



Child protection policy

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1. Introduction

Child abuse is a global phenomenon. It occurs in all countries and in all societies. It involves the physical, sexual, emotional abuse and neglect of children and adolescents. It is almost always preventable. Children and adolescents can be potentially subjected to exploitation, abuse, violence and neglect in families, communities, institutions, organisations, private places, public places by various circumstances by variety of people, including delegates, support staff, and ancillary personnel people associated with the conference. In order to address and protect children and adolescents from potential abuse and exploitation during their involvement with E this Child Protection Policy has been developed.

As part of our duty of care in The European School MOL, all those entrusted with overseeing the system (which includes those involved in the appointment of staff and the management of the school) are required to do everything they can to ensure that everyone working with our students is fit to do so, and that as safe and secure an educational environment as possible is established.

This Child Protection Policy is developed to ensure the highest standards of professional behaviour and personal practice to ensure no harm occurs in any situation to children and adolescents during their involvement in school activities, projects and programmes. It therefore includes measures regarding recruitment procedures, review of management structures, creation of space for children to speak out, staff training, and development of transparent protocols.

The Child Protection Policy is supported by clear guidelines on how it needs to be implemented by organisations participating and supporting children in the school activities, projects and programmes.

Special procedures and checklists are part of the Child Protection Policy, including reporting procedures and actions following behaviour, which is not in compliance with the child protection standards.

Any information that raises concerns about the welfare and protection of any pupil is transmitted to the appropriate school staff and any allegation is treated as a matter of utmost seriousness. It is understood and respected that sensitivity and understanding in dealing with a child protection case is of extraordinary importance. It is our aim that a culture of openness exists throughout the school, where all members of the community feel able to express their concerns and anxieties without fear of retaliation or humiliation and have confidence that they will receive a serious, sensitive and professional response from those in positions of responsibility.

The statutory responsibility for child protection in Belgium lies within Belgian law.

2. Definitions

Child: A child is defined as anyone under the age of 18, in line with the UN Convention on the Rights of the Child (1989).

Child protection is a broad term to describe philosophies, standards, guidelines and procedures to protect children from both intentional and unintentional harm. In the current context, it applies to Eurochild's duty to make sure that its staff, operations and programmes do no harm to children, that is that they do not expose children to the risk of harm and abuse, and that any concerns the organisation has about children's safety within the activities and programmes in which they work, are reported to the appropriate authorities.

- **Direct contact with children**

Being in the physical presence of a child/children in the context of European school Mol's work, whether contact is occasional or regular, short or long-term. This could involve attending meetings and conferences at which children are present or working with child volunteers in the school premises (N.B. these are examples).

- **Indirect contact with children**

- 1) Having access to information on children in the context of of European school Mol's work, such as children's names, locations (addresses of individuals or projects), photographs and case studies.
- 2) Providing funding for organisations that work 'directly' with children. Although indirectly, this nonetheless has an impact on children, and therefore confers upon the donor organisation responsibility of child protection issues. (N.B. this list of examples is not exhaustive).

- **Member**

For the purpose of this policy, a member is a full or associate member organisation or an individual member of ESMOL.

- **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.'²

3. The need for a child protection policy

'All organisations and professionals working or in contact with children are obliged to ensure their operations are 'child safe' and therefore need to have a Child Protection Policy'¹⁴.

ESMOL needs a child protection policy because:

- **Organisation staff are protected:** All children have a right to freedom from all forms of violence, abuse and exploitation, based on the UNCRC. It is therefore the responsibility of Eurochild to ensure that all its activities, policies, projects and programmes are 'child safe'. This means that staff do not represent a risk to children and that programmes, policies and practices can be designed and developed in ways that promote the protection of children.
- **Children are protected:** Some children are in particular vulnerable to abuse, exploitation, and ill-treatment at the hands of carers, project workers, and those with access to their personal information. Many children growing up in vulnerable circumstances have already experienced ruptured relationships of trust or abuse of an adult-child relationship in the form of physical, psychological or sexual abuse.
- **The organisation and its reputation is protected:** Organisations working with vulnerable children have been, are and will continue to be vulnerable to abuse until the issues are brought into the open. Organisations without protection policies, guidelines and systems are more vulnerable to false or malicious accusations of abuse.
- **Without a proper child protection policy and child protection standards in place, allegations of abuse, whether founded or unfounded, can destroy an organisation's reputation. This will have serious implications for fundraising as well as damaging the reputation of the children's rights NGO sector as a whole.**

4. The scope of a child protection policy

ESMOL child protection policy applies to:

All staff; Management Board members; interns and volunteers

All those acting on behalf of ESMOL, such as members, consultants or trainers

All those adults accompanying children to events and activities organised by ESMOL

All those who participate in ESMOL events and meetings involving children, including journalists, sponsors, donors, policy makers

All the individuals cited above will be expected to read the ESMOL policy

5. Students' and Parents' Awareness

Opportunities are created at the start of the year for students to develop an understanding of what constitutes acceptable/unacceptable behaviour on the part of others and to develop their own self-confidence and awareness. At the start of each school year all class teachers are required to inform their students about these issues. In the Secondary School this includes explanations about the legal position regarding the age of consent and abuse of trust.

Pupils are informed about this policy and about sources of help and advice including the counselling service, medical centre and the school psychologist. Attention is also drawn to other policies designed to safeguard their well-being, for example school policies on bullying and internet safety.

The school establishes open and professional communication with parents in which the safety and well-being of all pupils is a clear priority.

6. Staff Recruitment, Employment and personnel

Students of every nationality are guaranteed the same level of security and care through the school's appointment procedures and the way all newly recruited staff are checked.

The European School believes that the first step to safeguarding all pupils is to appoint staff who share its commitment to their welfare through rigorous recruitment procedures.

Staff who have access to children will be asked to provide a criminal record check document (disclosure certificate) before beginning their term of employment. This is also the case for religion and ethics teachers.

Seconded staff

Each member state is responsible for ensuring that staff seconded to a European School, whether in their country or another, are fit to be in contact with children and that the national legislative requirements for teachers have been met, including child protection legislation.

Teachers of Religion

In the case of teachers of religion, it is the responsibility of the religious authority which nominates the teachers to ensure that they are fit to be in contact with children and that the local legislation (particularly child protection legislation) is observed.

Locally Recruited Staff

Each locally recruited teacher is asked to provide a criminal record document before beginning their term of employment.

Each member of the ancillary staff is asked to provide a criminal record document before beginning their term of employment.

Others Working with Children Unsupervised

If other categories of persons than ordinary teaching staff are to have access to children for a specific project or for a certain task, these persons are asked to provide a disclosure certificate before the work starts.

The school will exercise all possible means to ensure that unauthorised persons cannot gain entry into school and that unauthorised visitors can be easily identified.

Appropriate training for Deputy Directors and other key persons concerning their responsibilities for child protection in this area will be provided.

7. Security, Health and Safety and training

It is essential that a safe, healthy and comfortable environment is provided for all working in the European School. To ensure this, the school carries out comprehensive risk assessments, regular inspections, frequent cleaning of the site, care for the promotion of hygienic behaviour and healthy eating, as well as appropriate and comfortable classrooms and a medical centre.

The school undertakes to ensure that there will be a rapid response in the case of accidents or illnesses, including the designation and training of teachers or non-teaching staff as 'first aiders' and the keeping of an accident register.

The school undertakes to provide training for staff in the awareness of drug abuse and other health related matters.

Parents are required to provide medical information about their children, particularly information about allergies and special medical conditions on a 'need-to-know' basis at the beginning of the school year. All information is treated confidentially.

Parents/legal guardians must inform the Director immediately of any infectious disease their child contracts. See Article 30, 3dv.

Drugs are prohibited. The school has a zero tolerance policy and can carry out sporadic searches for drugs. Any breaches of the school's rules will result in a disciplinary procedure as laid out in the general rules (Articles 43 and 44).

8. ESMOL's Child Protection Code of Conduct

ESMOL is committed to protecting children from abuse and exploitation. It will take all necessary actions to prevent and/or respond to children in such situations. ESMOL will respond to all reports of actual or alleged abuses based on its Child Protection Policy, irrespective of the nature of the referral, who the allegations are about or who the referrer is or where she/he is from.

This Code of Conduct includes guidance on ethical and proper standards of behaviour of adults towards children, and also of children towards other children. It has been developed with the best interests of the child as the primary consideration and should be interpreted in a spirit of transparency and common sense. ESMOL policy aims for everyone, children and adults, to participate in a safe and happy way

Respect lines of authority and reporting procedures

- Respect the basic rights of others by facing fairly, honestly, and tactfully, and by treating people with dignity and respect.
- Treat all children equally: be inclusive and involve all children without discrimination.
- Work actively to ensure the highest levels of respect towards each other.
- Maintain high standards of personal and professional conduct both personally and in others.
- Protect the health, safety and well-being of yourself and others.
- Be aware of high-risk peer situations (e.g. unsupervised mixing of older and younger children and possibilities of discrimination against minors)
- Develop special measures/supervision to protect younger and especially vulnerable children from peer and adult abuse.
- Be concerned about the way in which your language, actions, and relationships with children could be perceived.
- Develop special measures/supervision to protect younger and especially vulnerable children from peer and adult abuse.
- Provide an enabling environment for children's personal, physical, social, emotional, moral and intellectual development.
- At all times respect the confidentiality of children's personal information.

- Obtain written consent from the child and parent/carer when photographing, filming or requesting personal information for activities (see section 7).
- Ensure that there is a minimum of two staff members present in meetings with children (to allow one to go out to deal with any immediate needs of children).
- Ensure that when children with disabilities participate that all buildings are fully accessible for them.
- Precise information on specific equipment used by the disabled child needs to be obtained prior to the event to ensure its accessibility to all buildings and meeting spaces.
- Accompanying adults should not be younger than 21 years old, unless in exceptional circumstances and agreed in advance.
- When participants are invited to stay overnight, room sharing arrangements are agreed in advance and with consent of the parents/guardians and children.

DON'T:

- Engage in any form of sexual activity with children
- Avoid any action or behaviour that could be construed as poor practice or potentially abusive. For example, never behave in an inappropriate or sexually provocative manner.
- Never have a child stay overnight in the adult's room or sleep in the same bed (unless prior consent is provided by both the child and his/her parent/guardian).
- Do not perform activities for children that they can do themselves, including dressing, bathing and grooming.
- Do not discriminate, shame, humiliate, belittle, or degrade children. This includes anything that may be considered emotional abuse (e.g. use language that will mentally or emotionally abuse a child or tell a story/show pictures that will mentally or emotionally abuse a child).
- Do not allow children to engage in sexually provocative games with each other.
- Do not kiss, hug, fondle, rub, or touch a child in an inappropriate or culturally insensitive way (e.g. do not initiate physical contact, such as holding hands, unless initiated by the child)
- Do not suggest inappropriate behaviour or relations of any kind or encourage any crushes by a child.

- Do not take photos, film or request personal information if not required for Euro child's activities.
- Do not use inappropriately contact details (including social media accounts) from children out of ESMOL's programmes.

Report any suspicious observations or alleged abuse as well as any circumstances or situations, which may be subject to misinterpretation to the Child Protection Focal Person.

9. Management

While the responsibility remains with the Director, the school has a **Child Protection** Focal person (CPF) appointed who will be the Deputy Directors. They are responsible for:

- Promoting awareness and implementation of the Child Protection Policy throughout the organisation.
- Monitoring implementation of the Policy and reporting on developments at Team meetings and for the Management Board.
- Acting as a source of support and information for staff on safeguarding issues.

The disclosure of personal information about children, including legal cases, will be limited to those employees, interns, volunteers, MB members who need to know. The Management Board will have the overall responsibility to oversee and ensure the Policy's implementation.

10. Responsibilities and Procedures

The school's designated person responsible for child protection matters is the Deputy Director (primary/secondary). All concerns should be passed to him/her in the first instance (except for concerns about the abuse of pupils by a member of the administrative staff, which should go directly to the Director). In the absence of the Director, suspected cases of abuse should be passed to the person who is replacing him/her. The school's leadership team regularly reviews whether policy and practice in safeguarding are effective and compliant with current legislation. All members of the leadership team are aware of their responsibility to act as role models for staff and pupils in all areas of school life but particularly with regards to safeguarding students' welfare.

Staff members are informed about individual child protection issues on a need-to-know basis. The school endeavours to achieve the best balance between the desire for confidentiality on the part of the child and the need to give members of staff sufficient information for them to fulfil their role responsibly.

Every effort is made to support any children who are known to have experienced abuse of any kind. In everyday school life the school seeks to provide a stable, secure and consistent environment and to create opportunities to build a sense of self-worth. External professional help is found if appropriate. The school recognises that children who have suffered abuse may display challenging or withdrawn behaviour. While making it clear

that some behaviour is unacceptable, the school also ensures that the student knows s/he is valued and not blamed for any abuse that has occurred.
The school's Anti-Bullying Policy can be found at:

11. Procedures for Dealing with Allegations of Abuse

If there is an allegation of abuse, the Deputy Director will examine the case in the most appropriate way in cooperation with the school medical and psychological services and take necessary steps. This can include contacts with the local authorities. A written report will be made and the Director of the school will decide on further disciplinary steps to be taken if school personnel are involved. Different types of professional help will be sought where necessary.

The health and safety programme is included in guidance to staff in relation to recognising signs and symptoms of child abuse, including physical indicators or behavioural/developmental indicators.

A disclosure from a child must be taken seriously by every member of staff. The person to contact immediately is the Deputy Director, who will ask for a written declaration including precise reports of dates and times of any observations made. He/she will contact the appropriate partners for cooperation in the actual case and make the necessary investigations.

It is the responsibility of the Director/Deputy Director in cooperation with the school's medical and psychological services to contact national authorities if need be.

Every member of staff has the obligation to forward in writing any necessary information to the Deputy Director concerning possible abuse.

A written record of measures taken is kept by the Director/Deputy Director. The facts are treated as confidential.

For information on sanctions, see the school regulations, pages 10 and 14 for secondary school and the primary school Internal School Handbook chapter 14: School Policies (14.1.1)

Projects on personal, social, citizenship and health education take place every year under the following headings:

Primary	Secondary
The dangers of the use of the internet and Facebook	The dangers of the use of the internet and Facebook
What to do if you are being bullied	Civic responsibility
Civic responsibility	Drug awareness
	Dependency: meeting with Alcoholics Anonymous
	The struggle against forgery and pirating
Road safety	Road safety: a demonstration by the traffic police

The policy is reviewed every three years.



appendix 1 Child protection policy: *Recognising Signs of Abuse*

The following are possible situations of risk and helplessness of children and adolescents

POSSIBLE SITUATIONS OF RISK AND HOMELESSNESS IN ADOLESCENTS

INFORMATION ON STUDENT				
SURNAME:			FIRST NAME:	
SEX: M F	DATE OF BIRTH	PLACE OF BIRTH	NATIONALITY:	DISABILITY: 3
ADDRESS:				
TOWN:			PROVINCE:	POSTAL CODE:
TELEPHONE HOME:			MOBILE PHONE NUMBER:	

TYOLOGIES AND INDICATORS OF RISK AND UNPROTECTION

PHYSICAL 5

- States that he / she has been injured.
- Bruises.6
- Burns.7
- Bone fractures⁸.
- Wounds.9
- Visceral injuries 10.
- Bites¹¹.
- Hides aggression and / or gives evasive or incoherent answers 12.
- Forced intoxication¹³.
- Shaken child syndrome 14.
- Female genital mutilation¹⁵.
- Undergo repeated admissions and medical examinations¹⁶.
- Begging¹⁷.
- Labour exploitation 18.
- Trade in organs 19.



EMOTIONAL 20

- Delayed physical, emotional and / or intellectual development 21.
- Fearful, silent attitude, manifests sadness, apathy.22
- Sudden changes in school performance and / or behaviour. 23
- Calls or seeks to be the object of attention. 24
- Suicide attempt of the child or adolescent.
- Suicidal ideation in the child or adolescent.
- Self-harm behaviours in the child or adolescent.
- Excessive care / Overprotection. 25
- What is required of the child is above his or her physical or psychological capabilities.
- Caregivers have a negative image, blame, despise or devalue the child or adolescent in public. 26
- He / she is insulted, intimidated, threatened or discriminated against.
- Interruption or prohibition of social relations on a continuous basis.
- Exposure to extreme and / or chronic physical or verbal domestic violence.
- Exposure to gender violence 27
- Lack of concern for their needs and unconcern for their problems.
- Use conflicts between parental figures to harm themselves.
- Corruption.28



NEGLIGENCE: 29

- Poor hygiene, hungry, inappropriate clothing for the season. 30
- Physical, emotional or unmet medical needs. 31
- Delayed physical development / Repeated illnesses. 32
- Permanent tiredness or apathy. 33
- Inappropriate time habits (sleep, food, leisure, etc.)
- Lack of supervision. 34
- Truancy. 35
- Poor school performance caused by family context. 36
- Consumption of alcohol and / or drugs. 37.
- Committing of offenses and / or crimes.
- Lack of collaboration with the educational centre.
- Lack of collaboration with health services in monitoring children's health.
- Lack of medical monitoring of pregnancy.
- Negligence in feeding and hygiene when woman is pregnant.
- Violent behaviour with peers.
- Repeated physical and / or verbal aggression towards their caregivers.
- Running away from home.
- He frequents peers with marginal characteristics.
- Has been abandoned.
- Familial breakdown.
- Lack of coherence or absence of rules and limits to the behaviour of the child or adolescent.
- Poor housing conditions.

- Alcohol and / or drug abuse in caregivers.



- Psychiatric symptoms in caregivers without treatment.
- Alcohol and / or drug abuse in pregnant woman.
- Physical abuse by the partner towards pregnant woman.
- Caregivers are aware of mistreatment of the child or adolescent, but do not take any measures to protect them.

SEXUAL VIOLENCE 38

Says that :

- They have forced him/ her to have sexual intercourse.
- They have been asked to participate in sexual activity.
- They have shown him/her their sexual organs or have masturbated or performed the sexual act in his/her presence.
- They have been shown and / or have talked about pornographic material.
- They have spied on his/ her privacy.
- Difficulty in walking or sitting without any obvious cause.
- Torn, stained or bloody underwear.
- Discomfort or injury in the anal / genital area.
- Semen in the mouth, genitals, or clothing.
- Sexually transmitted disease.
- Pregnant teenager.
- Sexual knowledge not appropriate for their age.
- Sexual behaviours inappropriate for their age.
- Prostitution.
- Use for pornography or sexual entertainment.
- Forced marriage.



Possible person / s responsible for the situation:

- Father Mother Partner of father / mother Guardian
 Grandfather / mother Uncle / Aunt Brother / sister Cousin
 Other relative: _____ Close relation: _____
 Unknown

Other indicators, comments and observations. 54:

3	ASSESSMENT OF THE DETECTED SITUATION 55	
	SERIOUS 56:	MILD/ MODERATE 57:

4	SOURCE OF DETECTION			
	Health Services	Educational Services	Social Services	Security Forces and Bodies
	Judicial Field	Telephone helpline	Others (specify):	
	CENTER OR SERVICE: :		PROFESSION OF THE NOTIFYING PERSON:	
	Address:			
	Town:	Province:	Telephone:	

DATA PROTECTION CLAUSE

- The information contained in this sheet is confidential and will be used with due professional secrecy (article 5 of Organic Law 3/2018, of December 5, on the Protection of Personal Data and guarantee of digital rights).
- The personal data that appears in this sheet will be processed by
- At any time, in accordance with the provisions of the aforementioned Organic Law 3/2018, you may exercise the rights of access, rectification, deletion, limitation of treatment, portability and opposition to the data processed before the body responsible for the treatment of the data.
- You can contact the Data Protection
- The form for the claim and / or exercise of rights is available at the following address:
.....



INSTRUCTIONS FOR COMPLETING THE NOTIFICATION SHEET

1. The use of the sheet is exclusively intended for the personnel of public or private services related to childhood and adolescence. One sheet must be completed for each child or adolescent. In order to contribute to a better investigation and assessment of the facts by the competent social services, documentation will be attached to the sheet informing on the current situation of the child or adolescent, their socio-family environment, circumstances in those that the case has been detected, actions carried out, as well as any other information deemed of interest. Any other means of communication complementary to the notification sheet will be used, especially when an immediate intervention is considered necessary to safeguard the integrity of the child or adolescent, due to the seriousness of the case.
2. "Disability" will be marked when there is an assessment of a degree of disability equal to or greater than 33%, or if there is no such assessment, there is a well-founded suspicion that the child or adolescent suffers from it.
3. "Trafficking" will be marked when it is suspected that a child or adolescent may be a victim of trafficking and there are no parental figures, or if they exist, they do not adequately exercise their protection duties. Trafficking in minors shall be understood as the recruitment, transport, transfer, reception or reception for exploitation purposes. This exploitation can be for prostitution or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude, the extraction of organs, begging, exploitation for criminal activities (such as those carried out by pickpockets, shoplifting, drug trafficking and other similar activities that are punishable by penalties and involve economic gain), as well as for illegal adoption or forced marriages to the extent that the constituent elements of human trafficking concur humans. It will be considered trafficking even when the threat or use of force or other forms of coercion, kidnapping, fraud, deception, abuse of power or a situation of vulnerability or the granting or receiving of payments has not been resorted to, or benefits to obtain the consent of a person who has authority over another. When it comes to a child or adolescent, the possible consent is not considered valid.
4. Please mark all that apply with an X. For a detailed explanation, see the notes. If there are other indicators not included in the list, use the comments section and reflect them there.
5. The indicators of this group indicate a possible situation of risk or helplessness due to physical abuse, understanding as such, any act, not accidental, that causes physical damage or illness in the child or adolescent, or places him in a situation of serious risk of suffering it.
6. Bruises or bruises in different stages of healing, on the face, lips or mouth, in large areas of the torso, back, buttocks or thighs, with non-normal shapes, grouped or as a mark or frame of the object with which they have been inflicted, in several different areas, indicating that the child or adolescent has received blows from different directions.
7. Cigar or cigar burns. Burns covering the entire surface of the hands (like a glove) or feet (like a sock) or donut-shaped burns on the buttocks, genitals, indicative of immersion in hot liquid. Burns to arms, legs, neck or torso caused by being tied tightly with ropes. Burns with objects that leave a clearly defined mark (grill, plate, etc.).
8. Fractures in the skull, nose or jaw. Spiral fractures of the long bones (arms or legs), in various stages of healing. Multiple fractures. Any fracture in a child under 2 years of age.
9. Wounds or scrapes in the mouth, lips, gums or eyes. On the external genitalia, on the back of the arms, legs, or torso.
10. Abdominal, thoracic and / or brain injuries. Swelling of the abdomen Localized pain Constant vomiting Duodenal hematomas and pancreatic haemorrhages are suggestive.
11. Signs of human bites, especially when they appear to be from an adult (more than 3 cm of separation between the canine tracks) or are recurrent.



12. Attributes obvious injuries to accidental accidents, does not respond directly, excuses his carers, the story is discordant or unacceptable, strange explanations regarding the injury, avoids undressing in public.
13. Ingestion or administration of drugs, faeces or poisons.
14. Retinal and intracranial haemorrhages, without fractures.
15. Girl or adolescent girl who is known or suspected that the persons exercising her guardianship or guardianship have the intention of subjecting her or have been subjected to genital mutilation (in Belgium or abroad).
16. Alleging fictitious or actively generated pathological symptoms by their caregivers.
17. Children or adolescents are allowed, promoted or used to obtain money or material resources through public charity. It includes children or adolescents, who accompany adults who "ask", sell at traffic lights.
18. The boy, girl or adolescent, performs compulsory, and to obtain economic or similar benefits, jobs (whether domestic or not) that exceed the limit of the usual, inappropriate for their age, which should be carried out by adults and that clearly interfere with their social and / or school activities and needs.
19. Harvesting of a human organ without applying legally established medical procedures and without the consent of the victim, in most cases. It involves the extraction, purchase, sale, transport, concealment, etc. of human organs, tissues, fluids and cells.
20. The indicators of this group indicate a possible situation of risk or helplessness due to emotional abuse, understanding as such, negative behaviours or destructive interactions towards the child or adolescent, which cause them serious psychological damage or place them at risk of suffering it.
21. Growth retardation without justifiable organic cause. Mental, social, literacy and language retardation, global motor skills or fine motor skills. Learning problems.
22. Regression behaviours that affect his/ her development. Shows childish behaviours for age.
23. He seems to be afraid of his caregivers. Child says nobody loves him. Plays or roams around alone. He has no friends. Cries without just cause.
24. Changes in behaviour / mood for no apparent reason (school failure, sadness, fear, aggressive behaviour, etc.).
25. He / she is hyperactive. Continuous calls for attention. Disruptive behaviours. Lies frequently.
26. Overprotection that deprives the child or adolescent of learning to establish normal relationships with their environment (adults, equals, games, school activities).
27. Verbal rejection of the child or adolescent. Tendency to blame or despise them. They cause low self-esteem. Very demanding with the child or adolescent.
28. Caregivers promote, reinforce or allow antisocial behaviour patterns in the child or adolescent (especially in the area of aggressiveness, criminal behaviour, sexuality and use of addictive substances). Their home constitutes an inappropriate life model for their normal development, as it contains antisocial or destructive patterns (criminal behaviour, trafficking and / or drug use, promotion or tolerance towards the abusive consumption of alcohol, drugs or other toxic substances, by the boy, girl or adolescent, self-destructive behaviours, legitimization of violence towards other people).
29. The indicators in this group indicate a possible situation of risk or neglect, understanding as such, those situations in which physical needs (food, physical health care, clothing, personal hygiene, hygienic housing conditions, stability and conditions of habitability of the home), security (physical security of the home, risk prevention, supervision and protection against abuse by third parties), training and psychic (interaction and affection, stimulation, establishment of norms, limits and positive values , provision of psychological or psychiatric attention to serious emotional problems), of the child or adolescent, are



neglected or are not adequately cared for. The life circumstances of the pregnant mother are included, which negatively or pathologically influence the pregnancy and affect the foetus.

30. Notoriously neglected physical appearance, dirt, bad odour, repeated parasitosis (lice). Hungry or thirsty. Inappropriate clothing for the weather or season. Injuries from excessive exposure to the sun or cold (sunburn, frostbite of the fingers and toes, ears, nose).
31. Unhealed or infected wounds, or absence of routine medical care: failure to follow therapeutic indications, extensive dental caries, localized alopecia due to prolonged posture in the same position, flattened skull.
32. Delays in height and weight growth, psychomotor problems, repeated illnesses or frequent hospital admissions.
33. They are usually tired. Sometimes fall asleep in class. Have a hard time concentrating.
34. Especially when performing dangerous actions or for long periods of time. They go home alone when they should be accompanied by adults due to their age and / or distance from home to school. They wander down the street during school hours and outside of these hours, especially at night. Their caregivers are unaware of the activities they carry out, whether or not they attend class, who is their reference group, places they frequent, lack of control of access to information, communication and audio-visual technologies, etc.
35. Not attending the educational centre on a regular basis and without justification, arrive late, leave the class without permission.
36. Discarding any specific need for educational support and taking the educational context as a reference, this indicator refers to poor school performance caused by the family context: lack of concern regarding the evolution in the school environment, lack of support and supervision of the schoolwork, the demands of the educational centre are not met, lack of collaboration with the teaching staff, etc.
37. Boy, girl or adolescent, who consumes alcohol. They have the smell of alcohol, intoxication / ethyl coma, symptoms of drug use, inhaling glue or solvents.
38. The indicators of this group indicate a possible situation of risk or helplessness due to intrafamily sexual violence, understood as such, all those actions carried out by the father, mother or caregivers, which oblige the child or adolescent to maintain sexual contact or participate in other sexual interactions taking advantage of their situation of physical and / or mental vulnerability, as well as through the use of force, intimidation, blackmail, threat or any other mechanism that nullifies or limits their will. Abuses carried out through information, communication and audio-visual technologies (social networks, mobile phones ...) are included. All forms of sexual violence in the family environment - with or without physical contact - is considered serious, since it causes significant damage to their well-being and development in the child or adolescent. These situations must be notified even when it is unknown or only suspected that they may be occurring in the family environment.