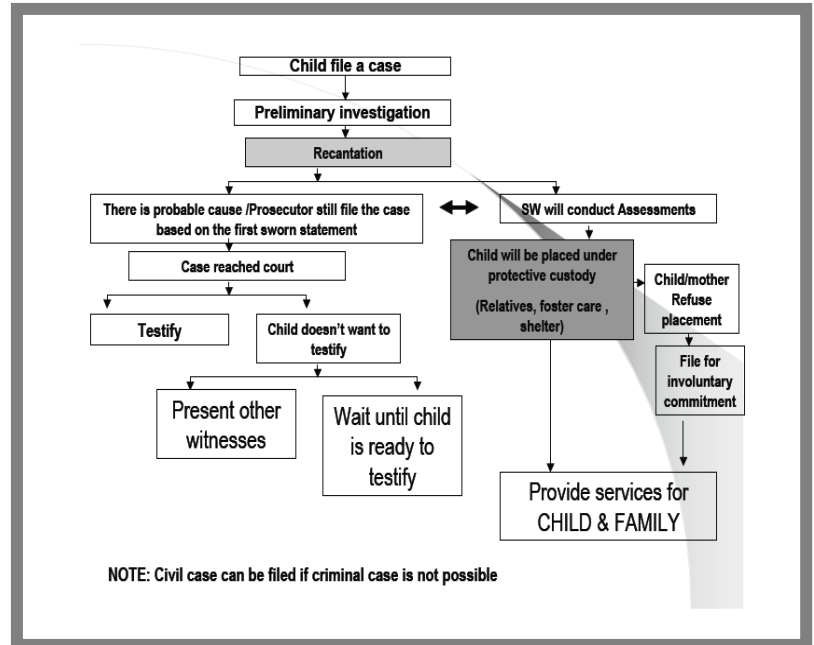


## Practical Protocols

This issue features the protocols agreed upon by workshop participants in the 2006 CPU-Net Conference. There were four workshops on the last day. Each attended by a mix of professionals-- judges, lawyers, doctors, social workers, police and NGO workers-- who manage cases of child abuse and maltreatment. A brief description of each protocol is presented.

**PROTOCOL 1** involves patients and families who desist/recants after filing a case that has reached preliminary investigation by the prosecutor. It was agreed that if the prosecutor finds probable cause, the case will proceed to trial and the prosecutor will have to wait until the child is ready to testify. In the meantime, the social worker will have to determine if placing the child under protective custody or involuntary commitment will actually help resolve the problem of desistance/recantation. It is important that the investigator completes the evidence needed for the case, the prosecutor is aware that desistance is possible as part of the child's accommodation syndrome and that the social worker is assertive enough to help the child and the family resolve their issues about desistance/recantation.



**PROTOCOL 1**

In **PROTOCOL 2**, the issue of a child who has repeatedly been abused or "the perpetual victim" is analyzed. Professionals who manage abused children encounter a number who seem to have multiple incidences of abuse by the same or different perpetrators.

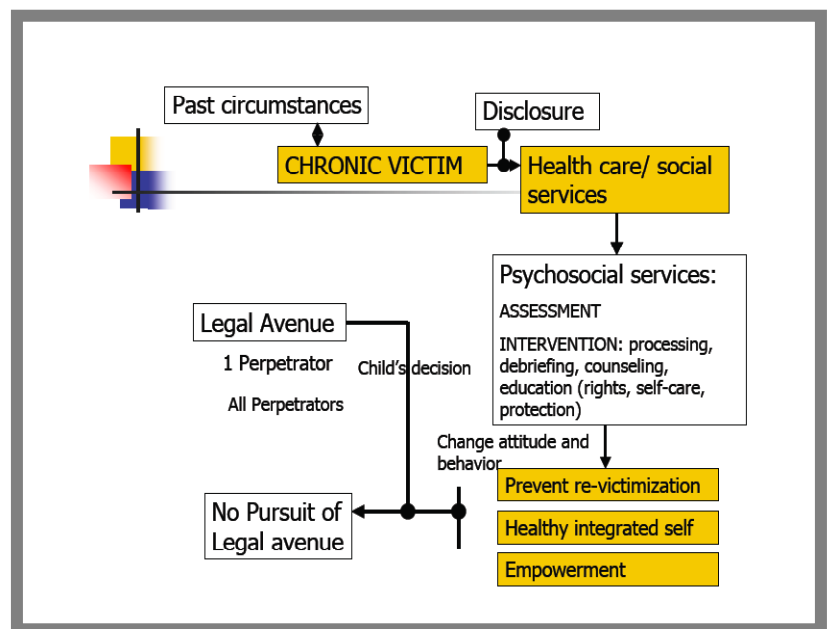
The profile of "perpetual victims" was presented as follows:

- Have a distorted view of self, affection, love, family and other realities
- Usually psychological accommodation has been adapted
- Has developed sexualized behaviors
- Has poor communication skills
- Has a passive personality
- Cannot recognize sexual advances
- Developed risk taking behaviors or cannot control impulsivity
- Feels that she has no choice
- Does not know her rights
- Poorly educated

Apart from the "perpetual victims" characteristics, the environment surrounding these children was also presented:

- Dysfunctional family
- Lack of support system/ isolation
- Lack of education
- High-risk environment/situation

After analysis of the child and his/her environment, the intervention protocol was agreed upon.



**PROTOCOL 2**

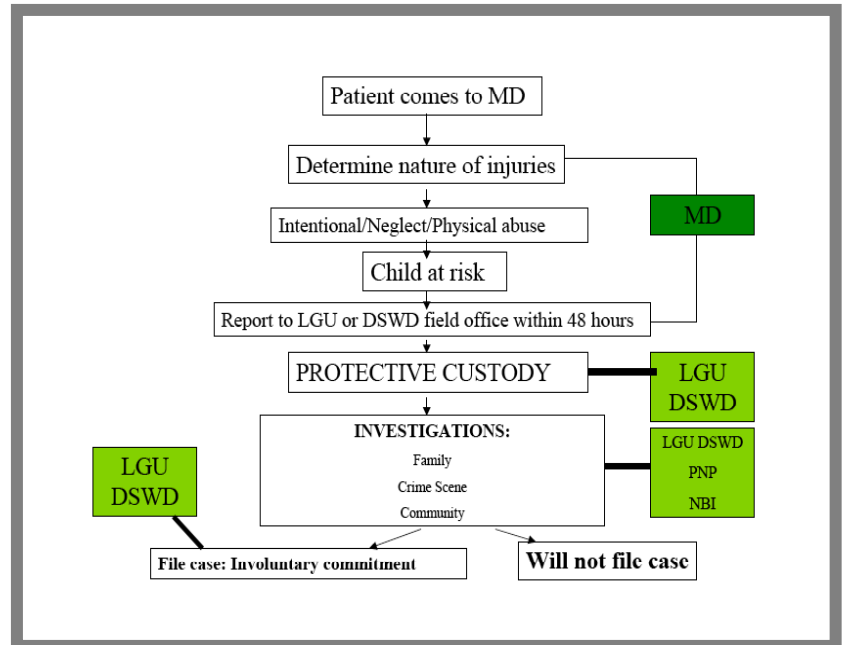
Again, a multidisciplinary approach is necessary in addressing the perpetual or chronic victim. Intense psychosocial services are needed to prevent re-victimization and empowerment of the child.

**PROTOCOL 3** involves cases of the “compliant victim,” usually a teenager who has fallen in love with the alleged perpetrator who is at least 10 years older. The summary of recommendations in these cases is presented:

1. If the teenager has run off, find the teenager. The legal recourse is to file a petition for issuance of writ of habeas corpus.
2. Legal actions may be filed but it is not a priority at this point.
3. It was agreed that in the case presented where the alleged perpetrator is at least 10 years older than the child, there is a crime committed. However, the child’s cooperation is needed in filing the case, which is a violation of RA 7610.
4. It is imperative that psychosocial interventions are started which would involve:
  - a. Protection of the child – from further abuse by the alleged perpetrator, from abuse by family and from social stigmatization
  - b. Involvement of the child in decision-making
  - c. Identification of additional support systems
  - d. Analysis of family dynamics and addressing parenting issues
5. Perpetrator issues need to be addressed
6. A multidisciplinary approach involving the child and the family is essential.
7. *IN ALL ACTIONS, DO NOT LOSE SIGHT OF THE CHILD. KNOWING DEVELOPMENTAL ISSUES AND THE DYNAMICS OF VICTIMIZATION SHOULD FORM THE SOLUTION.*

This is **PROTOCOL 4**, which is concerned with the protective custody of abused children. The following points are highlighted for these cases:

- Multidisciplinary effort is necessary
- Time is of essence
- MD has to determine and document injuries
- SW has to conduct community and family investigation
- PNP or NBI has to conduct crime scene investigation including interviews of alleged perpetrator and possible witnesses
- Psychosocial screening for parent or guardian
- LGU/DSWD on case will inform parent/guardian about Protective Custody
- Filing of case of involuntary commitment will be by DSWD/LGU after investigation inputs from MD, other SWs, PNP and/or NBI



In cases of protective custody, social workers reported that they have been threatened with lawsuits by parents or guardians. As a result of this workshop, the Department of Justice has issued Department Circular No. 70 dated 07 November 2006 and Department Circular No. 77 dated 16 January 2007 reminding all regional, state, city and provincial prosecutors as well as their assistants that social workers whether they are from the national or regional offices of the Department of Social Welfare and Development or from the local social welfare development offices are immune from any administrative, civil or criminal liability as indicated in Sections 9 and 10 of the Implementing Rules and Regulations of RA 7610.

#### PROTOCOL 4



[www.ispcanmanila.org.ph](http://www.ispcanmanila.org.ph)

**ACKNOWLEDGEMENT:** Child Justice League’s Atty Cristina Sevilla and Atty Amy Avellano for reviewing the legal content and the staff of Department of Justice Asst. Sec Teresita R. Domingo for providing the memos.