Slide 1

BROADENING THE HORIZON: CHILD PROTECTION IN EUROPE
MULTI-DISCIPLINARY ASSESSMENT AND PARTICIPATION IN CHILD PROTECTION
– A TRANSNATIONAL TRAINING PROGRAM

Thomas Meysen
Stephen Pizzey
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MAPChiPP

Slide 2

MAPChiPP PROJECT ORGANISATIONS

MAPChiPP

M01: FRAMEWORK
Introductory Presentation 2

Slide 3 — COLOPHON

▶ The training material at hand was developed as part of the project **Multi-disciplinary Assessment and Participation in Child Protection Proceedings: training program with modules and toolbox, international network.**

▶ This collaborative project was **supported by the Rights, Equality and Citizenship (REC) Programme of the European Union** and conducted by the German Institute for Youth Human Services and Family Law (Germany), Family Child and Youth Association (Hungary), the Estonian Union for Child Welfare (Estonia), the Netherlands Youth Institute (Netherlands), and Child and Family Training C&FT (UK)

▶ **Module M07: Communicating with children, who have experienced significant adversity - developed in main responsibility of project partner**

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M07: COMMUNICATING WITH CHILDREN
Introductory Presentation 3

Slide 4 — 2 FOUNDATIONS

CHILD RIGHTS AND BEST INTERESTS & **ETHICAL INTERVENTIONS: RESPECT AND HUMAN DIGNITY** !

▶ **Children's rights in UN CRC** with the underpinning **principle of the child's best interests** correlate with duties of the state to protection, provision and participation

▶ **Ethics in child protection interventions** encompass both action and attitude

Kelly & Meysen (2016)

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M01: FRAMEWORK
Introductory Presentation 4

Slide 5 — 2 CORE FOCI

MULTI-DISCIPLINARITY & **PARTICIPATION** !

▶ **Multi-disciplinary** collaboration of professionals **is a key factor** for effective child protection – **and a challenge**!

▶ **Participation of children and parents** (or main carers) in child protection proceedings **is essential** for effective child protection – **but not trivial**!

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M01: FRAMEWORK
Introductory Presentation 5

Slide 6 — 12 MODULES

The following modules have been developed:

▶ M01: Framework
▶ M02: Rights and best interests
▶ M03: Abuse, neglect and development
▶ M04: Information and documentation
▶ M05: Analysing and understanding
▶ M06: Intervention and planning
▶ M07: Communicating with children
▶ M08: Participation and decision-making
▶ M09: Child-friendly system
▶ M10: Multi-disciplinarity
▶ M11: Vulnerability and culture
▶ M12: Ethical issues

For further information see **toolbox** available at www.mapchipp.com.

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M01: FRAMEWORK
Introductory Presentation 6

MAPChiPP is …

- ► a **needs based** approach
- ► **adaptable** across countries
- ► an **offer** to draw from as you wish
- ► **free** to explore and use

www.mapchipp.org

Table 2.2: Specific training on child maltreatment

	Police officers/investigators	Prosecutors	Judges	Child protection social workers	Child psychologists	Healthcare professionals	Nursery workers and school teachers
Mandatory across the country	BE, CY, DE, EE, ES, NL[1], SE, SI[2], UK (9)	ES, LV (2)	ES, LV (2)	AT, DE, ES, FR, HU, IE, MT, RO (9)	DE, ES, MT (3)	ES (1)	MT (1)
Mandatory in some regions	LU, SI[2] (2)	EE (1)	o	LU (1)	LU (1)	o	o
Discretionary	CZ, IT, LT, LV, MT, PL, PT, RO (8)	DE, IT, LT, PL, RO, SE, SI, UK (9)	AT, CZ, DE, IT, LT, RO, SI, UK (9)	BE, BG, CY, CZ, EL, FI, IT, LT, LV, NL, PL, PT, SE (13)	BE, CY, EL, FI, HU, IT, LT, LV, NL, PL, PT, SE, UK (13)	BE, CY, DE, EL, FI, IT, LT, LV, MT, NL, PT, RO, SE, UK (14)	CY, CZ, DE, ES, IT, LT, LV, PL, SE, SI, UK (11)
Not widely available	BG, EL, FI, FR, HU (5)	BE, BG, CY, CZ, EL, FI, FR, HU, MT, NL, PT (11)	BE, BG, CY, EL, FI, FR, HU, MT, NL, PT, SE (11)	o	BG, CZ, FR, RO (4)	BG, CZ, FR, HU (4)	BE, BG, EL[4], FR, HU, NL, PT, RO (8)

1 Child/Juvenile Vice Squad only.
2 Police academy.
3 Border officials.
4 None at all.

Source: European Commission 2010: Feasibility Study

Hearing of the child in family court proceedings

depending on child's capacity	7	10	12	14	15	no particular age limit	depending on child's capacity if under the defined minimum age
4: CZ, DK*, FR, LU * in practice 6-7	1: LV	4: AT, BG*, EE, RO * not by law but in practice	7: BE, EL*, ES, FI, IT, NL, SE* * not by law but in practice	5: DE, HU, IE, LT, PT	1: SI	5: CY, MT, PL, SK, UK	10: BE, DE*, DK**, ES, IT, LT, LV, NL, PT, RO * from age of 3 (very strict) ** from age of 6-7

Source: European Commission 2010: Feasibility Study

Family Court Proceedings

■ **Research on practice in Germany**
(Karle/Gathmann/Kolsinski 2010)

- average age from which judges start to hear children 4.1 y. (34.9% state 3 y. as lowest age)
- from enrolment on 95.3% of judges hear the child (age limit in law 14 y.: 0.5%)
- 67% deem obligatory hearing of the child reasonable
- 87.8% rate hearing of the child as important or quite important
- 47.1% of the judges received training on hearing of the child (f: 47.1%, m: 46.9%)
- 83.9% of the judges deem training on hearing of the child necessary (f: 87.8%, m: 80.7%)

Duty to hearing the child – directly or indirectly

	duty to hear the child		court proceedings	
	in court proceedings	in administrative proceedings	direct hearing by judge	hearing only through representative
Bulgaria	X	X	X	
Estonia	X	X	X	
Germany	X	X	X	
Greece			X	
Netherlands	X	X	X	
Romania	X	X	X	
Sweden	X	X		X
Turkey	X	X	X	
UK (England and Wales)				X

Source: Meysen & Hagemann-White 2011: Realising Rights Study

Polarisation in the implementation of article 12 CRC

- each legal and judicial system claims to be on the right path with their approach

England & Wales / Sweden	Germany
• direct hearing by judge almost never takes place • highly qualified professionals who hear the child • continuous informing and supporting by person at the child's side • systematic inclusion of indirect hearing • strong informal status of person at child's side in proceedings	• direct hearing by judge almost always takes place • developing qualification of professionals who hear the child • Several professional claim to represent the child's well understood best interests • additional indirect hearing • strong formal status of person at child's side in proceedings

MODULE 07:
COMMUNICATING WITH CHILDREN

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SEVEN STAGES IN ASSESSMENT, ANALYSIS AND PLANNING INTERVENTIONS

cf. Bentovim et al. (2014)

- Stage 1: initial recognition and referring
- **Stage 2: gathering information**
- Stage 3: organising the information available
- Stage 4: analysing patterns of harm and protection
- Stage 5: child protection decision-making
- Stage 6: developing a plan of intervention
- Stage 7: identifying outcomes and measures for intervention

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M07: communicating with children
PRESENTATION 14

FRAMEWORK FOR THE ASSESSMENT OF CHILDREN IN NEED AND THEIR FAMILIES

Assessment Framework

Health
Education
Emotional & Behavioural Development
Identity
Family & Social Relationships
Social Presentation
Selfcare Skills

CHILD'S DEVELOPMENTAL NEEDS

Basic Care
Ensuring Safety
Emotional Warmth
Stimulation
Guidance & Boundaries
Stability

PARENTING CAPACITY

CHILD
Safeguarding & promoting welfare

FAMILY & ENVIRONMENTAL FACTORS

Community Resources
Family's Social Integration
Income
Employment
Housing
Wider Family
Family History & Functioning

Department of Health, Department for Education and Employment & Home Office (2000)

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M07: communicating with children
PRESENTATION 15

COMMUNICATING WITH CHILDREN

What kind of situations have you met when you need to communicate with children subject to adversity –abuse and neglect?

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THE RANGE OF SITUATIONS WHEN COMMUNICATION WITH CHILDREN IS NECESSARY

Children subject to physical assault (Finkelhor et al 2015)

The intentional use of physical force or implements against a child that results in, or has the potential to result in physical injury.

- **Incidence of Physical Assault in a US Community study** (37.3%) **causes injury** (9.3%)
- **Principally perpetrators, peers and siblings –fewer adults** (5.1%)
- **Bullying**, **physical intimidation** or **relationship aggression** – gangs, racial assault, weapons, and dating violence
- **Boys suffer more physical assault than girls**, younger children bullied, older relationship aggression, non – sexual genital assault

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PRESENTATION 17

THE RANGE OF SITUATIONS WHEN COMMUNICATION WITH CHILDREN IS NECESSARY

- **Children subject to Sexual Assault (**Finkelhor et al 2015)
- **Sexual abuse** is defined as a completed or attempted sexual act; sexual contact which attempts to interact sexually with a child. Non- contact forms of sexual grooming, UK 14.7% girls, 6% boys
- **Sexual exploitation of children** and young people under 18 involves exploitative situations, contexts and relationships where young people receive 'something' eg food, affection, accommodation, drugs, gifts, money for sexual activities
- **Current concerns** 'sexting' – the use of mobile phones to photograph self or others, and transmit to others, sexual activities, use of internet to groom and abuse

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Title of the module
PRESENTATION 18

THE RANGE OF SITUATIONS WHEN COMMUNICATION WITH CHILDREN IS NECESSARY
(BENTOVIM AND GRAY 2015)

- **Children subject to maltreatment** '*acts of commission or omission by a parent or other caregiver that results in harm, potential for harm or threat of harm to a child'*. Life-time rate for the oldest 14 -17 years, (38.1%) .
- **Physical and Sexual abuse** is based on an inter-twining of emotional abuse and neglect
- **Emotional abuse** arises from a parent's negative perceptions of a child's needs – justifying harsh punishment or sexual activity
- **Neglect** is the failure to perceive children's needs justifying failure to provide adequate care

Title of the module
PRESENTATION 19

THE RANGE OF SITUATIONS WHEN COMMUNICATION WITH CHILDREN IS NECESSARY

- **Children subject to property crime and witnessing violence**
- **Property Crime** (Finkelhor 2015) 6.5% suffered nonsibling robbery, 7.4% Vandalism
- **Witnessing and Indirect Exposure** 24.5% - a quarter had witnessed violence in their families or the community in the last year-
- **Family assault,** 5.8% had witnessed parent to parent conflict and assaults. Life-time 14 -17 years, 32.0% for family assault, 25% parent to parent.
- **Witnessing assault in the community** was frequent 18.4% in the past year, 57.9% life-time incidence for the oldest youth.
- **Exposure to the use of weapons,** including guns, household theft, bomb threats and war – particularly immigrant children

Title of the module
PRESENTATION 20

COMPLEX MULTI-TYPE MALTREATMENT (POLY-VICTIMISATION)

- 40.1% experienced **more than one experience of violence** or abuse, 10.1% had more than six.
- Experiencing one type increased the **likelihood of experiencing other types of violence**.
- **Experiencing physical assault** made it 3.4 times more likely to experience a sexual offence, and 3.4 times more likely to experience maltreatment by a care-taker.
- Many children thought to be **subject to one form of crime** are **poly-victims** on investigation

Title of the module
PRESENTATION 21

CHILDREN WITH SPECIAL NEEDS
(SULLIVAN AND KNUTSON 2000)

Prevalence Of Abuse Of Disabled Children

- It's important to register **that children with disabilities are more vulnerable,**
- Disabled children 3.4 times more likely to be abused or neglected than non-disabled children,
- 31% of disabled children in sample abused or neglected compared with 9% of non-disabled children
- **Discuss with your neighbour from your experience what makes them more vulnerable – are they more likely to be scape-goated? do they find it more difficult to communicate their experiences? Are they less aware?**

Title of the module
PRESENTATION 22

COMMUNICATING WITH CHILDREN

What are the goals and challenges for practitioners communicating with children who have suffered extensive adversity?

CHALLENGES OF COMMUNICATING CHILDREN SUFFERING HIGH LEVELS OF STRESS
(BENTOVIM AND GRAY 2015, BENTOVIM 2017)

- The core response of being a victim is to evoke a **stress response,** which can have short or longer term effects including impairment to a child's health and development, includes '**post traumatic stress disorders'- Fear, avoidance, anger when attempting to discuss stressful experiences.**
- '**Positive manageable stress',** linked to 'mastery'. –associated with short lived physiological responses, buffered through social support, attachment figures. **promotes resilience**
- **Extensive victimisation 'poly-victimisation'** - without social support- **'toxic stress' 'traumatic experiences'** which have long term impacts **on** mental and physical health, education, and life span causing '**Latent Vulnerability**' fight and flight responses which cause later persistent difficulties

Title of the module
PRESENTATION 24

DISCUSSION – WHAT ARE THE GOALS OF COMMUNICATING WITH CHILDREN WHO HAVE EXPERIENCED SIGNIFICANT ADVERSITY

Based on participants experiences working with children and young people who have experienced significant adversity, please discuss in pairs:

- The **goals** of communicating with children
- The **challenges** of communicating with children

GOALS OF COMMUNICATING WITH CHILDREN

- **Children as witnesses** – they may be involved in legal processes communication needs to be none-leading, helping the child to provide a narrative which describes their experiences
- **Children's care court** when decisions are being made whether they have suffered significant harm, the court may require a valid independent account of the physical health and development state of the chid
- When there is **family breakdown** the court may need to have a view of the children's wishes and feelings
- If there is a **serious state of victimisation**, there may be a **criminal action**, and the court will require evidence of the child's health and development, To establish a basis for therapeutic work,
- **As a basis for therapeutic work**

CHALLENGES TO ESTABLISHING A CHILD CENTRED APPROACH

- **Given the high levels of anxiety, fear and anger** which is associated with meeting a 'stranger' for the first time, how would you ensure that you can establish successful communication?
- **Think of a child you have worked and goals of the interview**, brainstorm some of the ways you could create a child friendly environment,
- **What about children with special needs?** How would you adapt your approach?
- **Where you meet**, think of the room, materials, your attitude and the atmosphere you need to create
- How would you go about **communicating with children of different ages** – pre-school, school age and teen-agers?

ESTABLISHING A CHILD CENTRED APPROACH
(WEERAMANTHRI 2016)

- getting to **know the child building a relationship** with the child
- conveying that **you are interested** in the child and their point of view
- **conveying hope** not to judge or 'tell off' the child
- understanding **how the child thinks** about their lives
- that you know that the **child has strengths** and difficulties!!
- establishing the **child's goals**,

CHILD DEVELOPMENT AND COMMUNICATION NEEDS AND SKILLS

- Infants: birth to 12 months
- Toddlers: 12-36 months
- Preschoolers: 3-6 years
- School-age: 6-12 years
- Adolescents: 12-18 years

SCHOOL-AGE: 6-12 YEARS

School-age children talk in full sentences, ask more questions and seek more information and justification for the way things are.

- They can understand and talk about other person`s perspective and are beginning to recognize the influence their behavior can have on others.
- They can handle more information at once and can effectively engage in goal setting and problem-solving with assistance from adults.
- Peer relationships are becoming more important
- Help children learn how to manage conflicts effectively
- Act out pretend peer interactions with children to show how conflicts can be resolved

ADOLESCENTS: 12-18 YEARS

Adolescents are interested in talking in-depth about themselves and about their relationships with others.

- They want to know what others think and feel about them
- They want to talk how they are different from their parents and they are beginning to recognize that their parents are imperfect people
- They act more negatively and have more conflicts
- Be sensitive and responsive to their experiences.
- Use conversation as an opportunity
- Stay interested – ask questions and seek explanations
- Be flexible

MᴀPChiPP — Title of the module PRESENTATION 31

PRINCIPLES OF FACILITATING COMMUNICATION WITH CHILDREN

- What are the key principles of facilitating communicating with children ?
- Ways of establishing a rapport 'All about me'

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BUILDING A PICTURE OF THE CHILD'S LIFE AND BUILDING A RAPPORT WITH THE CHILD
(CHILD & FAMILY TRAINING (C&FT) UNPUBLISHED)

- **Get to know the child or young person-** All about me/ my galaxy/ my world/ my life as an advert/ life as a song/ a rap
- **Ask them their areas of interest**/ hobbies/ favourite things e.g. animal/ food/ hobby/ TV program/ subject at school/ time of year/ sport etc.
- **Bring humour/ playfulness**/ a sense that you are really interested in getting to know them- what makes them tick/ what makes them sparkle

MᴀPChiPP — Title of the module PRESENTATION 33

BUILDING A NARRATIVE WITH CHILDREN WITH SPECIAL NEEDS

- Establishing a **narrative with children with special needs is** challenging
- Think of a **child with special needs** you have worked with – with visual problems, deafness, language difficulties, cognitive impairment
- Considering the **various approaches** described – think which would be relevant to establish a meaningful narrative

MᴀPChiPP — Title of the module PRESENTATION 34

Using evidence-based assessment tools
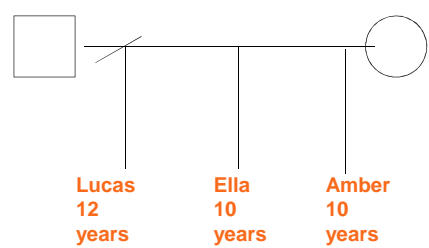(PIZZEY ET AL 2009)

The goals are to:

- Develop an understanding of the nature and level of a child's functioning
- Gain an understanding of factors affecting the child and their needs
- Develop partnerships
- Prepare for intervention if necessary

MᴀPChiPP PRESENTATION

The Nieland Family Structure – Case study
(PIZZEY ET AL 2011)

Lewis Nieland 43 years   Grace Nieland 55 years

Lucas 12 years   Ella 10 years   Amber 10 years

MᴀPChiPP PRESENTATION

6

CASE STUDY TO DEMONSTRATE USE OF SCALE IN PRACTICE – THE NIELAND FAMILY
(PIZZEY ET AL 2011)

Referrals from Ella and Amber's School and GP:

- ❑ **Ella who has Down's Syndrome** is becoming distressed, aggressive and oppositional in lessons
- ❑ **Grace** has to be called into school more often to help calm Ella down,
- ❑ **Amber** gets involved to look after her sister and is showing significant signs of distress
- ❑ **Grace** showing signs of depression and complaining of having no help

MΔPChiPP — Title of the module — PRESENTATION — 37

A DAY IN THE LIFE OF THE CHILD AND FAMILY
The UK interview approach (Cox, Pizzey & Walker 2009)

Aim to obtain Child's experiences, actions and responses of others by

- ► getting detailed descriptions of events and behaviours "yesterday" not a "typical" day
- ► using requests for detailed descriptions
- ► focusing on what actually happened not what usually happens e.g. "what did he do?" not "what does he do?"

MΔPChiPP — PRESENTATION

OBSERVE VIDEO CLIPS
(PIZZEY ET AL 2011)

- • **The Family meeting** –observe the communications with Ella and Amber in the family meeting – including a child with special needs,
- • **The interview with Amber** aged 10 using the Adolescent well-being Scale – validated on children aged between 7-16 years
- • **Make observations** of Ambers response to the family meeting
- • **Make observations** of the way the interviewer engages Amber, and how he builds on the responses
- • **Share observations**

MΔPChiPP — Title of the module — PRESENTATION — 39

USING QUESTIONNAIRES AND SCALES
(COX AND BENTOVIM 2000)

Strengths and Difficulties Questionnaires
Adolescent Wellbeing Scale

- • **Questionnaires and Scales have fixed wording and scoring thus:**
- • **Scores provide guidance**
- • **Can only be relied on if the interviewer finds out the meaning of the responses**

- • .

MΔPChiPP — Title of the module — PRESENTATION — 40

ADOLESCENT WELL-BEING SCALE
SELF-RATING FOR DEPRESSION IN YOUNG PEOPLE
(BIRLESON 1998)

- • It involves 18 questions each relating to different aspects of a child or adolescent's life, and how they feel about these
- • .

Please tick as appropriate

	Most of the time	sometimes	never
1. I look forward to things as much as I used to	☐	☐	☐
2. I sleep very well	☐	☐	☐
3. I feel like crying	☐	☐	☐
4. I like going out	☐	☐	☐
5. I feel like leaving home	☐	☐	☐
6. I get stomache-aches/cramps	☐	☐	☐

- • A total score of 13 or more indicates the likelihood of a depressive disorder

MΔPChiPP — Title of the module — PRESENTATION — 41

STRENGTHS AND DIFFICULTIES QUESTIONNAIRE
(GOODMAN 2000)

Scales which screen for the child's emotional and behavioural strengths as well as difficulties, for children and young people, parents and teachers

There are five scales :pro-social, hyperactivity, emotional problems, conduct – behavioural problems and peer problems

	Not True	Somewhat True	Certainly True
I try to be nice to people. I care about their feelings	☐	☐	☐
I get restless, I cannot sit still for long	☐	☐	☐
I get a lot of headaches, stomach-aches or sickness	☐	☐	☐
I usually share with others (food, games, pens etc.)	☐	☐	☐
I get very angry and often lose my temper	☐	☐	☐
I am usually on my own. I generally play alone or keep to myself	☐	☐	☐
I usually do as I am told	☐	☐	☐
I worry a lot	☐	☐	☐

MΔPChiPP — Title of the module — PRESENTATION — 42

UTILISING QUESTIONNAIRES AND SCALES
(PIZZEY ET AL 2009)

- **Explain procedure completing the Questionnaire**
- **Leave respondent to complete without interruption**.
- **If need clarification** provide guidance
- **Detailed descriptions of "actual" and not "typical" events and behaviours** i.e. "could you tell me the last time this happened?"
  - ▶ **Use requests for detailed descriptions** i.e. "what did that involve?" or "could you tell me a bit more about that please"
  - ▶ **Focus on what actually happened** not what usually happened e.g. "what <u>did</u> he do?" not "what <u>does</u> he do?"
  - ▶ The **follow up -**how the respondent thinks and feels about such incidents

Title of the module
PRESENTATION 43

THE IMPORTANCE OF PRAISE (WEERAMANTHRI 2016)

it is very important to acknowledge, to notice, and to **praise the child's efforts** and individual strengths and skills- the more we look for them the more we will see them.

show you value the child's contribution - thank them for their participation.

Title of the module
PRESENTATION 44

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Title of the module
PRESENTATION 45

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Title of the module
PRESENTATION 46

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Title of the module
PRESENTATION 47

THANK YOU FOR PARTICIPATING!