

Evaluation of CPS

Report prepared for
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Executive Summary

1.0 Introduction

The primary purpose of this document is to report on the findings of the evaluation of the effectiveness of CPS undertaken by Momentum Research and Evaluation at the request of The Todd Foundation and CPS. The evaluation included a review of national and international literature and a selection of CPS documents, analysis of 23 post-course reports¹ and CPS course statistics, face to face interviews with 15 key informants, staff and board members, and a telephone survey of 19 course participants.

The main conclusion from the evaluation was that CPS is effective in training people in child protection and raising awareness of child abuse issues and that it could be more effective if it had the resources and mandate to expand its training and other services.

The following is a summary of the contents of the report and highlights the key points identified in the body of the report.

2.0 CPS: Background and description

The Institute for Child Protection Studies was formed in 1993, to “ensure that children at risk of child abuse receive the most suitable response by providing appropriate and accessible training to those who have a role in preventing child abuse or are required to respond to children at risk of abuse” (CPS Trust deed). The impetus for forming CPS came from concerns, observed by child advocates and also highlighted in official inquiries into child deaths from abuse and neglect, that in every situation, other people, (such as friends, family, neighbours, and teachers), knew something was wrong or were aware that the abuse was occurring and yet did nothing to stop it.

The newly-formed Institute for Child Protection Studies (now known as CPS²) undertook international research into child protection training in order to inform the programme planning and curriculum development, and in 1994 the first course in child protection was offered. Since then and up to December 2006, CPS has provided a total of 522 child protection programmes, workshops and seminars to a total 10 815 of people from throughout New Zealand. In addition, a further 1 788 people have been trained in 2007, making the total number of students to date, 12 603. CPS has also produced publications on detecting child abuse, writing child protection policies and staff screening, has a website, provides advice to people phoning in, and promotes inter-agency collaboration.

3.0 Key findings

The evaluation clearly showed that the people who have undertaken CPS training have increased child protection skills and knowledge, and that they have utilised those skills in their work and personal lives. All survey participants could clearly articulate changes in attitude and behaviour and give examples of child protection action they had taken. Similar results were found in the analysis of the post-course reports. These findings were also consistent with the two previous independent evaluations of CPS training, undertaken, by Susan Hayes in 1997 and Thelma Miller in 2000, which were reviewed for this evaluation.

¹ As part of their assessment, all participants on the CPS Child Protection Studies Programme are required to write a ‘post-course report’ three months after completing the five day training, in which they answer specific questions related to the learning objectives

² In 2001 the Institute for Child Protection Studies re-branded as CPS Training and in 2006 this was further evolved to the current name, CPS. The Institute for Child Protection Studies remains the official and legal name of the trust.

Interviewees considered that CPS had been instrumental in raising awareness of child protection issues in New Zealand. Key informants acknowledged the high quality training and other advocacy services provided by CPS and were supportive of CPS being a certifier of organisations, expanding their training into the education sector, and lobbying for mandatory child protection training in professional training programmes. CPS was viewed as well-networked with other organisations, and its focus on facilitating network-building within their training programmes demonstrated their understanding of factors identified in the literature, as critical to successfully protecting children.

The review of the child protection literature clearly supported the approach and the logic that CPS has taken to child abuse prevention. Specifically, there is consensus in the research literature that child abuse and neglect is a complex and multifaceted problem requiring a multifaceted response. An ecological approach to child protection is recommended which encompasses primary, secondary and tertiary strategies, and CPS fits within this approach as a primary strategy. The literature also supports providing training in child protection to people who work with children and families, both professionals and paraprofessionals, and to members of the community. That training should be of high quality and should raise awareness of child abuse, teach people to be able to recognise signs of abuse, to know what to do if they suspect abuse has occurred, and to understand the role and procedures of the child welfare (i.e. Child Youth and Family) services. CPS training programmes are of a high quality and cover the required topics.

While there is no doubt that CPS has facilitated significant changes in the skill level of its course participants and that it has been a consistent voice advocating for children, for the past 13 years, it is also clear from the evaluation that CPS could be more effective if they had had the funding to accomplish all they seek to do. Essentially the effectiveness of CPS is only limited by the funding; they have the skills and the knowledge to train professionals working with children, to certify organisations, to provide advice, and to promote inter-agency collaboration, they just do not have the funds to do this to the level needed to “make New Zealand the safest place in the world for children”.

4.0 Conclusion

Despite recent law changes, and a national focus on child protection and family violence prevention, a percentage of children in New Zealand continue to be abused, neglected and murdered. There is a need, in New Zealand, for example for mandatory child protection training for professionals (e.g. nurses, teachers, social workers, police, childcarers) who work with children and families. There is also a need for everyone in New Zealand, to be aware of signs and symptoms of child abuse, to understand child protection services’ processes, and as a society to have a ‘zero tolerance’ for child abuse. CPS is in the unique position of having been involved in child advocacy and child protection training in New Zealand for a significant period of time. They have a proven track record in providing high quality and effective child protection training and advocacy services, and as such it is recommended that they should be resourced to not only maintain, but to expand, their child protection and child advocacy work.

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1.0 Introduction

1.1 Background

CPS is a national, not-for-profit, charitable trust, that was established in 1994. CPS offers child protection training throughout the country, provides advice and other advocacy services, and produces a number of publications relevant to child protection. Funding for CPS services comes from a variety of sources, trusts, and other organisations. The Todd Foundation is one of the groups that has funded CPS services.

In early 2007 the Todd Foundation spoke to CPS about undertaking an independent evaluation of their effectiveness. CPS had had their certificate programme evaluated in 1997 (Hayes, 1997) and again in 1999/2000 (Miller, 2000), and also has a quality system that monitors and evaluates their training on an ongoing basis. In 2007, CPS having been operating for 13 years, and research into child abuse prevention having continued to evolve, it seemed timely to consider some further evaluative activities.

Ruth Hungerford of Momentum Research and Evaluation, was contacted, in March 2007, to prepare a proposal to evaluate CPS. This was accepted by the Todd Foundation and CPS, and the evaluation commenced in June 2007.

1.2 Evaluation

The overall aims of the evaluation were to

1. determine the extent to which CPS is achieving their vision of “preventing harm and violence to children through education and awareness,” and
2. determine what would make it more effective.

CPS was also interested in canvassing opinion on its future direction from participants in the evaluation, and it was agreed that this could easily be fitted into the evaluation methodology.

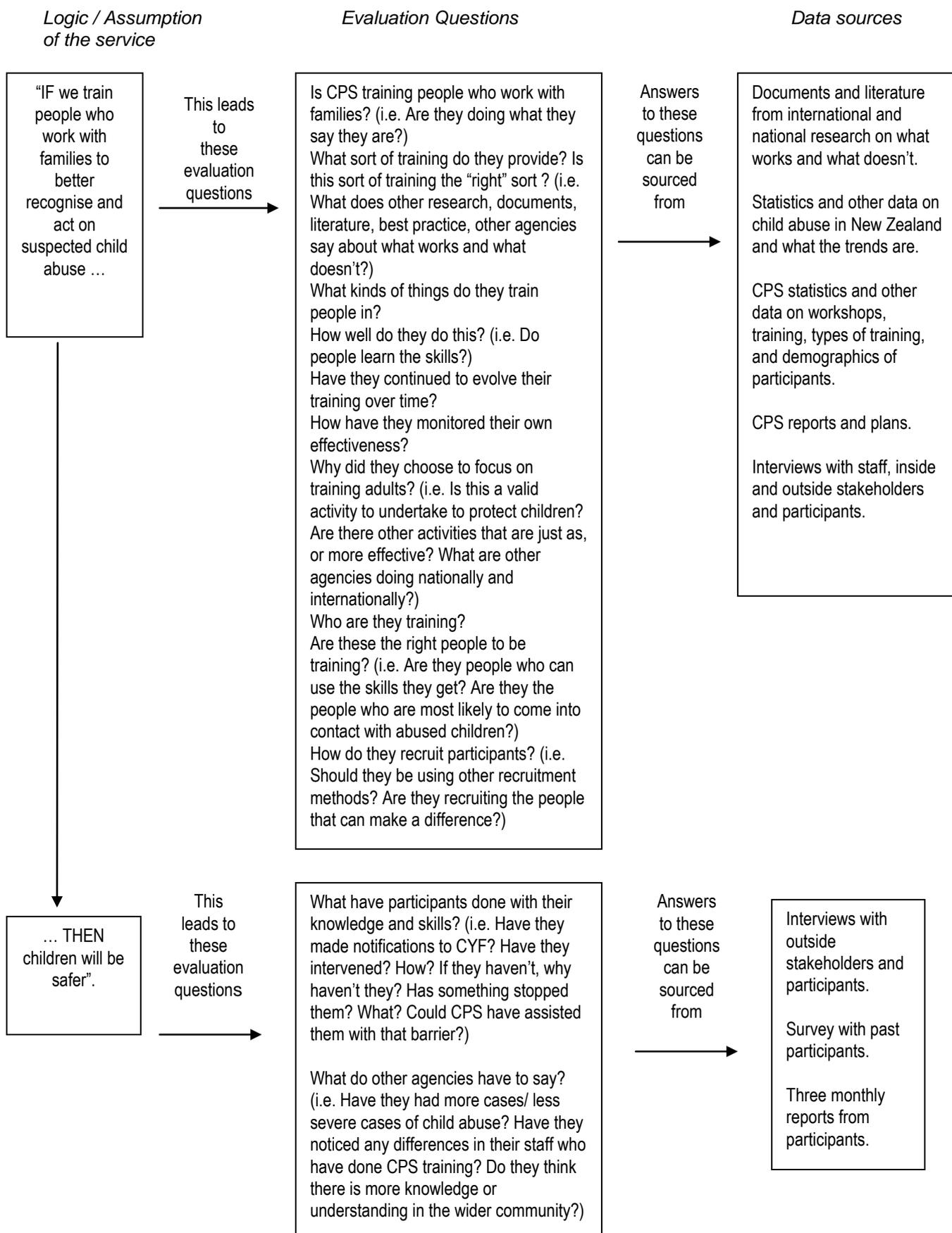
1.3 Evaluation methodology

An evaluation logic model was developed (see page 2) which describes the logic of CPS; that is “IF we train people who work with families to better recognise and act on suspected child abuse, THEN children will be safer.” From this model, the data sources were identified and they formed the basis of the evaluation methodology, as follows:

1. *Literature review.* Literature relating to child abuse and neglect and child protection was sourced, reviewed and written up.
2. *Document review.* CPS documents, such as annual reports, Charter, Trust Deed, website, and 23 post-course reports³ were reviewed.
3. *Statistical data.* Relevant descriptive and demographic data from CPS was collated and analysed.
4. *Interviews.* Interviews with staff (11), board members (2), and key informants (3) were conducted.
5. *Participant Survey.* A telephone survey was conducted with a sample of 19 CPS course participants from 2005, 2006, and 2007.

³ As part of their assessment, all participants on the CPS Child Protection Studies Programme are required to write a ‘post-course report’ three months after completing the five day training, in which they answer specific questions related to the learning objectives.

Figure 1: Logic Model of Evaluation Methodology



1.4 Organisation of the report

This document is the report of the findings of the evaluation of CPS. It is divided into six chapters. Although the chapters can be read separately, it is advisable to read the report as one document, at least initially, in order to gain a complete picture of the findings and conclusions of the evaluation.

Chapter one is an introduction to CPS, the evaluation and the evaluation methodology.

Chapter two is a review of research literature pertaining to child abuse and child protection issues. The purpose of this chapter is firstly to provide a context for the evaluation by describing what the research literature reports about the nature, scope, and impacts of child abuse and neglect, and secondly to present the various measures that research identifies as being effective or useful to prevent child abuse and neglect, including the role of child protection training.

Chapter three is a description and background of CPS and its development from inception to the present day. Included in this chapter is the organisational structure of CPS, the various activities that CPS undertakes, and statistics on the numbers of training courses, seminars and workshops and the numbers and of course participants.

Chapter four reports on the findings of a survey of CPS course participants as well as information from a review of a sample of post-course reports. Included in the chapter are the demographic details of the survey participants, their self-reported learnings and actions taken as a result of the course, and their perspectives on CPS, CPS training and their opinions as to what is needed within New Zealand to protect children.

Chapter five reports on the findings of interviews with key informants, board members, and staff of CPS. Included in this chapter are the 'expert' opinions of people who are involved in, and well informed about, the family violence, the child abuse and the child protection sector. Their views on CPS and the role of child protection training within the broader context of preventing child abuse and neglect are presented, as well as their views on future and strategic directions for CPS.

Chapter six is the summary. This chapter draws together the findings and discusses them in light of the aims of the evaluation.

2.0 Literature Review

2.1 Introduction

As part of the evaluation of CPS a literature review was undertaken. Literature was sourced from academic journals, both hard copy and full text electronic journals using Proquest 5000, Google Scholar, reference lists from literature reviews, online New Zealand and international government websites and clearinghouses, and the University of Waikato library catalogue. Keywords used in the search were child abuse, child protection, child maltreatment, child abuse prevention, and child protection training.

There is a very large and varied amount of research available about child abuse and child abuse prevention, across a range of disciplines. Although key literature has been sourced for this review, it is not intended to be an exhaustive coverage of literature in the area. It is intended to be an introduction to, and overview of, the key issues and general trends within the child abuse and child protection arena, in order to inform and provide context for the evaluation.

The literature review discusses definitions of child abuse and neglect, its effects, then covers child abuse in New Zealand, child abuse prevention / child protection, and child protection training.

2.2 Defining child abuse

Within the literature and within legislation, as child abuse has become more widely recognised, written about and legislated about, different definitions, categories, and sub categories have been drafted. However, although definitions of child abuse and neglect may vary across authors and legislation, they all refer to the "physical or psychological damage caused to the child by the abusive behaviour of others, or the failure of others to protect a child from such damage" (James, 1994a, p. 3). Child abuse and neglect is generally considered to cover four 'types' of abuse: physical abuse, sexual abuse, emotional or psychological abuse and neglect⁴.

- *Physical abuse* is a non-accidental act on a child that results in physical harm (Simcock, 2007, p. 12), and was first 'recognised' in 1962, with an article published in the Journal of the American Medical Association by Kempe and his colleagues. Their article entitled *The Battered Child Syndrome* was on the physical assault of children by parents / caregivers, and medical practitioners were challenged to recognise the incidence of this 'syndrome' (Kempe, Silverman, Steele, Droegmueller, & Silver, 1962).
- *Sexual abuse* describes a range of acts or behaviours when an adult, or older more powerful person uses a child for a sexual purpose (Simcock, 2007, p. 18). In the 1980s research literature began to focus on sexual abuse as physically abused and neglected children began revealing that they were often sexual abuse victims as well. Alongside this, surveys by rape crisis centres showed that many adult women had been sexually abused as children (Oates 1990; Goldman & Goldman, 1988; Reihana, 2006; Saphira & Oliver, 2002).
- *Emotional abuse* occurs when a child's emotional, psychological or social well-being is continually assaulted (Simcock, 2007, p. 24). The New South Wales Child Protection

⁴ This categorization of types, is not to suggest that the different types of abuse occur in isolation and in fact, it is more common for types of abuse to occur together.

Council (1993) list some examples of actions which may result in emotional abuse such as: children constantly being told they are no good or worthless; children being continually rejected and shown no affection; children subjected to repeated verbal abuse and threats; children punished by being locked up alone or not being allowed to have friends or social activities. Increasingly, research has also shown that witnessing violence (e.g. inter-parental violence) also has a detrimental effect on children and, in itself, a form of emotional or psychological abuse (e.g. Fergusson & Horwood, 1998.)

- *Neglect* is the failure to provide for the child's basic needs, such as housing, nutrition, adequate supervision, medical and psychological care, and education (Simcock, 2007, p. 30). Neglect can often be difficult to define and identify as one is often "looking for the absence of something" (Caton, 1999, p. 11), but is essentially associated with a failure to provide the necessities of life, such as nutrition, clothing, adequate living conditions, medical care, supervision, education, and nurturing and emotional care (Caton, 1999; Tomison, 1995)

2.3 The effects of child abuse and neglect

The effects of child abuse and neglect, for the child victims and for society as a whole, in both the immediate, short and long term can be profound. Children die from abuse and neglect (Fergusson, Fleming, & O'Neill, 1972). It is estimated that each year in New Zealand, one child per months is killed through physical abuse (www.cps.org.nz). While physical abuse is often viewed as the most life-threatening, neglect is also of great concern. Caton (1999) quotes a number of studies of child maltreatment fatalities in which neglect is found to be the cause of death. One US study cited by Caton (1999) found that of the fatalities in a sample of 267 children, 39% died of physical abuse, 21% of physical abuse and neglect and 44% of neglect alone. In another study by Reder, Duncan and Gray (1993), of a sample of 35 children, most were killed by physical abuse but two died from avoidable accidents and three were locked away and provided with no care at all until they died of hypothermia and malnutrition.

Other damage resulting from child abuse and neglect includes anything from minor to permanent injuries, brain damage, developmental, social and emotional delays, and behavioral disorders. Fancourt (1997) reports on the effect of abuse and neglect on the developing brain of an infant and child. She explains how the brain development of neglected and abused boys may result in an Attention Deficit Hyperactivity Disorder (ADHD) diagnosis. Essentially, the brain of the traumatized child learns highly adaptive behaviours (i.e. vigilance, watching for threat and harm, hyperarousal, constant anxiety) which are useful in the violent environment for avoiding harm, but are maladaptive in other social settings (i.e. the movement of a teacher walking towards the child may be perceived as threatening and result in an eruption of aggression which is seemingly unprovoked). Perry and Pollard (1997) found that severe 'global neglect' (defined as "a history of relative sensory deprivation in more than one domain, e.g., minimal exposure to language, touch and social interactions"), had a negative impact on the actual size and growth of the brain (p.1). That is that the brains of grossly neglected children, when viewed on a scan and compared to non-neglected children's brains, are significantly smaller in size.

Other research has focused on the impact on development and behaviour of being exposed to child abuse and/or neglect, when compared to those not exposed to violence and abuse. Abused and neglected children are more likely to be anxiously attached as infants, and to develop more antisocial behaviour as they get older. They are also more likely to be delayed in their educational achievement. For example, a longitudinal study of 267 high risk families, by Egeland (1991) found that, as infants, the physically abused and neglected children were

anxiously attached, at two years of age they exhibited more anger and frustration, were more non-compliant and were less enthusiastic, at pre-school, they were observed to be hyperactive, distractible, lacking in self-control and expressed more negative affect, and at school, the teachers rated them as inattentive, unpopular, aggressive, self-destructive, obsessive-compulsive and lacking in self-control, and all except one were referred to special education services (Egeland, 1991). Another study by Venet, Bureau, Gosselini, and Capuano (2007) found comparable results.

Child maltreatment has also been correlated with a range of negative outcomes such as poor educational achievement, sexual risk taking behavior, teenage pregnancy, criminal offending, mental health problems, eating disorders, suicidal behaviour, and general poor life trajectories (Beautrais, & Fergusson, 2006; Caton, 1999; Child, Youth and Family, 2001; Egeland, 1991; Fancourt, 1997; Fergusson, 1998; Fergusson et al., 1972; Romans, 2001; Smith & Beautrais, 1999). For example, a number of New Zealand studies utilising data from the Christchurch Health and Development study⁵ have been undertaken (e.g. Boden & Horwood, 2006; Beautrais, & Fergusson, 2006; Fergusson & Horwood, 1998; Fergusson & Lynskey, 1997). These studies have found that children who have been abused and neglected are more likely to have adjustment problems in young adulthood including juvenile offending, substance abuse, suicide, low self esteem, and mental health problems, have increased risks of anxiety, conduct disorder, problems with alcohol and criminal offending, and are more likely to engage in risky sexual behaviour such as engaging in unprotected sex, having a greater number of sexual partners, and a greater risk of pregnancy at ages 15-25 years.

In addition to the social costs to the individual and society, described above, the economic cost to society of child abuse and neglect is also significant. A study by Snively in 1995 on the economic cost of family violence (which included child abuse and neglect and sexual abuse) in New Zealand found that the annual cost of family violence in New Zealand was at least \$1.2 billion. This costing included costs to the individual and the government, through loss of life, loss of earning potential, compensation payments, legal costs, health-related costs, and child welfare services costs. It is also important to note that it is actually cheaper in the long term to prevent maltreatment, to alleviate family problems, before the dysfunction is seen to require protective intervention (James, 1994b).

2.4 Child abuse in New Zealand

Child abuse in New Zealand has been the focus of a number of studies. For example, in 1967 a nationwide survey of child abuse was conducted by the Child Welfare Division⁶ and results published in a report entitled *Child Abuse in New Zealand*. The study reported that, in 1967 363 children were referred to the New Zealand Child Welfare Division for incidents of suspected or alleged child abuse. Of those 363 children, 255 were classified as abused children. While some (12.2%) of those 255 children had no injury, most had an injury. Of these, most (71.4%) children's injuries were classified as non-serious, 30 were deemed to have suffered a serious (but not permanent) injury, five a serious and permanent injury, and seven of the children died as a result of abuse (Fergusson et al., 1972)

In 1982 the *Report of the Committee on Child Health* estimated that there were a minimum of 1500 cases of non-accidental injuries per annum among children under the age of five years (cited in Abbott, M, 1983). A 1998 Ministry of Health report suggested that between four and 10 percent of New Zealand children experience physical abuse and approximately 18% experience sexual abuse (Ministry of Health, 1998; 2002).

⁵ The Christchurch Health and Development study is a longitudinal study of 1265 Christchurch children, born in mid 1977, who have been studied at birth, 4 months, one year, annually until 16 years, 18 years, 21 years and 25 years.

⁶ On 1 April 1972 the Child Welfare Division became part of the Department of Social Welfare, and is a predecessor to the current Child Youth and Family.

The most recent data available, the New Zealand Health Information Service (NZHIS) mortality data⁷ shows that in 2002, eight children, aged 0-14 years died because of assault, and in 2001/2002, 261 children under 15 years were hospitalized for injury or poisoning or because of assault (New Zealand Health Information Service, 2007). Child Youth and Family Services' (CYFs) data shows that in 2006/2007 approximately 73,000 notifications were made to CYFs, with a substantiated child abuse and neglect rate of 6.9 children per 100,000 (Gandar & Shephard, 2004; Ministry of Social Development, 2002). When compared with international data, New Zealand does not fare well. In a UNICEF report on child maltreatment deaths in rich countries, New Zealand's rate (1.3 per 100, 000 children) was six times higher than the average rate for the leading countries (UNICEF, 2003).

Statistics also indicate that Maori are significantly over-represented as both victims and perpetrators in the child abuse and family violence statistics; the substantiated child abuse and neglect rate for Maori is 10.3 children per 100,000 (Gandar & Shephard, 2004; Kruger, Pitman, Grennell, McDonald, Mariu, Pomare, Mita, Maihi, Lawson-Te Aho, 2004; Mckenzie, 2004; Ministry of Health, 2002; Ministry of Social Development, 2002; National Collective of Independent Women's Refuges Annual Statistics 1999-2001). New Zealand also has a high teenage pregnancy rate⁸ and a high suicide rate amongst young people (suicide accounts for one third of all deaths of children and young people, peaking at ages 19-20); two factors which, as was discussed earlier, are often associated with child abuse and neglect (Gandar & Shephard, 2004).

Although the available data and research on rates of child abuse in New Zealand is not exhaustive and is not able to provide exact numbers of the extent and nature of abuse (see Lievore & Mayhew, 2007, for more discussion on this), what it *does* indicate is that child abuse and neglect definitely occurs in New Zealand and that it results in injuries to children's physical, emotional and mental wellbeing. These injuries range from minor to serious and permanent, and include death.

2.5 Child protection

Child protection is a term for efforts designed to protect children from maltreatment, and encompasses a range of different strategies, theories and activities. Determining the most effective methods to protect children and prevent child abuse and neglect is not a simple process as child abuse and neglect is a complex and multifaceted problem that requires a "complex and multifaceted response" (Ministry of Health, 1996, p.31). Literature on child abuse prevention and/or child protection covers an abundance of topic areas ranging from education and awareness-raising initiatives for children and adults, home visiting and parenting programmes and proposed legislative, social and policy changes, through to treatment interventions for perpetrators of abuse to combat recidivism (e.g. Abbott, 1983; Gough, 1993; Miller, 2000; World Health Organization, 2006).

The following sections first define the ecological approach adopted by government strategy documents, the categories of primary, secondary and tertiary prevention strategies, and the role and relevant types of protective laws and guidelines. This is to place CPS and its activities within a context of Aotearoa and government strategy as well as within a global perspective. Then, the merits or otherwise of specific strategies, relevant to CPS, such as raising awareness, voluntary versus mandatory reporting, inter-agency collaboration, and types of and effectiveness of child protection training, including previous evaluations of CPS training, are discussed.

⁷ The Ministry of Health may have access to more recent data, but 2002 is the most recent mortality data that is publicly available.

⁸ New Zealand has the third highest teenage birthrate in the OECD. Birth rates for 15-19 year olds were 27.4 per 1000 women in 2005 and for Maori in this age group were 66 per 1000 (Statistics New Zealand).

2.5.1 Ecological approach and primary, secondary and tertiary prevention

Most recent publications, and government strategy documents, on child abuse prevention and child protection take an ecological approach to the prevention of child abuse. The focus is on the notion that 'it takes a village to raise a child'; that is that as a community, we all have a responsibility to raise children and ensure their safety.

Intervening effectively in the lives of these [abused and neglected] children and their families is not the sole responsibility of any single agency or professional group, but rather is a shared community concern" (Goldman, Salus, Wolcott, & Kennedy, 2003, p. 1)

An ecological framework for prevention is based on the assumption that children and families exist as part of an ecological system, which means that prevention strategies must target interventions at multiple levels: the individual, the family, the community, and society. There is also a recognition that strategies need to be culturally appropriate and ensure that they take into account any issues specific to a particular group or groups within society, and a focus on the value of a local community response (Gandar & Shephard, 2004; Goldman et al., 2003; Ministry of Health, 2002; Ministry of Social Development, 2002; United States Child Welfare, 2007).

One way to consider child abuse prevention activities is to categorise them into three levels – primary (family, whanau and community), secondary (NGOs and government agencies), and tertiary (CYFs) (CPS, 2007).

- *Primary prevention activities* are directed at the community and general population and attempt to stop maltreatment before it occurs, by raising awareness amongst the general public, service providers, and decision-makers about the scope and problems associated with child maltreatment. Activities may include education programs, support groups that focus on child development and public information on how and where to report suspected child abuse and neglect (CPS, 2007; United States Child Welfare, 2007).
- *Secondary prevention activities* are often undertaken by NGOs (e.g. church based social services, Parentline, Barnardos) or government-sponsored agencies (e.g. Family Start) and typically focus on populations that have one or more risk factors associated with child maltreatment. Examples of activities include parent support groups, home visiting programs, and respite care (CPS, 2007; United States Child Welfare, 2007).
- *Tertiary prevention activities* focus on families where maltreatment has already occurred (indicated) and seek to reduce the negative consequences of the maltreatment and to prevent its recurrence. These prevention programs may include services such as CYFs, mandatory reporting, and offender treatment programmes (e.g. HAIP) (CPS, 2007; United States Child Welfare, 2007).

As an organisation, CPS fits mainly within the 'primary prevention' arena as CPS works to stop maltreatment before it occurs, by training people to recognise signs and symptoms of abuse, to act appropriately (i.e. provide support, report abuse) when they suspect abuse has occurred, and by raising awareness within the community, providing information, advocating for children's rights, and actively promoting inter-agency collaboration. The following sections discuss the effectiveness of some key primary prevention activities at both the societal level (UNROC and legislation), and the community level (raising awareness, mandatory versus voluntary reporting, inter-agency collaboration).

2.5.2 The legislative response: The responsibility of the state

Legislation is not the sole answer to protecting children from abuse and neglect, however it is part of the answer, as it provides a framework for society to operate within and sets standards

by which various agencies and individuals are required to act, and for this reason many child advocates actively work towards legislative change (e.g. Ritchie, 2006).

Internationally, the United Nations Convention on the Rights of the Child (UNROC) is an example of a set of standards, which provide for the protection of children. It came into force on 2 September 1990, and is signed by all but two United Nations' countries. New Zealand ratified UNROC on 6th May 1993⁹ (Office of the High Commissioner for Human Rights, United Nations, 2007). Article 19 (see Appendix 3) specifically relates to abuse and neglect of children. For some years after ratification, New Zealand came under criticism, from various parties, including The United Nations Committee on the Rights of the Child, which had concerns about Section 59 of the New Zealand Crimes Act (1961) which allowed 'reasonable force'¹⁰ to be used against a child as punishment, within the family (United Nations Committee on the Rights of the Child, 1997). A number of people and organisations within New Zealand have lobbied to repeal Section 59 (e.g. authors and researchers Jane and James Ritchie; Save the Children Fund, CPS). In 2007 the New Zealand government voted to amend Section 59 of the Crimes Act (1961), effectively removing the 'reasonable force' defence.

Other Acts relevant to child protection include The Children, Young Persons and their Families Act, 1989, which provides for the protection of children and mandates CYFs to act to protect children and young people; The Domestic Violence Act, 2004; The Guardianship Act, 1968; and The Care of Children Act, 2004 (see Brown, 2000, for more detail and other relevant Acts).

A detailed discussion of all the laws and their effectiveness is outside the scope of this review, although it is relevant to note that the extent to which the legal system is effective in protecting children has been - and continues to be - questioned by some family violence researchers (e.g. Pond, 2003; Robertson, Busch, D'Souza, Lam Sheung, Anand, Balzer, Simpson, and Paina, 2007a;2007b), and has also been raised in investigations into child deaths (e.g. Office of the Commissioner for Children, 2000). For example, Robertson et al., (2007a;2007b), found that despite the provisions within the law, men in their case studies could beat up their partners, in front of their children, and still be allowed unsupervised access to those children. The reasons why this occurred were related to beliefs held by judicial officers that 'children need their father' which appeared to override issues of safety for those children. Pond (2003) reported similar findings in which lawyers minimised the abuse experienced and consequently undermined the safety of children. The investigation into the death of James Whakaruru¹¹ found that professionals working with the family did not adhere to the statutory requirements of The Children, Young Persons and their Families Act (1989), and if they had done so, they could have reduced the probability of harm to James (Office of the Commissioner for Children, 2000, p.28).

The key point raised in these reports is that while having laws to protect victims of abuse is important, if children are going to be protected then these laws need to be upheld within the legal system and not be undermined by the biases and beliefs of the judicial officers or by the lack of adherence to the law in practice, even if unwittingly.

2.5.3 Raising awareness

As the previous section discussed, having laws is not enough if those carrying out the laws do not understand the issues or have beliefs that undermine the purpose of the law. Raising awareness and developing a 'zero tolerance' to child maltreatment within society is therefore

⁹ Note: The exact date of New Zealand's ratification of the Convention differs depending on who is reporting on it. For example the Ministry of Youth Affairs (1995), reports 13 March 1993 as the date while the date reported here, 6 May 1993, is the one that is recorded by the United Nations.

¹⁰ Section 59 essentially allowed parents and caregivers who had assaulted children to claim that they had used 'reasonable force' in order to discipline the child, with the onus being on the prosecution to 'prove' that the force used was 'unreasonable'.

¹¹ James Whakaruru died as a result of prolonged abuse inflicted by his caregivers in April 1999. He was aged four years and nine months.

crucial to protecting children (Gandar & Shephard, 2004). Te Rito, the New Zealand family violence prevention strategy, recognises the importance of this and has "raising public awareness through education" as a key component of its strategy to prevent family violence in New Zealand (Ministry of Social Development, 2002, p. 11).

The mass media is one tool that is used to promote awareness of a topic. Dr Karen Zelas (1983), in her paper *Towards prevention of child abuse in New Zealand*, notes that where there is media coverage of child abuse there is a corresponding increase in referrals to hospital, statutory and community agencies. This trend in increased reporting after media attention, has also been noted by the Child Youth and Family Call Centre, which for example, recorded an increase in calls to CYF after the story of Nia Glassie¹² became public knowledge (personal communication, CYF Call Centre Manager, August 2007). Scott (2006) notes that the media played a powerful role in the child rescue movement which developed in the second half of the nineteenth century, and again in the so-called 'second wave' in the 1960s, in which battered baby syndrome was 'discovered'.

Raising awareness of child abuse and neglect has been the subject of media campaigns in New Zealand (Colmar Brunton Research, 1997; 1999). For example, CYFs' *Breaking the Cycle* campaign had television and radio components. A pre and post survey of a random sample of 611 people concluded that CYFs had run a successful campaign; awareness of physical abuse had increased by 6% from benchmark and of emotional abuse by 8%. There was also an increase in the level of agreement of what could be considered child abuse (Colmar Brunton Research, 1997; 1999). Other researchers have explored the role of the media in raising awareness of child abuse and overall there is support for utilising the media and having programmes to raise awareness, and decrease tolerance for violence and abuse within the community (Ministry of Social Development, 2002).

While raising awareness is important, and may prevent child abuse occurring in some situations as people and society shift their attitudes and behaviours, it is also necessary to ensure that there are sufficient resources within a society to act appropriately when child abuse is suspected (Gandar & Shephard, 2004).

2.5.4 Inter-agency collaboration

Inter-agency collaboration is recognised as an important part of strategies to protect children and prevent child abuse and neglect. This recognition is not new. For example, in the United Kingdom in 1950, a government circular on maltreated children recommended the establishment of 'children's coordinating committees' (cited in Hallett & Stevenson, 1980). Various enquiries into child deaths, both in New Zealand and internationally, have highlighted situations where different agencies, (both government and NGO) and / or other professionals (e.g. teachers, doctors) were involved with a family but were not working together. In other situations, agencies may have collaborative protocols, but bureaucratic procedures cause delays which can have fatal consequences (Child Abuse Prevention Services New Zealand, 2005; Brown, 2000; Hallett & Stevenson, 1980; Office of the Commissioner for Children, 2000; 2003; Ofstead, 2007; Simon Peacock Report, 1978).

The report into the investigation into the death of James Whakaruru, for example, found that James came into contact with a number of professionals and organisations in his short life (for example he was seen by medical professionals - Plunket, Midwife, GP, and hospital staff - on at least 40 separate occasions), yet there was a significant lack of communication between the agencies and professionals involved, plus an obvious lack of knowledge on the part of some of the professionals in recognising signs and symptoms of abuse. Similar findings were documented in the investigation into the deaths of Saliel Aplin, and Olympia Aplin (Jetson),

¹² Nia Glassie, a toddler was tortured and killed by members of her extended family, in 2007. At the time the case was widely reported in the media in New Zealand.

who were killed by their stepfather, Bruce Howse, in 2002, aged 12 and 11 years respectively (Office of the Commissioner for Children, 2000; 2003). The report into James Whakaruru's death states that a strong care and protection system is evidenced by the following factors:

1. there ought to be strong working relationships between all agencies involved with children, both government and non government so that crucial information is shared.
2. there ought to be high levels of community and professional knowledge about care and protection so that child abuse and neglect is recognised and reported appropriately.
3. there ought to be fundamental and operational adherence to the care and protection legislation and clear, strong links between the policies and practices of other jurisdictions, so that in all matters the best interests of the child are of paramount concern (Office of the Commissioner for Children, 2000, p. 25).

The literature is clear that communication and collaboration across agencies is crucial in child protection work and that there is a role, and need, for professionals and para-professionals to have a high level of knowledge about child protection and to be able to recognise abuse and act appropriately.

2.5.4 Mandatory versus voluntary reporting

In some countries reporting child abuse is mandatory for people within certain professions, who work with children. For example, pediatricians in the USA are legally required to report to their state's child protection services if they suspect an injury is the result of abuse or neglect, and in some states in the USA 'anyone' who suspects child abuse is required to report (Flaherty, Sege, Price, Kaufer Christoffel, & O'Connor, 2006). Mandatory reporting by various professionals (e.g. educators) is also required in Australia (McCallum, 2000; McCallum & Baginsky, 2001). In New Zealand, warranted social workers and sworn police officers are legally required to report incidences of suspected child abuse, although no other professions have mandatory reporting requirements. There is significant discourse within the literature regarding the merits or otherwise of mandatory reporting, with evidence both for and against it (e.g. see Kelly, 2000 for further discussion on this).

New Zealand has tended to go down a 'voluntary reporting' track and in the past few years, policies have been initiated to encourage voluntary reporting. Welfare and health workers are being asked to screen for family violence, and some organisations have their own policies requiring their workers to report suspected child abuse. Within education, schools have a duty to provide a safe physical and emotional environment for children in their care, although this does not include mandatory reporting. Schools are however, encouraged to have child protection policies and guidelines, and are "strongly advised" to follow voluntary reporting procedures (Ministry of Education, 1997, p.3).

There have been a number of studies done, with mandatory reporters, to determine what helps and what hinders them to report. For example, training in child protection is associated with increased confidence to detect, and greater likelihood of reporting suspected child abuse. A US survey of 851 pediatricians found that those pediatricians who had received recent child abuse education were more confident in their ability to identify and manage child abuse (Flaherty et al., 2006). Another US study which surveyed 382 pediatricians, social workers, and physicians' assistants, had similar findings with the strongest predictors of reporting being case-related attitudes, professional concerns, institutional settings and *the amount of training they had received* (King, Reece, Bendel, & Patel, 1998).

While there is debate as to the effectiveness of mandatory reporting, there is support for mandatory training, and studies highlight that *effective training in child protection is a key*

factor in increasing the chances of people reporting or acting on cases of suspected child abuse.

2.6 Child Protection Training

As discussed above research with mandatory reporters highlights the need for effective training as lack of quality training in child protection is a barrier to reporting or acting on suspected child abuse. The need to have adequate training in child protection was also highlighted by Abrahams, Casey and Daro's (1992) survey of 568 elementary and middle school¹³ teachers, which found that the majority of the teachers received minimal education in child protection issues, and those that received some training reported that what they received was inadequate.

The following sections discuss key aspects of child protection training, including who should receive training, and what works in child protection training.

2.6.1 Who should receive training?

Abrahams et al., (1992) argue that teachers are a professional group who have a key role in child protection, as they typically have ongoing and long term contact with children, so are more likely to detect signs of abuse. In addition, according to Abrahams et al., (1992), teachers can also play a role in preventing child abuse by (i) developing strong relationships with students and thus being able to offer guidance and support to children and families in crisis, (ii) teaching child safety awareness curriculum programmes; and (iii) role modelling non-violent conflict resolution within the classroom. Health workers are another group that have contact with children, with some seeing them after they have been intentionally injured, and others being in a position to observe earlier signs of abuse and neglect. For example, a study of child abuse related deaths in Wales highlighted a child protection role for general practitioners, and the need for training for pediatricians and radiologists (Sanders, Colton & Roberts, 1999; see also Ward, Bennett, Plint, King, Jabbour, & Gaboury, 2004).

Early intervention workers are also important as one characteristic that is critical to effective early intervention programmes, is having well educated, trained and supported staff, and while there is debate on whether staff should have professional qualifications (i.e. nurses, social workers, teachers) or be paraprofessionals, lay workers or volunteers, there is consensus *that staff need to be trained* (Carbone, Fraser, Ramburuth, & Nelms, 2004; Ministry of Community and Social Services (Ontario), 1989; Olds, Robinson, O'Brien, Luckey, Pettit, Henderson, Ng, Sheff, Korfmacher, Hiatt, & Talmi, 2002)¹⁴. In addition ensuring that people who provide services under The Children Young Persons and their Families Act (1989), such as social workers, caregivers and others working in CYFs' services, receive adequate training is a specific *requirement* of the Act. Section 7, states

General duties of Director General -

(2) (f) Ensure that persons providing services under this Act receive adequate training and comply with appropriate standards.

Aside from those working with children, Gough (1993) notes in his review of child abuse interventions, the need for people in the community to understand the role and processes of services such as CYFs:

¹³ Elementary and middle school teachers, teach grades one to six, equivalent to New Zealand's Primary and Intermediate teachers.

¹⁴ This is particularly pertinent given that the New Zealand government actively supports early intervention home visiting programmes with vulnerable families as an effective tool for preventing negative outcomes and fostering positive outcomes for children and families, including decreasing child abuse and neglect.

Child protection services depend on the local community in many ways. Child protection might therefore be more effective if the community participated in and better understood the role and policies of child protection services (p. 276).

Gough's view is also iterated in reports into the investigation of child deaths in New Zealand (e.g. Office of the Commissioner for Children, 2000; 2003). These reports also note that understanding family violence and knowing how to recognise, report and respond to child abuse is important for all New Zealanders. For example, the report into the deaths of Saliel and Olympia Aplin concluded the following:

The misery of these children's lives and deaths must result in an unequivocal commitment by all New Zealanders to the elimination of family violence. ...This commitment requires that families, communities and agencies recognise, report and respond to the violence impacting on children's lives (Office of the Commissioner for Children, 2003, p.2).

Overall, the literature supports training of professionals working with children and also of members of the community as a whole.

2.6.2 What works in child protection training?

McCallum and Baginsky, (2001), evaluated how British and Australian pre-service teacher training incorporated child protection and mandatory reporting into their programmes. They reported that confusion about policies and procedures directly influenced teachers' confidence in identifying and reporting, and found that students wanted more thorough training on child protection. They concluded that teacher training in child protection needed to be integrated, not grafted on, to the main teacher training programme. They also discussed the need to address pre-conceived beliefs that teachers have about child abuse and to consider ways to ensure ongoing training for teachers once they have begun practice.

Ward, Bennett, Plint, King, Jabbour, and Gaboury, (2004), analysed the quality of child protection training for paediatric residents¹⁵ in Canada. They found that the available training was varied with some programs offering mandatory training, some voluntary, and some none, that training was commonly rated as "needing improvement", and that most (92%) residents felt they needed child protection training. Also of concern was the reasonably high number 30 (16.4%) of the 190 residents in the sample, who did not believe that they would be dealing with child abuse cases as a practising paediatrician. The researchers concluded that paediatric residents did need effective child protection training and that what little training was currently available was limited and inadequate. The research on child protection training identifies a need for the training to be of high quality in order to be effective.

In New Zealand, in 1997, Susan Hayes undertook a postal survey of CPS course participants. Seventy eight (response rate of 40%) completed questionnaires were returned from participants who had completed a course between 1994 and 1996. Hayes concluded that the survey showed overwhelming support for the aims of CPS with 87% reporting that their work practice had changed as a result of the course and 80% stating that it helped expand their networks.

Another evaluation of the CPS certificate programme – an eight day (now five day) course in child protection - was undertaken by Thelma Miller in 1999 (published in 2000). Miller used a quasi-experimental, pre and post design, to determine changes in knowledge, attitudes, and self-reported behaviour of participants from two certificate courses. She found significant differences in pre and post scores on all factors assessed, and concluded that "training in

¹⁵ Paediatric residents are doctors, specialising in pediatrics, who are still in training. Different countries have different training programmes but most doctors who are 'residents' are at a stage in their training where they are working within a clinical setting.

child protection significantly impacted on course participants' knowledge, awareness, attitudes towards child abuse and child protection and their preparedness to act to protect children". These differences in attitudes and preparedness to act indicate that the CPS training was effective in training people in child protection.

Overall there is support in the literature for integrating child protection training into pre-service training programmes, and there is consensus that high quality training is crucial for effectiveness.

2.7 Summary points

- Child abuse and neglect encompasses a range of maltreatment including physical assault, emotional /psychological abuse, sexual abuse and neglecting to provide for a child's basic needs.
- The impact of child abuse and neglect is varied. Some children die as a result of abuse or neglect. Other impacts include physical injuries ranging from serious and permanent to minor, emotional and psychological damage, developmental delays, and negative long term outcomes such as delinquency, crime, self harm, suicide, sexual risk taking behaviours, and perpetuating a cycle of violence.
- Most child abuse prevention strategies recommend an ecological approach to child protection which encompasses primary, secondary and tertiary strategies.
- Protecting children is the role of the whole of a community and there is a need for everyone within a community to be aware of signs and symptoms of child abuse, to understand child protection services' (e.g. CYFs) processes, and as a society to have a 'zero tolerance' for child abuse.
- The importance of inter-agency collaboration and co-ordination to prevent child abuse is well established.
- Professionals, those working with children, and members of the community, should be trained in detecting and acting on suspected child abuse.
- Child protection training should be an integral part of professionals' pre-service training programmes and needs to raise awareness of the existence of child abuse and teach people to be able to recognise signs of abuse, to know what to do if they suspect abuse has occurred, and to understand the role and procedures of the child welfare (i.e. CYFs) services.
- It is important that training is of a high quality in order to be effective.
- Evaluations of CPS child protection training have found that CPS training is effective in training people in child protection, and affecting their attitude, knowledge and preparedness to act.

3.0 CPS: Background and Description

3.1 Introduction

This section provides a brief description of the establishment of CPS, its vision, goals and objectives, and its ongoing development from its inception to the present day.

3.2 History

The early 1990s in New Zealand was characterised by the media coverage of children being beaten to death by their caregivers (e.g. Delcelia Witika, aged 2 years, beaten to death by mother and stepfather, 1991) (*Tania Witikia out of prison*, September 4th 2002, p.1). The reports and official inquiries into the deaths of these children highlighted a number of issues. One of these was that in almost every situation, other people, such as friends, family, neighbours, and teachers, knew something was wrong or were aware that the abuse was occurring and yet did nothing to stop it. What was also clear from the reports was that the deaths of these children could have been prevented if people who knew what was happening had taken action to stop it.

At this time in Hamilton a charitable trust, Parentline Incorporated (Parentline) was in operation. Parentline had been running since April 1978 as a child advocacy service for vulnerable children. Initially starting with six volunteer counsellors, by 1983 Parentline had a permanent base in Palmerston Street. Parentline is still operating, offering a wide range of social services including respite care, workshops for children, families, and caregivers, and parenting courses. The goal of Parentline is:

to work for the prevention of abuse and neglect of children by providing a service for those who have the care and custody of children (www.parentline.org.nz)

In the early 1990s Parentline staff decided to respond to the issues that the reports into the child deaths had raised. They were aware of the high number of cases of child abuse they were dealing with and the fact that many of these could have been avoided. They also conducted an initial investigation into the level of awareness of child protection issues, which was revealing.

We sent out some surveys to organisations that had contact with children - schools, scouts, other groups - and it came back and they were saying "there's no abuse in our school or organisation" and we realised that there was no awareness. One scout group wrote back saying "we think you sent us this in error!" Later on, we did another survey and they basically said "if you do the training we will come." So there was a bit of a vision, and understanding, that we [i.e. those working with children in New Zealand New Zealand as a society] needed more education [about child abuse/child protection]. So the impetus for the Institute for Child Protection Studies was created. (source: CPS staff personal communication)

In 1993 Parentline was granted funding to establish the Institute for Child Protection Studies which was set up as a charitable trust, and registered as a Private Training Establishment (PTE) with the New Zealand Qualifications Authority (NZQA). In 2001 the Institute for Child Protection Studies re-branded as CPS Training and in 2006 this was further evolved to the current name, CPS¹⁶.

The first task in 1993 for the newly-formed Institute for Child Protection Studies was to undertake international research into training in child protection to inform the programme

¹⁶ CPS Training and CPS are trading names. The Institute for Child Protection Studies remains the official and legal name of the trust.

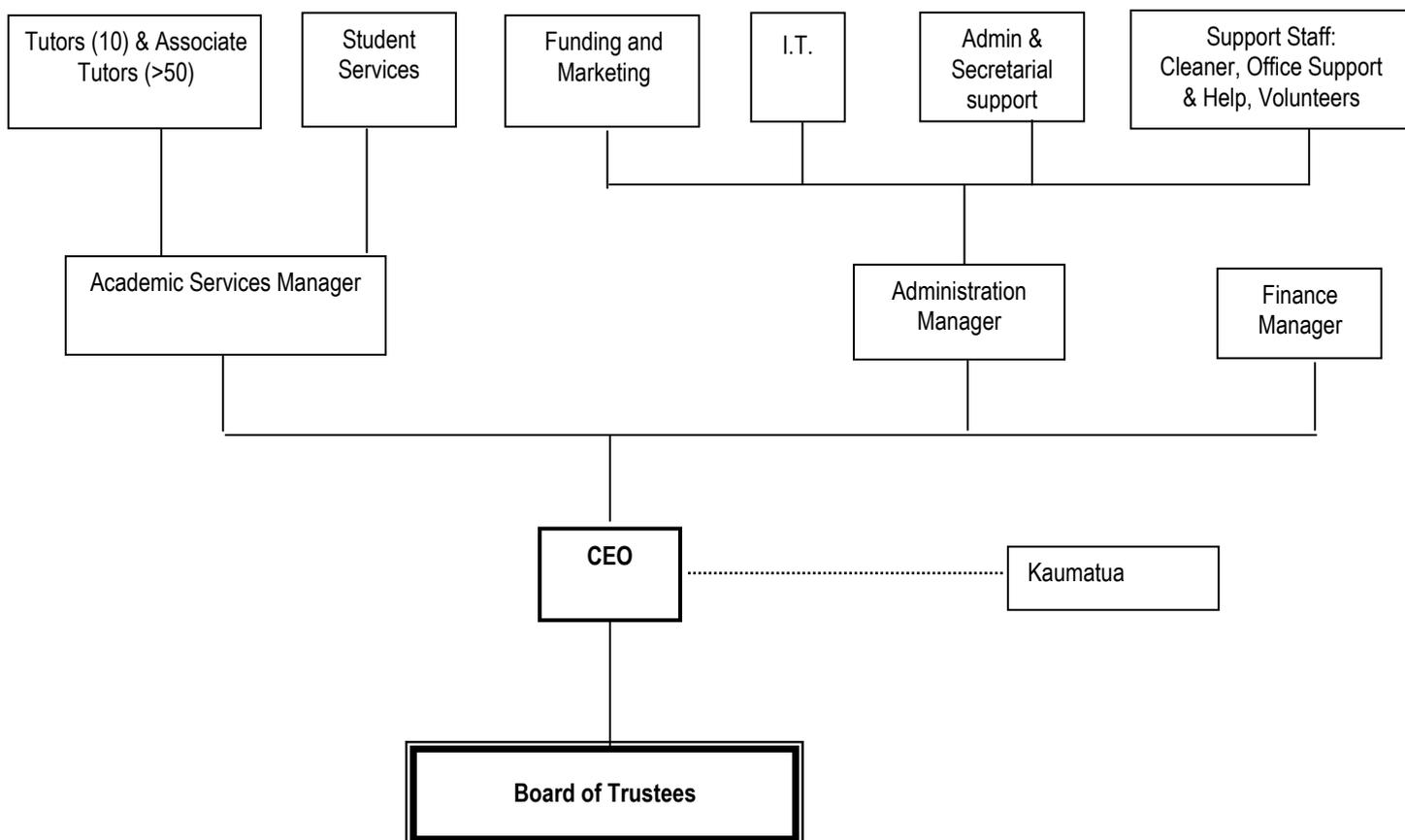
planning and curriculum development. This was accomplished, with aid of a specific research grant, and in 1994 the first course was offered. Each year has seen CPS move from strength to strength, offering more courses, developing an advanced course, and providing workshops and seminars, and producing publications.

3.3 Organisational Structure

CPS, while initially the 'brainchild' of Parentline, was established as a stand alone organisation – a Charitable Trust, supported by a Board of Trustees, and managed by a Chief Executive Officer (CEO). In 2007 the Annual Report reported that CPS had 11 permanent administration and academic support staff, up to 21 contract tutors and guest speakers, and a number of volunteers (CPS, 2007).

Figure 2: CPS Organisational Structure (2007)

CPS has a permanent staff of 11, located at head office in Hamilton. This staff is augmented through the services of 11 tutors and dozens of speakers from throughout the country, contracted on a course basis.



(Source: CPS, 2007, p.12)

3.4 CPS purpose and objectives

The CPS website states that the dream of CPS is that "New Zealand is the safest place in the world for children", and that the purpose of CPS is "to prevent harm and violence to children through education and awareness" (www.cps.org.nz). The Institute for Child Protection Studies Trust Deed, p. 1, states the following as the Trust's objects:

- 2.1 To ensure that children at risk of child abuse receive the most suitable response by providing appropriate and accessible training to those who have a role in preventing child abuse or are required to respond to children at risk of abuse specifically (but without limitation) by:-
 - 2.1.1 Improving the competency of those who have a role in preventing child abuse or who are required to respond to children at risk.
 - 2.1.2 To increase co-operation among all of those dealing with children at risk.
 - 2.1.3 To increase awareness of child abuse among the wider community.
 - 2.1.4 To foster and encourage research into child abuse issues in New Zealand.
- 2.2 To provide high quality training to the social services and related fields.
- 2.3 To provide training and consultancy advice services to those who have a role in supporting children and vulnerable adults.
- 2.4 The above objects shall be exercised in New Zealand and not elsewhere.

3.5 CPS services

CPS provides a range of services throughout New Zealand including child protection training, advice and consultancy services, and information provision and dissemination. They also actively promote collaboration and cooperation between agencies and within communities.

3.5.1 Training provider

One of the main areas in which CPS works, is as a provider of child protection training. The training is offered nationwide and is available to anyone, although most people who do the training are people who work with or have contact with children and families. CPS started with an eight-day certificate course in child protection. They soon began to offer an advanced course for people who had completed the certificate and wanted further training. Then the certificate course was moved from eight days to seven days, then to five days. In 1996 they began to offer one day workshops, and in 1997 held their first national seminar.

Currently, CPS offers their five day course, the *Child Protection Studies Programme*, their diploma course, *Child Protection Studies Diploma*, workshops and seminars on a range of topics, and their *All About Me* training for Early Childhood Educators. These courses are all delivered nationwide (see Appendix 1 for further details of the courses and content). Since the inception of CPS and up to December 2006, CPS had provided a total of 152 *Child Protection Studies Programmes*, 14 diploma courses, 285 one-day workshops, 15 seminars, and 56 presentations to a total of 10 815 students (see Tables 1 to 2, p. 20). In addition, a further 1 788 students have been enrolled in training in 2007, making the total number of students trained 12 603.

Providing training for teachers has been an ongoing focus for CPS. Teachers can and do attend the *Child Protection Studies Programme*, but a key barrier for teachers (and schools) was having to pay for relief teachers to cover the week that teachers do the training course. In August 2003, CPS received a three-year grant from Trust Waikato, to cover both the course fees and relief costs, for Waikato school teachers to attend *Child Protection Studies*

Programmes. With the assistance of the Trust Waikato funding, 39 school teachers completed the *Child Protection Studies Programme*, between 2004 and 2007.

Another recent addition to CPS's training services has been the *All About Me* training for Early Childhood Educators. CPS was approached by the New Zealand Police for assistance in training Early Childhood Educators in the use of a new curriculum-based child safety resource *All About Me* (see Appendix 1 for details of *All About Me*). Since the beginning of 2007 and up to September 2007, CPS has trained 1356 Early Childhood Educators in the use of *All About Me*.

Table 1: Number of courses provided (1994 to December 2006)

| | 1994 - 1998 | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | Total |
|-------------------------------------|-------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| Child Protection Studies Programme | 39 | 7 | 8 | 10 | 15 | 20 | 17 | 18 | 18 | 152 |
| Diploma in child protection studies | 6 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 14 |
| Workshops | 75 | 17 | 30 | 34 | 13 | 19 | 35 | 37 | 25 | 285 |
| Presentations | 0 | 0 | 0 | 14 | 14 | 16 | 0 | 0 | 12 | 56 |
| Seminars | 4 | 1 | 0 | 0 | 0 | 0 | 0 | 5 | 5 | 15 |
| TOTAL | 124 | 26 | 39 | 59 | 43 | 56 | 53 | 61 | 61 | 522 |

Table 2: Number of students trained by course and year (1994 to December 2006)

| Year | Child Protection Studies Programme | Diploma in child protection studies | Workshops | Presentations | Seminars | Total |
|--------------|------------------------------------|-------------------------------------|-------------|---------------|-------------|--------------|
| 1994 - 1998 | 545 | 76 | 1886 | 0 | 600 | 3107 |
| 1999 | 96 | 10 | 387 | 0 | 350 | 843 |
| 2000 | 110 | 8 | 505 | 0 | 0 | 623 |
| 2001 | 155 | 12 | 595 | 153 | 0 | 915 |
| 2002 | 209 | 12 | 228 | 337 | 0 | 786 |
| 2003 | 274 | 14 | 401 | 285 | 0 | 974 |
| 2004 | 263 | 11 | 652 | 0 | 0 | 926 |
| 2005 | 295 | 13 | 651 | 0 | 664 | 1623 |
| 2006 | 312 | 11 | 331 | 82 | 282 | 1018 |
| TOTAL | 2259 | 167 | 5636 | 857 | 1896 | 10815 |

Table 3: Number of students trained between January and September 2007

| | No. of Students |
|-------------------------------------|-----------------|
| Child Protection Studies Programme | 184 |
| Diploma in child protection studies | 15 |
| Workshops | 157 |
| Seminars | 0 |
| Presentations | 76 |
| All About Me | 1356 |
| TOTAL | 1788 |

In terms of quality monitoring and evaluation of their training services, CPS has a very thorough and structured system. All courses are evaluated at the end of each course, and tutors and CPS staff are encouraged to reflect on these evaluations and adjust future courses

accordingly and as required. One example of how CPS is constantly self-evaluating relates to on-going feedback from participants that 'five days' is a barrier to attendance, as it is difficult to find a week that they can leave their work and go on the course. CPS has recently (2007) sent out a survey to a number of past participants asking for further feedback on this. They presented participants with some options such as having a three day onsite course, with more reading and assessments to be done extra-murally¹⁷.

Another self-evaluation tool is the post-course reports. Participants on the *Child Protection Studies Programme*, are required to, as part of the course, write a post-course report three months after they complete the five days. In this report they have to, among other things, describe how they have put the training into practice. These post-course reports are circulated around all staff which helps all staff to have an insight into what happens in the training and how effective it is in raising awareness and encouraging action, or not.

Independent evaluation has also been a part of CPS since early in its history. As was discussed in the literature review (Chapter 2), in 1997 by Susan Hayes undertook a postal survey of CPS course participants and in 1999 Thelma Miller evaluated the certificate course for her Master thesis (published in 2000).

3.5.2 Advice, consultancy and information services

CPS provides support and advice to people and organisations, receiving, for example, daily telephone calls from people wanting advice on child protection matters. In 2001 CPS launched their web page (www.cps.org.nz) to provide information about CPS, their role and services and information and advice on child protection. CPS also has a number of publications, including their most recent book, *How can I tell?* written by Anthea Simcock, which was launched in August 2007. *How can I tell?* has information on how to recognise abuse or potential abuse. Other publications include:

- *Well Prepared* (a guideline designed to offer an example of how a child protection policy might look and be developed);
- *Safe Not Sorry* (a practical handbook on screening staff and volunteers in organisations responsible for children)

3.5.3 Collaboration and networking

Promoting collaboration and networking is an important facet of CPS's work to encourage inter-agency work and communication, prevent children from 'falling through the cracks', and provide support for people working in child protection. One way that CPS promotes networking is within their training courses. By limiting the number of people from one organisation who can attend any one course, and ensuring the courses are of sufficient duration to allow people time to get to know one another, CPS supports participants to build up networks. Another way that networking and collaboration is fostered is through the use of guest speakers within the courses. CPS endeavours to include locally-based guest speakers (e.g. Police, Refuge workers, CYFs staff, lawyers) in the five day courses to enable participants to meet local people that they can access later, rather than bringing guest speakers in from other parts of the country.

CPS staff also work hard to build networks and collaborative relationships between CPS and other key organisations and actively encourage their own staff to be involved in local community network meetings and other relevant panels and organisations. CPS's marketing strategy, is also a networking model, which involves, mail outs, email newsletters, phone calls and faxes. Participants and their networks are also utilised. For example participants are asked, on their post-course reports, to nominate other people or organisations that CPS could contact directly about doing the course.

¹⁷ This survey is still underway so no results were available to include in this report.

3.6 Summary points

- CPS was established in 1994 in response to research showing a need for child protection training and awareness.
- CPS is a charitable trust supported by a board of trustees and managed by a CEO.
- The purpose of CPS is “to prevent harm and violence to children through education and awareness.”
- CPS provides training in child protection through NZQA-approved programmes and also seminars and workshops.
- Up to December 2006 CPS had provided a total of 522 programmes, workshops and seminars to a total 10 815 of people from throughout New Zealand. A further 1 788 people were enrolled in 2007, making the total number of students to date, 12 603.
- CPS has produced publications on detecting child abuse, writing child protection policies and screening staff working with children.
- CPS provides support and advice to people and organisations, and has a web page (www.cps.org.nz) to provide information about CPS, their role and services and information and advice on child protection.
- CPS actively promotes interagency collaboration and networking amongst staff and course participants.
- CPS has well-developed self-evaluation and quality monitoring procedures, and has been independently evaluated twice before.

4.0 Participant Feedback

4.1 Introduction

In order to gather feedback from course participants about the CPS training a sample of participants was surveyed. Participants were chosen from the course roll books for the years 2005, 2006 and 2007. A total of sixty names were chosen from the roll books. Those who had email addresses or fax numbers were contacted and asked if they wished to participate in the survey. Only one person refused. The remainder were telephoned over a two week period. Some did not have current phone numbers or had left the workplace on file, and some were unavailable to be interviewed within the survey period. In total, 19 people participated in the survey.

The participant survey had a mixture of closed and opened ended questions (see Appendix 2 for a copy of the survey). Results for the closed ended questions were collated and tabulated. Most open ended questions were categorised, then collated and tabulated, with the exception of two questions which were analysed thematically.

A selection of post-course reports (23) from the past twelve months, were also reviewed. These reports are part of the assessment of the CPSP and have to be submitted three months after the end of the course. The students are required to report on what they thought of the course, what value it has, how it has changed the way they work, how they have implemented changes in their community, what new networks they have made, and whether they would recommend it to others. The post-course reports were analysed qualitatively.

The following sections present findings from the survey of 19 participants¹⁸ and the analysis of 23 post-course reports; a total sample of 42.

4.2 Survey participant demographics

Nineteen people were available to be surveyed. Of these, two were male and 17 female, six (32%) identified as Maori, three as Maori/Pakeha, and eight as European / Pakeha. Nine people were aged 50-59 years, six aged 40–49 years, two aged 30-39 years, and one aged 20-29 years and one aged over 60 years. Two participants were teachers, two were nurses, one worked for Family Start, twelve worked in community organisations, and one was a caregiver¹⁹.

Table 4: Gender and ethnicity of survey participants

| Ethnic group | Male | Female | Total |
|---------------------|-------------|---------------|------------------|
| Maori | 0 | 6 | 6 (32%) |
| European / Pakeha | 0 | 8 | 8 (42%) |
| Maori / Pakeha | 2 | 1 | 3 (16%) |
| Pacific (Tongan) | 0 | 1 | 1 (5%) |
| Other (English) | 0 | 1 | 1 (5%) |
| Total | 2 | 17 | 19 (100%) |

¹⁸ In this section, participants refers to survey participants, and students refers to the people who completed the post-course reports.

¹⁹ The majority of people who do the CPS training are female, most work in community organisations, and about 40% are Maori, so the survey participants are a good reflection of a cross section of CPS students.

Table 5: Age range of survey participants

| Age | Number |
|----------------|---------------|
| Under 20yrs | 0 |
| 20-29yrs | 1 |
| 30-39yrs | 2 |
| 40-49yrs | 6 |
| 50-59yrs | 9 |
| 60yrs and over | 1 |
| Total | 19 |

Table 6: Occupation of survey participants

| Occupation | Number |
|---|---------------|
| Community Worker | 4 |
| Social worker (non-CYF) | 4 |
| Teacher | 3 |
| Counsellor (community organisation) | 2 |
| Nurse | 2 |
| Violence prevention (includes Women’s Refuge) | 2 |
| Whanau Worker (Family Start) | 1 |
| Caregiver | 1 |
| Total | 19 |

4.3 Prior to undertaking the CPS course

Survey participants were asked to reflect on their confidence in identifying and acting on suspected child abuse and their understanding of child protection issues, prior to doing the CPS course. Results showed that, prior to the course, most (15) participants felt reasonably confident about their ability to identify signs of abuse. Less people were as confident about their ability to act appropriately if they suspected abuse, with only 10 stating they were reasonably confident, and eight that they were not at all confident. Thirteen considered they knew a little about child protection, prior to doing the course, and five stated they knew a lot about child protection.

Table 7: How confident participants felt about their ability to identify signs of abuse

| Confidence | Number |
|----------------------|---------------|
| Not at all confident | 3 |
| Reasonably confident | 15 |
| Very confident | 1 |
| Total | 19 |

Table 8: How confident participants felt about their ability to act appropriately if they suspected abuse

| Confidence | Number |
|----------------------|---------------|
| Not at all confident | 8 |
| Reasonably confident | 10 |
| Very confident | 1 |
| Total | 19 |

Table 9: How participants rated their understanding of child protection issues

| Rating | Number |
|--------------------------------------|---------------|
| Knew nothing about child protection | 1 |
| Knew a little about child protection | 13 |
| Knew a lot about child protection | 5 |
| Total | 19 |

4.4 Since completing the CPS course

In the survey, a range of open and close ended questions were asked in order to determine what learning had occurred and to what extent people were putting their learning into practice, since completing the CPS course. Post-course reports also provided some valuable information about students' learnings and actions since completing the course.

4.4.1 Confidence and knowledge

Survey participants

Survey participants were asked to reflect on whether the CPS course had increased, decreased or had no effect on their confidence in identifying and acting on suspected child abuse and their understanding of child protection issues. Results showed that, after doing the course, almost all (18) participants felt more confident about their ability to identify signs of abuse. All felt more confident to act appropriately if they suspected abuse, and all had an increased understanding of child protection issues. These results show a clear shift in knowledge and understanding from before and after the course.

Table 10: Whether the course increased or decreased confidence in identifying signs of abuse

| Confidence | Number |
|-------------------|---------------|
| More confident | 18 |
| No change | 1 |
| Less confident | 0 |
| Total | 19 |

Table 11: Whether the course increased or decreased confidence in ability to act appropriately if they suspected abuse

| Confidence | Number |
|-------------------|---------------|
| More confident | 19 |
| No change | 0 |
| Less confident | 0 |
| Total | 19 |

Table 12: Whether the course increased or decreased understanding of child protection issues

| Rating | Number |
|-------------------------|---------------|
| Increased understanding | 19 |
| No change | 0 |
| Decreased understanding | 0 |
| Total | 19 |

Participants were asked to comment on what they had learned from the CPS course, with a focus on what was most important for them. Comments were categorised and tabulated. While some people mentioned one main thing they had learned or gained from the course, others mentioned up to three different things.

Six people commented that attending the course had caused some self-reflection and widened their perspective about child abuse and child protection, and for many there was a shift to realising that they, as adults, had a responsibility to protect the children in their society. Five people commented on an increased awareness of the existence and the extent of child abuse. Learning about CYF processes was specifically mentioned by four people, as was being able to recognise signs and symptoms of abuse. Three people stated they now knew what to do, how to notify or report and three commented that they had built valuable networks with and learnt from the other people (from different organisations) who were attending the course.

Table 13: What they learnt from the course

| Learning | Number |
|---|---------------|
| Widened perspective/ self reflection | 6 |
| Increased awareness of child abuse | 5 |
| General new information | 5 |
| About CYF processes | 4 |
| Recognising signs and symptoms | 4 |
| What to do / how to notify | 3 |
| Networking with other agencies / people | 3 |
| Total | 30 |

Post-course reports

Similar results were found in the post-course reports. Students reported that their awareness of child abuse had increased, as had their ability to recognise signs and symptoms and respond to child abuse.

The impact of the course on my vocation as a social worker has been considerable. I am now more aware of the prevalence of child abuse and factors involved in child abuse. Because of the course content I am now able to recognise and respond to child abuse and neglect in a more informed, robust and effective manner.

Some students articulated very clearly how their self-awareness had changed as a result of the course.

I see warning signs in families much earlier than I used to. I was often confused about those signs. Now I know what they are and I am more confident in talking to families about support and how they might want to change. I used to worry that I might make things worse, but now I know that that is not a sufficient excuse to ignore what I see or hear. (my emphasis)

At the beginning we were asked if we had known any children that had been abused. I said no, but now, looking back, four of our children in our child care centre had been placed in care through CYFs. I realise now that I was in denial. (my emphasis)

4.4.2 Actions and behaviour

Survey participants

In order to determine whether participants had put their learning into action, they were asked to state whether they had directly encountered child abuse, since completing the course, and if so, what they had done about it, if anything. Participants were also then asked an open ended question about whether they had done anything else as a result of the course. Then they were read out a list of actions and asked to state whether they had done them or not, as a result of the course.

As Table 15 shows, 15 participants stated that they had directly encountered child abuse since completing the course.

Table 14: Whether they had encountered child abuse

| | Number |
|--------------|---------------|
| Yes | 15 |
| No | 4 |
| Total | 19 |

Each of the 15 was asked to elaborate on the child abuse situation(s) they had encountered and what they had done. Some had encountered situations of concern in the course of doing their job, even though their core work was not to assess child abuse or neglect, per se. For example, a Public Health Nurse shared the following example:

There was a single parent, living in a caravan with a six year old child. I was concerned about the situation. I contacted CYF and also informed the child's school of my concerns. I found out that CYF already had a file open and was involved with the child.

(Public Health Nurse)

Another community worker had concerns about a young boy and worked with her supervisor to monitor the family to ensure that the child was not being abused.

At work I noticed a two year old boy with severe marks on wrists. I notified my supervisors and we monitored boy and mum for 6-8 weeks. Didn't notice anything else in that time; if we did we would have notified CYFs.

(Community Worker)

Others who worked with vulnerable families shared how since doing the course they had changed their practice. Some 'noticed' the children more when they did home visits; they spoke of making sure that they saw the children at every visit or about making an effort to talk to the children and to get to know them. One community social worker shared that, as a result of her raised awareness and knowledge, she had reassessed the custody situation of some of the children in her care, and had moved the children to a new situation. A parenting educator shared how she had intervened when a child was assaulted in her presence, and how she now spoke in her parenting courses about the negative effects of negative parenting practices. These were things that they had not done prior to doing the course.

With home visits because the younger, preschool kids are there. I used to focus my attention on the adults. Now I sit and talk to the children - I have taken more notice of them. I make an effort to talk to the children, to notice how they are doing.

(Community Home Visitor)

I now ask to see all the kids when I visit a home.

(Community Home Visitor)

I have children in custody and have moved some of them from caregivers to another place.

(Community Social Worker)

Witnessing at a family's home. The mother was sitting with the child and then the mother was smacking - backhanded the child across the ear. I knew the mother well enough to say "use your words to let the child know what you want" (I was an adult and I didn't know what the mother was wanting the child to do!). Later, in a one to one training session I then

spoke to the mother about how we are role modelling- went through the physical abuse stuff with the mother. She said "that was how I was brought up" so we talked about what she could do instead. I also talk, in my parenting courses, about the negative effects of negative parenting - I didn't used to. I used to keep it positive - used to skip over the negative.

(Parent Educator)

Some had noticed situations out in public, and had intervened.

There was a situation where I was concerned. There was a teenage mum in a courtroom - in there with the partner. Her child, a toddler, was outside, by the elevators, screaming and crying. I called security. ... I was concerned that she was neglecting him. It made me wonder what was happening at home if she could neglect him in this situation. It was amazing to me that no one else was doing anything - just stepping over the child. The child appeared well-cared for, but this neglect was happening in this situation - she was busy focusing on the partner - he was having his court case, and she was neglecting her child.

(Community Worker)

I have approached people in the street who are yelling or, smacking their children and talk to them about how damaging it is for the child. It is always about the mother feeling stressed. I tell them you can get help for that. I help them to get help.

(Violence Prevention Worker)

One person shared a story of abuse and violence within her own family that she had intervened in.

I've seen it within my own family ... I have taken my grandniece off her mother as the stepfather was abusing the child. She lives with me now.

(Violence Prevention Worker)

Table 16 shows the results of the 'close-ended' question about actions people had taken since completing the CPS course, as a result of the course. As the table shows, all 19 of them had talked with family, whanau or friends about the CPS course, 13 had spoken publicly about child abuse, and all but one had recommended the CPS course to others.

Eleven had either reviewed or initiated a Child Abuse or Child Protection Policy at their workplace. Ten had offered advice or help to family, whanau, or a friend or neighbour who was treating their child badly, and five had approached a 'stranger' and offered assistance. Fifteen had intervened in a family violence situation; for some, this was within their own family or neighbourhood and for others, this was in the course of their work.

Nine had made a notification to CYF, six had reported a suspected child abuse situation to their manager or supervisor and one situation had been reported to the Police²⁰.

Nine had made changes to their own parenting / grand-parenting and 17 reported that they were more aware of children and listened to them more.

²⁰ Note: This is not representative of the numbers of reporting or notifications that happened as a situation may have been reported to a supervisor then to CYF or the Police, but was only one child/family or someone may have reported more than once but they were only asked if they had reported a situation.

Table 15: What they had done as a result of the course

| Action | Number |
|--|--------|
| Talked with family / whanau or friends about child abuse /child protection issues. | 19 |
| Spoken publicly (e.g. on marae or another public forum) about child abuse. | 13 |
| Recommended the CPS course to others (friends, family, workmates). | 18 |
| Reviewed or initiated a Child Abuse / Child Protection Policy(ies) at their workplace. | 11 |
| Approached a family member, friend or neighbour who was treating their child badly and offered advice or help. | 10 |
| Approached a 'stranger' (e.g. a stressed parent in the supermarket) who was treating their child badly and offered advice or help. | 5 |
| Intervened in a family violence situation. | 15 |
| Reported a child abuse situation to a supervisor or manager. | 6 |
| Reported a child abuse situation to Child Youth and Family. | 9 |
| Reported a child abuse situation to the Police. | 1 |
| Made changes to your own parenting / grand parenting practices. | 9 |
| Been more aware of children and listened to them more. | 17 |

Post-course reports

Similar results were found in the post-course reports. Students gave specific examples of what they had done, with some giving an insight into how they would have approached the situation prior to the course. For example, one student, a childcare worker in a teen parent child care centre, clearly described how she had approached a neglect situation with one of her clients and also explained how she used to handle similar situations prior to the training.

One of our toddlers had very bad school sores. I talked to mum about how he needed to go to the doctors. She said she had been and had medicine. I then talked to our social worker asking if she could take her home so she could get his medicine (I didn't believe mum). Mum came back with Pamol.²¹ We then made an appointment and the social worker took them both to the doctor. In the past I used to be very believing of what the mums would tell me. I am now more careful, because our mums are very young our babies are high risk for abuse, although not always on purpose.

Reviewing their organisation's child abuse policies was another common theme in the post-course reports. One person reported that not only had they familiarised themselves with the policy, but that the other workers in their workplace had done the same thing.

I have now familiarised myself with our child abuse prevention policy, so I clearly know the procedures to go through, and other childcare workers in our child care have done the same.

²¹ Pamol is a paracetamol-based pain medication. It is not suitable for treating school sores (impetigo) as they usually require antibiotic treatment.

Some of the knowledge that I gained through the course has been passed onto my work colleagues informally and at a staff meeting. One of the positive outcomes of this meeting was that we intend, as a team to update our Child Abuse Policy.

One student, a Well Child nurse, reported on how the networking aspect of the course had had a direct impact on her referral rate.

Through the great interactions with the different agencies that attended the course I am now more confident in referring whanau onto outside agencies [as] I know what they will do for the whanau. I believe the course has given me the confidence to refer or ask for advice from outside agencies. This had lead to an increase in my referral rate, which I now do with confidence that it is supporting the health and safety of the child.

Others commented on how they had changed their work practices since doing the course – paying more attention to the children they encountered in their work.

Being Tautoko Whanau with Family Start in my professional capacity... this gives me the opportunity to sight the child when on a home visit (child is the client). I will make sure I have sighted the child. If the child is not present I will enquire as to the child's whereabouts. If the child is sleeping in another room, I will ask to see the child.

4.5 Feedback about the course

Survey participants

Feedback about the course, from survey participants, was overwhelmingly positive. In fact many people started the interview, before any questions were asked, with telling the interviewers all about what how valuable the course was. All nineteen would recommend the CPS course to others. One of interesting points that was raised was that some people spoke of, initially, being less than enthusiastic about the doing course because they either felt that they knew the content and/or that the time commitment required was (five days) was too much. However once they had done the course they made comments such as "it exceeded my expectations" and "you couldn't do it in less than five days".

Participants made general positive comments (e.g. "Brilliant. The whole course in general was great from beginning to end"), as well as some specific comments about what they found useful or were particularly impressed with. For example:

Our presenter was adept and professional

Networking was great; finding out about other organisations.

Very informative. It consolidated the knowledge I had - more in-depth knowledge.

I can't say I 'enjoyed' the content. I found it very useful. The days went quickly. I couldn't see that you could put it into less days. Five days is an appropriate length of time.

Really, really good. Really impressed. Relevant information at a good pace. I enjoyed the interaction. The facilitator was really, really cool. Good five day workshop - interactive, informative, made me question the way I did things.

Table 16: Whether they would recommend the course to others

| | Number |
|--------------|---------------|
| Yes | 19 |
| No | 0 |
| Total | 19 |

Post-course reports

Similar results were found in the post-course reports. Students had feedback about the course that ranged from very positive to positive. For example:

I would recommend this fun-filled, triggering and soul-searching week that will make you cry, bring all your judgements to the surface and leave you with an inspired sense of purpose as a professional, a parent and an individual.

This course was without a doubt the most inspiring and well facilitated professional development I have undertaken as a parent and also as a youth worker.

I found the Child Protection Studies Programme to be well facilitated and informative.

They were no significantly negative comments in the 23 reports reviewed. Some noted some areas for development. For example, a number of people commented on a preference for Maori tutors.

It would have been nice to have maybe Maori tutors. [our area] is a majority Maori populated area and ... Maori for Maori works well here.

Of the 23 post-course reports reviewed, 17 would recommend the course to others, six did not record a response to the question, and no one said they would not recommend it.

4.6 Who needs training?

Survey participants

When asked who should do child protection training, survey participants mentioned a variety of different professions (e.g. social workers, community workers, doctors, teachers, nannies), most of whom had contact or worked in some manner with children or families.

There was a significant focus on teachers, with eleven people mentioning teachers specifically, as a professional group that should have child protection training. The rationale for this was that teachers have daily contact with children and are in a position to be aware and notice when children may be being abused.

Some people (5) mentioned that everyone should do child protection training; that is that everyone in society needed to be aware of and understand child abuse issues and needed child protection training.

Post-course reports

Similar results were found in the post-course reports. One student wrote the following reflection, in answer to the question of whether they would recommend the course.

I remember thinking, at the course, that wouldn't it be great that if every organisation in New Zealand that worked with children e.g kindergartens, Plunket, schools, sporting organisations, swim school complexes, scouts etc, had one person working on their staff

that had had Child Protection Studies Programme training, and they educated the rest of the staff on the information. I am sure that would go along way to preventing and reducing on-going child abuse.

4.7 Future directions

Survey participants were asked for their opinion on what else CPS could be doing, what else New Zealand as a society could or should be doing to protect children and prevent abuse. Then they were given some 'ideas' and asked to state whether they considered these good ideas or not.

Overall participants were very positive about what CPS did do, with many commenting that CPS should "just keep doing what you're doing". People were prompted for their ideas on other things CPS could do and suggestions fitted into three main categories:

1. Promote CPS and CPS training more.

The public needs to be more aware of CPS and what they do. They need to promote who they are.

Be more known - increase the CPS profile.

2. Raise public awareness of child abuse (i.e. via the media).

Advertising (TV etc). Use well known role models. Get more publicity about child abuse.

Advertising media - awareness of child abuse.

Have constant health information on TV to give the general public ideas of what they can do if faced with issues. Have more public awareness.

3. Provide more training (run more seminars; have parent training programmes; programmes for teachers).

Taking it into the schools, running shorter courses for teachers - eye openers.

Present course to parents at kohanga reo.

Teach all parents

When asked what New Zealand as a society should or could be doing to prevent child abuse and protect children, comments generally reflected the view that everyone within a society needed to take responsibility.

Adults are all responsible for all children.

Keep our eyes and ears open. Everyone needs to get involved in protecting children.

There were comments that as a society there was a need to raise awareness of child protection and child abuse, and that the government had a responsibility to put more resources into prevention (including parenting education), and into training in child protection.

Put more resources into prevention.

The government should put in some funding to train the people. I told my MP to fund CPS!

I don't think that taking a child away from its mother is the best thing to do; that makes it worse; that's traumatising for the child; we need to help the mothers. Men in prison for abuse should have child abuse training to learn how they are damaging their children.

There was also views expressed that recognised some of the more intangible sources of child abuse (i.e. a lack of belonging or identity), as well as more tangible sources such as racism.

We have to start in our own home, then community. We need a spiritual involvement, a sense of belonging.

I think if racism stopped happening - stop Maori bashing. Have less of a negative focus, because that has a flow on effect.

Once participants had given their views, they were asked some closed ended questions to gain their views on some specific ideas.

As Table 15 shows most (16) people agreed that having a 'CPS tick'²², was a good idea. The one person who did not think it was a good idea considered that resources could be used more effectively (i.e. spending time and money certifying organisations might take away resources from other key protection / prevention work).

Eighteen people agreed that child protection training should be compulsory for all people who work with children, and agreed that child protection training should be in all standard training programmes.

People were less confident about training 'people entering people's homes' (e.g. plumbers, builders, meter readers etc.) in child protection with only ten considering it a good idea, two saying no, and six being unsure. There were two main reasons given by people who were unsure or who did not agree. These were (i) that they did not think that people would be interested or be able to be encouraged to do child protection training and (ii) that they were concerned that they might see a 'one off' situation and take inappropriate action.

Table 17: What participants thought of some specific ideas

| | Yes | No | DK | NR |
|---|-----|----|----|----|
| CPS to certify organisations in terms of child safety (' the CPS tick') | 16 | 1 | 1 | 1 |
| Have compulsory child protection training for all people who work with children (e.g. teachers, nurses, doctors, caregivers, dental nurses, midwives, social workers) | 18 | 0 | 1 | 0 |
| Have child protection modules in all standard training programmes for professions who work with children | 18 | 0 | 1 | 0 |
| Have child protection training for anyone who enters people's homes (e.g. plumbers, meter readers...) | 10 | 2 | 6 | 1 |

²² A CPS tick, refers to the idea of CPS being a certifier of organisations and being able to award a 'child safety' tick to organisations that met certain criteria in terms of numbers of staff trained in child protection, having certain polices and /or resource people etc.

4.8 Summary points

- Nineteen people, who had completed a CPS course within the past two years, participated in a telephone survey about CPS, and as well, 23 post-course reports from 2007, were reviewed and analysed.
- For survey participants, completing the training, had resulted in:
 - increased knowledge, and confidence in their ability, to identify signs of abuse and to act appropriately if they suspected abuse;
 - increased understanding of child protection issues.
 - broadened perspectives about child abuse and child protection, and a shift to realising that they, as adults, had a responsibility to protect children;
 - an increased awareness of the existence and the extent of child abuse;
 - an increased knowledge of CYF processes;
 - the development of valuable networks with people from different organisations.
- Fifteen survey participants had encountered a child abuse situation since completing the course and all had taken some action in regards to it.
- A number of the survey participants and post-course report students were able to specifically describe how they had changed their work practice, as a result of the training, to be more aware and more proactive when working with children, families and whanau.
- Feedback about the training was overwhelmingly positive with all survey participants and most post-course report students recommending the training to others.
- A significant number of survey participants recommended that teachers should receive child protection training.
- When asked what else CPS could do, survey participants suggested the following:
 - promote CPS and CPS training more;
 - raise public awareness of child abuse (i.e. via the media);
 - provide more training (run more seminars; have parent training programmes; programmes for teachers).
- When asked about some specific ideas for CPS to undertake or promote, survey participants gave the following answers:
 - sixteen agreed that having a 'CPS tick' was a good idea;
 - eighteen agreed that child protection training should be compulsory for all people who work with children;
 - eighteen agreed that child protection training should be in all standard training programmes;
 - ten considered it a good idea to train 'people entering people's homes', two did not, and six were unsure.

5.0 Interview Findings

5.1 Introduction

In order to gain an understanding of what CPS does and why, and what the key strengths and perceptions of CPS are from a range of viewpoints, a number of key informants were interviewed. These included three people from outside of the organisation but who work in, and have considerable long term experience in the family violence sector, and who have knowledge of CPS and its work, two CPS board members and eleven CPS staff.

The purpose of interviewing key informants from outside CPS, was not to get a 'representative sample', but rather to gather the views of people with an expertise in the area of family violence and /or child protection. These key informants were chosen primarily because of their experience of working in the area of family violence and/or child abuse, and their corresponding 'expertise' in the issues and the factors that need to be considered to effectively prevent child abuse. They had also all sent some staff from their organisations to CPS training.

The purpose of the interviews with staff and board members was to gain different perspectives of the work of CPS from within the organisation. These people are the 'experts' on CPS as they are intimately connected to it, and have an understanding of the history and the issues that are involved in working in child protection training. It is important to note that CPS has a number of staff and board members who have a long-standing (up to and over 30 years) experience of working in the child protection sector. Some CPS staff, including the CEO, have been with CPS since it started, and were instrumental in setting it up, and therefore have a wealth of first hand knowledge and experience of the extent to which their work has made a difference or not.

Interviews were analysed thematically and results reported in the following sections. Where relevant it is noted where the views originate from; that is whether they are from staff, board or outside key informants.

5.2 Perception of CPS

CPS was viewed very positively by staff and board members and also by those working outside of CPS.

It is very professional. They've always tapped good speakers and facilitators. They take delivery of their workshops seriously. They have good tutors and the administration is good. ... It is a good organisation. It is well-structured and it has a functional board.

(Key Informant)

People who have done the programmes like them. People speak very highly of CPS.

(Key Informant)

It's like a family here. This is the nicest place I've ever worked.

(Staff)

5.3 Has CPS made a difference?

Staff, board members and key informants were asked to venture a view as to whether CPS had raised awareness and understanding of child abuse and neglect. One key informant with a significant history of working in the sector considered that, in their view, there was definitely a greater awareness within the local (Hamilton / Waikato) community sector, and they attributed this to CPS.

Within the Waikato we're talking about the same thing - child protection, risk, people mention "emotional neglect" [and you know what they mean]. There's a great level of understanding within the [local] community. CPS has championed it for a long time. The "ripple" effect has happened and the information gets out there, through the networks.
(Key Informant)

Staff were also asked for their perceptions on whether awareness had risen. Although these are informants' personal opinions, such perceptions are informed by the persons involved having worked in this sector for many years, and having a high level of knowledge and awareness of child protection issues.

I think awareness has risen now [compared to 1994 when we started]. I would say that many of the groups [that we surveyed back then²³] would now say that this is an issue. The schools, the scouts would say "yes this is relevant to us."
(Staff)

A number of staff members commented on the recent repeal of Section 59 of the Crimes Act (1961), shifts in the status of children, and shifts in societal views on children. They had also noticed that it was easier to 'sell' the training now because people were more aware.

There has been a shift in the status of children. Children's status has improved. Just look at the laws - no smacking, videotaping [for legal purposes] etc.
(Staff)

There are organisational changes - now this [child protection] is part of people's job. It was harder to sell the course then, than it is now. Many participants didn't have basic child protection.
(Staff)

Awareness has increased. CPS and Parentline and others have raised that awareness. Child abuse hasn't increased - it's just more out in the open.
(Staff)

Although there has, in the opinion of the interviewees, been a shift in awareness of the existence of child abuse, CPS staff and tutors commented that there was now a tendency for people to think they 'knew it all' about child protection, when in fact, there are often significant gaps in their understanding.

Around the time that Delcelia Witika was killed, people "knew something was wrong but didn't know what to do." ... Now, people are aware in the professional sector, aware that it exists and is a problem, but people think they know about child protection and they still

²³ This is a reference to a survey of people who had contact with children, undertaken by Parentline in 1994. The results showed a lack of awareness of child abuse e.g. "we don't have child abuse in our school" (see chapter 3 for more detail).

don't know stuff. A classic was a senior teacher who said "we really want to do [training] but it's too expensive, so I'm only going to send teachers from the areas that need it" i.e. low socio economic areas. People also don't know that there are other options - i.e. not just CYFs and Police; that there are social services - they think "but they're for poor people and we don't fit that group."

(Staff)

Some staff who were involved with the academic services and tutoring side of CPS were able to describe how CPS had adapted their training to the growing awareness, and how they had incorporated the growing body of research evidence into their training.

It's the same message, but the people on the course twelve years ago were at a different stage in their understanding, so now we are having to adapt some of the information. There are other changes in society as a whole (e.g. the internet) which means we are having to change our training.

(Staff)

Research over the years has changed. When we started there wasn't a lot of research, but now we have valid, strong research, which we use in the training.

(Staff)

Staff were able to articulate many examples of actions taken by course participants as a result of the training. These examples were gleaned from post-course reports, which all staff read, and personal communications with course participants. Actions taken match up with findings from the survey participants and the post-course reports reviewed for this evaluation (see Chapter 4), and also findings from Miller's (2000) thesis. These ranged from intervening directly in a child abuse or violence situation, to becoming their workplace resource person on child protection, reviving their Child Protection policies, and speaking to family and whanau, or members of the public about child abuse and their behaviour.

There's lots of people saying "I've done things." More observant. More inspired to act. One lady at a market in Otara had seen t-shirts with the slogan "My Daddy can bash anyone." She had walked past, and then turned around and went back and talked to the stall holder about child abuse and prevention, and the harmful message that the t-shirts were promoting. Then when she was back at the market the next time she went to that stall and they had removed those t-shirts.

(Staff)

A lot of people are becoming the [child protection] resource person in their organisation.

(Staff)

A lady who stood up at her mother's tangi - her nephew was a child that had been killed by his caregivers - and she said that she had seen a photo of this boy with a bruise on his cheek, and said she would have done something, if she had done the course before. She spoke at her mother's tangi about how her mum was violent and how that [violence and child abuse within the whanau, hapu, and iwi] needed to change.

(Staff)

People who've done the course go back and pull out the [workplace] Child Protection Policy and it [the training] inspires them to make it a more 'living' policy.

(Staff)

One Diploma graduate, was at the airport in a queue and a kid was 'playing up' and Dad hit the child. The woman thought "I'm now a child advocate. I have to do something." So she spoke to the Dad about what he's done. And she said there was no way she would have done that before the training, because she now knew that she had a responsibility.

(Staff)

Another example was a lady driving down the road. She saw a child on the road. So she stopped and figured out where he was supposed to be. She took him home and found a drunk Dad. She waited and the mother came home, and she spoke to the mother. She would never have thought of doing that before doing the course.

(Staff)

5.4 Critical success factors

The analysis of the interviews identified some of the key strengths of CPS; that is things that are considered to be highly important and/or critical, to the success of CPS. People also commented on areas that were potential 'risks' for CPS; that is things that CPS needed to consider or be aware of that could undermine or negatively affect their work. These have been grouped together under the Critical Success Factors heading, as strengths and risks are often interrelated and are often just different ways of looking at the same thing²⁴.

5.4.1 Networking

One of the key areas identified as a strength was the extent to which CPS networked with other organisations, and how they also deliberately encouraged and facilitated participants to build networks as part of their training programmes. The networking was also commented on by the staff of CPS, which indicated a clear understanding of the importance of building networks and links to help facilitate a co-ordinated approach to child protection (see literature review, Chapter 2). A challenge for CPS has been to ensure that the networking remains an integral part of the courses that are held outside of Hamilton and the Waikato region. One policy is to make sure that courses' guest speakers (e.g. Police, Refuge. Lawyers) are from the local community, even if the course tutor is not from the local area.

I am a fan of doing that (child protection) training in such a way that it enhances community links.

(Key Informant)

The course is designed, structured, to promote networking, to raise awareness. If people got sponsorship then they had to report back to CPS and to report to three other organisations. Also the set up - had to be no more than three from any one organisation within a course.

(Staff)

Networking is part of the course. Meet the people who can do something. Build a relationship with the people who can do something, who you can refer to. Other groups do 'in house' training but CPS actively facilitates networking.

(Staff)

²⁴ i.e. a strength may become a risk if it is not adhered to and a risk becomes a strength when it is managed appropriately. For example, if having good quality staff is a strength then not having them is a risk, and vice versa.

One person shared an example of how the networking had helped a specific family.

One Police officer had a situation with a family - he was looking for some help for that family. Did the course and met someone there who was able to help that family. Networking! If we can get police and teachers and others [knowing each other] then that community is tighter.

(Staff)

5.4.2 Marketing

Networking is also an integral part of marketing, and being able to effectively market both CPS and the training programmes was vital. One point that was raised was marketing effectively in areas other than Hamilton.

The first course in a new community is hard to fill. ... It's harder to promote to other communities because we're not based there. Exposure for CPS is a big thing and we don't have a lot of it. It's hard to get into communities. Some tutors have done some visiting and marketing for us. In an ideal world we would have someone in every place. We can get people in communities to 'work' for us but sometimes we don't know how respected those people are in their communities. Marketing is about building, maintaining and keeping relationships.

(Staff)

One key informant had sent many of her staff on CPS training courses, but had not done a course herself. Although staff gave consistently good feedback and she considered the courses very worthwhile for her staff, she notes that she had not really realised how good the training was. This became obvious to her more recently, when she had attended CPS training courses and she realised more directly, the quality of the training. She saw this as a marketing opportunity, and it highlighted something that staff have also noted; that is that the course participants are often the best advocates to 'sell' the courses.

If I had done the course myself I would have sent more people because I didn't realise [before I attended] what a high standard it was. CPS might not have sold [to me and my organisation] how excellent it was. It could be marketed more.

(Key Informant)

Ex-students are part of the network. We try to find contacts within a community and go back to them.

(Staff)

Our students are our biggest fans.
(Staff)

5.4.3 Understanding child abuse and violence against women

As noted in the literature review (see Chapter 2), research indicates is that there is an overlap between male violence towards women, and child abuse. CPS was viewed by one key informant as having a good understanding of child abuse within the wider picture of family violence and violence against women, and they emphasised the importance of maintaining that understanding.

What I like about CPS is that they are good at working with women's advocates. Historically child advocates and women's advocates don't cross. This is a problem because child advocates don't understand violence against women and women's advocates don't understand violence against the child. Those two groups need to work

together and CPS understands that...It is really important that we keep women and children's interests as being one and the same; that they are not seen as separate. It's important to keep that message alive and in front of people. Gender is a really really important part of understanding violence and abuse.

(Key Informant)

This is not to suggest that CPS broaden into being a family advocacy, rather than child advocacy service, and in fact their ability to be clear on and maintain their focus on child abuse, was also highlighted as a key success factor, by another key informant.

They are clearly about child abuse rather than family violence. ...they need to stay in that speciality. They should stay child-focussed.

(Key Informant)

5.4.4 The training programmes

The importance of the child protection training undertaken by CPS was voiced by a number of people, and key informants saw a continuing need for the training and for expanding the training, into the community, into schools and society in general. One key informant was of the view that there would be an increasing need for child protection training as a result of the increasing awareness and media attention to issues of family violence²⁵, and that CPS had a leading role to play in providing that training. The risk for CPS was that they might not, logistically, be able to meet the need and that as such, they needed to plan ahead in this area.

They need to position themselves to keep their quality ...There is going to be a huge need for the general populace to find out [about child protection]. They need to cater for the community. The community is hungry for knowing what to do.

(Key Informant)

The quality of the training programmes was also commented on as a key strength of CPS. This raises the point that it is important to ensure that CPS maintains its high standard. Maintaining the standard and also expanding the training and other services is, in one key informant's view, a balancing act. Essentially, she stated, that if CPS was to continue to expand (she referred here to the fact that CPS has expanded to offering programmes nationally, for example), they needed to ensure that they didn't stretch themselves too thin and in the process, lose their high quality. Making sure they continued to employ good tutors was an example of ensuring that quality was maintained.

They have to be really careful to under-promise and over-deliver. Their growth strategy has to keep up. They need to position themselves to keep their quality. Who they employ is critical factor. I had no experience with [my] staff having bad tutors [on CPS courses].

(Key Informant)

5.4.5 Self-evaluation

As was mentioned in Chapter 3, CPS participants on the five day course, have to, as part of their course, write a post-course report three months after they complete the five days. In this report they have to describe how they have put the training into practice. The report ensures that, as one staff member put it "people don't just get a certificate without any demonstration of knowledge", as well as giving CPS valuable and ongoing feedback on their effectiveness.

²⁵ The recent media attention to another child (Nia Glassie) being killed, and the government's continued commitment to raising awareness of family violence, with a planned media campaign and other strategies, were the context in which these comments were made.

Continual monitoring and self-evaluation are keys to ensuring that CPS is able to position itself as the leading provider of child protection training.

5.4.6 Funding

Funding is always the challenge for CPS. As a non-government organisation their main source of funding is from donations and grants from various trust, as well as participants paying towards courses costs²⁶. CPS has managed to continue to offer high quality child protection training and other advocacy services over the past twelve years, despite not having any long-term guaranteed income. While they receive grants and other in-kind support from many trusts and organisations, "funding is always an issue."

As one staff member noted funding impacts on effectiveness in a very practical way; it essentially limits what can be done.

CPS has made a difference, but we haven't been able to do as much as we wanted to [because we have not had the funding].

(Staff)

5.5 Where to from here?

The previous section highlighted some of the key success factors and potential risks for CPS. There was a high level of support for CPS to continue with the work they currently do, to maintain their high standard, and their quality monitoring. In addition key informants, staff and board members also provided comment on other areas that CPS could expand or consider.

5.5.1 Child safe tick

Two of the key informants, and also staff and board members, talked about CPS as a certifier of organisations²⁷; that is that CPS would develop criteria²⁸ for, and certify organisations as 'child safe'. This would help set safety standards, raise the profile of CPS and also child safety and child abuse issues, make child protection training more accessible as organisations would have to have some trained staff to qualify for a 'tick'.

Child protection training is as important as a first aid certificate.

(Key Informant)

One of the Trusts who has funded us also funds other organisations so maybe we should get them to require a child protection tick for all the organisations they fund.

(Staff)

5.5.2 Training

There was a view that CPS should continue to focus on being a child protection training organisation. They were clearly skilled and experienced and provided high quality training, which was well received by participants and resulted in raising awareness and preparedness to act. One key informant also discussed the need for CPS to determine whether it was going to be *the* provider of child protection training, and if so, that the sector needed to be encouraged to support CPS in this. They raised the suggestion that groups within the child protection sector should, for example, put CPS child protection training into their strategic

²⁶ CPS charges people a fee to attend the training courses, but this only covers part of the course costs – the rest has to be sourced from various sponsors.

²⁷ Note: This is something that CPS is considering and so it is not surprising that staff and board members mentioned it, however two key informants also considered it a promising idea.

²⁸ i.e. criteria might include having child protection policies, having a certain number of people trained in child protection, having a child protection resource person etc.

plans, then go to CPS and book that training in advance. This would enable CPS to be able to plan better and to have more solid support within the sector.

Who should be trained?

People were asked about and also commented on who CPS should be training. The education sector was consistently referred to as being critical.

There should be mandatory training - anyone who works with children needs understanding and knowledge in this area. Education, medical/health. I cannot believe that after all this time, that the education sector is still not on board with this stuff.

(Board member)

One key informant had spoke about a teacher training initiative that CPS had pursued and which they had had some initial involvement with. They considered that the approach being suggested would contribute to organisational changes within schools, which was a very positive move.

The idea was to recruit two teachers per school, do some basic child protection stuff, then [the teachers] go back to the school. It was a great project. I really liked the approach. There are lots of places where child abuse and family violence comes to the notice of people outside the family and those opportunities go begging and people don't do anything or are particularly unhelpful. The training of people identifying and responding and making that part of organisational change within a school. Excellent.

(Key Informant)

While there was a view that everyone in society needed to understand child protection issues, there was a prioritised need for training for people working with or in contact with children and families.

Potentially there are all sorts of places. Teaching is obvious ... but what about underage rugby coaches, scouts, everybody knowing about child abuse. Quite a lot is happening in health - there is a lot of work being done there - Plunket, midwives, A & E - all sorts of health services.

(Key Informant)

Mandatory training

The need for child protection training to be mandatory and/or to be included within professional training programmes was a consistent theme. It was considered that CPS had a leading role to play in encouraging mandatory training and also as a provider of training.

I'd like to see them (CPS / child protection training) in teacher training courses. It's not CPS's fault. It's the University's fault. They are not good at making space for CPS.

(Key Informant)

Creating national contracts so people have to do this.

(Staff)

5.6 Summary points

- Sixteen people (staff, board members, and key informants) were interviewed about CPS, and all had a positive perception of it.
- There was a perception that CPS had been instrumental in raising awareness of child protection issues within the past 13 years.

- Staff were able to give many specific examples of actions taken by course participants as a result of the training.
- The following factors were identified as being critical to success for CPS and for child protection in general:
 - Networking: CPS is well-networked with other organisations which is critical for marketing. CPS deliberately encourages and facilitates participants building networks as part of their training programmes which is a key to successful child protection training.
 - Marketing: CPS should (and does) utilise course participants to market the CPS courses as they have first hand knowledge of the course quality.
 - Understanding family violence and child abuse: CPS should (and does) need to maintain an understanding of child abuse within the wider picture of family violence and violence against women, as traditionally women's and children's advocates do not understand the inter-relatedness of violence against women and child abuse.
 - The training: CPS provides high quality training and needs to continue to maintain their high standard;
 - Self-evaluation: CPS has ongoing self-evaluation and monitoring processes which assists them to keep track of effectiveness and to continually improve;
 - Funding: CPS has continued to provide and expand their child advocacy services over 13 years despite having no guaranteed funding; the constant need to find funding is an ongoing challenge for CPS and is critical to it achieving its vision.
- Interviewees were supportive of CPS being a certifier of organisations and expanding their training into the education sector and into lobbying for mandatory child protection training in professional (i.e. teacher training) training programmes.

6.0 Summary

*"I used to worry that I might make things worse,
but now I know that that is not a sufficient excuse to ignore what I see or hear."*
(CPS course participant)

The purpose of this evaluation was to determine the effectiveness of CPS in meeting its aim to prevent harm to children through education and awareness, and to determine what would make it more effective. The main conclusion from the evaluation was that CPS is effective in training people in child protection and raising awareness of child abuse issues and that it could be more effective if it had the resources and mandate to expand its training and other services.

Since its inception in 1994 CPS has grown from strength to strength. They have, between 1994 and December 2006, provided a total of 522 child protection programmes, workshops and seminars to a total 10 815 of people from throughout New Zealand. In addition, a further 1 788 people have been trained in 2007, making the total number of students, 12 603. CPS has also produced publications on detecting child abuse, writing child protection policies and staff screening, has a website, provides advice to people phoning in, and promotes inter-agency collaboration.

The evaluation clearly showed that the people who have undertaken CPS training have increased child protection skills and knowledge, and that they have utilised those skills in their work and personal lives. These results are consistent with the two previous independent evaluations undertaken by Susan Hayes in 1997 and Thelma Miller in 2000, which were reviewed for this evaluation, and with the results of CPS's ongoing internal monitoring activities.

A review of the child protection literature also clearly supports the approach and the logic that CPS has taken to child abuse prevention. Specifically, there is consensus in the research literature that child abuse and neglect is a complex and multifaceted problem requiring a multifaceted response. An ecological approach to child protection is recommended which encompasses primary, secondary and tertiary strategies, and CPS fits within this approach as a primary strategy. Their awareness raising, information provision, and advocacy work are key factors in successful child protection.

The literature also supports providing training in child protection to people who work with children and families, both professionals and paraprofessionals, and to members of the community. That training should be of high quality and should raise awareness of child abuse, teach people to be able to recognise signs of abuse, to know what to do if they suspect abuse has occurred, and to understand the role and procedures of the child welfare (i.e. CYFs) services. CPS training programmes are of a high quality and cover the required topics.

While there is no doubt that CPS has facilitated significant changes in the skill level of its course participants and that it has been a consistent voice advocating for children, for the past 13 years, it is also clear from the evaluation that CPS could have been more effective if they had had the funding to accomplish all they sought to do. Essentially the effectiveness of CPS is only limited by the funding; they have the skills and the knowledge to train professionals working with children, to certify organisations, to provide advice, and to promote inter-agency collaboration, they just do not have the funds to do this to the level needed.

Despite recent law changes, a percentage of children in New Zealand continue to be abused, neglected and murdered. There is a need, in New Zealand, for example for mandatory child protection training for professionals who work with children and families. There is also a need for everyone in New Zealand, to be aware of signs and symptoms of child abuse, to

understand child protection services' processes, and as a society to have a 'zero tolerance' for child abuse. It is logical that CPS should be resourced to be integrally involved in mandatory child protection training and other child advocacy services, as they have a proven track record in providing high quality and effective child protection training and advocacy services.

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Appendix 1: CPS Training Programmes

Child Protection Studies Programme - 5 Days

Objective

To enhance the skills of those who are involved with children, by giving them the knowledge and confidence to take positive action to protect children, and to act effectively when children have been abused.

Content

UNDERSTANDING THE NATURE OF CHILD ABUSE: At the completion of this section, learners will be able to provide definitions and examples of child abuse. They will be able to identify historical, current and changing attitudes to child abuse. They will show an understanding of cross-cultural issues around child abuse and of the prevalence of child abuse in New Zealand.

UNDERSTANDING THE CAUSES OF CHILD ABUSE: Learners will be able to identify factors that can lead to children being abused, and situations that may put children at risk. They will consider child abuse in the context of institutions, society and the impact of culture.

UNDERSTANDING THE EFFECTS AND SYMPTOMS OF CHILD ABUSE: Learners will be able to describe the signs and systems of all types of abuse on children and examine how child abuse affects children and their families and the legacies it leaves.

RECOGNISING CHILD ABUSE: Learners will be able to determine which behaviours are acceptable and which are abusive. They will identify which situations should be checked out and appreciate the danger of making assumptions. Students will examine their own judgments and personal reactions.

WHAT TO DO WHEN CHILD ABUSE IS SUSPECTED: Learners will identify steps to be taken to ensure a child is safe and the need for the concerned person to involve other people. They will understand the importance of reporting the consequences of not reporting, and ways of recording information in order to make the decision to report.

REPORTING CHILD ABUSE: Learners will understand the legal implications of reporting child abuse and the statutory responsibilities agencies have in this regard. They will learn how children are protected under the Children and Young Persons and Family Act 1989 and the Care of Children Act 2004.

NETWORKS FOR PROTECTING CHILDREN: Learners will understand outcomes of a report of child abuse and the effects and events that the family may experience. They will explore ways for supporting families to ensure that the most positive outcomes are achieved through working in a multi-disciplinary way and networking with other agencies.

SUPERVISION AND CARE OF SELF: Selecting a supervisor and establishing a supervision contract. Learners will be encouraged to develop a network of support

among peers, colleagues and mentors and will learn how to ensure their own well-being and safe practice.

Length:

5 Days - 9.00am – 4.30pm.

In addition to this, participants will be expected to undertake up to 50 hours of self-directed learning.

Programmes do not operate on Saturday and Sunday.

Who should Enrol?

Anyone who works with and/or cares about children including:

- Those who are new to the field and want to establish a sound, basic understanding of Child Protection.
- Those who have a responsibility or role in the safety of children.
- Managers and leaders responsible for policy development and the safety and wellbeing of their workers.

Pre-requisites

- All students must have basic literacy competency as written assessments and note taking is required.
- A basic understanding of Treaty of Waitangi issues.
- Programmes are NOT a therapeutic programme and should not be undertaken by those with any unresolved issues regarding children or child abuse.
- Good personal support networks will be beneficial in studying this topic.

Inclusions

Workbooks, assessments, resources, morning and afternoon tea daily. Lunch is NOT provided.

IMPORTANT NOTE: Any student who has been abused or has experienced personal trauma should not attend any CPS Certificate Programmes unless he or she has come to terms with the abuse or trauma and is in a position to discuss child abuse in an objective way.

CPS reserves the right at any stage (prior to or after Programme commencement) to refuse entry to or attendance at any Programme.

Participants have the opportunity to listen to a range of interesting Specialist Speakers who share their knowledge and expertise with the class. The opinions of these speakers may or may not reflect the opinions held by CPS. Any concerns should be discussed with the course tutor or with CPS directly.

Diploma in Child Protection Studies

Objective

To provide practical experientially-based professional education in child protection and child advocacy. Students are encouraged and supported to develop a pro-active approach to child advocacy issues. Graduates often become the resource people on child protection issues in their communities. They will become advocates to ensure the future safety and best outcomes for children.

Content

Child Protection from the Perspective of the Child

Includes: 3-day Marae stay, Protecting children from a cultural perspective; Child development; Protecting children with intellectual disabilities; Recognising self and the importance of supervision; Dynamics of child abuse and family violence; The child's perspective; Issues for children; Paramount interest of the child.

Understanding and Supporting Families

Includes: Counselling needs of families; Working with families of abused children; Supporting abused children and their families; Therapy for children; Assessing risk; Protection programmes for children; Sexual offenders; Types of families; Planning interventions.

Child Protection and the Community

Includes: Child-focused services; Setting policies on child protection; Legal issues; Evidential interviewing; Going to court; Report writing; Organisational structure and management; Becoming a child advocate.

Length:

Each block is five days

Section One Blocks 1 and 2 - Child Protection from the Perspective of the child

Section Two Blocks 3 and 4 – Understanding and Supporting Families

Section Three Blocks 5 and 6 – Child Protection and the Community

There is a total of six weeks in-classroom tuition time 9.00am – 4.30pm daily. In total you are required to spend 1200 hours over eight months, including in-classroom tuition.

Who should Enrol?

Anyone who works with and/or cares about children including:

- Those who believe they have the potential to become a child advocate
- Those who have been working with children for some time and would like to enhance and consolidate their knowledge and extend their local networks
- Managers and leaders responsible for child policy development and the safety and wellbeing of their workers.

Pre-requisite

- Successful completion of the Child Protection Studies Programme or its equivalent (prior learning is recognised).
- A basic understanding of Treaty of Waitangi issues. We recommend you attend a one day Treaty workshop if you have not already done so.
- Programmes are NOT a therapeutic programme and should not be undertaken by those with any unresolved issues regarding children or child abuse.

IMPORTANT NOTE: Any student who has been abused or has experienced personal trauma should not attend any Diploma Programmes unless he or she has come to terms with the abuse or trauma and is in a position to discuss child abuse in an objective way.

CPS reserves the right at any stage (prior to or after Programme commencement) to refuse entry to or attendance at any Programme.

Participants have the opportunity to listen to a range of interesting Specialist Speakers who share their knowledge and expertise with the class. The opinions of these speakers may or may not reflect the opinions held by CPS. Any concerns should be discussed with the course tutor or with CPS directly.

Inclusions

Workbooks, assessments, resources, morning and afternoon tea daily.

Lunch and dinner whilst on the Marae Stay only.

Workshops

CPS offers professional development and community education through a range of one-day workshops on child protection related topics. Our scheduled workshops are available for anyone to attend, and the benefits of meeting people from other sectors can be enormous. Scheduled workshops are available on selected topics only, however, all workshops may be hosted through your organisation.

Workshop Topics

COMMUNICATING WITH YOUTH (13 – 17 years)

Understand more about adolescents – their fears, thoughts and needs – and enhance your communication skills.

CARING FOR YOUNG PEOPLE WITH DIFFICULT BEHAVIOURS (13 – 17 years)

It is not easy being a young person today. Discover ways to help young people whose behaviour has become challenging or anti-social. Learn some of the causes and triggers for difficult behaviour.

RECOGNISING AND RESPONDING TO CHILD ABUSE

When a child dies from abuse or neglect someone always says “I knew something was wrong but didn’t know what to do”. Find out what to do when you are concerned about the welfare of a child. Identify the support and help that is available.

PREPARING A COMPREHENSIVE CHILD PROTECTION POLICY (HALF DAY)

Would your organisation be able to stand up to public scrutiny if something went wrong? Gain the framework, guidelines and rationale to develop a Child Protection Policy for your organisation.

LEGALLY SPEAKING

There are dozens of different laws that govern children’s lives and affect how adults can support them. Gain a layman’s understanding of the laws affecting children and how to work within that legal framework.

UNDERSTANDING THE RIPPLE EFFECTS OF FAMILY VIOLENCE – SUPPORTING CHILDREN AND CARERS

Any child living with violence or the threat of violence is a child in need of protection. Learn to recognise and respond to situations where violence has occurred and to provide practical support to children.

SUPPORTING FAMILIES IN CRISIS AND AFTER CRISIS (TWO DAYS)

Identify the most effective help a worker can provide a family in crisis and gain practical skills for assisting the family. Examine the elements that contribute to safe practice when working with families in the medium and long term.

SEX OFFENDERS IN THE COMMUNITY – HOW TO KEEP CHILDREN SAFE

Most people have met or know a sex offender, they just haven’t realised it. Understand the behaviour of sex offenders and the risk factors inherent in working with families when a sex offender is involved.

COMMUNICATING WITH CHILDREN (up to 12 years)

Children tell us about themselves through play. Learn to appreciate the value of play and discover how play can be used effectively as a communication tool.

CARING FOR CHILDREN WITH DIFFICULT BEHAVIOURS (up to 12 years)

Children with difficult and challenging behaviours can really stretch carers' patience and resources. Discover the causes and messages behind children's challenging behaviour and find practical, realistic solutions.

PROTECTING CHILDREN WITH DISABILITIES

Children with disabilities can be at seven times greater risk than other children. Learn how to reduce this risk factor and protect these vulnerable children.

EMOTIONAL IMPACT OF SEPARATION AND DIVORCE ON CHILDREN

When parents separate their children may feel a range of emotions. Understand the emotional impact separation and divorce can have on children and how to support families to minimise harmful effects.

HELPING CHILDREN AND YOUNG PEOPLE THROUGH THE GRIEVING PROCESS

Learn some practical skills to help children and young people cope with grief.

WHAT IS NORMAL? WHAT IS NAUGHTY?

Children's behaviour can be a mystery at times. Learn to identify children's behaviour that might be of concern and recognise when a behaviour is simply a typical part of a child's development.

Workshop Timings

All one day workshops 9.00am - 4.00pm

Half day workshops 9.00am – 1.00pm unless advertised differently

Two day workshops 9.00am – 4.00pm daily

Inclusions

All workshops include handouts as well as morning and afternoon tea.

All About Me Tōku Āhuratanga Whānui

Introduction

The names Chris and Cru Kahui are now known to us all because of their tragic deaths and unbearable last five days. Sadly, we are hearing about more and more cases of all forms of abuse against babies, toddlers and young children. This age group is not usually in a position to stand up for itself. Children are at the mercy of abusers. These children are unlikely to know what touch and behaviour from others is wrong, and even if they do know, they don't have the skills to report. Should a case go to court, the child would not be a reliable witness. Child abusers know this.



All adults have a responsibility to help keep young children safe from abuse - that is you, their teachers, parents and caregivers, child minders, the people who live next door.

The Police Youth Education Service has developed an early childhood module, *All about Me - Tōku Āhuratanga Whānui*, as part of their *Keeping Ourselves Safe* child abuse prevention programme. *Keeping Ourselves Safe* has been available to primary and secondary schools nationally for many years.

KOS has three main aims:

- to teach children and young people a range of safe practices that they can use when interacting with other people;
- to encourage children who have been, or are being, abused to seek help;
- to contribute to an overall community awareness of child abuse and the role of adults in stopping it.



The new module *All about Me Tōku Āhuratanga Whānui* was developed by a group of early childhood teachers, police and other experts in the early childhood education area. The materials consist of a teaching guide, a pamphlet, information book and DVD for parents and caregivers, and a selection of age appropriate resources - pictures, photographs, feelings cards, magnetic bodies, stories.

There is an important role for parents, caregivers and family. They need to understand what child abuse is and have examined their own feelings about it. Abuse can happen to any child, as parents and caregiver cannot be with them all the time. So it is important to teach your child safety strategies to use in their interactions with others, to help them be assertive, to teach them how to

ask for help and help them to understand what behaviour they have a right to say 'no' to. Always listen to what your child has to say, and be prepared to help.

All about Me Tōku Āhutatanga Whānui was piloted in 21 centres in Dunedin, Porirua and Auckland in Term 1 2006 and the pilot was evaluated by ERO.



'In ERO's view, the programme has many strengths and is consistent with good early childhood education. The seven focus areas of the programme are balanced and cover the related topics well. The focus areas fit well with Te Whāriki, the early childhood curriculum document." All about Me" provides a valuable contribution to early childhood education, and with good teacher training and support, should make a positive difference to keeping our children safe.'

A phased in implementation strategy begins in February 2007. CPS is working with Police to provide professional development in both child protection and the module itself. *All about Me - Tōku Āhutatanga Whānui* will only be available to centres once they have undertaken the training.

What you need to do to deliver the programmes

In order for an Early Childhood Centre to become eligible to deliver the new programme *All About Me - Tōku Āhutatanga Whānui*, centre staff must attend training. Each centre will have at least one Manager or Supervisor from each site complete a full-day programme.

For each centre to gain the maximum benefit, we strongly recommend that as many staff as possible to attend the 2 ^{1/2} hour training. We do recognise that in some individual circumstances this may not be possible. So in these cases we recommend the attendance of 2-3 staff from each site. Staff will have the option of attending either an afternoon or an evening session.

The programmes are facilitated by CPS and delivered nationally.

ONCE STAFF HAVE UNDERGONE THIS TRAINING YOUR CENTRE WILL BE ELIGIBLE TO TEACH THE ALL ABOUT ME PROGRAMME.

Why centres need this training

- It is the responsibility of centres to protect children
- To lessen anti-social behaviour
- Increased parent confidence.....therefore more clients
- To protect your staff & provide professional development
- 4 out of 5 children harmed are not known to police or CYF
- Children under 5 are at highest risk for abuse

- To Help all children reach their potential
- "Future-proofing" against possible developments
- Young children do not disclose - you are the child's voice

Timetable

A timetable for the programmes is available for 2007. Don't wait ! A wonderful opportunity ! This training is only available **once** in your area in 2007. Spaces are limited - only the first 25 centres can enrol.

Purpose of undertaking the training programmes

For over 15 years the *Keeping Ourselves Safe* child abuse prevention programme has been undertaken very successfully throughout New Zealand schools. *All About Me – Toku Ahuatanga Whanui* is an opportunity to provide early childhood educators, younger children and their families with some of the valuable strategies to keep children in this age group safe. Children from all walks of life and all ethnicities may be subject to neglect, sexual abuse, bullying, or physical violence and early childhood education staff are in a pivotal situation to intervene. The programme offers excellent educational resources and ideas for discussion about some sensitive topics with young children. Many can find it a difficult topic to approach, and are not always comfortable doing so. There are complex personal, ethical and legal issues that may arise that can affect individuals, the centre, the relationship with parents and the community. The training programmes are designed to assist centres to address these situations and to provide the encouragement and support that will enable them to keep children safer.

Representatives from all ECEs within the region, including Kohanga Reo, Home-Based Child Care, Kindergartens, Playcentres, Montessori and other Child Care Centres should consider attending.

Aims of the training programmes

The programme goals are to:

- Prepare teachers on a personal level to become comfortable in dealing with the programme material
- Support the implementation of the programme and the understanding of the importance of each module
- Provide confidence for teachers in dealing with issues that might be raised by the children
- Prepare the supervisory and management staff to cope with issues arising for parents, and for centre staff
- Advise on the development of workable child protection policies for centres.
- Provide resources for the supervisory and management staff to carry on the learning process with all staff after the training programme has been completed.

- Support centres to take action when concerned about the safety of a child.
- Encourage the development of strong networks within the centre's community for supporting children and families.

There are 2 programmes

A One day programme

Maximum attendees: 25

This is for

- Owners, Managers, Head Teachers, Supervisors, Kaitiaki, Practice Managers, Coordinators

Purpose:

- To provide attendees with resources, information and support to assist them and their staff in the implementation of the All About Me programme
- To provide attendees with strategies for working with families, whanau and communities regarding the issues around child protection
- To provide attendees with information and strategies for developing, implementing and reviewing child protection policies

Programme will cover

- The supervisor's role and responsibilities in supporting staff when delivering the programme
- Facilitating the use of the activity handbook with early childhood teachers to support their understanding
- Relating with parents and other community members to ensure their comfort with the programme and in dealing with any issues that might arise out of it
- Managing and supporting the implementation of the programme
- Interaction with the Police and CYF and understanding the processes
Interacting with community
- Developing and reviewing the centre's Child Protection Policy

B Half day session

Maximum attendees: 40

Specifically: Teaching staff, Educarers, Childcare Personnel, Teacher Aides.

Purpose:

- To provide attendees with resources, information and support to assist them in the facilitation of the All About Me programme
- To provide attendees with basic understanding of child abuse issues
- To support participants in dealing with any issues that might inhibit their effective implementation of the programme
- To develop within the attendees confidence, comfort and enthusiasm about facilitating the programme

Workshop will cover

- An overview of All About Me and its goals, and fit with Te Whariki Statistical information about the nature of abuse
- A review of the signs and symptoms to be of child abuse Working with the programme and the material in a way that feels comfortable and dealing with potential barriers
- Personal responses, and dealing with any personal issues that may be present or might arise
- Dealing with children's issues, comments, questions and disclosures (whether intentional or not)
- Following the centre's child protection policy

Activity Handbook

A small activity handbook will be available to staff who have attended the half day session. This will contain resources and activities that can be carried out over the ensuing weeks. Ideally this will tie in with the centre's child protection policy and help in the internal training of staff to follow the procedures.

Purpose:

- To reinforce the learning from the workshop
- To provide staff with an opportunity to reflect and consider possible scenarios and situations that might arise

Appendix 2: Participant Survey Questionnaire

CPS Participant Survey

OFFICE USE ONLY:
 Name: _____ Course Code: _____
 Phone number: _____ Course date: _____
 Date of interview: _____ Time: _____

Part A: BACKGROUND

1. What were the main reasons why you did the CPS course? (*probe – Was it part of your organisation’s professional development programme? Was it something that you wanted to do? Why?*)
 - 1 Part of your organisation’s professional development programme
 - 2 Don’t know
 - 3 Other (specify) _____

2. How did you find out about the CPS course?
 - 1 A work colleague recommended it
 - 2 A friend recommended it
 - 3 Other (specify) _____

3. What was your occupation when you did the CPS course? (*circle one number*)
 - 1 Caregiver (paid)
 - 2 Community Worker (specify) _____
 - 3 Nurse _____
 - 4 Health Camp Staff _____
 - 5 Whanau Worker (Family Start; _____)
 - 6 Teacher _____
 - 7 Social Worker (CYF)
 - 8 Social Worker in Schools
 - 9 Social Worker (non CYF) (specify place of employment) _____
 - 10 Women’s Refuge Worker
 - 11 Iwi Social Services _____
 - 12 Violence Prevention _____
 - 13 Other (specify) _____

4. What is your current occupation? (*circle one number*)
 - 14 Same as above
 - 1 Caregiver (paid)
 - 2 Community Worker (specify) _____
 - 3 Nurse _____
 - 4 Health Camp Staff _____
 - 5 Whanau Worker (Family Start; _____)
 - 6 Teacher _____
 - 7 Social Worker (CYF)
 - 8 Social Worker in Schools
 - 9 Social Worker (non CYF) (specify place of employment) _____
 - 10 Women’s Refuge Worker
 - 11 Iwi Social Services _____
 - 12 Violence Prevention _____
 - 13 Other (specify) _____

Part B: PRIOR TO DOING THE CPS COURSE

Thinking back to before you did the CPS course

5. Before doing the course, how confident did you feel about your ability to **identify** signs of abuse? (*read out the ratings*)

- 1 Not at all confident
- 2 Reasonably confident
- 3 Very confident

6. Before doing the course, how confident did you feel about your ability to **act appropriately** if you suspected abuse was occurring?

- 1 Not at all confident
- 2 Reasonably confident
- 3 Very confident

7. Before you did the CPS course how would you have rated your **understanding of child protection issues?** (*read out the ratings*)

- 1 Knew nothing about child protection
- 2 Knew a little about child protection
- 3 Knew a lot about child protection

Part C: SINCE COMPLETING THE CPS COURSE

The next questions are about the CPS course and what you learned...

8. What was the most important thing you learned from the CPS course? (*Was there any 'new' information for you from the CPS course?*)

9. *After doing the course*, did you feel more or less confident, or was there no change in your confidence about your ability to **identify** signs of abuse?

- 1 More confident
- 2 No change in confidence
- 3 Less confident

10. *After doing the course* did you feel more or less confident, or was there no change in your confidence in your ability to **act appropriately** if you suspected abuse was occurring?

- 1 More confident
- 2 No change in confidence
- 3 Less confident

11. After doing the course the CPS course had you increased, decreased or was there no change in your **understanding of child protection issues?**
- 1 Increased understanding
 2 No change
 3 Decreased understanding
12. Since completing the course, have you directly encountered child abuse? (circle one number)
- 1 Yes
 2 No
13. If you answered YES, please briefly describe what you encountered and any actions that you took in regards to it.
14. Are there any things that you have done since completing the course **as a result of the course?** (write any answers)
15. I have a list of some things that you might have done, as a result of the course. If you can just say yes, no or not applicable to each of these.

| | Yes | No | NA |
|---|-----|----|----|
| a reported a child abuse situation to a supervisor or manager, Child Youth and Family, or the Police? (circle which one) | 1 | 2 | 3 |
| b approached a family member, friend or neighbour who was treating their child badly and offered advice or help | 1 | 2 | 3 |
| c approached a 'stranger' (e.g. a stressed parent in the supermarket) who was treating their child badly and offered advice or help | 1 | 2 | 3 |
| d recommended the CPS course to others (friends, family, workmates) | 1 | 2 | 3 |
| e spoken publicly (e.g. on marae or another public forum) about child abuse | 1 | 2 | 3 |
| f made changes to your own parenting / grandparenting practices (specify) | 1 | 2 | 3 |
| g been more aware of children and listened to them more | 1 | 2 | 3 |
| h reviewed or initiated a Child Abuse / Child Protection Policy(s) at your workplace | 1 | 2 | 3 |
| i Talked with your family / whanau or friends about child abuse /child protection issues | 1 | 2 | 3 |
| j intervened in a family violence situation | 1 | 2 | 3 |

16. Overall, what did you think of the CPS course? (Did it meet your expectations? Why? Why not?)
17. What else would have been useful to include in the course?

18. What else would be useful for you **now**? (*probe e.g .follow ups. More resources, CPS to come into your organsiation?*)
19. Would you recommend the course to others?
 1 Yes
 2 No

Part D: ABOUT CHILD PROTECTION

These questions are about child protection in general and what else can be done to make a difference...

20. Who do you think should do the CPS course? (*What occupational groups should get CPS training? Why?*)
21. What else do you think CPS could be doing to protect New Zealand’s children?
22. What do you think we as a society should do to prevent child abuse and make New Zealand a safer place for children?
23. The following are some ideas about things that could be done (by CPS or New Zealand). I would like your opinion on whether they are good idea, or not.

| | Good idea | Not good | DK |
|---|-----------|----------|----|
| a Have a CPS tick i.e. that CPS would assess organisations to see if they met certain child protection criteria – like having a certain number of trained staff, child protection policies etc – and if they meet the criteria they get a tick. | 1 | 2 | 3 |
| b Have compulsory child protection training for all people who work with children (e.g. teachers, nurses, doctors, caregivers, dental nurses, midwives, social workers) | 1 | 2 | 3 |
| c Have child protection modules in all standard training programmes for professions who work with children | 1 | 2 | 3 |
| d Have child protection training for anyone who enters people’s homes (e.g. plumbers, meter readers...) | 1 | 2 | 3 |

Part E: DEMOGRAPHICS

26. Are you male or female? (*circle number*)
 1 Male
 2 Female
27. Which ethnic group do you identify with? (*circle number*)
 1 European/Pakeha
 2 Maori (Iwi) _____
 3 Pacific _____
 4 Asian _____
 5 Other

28. What is your age range?

- 1 Under 20
- 2 20-29
- 3 30-39
- 4 40-49
- 5 50-59
- 6 60 and over

29. Any other comments you would like to make?

Thank you for your time and cooperation.

Appendix 3: United Nations Convention on the Rights of the Child

United Nations Convention on the Rights of the Child

Article 19

1. States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.
2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment, and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement (Office of the High Commissioner for Human Rights, United Nations, 2007, p.11).