent of the child or the consent of his or her parents or legal guardian.

All examinations must be conducted in a child-sensitive manner and be the least intrusive necessary. Child's parents or guardians, or his or her support person can be present unless the child himself or herself decides otherwise. However, the parents' involvement should be denied where the best interests of the child requires.

If the child requires medical attention or psychosocial support, ensure that he or she receives it immediately by getting the child to a hospital, medical clinic or licensed medical practitioner's office. Arranging the transportation and support person to go with the child. Medical care, forensic medical examinations and medical certificates shall be available free of charge to all child victims.

The police shall reassure that the victims do not need to decide whether to involve in future court proceedings. Child victims shall be informed on the detailed information of court proceedings in order to make better informed decisions and get them to regain a sense of control. Investigators should discuss the options available to the victim and the importance of them telling their story regardless of whether an investigation proceeds or not.



EXERCISE 3.1: What do you need to keep in mind in those situations? (Workbook) (optional)

3.2.3.2. Investigation

Sexual assault can be categorized into two types: a case in which the offender is known or unknown. A thorough investigation is to determine (1) the identity of the offender, (2) the element of force or coercion, and (3) the issue of consent. Investigation also includes collecting and preserving evidence and potentially using them in the court. Evidence can be gathered from the victim, the suspect, and the crime scene (and other witnesses).

All possible victims shall be identified and their age shall be determined. It is important to do an on-the-spot preliminary age assessment to segregate child victims from adult victims. Children may be under duress, coercion, or compulsion to declare themselves adults. Thus, the police officers shall assess their age based on a birth certificate, family record, identification card, or identification-related certification issued by the competent authorities. If the above documents are not available, the determination of the victim's age shall be carried out by authorized medical experts (in a timely manner). If the services are not available, the law enforcement official can base on Age estimation (Annex 7) to estimate the age of the victims.

Information shall be cross-checked and kept confidential. The police officers can diverse their source of information, include NGOs, crime stoppers, helplines, community, etc. Gathering information related to the victim(s), related individuals and the nature of crime should be done in child friendly manner without any coercion, making them favor to get the information, or putting them in a pressure situation which they have no choice but to provide the required information. Information shall be stored and kept confidentially unless required by law or court's decision. All about a child's whereabouts (home address, temporary shelter where the child is staying, child's school, etc.) should be blacked out from any witness statements, is restricted to release to the media.

Prevent, as much as possible, any further contact between the child and the suspect. If a formal identification of the perpetrator is needed, this should be done later through photo line-up and not in person. Under no circumstance should the victim and suspect be transported in the same vehicle.

3.2.3.3. Interview

The full interview will be conducted as soon as possible after the initial disclosure of abuse, but only after the child's mental state will permit it and all necessary medical, psychosocial and familial support can be coordinated.

A forensic interview is a developmentally sensitive and legally sound method of gathering factual information regarding allegations of abuse. The forensic interview has three goals:

- Minimising any trauma the child may experience during the interview;
- Maximising the amount and quality of information obtained from the child while minimising the contamination of that information; and
- Maintaining the integrity of the investigative process.

a. Preparation for an interview

Gathering information

Information to gain before the interview:

- The child:
 - Age
 - Functioning (any issues such as learning difficulties, language difficulties, hearing impaired, numeracy, literacy, behavioral difficulties, autism, etc)
 - Culture/language
 - Has the child made any statements regarding how they think or feel about what's happened
 - Any previous behavioral issues (for example, aggression, sexualised behaviors, sudden or unexplained changes in behavior, etc)
 - Is the child an introvert or extrovert, how do they relate to others, especially strangers.
- The child's context:
 - Family and living arrangements now and in the past. History of violence or abuse, transience, multiple adults in the home, sexual boundaries, etc.
 - School attendance • Peers and friends - does the child have them, how close are they.
 - Previous incidents of harm or abuse.
- The disclosure:
 - Has the child disclosed, if so?
 - Was it deliberate or accidental?
 - Who did they disclose to? When and under what circumstances?
 - What did the person say to them?
 - What did the person do, how did that person react?
 - Was the child aware that the police have been informed?
 - If the child has not disclosed, what are the circumstances that have raised concern?
- The offender:
 - Who is it, what is their relationship to the child and their relationship to the family?
 - How long has the alleged offender known the child, the family?
 - What is the families view of the offender prior to the disclosure, post the disclosure?
 - What access has the offender had to the child over time?

- The offending:
 - What was the context of the offending?
 - What can you find out about the pattern of offending, eg grooming, targeting, grooming of others such as parents etc.?
 - How often and over what period did it occur?
 - Are there other victims?
 - Was it part of a broader pattern of sexual behaviors especially escalation over time?

Creating a child-friendly environment

Interviews should be conducted in a private, comfortable, and non-threatening space that is free from distractions and both physically and psychologically safe for children and non-offending family members. If there is no child-friendly space available within the police station, request the use of another stakeholder's child-friendly space (such as a social worker's space or an NGO) or take the child to a space which offers privacy and is not intimidating.

Toys and games are helpful to keep children occupied while they are waiting, but should be put away during the interview to avoid distraction. The seats should be comfortable and facing toward each other at about an angle of 120 degrees. Having the seats facing directly towards each other (180 degrees) can be too confronting and intense for children, while having them side by side is not conducive to conversation. By this way, it allows the interviewers to read a child's body language, and as well as for them to read the interviewer's genuine body language.

Do not have anything between the interviewer and the child on the desks. Ensure there is somewhere close to the interviewer's seat for putting down papers. Don't take anything into the room unless the interviews are going to use. Folders full of paper are distracting for the child. If the interviewers have need to refer to material, ensure it is brief and to hand (refer to the Guidelines on Using child-friendly room of APLE).

Preparing yourself

The interviewers shall prepare himself/herself not only physically but emotionally for the interview such as restraining emotional response from the child's disclosure. The police officers are advised to turn off the cell phones, do not wear uniform, or carry gun or handcuffs; do not wear a dress with a low neckline (for female professionals); do not wear eye-catching, or expensive jewelry; etc.

The interviewers shall keep an open mind and address any biases he/she has toward the child. With increasing experiences on the field, the interviewer may make subconsciously conclusions about the cases, which can affect the results of the interviews as well as how the interviewer reacts to the case. If the information provided by the child does not fit with what the interviewer has, crosscheck and verify the information before concluding that the child is lying.

The interviewer shall prepare potential questions to be asked before the interview. The interview with the child should be restricted to eliciting the forensically relevant information that cannot be obtained in any other way. The child brings limited resources to the interview (attention span, narrative ability, etc). The limited resources should be focused on the most important aspects of the interview and not squandered on eliciting information that could easily be obtained outside of the interview.

Preparing others

If there are other people such as interpreters, guardians, etc. to be involved in the interview, the police officers shall explain in details what they expect from them. Include details such as where everyone will sit, what they can and cannot do or say, how they should respond if the child addresses them directly etc.

People in the office should be informed of the interview so they can minimize noise or avoid interruptions. Ensure a lack of distractions and interruptions to minimum level.

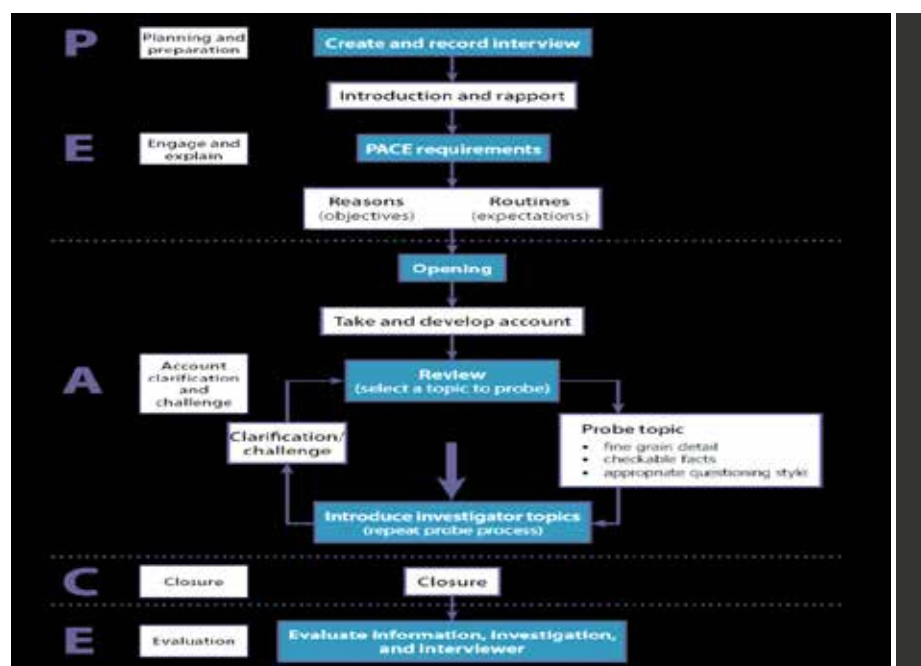
b. Conducting a child-friendly interview

The PEACE model of an interview

The PEACE model is developed to ensure the interviewer is able to obtain as much information as possible in a constructive and acceptable way from either witness or a suspect. It remains the latest and most recommended investigative interview practice in most countries ²⁶.

PEACE is an acronym for:

Planning and preparation
Engage and explain
Account
Closure
Evaluation ²⁷



PEACE
Process Diagram

²⁶ Walsh, D. & Bull, R. (2010). What really is effective in interviews with suspects? A study comparing interviewing skills against interviewing outcomes. *Legal and criminological psychology*, 15(2), September: 305-321.

²⁷ Schollum, M. (2005). *Investigative Interviewing: the literature*. Wellington: Office of the Commissioner of Police, New Zealand Police.

(1) Introduction and establishing the rules

During this phase, the interviewer shall make introductions, establish roles, give instructions, explain expectations of the interview, and to set tone for the interview.

- If the interview is being recorded, begin after the recording devices have started by stating the date, time and location of the interview, as well as the full names and contact details of everyone present. To make this less formal, the interviewer can engage the child, for example asking, “Do you know what the date is?”; “Do you know how to spell your name?”;
- Introduce persons present in the interview. Reassure the child that she or he is not in trouble. Some children might be worried that they are in trouble because they have been brought to the police station; and
- Ground rules should be established before the interview. It is up to the judgment of the interviewer whether to use this step for specific age groups or for individual child. Usually, it is not appropriate with pre-school age children as it might confuse them²⁸. Children and persons with a cognitive impairment need additional guidance and instruction. Give the child a sense of control by giving him choices whenever possible.

Interviewers may want to include some of the following rules:

- I wasn’t there, so I don’t know what happened. The more you can tell me, the more I will understand what happened (reducing your authority over the content of their answers, and therefore their perception that you know the right answer and you are testing them);
- If I misunderstand something you say, please tell me because I want to get it right;
- If you don’t understand something I say, please tell me and I will try it again;
- If you feel uncomfortable at any time, please tell me or show me the stop sign;
- Even if you think I already know something, please tell me anyway;
- It’s okay to say “I don’t know” or “I don’t understand that question”;
- If you don’t know the answer to a question, don’t try and guess, just tell me you don’t know. If you do know the answer, tell it to me (research has demonstrated that making both of these statements is more effective than just the first one.)
- Please remember that I will not get angry or upset with you; and
- Only talk about things that are true and really happened.

²⁸ UNICEF. (2016). Standard Operating Procedures. Protocols/Procedures for investigations involving child victims and witness. Ghana Police Service.

Box 18: Example of script to establish the rules

‘Today, I am going to be asking you to tell me about things that have happened to you. Now, I wasn’t there when these things happened so I need you to help me understand everything. Have I explained that properly? (Pause)

One of the rules for me today is that I listen hard and try to understand everything you tell me. So, I might have to ask you some questions later. But, it is not like school – you know if the teacher asks you a question and you say you don’t know – what does your teacher say to you? (child’s response e.g. Miss Bopha tells you off, but Miss Anchali is okay, or, I have to try and answer, or, I have to guess the answer).

Well, today, it’s really okay for you to say you don’t know. Because I’m a grown up, I might also ask you a question which you don’t understand. I’ll try hard not to, but if I do, I want you to tell me, so I can try and put it another way. (pause)

And the last rule on me is if I get something wrong, I need you to tell me to make sure I get it right.

Research shows that it is not enough to simply tell a child these things at the start of the interview, they must be repeated throughout the interview. For younger children, consider asking them to demonstrate their ability to follow the instructions. The more the child understands what is going to happen, the more they feel safe. Safety equals calmness which leads to improved memory performance by the child in the interview.

(2) Rapport building

This phase helps the interviewer to develop a relationship with the child victims, assess child’s development, practice narrative and create a relaxed and friendly environment. This helps the interviewer to understand child’s language, and gauge child’s willingness to participate so that he or she can tailor the interviewing styles and techniques to the child’s needs. From the child’s perspective, from the moment a child first sees the interviews, they also begin to assess him/her. It depends on how much the child trust the interviewer that he/she decide to elicit more information.

- The interviewer uses open-ended questions/prompts to tell about a salient event such as recent birthday or festival, favorite subject at school, favorite activities during free time, etc., and encourage him to tell about the event from beginning to end to practice narrative. “Tell me about your last birthday/recent event”. “Tell me everything that happened”.
- The interviewer shall try to prompt the child for more information and modelling what is going to happen in the interview. Studies show that encouraging children to give detailed responses early in the interview enhances their informative responses to open-ended prompts in the later stage. As an example, if the child’s favorite class is history, ask, “Can you tell me more about your history class?”
- Depending on the child’s age, use objects and questions to determine the child’s understanding of certain concepts (such as over/under, before/after, inside/outside). For example, ask the child, “Did I put the pen on the table before or after I put the paper on the table?” “Is the pen under or over the paper?” “Is the pen inside or outside my pocket?”

- To develop an understanding of the child's recall and the level of detail about an event he or she usually provides, ask the child to describe an event such as Christmas, the first day at school, or another important event, providing details about what he or she did.
- Limit the length of rapport building under 10 minutes, otherwise it can be a tiring process for both the interviewers and the child victims.
- Avoid stereotypical questions which are generally asked by the adults such as "Do you like schools", "What football teams do you support?", "What's your favorite...". Such questions do not allow deep memory processing, don't establish trust, nor it allows developmental assessment, and prime child to the task.

(3) Free narrative

Free narrative is the most reliable source of accurate and untainted information from a child and is consequently the most important phase of the interview. Free call describes the child's memory process while free narrative refers to the way that memory is reported or told.

- Introduce the topic of concern in the most open-ended and non-suggestive way possible "Now it's time to talk about something else. Do you know why you are here?" or "Remember how I told you that I talk to children all the time about things that happen to them, do you want to tell me about anything that's happened to you?"; "Tell me why you are here today", "Is someone worried about you?", "I heard you talked to.... Tell me what you talked about."
- Encourage the child to give a full account of what happened, in his or her own words. For example, "Tell me all about that from the beginning to the very end."
- If the child stops or pauses during the free narrative, encourage him or her with prompts, such as "What happened next?", "Then what?", "Tell me more about that".
- The interviewer should listen to the entire story without interrupting or asking clarifying or follow up questions.
- The interviewer shall ask whether an event happens "one time or more than one time" to identify whether it is multiple incidents of abuse. He/she then explore each incident by asking the recent one, the first one, and the typical one accordingly. Using the child's own wording is the best way to cue the child to each incident.
- Explore additional risk factors such as exposure to violence, child pornography, online grooming, drug and alcohol use, threats or manipulation, and family dynamics.
- Apply "fishing techniques" when children have difficulties in processing their memories and formulating detailed narratives. It refers to the open questions that contain more direction/ boundaries regarding the expected response. For example, if the law enforcement officials know something about the alleged assaults such as the identity of the alleged offender, where it takes place, and under what circumstances, he/she can start from the existing information and begin to probe the children. If the law enforcement officials know the offender is Uncle Akra and it occurs when the child visits him after school, he/she can start asking the child's routine, then what happen at Uncle's house.

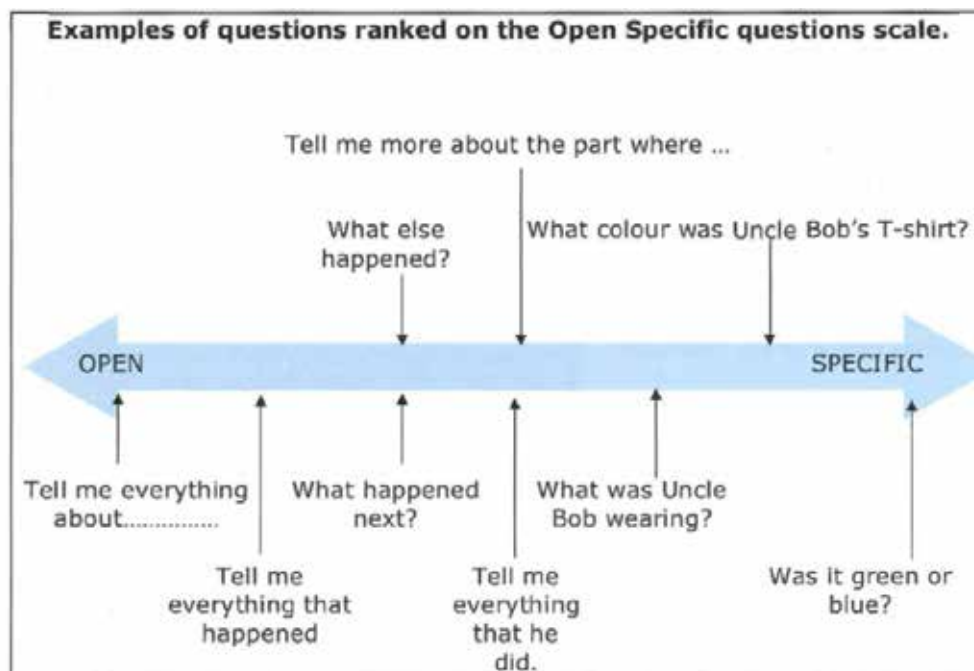
(4) Questioning

There are generally five types of questions used in forensic interview: open questions, focused questions, specific questions, leading and non-leading questions. Throughout the interview, interviewers should move from open-ended to more focused questions to gather clarifying information, then move back to open-ended questions.

Questions should be as short, simple, non-leading and open-ended as possible. Do not ask questions that are answerable by either yes or no, unless as a last resort.

- **Open-ended questions** prompt and encourage a free narrative response from recall memory; examples include, “Tell me why you are here today” and “Tell me everything from beginning to end.” Open-Ended questions are followed by prompts for more information, such as, “What happened next?” and “Then what happened?” The interviewer can encourage the narratives to continue by making a narrative request such as, “You said X happened—tell me more about X.” The interviewers allow the child to complete their narrative response without intervention prior asking additional questions. Once the child’s narratives have been fully explored, the interviewer can then follow with focused questions, asking for sensory details, clarification, and other missing elements. This question directs him/her to a particular topic, place, or person, but refrain from providing information about the subject.

Figure 3-1: Examples of questions ranked on the Open Specific questions scale



- **Focused questions** may be used to elicit clarification and more specific details. For example, an interviewer could ask, “Where were you when X happened?” followed by, “What happened next?” or “How did that make your body feel?” and then by, “Tell me more about [use child’s words].”

- **Specific questions** are those in which the actor and act are specified. Ask direct questions to confirm or clarify information the child has already provided during the interview. Once he has responded to a direct question, it is important to return to open-ended questions. “You said the Barang hurt you, what did he hurt you with?” followed by, “Tell me more about [child’s word for object].” When a child is reluctant, it may be appropriate to use externally derived information from a credible source.
- **Closed-ended questions** include multiple-choice or yes/no questions. By the time the law enforcement official need to ask very specific questions (such as yes/no questions), only a few last details are to be cleared. Generally, closed-ended questions should be used to clarify a disclosure or information already provided. If a child provides only brief responses, the interviewer should follow up by asking for additional information or explanation using focused questions that incorporate terms the child previously provided. End a multiple-choice question by providing the child with an open-ended option. For example, ask, “Did it happen in the house, bedroom, or someplace else?”
- **Leading questions** are questions in which the actors, acts, and tags are included, such as, “the man touched your pee-pee, didn’t he?”. Such questions are leading because they encourage the child to provide a particular response, usually an affirmative one. It reduces the accuracy of a child’s account as they contain elements that trick or pressure (either intentionally or unintentionally) the child into giving an account that is in line with the interviewer’s agenda / view/ assumptions/ interpretations etc. It also leads to inconsistency as the child now has two versions of the event in their memory and potentially on record, the real one and the corrupted one. Those leading questions should be avoided in general.
- **Coercive questions or statements** are those that pressure the child to do or say something. An example would be, “If you tell me what I want to know, you can leave the room.” These types of questions should not be used.

Table 3.1: Summary of different question types used in the interview

Question types	When to use	Purpose	Example
Open-ended questions	In the beginning	Encourages the child’s free narrative from free call	“Tell me why you are here today” “Tell me everything from beginning to end.” “What happened next?” “Then what happened?” “You said X happened—tell me more about X.”
Focused questions	When the child is exhausted or unresponsive to open-ended questions	Provide clarification and details about the subject, using “who, what, where, when, and how”	“Where were you when X happened?”

Direct questions	When actors and acts are specified, followed by open-ended questions	Confirm or clarify information	"You said the Barang hurt you, what did he hurt you with?"
Close-ended questions	Previous questions seem confusing to the child Multiple choice/Yes-No questions	To clarify a disclosure or information Gather contextual information	"Did it happen in the house, bedroom, or someplace else?"
Leading questions	Should be avoided in general		"The man touched your pee-pee, didn't he?"
Coercive questions	Should be avoided in general	Pressure the child to do or say something	"If you tell me what I want to know, you can leave the room."

Box 19: Why leading questions should be avoided

Read the following situations:

1. Child says Mum dropped the glass. Interviewer asks "Did the glass smash when it hit the floor?"

In fact, the glass didn't hit the floor, Mum caught glass, the interviewer has made an assumption.

2. Child discloses Uncle Akra did the rude thing. Interviewer asks "He touched you didn't he?"

The interviewer is coercing the child to agree with them, rather than letting the child volunteer the information.

3. Interviewer asks "When you got home, was uncle Bob already there?"

When child hasn't yet said that Uncle Bora was at the house but we know it from information obtained from the mother. It is possible this would be excluded as evidence at Court. It could be argued that the interviewer put the idea that Uncle Bora was there into the child's head.

4. "Was that when he touched you?" The interviewer is making a suggestion and asking the child to confirm or deny. This would be leading if the child has not yet disclosed that this was when they were touched.

Other techniques:

- **Minimal encouragers**

Even though they are not questions, minimal encouragers help facilitate the child's speaking. Examples include: "Uh Huh"; Mm; the last words uttered by the child with a questioning inflection - such as "he came into the room?" - said after the child has said this; nodding your head; an enquiring expression on your face; or hand gestures that indicate "go on".

- **Pregnant pause**

Often when a child stops speaking they are either marshalling their thoughts before continuing, or, they are looking for a sign from the interviewers. In either case, the “pregnant pause” will serve the interviewers well. It tells the child the interviewers are happy to wait while they continue the hard work and that the interviewers have time and are wanting to hear everything they have to say. The second most frequent error made by interviewers is to fill in silences. One of the most important skills for interviewers is to learn to be comfortable with long pauses, and to learn how and when to use them.

- **Focused reinstatement**

This is a questioning technique where witnesses (victims) are asked to focus on a particular sense or aspect as they remember the incident in question. This technique assists in the memory process of the victims.

For example:

- The interviewer asks the child, “You said before that Uncle Akra touched your fanny. I want you to try and remember everything you can about what you felt (saw, heard, smelt etc) from the time Uncle Akra touched your fanny.”

- Or “You said Uncle Akra told you to take your clothes off. Tell me everything Uncle Akra said after he came into your room.”



EXERCISE 3.2: Appropriate questions in an interview (Workbook)

(5) Closure

The closure is often neglected or poorly conducted. In another way, it can help provide a respectful end to a conversation. The interviewers can follow:

- Ask the child if there is something else the interviewer needs to know;
- Inform the child of what will happen next, and what to do if the offender or any other party attempts to contact the child or the child’s family;
- Ask the child if there is something he or she wants to tell or ask the interviewer;
- Speak briefly about a neutral topic again in order to end the interview on a calmer, more relaxed note; and
- Thank the child for his or her effort rather than for specific content.

If the interviewer ends the conversation too quickly or abruptly, the child may leave the interview in a highly vulnerable state (psychologically). Thus, provides some time for the child to leave the deep processing of memory and return to his/her normal state.

Explain what will happen next to the child and his/her parents/guardian. If the child has not been in touch with any support services, provide the child/child’s family or guardian with a name and contact information for the social welfare officer at the district and direct the child and his or her family to suitable support services.

When making positive comments to a child, ensure that they relate only to the process and not the content of the interview. For example: “You did really well listening to my questions” or “Thank you for speaking to me today”. NOT “Thank you for telling me about Uncle Bora” or “Good” - said just after the child discloses.

Invite the child to participate in making decisions, such as any preferences for where he or she might stay if going home is not an option, recognising that the social welfare officer will be taking this decision, or about when the next interview will take place if it was not completed. Where possible, heed the child’s preferences.



EXERCISE 3.3: Interviewing a child (Workbook)

c. Evaluation of an interview

The purpose of the evaluation is to review the needs of the investigation and interviewer's performance. In order to do so, the interviewers shall ask:

- Did he/she achieve his/her objectives?
- Reflect on the child's evidence. Does it make sense? Does he/she have any concerns about the privacy and completeness?
- What information did he/she obtain? How does it fit with the information he/she had prior to the interview? What other information or evidence is required?
- Seek feedbacks from the supervisors, and the VARE monitor regarding comments on his/her performance.
- What other sources of information do he/she need to follow up on? Are there any sources of corroboration?
- How was his/her performance as an interviewer?
- Use of open questions vs specific questions.
- Use of open questions early in the interview and specific questions later in the interview.
- Check if there is use of leading questions.
- Look for details he/she has neglected to follow up on.
- Demeanour – consistently pleasant, genuine, and respectful or authoritarian, cold, and official. Did he/she make any eye contact? Did he/she pay attention to the child?
- Did he/she set expectations well at the start of and during the interview? Did the child's performance during the interview highlight any misunderstanding of his/her instructions or any lack of instructions on his/her behalf?



ACTIVITY 3.3: Role play – I interview (Facilitator's guide)



Do & Don't during the interview

Below is the suggestive, but not exhaustive list of Do and Don't during the interview.

Table 3.2: Do and Don't during the interview

Do	Don't
<ul style="list-style-type: none"> • The interview should be carried out by specially trained professionals. • If video recording is to be done, check that all technical equipment is working properly before the interview is started. • Inform the child about the interview process and how the video record is to be used. • Always use a five-staged structure for the interview. • Seek the consent of the child and the child's parent or guardian to conduct the interview. • Explain that the interview is not an interrogation. • Create a safe and non-threatening environment. • The interview room should be made as child-sensitive as possible. • The content of the interview should be strictly confidential. • The purpose of interview is to gather facts and evidence, not to counsel the child, but the atmosphere of the interview must be child-friendly and comforting. • Bear in mind all important considerations when asking questions. • If you have an information that the child told somebody else something different, it is alright to ask the child to clarify your confusion. • Be patient and allow the child to take all the time he or she needs to tell you what you want to know. All the break. Use pause and silence. • Give the child the opportunity to express himself or herself in a way he or she feels comfortable with. • Be honest with the child. 	<ul style="list-style-type: none"> • Do not frequently interrupt the child. • Do not lecture during the interview • Do not judge any of the answers, given by the child. • Do not correct the "wrong answer", ask for clarification. • Do not repeat the same question. Reformulate the question for further clarification. • Do not force the child to speak. • Do not show the annoyance when you did not manage to get the information you wanted to hear, better stop and take a short break. • Do not coerce the answer, even if you know that the child is lying or is not disclosing a piece of information it must know. • Do not threaten that something bad will happen if the child refuses to speak. • Do not ask the child why the offender hurt him. The child does not know and often blames himself/herself. Never ask the child how it would like to punish the offender, what, according to the child, should be the punishment for the things he did to the child. • Do not promise an award for giving information. • Do not make any promises that cannot be kept. i.e. nothing bad is ever going to happen to you again. • Never promise the child that you are not going tell anybody about things you will hear from him. It might be that this case has to be reported. • Do not hurry the child, which is not ready to talk. Better arrange for another meeting.

3.2.3.4. Follow-up

Keep the victims informed

Keeping the victims informed about their case is not only good for the victim's emotional recovery, but also helps develop rapport with the investigator and increases the likelihood of the victim's continuous participation in the process. Victims should be informed about the progress of their case, detectives should return phone calls in a timely manner, and any decision not to arrest the suspect or further pursue the case should be carefully explained to the victim.

Refer the victims and their families to support services

Each Unit should maintain a contact list of government agencies, church groups, legal aid, NGOs, and personnel from Department of Social Development/Welfare. While it is the responsibility of the Department of Social Development/Welfare to make decisions about support, care and shelter for a child in need, there may be emergencies requiring police action when a social welfare office is not available. Police officers shall provide information and make the cases referred to a counselor, for health care, psychological intervention, legal representation, and rehabilitation shall be available for the child victims and their families.

Implement protection measures

A victim protection plan should be developed by police officers in charge of the case to ensure for the safety and security of the victim and the family during the prosecution process of the perpetrator. This can include:

- The provision of contact detail and phone number of police officer in charge of the case to the victim and the family for emergency contact or inquiry
- The schedule of visit of the police officer in charge of the case to the victim's family
- Who will and how to respond to the threats (on the victim and the family) if any.



ACTIVITY 3.4: Stakeholder mapping & Personal contact sheet (optional)

3.2.4. Dealing with special cases

3.2.4.1. Child victims at very young age

Young children may find the unfamiliar surroundings of an interview intimidating. Adequate time should be allowed for rapport and age appropriate toys and coloring materials. It may not be possible to conduct a conventional interview: such children may say very little in the free narrative phase and not respond well to open-ended questions. However, the use of purely focused questions carries with it the risk that the child will say what he or she believes the interviewer wants to hear. This may require interviewers to seek social support from an independent adult known to the child.

The interviewer can conduct the interview over a number of short sessions conducted by the same interviewer spread over a number of days. When this occurs, care must be taken to avoid repetition of the same focused questions over time, which could lead to unreliable or inconsistent responding in some children. Rapport and Closure should be included in each session.

3.2.4.2. Child victims with disabilities

The interview should take place in a suitable setting – i.e. one able to accommodate any equipment (e.g. a wheelchair), free from distractions and noise, have good lighting, suitable seating arrangement, etc. to accommodate the specific needs of the child. If a need for a facilitator/intermediary is identified, additional time will have to be set aside to ensure they are clearly briefed about their role and remit for the interview.

Strategies to deal with the case:

- Identify and obtain information from the child's caregiver (a person that the child seems to know and trust).
- Communicate care and comfort to the child using non-verbal communication techniques (for example, smiling).
- Use dolls, toys and other art materials to allow the child to communicate freely.
- More communication tips on working with children with different types of disabilities are mentioned in the Annex of Module 2.

Box 20: Tips to work with a facilitator/intermediary (ex.sign language interpreter/interpreter, etc.)

- The facilitator/intermediary should be certified and licensed through the Registry for the Interpreters for the Deaf, or Certified Interpreters;
- The facilitator/intermediary should be introduced to the child and take full part in rapport building. However, the child should be made aware that the law enforcement official is the lead interviewer and that all responses should be directed towards them, not the facilitator/intermediary;
- Similarly, the law enforcement official should speak directly to the victim and not the facilitator/intermediary. Do not say things like, "Ask her if...". In the meantime, observe the victim closely as gestures and facial expressions are important aspects of communication;
- The interpreter's job is only to translate communication between the victim and the investigator or other conversations occurring within earshot (not to add anything or say their opinion); and
- If the suspect also needs a facilitator/intermediary, it is recommended to always use a different facilitator/intermediary than was used with the victim.

3.2.4.3. Child victims who deny sexual abuse

If sexual abuse has been disclosed by a third party, a child may be more likely to initially deny the instance of abuse. Or children deny abuse because—fear of stigma, shame, or retaliation. Sometimes a parent refers an older child or adolescent for services because they are concerned the child is sexually active before marriage. The child however, may not view the sexual activity as abusive and/or may be embarrassed and unwilling to admit to premarital sexual relations.

Strategies to deal with the case:

- **Stay neutral:** Do not confirm or deny what the child is saying. Let the child know that you are not there to judge but to listen, understand and help.

- **Get more facts:** Talk with the child and the person who has referred the child separately. Ask questions that provide a bigger picture of what may be happening: What is the age of the child and the alleged perpetrator? What is their relationship? What is the relationship between the person who reported the case and the child?
- **Be patient:** Children may not be willing or able to talk about sexual abuse because of the associated shame or stigma. Do not force children to talk about sexual abuse. Service providers need to meet children at their current capacity to share and communicate.

Note: In these situations, the role of law enforcement official is not to determine whether or not abuse has occurred, but to establish a relationship where the child feels safe enough to disclose abuse.

3.2.4.4. Child victims who refuse to speak

Things to be considered:

- Is there someone in the room who seems to make the child reluctant to speak?
- Does the child stop speaking when left alone with the law enforcement officials, indicating he or she is afraid to talk without another trusted adult present?
- Are they not speaking because the environment around them is not safe or private, or because they are not ready to trust the law enforcement officials? If a child does not want to build trust with a particular law enforcement officials, it is not that person's fault. Find other ways to help the child through referrals, talking with family members, etc.

Strategies to deal with the case:

- Be patient;
- Check if any urgent medical or safety issues need to be addressed;
- Communicate with the adults that the child trusts; and
- Or if the child does not feel comfortable with a particular law enforcement official, find another person to work with the child.

Summary of session 3.2:

When working with child victims and their families, law enforcement officials ensure to follow those principles: upholding holding children's rights; adopting child-friendly procedures; integrating multi-disciplinary services; addressing gender-bias; and strengthening children's resilience.

Characteristics of a child-friendly SOP: child's well-being comes first, create a child-friendly environment, have a support person present, have a social welfare officer present, minimise contact with the alleged suspect, modify language to the child's age and level of development, be reassuring and non-judgmental, use of interview aids/media, be mindful of child's physical and emotional needs, documentation, and ask the child to participate in decision-making process.

Considerations for working with child-victims: Nature of the abuse, children's response to the trauma, child's age and developmental abilities, gender, ethnicity, and cultural considerations.

There are five stages in an interview:

- (1) Introduction/Establishing the rules: introduce yourself to the child; introduce other people and their role; explain what are you doing here and what will happen in the interview;
- (2) Rapport-building: Start asking questions pertaining to the child's life e.g. "Where are you going to school or nursery?" to put them at ease and understand their way of communicating and level of understanding;
- (3) Obtaining relevant information - free-recall: Allow the child to talk about the events in their own words;
- (4) Obtaining relevant information - questioning: Explain that you will now ask the child some questions; move from open questions to more specific questions gradually; and
- (5) Closure: regardless of how useful it was, ensure the ending is positive; praise the child for coming to the interview (not for what they said in it); address any questions they may have; explain what will happen next.

3.3. Child-friendly polices – policing skills



ACTIVITY 3.6: Child-friendly polices

3.3.1. Child-sensitive communication

Effective communication is fundamental in developing a trust and helping relationship. It is through the dynamic process of communication (verbal and non-verbal) that trust is established and children feel cared, respected, and empowered by the police officers and other service providers.

3.3.1.1. Verbal communication

The police officers shall always use simple language, taking into consideration the age, apparent maturity, and intellectual development of the child. He/she can check if the child really understands every word you use.

Table 3.3: Child-sensitive language

Avoid	Use
<ul style="list-style-type: none"> Long sentences Complicated sentences The passive voice ('Was he hit by the man?') Negative sentences ('Didn't you tell her?') Questions with more than one meaning Double negatives ('Didn't your mother tell you not to go out?') Hypothetical situations ('If you are tired, tell me') 	<ul style="list-style-type: none"> Short sentences Simple sentences The active voice ('Did the man hit him?') Positive sentences ('Did you tell her?') Questions with only one meaning Single negatives ('Did your mother tell you not to go out?') Direct approach ('Are you tired?')

Speak at a reasonable rate. Check whether:

- Sentences should be on average about 10 words long. If you have sentences over 20 words long, reformulate them into multiple sentences, all under 20 words.
- Did you use simple language, and avoid jargon?
- Did your sentences include a single idea (Y), or multiple ideas (x)
- Did your use of language "fit" with the person's development or other communication needs.

3.3.1.2. Non-verbal communication

Body language and tone of voice: Always make sure the child feels comfortable while being interviewed. For example, in some situations, it may help to make the child feel less intimidated through: Making eye contact, but do not stare; Using a soft, friendly voice; or Sitting at the same level as the child.

Active listening: If normal listening is to get general information, or a fact, "getting the gist", active listening is about "getting the details". In active listening, unlike normal listening, the listener takes on additional level of responsibilities for receiving the message. These details will be used later to elicit further information leading.

Tips for active listening:

- Do not interrupt;
- Use the child's words;
- Beware of yourself (automatic interpretations, assumptions, open mind);
- Show interests, be genuine, and warm;
- Make sure to avoid frowning which shows negative judgment;
- Use pauses to encourage the child to speak (and keep speaking), or often called "pregnant pause";

- Don't overtly reward the child. For example, using phrases like "good boy", "excellent", "you're doing really well".

Appearance: Be aware of how the child may perceive the interviewer and reduce as much as possible the factors that might block contact with the child through clothes, jewelry, hairstyle and make-up. For example:

- Do not wear a uniform or a judge's robe;
- Do not wear a gun or handcuffs;
- Do not wear a dress with a low neckline (for female professionals).
- Do not wear eye-catching and very expensive jewelry.

3.3.1.3. Using communication aids

"Communication aids" refer to devices that enable questions to be communicated effectively to the child and the child's answers to be understood. The tools can accommodate factors such as the child's age, level of maturity and development, but also any disability, disorder or other impairment. Communication aids may include pictures, books, maps, plans, photographs, colored pencils and drawing paper, anatomically correct dolls and other cuddly toys and animals. In principle, only persons who are specially trained may use such communication aids.

Why communication aids?

- Children may feel less threatened using non-verbal methods than sitting in a room talking;
- Children may find it easier to express emotions through drawings or stories;
- Children express emotions, thoughts, ideas and experiences both during and after the non-verbal communication activity; and
- For children at a very young age or children with disability, this can be an effective tool to communicate with children and gain more information about the abuse.

When to use communication aids?

- When children have difficulties in communicating through verbal languages;
- When children are at a very young age;
- To begin a conversation; and
- To extract more information about the stories/events/feelings/personal life of the child.

How to use communication aids?

While these techniques help the child explain what is happening, there are potentials in leading nature of the interview.

- **Puppets:** Many children are comfortable with puppets and will talk to a puppet when they would otherwise remain silent to the direct questions of an adult. The puppet can be used for ice-breaker in the beginning of the interview.
- **Bodygrams or Anatomically Detailed Drawings:** These outline drawings of the human form allow the child to show where on the body he/she was touched and by what part of the perpetrator. The drawings are available in male and female, child and adult forms.

- **Dolls/Dolls houses/Small toy people:** Preschool children may prefer small dolls because they are less intimidating and more easily manipulated. The investigator should allow the child to select and name the dolls. Avoid using terms like, “Let’s pretend this is Uncle Akra.” Dolls that are not detailed anatomically can be used by the child to act out the story, such as vehicles, buildings, or instruments, dollhouses, play telephones, toy cars, etc. Toys unrelated to the case, such as teddy bears, may also comfort the child or set him/her at ease. Use of toys unrelated to the case should be limited to avoid distracting the child from the interviewer’s questions.
- **Anatomically Detailed Dolls:** These are among the most commonly used tools. The investigator should receive training on how to use these dolls and review the manufacturer’s instructions prior to use.
 - Dolls should only be used if the child has difficulty or is embarrassed about describing the sexual abuse that has occurred. Not all children need the aid of the dolls. Investigators should not insist on using them if it is not necessary.
 - Introduce the dolls fully clothed. Investigators should tell the child that the dolls help when talking with children.
 - Let the child explore the dolls. Investigators must remember that it is not necessarily indicative of abuse for children to engage in exploratory behavior with the dolls. Some children stick their fingers in various holes, pull on the penis, see if the penis fits into the vagina, anus, or mouth. Officers should not consider this evidence of sexual abuse. Investigators should listen to what the child says during this time. Some children may start to share details about previous sexual activity.
 - Pick a doll to name the body parts with the child. This method can be used to find a common language since children use many different names for private parts, and many of them do not know which parts of the body are considered private ²⁹. Investigators should point and say “What do you call this?” Investigators should begin with nonsexual body parts, then move back and forth between sexual and nonsexual. They should repeat what the child says and use the child’s terms. If the child uses slang terms for some body parts, the investigator should ask who suggested that name. Officers should cover each doll that will be used during the interview in the same way.
 - Ask the child to choose a doll to represent him/herself. Investigators should not use the word “pretend” or “let’s play like this is you.” Investigators should have the child choose a doll to represent the person the child has named as the perpetrator.
 - By using the dolls, a child can show where or how he or she was touched. The law enforcement official could ask the child to show where on the doll he or she was touched or hurt. However, the law enforcement official should not lead the child by pointing to the doll’s breast, vagina, penis or other body part and asking, “Did he touch you here?”. This is a leading question and children may want to please the person asking and could answer “yes” when, in fact, the answer is “no.”

²⁹ IRC/UNICEF. (2012). Caring for child survivors of sexual abuse. Guidelines for health and psychosocial service providers in humanitarian settings.

- **Drawings:** Using drawings in forensic interview at a professional level can be categorized as Forensic art therapy. It is an investigative technique that applies art therapy principles and practices on standard forensic procedure and protocol ³⁰. Drawings are utilized to support the investigation of a legal or polemical matter. Studies show that drawing increases the information the children provide and give clues for questions to ask ³¹.

Methods:

Non-directive techniques - free drawing: The child can draw anything without directions from the instructors. The instructors can see what the child may be thinking or feeling. This can be also a good way to engage the children at the beginning of an interview, allowing the child to relax and engage in a fun and creative way. If the drawings are directly related to the abuse events, the instructors can ask additional questions.

Directive techniques: These techniques can be used to gather information about specific areas of a child's life. Some of the tests include: Family drawings, Face drawings, Safety circle drawings, or Daily activities drawings. This can be an effective way to find out:

- Feelings of the child (anger, anxiety, sadness, guilt, shame, etc.)
- Who are family members in the house? To whom the child feels closest?
- Who is he/she scared of? What makes he/she scared?
- Does the child go to school? What does he do in school? Who does he or she spend time with?



ACTIVITY 3.7: Recognizing signs of sexual abuse through pictures of children

3.3.2. Qualities of child-friendly police officers

An interview is an interaction. Building effective relationships with children is not about getting the child victims to like the police officers or becoming their friends, but rather build a connection with the child that facilitates the flow of cooperation and information. The following is a list of useful behaviors when building a relationship with a child prior to and during an investigative interview:

a. Respect

Respect must be demonstrated regardless of your personal thoughts or feelings about a person and regardless of their appearance or behaviors.

³⁰ Gussak, D., et Cohen-Liebman, M. (2001). Investigation vs. intervention: Forensic art therapy and art therapy in forensic settings. American Journal of Art Therapy.

³¹ Peterson, L.W., Hardin, M., & Nitsch, M. (1995). The use of children's drawings in the evaluation and treatment of child sexual, emotional, and physical abuse. Archives of Family Medicine. 4, 5, 445-452

b. Supportiveness

By saying supportive statements such as “it is fine to take your time”, the law enforcement official is supporting the child to complete the task and relieving some of the stress or discomfort they may experience.

Other ways are to be responsive to the child’s needs: drinks, breaks, pauses etc. If the child begins to become distressed, slow the rate of questioning or allow the child some space to recover themselves before pursuing more difficult topics.

Many interviewers struggle to appropriately support the children. Some law enforcement officials cope with by avoiding any emotionality at all, while others go overboard saying things like “I know that was hard”, “You were very brave”. Actions often speak louder than words, be respectful, genuine and warm.

c. Openness

Openness fosters trust in the child and will encourage a fuller disclosure. It also encourages openness in response. The best way to be open with a child or other witness I victim is to be prepared. Think (and where appropriate - note to yourself) about what you can and can’t tell a child or their parent. Think about why you can’t be open regarding some things, and prepare the best way to tell children and parents why you can’t tell them.

Box 21: Things the law enforcement officials do not want to tell the child

What are the things you don’t want to tell a child victim during an interview? And why? Write down some ways you manage the situation if the child asks.

d. Non-judgmental

Since the law enforcement officials should be maintaining an open mind until the conclusion of the investigation, showing any preliminary judgment to a victim is clearly inappropriate. Not only is it inappropriate, its unhelpful to the investigation. Children and indeed all victims will be constantly alert to signs that the law enforcement officials are judging them or their account of their experiences. They will be looking for signs of disbelief, doubt, affirmation and even acceptance. Any signs the law enforcement officials show will be responded to. Disbelief will result in either an attempt to convince the law enforcement officials (which may result in “tailoring” the account to maximise its impact) or a decline in willingness to work hard to give the information needed.

e. Equality

Although you are the professional within the interview, and you are the one with the expertise in eliciting information, the child is the expert in their experiences. This means that the most effective interviewers use their expertise to manage the interview, but allow the child to exert their expertise regarding the information they have. Doing this will support your efforts to set the child at ease, demonstrate respect and motivate the child to work hard to retrieve their memories. Exerting too much authority undoes these efforts and results in poorer information and poorer interview outcomes.

Box 22: Children's suggestions

According to children, professionals with child-friendly behaviours:

- Smile and are friendly, polite, cheerful, empathetic and attentive
- Take children and their situation seriously
- Adjust their approach and language to the children's age, rather than treating them like adults
- Speak clearly enough that children can hear them properly
- Listen carefully
- Have an informal attitude and create a relaxed atmosphere
- Engage in "small talk" to make children feel at ease
- Are calm, patient and do not raise their voices at children or rush them
- Question children younger than 10 through play
- Offer breaks
- Make food, water and sweets available
- Avoid wearing uniforms
- Use child-friendly materials
- Have experience and training in working with children
- Are genuinely interested, engage children and are available and can be contacted at any time during proceedings

3.3.3. Working effectively with stakeholders**3.3.3.1. Parents of child-victims*****For non-offending parents/caregivers***

The child is affected by how the people closest to them treat them after sexual abuse. Many parents have strong reactions when learning their child has been sexually abused. They may feel: anger, disbelief, shock, worry, deep sadness, and fear. They want the problem to "go away" or not even realise that sexual abuse can cause harm and their child need care. Parents may also have misinformation about sexual abuse which causes them to blame or become angry with their child. Some blame themselves for not paying attention to the child's behaviors or may feel that they have failed as parents and have not protected their child. Some parents may wonder why their child chose to disclose to others and not them directly.

If this happens, the law enforcement officials shall provide counselling to the family. Counseling should focus on allowing the parents/non-offending to openly (and not in front of the child) share their feelings about the abuse and how this is affecting them, and provide caregivers with information, support, and education on how to care for themselves and their children.

The law enforcement officials can assess the caregiver/parent's feelings, beliefs, and perceptions by asking:

- **What is your understanding of the abuse/what happened?** This question helps the police officers understand how much the caregiver knows and understands about what happened. The police officers should watch out for statements of blame directed toward the child.

- **What are your feelings about the abuse/situation?** This question explicitly asks caregivers what their feelings are about the sexual abuse. Here the police officers should attempt to evaluate the caregivers' own level of emotional distress and their feelings toward their child. Caseworkers should ask whether the police officers' feelings have changed toward their child since the abuse.
- **What changes have you noticed in your child since the abuse?** Oftentimes, reports of children's emotional distress come from adults in the child's life who notice behavior changes. This question also provides the police officers with more information about the caregivers' perspectives on their child.
- **What do you think will help your child right now?** Identifying what caregivers think is useful and important to help their children heal and recover. Supportive caregivers know their children well and their ideas about how to support their children's healing should be asked and integrated into psychosocial care plans.
- **What are your main worries and needs right now?** This question provides an opportunity for the police officers to share their personal worries and fears while alerting the caseworker to additional needs/worries that may impact the child.

Assessing caregiver's perceptions require special precautions to ensure child victims are not inadvertently exposed to negative feelings or perceptions. Understanding the caregiver's perspectives provides insight into the support (or lack of support) they are providing and/or can provide to the child. Caregivers also need support in coping after a disclosures of child sexual abuse, and as the child needs the caregiver's support and attention to facilitate their own healing. It is an important part of the overall child and family treatment planning.

For offending parents/caregivers

The law enforcement official shall not involve a parent/caregiver in the child's care and treatment if: the caregiver is the suspected/actual child abuser; the child does not want the caregiver included in the interview; and the caseworker feels that the child cannot or will not speak freely.

3.3.3.2. Social media



ACTIVITY 3.8: Working in multi-disciplinary team

With the growing role of social media, it is important for the police officers to recognize the pros and cons of using social media. Social media can play an aiding role in the work of police officers: (1) Investigative use: How police officers use social media platforms to help resolve crimes, especially online sexual abuse and exploitation, (2) Community development use: How departments reach out and interact with the community, partly to build a relationship and partly to gather information, and (3) Code of conduct: How police officers should properly interact with social media platforms to protect the confidentiality of the child victims and their families. This section will mainly focus on section (3) on Code of conduct.

Maintaining confidentiality requires that service providers protect information gathered about clients and agree only to share information about a client's case with their explicit permission. This means ensuring 1) the confidential collection of information during interviews; 2) that sharing information happens on a need-to-know basis, and only after obtaining permission from the child and/or caregiver.

The law enforcement officials can follow (referred by UNICEF) ³²:

1. Do not further stigmatize any child; avoid categorizations or descriptions that expose a child to negative reprisals;
2. Always provide an accurate context for the child's story or image;
3. Always change the name and obscure the visual identity of any child victims;
4. In certain cases, using a child's identity (their name and/or recognizable image) is in the child's best interests. However, when the child's identity is used, they must still be protected against harm and supported in the event of any stigmatization or reprisals.

For example: when a child initiates the contact with a reporter, wanting to exercise their right to freedom of expression and their right to have their opinion heard; when a child is part of a sustained programme of activism or social mobilization and wants to be identified as such; or when a child is engaged in a psychosocial programme and claiming their name and identity is part of their healthy development.

5. Confirm the accuracy of what the child has to say, either with other children or an adult, preferably with both.
6. When in doubt about whether a child is at risk, report on the general situation for children rather than on an individual child, no matter how newsworthy the story.

The police officers are advised to have a standard set of agency-specific confidentiality protocols and MoU of working with social media specifically.

3.3.3.3. Medical professionals

The medical community is an important ally in the prevention and treatment of the child abuse. Doctors can serve as family counselors and educators, influential child advocates, and key members of the multidisciplinary team. They can also manage health problems, provide child-rearing advice, and discuss family planning alternatives.

However, some physicians are reluctant to get involved in cases of child abuse because it may be impossible to determine the cause of child's abuse, and it may be apprehensive about testifying in court because of time constraints, or fear of cross-examination, interrogation, or possible litigation. The police officers can help assuage physician's reluctance by involving them fully in the multidisciplinary team and reinforcing the importance of medical evidence in preparing the case for court. The police officers can also play critical role to make the medical examination process child-friendly for the children by:

- If a sexual assault occurred within the previous 72-hours, a physician and/or sexual assault nurse examiner should perform a medical examination as soon as possible to maximize the recovery of certain forensic evidence, such as blood, semen, saliva, and trace fibers. If the assault occurred more than 72 hours earlier, the probability of this evidence recovery is reduced.

³² UNICEF. Guidelines for journalists reporting on children. Accessed at <https://www.unicef.org/eca/media/ethical-guidelines>

- The medical examination should be minimally intrusive and only a single examination should be made.
- Requiring the consent of the child or, where the child is deemed unfit to understand his or her right to decline such an examination, the consent of his or her parents or legal guardian.
- The presence of the child's parents or guardian or his or her support person, i.e. unless the child himself or herself decides otherwise.
- The parents' involvement should be denied where the best interests of the child so requires; for instance, where one or both of the parents may be the perpetrators.
- A written authorization provided by the court, a senior law enforcement official or the prosecutor.
- The gender of the medical staff member could be the same as the child, and some jurisdictions also provide for this in their laws.
- Prior to the examination, children, parents and/or support persons may get a preview of the medical facility and should receive a full explanation of what is going to happen before the examination starts ³³.

3.3.3.4. Social workers

Social workers/NGOs workers can assist significantly in detecting signs of sexual abuse. The police officers can collaborate closely with the NGOs workers in approaching the child, building rapport with the child, and gaining understanding of his/her family conditions or background. The NGOs workers can also provide more information of the context, of the surrounding environment (for example, school, community, etc.) – where the child live and stay, where the perpetrators come in contact with the child. Although investigation is the main work of the police officers, having connection with NGOs workers or community members can help the police officers get more information on the ground.

The NGOs workers/social workers also play important role in the treatment and integration process of the child victims and their families. Support offered can be listed as shelter, foster care, psychological support, treatment, or vocational training, sustainable livelihoods, or financial support for the families. It is advised that the police officers shall have a contact list of NGOs or community centers in the area to mobilize support whenever it is possible.

Once there is a reasonable cause to suspect a child is suffering or is likely to suffer significant harm there should be a strategy discussion including social care, the police, health, the referring agency and any other professional as appropriate. The purpose of the initial Strategy Discussion or Strategy Meeting is to ensure an early exchange of information, and to clarify what action needs to be taken jointly or separately in the investigation.

³³ UNODC. (2010). Training Programme on the Treatment of Child Victims and Child Witnesses of Crime for Law Enforcement Officials.

An initial Strategy meeting is to address:

- Whether urgent action is needed to protect the child, children in the family or any other child and who will be responsible for such action?
- Whether there are any adults at risk that may require intervention?
- What other information is needed to further the investigation and who will seek it?
- How information will be shared, when, and by whom, with those with parental responsibility in respect of each child, and the child themselves.
- What other roles need to be performed and by whom?

It is advised that the police officers shall develop a Police and Social Care Joint Working Protocol. An example of Police and Social Care Joint Working Protocol can be found in different sources ³⁴³⁵.

Summary of session 3.3:

Effective communication is fundamental in developing a trust and helping relationship. The law enforcement official shall be sensitive in the languages used, appearance, body language, tone of voice, and appearance.

Using communication aids require special trainings for the law enforcement official before usage. Puppets, drawings, dolls, anatomically detailed dolls, etc. can be used to begin the conversation, or to help explore additional details related to child's lives, or events related to the abuse.

A child-friendly police officers shall exert respect, empathy, supportiveness, openness, non-judgmental, and equality toward the child. He/she also requires specific skills to work with different stakeholders: parents, social media, medical professions, and social workers.

3.4. Addressing common issues

3.4.1. Truth-lie distinction

All children should be told that they need to tell the truth. Even if the law enforcement officials do not use the interview rules, they do need to stress the importance of telling the truth. Ask the child what telling the truth means, what telling a lie means and what happens when people tell lies. If a child is not able to differentiate the truth and falsehood, give the child an example of a true statement and a false one, asking the child to tell you whether the statement is the truth or a lie. "If I said your shirt was red, would that be the truth or a lie?" If the child has a blue shirt, it is obviously a lie. If a child has black trousers, ask, "If I said your trousers were black, would that be the truth or a lie?" This will help you to know if the child can distinguish between the two. If a child does not understand the concepts of truth and falsehood, the interview can proceed, but with caution and recognition that the child may be highly suggestible.

³⁴ Knowsley Council. Police and Social Care Joint Working Protocol. Accessed at http://knowsleychildcare.proceduresonline.com/pdfs/police_social_care_joint_pr.pdf

³⁵ Health and Social Care & NSPCC Northern Ireland. (2016). Protocol for Joint Investigation by Social workers and police officers of alleged and suspected cases of child abuse – Northern Ireland.

Box 24: Different examples suggested for different ages of children

‘Now (name) it is very important that you tell me the truth about things that have happened to you. So, before we begin, I want to make sure you understand the difference between the truth and a lie’.

Example for younger children

Let me tell you a story about Khoem. Khoem was playing with his ball in the kitchen and he hit the ball against the window. The window broke and Khoem ran upstairs into his bedroom. Khoem’s mummy saw the broken window, and asked Khoem if he had broken the window. Khoem said, “no mummy”.

Did Khoem tell a lie? (pause) (child responds)

What should he have said? (pause) (child responds)

Why do you think he said “no mummy”? (pause) (child responds)

Example for older children

So, for example, Chokun was having a smoke in his bedroom, after his mum had told him not to. He heard his mum coming and hid the cigarette. His mum said “are you smoking?” Chokun said “no mum”.

Did Chokun tell a lie? (pause) (child responds)

What should he have said? (pause) (child responds)

Why do you think he said “no mum”? (pause) (child responds)

Source: Adapted from Williams, A. and Ridgeway, S. (2004). The truth and lie story: developing a tool for assessing child witness’s ability to differentiate between truth and lie. *Child Abuse Review*. Volume 13, Issue 1.

3.4.2. Applying technology in forensic interview — Using Visual and Audio Recorded Evidence (VARE)

Visual and Audio Recorded Evidence (VARE) is the digital recording of a person’s evidence in chief. In all circumstances where the legislative criteria are met, police should first consider the use of VARE. Prior to an interview, investigators should discuss the interview (VARE) process with the prosecutors to ensure that the victim is well supported and the integrity of the interview is not jeopardized.

Any video recorded interview is used for (1) the examination in chief of the child victims; and (2) evidence gathering for use in criminal proceedings.

The children have the choice to opt out of giving their evidence by either a video-recorded interview as evidence-in-chief and/or by means of live link or both. This may include that the child has been involved in abuse involving video recording or photography. If they do wish to opt out then the alternative special measure of giving evidence in the court room behind a screen should be considered and should they not wish to use a screen, then consideration should be given to alternative special measures.

Table 3.4: Advantages and disadvantages of using VARE

Advantages	Disadvantages
<ul style="list-style-type: none"> • Taping reduces the number of times the victim must be interviewed, allowing other investigators, supervisors, and prosecutors to review the child's statement accurately without re-interviewing the victim. • It provides an accurate account of the statement, not the recollections or interpretations of the interviewer. • It can be extraordinarily powerful in gaining a confession. By playing a short powerful segment of the tape, it might be useful in breaking down the suspect's defenses. • It can be used with a non-offending parent to force the reality of the abuse upon him/her, in an effort to get him/her to protect the child. 	<ul style="list-style-type: none"> • A tape records the child's denials as well as disclosures. Many children disclose in phases, first denying, then disclosing a little, then more, and as they gain comfort, even more details. The tape documents the denials and earlier inconsistencies for the defense to exploit. • The tape documents every error the interviewer makes, every misphrased or leading question. • It allows defense "experts" an opportunity to critique every word chosen in the interview and to characterize the interviewer's actions in a negative manner. • It is not admissible in many courts or cases. • The equipment may make the child uncomfortable or distracted.

Monitoring VARE

If taping is used, procedures should be built into the investigative protocol for when it is used, by whom, and in what cases. The protocol should also include the disposition of the tapes, i.e., who gets the copies. The team needs to be sure that it adequately attends to the technical aspects of recordings, so that the product is clear and one can see and hear what is happening during the interview.

In the case where the police officers have another member monitoring their VARE, discuss with them beforehand what to expect from them. Some monitors will write an almost verbatim account in the VARE log, which leaves very little opportunity for them to do anything else. A more helpful approach can be if you ask the monitor to only write significant points and non-verbal language, which leaves them free to act as a second interviewer. They can then support the interviewer by highlighting potential lines of further enquiry for the interviewer to pursue which can be communicated at the break.

3.4.3. Responding to complex abuse involves multiple child victims

Complex, organised or multiple abuse, whether sexual, physical, emotional or by neglect occurs as part of a network of abuse across a family or community, within residential homes or schools and within an 'on or off line' networked groups of sexual offenders. Such abuse is sometimes reported a long time after the offending took place.

One of the key factors in responding to complex, organised or multiple abuse situations is the scale or potential scale of the investigation. Investigations can be demanding and time consuming and may have considerable resource implications. It is crucial to determine the size and complexity of the enquiry as soon as possible in order to consider the options that are available. The need to assess the short, medium and long-term impact of the enquiry and its potential ‘mushroom’ effect is essential. It also requires thorough planning, good inter-agency working and attention to the welfare need of the child victims or adult survivors involved.

In determining whether a complex, organised or multiple abuse enquiry is necessary the following elements will be beneficial in determining the nature of the enquiry. This is not an exhaustive, or prescriptive, list and is not a substitute for professional judgment: Multiple alleged victims; Multiple alleged offenders; Volume of alleged offences; Alleged institutional abuse; Duration of alleged abuse; Significant cross-boundary or other geographical considerations; and Public interest issues.

The principles for the investigation of complex, organised or multiple abuse cases are:

- Both the police and social services will need to work for a planned, co-ordinated and properly resourced response and recognise that this commitment will be much greater than usual;
- Safety and well-being of the child or children will be the paramount consideration, when their identity is known or can be identified;
- All parties are alert to the possibility of adults at risk in the abusive network and respond accordingly;
- All parties ensure the protection of individual children, the need to protect other children, the need to gather evidence and the effects of the investigation on other individuals and the community;
- The need for strict confidentiality will be assessed at the outset of the enquiry and reviewed in order to prevent the alerting of suspected offenders;
- Parties agree to consult and openly share information subject to legal and agency restrictions at all stages of the enquiry.

3.4.4. Addressing gender-bias in police response



ACTIVITY 3.9: Recognizing biases, assumptions, and stereotypes about victims

Biases should not prevent officers from taking a report or detectives from conducting a full investigation. The following factors may undermine the victim’s credibility: delayed reporting; the victim’s history of making similar reports, sexual history, emotional state, lack of resistance, criminal history or history of prostitution, mental illness, history of abusing alcohol or drugs; what the victim was wearing at the time of victimization occurred; lack of any obvious signs of physical harm; or the victim’s sexual orientation or gender identity. Acting on biases can constitute unlawful discrimination and undermine effective response to these crimes.

For example, if an officer believes a sexual assault to be less severe because the victim who is a gay or lesbian children assaulted by adults, that is gender bias and may constitute unlawful discrimination. Another case, a girl whose mother is known as a prostitute, comes to the police station to report that she was sexual assaulted by one of her mother’s customer. The police officer writes down her statement, but takes no further action because of the sexual and criminal history of the family.

Male and (L)GBT identified survivors may be reluctant to disclose a sexual assault for reasons: fear that law enforcement may not consider them worthy of concern; fear that they will be subjected to ridicule and further humiliation; fear that disclosure will release overwhelming emotions; and concerns that rape crisis center resources, with an historic emphasis on serving female survivors and possible political orientation, are not really designed to meet their needs.

Here are some suggestions for the police officers to address effectively biases toward the child sexual abuse cases:

1. Firstly, to recognize and address biases, assumptions, and stereotypes about victims;
2. Treat all victims with respect and dignity;
3. Investigate all the cases thoroughly and effectively;
4. Appropriately classify reports of sexual abuse;
5. Refer victims to appropriate services according to their needs;
6. Hold offenders accountable regardless of the nature of the case; and
7. Maintain, review and act upon data regarding to sexual abuse case ³⁶³⁷.

Summary of section 3.4:

Common issues may arise during the investigation and interview process: truth-lie distinction, gender-bias, complex abuse, etc.

The children should be told to tell the truth in the beginning of the interview. The interviewer may use small questions to test whether the child can differentiate truths and lies. Otherwise, the interviewer shall be cautious that the child is suggestible.

VARE can assist significantly in the interview process and reduce the times the child need to be interviewed. However, it is only used with the consent of the children and consultation with the prosecutor. Clear procedures and explanation shall be established before using VARE.

Acknowledging the complexity and the requirement of synergy efforts of different stakeholders may assist in responding to the complex abuse. Well-organised coordination and open sharing information are necessary for the multi-disciplinary team to work on the case.

Recognizing biases that the law enforcement official may hold is the first important step to address the gender-bias in responding to the case. This may come from: victims' history of crime, mental illness, sexual orientation, etc. Be treated with respect and dignity is the rights that every victim is entitled to have.

³⁶ US. Department of Justice. (2016). Identifying and preventing gender bias in law enforcement response to sexual assault and domestic violence.

³⁷ Battered Women's Justice Project. (2016). Ending gender-bias in the law enforcement response to sexual assault and domestic violence.

3.5. Touring: Best practices in child protection against sexual abuse and exploitation



ACTIVITY 3.10: Touring best practices

3.5.1. Model of Barnahus (Children's House)

What is Barnahus?

Barnahus (which literally means Children's House) is a child-friendly, interdisciplinary and multi-agency centre for child victims and witnesses where children could be interviewed and medically examined for forensic purposes, comprehensively assessed and receive all relevant therapeutic services from appropriate professionals under one roof. The activities are based on a partnership between the Police, the Prosecution, the Hospital and the local child protection services as well as the Government Agency for Child Protection which is responsible for its operation.

Barnahus originates from the Child Advocacy Model adopted in the US in the 1980s. It was firstly implemented in 1998 by Iceland followed by other Nordic countries (Sweden in 2005, Norway in 2007, Greenland in 2011, Denmark in 2013) under the name Barnahus or Children's House.

The basic concept of Barnahus is to avoid subjecting the child to repeated interviews by many agencies in different locations. This «re-victimization» can even have more harmful effects on the child than the abuse itself. Furthermore, repeated interviews carried out by people that are not specifically trained in forensic interviewing are likely to distort the child accounts of events by suggestive questioning with detrimental effect on the criminal investigation. Another aim of the Children's house is to provide a child friendly environment for investigative interviews which reduces the level of anxiety of the child which in turn is crucial for successfully eliciting the child's disclosure.

Target group:

- Children about whom there is a suspicion of sexual abuse (Iceland);
- Children who are suspected or had been subjected to violent crimes (crimes against life and health), unlawful deprivation of personal freedom, trafficking, unlawful duress, unlawful threat, harassment and other crimes (crimes against freedom and peace) (Sweden);
- Children who have witnessed violence against a relative (Sweden);
- Women subjected to female genital mutilation (Sweden); and
- Adults with developmental disabilities (Norway).

Environment: The premises are located in residential areas and the interior is child friendly. Most of the Children's Houses have no operations for adult perpetrators on their premises.

Services provided: Forensic interviews – Medical examination – Therapeutic services – Family counselling/support.

How it functions

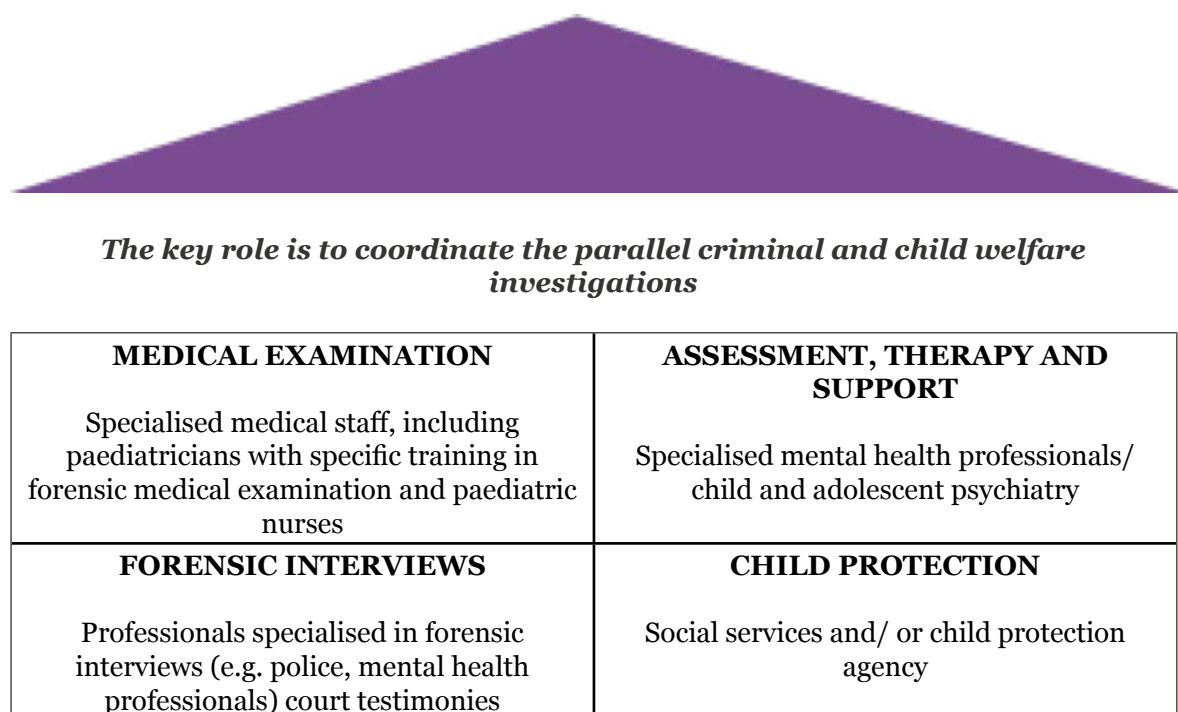
Interview: The child is interviewed in a special room by a trained investigative interviewer according to evidence based protocol, and it is adapted to the child's developmental age.

Listening-in: The interview is observed in a different room by a judge, a social worker, the police, the prosecution, the defence attorney and the child's advocate. As referred to above, the interview is videotaped for multiple purposes. This arrangement makes it possible in most cases to do with only one interview with the child as the child need not appear in court.

Medical examination: After the interview, the child may have the medical examination in the medical room of the house. The job of healthcare personnel at a Barnahus is to investigate the child's somatic status, assess the presence of injuries, and investigate, assess and meet the child's need for somatic treatment. The purpose of the medical investigation is to document injuries and issue a forensic certificate on the basis of the examination results.

Crisis support and treatment: Crisis support for children, parents and other family members may be offered on site by specially appointed personnel or team members, as long as the investigation and the legal process are ongoing or they may be referred to other care providers at another site. The House also provides treatment services for child victims of sexual abuse and their families. The child is assessed for therapeutic purposes and an individual treatment plan is designed and executed either at the facilities or, if the child lives outside of the capital area, as near to the home environment as possible.

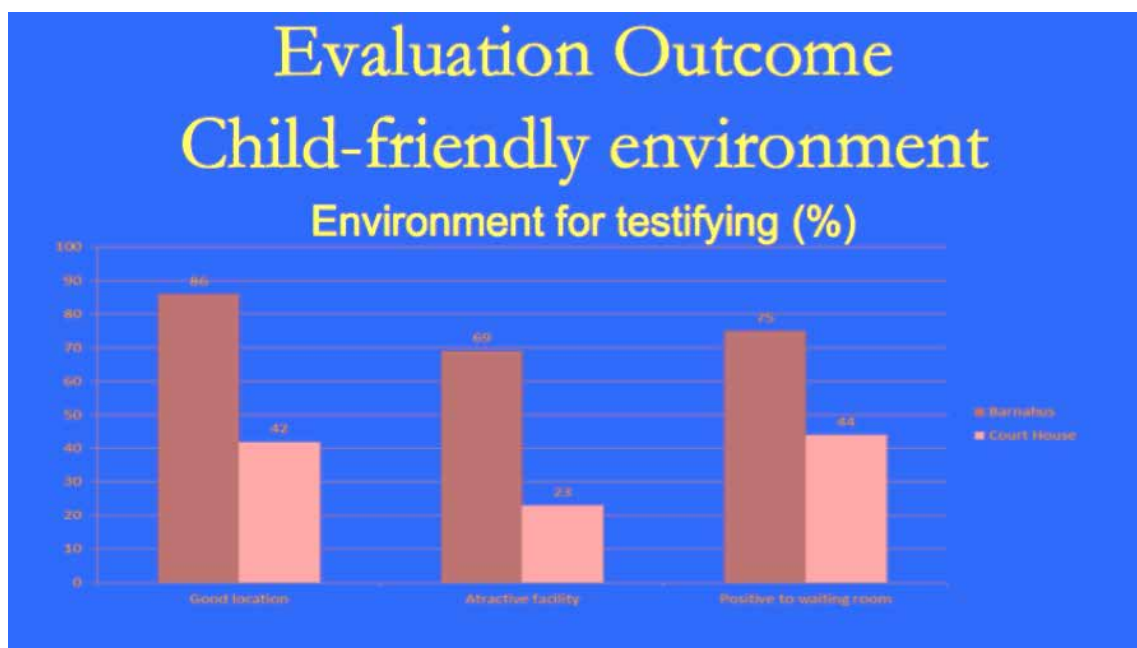
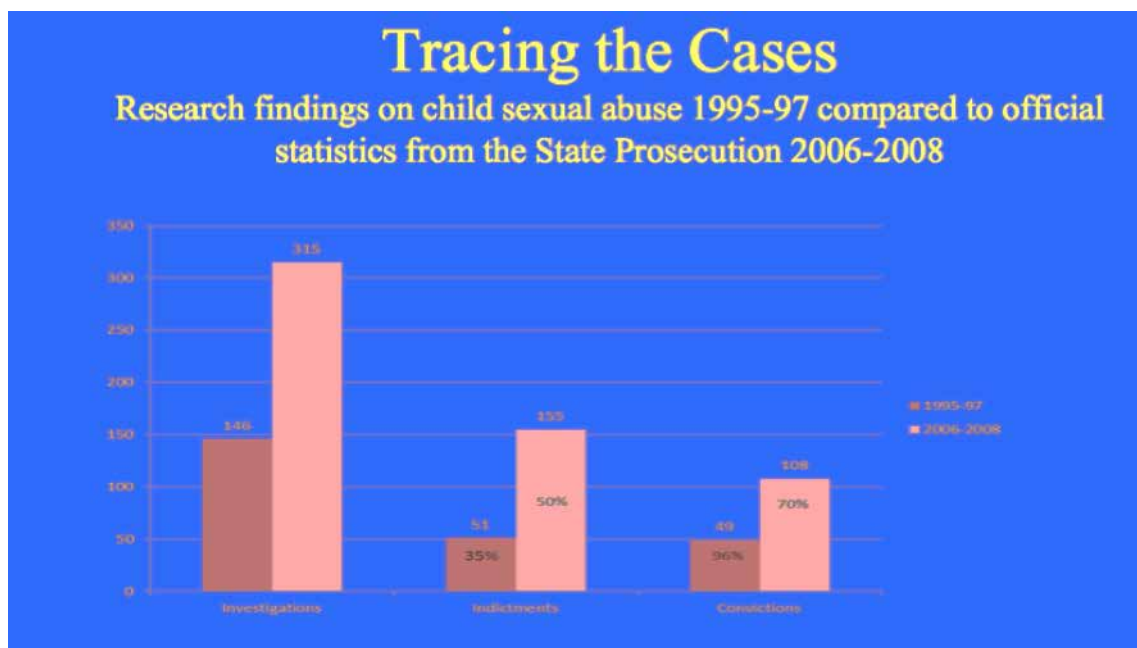
Figure 3-2: A framework model for Barnahus or similar multi-disciplinary inter-agency services ³⁸



³⁸ Council of Europe. Protection of children against sexual exploitation and abuse. Child-friendly, multidisciplinary, and inter-agency response inspired by the Barnahus model.

Evidence of success

After 15 years of operation, over 3,500 children have been referred to Barnahus Iceland by the Police and Child Protection Agencies from the onset in 1998; approximately 250 – 300 annually in recent years. The number of cases investigated have more than doubled, indictment per year have more than tripled, and convictions per year have more than doubled. Evaluations shows that significantly better outcomes for child victims and their families.



Please refer to Operating standards: European Barnahus Quality Standards for the standards developed by EU-funded PROMISE Project which embodies the operational and organizational framework for the organization³⁹. The key purpose is to promote practice, which prevent re-traumatization while securing valid testimonies for Court, and complies with children's rights to protection, assistance, and child-friendly justice.

3.5.2. Model of Child-friendly police station, New Delhi, India

India has adopted a number of laws and formulated a range of policies to ensure children's protection and improvement of their situation. Amongst all these laws, Juvenile Justice (Care and Protection of Children) Act, 2015 is a comprehensive legislation concerning children in need of care and protection and children in conflict with law. Child friendly implies physical space provided, language used, accessibility of Child Welfare Police Officers, quality of intervention, procedures followed, access to legal aid and respecting the wishes of the child.

Indicators of child-friendly police station

Official setup

1. There should be a 'Child Welfare Police Officer' (CWPO) designated at every police station.
2. The CWPO in particular and all police personnel in general should be given regular orientation and training in child related laws.
3. The CWPO and data entry operator of the Police Station should also be given training on making and updating regular entries in the "Track the Missing Child" portal.
4. The CWPO should attend all the meetings of the Special Juvenile Police Unit and maintain records of the same.
5. The CWPO should be provided adequate resources like computer, printer, internet connection, transport facilities for immediate response to child's need.
6. Funds should be provided to the CWPO or case worker for the safety and protection of children and provision of food and basic amenities including travel cost and emergency medical care.

Environment and physical infrastructure

7. There should be a separate child friendly corner/room in the police station for interactions with children, with space and furniture available for children to sit comfortably.
8. There should be women police officers/female social worker for talking to girl children.

³⁹ Promise Project Series. European Barnahus Quality Standards. Guidance for Multidisciplinary and inter-agency responses to child victims and witnesses of violence.

9. There should be a notice board displaying the name and contact number of the CWPO, the District Child Protection Officer, the Child line number (1098), NCPCR POCSO e-box number (9868235077), the numbers of Members of Juvenile Justice Board, the Child Welfare Committee, the names and numbers of the Chairperson and Members of the State Commission for Protection of Child Rights as well as the sitting schedules of the JJB and the CWC.
10. The child friendly corner/room should be distinguished from other parts of the police station by means of colorful posters, age appropriate toys and separately maintained furniture, so as to make the child feel as comfortable as possible.
11. The child friendly room/corner should have a separate entrance, if possible so that child does not come into contact with the accused.
12. If possible, the room/corner should be kept under CCTV surveillance to ensure the child is treated properly.
13. There should be provision for audio/video recording of the child's statement.
14. Facilities like clean drinking water, a separate toilet for use by children and refreshment for children should be provided.
15. NGOs/Civil Society organisations working on Child Protection in the area/district should provide IEC material in the local language to be kept at the child friendly corner/room, with easy to understand information on the rights of children and the various services that children and their families can access for protection, legal aid, medical assistance and any other support that they might require.

Attitude

16. There should be no bias or pre-conceived notion about the children based on their current situation or socio-economic status
17. Police personnel should not blame the child or the child's family for the child's circumstances.
18. There should be no discrimination against the child on the basis of sex, caste, religion, region, language and economic or social status.
19. Police personnel should behave politely with children, keeping their psychological condition in mind.
20. Police personnel should listen alternatively to the child and not treat the child like a criminal.





Child friendly
police station
in India

Below are some child-friendly police station in different states in India

Figure 3-3: Child-friendly police station in Mysore



Figure 3-4: Child-friendly police station in Kalimpong



Photo Credit:
Voxpopdaily.com/
The Indian Express

The station has a sign board bearing the name Child-friendly police station, with a series of posters and signboards providing information about juvenile justice and laws formulated to protect children from atrocities, Telephone numbers of the District Child Protection Unit Darjeeling, members of the District Child Welfare Committee members and Juvenile Justice Board have been provided in the room ⁴⁰.

3.5.3. Model of Child-friendly room, Siem Riep, Cambodia

3.5.3.1. Setting up the child-friendly room

The setup of the room is of vital importance. It shall allow a comfortable environment which ensures the feeling of privacy and meets children's needs, make children feel physically and psychologically secure during the interview.

Room Size: Any interview room does not have a one-size-fits-all standard. Variances can be great depending on a department/unit's size, budget, and interview volume.

Room environment and privacy: The room should have window(s) and curtain and be equipped with air-conditioning. In order to protect the confidentiality of the children and families receiving forensic interview services, the inside of the room shall be invisible from the outside and avoid distracting sound from outside. Consider the possibility of having one entrance and waiting area for the children and families, and a separate entrance for officers and others.

Recording equipment: Audio recording tool and CCTV camera shall be equipped within the room but shall not be connected to internet. The CCTV's DVR shall be connected to screen/monitor via wire connection. Cameras and audio equipment will be high quality to ensure the integrity of the interview and the best possible sound capture, especially in the case of a softly spoken child. The camera and audio will be fixed and out of reach of children to ensure that it remains secure and lessens the chance of damage or misuse. Cameras should also be of a high quality to ensure the tender age of the child is identified and any visible injuries. The child must be informed that she/he is being videoed and recorded. Authorized access only to the child friendly interview rooms is to ensure the integrity of the room and the evidence collection area.

Toys: A reasonable number of toys and drawing materials in the child friendly interview room.

Sound proof: The room should be quiet or equipped with sound proofing material where possible to reduce distractions as much as possible.

First Aid Kit: This will help minimize injury and future disability. In serious cases, first aid may be necessary to keep the victim alive. Per practice, first aid kit shall include alcohol or non-alcohol antiseptic wipes, band-aids, cotton balls, cotton swabs, iodine, bandages, hydrogen peroxide, gauze, saline, dressings, eye wash, etc.

⁴⁰ National Commission for Protection of Child Rights. (2017). Guidelines for establishment of Child-friendly police station. Laws prescribing, child-friendly procedures, processes, conduct and establishment.

Furniture: This will be child-friendly furniture, neutral to age and gender (child-sized). The child should be seated at the same level as the interviewer. Furniture and paraphernalia arranged for children to play and relax help engage them in the interview process from the moment they enter the building.

Lighting: It will be positioned to ensure optimal visual image is captured via the camera equipment.

Walls: Some paint child-friendly images on the walls or hang pictures or quilts. It is important to have as few distractions as possible; limit the number of stuffed animals, toys, and signs.

Safety: The room should be safe. Do not include any breakable items, sharp edges, or toys with small parts that could pose a choking hazard to very young children.

Tools for the interview: Interview tools can include writing utensils, blank paper, pictures for coloring, and anatomically detailed drawings and dolls. Any items used should be child-friendly and limited so as not to overwhelm or distract the child. Any materials obtained or produced during the interview could be potential evidence and should be preserved.

3.5.3.2. Usage of child-friendly interview room

Security and access: Access is for designated authorized personnel according to the chief of the unit. Other requests for usage of the room and equipment are to be made to the same person. In all instances, a log is to be completed at the commencement of the use of the room, with the following data:

- Name of officers/persons using the room
- Date and time commencement
- Date and time completed
- Notification of any issues and service requirements (a written notification to the chief of the unit or assigned person is to be made for any servicing)

Steps to be taken: Child friendly interview room is set up to ease the process of forensic interview with possible child victims allegedly suffered by sexual abuse and exploitation. This will ease the process of police investigation to ascertain whether the abuse indeed did occur and whether the alleged victim needs protection.

To ensure effective and correct use of the child friendly interview room, the police who carry out the interview shall maintain and follow the following steps:

STEP 1: Ensure you have authorization.

STEP 2: Obtain key to room.

STEP 3: Tidy up the room to ensure proper servicing and comfort.

STEP 4: Complete entry log.

STEP 5: Do a test of the camera and audio prior to commencement of the interview. Do not move any furniture as the furniture is set up for the optimal position to gain clarity and exposure for the camera and audio equipment.

STEP 6: Request for consent from the interviewee for the video and audio records during the interview and explain the interviewee how the video and audio will be used.

STEP 7: Follow the forensic interviewing manual for best practice in interviewing

STEP 8: At completion, turn off all equipment, place things in same place and turn off lights/fans/air-conditioning.

STEP 9: If the recorded audio or video is needed, a request should be sent to the assigned personnel for the copy or backup.

STEP 10: Clean up the room after use.

STEP 11: Complete log entry.

STEP 12: Return key to authorized person.

3.5.3.3. Maintenance process

The child friendly forensic interview room should be checked at least once a month by the chief of the unit or the assigned person to make sure that all the equipment remains at the same place and are usable.

The chief of the unit or assigned officer should put in place a clear maintenance procedure to ensure good cleanliness, order and function of the room and all the equipment supplied. The chief or assigned officer should conduct regular inspection to detect any loss, malfunction, breakage, deterioration or replenishment ⁴¹.

⁴¹ Adapted from APLE. (2018). Child-friendly room Guideline.

Figure 3-5: Child-friendly room at Siem Riep Police Station



Photo Credit: APLE Cambodia/
CJD Team

Figure 3-6: Child-friendly room at Kandal Police Station
(AHTJPU)



Photo Credit: APLE Cambodia/
CJD Team

Figure 3-7: Child-friendly room at Anti Human Trafficking and Juvenile Protection Department (AHTJPD)



Photo Credit: APLE Cambodia/
CJD Team

The setup of child friendly rooms in police station is co-funded by Terre des Hommes Netherlands and Bread for the World

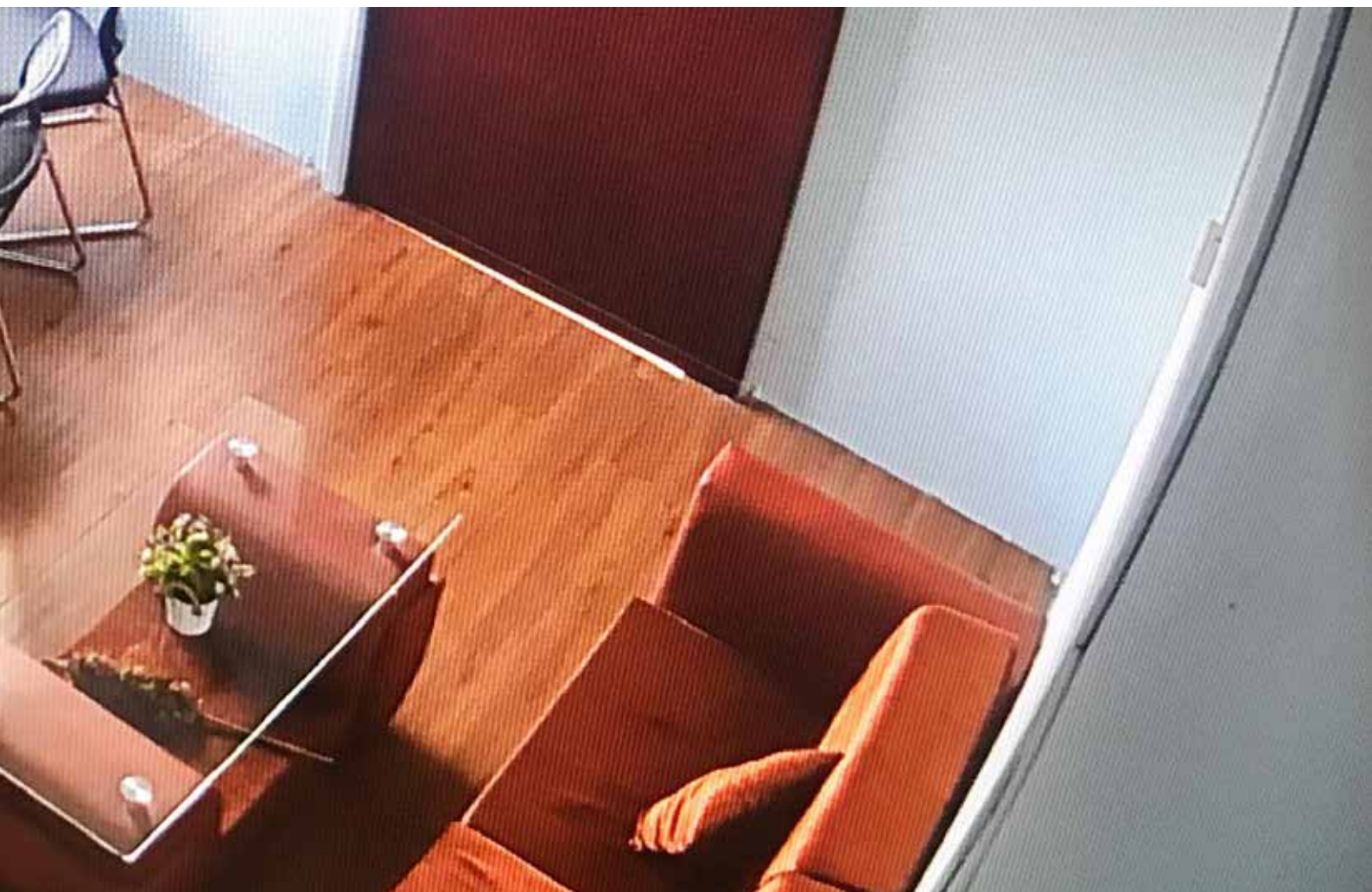
Photo Credit: APLE Cambodia/ CJD Team



Summary of section 3.5:

The law enforcement officials can learn from good practices model from other places. Barnahus's house (Children's house) is a good example. Under one roof, child victims receive (1) medical examination, (2) forensic interviews, (3) assessment, therapy and support, and (4) child protection. This does not only protect the child from further victimization, but also offer the services for the recovery and integration of the child.

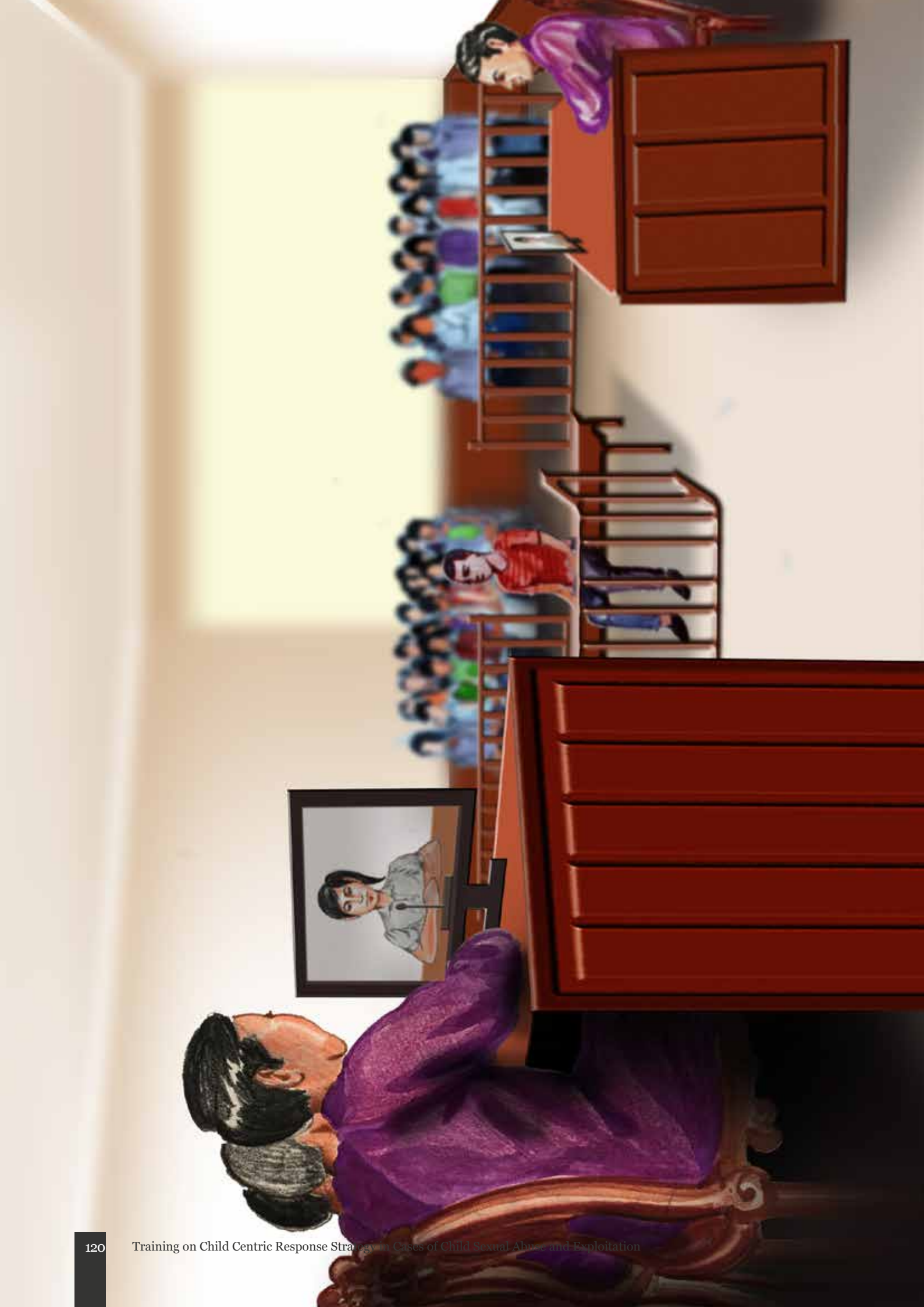
Child-friendly interview room is an important component of a child-friendly SOP. The law enforcement officials shall be familiar with the steps of usage child-friendly interviews room, as well as plan toward establishing or improving a child-friendly interview room at their Unit.

**EXERCISE 3.4 & EXERCISE 3.5: (Additional exercises to be completed when having extra time)**

KEY LEARNING POINTS FOR MODULE 3

- Guiding principles in working with child victims in responding to CSAE cases: Upholding children's rights, adopting child-friendly procedures, multi-disciplinary approach, gender-sensitive approach, protecting privacy and confidentiality, holistic care, and strengthening children's resilience.
- Characteristics of a child-friendly SOP: the child's well-being comes first, create a child-friendly environment, have a support person present, have a social welfare present, minimise the contact with the alleged suspect, modify language to the child's age and level of development, be reassuring and non-judgmental, use of interview aids/media, be mindful of the child's physical and emotional needs, documentation, and asking the child to participate in decision-making process.
- There are five stages in a forensic interview that the police officers shall follow: introduction/establishing the rules, rapport-building, free call, questioning, and closure. There are five types of questions used in an interview: open questions, specific questions, leading and non-leading questions. Throughout the interview, interviewers should move from open-ended to more focused questions to gather clarifying information and then move back to open-ended questions. Leading and coercive questions should be avoided in general. Besides, the police officers can use another tactics such as minimal encouragers, pregnant pause, and focused reinstatement to assist the recalling process of the child victims. The police officers shall show respect, supportiveness, openness, non-judgmental, straight forward talk, and equality during the interview. It is advised that the police officers shall record or videotape the statement of the child to prevent multiple interviews, which can further traumatize the child.
- Communication aids can aid the police officers in the interview/investigation process, however, the police officers shall use those with caution, and only trained police officers are advised to use those tools with children.
- The police officers shall be aware of any gender biases, assumptions, and stereotypes that he/she hold against the child victims and/or their families. All child victims, irrespective of his/her gender, ethnicity, family background, disabilities, etc. shall be treated equally, and with dignity and respect.
- There are certain techniques to minimise the possibility that the child tells lies during the interview. Establishing ground rules and truth-lie distinction are examples of techniques the police officers can take in the beginning of the interview process.
- Responding to complex abuse which involves multiple child victims require the police officers to take into considerations the potential scale of investigation, the amount of time and resources required, and time and efforts invested in. It requires thorough planning, good inter-agency working, attention to the welfare need of the child victims, and prevention of further abuse to another child victims.

- When working with parents of child victims, police officers shall bear in mind that parents/carers also need psychological support or care, treatment or education from the agencies in order to provide the best protection/care for their child. For offending parents/carers, it is up to the best interests of the child that the police officers make the decisions to separate the child from the family or not.
- Working with different stakeholders such as social media, medical professionals, and NGOs/social workers also require the police officers to demonstrate specific skills and right attitude. Collaboration in multi-disciplinary team assist greatly in the investigation and interview process, and in the treatment and integration for the child victims and their families.
- There are some good models of child-friendly practices that the police officers can refer: Barnahus house in Europe, child-friendly police station in India, and child-friendly room in Cambodia.



MODULE 4

PROMOTING CHILD-FRIENDLY CULTURE AT WORKPLACE

LEARNING OBJECTIVES:

At the end of this module, the trainees will have the necessary knowledge and skills to:

- Gain common understanding of child-friendly police station indicators putting in the Cambodian's context;
- Self-evaluate how child-friendly his/her Unit it, and identify current obstacles/challenges that the Unit faces;
- Gain insights of organisational development, compositions of culture of an organisation, and theory of behavior change, thus, plan effective intervention strategy at the Unit.

MODULE 4: PROMOTING CHILD-FRIENDLY CULTURE AT WORKPLACE



Photo Credit:
Flickr/United Nations

4.1. What is a child-friendly police station?

4.1.1. Setting child-friendly police station indicators



ACTIVITY 4.1: Cambodia's child-friendly police station

Below is the set of indicators suggested by Council of Europe on a child-friendly system. You can add indicators that you think are important in this framework. Discuss among your fellows, and finalise the indicators which work in Cambodian context. Based on these indicators, self-assess how child-friendly your Unit is.

Table 4.1: Indicators of child-friendly police station

Right to be heard	1. Establishing procedural safeguards to ensure child participation
	2. Assessing and adequately considering maturity of the child
	3. Providing professionals with rules and guidelines on how to work with children
	4. Introducing specialised police to the children
	5. Using child-friendly facilities when working with children
	6. Making free legal aid available, including free and easy access to legal representation
	7. Reducing the length of proceedings
Right to information	8. Availability of child-friendly information
	9. Availability of support services to properly inform children and parents
	10. Single professional contact person to support children during proceedings

Right to protection and privacy	11. Protective support for children
	12. Establishing procedural safeguards to ensure child protection
	13. Ensuring a child's right to privacy and confidentiality
Right to non-discrimination	14. Establishing procedural safeguards include non-discrimination measures and ensure that services are adapted to children's specific needs and vulnerabilities
Principle of the best interests of the child	15. Ensuring clear criteria in legislation for identifying and assessing children's best interests
Multidisciplinary cooperation	16. Standard operating procedures among professionals to promote institutional cooperation and a multidisciplinary approach.
Availability of resources	17. Adequate resources are in place to meet children's needs (human, financial resources, etc.)

Source: Adapted from Council of Europe. (2010).
Guidelines of the Committee of Ministers on child-friendly justice.

Below is the list of suggested indicators developed by the authors. The facilitator can modify the list based on the discussion with the participants.

Table 4.2: Indicators of Cambodia's child-friendly system

	Indicators	Checklist
Human resources		
1	70% police officers who work closely with the child victims are oriented and trained on child-friendly practices.	
2	There is at least one female police officer at the Unit to meet the request of the child victims whenever required.	
3	Support persons (such as interpreters, sign language interpreters, etc.) are available upon request.	
4	The Unit establishes a multi-disciplinary team (with medical professionals, prosecutors, lawyers, NGOs workers) and ready to deploy when required.	
Policy/procedures		
5	There is a clear procedure on responding to a typical child sexual abuse and exploitation cases.	
6	More than 80% of cases reported are investigated thoroughly.	
7	There is child protection policy available at the Unit.	
8	There is a policy on how data is stored and used at the Unit.	
9	There is a memorandum of working with social media.	
10	There is a memorandum of working with other child-protection agencies (NGOs, Social Welfare Department, etc.)	

11	There is a reporting mechanism to report and resolve any misconducts of police officers.	
12	There is a built-in evaluation and feedbacks system for the child victims and their families.	
13	At least 70% child victims and their families are satisfied with their experiences with the police officers and services received by child-protection agencies.	
Environment and infrastructure		
14	There is a separate child-friendly room in the police station, with space and furniture suitable for the children	
15	Facilities such as clean drinking water, toilets, and refreshments are available for the children	
16	Audio/video recording is available and put in use when taking statements of the child.	
17	There are child-friendly materials providing information for child victims and their families available at the Unit (referring to the support services, explaining the children's rights, etc.)	
18	The exterior of police station is decorated and equipped with child-friendly materials/structure (posters, signposts, hotline number, playground for children, etc.)	
19	The equipment and facilities (transportation facilities, cameras, first aid kits, etc.) assisting the investigation process is available and ready to use when required.	
20	Resources are available and ready to support the victims and their families (funds, etc.)	

4.1.2. Self-evaluation: how child-friendly my Unit is



EXERCISE 4.1: How child-friendly your Unit it? (Workbook)

Summary of section 4.1:

The participants withdraw their learning session through discussion and finalization of indicators of Cambodia's child-friendly police station.

4.2. Organisational development and behavior change

4.2.1. Culture of an organization

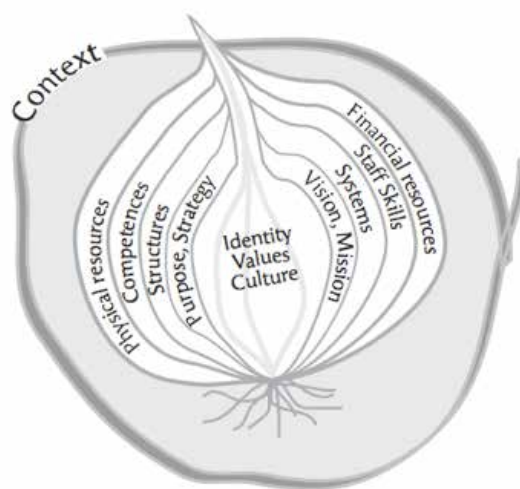


ACTIVITY 4.2: What makes culture of an organization

Organisational development (OD) aims at building competence within the organization to solve existing problems, and increase the readiness to meet future challenges and changes. It is a process that aims to help people better understand the organisation to which they belong and build their capacity or skills to meet new requirements. At its centre of heart, OD is about people and relationships.

The onion model attempts to outline elements of an organization: The outermost layer of the “onion” represents the organisation’s physical and financial resources. The next layer is the human capital including the staff’s knowledge and skills. Moving to a deeper layer is the organisation’s vision, aims, objectives, and strategy. Finally, in the core of the onion is the organisation’s “soul” – its identity, basic values, organisational culture.

Figure 4-1: Onion model of an organization



Source: Swedish Mission Council. (2012).
Organisational development and capacity building.

Organisational culture is deeply seated norms, values and behaviors that members share. There are five basic elements of culture in an organisation include:

1. Assumptions
2. Values
3. Behavioral norms
4. Behavioral patterns
5. Artifacts.

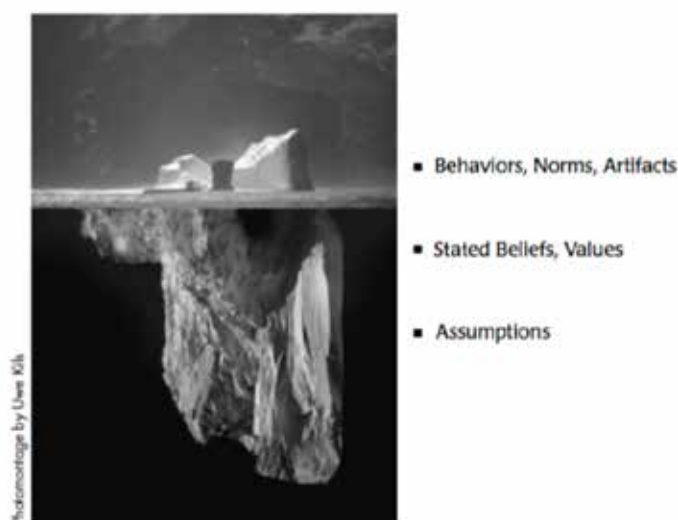


Photo Credit:
Picswe.net/
ArtPics

The subjective features (assumptions, values, and norms) reflect members' unconscious thoughts and interpretations of their organisations. The subjective feature (artifacts) shape the behavior take on within the organisations. Schein (1980) suggests the idea of cultural iceberg.

These diagrams illustrate that change in an organisation can occur many levels. As behaviors and their associated artifacts are readily visible to others, OD can affect change in these relatively easily. However, change just occurs on the “surface” level. In order to sustain change, OD needs to penetrate the underlying beliefs, values, and ultimately, the unconscious assumptions. Additionally, changes should not be imposed from the outside – people have to realise the need for certain changes. This process requires time, efforts, affirmative action, and strong commitment.

Figure 4-2: Schein's cultural iceberg



4.2.2. Pathways to behavior change ⁴²⁴³⁴⁴

The long-term objective of this training is to compel the intended audience to act– to provide high-quality services, to treat child victims and their families in a child-friendly way, to act professionally with other stakeholders, etc. In most cases, just sharing information is not enough to get people change the behaviors. This is why it is so important to understand why people act the way they do.

⁴² Ajzen, I. (1991). The theory of Planned Behavior. *Organizational Behavior and Human Decision Processes*, 50, 179–211.

⁴³ Armitage, C., & Conner, M. (2001). Efficacy of the theory of planned behavior: A meta-analytic review. *British Journal of Social Psychology*, 40, 471–499.

⁴⁴ Grizzell, J. (2007). Behavior Change theories and Models. Retrieved January 28, 2007, from http://www.csupomona.edu/~jvgrizzell/best_practices/bctheory.html.

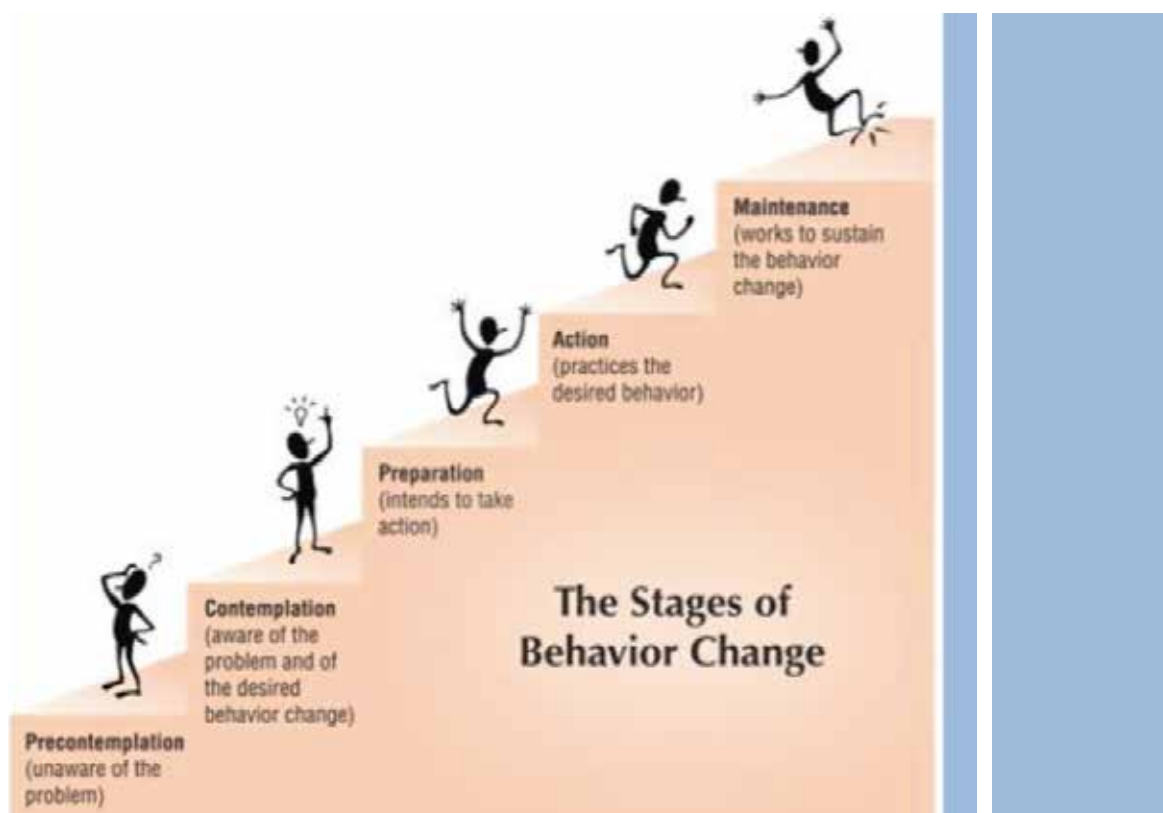
There are different behavior change theories. The most prevalent are learning theories, social cognitive theory, theory of reasoned action and planned behavior, trans-theoretical model of behavior change. In this module, we study trans-theoretical model.

The trans-theoretical (Stages of change model) has a significant influence on Behavior Change Communication. The model focuses on an individual's readiness to change or attempt to change a behavior. Behavior change is a process and it is important to identify at what level of readiness an individual is at, if they are to make a change in their behavior. Because individuals are at different stages of readiness to change, they can benefit from a range of interventions that are appropriate to the stage they are at.

Table 4.3: Stages of Change Model

Concept	Definition	Application
Pre-contemplation	Unaware of their problem. Hasn't thought about change. Not consciously intending to change.	Increase awareness of need for change, personalize information on risks and benefits of changing.
Contemplation	Thinking about change in the near future.	Motivate and encourage to make specific plans.
Decision/determination Preparation	Making a serious commitment and a plan to change.	Assist in developing concrete action plans and setting gradual goals.
Action	The stage at which behavior change is initiated.	Assist with feedback, problem solving and social support and provide reinforcement.
Maintenance	Sustaining the change and achievement of predictable health gains. Relapse can occur.	Assist in coping, reminders, finding alternatives, avoiding slips/relapses (as applies).

Figure 4-3: Stages of behavior change

**Implications:**

- It is essential to match behavior change interventions to people's stages. For example, if an individual is in the pre-contemplation stage it is important to raise their awareness about a behavior in order for them to contemplate making a behavior change.
- Without a planned intervention, people will remain stuck in the early stages due to a lack of motivation to move through the stages.

4.2.3. Behavior change determinants

An individual's ability and willingness to adopt and maintain positive behaviors is often affected by a number of factors that make it easy or difficult to change. Knowledge and awareness are rarely the only reasons why individuals act or adopt positive behaviors. For example, simply knowing that child-friendly procedures are better for the child victims and know how to perform the task is typically not enough to motivate the professionals to make long-term changes in their behavior. Individuals have a number of reasons for adopting or resisting behavior change. These barriers or facilitators are called behavioral "determinants."

In addition to individual determinants, relationships and working environment can influence someone's willingness and capacity to change behaviors. Lastly, physical or logistical barriers and gender and cultural norms can prevent adopting new behavior change. Determinants can be categorized into three main groups related to the environment, skills and knowledge, and ideation.

Environmental:

- Availability of services & physical environments
- A supportive legal and policy environment for the services

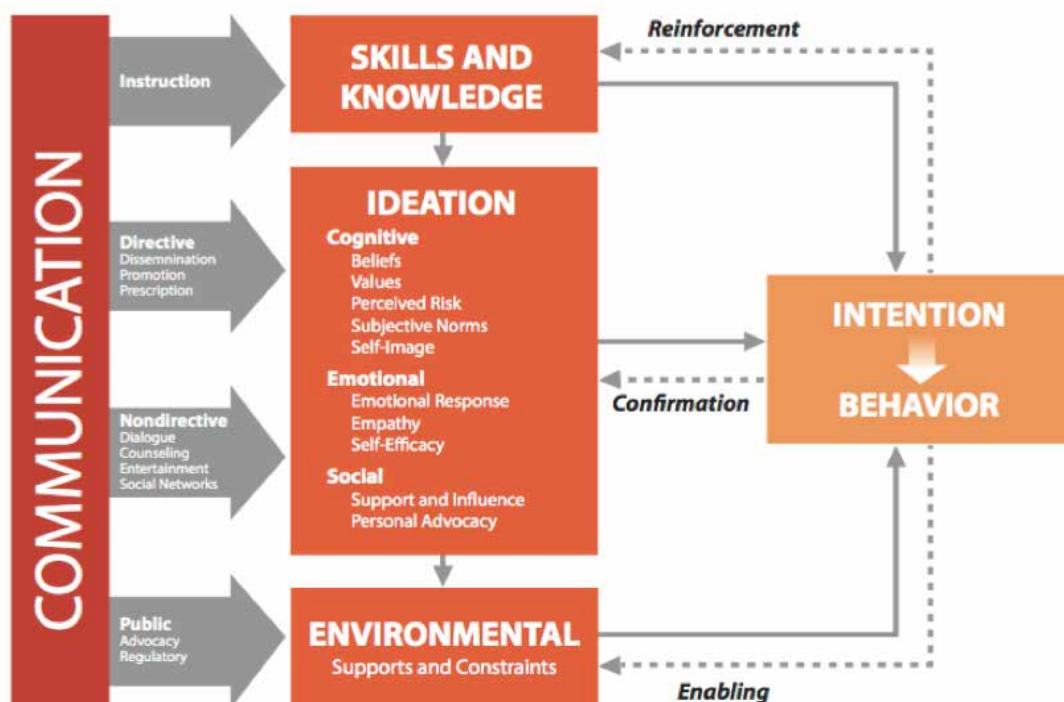
Skills and knowledge:

- Level of awareness of the service and/or the resulting change behaviors
- Level of awareness of the skills or steps required to maintain the behaviors
- Beliefs about the required skills or behavior: Are they considered too difficult? Does the intended audience believe they have the time to perform the necessary behaviors?
- Does the intended audience feel that they can't do the behavior on their own? Do they need help to accomplish the behavior?
- Is the behavior something the audience can consistently remember to do, or do they often forget (for example, using VARE, keeping appointments, etc.)

Ideational:

- What are the prevailing beliefs about the behavior or intended audience? Are they positive or negative (for example, “not following child-friendly procedure is no harm”)
- How much social support does the audience have to maintain required behaviors?
- What are the prevailing social and gender norms about the service or health area? Are they supportive or unsupportive?

Figure 4-4: Communication for change



Source: Health Communication Capacity Collaborative. Ideation, an HC3 Research Primer.

Table 4.4: Key elements of behavior change

Key element	Definition	Strategies for behavior change
Self-Efficacy		
	An individual's perception of or confidence in their ability to perform a recommended response.	Raise individuals' confidence that they can perform response and help ensure they can avert the threat.
Intentions		
	An individual's plans to carry out the recommended response.	Determine if intentions are genuine or proxies for actual behavior.
Attitudes	An individual's evaluation or beliefs about a recommended response.	Measure existing attitudes before attempting to change them.
Subjective norms		
	What an individual thinks other people think they should do.	Understand with whom individuals are likely to comply.
Benefits		
	Positive consequences of performing recommended response.	Communicate the benefits of performing the recommended response.
Cues to Action		
	External or internal factors that help individuals make decisions about a response.	Provide communication that might trigger individuals to make decisions.
Barriers		
	Something that would prevent an individual from carrying out a recommended response	Be aware of physical or cultural barriers that might exist, attempt to remove barriers.
Fear	Emotional arousal caused by perceiving a significant and personally relevant threat.	Fear can powerfully influence behavior and, if it is channeled in the appropriate way, can motivate people to seek information, but it can also cause people to deny they are at-risk.
Threat	A danger or a harmful event of which people may or may not be aware.	Raise awareness that the threat exists, focusing on severity and susceptibility.

Source: The World Bank. Theories of behavior change. CommGAP.

4.2.4. Intervention strategies

An OD strategy is defined as a plan for relating and integrating the different organizational improvement activities engaged in to accomplished objective.

OD attempts to deal with organization change from an integrated standpoint that considers structural, technical, and behavioral changes and how these change approaches influence on another. Below is the suggestion of tools used by the organisations: leadership tools, management tools, and power tools.



Organisational Tools for
Changing Minds

Summary of section 4.2:

Organisational development aims at building competence within the organization to solve their existing problems and meet future challenges. At its centre of heart, OD is about people and relationships.

The onion model of an organization contains many layers: physical and financial resources - human capital - vision, aims, objectives, and strategy.

Behaviors, norms, and artifacts are just the surface of the deeper layers of beliefs, values, and assumptions of an organizational culture.

There are five stages of behavior change: pre-contemplation, contemplation, preparation, action, and maintenance. Acknowledging which stages individuals are in will assist in deciding the intervention strategies.

Understanding behavior change determinants (environmental, skills and knowledge, and ideational) help the managers in choosing the strategies for behavior change.

The managers can use the variety of tools including leadership, management, and power tools to initiate behavior change in the organization.

4.3. Planning for changes — The challenges of managing change

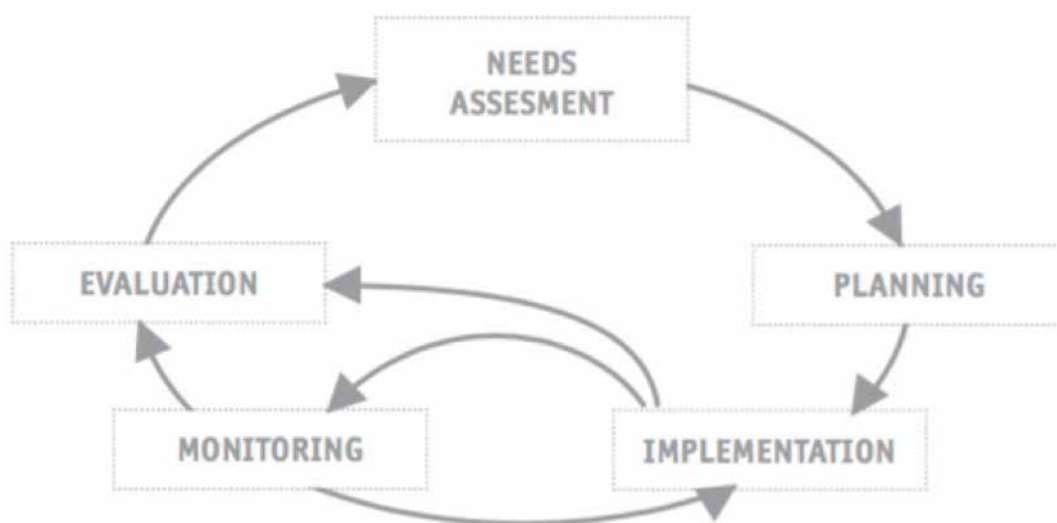
The causes of failure of change are varied, but most come from within the organization and include:

- Misunderstanding of what change is
- Lack of planning and preparation
- Change process has no clear vision
- Goals are set, but too far in the future
- The quick fix option
- Poor communication
- The legacy of previous change
- “...the way we do things around here”
- Fear of failure • Employee resistance
- Ill-prepared employees

Change is a challenging process and to ensure a successful change management requires a right strategy and the participation of the members or staff in the whole process.

Steps for making change

A common OD approach used to help organizations negotiate change consists of four steps.



4.3.1. Diagnosis or needs assessment

Analyse current culture and performance

The first step in changing the culture involves defining your critical performance priorities and collecting data on your organization’s current and ideal culture. It helps the organisations to identify problems that may interfere with its effectiveness and assess the underlying causes and examining its mission, goals, policies, structures and technologies; climate and culture; environmental factors; desired outcomes and readiness to take action.

Clarify vision/objectives

The objectives should be S.M.A.R.T. Identify what information you will collect in order to determine whether you have achieved your objectives (indicators) and how you will collect and analyse that data.

What is a SMART target/objective?		Ask yourself:
Specific	The objective must be precise and state exactly what is to be achieved.	What do I want to accomplish?
Measurable	It must be possible to measure whether the objective has been achieved or not.	How will I know if I have accomplished it?
Achievable	You must have the resources and capacity to achieve the objective.	Is it possible that it can be accomplished?
Relevant	The objective must be linked to your vision, mission and aims and have a point to it.	Is it desirable that it be accomplished?
Time-bound	It must be possible to understand exactly when the objective has been completed or not.	How will I know when I have accomplished it?

Stakeholder analysis

Stakeholders are individuals or groups who may affect, be affected by the process of change or have an interest in the change process. Often their needs are perceived to be very different and for this reason it is usually a good idea to identify key groups and individuals and try to understand how they view the potential changes.

4.3.2. Action planning

Clarify expected behaviors and develop action plan: An honest, transparent and informed approach is essential. Recognising individual contributions, delegation and teamwork are main characteristics of good communication and will build trust, and motivation for the staff. Staff need to feel part of the process and regularly scheduled sessions with two-way communication will emphasize expected behaviors and results.

Plan and coordinate change activities: Strategic interventions for addressing diagnosed problems are developed. How the police officers coordinate and implement his/her change activities is critical to successful implementation.

In planning activities, the managers should take account of:

- The broad implementation approach (e.g. speed, involving and collaborative vs. directive)
- Who will support in driving implementation and actively solicit their support
- The key milestones and deliverables
- How progress will be tracked
- How momentum will be maintained
- Implementation risks

The managers should also consider how the change process will be monitored and measured. You should ensure that outcomes are evaluated against original performance priorities and measures and that areas for improvement are identified.

Overcoming resistance to change: Any change will inevitably provoke resistance and the challenge is to objectively recognise and manage resistance without settling for compromises. The key actions are communication and involvement. This helps to build trust and commitment and changes the mind-set from “them” to “we”. Discussing the problems and exploring possible solutions will draw out those who feel uncomfortable about the change. If consulted, staff are more likely to feel part of the process and think creatively about finding solutions.



4.3.3. Intervention/Implementation

The ‘implementation’ phase is where the managers put his/her action plan into practice to realise the vision. During this phase, your team will be trying out the new behaviors and ways of working or embedding the new systems and procedures. Providing training and learning opportunities, motivating employees and celebrating successes are key activities.

Facilitate team work and collaboration: In order for the culture to change in an organization, individuals must be willing to act in a different way and consistently maintain that behavior. This can be achieved through team work and the development of team skills. The managers will play a key role by creating and facilitating opportunities for employees to demonstrate the new behaviors.

The managers can begin embedding the culture and systems through day to day conversations, meetings and supportive supervision sessions. Team based working practices will allow for greater inclusion of employees, sharing of knowledge, reduction of duplication of work and processes, and most of all, greater empowerment and greater job satisfaction.

Provide training and support: Supporting your team during the change process means providing one to one support to employees, particularly for those individuals who are resistant to the proposed changes. Being available to listen, coach and provide guidance is a key part of your role. Developing a training schedule as part of your action plan will assist in ensuring that employees feel equipped during the implementation.

The training plan should address the following questions:

- Knowledge -What do employees need to know?
- Skill -What do they need to do?
- Attitude - How do they feel?

4.3.4. Monitoring/Evaluation

M&E is to assess the planned change efforts by tracking the organization's progress in implementing the change and by documenting its impact on the organization.

Motivate and celebrate: Building motivation as your employees experiment with new behaviors and begin using new procedures is critical to the process. You need to keep aware of the motivation levels of your team members and how they are responding to what's going on around them. You can do this by:

- Talking about the changes and create an open environment for discussion. Ask team members how they are feeling and encourage honest expression of thoughts/opinions.
- In your supportive supervision sessions with staff, ask how they feel about the change.
- Providing feedback and recognition when you see changes in behaviors. Where your team can see that learning is taking place, this will help to raise morale.

Aligning procedures/processes: Behavioral change requires a fundamental change in the performance management of employees with a focus on individual competencies and capabilities. Some of the key changes include:

- Assessing all roles and employees by competencies and clear objectives
- Rewarding individual performance
- Introducing performance based incentives
- Developing recognition approaches
- Managing underperformance.

You will have a key role to play in influencing senior management to ensure that the organizational systems support the planned changes. This includes ensuring that the processes for dealing with under performance is followed. The commitment of senior management is critical and if they show that they are open to the changes, staff will be more open to embrace the new behaviors.



EXERCISE 4.2: Reform in Philadelphia



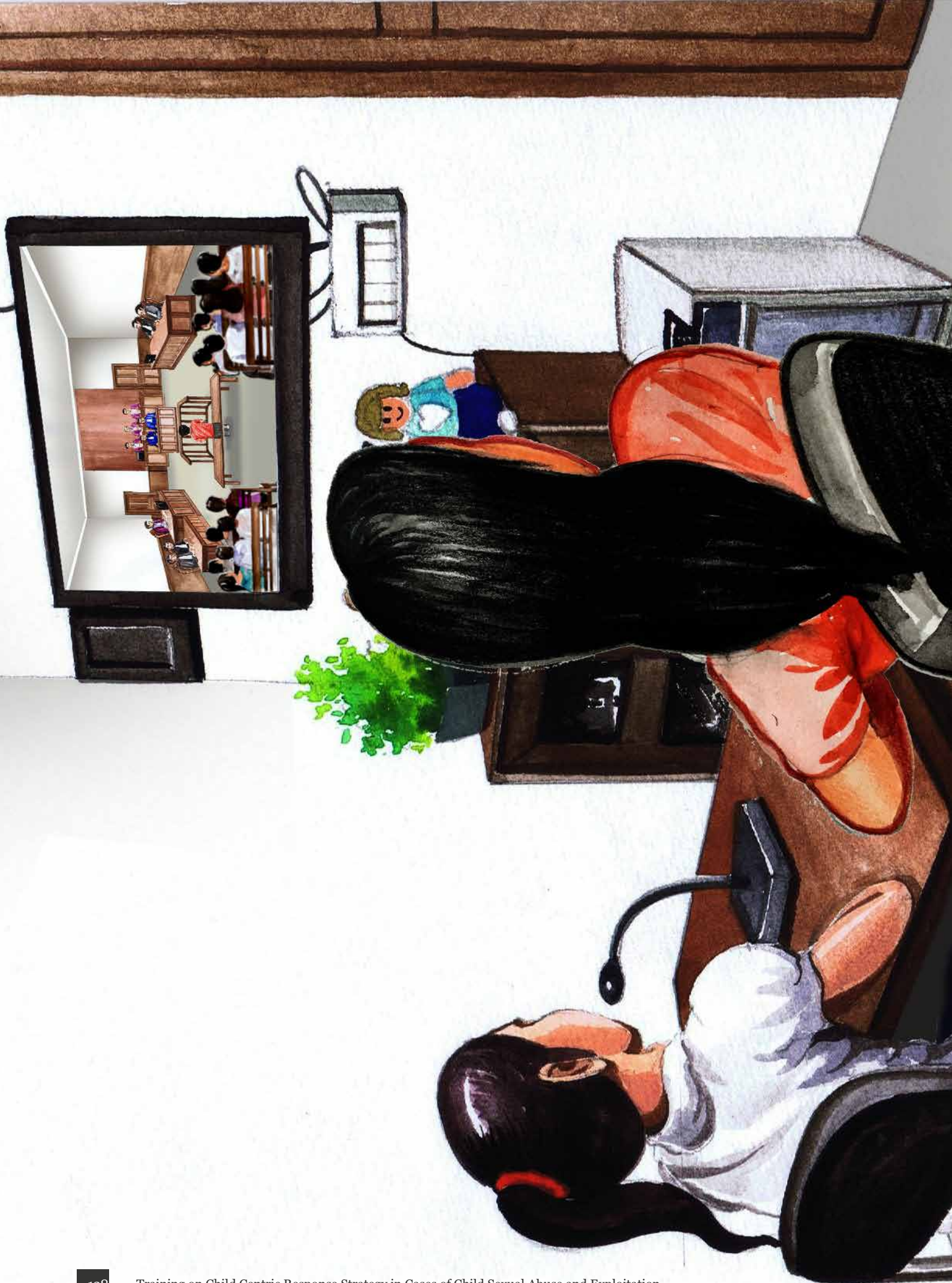
ACTIVITY 4.3: Toward a child-friendly police station

Summary of section 4.3:

There are four stages in OD change: needs assessment, action planning, implementation, and M&E. Needs assessment include the identification of current problems that the organization is facing and the underlying causes. Action planning include setting SMART objectives, stakeholder analysis, and developing action plan which have participation of the members in the organization. Implementation is where the action plan is put into practice to realise the vision. Acknowledging the resistance of change and facilitating good collaboration is essential for effective implementation. M&E is to assess the progress compared to original plan. Motivating employees, aligning with procedures, dealing with under-performance, and lessons learnt are some steps to be taken.

KEY LEARNING POINTS OF MODULE 4

- Indicators for child-friendly police stations shall be established based on ensuring the rights of children. Factors shall be included for considerations: environment (child-friendly room, child-friendly furniture, etc.), human resources (a special designated child-friendly police officer, the police officers get trained, the availability of female police officers, etc.), policy/procedures (data storage policy, MoU with NGOs/hospitals, social media, etc.)
- Organisational culture is deeply seated norms, values and behaviors that members share. There are five basic elements of culture in an organisation include: Assumptions, Values, Behavioral norms, Behavioral patterns, and Artifacts.
- There are five stages of behavior change: pre-contemplation, contemplation, preparation, action, and maintenance. Acknowledging which stages individuals are in will assist in deciding the intervention strategies.
- Understanding behavior change determinants (environmental, skills and knowledge, and ideational) help the managers in choosing the right strategies for behavior change.
- There are four stages in OD change: needs assessment, action planning, implementation, and M&E.



MODULE 5

DESIGNING A PARTICIPATORY TRAINING COURSE

LEARNING OBJECTIVES:

At the end of this module, the trainees will have the necessary knowledge and skills to:

- Differentiate between conventional training and participatory training, and acknowledge the advantages of participatory training;
- Apply the adult learning theories in designing a participatory training;
- Use different training methods integrated in a training lesson;
- Develop facilitation and communication skills which are essential for a facilitator; and
- Develop strategies to address common issues arising during a training course.

MODULE 5: DESIGNING A PARTICIPATORY TRAINING COURSE – SPREADING THE KNOWLEDGE



Photo Credit:
Flickr/United
States Mission
Geneva

5.1. Conventional training vs. participatory training

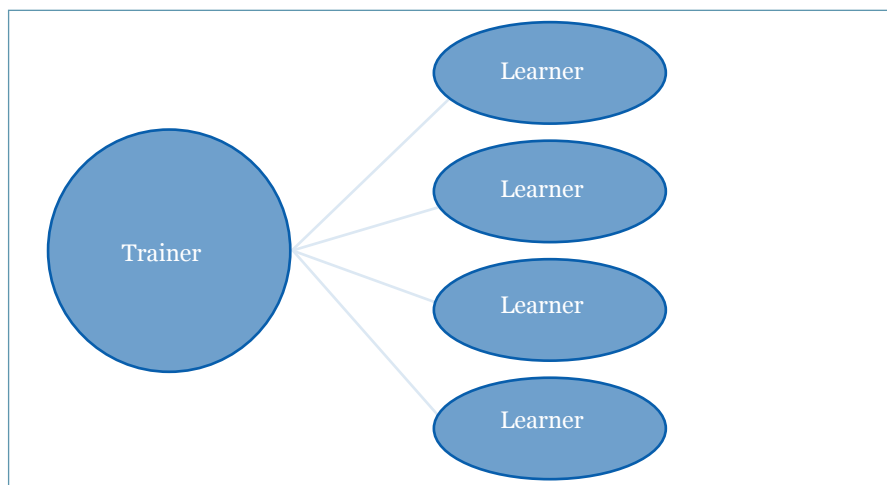
Training is a learning process, which involves learning of new skills, concepts and behavior.

5.1.1. Conventional training

The conventional training adopts a trainer-centric approach where trainer becomes a central point around which the entire process revolves, while learners adopt a passive role. In the conventional training:

- Relationship between the trainer and the learners is in the mode of teacher and students relationship.
- The trainer and the training institution have the responsibility of training.
- The trainer defines what the learners need to learn and how these learning needs can be met.
- Learners learn what the trainer teaches; have little knowledge about the topic and have no experience to share.
- Learning depends upon training capacity of trainers, and learning capacities of trainees.
- The trainer is considered important because she/he is assumed to be knowledgeable.

Figure 5-1: One-way teacher-student model



5.1.2. Participatory training

On the other hand, participatory training is participant-centered. The trainees themselves are responsible for their own learning while trainer's responsibility is to develop the sense of responsibility. In the participatory training:

- Existing knowledge is given importance. Learning is derived from the experiences of the learners. New information/knowledge is built on the already existing knowledge.
- The learning not only imparts new knowledge but also generates awareness and builds skills.
- The training rises out of specific needs of participants as articulated by them.
- Participation of learners in the entire training process is valued. Consequently, they develop their own norms, values and take responsibility for their own learning.

Figure 5-2: Active Learning Method of Participatory Training

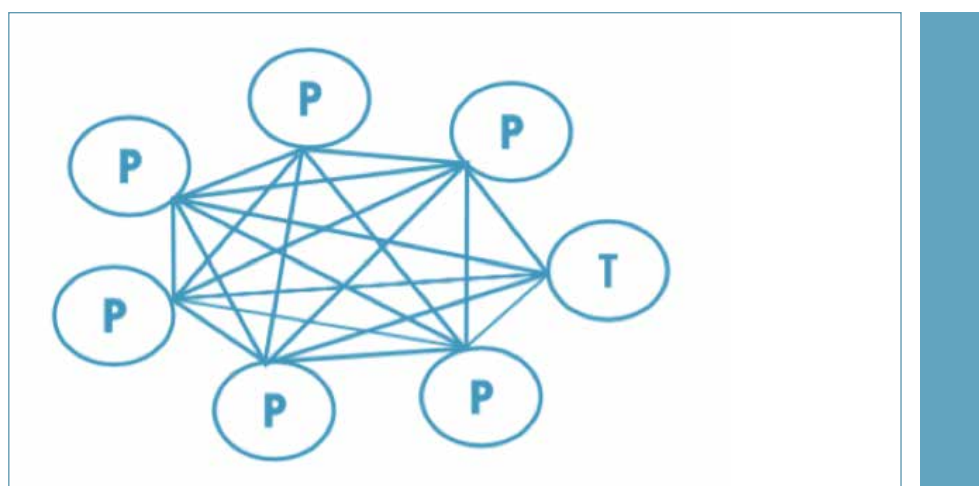


Table 5.1: Roles of the trainers and the learners in participatory training

The trainer	The Participants
Is a facilitator	Are members of a communication network.
Is a good communicator	Freely discuss
Works at the same level as the participants	Participate actively
Respects participants' ideas and experiences	Share experiences
Is supportive of the learning process	Ask questions, make mistakes, process and take risks as part of the training process
Is an organizer of learning experiences	Use the trainer as a resource, experiences guide and mentor

Below is the summary of differences between conventional and participatory training methods.

Table 5.2: Differences between conventional and participatory methods

Conventional	Participatory
Trainer-centered	Trainee-centered
Formal	Informal
One way	Multi-directional
Rigid-already decided	Flexible-as per need
One method	Different methods
Restrictions	Freedom
Less motivation	Motivated to ask questions and questions are welcomed
Knowledge is with the trainer	Trainees also have knowledge

Summary of section 5.1:

- While the conventional training adopts a trainer-centric approach where trainer becomes a central point, participatory training is participant-centered where the trainees themselves are responsible for their own learning.
- While in the conventional training, the relationship between the trainer and the trainees are teacher-studentships relations, and the trainers are considered as more knowledgeable, in the participatory training, the roles are more equal, and the participants play an active role in constructing the knowledge.

5.2. Applying adult learning principles

Adults learn differently from children and thus, require different training approaches. The adult learning model applies the adult education principles to participatory training programs.

5.2.1. Three styles of learning

Styles of learning differ between individuals. An adult person receives information through three main sensory receivers:

- Visual: Learn through watching, observing, and reading;
- Auditory: Learn through hearing;
- Kin-aesthetic (movement): Learn through moving, doing, practicing, and touching

Most people use all three styles, but usually have a dominant or preferable style. The style of learning that people use also depends on the skills and knowledge that are being taught.

For example, when learning how to counsel clients, participants use:

- Visual – to learn protocols, observe good counselling behaviors;
- Auditory – to learn ways to say certain things;
- Kin-aesthetic (movement) – to learn how to counsel the patient, say the right words, show compassion, follow the right counselling methods

When learning how to perform an HIV rapid test, participants use:

- Visual – to see how to perform the tests;
- Auditory – to learn ways to say certain things;
- Kin-aesthetic (movement) – to practice performing the test

Below is the table of different learning styles and what methods works best for them:

Table 5.3: Different learning styles and matched facilitating methods

Learning styles	Facilitating methods
Learning by sight (visual)	<ul style="list-style-type: none"> • Use Handouts; • Use graphs, charts, illustrations; • Supplement textual information with illustrations; and • Show diagrams and then explain them
Learning by hearing (auditory)	<ul style="list-style-type: none"> • Brief explanation about the tasks • Develop dialogue between trainers and participants, and among participants • Include aural activities, such as brainstorming, “buzz” groups; and • Allow time for debrief activities
Learning by movement (kin-aesthetic)	<ul style="list-style-type: none"> • Use activities that get the participants up and moving; • Use colored markers to emphasise key points on flipcharts or white board; • Provide highlighters, colored pens/pencils; and • Have the participants transfer information from the text to another medium, such as the flipchart.

So, the goal is not to focus on one style of learning but to use a blend of methods to reach the greatest number of adult learners. For example: provide a variety of learning methods such as Lectures, Discussions, Role-plays, Exercises (i.e., quizzes, brainstorming); provide a variety of training materials such as slides, manuals/handouts, and videos.

5.2.2. Characteristics of adult learning & implications for the trainers

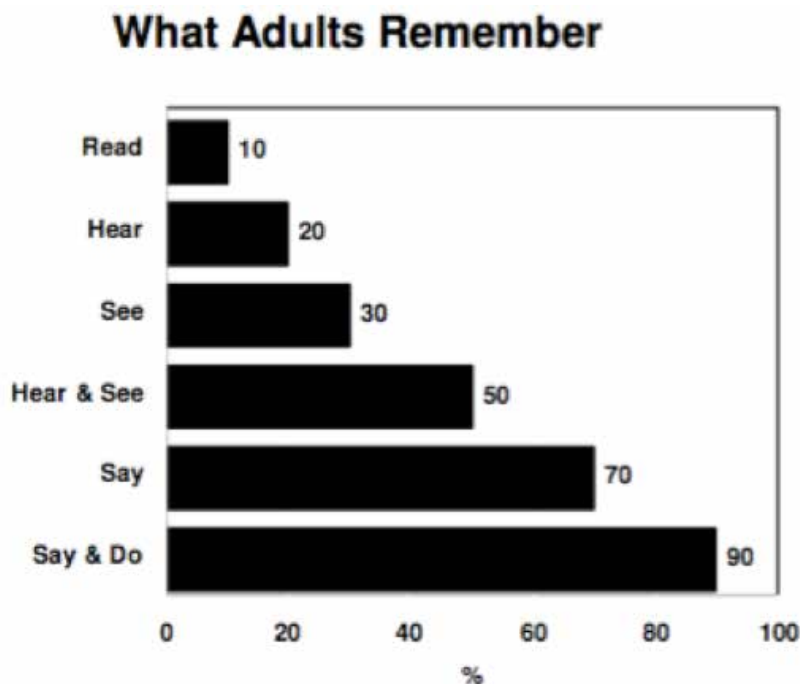
- Adults learn from experiences
- All new learning for adults is based on what they already know. Encourage participants to use examples from their previous experience as much as possible: conduct a skills assessment first and then add to it by bringing in other sources of information; never assume that the participants know nothing about the subject matter.
- Adults learn best from peers
- Adults learn best from those of similar age and similar background. Encourage them to share with one another.
- Adults learn best what is relevant to their lives
- Adults learn what they want to learn, what they are interested in and what they think will be useful to them in their lives. Use training materials that are relevant to the participants.
- Adults must be accorded respect
- Adults must be treated with respect given that they have a wealth of experience, skills and ideas. Encourage them to participate fully in the learning process as equals. Encourage them to take responsibility for their own learning and actions. Never humiliate or laugh at them in front of others.
- Adults learn best through discussions
- As adults grow older their powers of observation and reasoning often grow stronger. This ability to observe, think and analyse means that in adult education all are learners and all are teachers. Try and use discussions as much as possible because it enables adults to be both learners and teachers. Lectures and note-taking are less effective.
- Adults learn best through discovery

If a trainer only lectures then participants will probably only remember 20% of what is said. So, creating a participatory training where participants are active and “saying and doing” will help them remember more from the training.

Tests have shown that adults remember:

- 10% of what they read
- 20% of what they hear
- 30% of what they see
- 50% of what they see and hear
- 80% of what they say
- 90% of what they say and do

Figure 5-3: What adults remember

**Summary of section 5.2:**

Adults learn differently from children, thus, require different training approaches. Each individual will have different styles of learning: visual, auditory, and movement. Tailoring to each type of learning requires a mixed usage of methods.

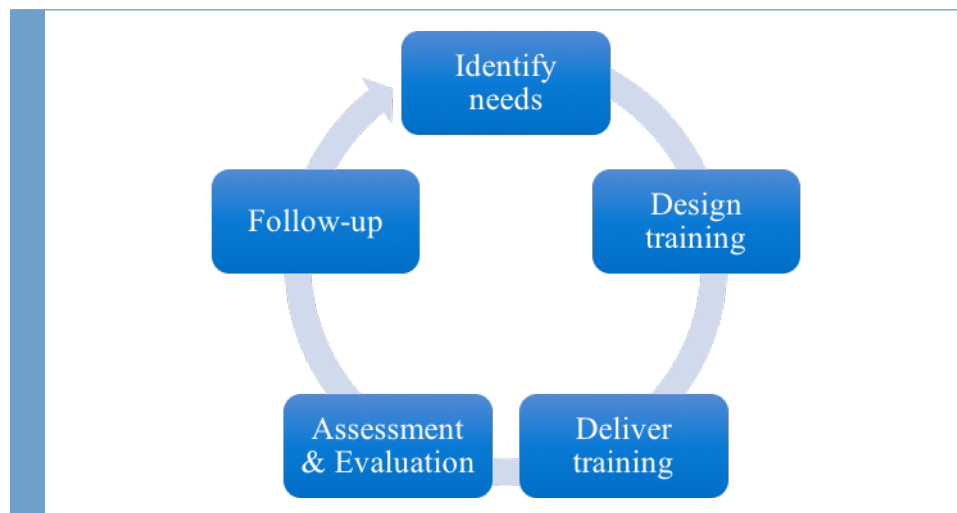
The Facilitator shall pay attention to characteristics of adult learning principles when designing a training course: adults learn from experiences, learn best from peers, through discussions and discovery, and adults must be accorded respect.

Adults will remember 10% of what they read, 30% of what they see, and 90% of what they say and do.

5.3. Designing a training course

The participatory training comprises of a series of five steps in three distinct phases. The pre-training phase focuses on designing of training program. During training phase, focus is on group facilitation, debriefing and consolidation and creating conducive learning environment. The post training phase includes such steps as evaluation, and follow-up.

Figure 5-4: Process of training



5.3.1. Selecting trainees

Specific criteria for selecting the most appropriate trainees should be decided at the planning stage, and the following points should be noted while selecting trainees:

- The basic criteria are those actually involved in working on crimes against children and protection of children, either in special police units, or those who were working in other capacities on child sexual exploitation or child trafficking cases;
- It would be advisable not to have trainees from departments that have limited opportunity to utilize the training (such as from the finance department), or those on the verge of retirement, which would make it impossible for them to employ the knowledge and skills received in the training programme.
- Trainees can be identified for training on the basis of rank, nature of duties, gender, geographical targeting and balanced against the type of training, as follows:
 - Need for training (e.g. least knowledge, highest incidence of crime);
 - Biggest potential impact on children (e.g. investigating officers have more direct contact with children, but senior management have the power to enforce and promote good practices on the ground);
 - Level of influence (e.g. whether or not they have the power to put into practice what they have learned);
 - Mixture of participants in one group / group dynamics (e.g. will junior officers be prepared to speak in front of senior officers? Are there cultural / gender issues to consider?)
- The criteria of compulsory attendance and regular participation is also relevant in selecting trainees. Those who are nominating the trainees, and the trainees themselves, should be committed to completing their training.
- There is also no fixed guidance on the exact number of trainees to attend the training programme. From the experience on police training programmes, the recommendation number for an effective training course should be between 30 and 40 trainees.
- Efforts should be made to include as many women police officials as possible in the training programme. Considerations include the number of women police officials in the national police force, the nature of their duties, and whether women officials who receive training would be able to practically utilize the training.

5.3.2. Identifying needs

A training needs assessment is the process of identifying the gaps in Knowledge, Attitude, and Practices (KAP) between the present performance and the desired performance. A discrepancy between what exists and what is needed is often stated in terms of what is necessary to perform a job or series of tasks. Or in other words, what participants need to learn to improve their performance up to the standards.

Below are examples of sources for identifying training needs:

- Using questionnaire to assess participant's training needs (See Annex...for sample of TNAs) – the most commonly used method; and
- Observing participants while they work:
Example: Analyzing against job description

No.	Job description	Tasks easily done	Task difficult to do	Kind of capacity building required

- Using participatory exercises: group discussion, rating and ranking against quality of work, SWOT, self-assessment.

5.3.3. Defining objectives

An objective is a specific statement of what participants shall be able to do or achieve regard to knowledge, skills, and attitudes after the course. An objective is specific, measurable, attainable, relevant, and time-bound. There are three layers of foci of learning: must know, need to know, and useful to know. Based on the needs assessment of the Unit, the Trainers define objectives: how many participants will join, who will join, what knowledge/skills/practices are essential to their jobs, etc. Examples of learning objectives are specified in the Textbook of each module.

5.3.4. Designing the content

Based on the training materials Toward child-friendly justice – Improving police response to child sexual abuse and exploitation Textbook and Workbook, the Trainers can identify the modules and sessions corresponding to the needs of his/her Unit, and customize the content to the local context. Case study and practical issues at the Unit should be embedded for discussions and solutions finding. Encouraging the participation of the participants (e.g., experienced trainees to share insights, entry-level trainees to share expectations, etc.) in the early phase of preparation is also an element to ensure the success of the training course.

Estimate time available and design lesson plans for each session. Examples of lesson plans are specified in the Facilitator's guide of each module.

5.3.4.1. Using the training tools

As stated in the adult learning principle, a variety of techniques with an emphasis on practical, memorable, and creative activities, discussions, and presentation should be used to meet different learning styles. Examples of training tools include: case studies, role plays, drama, problem solving, group discussions/working groups, lectures, brainstorming, panel discussions, visual materials and games. Each method has its pros and cons, and should be used to tailor to specific needs. Below is the summary of some common training tools and their usage in practices:

Table 5.4: Training tools and their usages

Method	Ideal for
Lectures	<ul style="list-style-type: none"> • Conveying a lot of information in a short period of time • Briefly introducing a topic • Presenting basic information • Imparting knowledge
Brainstorming	<ul style="list-style-type: none"> • Bringing up new ideas on a specific topic • Imparting and sharing participants' knowledge • Exploring opinions and attitudes on a topic • Involving participants
Case Studies	<ul style="list-style-type: none"> • Considering problems based on real-life situations • Identifying possible solutions • Involving participants
Role Plays	<ul style="list-style-type: none"> • Dramatizing a problem or situation • Identifying possible solutions • Engaging participants prior to a discussion • Teaching skills
Discussions	<ul style="list-style-type: none"> • Imparting and sharing knowledge • Exploring opinions and attitudes on a topic • Involving participants
Reflection	<ul style="list-style-type: none"> • Debriefing sessions, whether simple or challenging • Checking for understanding (evaluation) • Ensuring all questions and concerns are covered • Engaging participants
Parking Lot	<ul style="list-style-type: none"> • Deferring irrelevant questions or those the trainer doesn't have time to address immediately • Demonstrating that the trainer will follow up on unanswered questions
Games	<ul style="list-style-type: none"> • Practicing skills while having fun • Allowing real-life application of skills • Engaging participants

Source: Adapted from Center for Applied Linguistics. (2010).
Methods in Training.

When using visuals in the course, it is important to keep it simple, relevant, easy to understand, and easy to remember. Reminding to use attractive, bright colors and get them ready at the right place before the lesson.

If images of children are used in the materials, make sure to have their permission or permission of their parents, guardians, or NGO workers. Change the names of the children to protect their identity and safety. If the images depict the faces, especially vulnerable children (e.g. children identified as victims or offenders), images should be blurred or obscured.

5.3.4.2. Arranging logistics

Seating arrangements

Circular seating with tables to place materials on ('U-shaped style') encourages greater interaction and makes for a better learning environment than a 'classroom' style arrangement; flexible seating is preferable as many activities involve moving around. The diagrams overleaf show different types of seating arrangements. Seating in 'small groups' is particularly flexible (classroom style, boardroom style, round table style, small groups, U-shaped style, herringbone style)

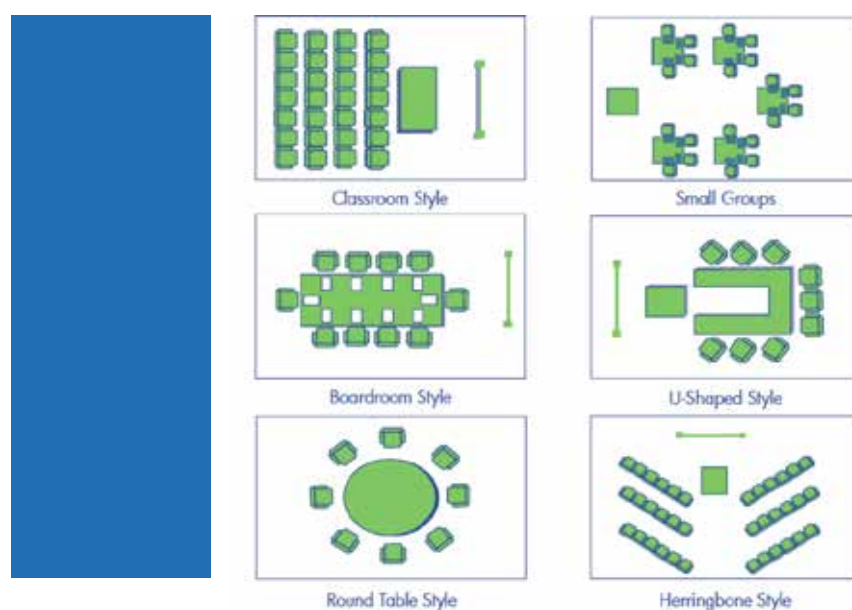
Create a relaxed, friendly and creative learning environment

dedicate one wall as a 'freedom wall' where participants can write/draw their thoughts, suggestions, questions and comments; display pictures made by children and children's quotations around the room. The others can be set up as "learning wall", where the participants will present their results in brainstorming or group discussion exercises. The Facilitator will base on the discussions to build up their lessons and the content. The learning wall will be kept throughout the course, so that the participants can review the content at any time. The facilitators can also set up a child-friendly setting with the pictures of children, or quotes about children on the wall. The participants can also be required to wear casual clothes, imitating the real situations that they are working with the children.

Try to keep up to schedule as much as possible

Make sure participants have adequate breaks to relax and absorb information. Avoid the temptation to cram in too much information.

Figure 5-5: Different styles of seating arrangements



5.3.5. Assessment and evaluation

Assessment and evaluation is a critical component in determining whether the training objectives have been accomplished. Evaluation can be conducted to assess three levels:

Level 1: Reaction

How do participants feel about the training? Measuring participants' reactions is the most immediate form of evaluation as it occurs through immediate observation and direct questioning. During the training, participants' reactions can be measured in the following ways:

- Observation – the Trainer can observe how the participants respond to questions; how they engage in group activities; whether they appear interested; and whether they ask thought-provoking questions. The Trainer should note these observations during the training and, if necessary, adjust their facilitation style accordingly.
- Evaluation – at the end of the training, the Trainer can issue Evaluation form which requires participants to make written comments indicating their reaction to the training.

Box 24: Below is the summary of 10 steps the Trainer can follow to design their own training course

Step 1: Review examples of training designs in the Facilitator's guide.

Step 2: Identify specific training needs of the group you will lead. Establish time available for workshops or sessions.

Step 3: Identify modules and sessions corresponding to current training needs and allotted time.

Step 4: Review Textbook and Workbook for sessions you choose. Familiarise yourself with the activities and lesson plans in the Facilitator's guide.

Step 5: If desired, photocopy Facilitation's Guide, handouts and activity materials. Prepare your customised training guide for the workshop.

Step 6: Make any further preparations for the sessions you will be using, include case studies and practical issues at your Unit. Prepare icebreakers; review strategies.

Step 7: Consider including experienced participants as part of the facilitation and presentation team, if appropriate. Prepare these participants before the session

Step 8: For quick daily feedback or evaluation, simply ask participants to respond to one or two questions about the day. Make appropriate adjustments as needed the following day.

Step 9: Include time for written and spoken evaluation at the end of the workshop.

Step 10: After the workshop, save your customised training guide for the workshop, along with your notes, lessons learned, and ideas for further use. If you receive a request for that particular workshop format again, your session is ready to go.

Level 2: Learning

What have the participants learned as a result of the training? This can be measured through the application of pre- and post-training assessments that compare results obtained before the training with results obtained after the training. Pre- and Post- training tests focusing on Knowledge, Attitudes, and Practices (KAP) are designed to provide a simple measure of changes in the participants' knowledge as a result of the training (Annex...).

Level 3: Behavior Change

What will the participants do differently as a result of the training? Behavior change is a key desired outcome of the training. However, behavior change is not usually measurable until after the training has concluded and participants have returned back to their workplaces. Thus, intended behavior change is included in the Evaluation form. As direct supervisors/managers of the participants, it is possible for the Trainer to observe change in the practices of their officers, hence, reward good practices to promote continuous improvement of the Unit.

Summary of section 5.3:

Adults learn differently from children, thus, require different training approaches. Each individual will have different styles of learning: visual, auditory, and movement. Tailoring to each type of learning requires a mixed usage of methods.

The Facilitator shall pay attention to characteristics of adult learning principles when designing a training course: adults learn from experiences, learn best from peers, through discussions and discovery, and adults must be accorded respect.

Adults will remember 10% of what they read, 30% of what they see, and 90% of what they say and do.

There are five steps in designing a training course: identify needs, design training, deliver training, assessment & evaluation, and follow-up.

Specific criteria for selecting the most appropriate trainees should be decided at the planning stage. Trainees can be identified for training on the basis of rank, nature of duties, gender, geographical targeting and balanced against the type of training.

A training needs assessment is the process of identifying the gaps in Knowledge, Attitude, and Practices (KAP) between the present performance and the desired performance. Based on the needs assessment of the Unit, the Trainers define objectives: how many participants will join, who will join, what knowledge/skills/practices are essential to their jobs, etc.

Tools to use in the training session include: case studies, role plays, drama, problem solving, group discussions/working groups, lectures, brainstorming, panel discussions, visual materials and games.

While arranging logistics for the training session, the facilitator shall be aware of creating relaxed, friendly and creative learning environment to facilitate the learning.

After the training session, it is important for the facilitator to conduct the assessment and evaluation. There are three levels of evaluation: reaction, learning, and behavior change.

5.4. Addressing common issues

5.4.1. Managing time

It is advised to keep on time since it shows respect for:

- Your commitment to the time allotted;
- The participants so they know what to expect; and
- Those that follow your presentation so they don't have to rush through or cut short their presentations

Ways to keep on time:

- Practice before the training. Practice the presentation out loud. Review your material so you will know what can be covered quickly and if necessary deleted. Practice your presentation using the equipment. This will help you determine how long it takes for presentations and activities.
- Use a clock that the facilitator can see.
- Use an agenda that shows the amount of time for presentations as well as the times of day. For example: 8:30 – 9:00 30 minutes. This reinforces the amount of time that each presentation takes so that people don't have to add it up in their heads.
- Review the agenda with all facilitators ahead of time. Emphasize the importance of staying on time and how it shows respect.
- Set up a time keeping structure and review with facilitators
- Keep the training focused on the objectives
- Let participants know what to expect. Review the agenda at the beginning of each day.
- Use the “parking lot” for discussions that take too much time or are related to but not critical to the training – but they are critical to the participants.

The “parking lot” is a sheet of flip chart paper posted on the wall of the training room. The purpose is to provide a place to put interesting topics that are taking up too much time or are related to but not critical to the training. These topics are usually critical to the participants. The topics are written on paper and sit in the “parking lot” until time is available to discuss them at the end of the course or during breaks, lunch or at the end of the day.

- Refer to handouts in the manual for more details
- Know the “need to know” content
- Know what content or activities can be shortened or deleted
- Adjust the schedule when things take longer (shorten breaks, lunch, lengthen the day, delete some presentations or activities)

5.4.2. Managing participants

Managing participants in a training situation is an important skill to have as a facilitator. Using “ground rules” at the beginning of the training can provide a means of establishing how people should act during the training. When there are participants who are difficult, it is up to the facilitator to manage the situation so that participants do not disrupt the training. Following are examples of difficult participants and how the situations can be managed.

“Dominates the conversation”: There is usually at least one person in each group that tries to dominate the conversation. They frequently have a lot of experience and knowledge and are very eager to share that with everyone.

Solutions:

- Refer to the ground rules (Be sure to include in the ground rules that no one person should dominate the conversation and that all participants should have the opportunity to contribute).
- Thank them for their valuable contribution and say that we need to also hear from other participants.
- Mention that they have already provided a lot to the discussion and you want to hear what other people have to say.
- Use body language such as not looking at them when asking for responses and standing in front of them and looking at the other participants for responses.
- When asking for responses it may become necessary to ignore them.
- It may become necessary to interrupt them and summarize their comments before hearing from other participants
 - o Give them a task to do that supports the course objectives
 - o If necessary, speak to them outside the training room.

“Interrupts others”: Some participants have a habit of interrupting others so as the trainer, it is important to manage this type of behavior.

Solutions:

- Refer to the ground rules (make sure that one-person should talk at a time is included as a ground rule at the beginning of the training).
- If they continue interrupt mention that the other person was not finished.
 - o If necessary, speak to them outside the training room.

“Know-it-all”: Some participants will try to challenge the trainer or try to make the trainer look bad. They think they know everything and will make remarks to undermine the knowledge or authority of the trainer.

Solutions:

- Acknowledge their valuable experience and ask if there are other opinions.
- When they ask you a question ask them what they think the answer is or open up the question to others.
- Give them a task to do to help with the training
 - o If necessary, speak to them outside the room.

“Does not participate”: Some participants will not respond. They may be shy, or not interested, or have been forced to attend the training, or may not be an appropriate person to be attending the training. Whatever, the reason it is important to encourage all participants to contribute.

Solutions:

- Use your body language to encourage them to participate.
- Look directly at them when asking to hear from some of the people who have not contributed.

- Stand by them and look at them when asking questions.
- Talk to them outside the training room to establish a connection.
- Find out about their experience and knowledge so that can be incorporated into questions.
- Ask them to help you in some way (i.e., write on the flip chart, pass out papers, summarize key concepts).
- If necessary, ask them outside the training room why they are not involved in the training.

“Does not want to be at the training”: Some participants are forced to come to the training by their supervisors. So, they can resent the training and see it as a punishment rather than an opportunity to learn. Ways to manage this behavior include:

- During the introduction to the training you can mention that everyone is coming to the training for different reasons that you would like to set a tone of open-mindedness because everyone can learn something from any situation.
- Emphasize the value of each individual and how they will contribute to the success of the training.
- Specify the follow-up process to the training. Emphasize that they may need to demonstrate the skills as part of their job requirements.
- Also, some people like to attend trainings because it simply gets them away from the office or they can earn extra money through the per diem. As a result, they may not think that their active participation or learning the content is necessary.

Solutions:

- Emphasize the value of each individual and how they will contribute to the success of the training.
- Ask them to help you in some way.
- If necessary ask them outside the training room why they are not involved in the training.
- Specify the follow-up process to the training. Emphasize that they may need to demonstrate the skills as part of their job requirements.

Conflict between two persons: You should be aware of the situation, but should not intervene too early, as this could lose you the support of the group. If you do have to intervene, try to emphasise the points of agreement that you have been able to identify and to draw others into the discussion. It is important to try to de-personalise the issue, and it may be appropriate to get the participants to agree to ‘park’ it for the time being. You can come back and deal with it later, when the situation has calmed down.

Sometimes problems occur so it is best to have a back-up plan for those problems that can be anticipated.

- Have extra materials and supplies available
- Use multiple formats (handouts, slides, overhead transparencies, flip charts). Sometimes the electricity will go out and so the PowerPoint slides will not be able to be shown or maybe the bulb on the project will blow out. Having handouts available will enable the training to continue.
- Be flexible. Problems often occur so relax and adjust to the situation.

- Make positive situations out of negative ones. For example, when problems occur make them into a learning situation.

5.4.3. Communication tips for the facilitators

Verbal facilitation skills

- Formulate your questions to encourage candidate responses and open discussion.
- Use open-ended questions such as: “What do you think about...?”, “Why...?”, “How...?”
- After one workshop participant makes a statement, ask the others if they agree.
- Encourage workshop participants to talk. Participants should talk more than you and any other facilitators do.
- Encourage workshop participants to answer each other’s questions. In that way, everyone can learn to listen and to show respect for each other’s responses.
- Ask workshop participants to paraphrase or repeat something in their own words to check whether they understand a particular concept. You should also paraphrase important points made by workshop participants, both to reinforce their statement and ensure that you have understood them accurately.
- Regularly summarise the discussion. Ask workshop participants whether they disagree with anything, and help them to draw conclusions.

Non-verbal facilitation skills

- Make eye contact with everyone in your workshop group. Focus attention on every participant. Don’t favor some over others.
- Move around the room, as you speak in a slow, calm way.
- React to what workshop participants say by nodding, smiling. In short, let them know you’re listening.

Facilitation reminders

1. **Be Respectful.** Facilitators need to model respectful behavior. It is crucial to be sensitive to workshop participants’ individual differences and perspectives, as well as any discomfort participants may experience in discussing an emotional or personal topic.
2. **Be Non-Judgmental.** Don’t reinforce stereotypes. Keep the group’s focus on facts and solutions.
3. **Establish Safety and Ground Rules.** Ask participants what they need from you and from each other in order to feel safe while talking about sensitive issues. If a discussion becomes heated, remind participants that they are always to disagree respectfully. Another way to create a safe space for workshop participants is to set up a “question box” in which participants can anonymously pose questions that might be difficult to raise in front of peers. You can then read aloud and answer questions without referring to individuals
4. **Honor Diversity.** While dividing participants for small group exercises, aim to create heterogeneous groups that mix participants by age, race, ethnic background, departmental unit, and position in the organisation.

5. Exercise Humility. Don't feel that you have to be the world's foremost expert on the topic. If you don't know something, admit it. If a workshop participant raises a difficult question, ask whether anyone else has an answer. Or, if the question is important, state, "My current understanding is that... but I'll look into this further." Or say, "That is an excellent question. To be frank, I don't have the answer, but I'll find out for you."

Table 5.5: Do and don't for the facilitator

Do's	Don'ts
<ul style="list-style-type: none"> Explain the topics clearly, so participants can provide accurate information and produce good diagrams. Use local language and start with local greetings to build rapport. Show interest in what the participants know. Be flexible and do not put pressure on participants to finish a given exercise in a given time. Give everyone a chance to talk: "Pass the stick". Probe for deep information - the team should have a good knowledge of the subject so as to ask relevant questions. The team must first discuss the subject and decide what questions (and tools) are to be used in the field. 	<ul style="list-style-type: none"> Don't lecture and don't assume a teacher's role. Don't leave the group during the exercise process. Don't do too many exercise in too short a time. Don't lead the conversation all the time - there should be equal chances to share. Don't get angry in any situation. Don't use only adult men - women children and young people also have important information.

In short, acronym for Trainer is:

- T – Tell them things only if they cannot do so themselves.
- R – Repetition and practice makes permanent and perfect.
- A – Attitudes are not taught, they are caught.
- I – Involve participants to get maximum results.
- N – Needs analysis is the starting point of training.
- E – Evaluate results for constant improvement.
- R – Reading materials are to complement and reinforce learning.

Summary of section 5.4:

- Managing time and participants are important skills that the facilitator shall excel to manage the class smoothly.
- To aid in the training process, one of important skills is the communication skills. The Trainer shall be: (1) T – Tell them things only if they cannot do so themselves; (2) R – Repetition and practice makes permanent and perfect; (3) A – Attitudes are not taught, they are caught; (4) I – Involve participants to get maximum results; (5) N – Needs analysis is the starting point of training; (6) E – Evaluate results for constant improvement; and (7) R – Reading materials are to complement and reinforce learning.

KEY LEARNING POINTS OF MODULE 5

- While the conventional training adopts a trainer-centric approach where trainer becomes a central point, participatory training is participant-centered where the trainees themselves are responsible for their own learning.
- There are five steps in designing a training course: identify needs, design training, deliver training, assessment & evaluation, and follow-up.
- A training needs assessment is the process of identifying the gaps in Knowledge, Attitude, and Practices (KAP) between the present performance and the desired performance. Based on the needs assessment of the Unit, the Trainers define objectives: how many participants will join, who will join, what knowledge/skills/practices are essential to their jobs, etc.
- Tools to use in the training session include: case studies, role plays, drama, problem solving, group discussions/working groups, lectures, brainstorming, panel discussions, visual materials and games.
- After the training session, it is important for the facilitator to conduct the assessment and evaluation. There are three levels of evaluation: reaction, learning, and behavior change.
- Managing time and participants are important skills that the facilitator shall excel to manage the class smoothly.
- To aid in the training process, one of important skills is the communication skills. Trainers shall be respectful, non-judgmental, establish safety and ground rules, honor diversity, and exercise humility.



TRAINING PROGRAMME EVALUATION

1. To what extent you agree/disagree with these following statements:

Statement	Strongly disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly agree (5)
Training structure					
The objectives of the training were clearly defined and explained.					
The design and structure of the training programme was appropriate.					
There was a balance between the theoretical and practical aspects of the training programme.					
Should the duration of the training programme be increased?					
Training content					
The contents were relevant to the basic purpose of the training programme.					
The contents will be applicable in the performance of duties of law enforcement officials.					
The information provided was legally and factually accurate, complete and contemporary.					
Should any content be added or deleted or modified? If yes, please specify.					
Trainers					
The presentation of the contents by the trainers was well structured and efficient.					
The trainers used multiple training methods to impart information, with a right mix of theory and practice.					
The trainer promoted and encouraged participation by the trainees in a group.					

The trainer's ability to transfer knowledge to the trainees was satisfactory.					
Training environment					
The training venue was satisfactory.					
The training atmosphere was pleasant and conducive to learning.					
Were there any distracting factors in the training environment?					

Overall satisfaction: 1 2 3 4 5 6 7 8 9 10

2. Which parts of the training you find most useful? Please tick in the following table.

Content	Least useful	Neutral	Most useful
Module 1			

3. What knowledge and skills did you acquire during the training programme?

4. What was the most important thing you learned during the training programme?

5. How will you plan to make change at your Unit?

ANNEX 1: INTERNATIONAL, REGIONAL, AND NATIONAL LEGAL FRAMEWORKS THAT ADDRESS CHILD SEXUAL ABUSE AND EXPLOITATION

1. Convention on the Rights of the Child (CRC, 1989)

The Convention obliges States parties to take all appropriate national, bilateral and multilateral measures to protect children from all manifestations of sexual exploitation and sexual abuse, and abduction, sale and trafficking. States parties are also obliged to take all appropriate legislative, administrative, social and educational measures to protect children from sexual abuse, while in the care of parents, legal guardians or other carers. Importantly, the CRC also obliges States parties to take all appropriate measures to promote physical and psychological recovery. States should also provide for social reintegration of a child victim suffering from any form of neglect, exploitation, or abuse.

2. Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography (2000) (CRC Optional Protocol)

The Protocol explicitly addresses the different manifestations of sexual exploitation of children. The instrument obliges State parties to criminalise the sale of children, child prostitution and child pornography, whether such offences (including attempts, complicity and participation) are committed domestically or transnationally or on an individual or organised basis.

3. The United Nations Convention against Transnational Organized Crime (2000) (UNTOC)

The Convention represents a major step forward in the fight against transnational organized crime and signifies the recognition by Member states of the seriousness of the problems, as well as the needs to foster and enhance close international cooperation in order to tackle those problems. States that ratify this instrument commit themselves to taking a series of measures against transnational organized crime.

4. The Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and children (2000) (TIP Protocol)

The Protocol defines ‘trafficking in persons’ as the ‘recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. The recruitment, transportation, transfer, harboring or receipt of a child for the purpose of exploitation shall be considered in any case ‘trafficking in persons’.

5. ILO Convention concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labor No. 182 (1999)

The Convention defines the ‘worst forms of child labor,’ a term that comprises the following categories: (i) ‘all forms of slavery or practices similar to slavery, such as the sale and trafficking of children, ...’ and (ii) ‘the use, procuring or offering of a child for prostitution, for the production of pornography or for pornographic performances’.

6. Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (2007) (the so-called Lanzarote Convention)

The Explanatory Report of the Convention highlighted the importance of having a harmonised legislation that facilitates action against sexual abuse and exploitation. This would ensure that perpetrators' who offend in destination countries with lenient child protection laws are not allowed to escape legal ramification due to the ability to compare and exchange information between states. These measures, in turn, would facilitate international cooperation in the form of extradition and reciprocal legal assistance.

7. UN Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime (2005)

The Guidelines provides a practical framework for the States to review national and domestic laws, procedures, and practices as well as design and implement legislations and policies related to child victims and witnesses of crime. It also provides professionals with instructions on measures should be taken to ensure the rights of child victims and witnesses and protect them from hardship throughout the judicial process.

8. Guidelines of the Committee of Ministers of the Council of Europe on Child-friendly Justice (2010)

The Guidelines for treatment and measures in place to protect the rights of all children who come in to contact with justice systems either as offenders, victims, witnesses or a third party to proceedings (i.e. custody cases). It outlines general principles and specific instructions for each stage of the judicial process.

9. Declaration of the Commitments for Children in Association of Southeast Asian Nations (2001)

The Declaration was adopted in Singapore where states agreed on 'protect children from all forms of violence, abuse, neglect, trafficking and exploitation while at home, in school and in the community'.

10. ASEAN Convention against Trafficking in Persons, Especially Women and Children (2004)

The Convention committed to, among others, the strengthening of border controls and monitoring mechanisms, exchange of information, the improvement of cooperation between law enforcement authorities and the establishment of a regional focal network to prevent and combat trafficking in persons.

11. ASEAN Guidelines for the Protection of the Rights of Trafficked Children (2007)

This Guidelines establish minimum standards for the treatment of trafficked children and enhance cooperation mechanisms among ASEAN members in tackling human-trafficking and protecting the rights of children.

12. Memorandum of Understanding on Cooperation against Trafficking in Persons in the Greater Mekong Sub-Region (2004) (COMMIT Initiative)

The Memorandum was signed in 2004 by Myanmar, Cambodia, China, Thailand and Laos PDR to respond to human trafficking. The initiative calls for the intensification of regional and international cooperation, adoption of appropriate legislation, development of bilateral and multilateral agreements and promotion of greater gender and child sensitivity in all areas of work dealing with victims of trafficking. COMMIT specifically focuses on child sexual exploitation, including in the tourism sector.

13. The Cambodian Criminal Code (2010)

The Cambodian Criminal Code (2010) also addresses the exploitation of children in prostitution and criminalises the act of ‘procuring’. The Criminal Code explicitly states that its provisions take precedence over previous legislation. Thus, if the provisions of the TIPSE Law and of the Criminal Code are identical, then the criminal charge from the Criminal Code supersedes the TIPSE Law as the older enactment.

14. Cambodia’s Law on Suppression of Human Trafficking and Sexual Exploitation of 2008 (TIPSE Law)

The Law provides a comprehensive set of offences relating to child prostitution, sexual abuse, child pornography, and child trafficking for sexual exploitation purposes. The TIPSE Law aims to implement Cambodia’s obligations under the TIP Protocol and other international instruments relevant to trafficking in persons.

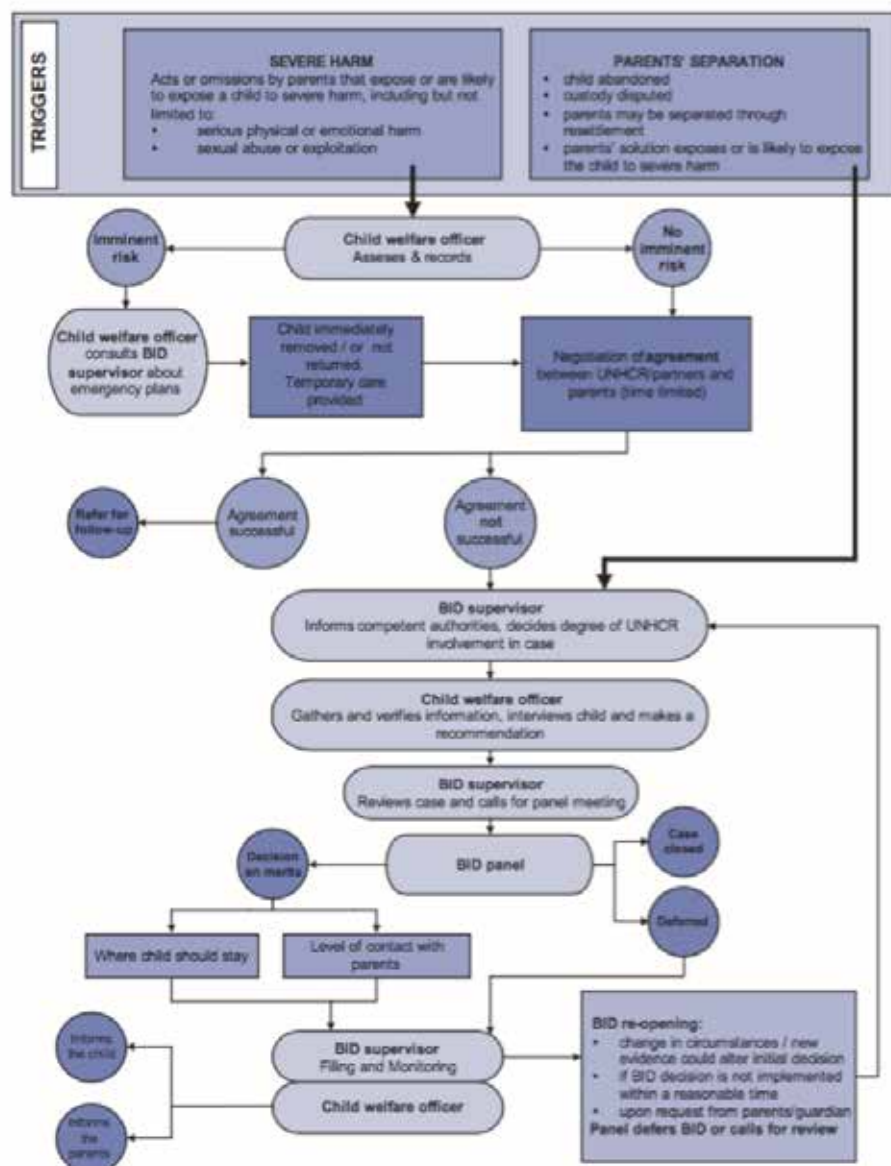
Source: Adapted from ECPAT International, 2018 ⁴⁵ and UNODC, 2014 ⁴⁶

⁴⁵ ECPAT International. (2018). Assessment of legal frameworks that address sexual exploitation of children in travel and tourism (SECTT). Accessed at <http://www.protectingchildrenintourism.org/wp-content/uploads/2018/05/ECPAT-International-Assessment-of-legal-frameworks.pdf>

⁴⁶ UNODC. (2014). Child sexual exploitation in Travel and Tourism: An analysis of domestic legal framework. Cambodia.

ANNEX 2: BEST INTERESTS DETERMINATION PROCESS

BID, including emergency procedures, for possible separation of a child from parents against their will, in the absence of responsible national authorities



ANNEX 3: PEOPLE-FIRST LANGUAGE

Use	Don't use
Have a disability	Afflicted with a disability, suffering from
Born with a disability	Birth defect
Has cerebral palsy	Cerebral palsied
Walks with the aid of crutches	Crippled
Deaf	Deaf-mute, dumb
Has a physical disability	Deformed
Nonverbal	Dumb
Correct name of disability	Slang (for example, Elephant Man's disease)
QBehavior disorder	Emotionally disturbed
Has epilepsy	Epileptic
Disability	Disabled, handicapped
Accessible, fully accessible	Handicapped accessible
Deaf or hard of hearing	Hearing impaired
Has a spinal curvature	Hunchbacked
Walks with a limp	Lame, gimp
Short statured	Midget, dwarf
Downs syndrome	Mongoloid idiot, downs
Persons without a disability	Normal, non-disabled, able-bodied
Is paralysed	Paraplegic
Has arthritis	Arthritic
Uses a wheelchair	Wheelchair bound, confined to a chair
Has an emotional disability	Insane, deranged, deviate, crazy

Source: Adopted from Archambault et al., (2014).
Successfully investigating sexual assault against victims with disabilities.

ANNEX 4: SPECIFIC COMMUNICATION TIPS IN COMMUNICATING WITH VICTIMS WITH DISABILITY

1. Communication tips which may be helpful in communicating with someone who has a physical disability:

- Make sure the meeting place is physically accessible. This includes parking, sidewalks, entry to the building, hallways, doorways, restrooms, and the meeting room. Sidewalks need to be clear of snow and shrubbery.
- If you normally extend your hand to someone when you meet them, do the same with a victim who has a disability.
- Put yourself at eye level with the person. If the person uses a wheelchair, sit down.
- Do not touch a person's assistive device without permission from the owner.
- Do not provide assistance unless the person indicates they need help.
- If you typically offer victims a drink, have some straws available for people who need a straw to drink.
- The majority of people with physical disabilities have 'normal' or higher intelligence, speak with them as you would any other victim.
- Take time to establish rapport, obtaining and gain comfort and confidence before initiating the interview.

2. Communication tips that may be helpful in communicating with someone who is Deaf or hard of hearing:

- Determine how the person prefers to communicate.
- Initially, it is okay to use writing to determine what the person needs to communicate best. If the person needs a Sign Language interpreter, the writing method will be temporary. Some hard of hearing people may prefer written communication.
- People who communicate with sign language will write differently than people who speak normally. Verify that you understand the written communication correctly.
- If the victim speaks sign language, a certified and licensed Sign Language Interpreter must be used in criminal investigations.
- Do not use friends or family members as Sign Language Interpreters.
- Keep eye contact with the victim. Eye contact is a sign of respect and is critical in establishing rapport with Deaf victims. If you need to look down or away, tell the person the reason.
- The victim and the interpreter will decide where the interpreter will sit. Communicate with the victim, not the interpreter.
- Use clear facial expressions and gestures when you communicate.
- Good lighting is essential in communicating with someone who is Deaf or hard of hearing.
- Lip reading is not an effective means of communicating. Even the best lip readers may only understand half of what is being said.
- People who use hearing aids may understand everything being said or they may not. Keep questions short and ask only one idea at a time.
- Keep your body and face open so the person can see you clearly at all times. A Deaf culture exists for many people who speak sign language.

Tips for working with sign language interpreter:

- Interpreters should be certified through the Registry for the Interpreters for the Deaf (RID). In court situations, it is best to use an interpreter who has a “Specialist Certificate: Legal,” but these are sometimes difficult to find.
- Interpreters have a code of ethics and their job is to translate communication between the victim and the investigator. Their job is not to state their own opinions or to filter the information being communicated.
- When using an interpreter, always remember to look at the victim and not the interpreter. However, victims will need to look at the interpreter to understand what you have said, so do not expect constant eye contact in return.
- Make sure there is visual privacy when interviewing someone using sign language, so others cannot “oversee” the conversation.
- Speak at a normal volume and pace. Address your questions to the victim, not the interpreter. In other words, you should not ask, “How is he feeling?” Instead, you should address your question directly to the victim: “How are you feeling?”
- If you do not understand an answer, ask the victim (not the interpreter) to repeat or clarify the response.
- Typically, the interpreter will sit next to the interviewer, so the victim can look back and forth between the investigator and the interpreter. The victim and the interpreter will decide where the interpreter sits. Make sure there is ample lighting to see each other clearly, and there is no glare, or shadow that will interfere with the victim’s or the interpreter’s vision.
- If they will be working for more than an hour or two, ASL interpreters typically work in teams of two and rotate every 15-20 minutes to avoid fatigue. The determination of when to switch is up to the discretion of the interpreters.
- During the interview, observe the victim closely, because gestures and facial expressions are an important aspect of communication for people who are deaf.
- If you are distracted by a noise or other disturbance, or if you turn away from the victim to talk to someone else, explain what is happening to the victim.
- Take breaks to allow the victim and the interpreter to rest. The process is tiring for both.
- If the suspect also needs a sign language interpreter, use a different interpreter than is used with the victim.

3. Communication tips that may be helpful in communicating with someone who has low vision or no vision:

Presume competence. People with little or no vision can still have a lot of information about what happened to them.

- Use your words to describe the important parts of the environment. Describe any other people in the room and have them speak; describe furniture in the room; state whether the door is open or closed, etc.
- If the person has a guide dog, do not touch the dog or attempt to communicate with it in anyway. Guide dogs are working and should not be distracted (just like police dogs).
- If the person needs to be guided somewhere, let the person hold your elbow to lead them. Tell them of any obstacles, change in floor surface, steps, doorways, water fountains, etc.

- Let the person know what you are doing at all times.
- Paperwork and forms should be offered in alternate formats. Ask the person what their preference is.
- Large print documents should be at least 18 font in Arial or Tahoma font. Printed materials need to have contrast between the print and the background for people with low vision.
- Most people with little or no vision can sign their names. Many people use signature guides and some may ask you to show them the area to sign by guiding their hand.
- If the person needs to be contacted after the interview, ask the person the best way to reach them. Many people with little or no vision have programs on their computers which read emails and documents to them.

4. Communication tips that may be helpful in communicating with someone who has a mental illness

- Do not touch the person or stand too close to the person.
- Do not talk down or raise your voice
- Avoid sudden movements
- Show interest and concern
- Avoid dramatic facial expression
- If a person is confused, speak slowly and in a calm, pleasant tone of voice
- If a person seems agitated, offer them a quiet space away from any confusion or shift the conversation to a safer topic
- Avoid multiple instructions and give one piece of information at a time
- Be empathetic. Let the person know you heard them and are there to help.
- If the person is talking non-stop, interrupt with a simple question.
- Do not argue or try to prove a point. If a person is experiencing delusions or hallucinations, understand that these are very real to the person.
- Do not agree or disagree with delusions; empathize with the person's feelings.
- If the person is having difficulty with hallucinations or delusions, ask "What has helped you in the past when you felt this way?"
- Avoid whispering, joking and laughing as this may be misinterpreted by someone with a mental illness.
- Be honest about what you can and can't do.
- Do not take the person's words or actions personally.

5. Communication tips that may be helpful in communicating with someone who has autism

- Plan a time for the interview when time is not a factor for you or the victim.
- Prepare a quiet location with few distractions. Reduce lights and sounds as possible.
- Do not touch the person. The person may be sensitive to touch. Touch may actually cause the person pain. If you need to guide them to do something, gestures combined with verbal instruction will be more effective.
- Approach the person in a calm manner. Introduce yourself and extend your hand. Do not be concerned if the person does not extend their hand in return.

- Do not approach the person from behind.
- Speak with a calm voice using direct, concrete terms with one response or concept per question or statement.
- Explain your actions before you do anything. For example, “I am going to stand up now.”
- The person may prefer writing back and forth, at least until they feel more comfortable with you. Ask if this would be helpful.
- The person may not respond to verbal questions or requests. Be reassuring. Try again.
- The person may not be able to speak and might even appear to be deaf because of lack of response. Determine their primary mode of communication.
- Allow plenty of time for the person to respond. Be patient.
- Ask a family member, teacher or support person if there is a favorite object that makes the person feel safe.
- Avoid using sarcasm, cliques, acronyms or words with multiple meanings. Many people with autism are very literal. If you ask a person “Can you tell me what happened?” They may answer “Yes”, but not answer your question due to the ‘can you?’ being asked.
- The person might repeat what you say or repeat the same word or phrase over and over, or change the subject. This is common and is the person’s sincere attempt to communicate with you; it is not rudeness.
- The person may express themselves with an unusual tone of voice and/or look at you from an odd angle. This is also common and not meant to be disrespectful.
- The person may not understand social norms or the seriousness of the situation. Do not focus on the behavior you feel is unusual; let the person know you want them to be safe. Proceed with the investigation.
- If you have to transport a person with Autism, do not use sirens or lights.
- If the person is displaying repetitive behaviors, it may be to help them calm down. Do not try to stop them or take objects away from them unless there is a danger to self or others.
- Be prepared for sudden outbursts or impulsive behavior. If no one is at risk of harm, wait for the behavior to subside and then calmly continue.
- Some people with Autism do not express physical pain; the victim may need to be checked for injuries.

6. Communication tips that may be helpful in communicating with someone with an intellectual disability

- Create a safe environment with limited distractions.
- Pleasantly introduce yourself. If you are wearing a uniform, tell the person they are not in trouble and that you are there to help them.
- Allow plenty of time for the interview. It may take more time than in typical interviews to gather the information.
- It is okay to say something like this: “Sometimes I use words that are hard for people to understand. If I say something you don’t understand, please tell me.”

- The victim may be eager to please you so do not ask leading questions. Open-ended questions are preferred. Sometimes multiple-choice questions work well but notice if there is a pattern of always restating the last option. If so, another approach will be needed.
- Give the person plenty of time to respond. It may take a few seconds for the person to process what you said and to formulate their reply.
- Use concrete words when possible; such as things that can be seen, touched, or heard.
- If the person tells you something that seems inconsistent with their story, consider the possibility that they may have misinterpreted your question.
- If the person has difficulty with dates and times, ask questions related to their schedule or activities and darkness/light outside.
- If the person has difficulty naming a specific location, see if they can show you the location.
- Questions that begin with who, what and where will be easier for people to answer than how or why questions.
- If the person does not respond well to general questions, ask more specific questions. For example, instead of “What did the car look like?” Ask, “What color was the car?” Or show picture with different colors and have the person point to the correct answer.
- Use plain language and simple sentences.
- Break down key concepts so they are more easily understood.
- If you are unsure if a person understands what you said, you can ask them to repeat it using their own words.
- Ask same question in different ways, but tell the person, “If I ask you the same question, it doesn’t mean you gave the wrong answer. It’s because I want to make sure I understand.”
- Avoid sarcasm, clichés, and words with multiple meanings.
- Use pictures of the person’s home, location of the crime, etc. to aid in communication.
- Ask the person to define what key words mean to them.

7. Tips for responding to victims who have a seizure disorder (epilepsy):

People with epilepsy may occasionally have seizures that can make them appear to be intoxicated or under the effects of illegal drugs. There are different kinds of seizures and since stress can trigger a seizure. It is very possible that a victim will have a seizure due to the stress of participating in an interview with law enforcement.

What might an epileptic seizure look like? Seizures have a sudden beginning, lack of responsiveness during the seizure and a gradual recovery. Here are some of the signs that someone may be having a seizure.

- Slurred or very slow speech
- Unsteady gait
- Blank staring
- Chewing
- Fumbling
- Sleepiness
- Confusing or dazed behavior
- Combative response to restraint
- Body stiffens and begins to jerk as muscles contract and relax

Do I call an ambulance if a person has a seizure?

- If an individual has a seizure for less than 5 minutes and otherwise does not have injuries, it typically is not considered a medical emergency.
- If the seizure last less than five minutes and the person asks for medical attention, ask if they want an ambulance to be called. The person usually knows if they need medical attention.
- If a seizure lasts longer than five minutes, if another seizure begins shortly after, or if the person having the seizure appears to be injured, diabetic, pregnant or the seizure occurred in water, you are advised to immediately contact emergency medical assistance.
- What else should I do when someone is having a seizure?
- A person seen shaking and falling followed by a confused or dazed state is likely having a seizure and should be treated accordingly.
- Check how much time has elapsed since the seizure began and call for medical attention if five minutes has elapsed without recovery
- Look for medical ID or alert bracelet
- If the person is convulsing, turn the individual on side to clear airway and reduce hazard of choking
- If the person is banging their head, put something soft under their head for protection, like a blanket, pillow or coat.
- Eliminate nearby hazards and have bystanders clear the area.
- If the individual has stopped having the seizure, help reorient the individual with easy questions such as their name, day or the week or where they are.
- It is essential that you do not put anything into the individual's mouth, hold their tongue, attempt to force their mouth open or restrain the individual while trying to prevent jerking.
- Wait until the individual is clearly conscious before you allow them to take medication or fluids. Allow plenty of recovery time before continuing the interview.

Source: Adopted from Archambault et al., (2014).
Successfully Investigating Sexual Assault Against Victims with Disabilities.

ANNEX 5: CHILD NEEDS ASSESSMENT FORM & CASE ACTION PLAN

Case code:

Prepared by:

Date:

CHILD NEEDS ASSESSMENT & CASE ACTION PLAN	
A. CHILD SAFETY ASSESSMENT	
Main assessment point: The child's current safety status	
<input type="checkbox"/> Yes, the child is safe	<input type="checkbox"/> No, the child is not safe
Please explain in the box	The following risks have been identified: <input type="checkbox"/> Child's caregivers cannot or will not protect the child from further abuse <input type="checkbox"/> The perpetrator lives with the child/can easily access the child at home <input type="checkbox"/> The child is fearful of family members and does not want to return home <input type="checkbox"/> Other reason (please specify)_____
SAFETY ACTION PLAN	
Child Safety Plan Describe safety plan here	
Safety referral made? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes Child client is referred to: Child will be accompanied by (describe by relationship e.g., Mother)	If No Why not?
B. CHILD HEALTH NEEDS ASSESSMENT	
Main assessment point: Does the child require a health referral?	
<input type="checkbox"/> Yes, a health referral is needed because <input type="checkbox"/> Last incident was within the past 120 hours <input type="checkbox"/> Child complains of physical pain and injury <input type="checkbox"/> Other reason indicated (e.g. bleeding or discharge or is requested by the victims)	<input type="checkbox"/> No, a referral is not needed because <input type="checkbox"/> Services already received from another agency <input type="checkbox"/> Service not applicable (e.g. abuse did not involve contact) <input type="checkbox"/> Other reason:
HEALTH ACTION PLAN	
Health referral made? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes Child client is referred to: Child will be accompanied by:	Health referral needed, but not made because: <input type="checkbox"/> Referral declined by victims <input type="checkbox"/> Referral refused by caregiver <input type="checkbox"/> Service unavailable <input type="checkbox"/> Non-urgent referral made Explain:

Note: In cases of medical emergency, it is in the child's best interest to receive life-saving care. If a caregiver or child refuses the referral, a supervisor must be contacted immediately and/or a referral made if the child's life is at risk.

C. CHILD PSYCHOSOCIAL NEEDS ASSESSMENT

Main assessment point: The child's current emotional state and level of functioning

<p>The child's behavior has changed significantly since the abuse in the following ways:</p> <p><input type="checkbox"/> Stopped going to school</p> <p><input type="checkbox"/> Stopped leaving the house</p> <p><input type="checkbox"/> Stopped playing with friends</p> <p><input type="checkbox"/> Feels sad most of the time</p> <p><input type="checkbox"/> Exhibits sleeping or eating changes</p> <p><input type="checkbox"/> Other major changes or difficulties reported:</p>	<p>Describe the child's emotional state (describe expressed or observed emotional state of the child)</p>
<p>What is the caregiver's understanding of their child's current functioning?</p>	<p>List the child/family strong points (list the positive things that the child/family has to help with the healing)</p>

PSYCHOSOCIAL ACTION PLAN

<p><input type="checkbox"/> Provide emotional support</p> <p><input type="checkbox"/> Provide education and counseling about sexual abuse to help children and families understand and manage reactions</p> <p><input type="checkbox"/> Assist the child with any problems identified in the assessment above (going back to school, etc.)</p> <p><input type="checkbox"/> Provide counseling with caregiver and/or other family members.</p>	<p>Describe why this is needed and how it will be done:</p>
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D. CHILD LEGAL NEEDS ASSESSMENT AND ACTION PLAN

<p>Legal referral made? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES</p> <p>Child client is referred to:</p> <p>Child will be accompanied by:</p>	<p>If NO, why not?</p>
---	------------------------

E. CASE ACTION PLAN REVIEW AND FOLLOW-UP MEETING

<p>This Assessment and Case action plan has been developed and agreed by:</p> <p><input type="checkbox"/> Child client <input type="checkbox"/> Caregiver/other <input type="checkbox"/> Social worker <input type="checkbox"/> Police officer</p>	
<p>Relation:</p> <p>All relevant consent form for referral signed: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>If not, explain why here:</p>	
<p>Follow-up meeting is scheduled for:</p> <p>Date: _____ Location: _____</p>	

Source: Adapted from IRC/UNICEF. (2012).
Caring for child survivors of sexual abuse.

CHILD CASE FOLLOW-UP FORM

PART 1: ADMINISTRATIVE INFORMATION

Case code:

Date:

Time:

Location:

PART 2: PROGRESS TOWARD GOALS

Evaluate progress made towards Goals agreed on in the Assessment & Case Action Plan Form

Aspects	Not met	Met	Explain
Safety			
Health care			
Psychosocial support			
Access to justice			
Other (list other goals made here)			

Other observations:

PART 3: RE-ASSESSING SAFETY

	N	Y	Explain	Additional intervention planned
Are there new or continued risks of danger at home?				
Are there any new safety issues the child is facing in the community?				
Other safety concerns?				

PART 4: FINAL ASSESSMENT

	N	Y	Additional intervention planned
a. Child's safety situation is stable Child is physically safe, and/or has a plan to keep him or her physically safe			
b. Child's health situation is stable Child has no medical problems that require treatment			
c. Child's psychosocial wellbeing has improved Child is engaging in regular behavior, can smile and feel happy, has a safe person to talk to			
d. Family situation is stable Child happy and comfortable at home, caregivers not blaming child			
e. Access to justice secured			
f. Other intervention needed			

CHILD CASE CLOSURE FORM

Case code:

Prepared by:

Date:

CASE CLOSURE

Summarise the reasons why the case is being closed. Comment on the progress made toward goals in the service plan. Where necessary, include provisions for continued service, listing agencies and contact persons.

CASE CLOSURE CHECKLIST

Child safety plan has been reviewed and is in place	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Child/caregiver has been informed she or he can resume services at any time	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Case supervisor has reviewed case closure/exit plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No

ANNEX 6: AGE ESTIMATION

Please bear in mind that age estimation is not required in every case. If there is enough documentary proof, age determination is not required:

- Medical age is the mean of physical age, dental age and radiological age of the person.
- Physical age is estimated based on physical growth like height, weight, chest circumference etc and also based on secondary sexual characteristics.
- Tanner staging of breast and pubic hair should be used to determine stage of growth.

Breast Development using Tanner's Index		
Stage 1	Pre- adolescent: Elevation of papilla only	Less than 9 years
Stage 2	Breast bud stage: Elevation of breast and papilla a small mound. Enlargement of areola diameter	10-11 years
Stage 3	Further enlargement and elevation of breast and areola with no separation of their contours	12 years
Stage 4	Projection of areola and papilla to form a secondary mound above level of breast	13-14 years
Stage 5	Mature stage: projection of papilla only due to recession of the areola to general contour of breast	15-16 years
Pubic hair staging		
Stage 1	Pre-adolescent: Vellus over pubes is not further developed than that over the abdominal wall (ie. No pubic hair)	Less than 12 years
Stage 2	Sparse growth of long, slightly pigmented downy hair, straight or slightly curled, chiefly along the labia	12-13 years
Stage 3	Considerably darker hair, coarser, more curled. Hair spreading sparsely over the junction of the pubes	13-14 years
Stage 4	Hair now adult in type, but area covered is still considerably smaller than in adult. No spread over medial surface of thighs.	14-15 years
Stage 5	Adult in quantity and type with distribution to horizontal pattern. Spread to medial surface of thighs.	More than

Dental age is estimated by identifying the total number of teeth, how many and which among them are temporary and which are permanent. It is also essential to identify which is the last tooth erupted and based on charts we can estimate the dental age by noting the age corresponding to the tooth last erupted.

Count the total number of teeth and also differentiate which of them are temporary or permanent.

Eruption of teeth

Temporary of teeth (Rule of halves)

Lower central incisors	5 to 6 months
Upper central incisors	6 to 7 months
Upper lateral incisors	7 to 8 months
Lower lateral incisors	8 to 9 months
First molars	1 year
Canines	1 1/2 years
Second molars	2 to 2 1/2 years

Temporary teeth	Permanent teeth
Smaller	Larger
Shiny	Lusterless
Vertical upper incisors Smooth incisor edge	Forward & downward upper incisors
Worn out cusps in molars	Serrated incisor edge
Twenty - 2102 (Incisor, Canine, premolar, molar)	Prominent cusps in molars Thirty-two - 2123 (Incisor, Canine, premolar, molar)

Note: This a reference chart only, as many external and internal factors contribute in the eruption of teeth.

Source: Ministry of Health and Family Welfare, Government of India. (2014).
Guidelines & Protocols: Medico-legal care for survivors/victims of sexual violence.

ANNEX 7: SUGGESTIONS OF QUESTIONS TO BE USED IN FORENSIC INTERVIEW

Nature of crime

- What incident brought you to this office?
- Do you know why you are here?
- Why are you here?
- What is that complaint about?
- Who came with/brought You here?
- What did he/she tell you about what you are going to do here?
- Do you want to talk about it?
- What is it about?
- Is it about something bad or something good?
- Is it about you or about someone else?
- What was it that happened to you?

Description of perpetrator

- Do you know the person who did this to you?
- How is he related to you?
- Does he live with you at home? How long has he been living with you?
- How do you call him?
- You said he is your “child’s term for offender”, how did he become your “child’s term for offender”?
- Did he smell of alcohol?
- Did he take drugs?
- How does this person look like?
- Is this person a boy or a girl?
- Did you notice anything significant on this person’s face or body?
- Can you tell me how old this person is?
- Can you describe this person’s hair? Skin color? Height? Build?
- Do you see this person at a certain place? Where?
- Do you know this person’s job? What does he do?

Manner of commission of offense

- What did he/she do to you?
- When you say “child’s term for offense” what does that mean?
- When he/she “child’s term for offense”, how does he/she do it?
- What entered your vagina/anus/mouth?
- Here is a drawing of a man. Can you point to me where his (child’s term for penis) is?
- You told me that (offender’s name) put his (child’s term for penis/body part/ Instrument) in your (child’s term for whichever body part), Can you show me where your (child’s term for whichever body part) is?
- Did anything come out of his (child’s term for penis)?
- What else does he/she do?
- Was anything else inserted in the (child’s term for own genitalia)?
- Did he/she give you anything?
- Did he/she say anything to you?

Place where offense took place

- Where did it happen?
- Was it inside or outside the house?
- Can you describe the place where it happened (if not in the house)?

- Can you describe the place where it happened (if not in the house)?
- Do you know the address of that place? (And if she doesn't, ask about landmarks she may have noticed.)
- What were you doing at the time?
- Who was with you at that time?
- What was (that person) doing at the time?
- Was it daytime or night-time?
- Was it dark or was there light?
- Where were you (sleeping/playing)?
- Where is your bed/playground?
- Who sleeps/plays with you?
- Where in the room/Place did he/she talk to you?

Date and time of offense

- When did it happened?
- What were you doing at the time?
- Were you sleeping?
- Did you just wake up?
- Why did you wake up?
- Was there a moon?
- Describe the moon
- Were you playing?
- Had you eaten breakfast? Lunch? Dinner?
- Was it yesterday? last night? This morning?
- Where was your mom? Aunt? Uncle? Sibling? Dad?"
- Was there a festival in your town?
- Was it New Year? Was it Christmas? Was it raining? Was it your (or somebody else's) birthday?
- Were you/playmate/sibling going to school?
- Was it planting/harvesting time?

Identities of people at the time of offense or thereabouts

- Did anyone see what happened to you and (offender)?
- Who saw what happened?
- Was anyone with you in the room when it happened? Who was there?
- How did you know that (witness.) saw what happened to you and (offender)?
- Did (witness) do or say anything when it happened or after the incident happened?

Reference to, and description of, all real evidence

- What were you wearing?
- Did he take off your (use child's words for specific clothing)?
- What was he/she wearing?
- Was he holding something?
- What was he/she holding?
- Do you have a TV? Radio?
- Were you watching tv/listening to the radio?
- What were you watching/listening to?

Motive, prior or subsequent attempted or consummated offense

- After what you said happened, did he/she do it again to you?
- Has this happened to You before?
- Was it only once or many times?
- Did you see this happened to your brother/sister? or other children?
- Does your mother/brother/sister/other child know about what happened to you?

Penetration

- Where was (offender's name)'s (child's term for penis/body part/instrument) used?
- Did (offender's name)'s (child's term for penis/body part/instrument) touch anywhere?
- What part of your body did (offender's name)'s (child term for penis/body part/instrument) touch?
- Did your (child's word for own genital) hurt? What made it hurt?
- Did (offender's name)'s (child's term for penis/body part/instrument) touch inside or outside your (child's word for own genital) how did you know? How did that feel?
- Did offender ever put anything else inside that part of your body?
- Did (offender's name)'s (child's term for penis/body part/instrument) touch you on your clothing or on your skin?
- Did (offender's name) put anything on his (child's term for penis)? What did it look like?

Erection/masturbation

- What did (offender's name)'s (child's term for penis) look like?
- Were there any marks on (offender's name)'s (child's term for penis)?
- Did (offender's name) want you to touch him anywhere?
- How did he want you to touch him?
- What did offender do while he made you do that?
- How did (offender's name)'s (child term for penis) feel when you touched it?
- What did you hear when you were touching (child's term for penis)?

Emission/discharge

- What happened to (offender's name)'s (child's term for penis) after he made you touch it?
- What did he call the (child's term for penis)?
- What do you call that stuff?
- Where did the (child's word for semen) come from?
- After (child's word for semen) came out of (child's word for penis) where was the (child's word for semen)?
- What did (child's word for semen) look like?
- What did (child's word for semen) taste like?
- What did (child's word for semen) smell like?
- Did (offender's name) say/ask you to do anything after (child's word for semen) came out?
- What did (offender's name) do after (child's word for semen) came out?

Nudity

- What were you wearing when....(child's term for the abuse)?
- What was (offender's name) wearing when?
- Was there anything special about (offender's name)'s clothes?
- How did your clothes come off?

- How did (offender's name)'s clothes come off?
- Were all your clothes off?
- Did he do anything with his clothes?

Kissing/Oral contact

- Did (offender's name)'s mouth touch you anywhere?
- What did (offender's name) do with his mouth?
- Did (offender's name) ask you to do anything?
- Did (offender's name) want you to kiss him anywhere? Did (offender's name) want you to suck/lick him anywhere else?
- What did (offender's name)'s mouth do?
- How did (offender's name)'s kisses feel?

Pornography

- Did (offender's name) show you pictures/books/magazines/movies/videos?
- What were the pictures/books/magazines/movies/videos about?
- Did (offender's name) show you anything when he (child's word for the abuse) you?
- Did (offender's name) take any picture/video?
- What were the video/picture about?
- Where was the camera when the (offender's name) took picture/video?

ANNEX 8: SAMPLE CHILD CLIENT QUESTIONNAIRE FEEDBACK FORM

1. What kind of assistance did you receive?
 - a. Counselling/psychosocial support
 - b. Materials assistance
 - c. Legal assistance
 - d. Other (resettlement, shelter)
2. Were your needs met?
 - a. Yes
 - b. Somewhat, explain:
 - c. No, explain:
3. Were you treated in a respectful way?
 - a. Yes
 - b. No, explain:
4. Did the contact person make you feel comfortable to share your feelings and ask for help?
 - a. Yes
 - b. No, explain
5. Did the contact person communicate with you in a way that you understood?
 - a. Yes
 - b. No, explain
6. Did you feel like the contact person blamed you in any way for what happened?
 - a. Yes
 - b. No, explain
7. Did you feel like the contact person believed what you told her/him?
 - a. Yes
 - b. No, explain
8. Did you get information that was helpful to you?
 - a. Yes
 - b. No, explain
9. Did you feel pressured by any person at any time to make a decision or do something that you did not wish to?
 - a. Yes, explain:
 - b. No
10. Did the contact person refer to any other services?
 - a. No, because:
 - Did not need to access other services
 - Did not want to access other services
 - Other (specify):
 - b. Yes

11. Did the contact person follow-up and do what agreed?
 - a. Yes
 - b. No, explain:
12. Do you feel like the contact person helped you with your problem?
 - a. Yes
 - b. No, explain:
13. Do you feel like the contact person helped you address problems in your family related to the abuse:
 - a. Yes
 - b. No, explain:
14. Do you feel like your experiences with the police officer generally positive
 - a. Yes
 - b. No, explain
15. Do you have any additional feedbacks or concerns about how the police officers/NGOs workers can improve to better serve other children/families?

ANNEX 9: IDEAS FOR WARM UPS AND ENERGISERS

Who am I?: Invite each trainee to introduce himself or herself and name three special characteristics/secrets about himself or herself that others may not know.

Interviews: Each person pairs off with another and asks several questions. Then each partner introduces the other to the whole group. Some leading questions might be:

- What makes you unique?
- What animal best represents you?
- Who is the best storyteller in your family or community?
- What brought you here?

Name Game: This is a ‘get to know you’ game. Groups of about 10 persons are formed. The person who starts must say his/her name, as well as a word that starts with the same letter as the first letter of the name. The trainer could give a specific topic for the additional word, such as food or vegetables. The second person must give the name and additional word of the person before, as well as their own name and additional word, and so on until everyone in the group has said their own name and the names of everyone else.

For example, if the first person is called Sopheak and the second person is called Kera, then Kera might say ‘Sopheak Kera’. This exercise helps people to remember each other’s names, and creates a fun atmosphere. It is difficult to do with a large group.

Me, too!: One person says her or his name and starts to describe herself or himself. As soon as another person hears something in common, that person interrupts, giving her or his name (e.g., “I’m _____ and I too have two older sisters”) and beginning a self-description until yet another person finds something in common and interrupts in turn. Continue until everyone in the group has been introduced.

In the same boat: Explain that participants must locate others who share the same characteristics. Then call out some categories (e.g. those born in the same decade or month; those with the same number of children or siblings; those who speak the same language at home or the same number of languages). This exercise can be used to form the groups randomly.

Blindfold Game: Participants are divided into pairs, and one of the pair has a blindfold over their eyes. The other one has to lead the blindfolded person around the room and around obstacles in the room, such as tables, chairs, flipchart. After 5 minutes, the couple change roles, and the leader becomes the blindfolded person.

After the exercise, discuss with the participants how they felt during the exercise. The aim of this exercise is to help people to trust each other, and also to help participants to realise what it is like to be in a vulnerable situation. Care should be taken in using this exercise as some people find it very uncomfortable, and become resistant to learning.

A variation on this exercise is for one of the pair to be blindfolded, and have to draw a picture (for example of a child or a house) following the directions of their partner. This exercise can be more acceptable to participants, as it feels less physically threatening.

Snowball: This is a game that asks for spontaneous responses from participants. It can be used for a quick evaluation, or to throw up ideas quickly. Make a ball out of paper. Call out your own opinion or idea, and then throw the ball to another participant, who then has to call out his/her opinion or idea before throwing to the next person. For example, 'At the end of this day's training I am feeling.....' or 'One thing I learnt today.....'

Two Truths, One Lie: Break everyone into groups of between 3 and 5 persons. Each person in the group must tell the others two truths and one lie about themselves. The other members of the group must then guess which statement was the lie. When finished, the groups can choose their best 'liar', who can then try and fool the rest of the groups.

This exercise helps people to realise how difficult it is to know a person just from external appearance and from what they say.



