

## CONTENTS

<b>Section 1</b>	<b>Page</b>
1.1 Introduction	3
1.2 Glossary / Definitions	3
1.3 Child Abuse	4
1.4 Legal Framework	4
1.5 Core Principals and Values	4
1.6 Policy Application	5
 <b>Section 2</b>	
2.1 Personnel Recruitment	6
2.2 Education and Training	6
2.3 Management Structure	6
2.4 Behaviour Protocols	7
2.5 Communication Guidelines	8
2.6 Reporting and Reaction Protocol	9
2.7 Ramifications of Misconduct	11
 <b>Appendix 1</b>	
Recognising signs of abuse	12

## Section 1

### 1.1 INTRODUCTION

Let the Children Hear (LTCH) is a charity focusing on the prevention and early intervention of hearing loss in children based on the World Health Organisation's (WHO) guidelines. The community-based programme encompasses training of local health care workers, health education, medical treatment of simple ear diseases, hearing screening, audiological assessments, hearing aid provision and rehabilitation programme.

Children who will not be able to benefit from conventional hearing aids will be directed to the local deaf school which provides opportunities for sign language and education to help deaf children realise their potential.

The programme will be based mainly in the district and capital city of Kampala.

Everyone who participates in the LTCH is entitled to do so in an enjoyable and safe environment. LTCH recognises the need to protect children from all forms of intentional or unintentional abuse.

LTCH is opposed to all forms of abuse and is committed to devising and implementing policies so that everyone understands child abuse and accepts their responsibilities to safeguard children from harm. This means to follow procedures to protect children and report any concerns about their welfare to appropriate people and authorities.

The aim of this policy is to promote good practice; to provide children with appropriate safety/protection whilst in the care of LTCH; to empower both staff and children, and to allow trustees, staff and volunteers to make informed and confident responses to specific child protection issues.

**The Safeguarding Officer for LTCH in Uganda is Robinah Nakayira. The Safeguarding Trustee for LTCH in the UK is Elspeth Russell**

### 1.2 Glossary / Definitions

- Child – For the purposes of this document, a 'child' is defined as anyone under the age of 18, in line with the UN Convention on the Rights of the Child.
- Child Abuse – According to the WHO, 'Child abuse' or 'maltreatment' constitutes 'all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power.'<sup>1</sup>
- Child Protection – A broad term to describe philosophies, policies, standards, guidelines and procedures to protect children from both intentional and unintentional harm. In this document it applies to the duty of LTCH, and individuals associated with LTCH, towards children in their care.
- Direct Contact with Children – Being in the physical presence of a child or children in the context of the LTCH work, whether contact is occasional or regular, short or long term.

---

<sup>1</sup> The World Health Organisation (WHO) definition of Child Abuse as defined by the Report of the Consultation on Child Abuse Prevention WHO – 1999

- Indirect Contact with Children – Having access to information on children in the context of LTCH work, such as names, locations, photographs and case studies. Providing funding for organisations that work ‘directly’ with children. Albeit indirectly, this nonetheless has an impact on children, and therefore confers upon the donor organisation responsibility for child protection issues.
- Child Protection Policy – ‘A statement of intent that demonstrates a commitment to safeguard children from harm and makes clear to all what is required in relation to the protection of children. It helps to create a safe and positive environment for children and to show that the organisation is taking its duty and responsibility of care seriously.’<sup>2</sup>
- Informed Consent – Capacity to freely give consent based on all available information, according to the age and evolving capacities of the child. For example, if you seek consent from a child regarding taking their photograph and using it for publicity purposes, the child is informed as to how the photograph will be used and is given the opportunity to refuse.
- Best Interests of Children – Decisions that affect children should be made based on consideration of their physical and psychological well-being and the need to prevent risks of harm to them or other children. Determination of children’s well-being should involve consultation with both children and those responsible for their care.

### 1.3 Child Abuse

Child abuse can occur under many guises, including:

- Physical – Including hurting or injuring a child, inflicting pain, poisoning, drowning or smothering.
- Sexual – Including direct or indirect sexual exploitation or corruption of children by involving them, or threatening to involve them, in inappropriate sexual activities.
- Emotional – Including repeated rejection, humiliation or denying their worth and human rights.
- Neglect – The persistent lack of appropriate child care; including love, stimulation, safety, nourishment, warmth, education and medical attention.

The children with whom LTCH works with have often experienced more than one type of abuse; they can be vulnerable to discrimination, harassment or bullying which are forms of physical and emotional abuse.

---

<sup>2</sup> Setting the Standard: A common approach to Child Protection for international NGOs, Standard 1 (Policy).

### 1.4 Legal Framework

LTCH's Child Protection Policy is based on the principles of:

- The United Nations Convention of the Rights of the Child (UNCRC) 1990. The CRC provides a comprehensive framework for the protection, provision and participation of all children without discrimination to ensure their survival and development to the maximum extent possible.<sup>3</sup>
- The Children Act Chapter 59 (1997 Laws of Uganda)<sup>4</sup>
- The Human Rights Act (1998)<sup>5</sup> (Laws of Uganda)

### 1.5 Core Principals and Values

LTCH recognizes that hearing impaired and deaf children are particularly vulnerable to abuse due to communication differences and difficulties.

Where children's main mode of communication is through Ugandan Sign Language, they have the right to access a responsible adult fluent in the indigenous sign language to ensure their allegations, disclosures or accounts are not misconstrued and are clearly represented.

Where the child's communication and language are not well developed enough to clearly portray events and allegations and disclosures, alternative methods must be sought until responsible adults are confident, they have a true representation. This should always be in the presence of a deaf adult or sign language interpreter who can be trusted to represent the child's description of events or allegations.

The method of communication used by the responsible adult should in no way lead the child and should always remain impartial.

LTCH views all children as principal actors in their own development and pro-actively seeks to create spaces where children can voice their opinions and make choices. We recognise the resilience and creativity of the children we work with; we do not think of them as passive victims of circumstance.

LTCH will not ignore the broader child protection issues such as domestic violence, abuse by the police, commercial sexual exploitation, etc. It is every organisation's responsibility to protect the children who they are in contact with, whether harm is taking place inside or outside the organisation.

LTCH believes that in working with children it has an absolute duty to protect them from abuse, mistreatment, and exploitation. This duty is imperative and non-negotiable. Without standards and mechanisms of protection in place, an organisation is not only failing in its primary duty of care but may also be negligently fostering an environment of abuse.

---

<sup>3</sup> Visit [www.unicef.org/crc](http://www.unicef.org/crc) or <http://2.ohchr.org/english/law/crc.htm> for more information.

<sup>4</sup> Visit [http://www.ugandaembassy.com/The\\_Children\\_Act.pdf](http://www.ugandaembassy.com/The_Children_Act.pdf) for more information

<sup>5</sup> Visit [http://www.opsi.gov.uk/acts/acts1998/ukpga\\_19980042\\_en\\_1](http://www.opsi.gov.uk/acts/acts1998/ukpga_19980042_en_1) for more information.

LTCH believes that silence allows the abuse and exploitation of children to breed. Paedophiles and others that might abuse or exploit children will seek out organisations with weak communication structures and thrive where secrecy and shame prevail.

LTCH recognises that resistance to addressing child protection issues may come from a lack of understanding of child abuse, lack of commitment to the programme and / or a sense that child abuse happens elsewhere. LTCH will seek to challenge complacency and will offer training and support to staff and volunteers to increase the levels of understanding, recognition and commitment.

LTCH believes that any organisation, or individual, that claims to be working for the benefit of children must make sure that it is not putting children at risk through lack of attention to child protection policies and procedures. However, these policies and procedures should not lead to a fear of speaking out, or impact negatively on services to children.

### **1.6 Policy Application**

**All LTCH staff, volunteers, trustees and members are bound by this policy.**

**While this policy does not apply to LTCH partner organisations, LTCH is committed to raising awareness of child protection issues.**

## Section 2

LTCH aims to build a 'child safe organisation'. We will work towards this by developing, implementing and monitoring our Child Protection Policy and Procedures as effectively as possible and in the spirit of commitment at all times, to the best interests of the child.

This policy will be reviewed annually or whenever there is a major change in the organisation or relevant legislation in order to guarantee the best available policies for Child Protection.

The essential elements of the policy are:

### 2.1 Personnel Recruitment

LTCH is committed to good practice in recruitment, to ensuring staff understanding of and commitment to child protection principles, and to advising partners of its policies in this regard.

LTCH insists that its employees, volunteers, trustees and members demonstrate behaviour that is consistent with protocols and legislation, as well as suitable personal and professional standards.

LTCH will only recruit staff and/or volunteers who respect and value children and who are committed to preventing harm to children.

All potential staff and/or volunteers must fully declare any criminal convictions, spent and unspent. A false declaration that results in recruitment will render the person liable to dismissal without notice. Candidates must explain gaps in their employment history.

All staff and volunteers will be given a copy of this policy, and the associated Code of Conduct, and will be required to sign a declaration that they understand it and agree to be bound by it.

### 2.2 Education and Training

All staff and volunteers will be offered training whereby they will have the opportunity to learn about the nature and effects of abuse, how to recognise and respond to a child making a disclosure of abuse, how to respond to concerns from other persons about child abuse as well as information and support on who to contact in the event of any concerns about child protection issues.

### 2.3 Management Structure

LTCH believes that every employee and/or volunteer should be aware of the principles and procedures of child protection, and that the management structure should facilitate the implementation, monitoring and evaluation of the Child Protection Policy and procedures through:

- open lines of communication where understanding abuse and listening and responding to concerns are the main priority. It will create an atmosphere of support and encouragement for those reporting abuse and will promote a positive environment for giving and receiving feedback.
- staff appraisals will include feedback on training, support or advice on child protection.
- Child Protection will be a standing agenda item at monthly strategy and review meetings.

### 2.4 Behaviour Protocols

Endeavouring to be a child safe organisation, LTCH works to secure an open and aware culture where all participants feel responsible for the protection of the children we come into contact with or write about in our work. A key element of our Child Protection Policy is our LTCH Code of Conduct. This applies to LTCH staff and volunteers and anyone acting as a representative of, or on behalf of, LTCH.

The Code of Conduct includes guidance on appropriate and expected standards of behaviour of adults towards children. By setting standards for appropriate behaviour it also protects people who come into contact with children from unfounded accusations of improper conduct.

## MINIMISING RISK SITUATIONS

### NEVER...

- Condone or participate in behaviour that is illegal or unsafe.
- Place yourself in a compromising or vulnerable position such as being alone with a single child, including in the following situations: in a car, overnight, in your home, or the home of a child.
- Show favouritism or spend excessive amounts of time with one child.

### DO...

- Immediately note, on an incident report sheet, the circumstances of any situation which occurs which may be subject to misinterpretation by a third party.

## SEXUAL BEHAVIOUR

### NEVER...

- Develop physical/sexual relationships with a child.
- Behave physically in a manner that is inappropriate or sexually provocative.
- Engage in or allow sexually provocative games with children to take place.
- Do things of a personal nature that a child could do for themselves e.g. dressing or bathing.

## PHYSICAL BEHAVIOUR

### NEVER...

- Hit or otherwise physically assault or physically abuse a child.

### DO...

- Wait for appropriate physical contact such as holding hands, to be initiated by the child, except in situations where it is expected for adults to greet children by offering them their hand.
- Ask permission from children before taking photographs except under exceptional circumstances, based on the child/children's best interest, where this might not be possible or desirable.



### **PSYCHOSOCIAL BEHAVIOUR**

#### **NEVER...**

- Use language that will mentally or emotionally harm a child.
- Suggest inappropriate behaviour or relations of any kind.
- Act in any way that intends to embarrass, shame, humiliate or degrade a child.
- Encourage any inappropriate attention seeking behaviour, such as tantrums by a child.
- Show discrimination of race, culture, age, gender, disability, religion, or political persuasion.

#### **DO...**

- Be aware of the power balance between adult and child, and avoid taking advantage of this.
- Be aware that your presence with children will often be temporary and you should therefore avoid creating bonds which encourage emotional or psychological dependence; make it clear from the outset, in age-appropriate terms, that you will not be with them long-term.

### **PEER ABUSE**

#### **DO...**

- Be aware of the potential for peer abuse.
- Avoid placing children in high-risk situations eg. unsupervised mixing of older and younger children.

### **PHYSICAL ENVIRONMENT**

#### **DO...**

- Encourage families to develop clear rules to address specific physical safety issues eg. water or traffic.

## **2.5 COMMUNICATION GUIDELINES**

In communications about children, the following standards apply:

- Access to printed and electronic personal information about mothers and children should be restricted to the minimum number of people who need to know.
- Personal and physical information that could be used to identify the child should not be used in any communication for internal or public purposes.
- Within its fundraising and publicity materials, LTCH will need to use text and imagery from its projects. In so doing, it recognises that it has a responsibility to the children that are being portrayed. To this end, LTCH looks on all children as human beings with rights and LTCH will respect these rights at all times.
- Every child has a right to be accurately represented through both words and imagery. LTCH's portrayal of each child must not be manipulated or sensationalised in any way, but provide a balanced depiction of their life and circumstances. Children must be presented as human beings with their own identity and dignity preserved. This presentation applies for all written, photographic and filmed materials.
- Where children are indeed victims, the preservation of the child's dignity must, nevertheless, be preserved at all times. LTCH will attempt to depict a balance between victimisation and empowerment by using necessary tools, such as 'before' and 'after' photos.
- As far as possible, families and children should give their own accounts, rather than have others speak on their behalf



### **LTCH will avoid the following:**

- Language and images that could possibly degrade or victimise or shame children.
- Making generalisations which do not accurately reflect the nature of the situation.
- Discrimination of any kind.
- Taking or using pictures out of context.
- In images, children will not be depicted in any poses that could be interpreted as sexually provocative.
- To the greatest extent possible, LTCH will acquire informed consent of the child, parents or child's guardian before using any image, experience or story for publicity, fundraising, awareness raising or other purpose. The purpose should be made clear to the consent giver.
- Individuals or organisations that request the use of LTCH resources, such as photographs, will be required to sign an agreement with the organisation as to the proper use of such materials.

## **2.5 REPORTING AND REACTION PROTOCOL**

There is a process for reporting and reacting to witnessed, suspected or alleged child abuse and/or violation of the Child Protection Policy which is must be understood by all staff, trustees, volunteers, interns, consultants and contractors.

Where LTCH works with partner organisations, effective response and reaction protocols will be dependent on effective collaboration and a shared understanding of, and commitment to Child Protection good practices. At all times you must be guided **by the best interests of the child.**

This means acting immediately to report any alleged violation of the Child Protection Policy; ensuring the physical and psychological safety of the child, and protection of the child and others from further harm.

A. What to do if you suspect or witness an abuse / potentially abusive behaviour and the reporting procedures.

## **In Uganda**

1) **Robinah Nakayira, Lead Safeguarding Officer, Phone number 00 256 779918138**

In her absence

2) **Rinah Onyut, Deputy Safeguarding Officer, Phone number 00 256 751224039**

3) **Dr Paul Choudhury, Medical Trustee.**

**(uk) Tel: 0044 7802 813 820, (Uganda) Tel: 00256 791 272 863**

If an abuse is suspected, report to the Lead Safeguarding Officer in the first instance

In her absence, Deputy Safeguarding Officer should be contacted before any formal procedure is under taken.

If still not sure, contact, Dr Paul Choudhury, Medical Trustee who will be available on telephone.

After discussion, an appropriate action will be taken according to the protocol and Ugandan law. **Please see separate attached Checklist/Flow Chart for management of suspected child Abuse cases.**

### In the UK

1) Elspeth Russell, Trustee, Clinician, Lead Safeguarding officer  
[elspeth@letthechildrenhear.com](mailto:elspeth@letthechildrenhear.com)

2) Geoff Robins, Trustee, Deputy Safeguarding officer.  
[geoff@letthechildrenhear.com](mailto:geoff@letthechildrenhear.com)

The reporting procedure will be the same as Uganda and follow the protocol if appropriate. The Safe Guarding Children will be an agenda item in all Trust Board meetings.

**LTCH maintains zero tolerance to any kind of abuse and we will take action where necessary following the agreed protocols.**

- Report ALL concerns regarding child protection to the LTCH Medical Trustee via the Administrator as soon as possible.
- Following discussion reference as appropriate to any or all of the following:
- The Local Social Worker/Probation Officer within KCCA.
- African Network for the Prevention and Protection against Child Abuse and Neglect.
- The Ugandan Police Child Protection Unit.

**IT IS MANDATORY** that all information shared is only shared on 'a need to know basis' and is in 'the best interests of the child/young person'

**IT IS MANDATORY** that all alleged concerns are documented **ON THE APPROPRIATE REPORTING FORMS** in an evidence based manner and stored confidentially.

**REMEMBER** breaching a child's/young person's confidentiality inappropriately can cause **SIGNIFICANT HARM** to that child/young person.

**ALL** child protection referrals made must be followed up to ensure that appropriate measures have taken place in 'the best interests of the child'.

### **What to do if a child reports an alleged violation to you**

- Reassure the child that they were right to report the behaviour.
- Ask them if they would feel comfortable talking to a Social Worker.

- If they are, accompany them to the Social Worker and ask the child if they would like you to remain with them or not.
- If they are not comfortable talking to a Social Worker, then follow these steps:
  - Listen carefully and calmly to them and ask questions to clarify the allegations so that you will be able to later report the incident correctly.
  - During the conversation, try not to repeat the same questions to the child, as this gives the child the impression that they did not give correct information the first time and that they are not fully believed.
  - Do not promise secrecy to the child. Inform the child that you must report the incident or inappropriate behaviour as it is in their best interest.
  - Take proper steps to ensure the physical safety and psychological well being of the child. This may include referring them for medical treatment.
  - Make certain you distinguish between what the child has actually said and the inferences you may have made. Accuracy is paramount in this stage of the procedure.
  - Do not permit personal doubt to prevent you from reporting the allegation to the proper supervisor.
  - Let the child know what you are going to do next and that you will let them know what happens.
  - Provide a written and verbal report to LTCH Safeguarding Office, using the appropriate reporting forms.
  - If the allegation made was against a person/persons representing a partner organisation working with LTCH then LTCH Senior Clinician in attendance will liaise with the partner organisation AS SOON AS POSSIBLE.

Note that if the child / young person needs urgent medical care then that must take priority. The needs of the child must always take priority over and above all adults needs.

### **GUIDANCE ON SAFE PRACTICE:**

#### **A. If a child/young person needs to see a doctor...**

In the absence of a Social Worker, it is paramount that a person known and trusted by the child accompanies them to the Doctor. This maybe you, the person the child has chosen to disclose her story to. In making this choice the child has invested a high level of trust in you; try and see it through. Keep calm, reassuring and professional.

#### **B. If you need to involve the Authorities...**

The timing of this must be in 'the best interests of the child' to avoid inadvertently inflicting more trauma. Ideally an LTCH senior practitioner should always be present at the interview.

### **NEVER, EVER**

Question the alleged Perpetrator, Parent, Guardian, Teacher, Community members, friends of the child etc. It is not your role to begin or run an investigation. If you do go down this route, then it can seriously compromise any investigation by the professionals who hold this responsibility.

Children/young people often feel they are to blame when they have been abused by an adult; this is especially so when they have been sexually abused. At all times the child needs to be reassured that they are not to blame for the alleged abuse.

### **Securing a safe place for a child if there is IMMEDIATE DANGER**

If the authorities absolutely cannot be contacted then the main concern must be the safety, best interests and well-being of the child. All effort should be made to care for the child in an environment known to them, if possible, with family members considered safe. If this is not possible then explore and assess the possibility of extended family or other 'safe people' known and trusted by the child/young person.

On occasion there may also be a need to assess risk to other children, and action may need to be taken to protect these additional children / young people until the appropriate authorities can be contacted and mobilised. Ask the child who they feel safe with / what they want to happen / where would they like to go, where would they feel safe. If of an appropriate age they will probably be able to tell you very clearly what their preference is/is not.

In no circumstances should any staff member or volunteer take any child or young person to their home without explicit LTCH approval and compliance to LTCH directions. There is no 'package' to say you must do this, or this is best. Each case needs to be considered on an individual basis ensuring that the best interests of the child are being met safely and securely.

## **2.7 Ramifications of Misconduct**

If an allegation of a violation of this Child Protection Policy is made concerning a named individual, from a verifiable source, against any employee, contractor, trustee, officer, intern or volunteer, they may be suspended from all activity / association with LTCH pending the outcome of an independent investigation. Staff will continue to receive full pay during this time.

LTCH will take immediate disciplinary action against anyone found to contravene the standards or principles contained within this policy; regardless of whether the action was undertaken within or outside the context of LTCH work. This may mean for

- Employees – disciplinary action / dismissal.
- Volunteers, trustees and members – ending the relationship with LTCH
- Partners – withdrawal of funding / support.
- Contractors – termination of contract.

Where appropriate LTCH will also report this incident to the Police.

The decision to suspend is not subject to challenge. When investigating and determining the concerns or complaints, the process should always be fair and any adverse determination should be open to challenge through an appeals process.

Actions by staff and volunteers are subject to LTCH Disciplinary Policy.

## **APPENDIX 1: Recognising Signs of Abuse**

Recognising potential abuse is complex and there is no simple checklist to allow easy recognition. However, there are warning signs, but they should be observed and assessed with care. It should not automatically be assumed that abuse is occurring. It is important, however, not to dismiss

significant changes in behaviour, fears, worries, and physical indicators a child is exhibiting. Do not ignore these signs, but remember you are not an investigator; all concerns must be reported.

- a) Possible signs of neglect
  - Frequent hunger and / or failure to grow.
  - Stealing or gorging food.
  - Poor personal hygiene.
  - Constant tiredness.
  - Inappropriate clothing.
  - Untreated medical problems.
  - Low self-esteem and poor social relationships.
- b) Possible signs of physical abuse
  - Bruises, burns, sprains, fractures, dislocations, bites, cuts.
  - Improbable explanation of injuries or inconsistent explanations for mechanism of injury.
  - Injuries which have not received medical attention.
  - Injuries which occur to the body in places not normally exposed to falls, rough games.
  - Withdrawal from physical contact.
  - Arms and legs covered in hot weather; where unusual and / or not due to religious reasons.
  - Showing wariness or distrust of adults.
  - Being aggressive towards others or being very passive and compliant.
- c) Possible signs of emotional abuse
  - Delayed physical, mental and emotional development.
  - Highly anxious or extremes of passivity or aggression.
  - Showing delayed speech or sudden speech disorder.
  - Fear of new situations.
  - Inappropriate emotional responses to painful situations.
  - Sudden under-achievement or lack of concentration.
  - Attention seeking behaviour.
  - Persistent tiredness.
- d) Possible signs of sexual abuse
  - Age-inappropriate sexualised behaviour.
  - Physical indicators; general and in genital and anal areas.
  - Frequent Urinary Tract Infections.
  - Urinating / defecating in inappropriate places.
  - Withdrawal from social contact.
- e) Possible signs of concern regarding adult behaviour
  - A person in whose presence a child becomes unusually.

## Approval and review

<b>Approved by</b>	<b>Geoff Robins, LTCH Chair</b>
<b>Policy Officer</b>	<b>Elsbeth Russell, LTCH Governance Trustee</b>
<b>Date</b>	<b>June, 2025</b>
<b>Review date</b>	<b>May, 2027</b>