



**Protocol for the Management of
Child Abuse and Neglect
in Saint Lucia**

CONTENTS

INTRODUCTION	4
1.0 PROTOCOL PRINCIPLES	5
2.0 MANDATORY REPORTING	6
2.1. Mandated reporters	6
3.0 REPORTING LAW	7
4.0 HOW TO MAKE A REPORT	7
5.0 CONFIDENTIALITY	8
6.0 FILING A FALSE REPORT OF CHILD ABUSE	8
7.0 FAILING TO REPORT A SUSPECTED CASE OF CHILD ABUSE AND NEGLECT	8
8.0 RESPONSIBILITIES OF DIVISION OF HUMAN SERVICES TO MANDATED REPORTERS	8
9.0 REPORTING PROCEDURES FOR CHILD ABUSE AND NEGLECT	8
9.1. Role of the Division of Human Services	8
9.2. Role of the Police	9
9.3. Role of medical personnel	10
9.4. Role of the Ministry of Education	10
9.4.1. Role of the teacher	10
9.4.2. Role of the Principal/Vice Principal	10
9.4.3. Role of the school counselor and district counselor	11
9.4.4. Role of the Chief Education Officer	11
9.4.5. Role of the Early Childhood Educator	12
9.4.6. Role of the day care services	12
9.5. Role of the media	13

INTRODUCTION

The Division of Human Services is the Saint Lucia government agency responsible for child protection which will assess and, where necessary, investigate a risk of significant harm to a child or young person. A number of other government and non-governmental sectors provide complementary child protection services. This protocol will help childcare providers, social workers, school counselors, educators, law enforcement officials, clergy, medical professionals and other persons working with children to understand their reporting responsibilities.

This protocol promotes a collaborative approach in the reporting and investigation of child abuse, which should result in more effective case management and better service delivery to children and families. It makes provisions for mandatory reporting and lists all persons mandated to report actual and suspected cases of child abuse and neglect.

It is hoped that this protocol will ensure centralization of services, greater coordination, enhanced efficiency, and accountability in the early identification, reporting, investigation and case management of children who are at risk, abused, neglected, vulnerable and in need of special care and protection. The protocol is therefore designed to allow the Division of Human Services to adopt an interdepartmental and intersectoral case management approach to delivering integrated services, based on comprehensive risk assessments, information sharing and established partnerships.

This document is also intended to provide assistance to mandated reporters in reporting suspected child abuse cases. While it is not meant to cover all situations, it will clarify basic information. In the event of doubt regarding a particular course of action to be taken, the Division of Human Services, and/or a law enforcement agency should be contacted.

1.0. PROTOCOL PRINCIPLES

- A** All care and protection interventions by the Division of Human Services are based on the best interest of the child.
- B** A child is anyone below the age of eighteen (18) years.
- C** Safety interventions are introduced specifically to control the risk situation until therapeutic measures can be applied and more permanent change occurs.
- D** Early reporting and investigation of child abuse and neglect are essential to the prevention and protection of a child from further abuse.
- E** A prompt and risk reduction response is important for the immediate protection of a child suspected of being abused.
- F** Whilst every effort will be made to utilize the least intrusive approach to the situation, thereby minimizing trauma to the child and family, a safe environment for the child must be the priority.
- G** Wherever possible, families should be given the appropriate preventive and supportive services to facilitate preservation of the family unit.
- H** For the purposes of reporting or initiating a child abuse investigation, a child who indicates that he or she has been abused, should be presumed to be telling the truth.
- I** The abuse of a child is an unacceptable act, which should be prosecuted, unless prosecution is determined not to be in the best interest of the child and her/his community.
- J** The provision of appropriate treatment services to the child, the family and the offender is crucial in facilitating the child's recovery from the effects of abuse and neglect and to reduce and/or eliminate the risk of further abuse and neglect.
- K** The Division of Human Services shall cooperate with the Police in the investigation of cases of suspected child abuse by giving full disclosure of all pertinent information.
- L** A collaborative approach in the reporting, investigation and management of child abuse is not a goal in itself, but a means by which the child's safety can be achieved.
- M** The Division of Human Services embraces the principles outlined in the Convention on the Rights of the Child, which Saint Lucia ratified on June 16th, 1993.

2.0.MANDATORY REPORTING

Making a report of child abuse can be difficult for the mandated reporter. Concerns about reactions of the persons suspected of abusing a child will surface. In addition, concerns regarding the outcomes and whether or not the report will put the child at greater risk are often present in the minds of the reporter. As such it is important to be prepared for the experience.

Mandated reporters should be knowledgeable about reporting requirements and the process that is triggered when a report is made. Responding to a suspected case of child abuse necessitates a team effort involving professionals from a variety of disciplines including child protection/Family Caseworkers, health practitioners (for example doctors, nurses, pharmacists and lab technicians), law enforcement officials, school counselors and mental health professionals.

2.1. Mandated reporters

All citizens are expected to report suspected or actual cases of child abuse and neglect to the Division of Human Services and/or the Police. However, persons mandated to report suspected or actual cases of abuse and neglect include:

- A** Physicians
- B** Coroners
- C** Registered nurses
- D** Nurse practitioners
- E** Community health aides
- F** Dental hygienists
- G** Dentists
- H** Hospital and Health Centre personnel engaged in admission, examination, care or treatment
- I** Mental health professionals
- J** Police officers
- K** Psychologists
- L** Psychotherapists
- M** Substance abuse counselors
- N** Family Caseworkers
- O** Welfare officers
- P** Social workers
- Q** Social Service workers
- R** Day care workers
- S** Probation officers
- T** Early childhood educators
- U** Community development officers
- V** Youth and sports officers
- W** Principals, teachers, school officials, school counselors
- X** Counselors
- Y** Priests and other ministers of religion

3.0.REPORTING LAW

Mandatory reporting as specified in the revised laws of Saint Lucia on Children (Care and Adoption).

4.0.HOW TO MAKE A REPORT

Call the appropriate telephone number.

A report would require that you contact the nearest police station or call the Vulnerable Police Unit or Division of Human Services at the following numbers;

CASTRIES – 451-7777, 468-5362, 468-5360 | VIEUX FORT– 454-9351 | SOUFRIERE – 457-1654

After placing your call the Police, Intake Social Worker, Child Protection Worker or Family Caseworker will ask for certain information which include:

Details	<i>The child or young person’s name, age and address,</i>
Indicators of harm	<i>The reason for believing that the injury or behavior is the result of abuse and neglect,</i>
Reason for reporting	<i>The reason for the call,</i>
Safety assessment	<i>Assessment of immediate danger to the child or children. For example, information may be sought on the whereabouts of the alleged abuser or abusers,</i>
Description	<i>Detailed description of the injury and/or behavior observed,</i>
Child/young person’s whereabouts	<i>The current whereabouts of the child or young person,</i>
Other services	<i>Your knowledge of other services involved with the family,</i>
Family information	<i>Any additional information about the family,</i>
Cultural characteristics	<i>Any specific cultural or additional details that will inform care for the child, for example, cultural origins, interpreter or disability needs.</i>