



TongaHealth

Child Protection Policy

Promoting an Active and Healthy Tonga

The Policy

1. Background

Tonga Health Promotion Foundation (“TongaHealth”) was established by the Kingdom of Tonga *Health Promotion Foundation Act 2007* as an independent body to act as a link between the community, Non-Government Organisations (NGOs), and the Government of Tonga to promote health by fighting Non-Communicable Diseases (NCDs). TongaHealth’s vision is for a healthy Tonga where everyone is responsible for promoting health and everyone shares in the benefits of a healthy population.

TongaHealth oversees the delivery of health promotion activities by a range of multi-sector partners who may engage with community groups like women’s development groups, youth groups, church-based groups, schools, villages and workplaces.

2. Policy overview

TongaHealth is committed to the safety and protection of children from all forms of abuse and exploitation. TongaHealth recognises that children can be extremely vulnerable and need to be protected. TongaHealth supports the rights of children and will act without hesitation to ensure a child safe environment is maintained. TongaHealth endeavours to provide a safe environment for children that is free from harassment, discrimination and abuse, and promotes respectful and positive behaviour and values.

This Policy outlines a risk management approach to prevent child abuse and provides clear and practical guidelines to responding to child abuse and managing complaints.

3. Purpose

The purpose of this Policy is to provide a framework for a safe, fair and inclusive environment for all children in the delivery of health promotion activities overseen by TongaHealth.

This Policy aims to clearly outline:

- definitions of child abuse and other relevant terms;
- overarching child protection guidelines;
- TongaHealth’s set of commitments to child protection;
- TongaHealth’s risk management approach to preventing child abuse and exploitation;
- TongaHealth’s code of conduct governing interaction with children; and
- TongaHealth’s practical reporting procedures and response mechanisms.

This Policy has been developed in order to:

- protect children engaged in TongaHealth funded programs from all forms of abuse and exploitation;
- protect employees and representatives from false or malicious allegations of misconduct; and
- protect TongaHealth from being held liable for the failure to take “reasonable steps” to prevent or protect children from abuse.

The Policy intends to educate staff and others about child abuse and promote a child-safe and a child friendly culture where everyone is committed to keeping children safe.

4. Scope

This Policy applies to all:

- TongaHealth Board members and employees;
- TongaHealth advisory committees, taskforce groups, scholarship holders and volunteers;
- TongaHealth contractors, subcontractors and consultants; and
- TongaHealth implementing partners and their employees and representatives.

Herein referred to as TongaHealth's employees and relevant stakeholders.

5. Guiding Principles of this Policy

This Policy is founded upon the following guiding principles:

- *Zero tolerance of child abuse* – TongaHealth does not tolerate child exploitation and abuse. TongaHealth works to reduce the risks of child exploitation and abuse associated with its funded health promotion activities, and trains its staff on their obligations. TongaHealth will not knowingly engage, directly or indirectly, anyone who poses an unacceptable risk to children. TongaHealth will not fund any organisation that does not meet TongaHealth's child protection standards in their activities.
- *Recognition and promotion of children's best interests* – The Kingdom of Tonga is a signatory to the United Nations Convention on the Rights of the Child, and TongaHealth is committed to upholding the rights and obligations under this convention.
- *Sharing responsibility for child protection* – To effectively manage risks to children, TongaHealth requires the commitment, support and cooperation of relevant stakeholders. They must meet the terms of this Policy and will be held accountable for complying with it.
- *Use of a risk management approach to prevent child abuse* – While it is not possible to eliminate all risks of child exploitation and abuse; careful management can reduce the risks to children that may be associated with TongaHealth funded activities. These are identified during initial risk assessments and are managed for the duration of the activity.
- *Report and respond to all incidents of child abuse* – TongaHealth uses fair and proper procedures when making decisions that affect a person's rights or interests. Our relevant stakeholders are also expected to adhere to this principle.

6. Definitions of Child Abuse and other Relevant Terms

A child means every human being below the age of 18¹.

Child abuse is the physical, sexual, emotional mistreatment or neglect of a child 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.

Child protection is an activity or initiative designed to protect children from any form of harm, particularly harm arising from abuse or exploitation.

Physical abuse of a child is when a person purposefully injures or attempts to injure a child from an interaction or lack of interaction which is reasonably within the control of a person in a position of responsibility, power or trust over the child. This may take the form of slapping, punching, shaking, kicking, burning, shoving, grabbing or choosing not to assist a child when a situation is causing them physical pain. There may be a single incident or repeated incidents.

¹ As outlined by the Convention on the Rights of the Child (United Nations, Article 1).

Emotional abuse of a child is any action that is not physical but that has a negative effect on the social, intellectual or emotional development of a child. Emotional abuse is categorised loosely as the chronic behavioural pattern directed at a child whereby a child's self-esteem and social competence is undermined or eroded over time. It can take the form of name-calling, threatening, belittling, ridiculing, intimidating, isolating, ignoring or other non-physical forms of hostile or rejecting treatment towards the child.

Sexual abuse of a child is when a person who is in a position of responsibility, trust or power over a child involves the child in sexual activity which is intended to gratify or satisfy the needs of the other person and which the child does not fully comprehend, is unable to give informed consent to, or is not developmentally prepared and cannot give consent. This can include contact acts (such as rape or sexualised touching) or non-contact acts (such as exposure to pornography or taking sexualised photographs of the child).

Child Exploitation is when a child is used in work or other activities for the benefit of others. This includes, but is not limited to, the commercial sexual exploitation of children whereby a child is sexually abused in return for cash or for kind and child labour whereby a child is forced to work or perform other acts to an extent detrimental to the child's physical, social or mental development.

7. TongaHealth's Commitments

TongaHealth is committed to instituting child protection measures to the highest possible standard. TongaHealth is committed to ensuring that:

- preventative child protection measures are implemented to the highest possible standard;
- no person is permitted to work with children if they pose an unacceptable risk to children's safety or wellbeing;
- child-safe recruitment and screening processes are employed;
- all employment contracts outline that TongaHealth has the right to dismiss or transfer to other duties employees who breach the child protection code of conduct;
- a child protection code of conduct exists and is understood and signed, wherever applicable, by all TongaHealth employees and relevant stakeholders;
- child protection training is regularly provided to relevant TongaHealth employees and relevant stakeholders;
- clear reporting procedures exist and are known by TongaHealth employees, relevant stakeholders, and the community;
- Kingdom of Tonga laws and processes and local resources are taken into account within reporting and response mechanisms;
- in relevant partner agreements, partners agree to abide by child protection requirements;
- child protection risks are included in all project and activity risk assessments;
- culturally specific issues relevant to child protection will be incorporated into project specific risk management strategies, training and response procedures;
- the highest levels of confidentiality and sensitivity are employed during an official investigation of an incident; and

8. Policy Oversight

Approval

In accordance with the *TongaHealth Delegations of Authority Policy* the CEO is responsible for the approval of the Child Protection Policy.

Review

This Policy and its associated protection measures should be reviewed every two years, or earlier if required. The CEO shall be responsible for coordinating the review.

Responsible Officer(s)

The CEO is ultimately responsible for promoting this Policy and its associated protection measures. The CEO shall make sure all employees and stakeholders have understood the Policy and Code of Conduct, and have duly signed the Code of Conduct.

The **xxx** is appointed as the Child Protection Officer to support the CEO in executing his/her responsibilities. The Child Protection Officer's duties will include:

- Organising the training on the Policy and Code of Conduct for staff and relevant stakeholders.
- Answering questions or concerns about the Policy or Code of Conduct.
- Receiving and acting upon allegations and/or reports of child abuse and exploitation.

Appendix A: Child-safe recruitment and screening processes

TongaHealth commits to not engage any person considered to pose an unacceptable risk to children.

The following child-safe recruitment and screening processes will apply to all prospective employees and volunteers.

A criminal record check will be done before engagement. Alternatively, a statutory declaration will be signed if a reliable criminal record check is not immediately available. The criminal record check and statutory declaration will be kept on file. The CEO shall coordinate the collection of the criminal record check (or statutory declaration).

At least two (2) verbal referee checks will be conducted and documented during the recruitment process. The refereed checks will be conducted by the CEO. When conducting the verbal referee checks, the following will be considered:

- Explain what the role involves (type of work or contact with children) to referee.
- Follow this with a series of questions which may include, but is not limited to the following:
 - Can you tell me about the applicant's work with children? Have you directly observed this work?
 - Do you have any concerns in relation to the applicant's work with children or with vulnerable children? If so, please explain.
 - The applicant may be working with children under limited supervision. Do you have any concerns in this regard?

During the applicant's interview they will be asked whether they have been charged with child exploitation offences and their response will be documented. The applicant may also be asked behavioural-based questions depending on the nature of the position applied for. The interview questions will be asked by the CEO. Example questions may include, but are not limited to the following:

- What is your understanding of child protection?
- TongaHealth is a child safe organisation. What do you think that means?
- We sent you a copy of our Code of Conduct before the interview. What do you think of the Code?
- Have you worked / volunteered with children in a similar position before? What did you like about it? What did you find difficult?
- What strengths in working with children do you bring from your experience, community and family background?
- What do you think makes a good role model for children and young people?
- How do you feel about being supervised?
- Please provide three (3) examples of how to work safely with children.
- How have you handled children who did not want to participate in an activity?
- How would you handle children who were not listening to your instructions?
- How would you create a child friendly space for an activity for children with a disability?
- What boundaries are important when working with children / young people?
- If you were concerned about the actions or behaviour of a co-worker towards children how would you respond?

Further, all job advertisements will include the following message:

TongaHealth is a child-safe and friendly organisation, and will ask all applicants to undergo our child-safe recruitment and screening processes. All employees or volunteers are expected to sign the TongaHealth Child Protection Code of Conduct as a condition of employment or engagement with TongaHealth.

Employment contracts will include provisions for TongaHealth to dismiss, suspend, or transfer to other duties employees who breach the TongaHealth Child Protection Policy and/or Code of Conduct.

Appendix B: Child Protection Code of Conduct

1. Acceptable Behaviours

TongaHealth employees and relevant stakeholders shall:

- Treat children with dignity and respect regardless of ethnicity, race, colour, gender, age, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.
- Follow TongaHealth's Child Protection Policy and any guidelines regarding the safety of children.
- Conduct themselves in a manner appropriate with their position as an employee or relevant stakeholder of TongaHealth in all their dealings with children.
- Be visible when working with children and, wherever possible, ensure that another adult is present when working in the proximity of children.
- Listen to children and allow them to be engaged in decisions that may affect them.
- Immediately raise concerns or allegations regarding a child's safety or wellbeing in accordance with TongaHealth's Reporting Procedures and observe procedural fairness when engaged in decision-making.
- Immediately disclose all charges, convictions and other outcomes of an offence, which occurred before or occurs during my association with TongaHealth that relate to child exploitation and abuse.
- Comply with all relevant laws of the Kingdom of Tonga.

2. Unacceptable Behaviours

TongaHealth employees and relevant stakeholders shall not:

- Use language or demonstrate behaviour towards children that is inappropriate, harassing, abusive, demeaning, sexually provocative, or culturally insensitive.
- Engage children in any form of activity that is demeaning, offensive, sexually provocative, abusive or culturally inappropriate or insensitive.
- Engage children in any form of sexual activity or acts, including paying for sexual services or acts.
- Invite unaccompanied children into their home, unless they are at immediate risk of injury or in physical danger.
- Access child pornography through any medium.
- Sleep in close proximity to unsupervised children unless absolutely necessary, in which case I must obtain my supervisor's permission, and ensure that another adult is present if possible.
- Hire children for domestic or other labour which is inappropriate given their age or developmental stage, which interferes with their time available for education and recreation activities, or which places them at significant risk of injury.
- Exclude or favour a particular child.
- Use equipment including but not limited to computers, mobile phones, video or digital cameras, or social media inappropriately or without the consent of the child and his/her parent or guardian.
- Physically assault, discipline or punish children.
- Touch a child in an inappropriate or culturally insensitive manner.

3. The Photo Policy for Using Children's Images

When photographing or filming a child or using children's images for work related purposes, TongaHealth employees and relevant stakeholders must:

- Assess and endeavour to comply with local traditions or restrictions for reproducing personal images before photographing or filming a child.
- Obtain legitimate informed consent from the child and parent or guardian of the said child before photographing or filming the child. As part of this an explanation as to how the photograph or film will be used must be given (see informed consent form).
- Ensure photographs, films, videos and DVDs present children in a dignified and respectful manner and not in a vulnerable or submissive manner. Children should be adequately clothed and not in poses that could be seen as sexually suggestive.
- Ensure images are honest representations of the context and the facts.
- Ensure file labels, meta data or text descriptions do not reveal identifying information about a child when sending images electronically or publishing images in any form.
- Ensure images of children available for public use do not reveal any identifying information.
- Understand that the onus is on them, as a person associated with TongaHealth, to use common sense and avoid actions or behaviours that could be construed as child exploitation and abuse.

4. Acknowledgement and Signing

I have read and understood the TongaHealth Child Protection Code of Conduct and commit to upholding the principles contained within. I understand that if I breach the TongaHealth Child Protection Code of Conduct in any capacity, that I will be disciplined accordingly.

Signed: _____

Date: _____

Informed Consent Photography/Videography Form

The informed consent process ensures the rights of the subject of the photo/video are considered – a respectful approach that TongaHealth brings to all of its work. The aim of informed consent is for the subject to truly understand that:

- TongaHealth often photographs / films people to help promote the work we do.
- TongaHealth will own the photograph / footage.
- The photograph / footage may be used in communication materials and in print and electronic media, including the internet and social media platforms.
- The photograph / footage may be shared with other organisations TongaHealth works with (including but not limited to the Australian Government).
- The photograph / footage may be seen by a wide audience.

You should ensure that the subject understands the above points, and consents to their image being taken and used by TongaHealth. This should be done in either Tongan or English (through an interpreter if necessary).

The next step is to either film or record the subject giving consent, or complete and sign the 'Informed Consent Checklist' including the name of the subject, the location and the date.

Photographs / footage of children

Photographs or videos of children taken for TongaHealth must adhere to standards arising from the TongaHealth *Child Protection Policy*. Before taking any photographs or footage of people aged less than 18 years old, you must ensure the parent or guardian understands the aim of informed consent and consents to their child being photographed / filmed.

Informed consent may be recorded in one of two ways:

1. On film

Use the video or audio recording function on your phone / camera to record the subject giving consent. The subject should say the following (in whichever language is appropriate).

“My name is _____ and I give TongaHealth permission to use my image.”

Where children are the subject, the parent or guardian should say the following (in whichever language is appropriate).

“My name is _____ and I give TongaHealth permission to use the image of my child whose name is _____.”

2. Informed Consent Checklist

The photographer / videographer should complete and sign this checklist (instead of filming the subject).

- 🍎 I have given the subject(s) an overview of the informed consent process.
- 🍎 I have explained to the subject(s) that they are under no obligation to be photographed or videoed.
- 🍎 I have explained the ways the photos or video may be used by TongaHealth.
- 🍎 I have informed the subject(s) that they can remain anonymous if they choose.
- 🍎 I have explained that the subject(s) will not be paid for their photo / video and that TongaHealth does not sell its photographs / videos.

- 🍏 I have explained to the subject(s) how their photograph / the footage will benefit the work of TongaHealth.
- 🍏 I have given the subject(s) the contact details of TongaHealth in case they wish to follow-up regarding permissions.
- 🍏 I have confirmed that the subject(s) is over 18 years of age or the subject(s) is under 18 and I have completed the consent process with their parent or guardian.

Name(s) of subject (translate as appropriate):

Signatures: _____

Name of guardian (if subject is under 18 years old – translate as appropriate):

Signatures: _____

Location:

Photographer / videographer name:

Photographer / videographer signature:

Date:

Contact the TongaHealth Corporate Communications Officer for more information.

Phone: +676 25721

Email: info@tongahealth.org.to

Appendix C: Child Protection Training

TongaHealth is committed to educating employees and relevant stakeholders about the Child Protection Policy and Code of Conduct, and how to reduce risks and create child-safe environments.

TongaHealth will provide a training/induction session on the Child Protection Policy and Code of Conduct for all new Board members, employees and volunteers as soon as practicable; but no later than three (3) months from the commencement of their engagement. TongaHealth will also provide refresher training on the Child Protection Policy and Code of Conduct to all employees and volunteers annually. Induction and refresher training will be coordinated by the CEO and/or Child Protection Officer.

TongaHealth will keep documentation of all training materials, and an attendance record.

Please refer to Appendix E for details on child protection training for TongaHealth's partners.

Appendix D: Reporting Protocols

1. Reporting Child Abuse

Any suspicion or disclosure of child abuse must be immediately reported to the CEO and/or Child Protection Officer. All incidents will be reported and managed in accordance with the TongaHealth Child Protection Reporting Procedure (see below).

2. Guidelines to responding to Child Abuse Allegations

- TongaHealth takes all allegations of child abuse seriously, whether by TongaHealth employees or relevant stakeholders.
- All allegations will be thoroughly investigated.
- Where an incident has been reported it will be managed in accordance with the TongaHealth Child Protection Reporting Procedure (see below).

3. TongaHealth Child Protection Reporting Procedure

It is compulsory for all TongaHealth employees and relevant stakeholders to report any concerns for the safety or wellbeing of a child.

The following steps should be followed to make a report:

Who can report?

A child, parent or guardian, community members, employees, relevant stakeholders or any other person related to the operations of TongaHealth or TongaHealth funded activities.

What to report?

Any behaviour that you see, hear, are told, or suspect may be child abuse or make you concerned for the safety or wellbeing of a child. Further, any suspected breach of the TongaHealth Child Protection Policy and/or Code of Conduct. You should provide as much detail as possible, including:

- Date(s) of incident(s).
- Name of organisation(s) involved, including any TongaHealth partner organisations.
- Alleged offender's details, including name and occupation.
- Details of alleged incident(s).
- Whether Tonga Police have been informed.
- If it is a TongaHealth funded activity, the name of the activity (if known).
- Any other relevant information.

If you are unsure whether the information you have relates to child abuse, please contact the TongaHealth CEO or Child Protection Officer (see details below) for further information and advice.

When should I make a report?

Within 24 hours or as soon as possible.

How to make a report?

Reports can be made by:

- Email: childprotection@tongahealth.org.to
- Telephone: +676 25721 (ask to speak to the CEO or Child Protection Officer).
- Mail: C/O Child Protection Section
Tonga Health Promotion Foundation
P.O. Box 2026
Nuku'alofa, Tonga

The Incident Reporting Form may be used when reporting.

Who should I report to?

TongaHealth CEO or Child Protection Officer.

What will happen next?

All information provided to the relevant TongaHealth child protection contacts will be treated with confidentiality. Depending on the nature of the allegation, the following procedures will be followed.

For non-critical incident allegations

A non-critical allegation of child abuse is one which does not pose an immediate threat to a child supposing the allegation was true. These incidents may well be critical in nature but the time frame for responding is not as immediate.

- a. The incident will be documented and investigated by the TongaHealth CEO or a relevant authority such as the Tonga Police.
- b. Depending on the nature of the allegation, TongaHealth will consider referring the child and family to local support services.
- c. The incident will be investigated with full respect for the confidentiality of the accused and the alleged victim, and information will be dispersed on a 'need to know' basis with the primary concern being the rights and welfare of the persons involved.
- d. The accused person will be given an opportunity to express their views/opinions/version of facts.
- e. The views of the alleged child victim will be considered in light of the documented evidence that children rarely lie about abuse.
- f. Where the incident is reasonably proven to have occurred, appropriate disciplinary measures will be taken, including, but not limited to:
 - Warning.
 - Transfer of duties.
 - Suspension.
 - Dismissal.

The disciplinary measure will depend on the nature of the offence and will be at the discretion of the TongaHealth CEO and will be fully documented.

- g. Where an allegation is found to be false or unfounded, all efforts will be taken to ensure the rights of the accused person is upheld including restoration of any damage to reputation or dignity within the organisation.

For critical allegations

A critical allegation is an allegation whereby there is an immediate threat to the welfare of a child supposing the allegation was true.

- a. Where the allegation involves a violation of the laws of the Kingdom of Tonga, the incident will be immediately reported to the Tonga Police and the person will be suspended from employment pending an investigation.
- b. Depending on the nature of the allegation, TongaHealth will consider referring the child and family to local support services.
- c. All efforts will be taken to ensure the confidentiality and rights of the accused person, and information relating to the incident will only be shared on a 'need to know' basis.
- d. The rights of the alleged child victim and the accused person will be of paramount concern and confidentiality will be maintained insofar as is reasonably necessary pending an investigation.
- e. Where allegations are confirmed to be a violation of the laws of the Kingdom of Tonga, confidentiality will no longer be applicable unless deemed necessary to uphold the rights of the child victim. The accused person will remain suspended pending the finalisation of the investigation.
- f. Where a breach of the TongaHealth Code of Conduct is found to have occurred and been confirmed, appropriate disciplinary measures will be taken, including, but not limited to:
 - Warning.
 - Transfer of duties.
 - Suspension.
 - Dismissal.

The disciplinary measure will depend on the nature of the offence and will be at the discretion of the TongaHealth CEO and will be fully documented.

- g. Where an allegation is found to be false or unfounded, all efforts will be taken to ensure the rights of the accused person is upheld including restoration of any damage to reputation or dignity within the organisation.

4. TongaHealth Reporting to Australian Government

If the allegation relates to Australian Government funded activities, TongaHealth is required to forward relevant information to the Australian Government Department of Foreign Affairs and Trade (DFAT) in accordance with TongaHealth's contractual obligations. Notification of allegations of child abuse and exploitation should be sent to:

DFAT Nuku'alofa Post: Vika.Lutui@dfat.gov.au and/or Telusa.FotuTuionetoa@dfat.gov.au

and

DFAT Canberra: childprotection@dfat.gov.au

5. Referral to local support services

Depending on the nature of the allegation and in discussions with the family, TongaHealth will consider referring the child and family to local support services. TongaHealth has entered into arrangements with the Tonga National Centre for Women and Children (TNCWC) and Women and Children Crisis Center Tonga (WCCC). Please refer to the respective referral forms for these organisations.

Incident Reporting Form

When reporting any concerns for the safety or wellbeing of a child to TongaHealth, this incident reporting form may be used to report relevant details. Include as much detail as possible where known.

When completed, this form can be submitted through the following channels:

- Email: childprotection@tongahealth.org.to
- Mail: C/O Child Protection Section
Tonga Health Promotion Foundation
P.O. Box 2026
Nuku'alofa, Tonga

Child Protection Incident Report Form	
Report made by	
Date of report	
Date and time of alleged incident	
Name of organisations involved (including any TongaHealth partners)	
Alleged offender's details (including name and occupation)	
Details of alleged incident	
Details of any witnesses	
Have Tonga Police been informed?	Yes / No
The name of the activity (if TongaHealth funded)	
Any other relevant information	
Signature of reporting person	
Signature of receipt (TongaHealth CEO)	

Referral Form

Directions

Complete the following referral form with as much detail and information as possible. However, please be mindful to ensure the child and family do not feel threatened to provide such information.

Date: _____

Child's details	
Name	
Male / Female	
Date of Birth	
Village	

Parent / Guardian's details	
Name	
Male / Female	
Date of Birth	
Village	
Relationship to Child	
Contact Details	

Referrer's details	
Name	
Position	
Contact Details	

Allegation details	
When	
Where	
Has Tonga Police been informed	
Describe the nature of the allegation	

Appendix E: Expectations of Partners

TongaHealth's implementing partners play an important role in protecting children. Accordingly, they will be expected to uphold the principles of this Policy and adhere to the standards specified in the Code of Conduct. To address these requirements TongaHealth has implemented the following measures.

1. Project and Activity Risk Assessments

In accordance with the *TongaHealth – Tonga National NCDs Grant – Grant Recipient Capacity Assessment Tool* and *TongaHealth Risk Management Framework*, TongaHealth will undertake project and activity risk assessments of potential implementing partners. Such capacity assessments will be made in consideration of child protection. Where the risks associated with child protection is deemed unacceptable, TongaHealth shall not engage with the respective organisation.

Assessment of potential implementing partners will be conducted in accordance with the following procedure.

Child Protection Assessment Procedure

There are three key steps in assessing the implementing partner's child protection mechanisms.

1. Determine the level of contact with children that the funded activity is likely to involve.
2. Determine whether the implementing partner is a child-focused organisation.
3. Complete a full child protection assessment (as required).

Step 1: Determine the level of contact with children that the funded activity is likely to involve.

An assessment of the level of contact with children is based on the following three definitions.

Level (Risk)	Definition	Indicators / Examples
Nil contact with Children (Low)	The activity is reasonably expected to have no contact with children.	<ul style="list-style-type: none"> • No expected contact with children.
Contact with Children (Medium)	The activity involves or may involve contact with children, either under position descriptions or due to the nature of the work environment. This includes indirect contact with children in the community.	<ul style="list-style-type: none"> • Oral and written communication (including electronic communication) relating to a child. • Visiting premises e.g. schools, health or residential facilities that provide services to children. • Any community consultation (data collection, surveying, training) where indirect contact with children will be made.
Working with Children (High)	The activity would reasonably be expected as normal practice to have contact with children, and the contact is not incidental to the activity. This also includes volunteering or other unpaid work.	<p>Where the activity is partially or wholly dedicated to children, for example:</p> <ul style="list-style-type: none"> • Disability services. • Child education services: sports programs, healthy eating programs. • Health services. • Other support services for children.

This step in the assessment takes the highest risk level of contact with children as the outcome. For example, if you are unsure whether the characteristics of the activity clearly indicate 'contact with children' or 'working with children', always revert to the highest-risk position and select 'working with children'.

Step 2: Determine whether the grant recipient is a child-focused organisation.

Determination of whether a grant recipient is a child-focused organisation is guided by whether the grant recipient across all of its operations provides any direct activities / services for children. Where it does, the grant recipient would be considered to be a child-focused organisation.

Step 3: Complete a full child protection assessment (as required).

Whether a full child protection assessment is required is based on the following matrix.

Child-focused Organisation	Activity Level Contact with Children		
	Nil Contact	Contact with Children	Working with Children
No	No further assessment	Full assessment	Full assessment
Yes	Full assessment	Full assessment	Full assessment

As outlined in the matrix above, the only circumstance that is exempt from a full child protection assessment is where the potential grant recipient is deemed to not be a child-focused organisation, AND the proposed activity for funding will have nil contact with children. All other circumstances will require a full child protection assessment as outlined below.

If a full child protection assessment is required, the following areas should be addressed²:

Assessment Area	Suggested Evidence
1. The organisation has a child protection policy that applies to all personnel (including volunteers and ancillary staff such as drivers, cleaners, and security guards), partners and subcontractors that are engaged to perform any part of a TongaHealth funded activity.	<ul style="list-style-type: none"> Child protection policy. Personnel are aware of the organisation's child protection policy (e.g. through internal communication and training).
2. The organisation has recruitment screening processes for all personnel in contact with children. These recruitment procedures include: criminal record checks before engagement, verbal referee checks, and interview plans that incorporate behavioural-based interview questions.	<ul style="list-style-type: none"> Documented criminal record checks for personnel in contact with children, or a documented statutory declaration in the event a criminal record check is not possible or reliable. Documented verbal referee checks. Interview plans incorporating behavioural-based interview questions that are specific to positions that involve working with children. Documented request for an applicant to disclose whether they have been charged with child exploitation offences and their response.
3. The organisation's child protection policy includes a documented reporting procedure for child exploitation and abuse allegations and policy non-compliance, including available sanctions for breaches.	<ul style="list-style-type: none"> Child protection policy provides guidelines and process for managing concerns or allegations of child exploitation and abuse, and policy non-compliance. Documentary evidence outlining the organisation's child protection reporting process. Documentary evidence outlining the organisation's details of available sanctions for breaches of the code of conduct, child abuse and exploitation, and policy non-compliance.
4. The organisation provides child protection training for personnel.	<ul style="list-style-type: none"> Training agendas and timeframes for training. Materials used in training. Training attendance records.

² Where the grant recipient being assessed is a Government of Tonga Ministry, only areas 2, 3, 4, 5, and 9 should be addressed.

Assessment Area	Suggested Evidence
5. The organisation has a child protection code of conduct that meets the standard of TongaHealth. ³	<ul style="list-style-type: none"> A child protection code of conduct based on TongaHealth's Child Protection Code of Conduct. Signed codes of conduct or a register documenting details of personnel who have signed the code of conduct. Documentary evidence of training for staff explaining the Code of Conduct.
6. The organisation's child protection policy commits it to preventing a person from working with children if they pose an unacceptable risk to children.	<ul style="list-style-type: none"> Referenced in relevant documentation, including policies, contracts and human resource guidelines.
7. The organisation's employment contracts contain provisions for dismissal, suspension or transfer to other duties for any employee who breaches the child protection code of conduct, engages in child abuse and exploitation, and policy non-compliance.	<ul style="list-style-type: none"> Contracts of relevant personnel. Human Resources Policy that reflects the dismissal, suspension and transfer provisions of employment contracts. Human Resources Staff trained on the employment contract requirements.
8. The organisation's child protection policy is subject to regular review—at least every five years or earlier if warranted.	<ul style="list-style-type: none"> Timetable / timeframe for review. Policy review report at least every five years.
9. The organisation undertakes a risk assessment that covers TongaHealth funded activities that have contact with children. The assessment should identify risks, classify any high risk activities, and document steps being taken to reduce or remove these risks.	<ul style="list-style-type: none"> Risks register identifying high risk activities and measures to reduce or remove the risk to children. Evidence that risk assessments are reviewed / updated throughout the lifecycle of the funded activities.

2. Partner Agreements

It is a compulsory requirement for all of TongaHealth's implementing partners to comply with the TongaHealth Child Protection Policy and Code of Conduct. This requirement shall be expressly stated in partner grant agreements. Implementing partner activities funded by TongaHealth will not commence until such time as TongaHealth is satisfied that all relevant individuals have signed a Child Protection Code of Conduct⁴, and sufficient risk mitigation measures have been employed.

3. Partner Child Protection Measures

Depending on the nature of the implementing partner, TongaHealth expects that the organisation will implement its own Child Protection measures. At a minimum, TongaHealth would expect the matters in the table above to be addressed by the implementing partner. An exception to this is for Government of Tonga Ministries, who will be expected to address measures 2, 3, 4, 5, and 9 at a minimum.

4. Partner Child Protection Training and Capacity Building

Where concerns are identified pertaining to implementing partners' capacity to implement and adhere to sufficient Child Protection measures, TongaHealth will provide training and other capacity building support. Training and capacity building will be tailored to address the specific concerns identified, and may include group training sessions for multiple implementing partners, or one-on-one training with implementing partners' relevant employees and/or representatives.

³ Where the grant recipient is successful in receiving a grant from TongaHealth, the grant recipient may elect to sign TongaHealth's Partner Child Protection Code of Conduct.

⁴ Signing of the TongaHealth Child Protection Code of Conduct is acceptable in the absence of an implementing partner Child Protection Code of Conduct.

Appendix F: Relevant Legislation and Conventions

1. International Conventions

The Kingdom of Tonga is a signatory to the following international conventions. Accordingly, TongaHealth is committed to upholding the rights and obligations under these conventions.

International Organisation	International Instrument	Status
United Nations	The United Nations Convention on the Rights of the Child	Ratified
United Nations	The United Nations convention on the Rights of Persons with Disabilities	Signed

2. Kingdom of Tonga laws

While the Kingdom of Tonga does not have legislation solely dedicated to Child Protection, a number of other relevant legislation indirectly address matters in relation to Child Protection. Accordingly, TongaHealth is committed to upholding the principles of these laws.

Tongan Legislation	Legislative Provisions
<i>Criminal Offences Act</i>	Section 115(1) – If any person over the age of 16 years, who has the custody, charge, or care of any child or young person, wilfully assaults, ill-treats, neglects, abandons, or exposes such child or young person, or causes or procures such child or young person to be assaulted, ill-treated, neglected, abandoned, or exposed, in a manner likely to cause such child or young person unnecessary suffering or injury to his health (including injury to or loss of sight, or hearing, or limb, or organ of the body, and any mental derangement), that person shall be guilty of an offence ...
<i>Criminal Offences Act</i>	Section 116(1) – Every person who with intent to deprive any parent or other person having the lawful charge of any child under the age of 14 years of the possession of such child unlawfully— (a) takes or entices away or detains such child, or (b) receives such child knowing it to have been so taken or enticed away as aforesaid, shall be liable to imprisonment ...
<i>Criminal Offences Act</i>	Section 125(1) – Any person who shall commit an indecent assault on any child under the age of 12 years shall be liable on conviction thereof to imprisonment ... Section 125(2) – It shall be no defence to any prosecution for an indecent assault on a child under the age of 12 years to prove that he or she consented to the act of indecency.
<i>Family Protection Act 2013</i>	Section 3(a) – The objects of this Act are to ... ensure the safety and protection of all persons, including children, who experience or witness domestic violence.
<i>Family Protection Act 2013</i>	Section 27(1)(b) – A duty of care is hereby placed on any health practitioner and social service provider ... advise the complainant about filing a complaint with the police or refer any child victim for counselling or medical treatment.
<i>Guardianship Act 2004</i>	Section 15(1) – The Court shall regard the welfare of the child as the paramount consideration in any proceedings ...