## POLICY DETAILS

<table>
<thead>
<tr>
<th>Policy Name</th>
<th>LVCT Health Child Protection Policy</th>
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<tbody>
<tr>
<td><strong>Purpose and Description</strong></td>
<td>This policy demonstrates a commitment to protect children from all harm and abuse, including sexual exploitation and abuse, physical abuse, emotional abuse, and neglect. The policy and prescribed practices aim to create an open and aware environment where concerns for the safety and wellbeing of a child can be raised and managed in a fair and just manner, giving primacy to the best interests of the child.</td>
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</tbody>
</table>
| **Applicable** | ☒ Board Members  
☒ Core Management Team & Heads of Departments  
☒ All LVCT Health Staff including volunteers, visitors  
☒ Sub-awardees, partners, vendors, suppliers, consultants, and others with whom we provide assets in exchange for services or products. |
| First approved | 2019 |
| Effective date | April 2022 |
| Date of last review | October 2021 |
| Date for next review | October 2024 |
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LVCT HEALTH
CHILD PROTECTION POLICY
1.0. INTRODUCTION

This is a statement of intent that demonstrates a commitment to safeguarding children involved with LVCT Health or its partners from harm. The essential components of this child protection policy are outlined below;

- The welfare of the child is paramount
- All children without exception have the right to protection from abuse regardless of gender, ethnicity, disability, sexuality, or beliefs
- The policy is approved and endorsed by the board of trustees
- Who the policy applies to (i.e., all trustees, staff, and volunteers)
- Children and parents are informed of the policy and procedures as appropriate
- All concerns and allegations of abuse will be taken seriously by trustees, staff, and volunteers and responded to appropriately - this may require a referral to children’s services and in emergencies, the Police
- A commitment to safe recruitment, selection, and vetting
- Reference to principles, legislation, and guidance that underpin the policy
- Arrangements for policy and procedures review
- Reference to all associated policies and procedures which promote children’s safety and welfare e.g., with regards to health and safety, protection of children online, and photography.

2.0. BACKGROUND

Safeguarding children is the responsibility of everyone. We are aware that many children and young people are the victims of different kinds of abuse and that they can be subjected to social factors that have an adverse impact upon their lives including domestic violence, substance misuse, bullying, child prostitution, and ritualistic abuse. LVCT HEALTH recognizes its responsibility to safeguard and promote the welfare of children as enshrined in the constitution of Kenya 2010 and within the legal framework of the Children’s Act; No 8 of 2001: a law enacted to promote the well-being of children in Kenya. The Act addresses the rights a child is entitled to and the role of the Government and parents in protecting these rights as contained in the United Nations Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child, which the Government has committed itself to. It defines a ‘child’ as any human being under the age of eighteen years; while a child of tender years” means a child under the age of ten years;

3.0. PURPOSE

To protect children from abuse of all kinds in the course of duty and interaction by LVCT Health or any of its partners recognizing that the welfare of the child is paramount. We aim to create a safe environment within which children and young people can thrive and adults can work with the security of clear guidance. To ensure that LVCT Health has the proper processes in place to prevent and deal with child abuse by any LVCT Health employee.

4.0. SCOPE

This policy applies to all LVCT Health employees – both regular and temporary and Board members.

5.0. STATEMENT OF POLICY

LVCT Health believes that it is never acceptable for a child, those under the age of 18, to experience abuse of any kind. LVCT Health recognizes its responsibility to protect children from abuse and to safeguard their welfare. This policy has been written to ensure that LVCT Health employees do not engage in behaviour that could allow abuse to occur or engage in actions that could be misinterpreted by children, their families, or other adults as constituting or leading to abuse. Child Protection Principles are included in LVCT Health’s Code of Conduct to emphasize their importance. All staff are required to
acknowledge in writing, receipt, and understand the Child Protection Policy and will be kept informed of policy changes as they arise. Additionally, new employees are informed of LVCT Health’s Child Protection Policy during their orientation. The policy outlines practical steps to increase LVCT Health’s capacity to manage and reduce risks of child abuse associated with any interactions with the children at work. While it is not possible to eliminate risk entirely, much can be done to reduce opportunities for child abuse.

This policy applies to sub-partners and sub-contractors who work with LVCT Health. It also applies to suppliers and vendors who work with LVCT Health especially when they are in LVCT Health premises.

5.1. LVCT HEALTH GUIDING PRINCIPLES

The Child Protection Policy and practices are guided by these principles:

- **Zero tolerance of child abuse:** Child abuse, possession of, or access to child pornography is not tolerated by LVCT Health. LVCT Health will not knowingly engage, directly or indirectly with anyone who poses an unacceptable risk to children, nor fund any individual or organization that does not meet LVCT Health’s child protection compliance standards in their operations and activities.

- **Recognition of children’s interests:** Kenya is a signatory to the United Nations Convention on the Rights of the Child, and LVCT Health is committed to upholding the rights and obligations of the convention. LVCT Health recognizes that some children, such as children with disabilities, children orphaned due to HIV, children exploited through sex, children living in informal settlements, and children living in areas impacted by disasters (natural or conflict-based), are particularly vulnerable.

- **Sharing responsibility for child protection:** To effectively manage risks to children, LVCT Health requires the active support and cooperation of all its staff, volunteers, and partners who must meet the terms of the child protection policy and will be held accountable for not complying with it.

- **Risk management approach:** While it is not possible to eliminate all risks of child abuse, careful management can reduce the incidence of child abuse associated with LVCT Health activities. This Policy introduces risk assessments and treatments for a range of recognized risks to children.

5.2. IMPLEMENTATION WITHIN LVCT HEALTH

- Increase awareness of child protection issues – recognize that children and young people are listened to, valued, and respected

- Staff are aware of the need to be alert to the signs of abuse and know what to do with their concerns

- Strengthen internal recruitment and screening processes – this includes verbally contacting referees to determine any risks

- Enhance internal procedures for handling complaints related to child abuse

- Ensure appropriate use of communication systems – LVCT Health’s guidelines on the appropriate use of its communication systems cover child pornography. Using agency systems to access child pornography is inappropriate and is dealt with promptly, including reporting to relevant law enforcement agencies, as appropriate.

- Incorporate child protection strategies into risk management procedures

- Ensure risks to children are managed in service delivery and/or disaster response – LVCT Health recognizes that children with disabilities, children orphaned due to HIV, children exploited through sex, children living in informal settlements, and children living in areas impacted by disasters (natural or conflict-based), are particularly vulnerable. Risks to children must always be considered when developing programs or disaster response activities.

- Enhance codes of conduct among all staff, volunteers, interns, visitors, or partners working within LVCT Health. All personnel working directly with children must possess a valid certificate
of good conduct.

- Review child protection policy regularly- The policy will be reviewed every three years, or earlier if warranted, and lessons learned incorporated into subsequent versions.

### 6.0. RECOGNISING SIGNS OF ABUSE

It can often be difficult to recognize abuse. The signs listed in these guidelines are only indicators and many can have reasonable explanations. Children may behave strangely or seem unhappy for many reasons, as they move through the stages of childhood or their families experience changes. It is nevertheless important to know what could indicate that abuse is taking place and to be alert to the need to consult further.

Someone can abuse a child by actively inflicting harm or by failing to act to prevent harm. Abuse can take place within a family, in an institutional or community setting, by telephone, or on the Internet. Abuse can be carried out by someone known to a child or by a complete stranger. If you are worried about a child, it is important that you keep a written record of any physical or behavioral signs and symptoms. In this way, you can monitor whether or not a pattern emerges and provide evidence to any investigation if required.

#### Physical Abuse

Physical abuse can involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, and suffocating. It can also result when a parent or caregiver deliberately causes the ill health of a child in order to seek attention; this is called fabricated illness, or Munchhausen's Syndrome by Proxy.

Symptoms that indicate physical abuse include:

- Bruising in or around the mouth, on the back, buttocks, or rectal area
- Fingermark bruising or grasp marks on the limbs or chest of a small child
- Bites
- Burn and scald marks; small round burns that could be caused by a cigarette
- Fractures to arms, legs, or ribs in a small child
- Large numbers of scars of different sizes or ages

#### Emotional Abuse

Emotional abuse happens when a child's need for love, security, praise, and recognition is not met. It usually co-exists with other forms of abuse. Emotionally abusive behavior occurs if a parent, caregiver, or authority figure is consistently hostile, rejecting, threatening, or undermining. It can also result when children are prevented from social contact with others, or if developmentally inappropriate expectations are imposed upon them. It may involve seeing or hearing the ill-treatment of someone else.

Symptoms that indicate emotional abuse include:

- Excessively clingy or attention-seeking behavior
- Very low self-esteem or excessive self-criticism
- Excessively withdrawn behavior or fearfulness; a ‘frozen watchfulness’
- Despondency
- Lack of appropriate boundaries with strangers; too eager to please
- Eating disorders

#### Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, causing damage to their health and development. It may involve a parent or caregiver failing to provide
adequate food, shelter, or clothing, failing to protect a child from harm or danger, or failing to access appropriate medical care and treatment when necessary. It can exist in isolation or in combination with other forms of abuse.

Symptoms of physical and emotional neglect can include:
• Inadequate supervision; being left alone for long periods of time
• Lack of stimulation, social contact, or education
• Inadequate nutrition, leading to ill-health
• Constant hunger; stealing or gorging food
• Failure to seek or to follow medical advice such that a child's life or development is endangered
• Inappropriate clothing for conditions

**Sexual Abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. This may include physical contact, both penetrative and non-penetrative, or involve no contact, such as watching sexual activities or looking at pornographic material. Encouraging children to act in sexually inappropriate ways is also abusive. Under the Sexual Offences Act 2006, any sexual activity – contact or non-contact – with a child under the age of 18 is a crime.

Symptoms of sexual abuse include:
• Allegations or disclosure
• Genital soreness, injuries, or discomfort
• Sexually transmitted diseases; urinary infections
• Excessive preoccupation with sexual matters; inappropriately sexualized play, words, or drawing
• A child who is sexually provocative or seductive with adults
• Repeated sleep disturbances through nightmares and/or wetting
• Older children and young people may additionally exhibit:
  • Depression
  • Drug and/or alcohol abuse
  • Eating disorders; obsessive behaviors
  • Self-mutilation; suicide attempts
  • School/peer/relationship problems

**Negative Cultural Practices**

Some members of our communities hold beliefs that may be common within particular cultures but which are against the law in Kenya. These include ritualistic abuse, female circumcision, underage marriages, forced marriages.

**What to do with your concerns**

LVCT Health does not condone practices that are illegal or harmful to children

In the event that a child makes an allegation or disclosure of abuse against an adult or another child or young person, it is important that you:
• Listen to them and/or closely observe their presentation and behavior;
• Let them know that you take what they are saying seriously;
• Do not attempt to question or interview them yourself;
• Let them know that you will need to tell someone else in order to help them. Do not promise to keep what they tell you secret;
• Inform your supervisor as soon as possible;
• Make a written record of the incident or events.

Sometimes you may just feel concerned about a child but do not know whether to share your concerns or not. In this situation, you should always raise your concerns with your designated supervisor, who will help you to decide what to do. The responsibility for investigating allegations of abuse, whether they result from the disclosure of a child or the concerns of an adult, lies with Children’s department and the Police. Your supervisor will advise you when or whether to inform the child’s parents or caregivers about any concerns. If they decide to pursue a child protection investigation, you should:

  • Work closely and collaboratively with all professionals involved in the investigation, in order to keep the child safe;
  • Attend a child protection investigation session if/when you are invited. You will be asked to provide information about your involvement with the child, which is why it is important to keep records of your concerns;
  • Attend any subsequent child protection investigation review sessions.

7.0. ALLEGATIONS MADE AGAINST STAFF OR VOLUNTEERS

Organizations that work or come into contact with children and young people need to be aware of the possibility that allegations of abuse will be made against members of their staff. Allegations will usually be that some kind of abuse has taken place. They can be made by children and young people and they can be made by other concerned adults. Allegations can be made for a variety of reasons.

Some of the most common are:

  • Abuse has actually taken place
  • Something happens to a child that reminds them of an event that happened in the past – the child is unable to recognize that the situation and the people are different
  • Children can misinterpret your language or your actions because they are reminded of something else
  • Some children know how powerful an allegation can be; if they are angry with you about something they can make an allegation as a way of hitting out
  • An allegation can be a way of seeking attention.

All allegations should be brought to the notice of the supervisor immediately. In cases where the allegation is made against this person, the complainant should approach a more senior official or take the following action him or herself:

  • Make sure that the child in question is safe and away from the alleged abuser;
  • Contact the Children’s Officer or police (especially child protection unit officer) relevant to where the child lives
  • Contact the parents or caregivers of the child if advised to do so by the social worker/officer in charge of allegations;
  • Irrespective of any investigation by social workers or the police, you should follow the appropriate disciplinary procedure; common practice is for the alleged abuser to be suspended from work until the outcome of any investigation is clear;
  • Consider whether the person has access to children anywhere else and whether those organizations or groups need to be informed;
  • Act upon the decisions made in any strategy meeting.

All incidents should be investigated internally after any external investigation has finished, to review organizational practice and put in place any additional measures to prevent a similar thing from happening again.
8.0. SAFE RECRUITMENT

The application of rigorous procedures for the recruitment of any staff who come into contact with children, both directly and indirectly, can reduce the likelihood of allegations of abuse being made that are founded. As an absolute minimum, the following standards should be followed:

- All prospective workers (paid and unpaid) should complete an application form which asks for details of their previous employment and for the names of two referees
- All prospective workers (paid and unpaid) should be interviewed to establish the previous experience of working in an environment where there is contact with children and perceptions of acceptable behaviour
- Nobody should start work before references have been received. Referees should be reminded that references should not misrepresent the candidate or omit to say things that might be relevant to their employment
- All appointments to work with children should be subject to an agreed probationary period
- New members of staff should be clear about their responsibilities and wherever possible, work to an agreed job description
- These guidelines should be available to everyone and fully discussed as part of an induction process.
- All newly recruited staff who will be working directly with children must possess a valid certificate of good conduct.

Good Practice

- LVCT Health will maintain links to a designated child protection officer at a nearby police station (child protection unit), partner organization, or children's officer. It is the responsibility of this person to make themselves available for consultation by staff, volunteers, visitors, children, and their families
- All staff are responsible for children while in LVCT Health and must make sure that health and safety guidelines are adhered to at all times
- All staff working with children should receive regular supervision from a more experienced staff member and be encouraged to attend basic child protection training
- We recommend that all staff handle children in the presence of other staff or an adult and not in secluded private rooms. Where possible there should always be at least two adults present with a group of children
- Staff should be alert to strangers frequently waiting outside a venue with no apparent purpose.
- Children should not be collected by people other than their known caregivers unless notification has been received
- If a child is not collected after a session, it is reasonable to wait approximately half an hour for a parent or caregiver to arrive or try to contact the caregiver/parent. If the parent or caregiver cannot be contacted, staff should contact the relevant authorities e.g., children officer, and local administration, and request assistance.

Use of premises by other organizations

- In the event that a room or rooms within the LVCT Health premises is/are used by other organizations or persons, the letting/hiring agreement should ensure that the hiring organization adheres to the approved child protection procedures and/or that they read and agree to abide by these guidelines.
9.0. RECEIVING AND RESPONDING TO COMPLAINTS AND CONCERNS

By creating safe environments, we work to reduce the potential for things to go wrong. However, in the event when there is a concern, it is important that our response is appropriate, professional and limits any further possible stress or impact. We are therefore committed to doing the following:

- Take all complaints and concerns seriously
- Conduct initial risk assessments and put in place measures to maintain the safety of all those involved pending investigations
- Respect confidentiality in relation to all complaints and concerns

LVCT Health will adopt the Investigation Guidelines when responding to safeguarding concerns. Each case will be considered individually and in accordance with national legal or other expert advice. The details of the investigation processes are captured in the LVCT Health Safeguarding policy.

9.1. LVCT HEALTH RESPONSIBILITY FOR ONWARD REPORTING

We report statistics and anonymized individual serious reports to the relevant regulatory bodies and donors, as required. As a general rule, names or personal details of alleged survivors, perpetrators, individuals who report the concern or allegation, or others involved will not be shared. If it is necessary to disclose information to third parties this is decided on a case-by-case basis and, as far as possible, with the agreement of the individuals involved, except in cases of criminal activity.

TALK TO US
It is our policy to protect and preserve LVCT Health values.

Break the silence against harassment, discrimination and suspicious breach of LVCT Health Code of conduct using the following confidential channels

0704 053850
whistleblowing@lvcthealth.org

Image: LVCT Health Whistleblowing poster