

CEV Guardians of the Court



A Guide to Safeguarding Children in Volleyball and Beyond

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Executive summary

This guide, *Guardians of the Court- A guide to safeguarding children in Volleyball and beyond* offers a comprehensive framework for safeguarding children in Volleyball, emphasising prevention, detection, and response to child abuse and violence. Developed for coaches, teachers, trainers, and other stakeholders, the guide underscores the duty to create a safe and nurturing environment that prioritises the well-being of young athletes.

The guide outlines ten guiding principles for child safety, including prioritising child well-being, respect for rights, and the importance of supervised and safe facilities. It encourages awareness, training, and strict adherence to safeguarding policies. The handbook details the various types of abuse—neglect, physical, emotional, and sexual—as well as indicators for each type, including behavioural and physical signs. Profiles of victims, perpetrators, and witnesses are provided to aid in the identification and understanding of those involved in abuse.

A structured approach for handling abuse cases is emphasised, with a three-level system categorising severity and response. Coaches and clubs are encouraged to intervene at each level to protect children and prevent escalation, involving external authorities when necessary. The guide advocates for a Child Protection Team in Volleyball clubs, consisting of professionals to respond effectively to cases of violence. Additionally, it calls for robust risk assessment practices, transparent communication, and collaborative efforts between public institutions, families, and community organisations.

This guide also highlights Volleyball's role in fostering positive values and preventing violence through inclusivity, fair play, and teamwork. Through proactive policies and ethical standards, it aims to cultivate a protective, supportive environment for children's holistic development.

Guardians of the Court- A guide to safeguarding children in Volleyball and beyond serves as a vital resource in enhancing child safety in Volleyball, establishing preventive measures, and promoting a violence-free sport culture.





INTRODUCTION

Participating in sport is crucial for children's development during their formative years, as it builds their social and motor skills, essential for their overall growth. Sport should be enjoyable, healthy, and positive experiences for children. Given that children spend a significant amount of time at sport clubs, it is critical that they play sport in a safe, positive, and nurturing environment where they learn universal values such as honesty, teamwork, and fair play.

Volleyball is a dynamic, non-contact team sport that blends creativity, competition, and enjoyment. Suitable for both girls and boys of all ages, Volleyball helps develop essential skills and traits crucial for a healthy lifestyle. It is an inclusive sport that promotes fair play, respect, and integrity, welcoming all children, regardless of their developmental background. Through Volleyball, young players learn to respect the rules, themselves, and others. They also build healthy relationships with fellow athletes—whether as teammates or competitors—and grow into leaders or equal members of the team.

To achieve these goals, European Volleyball Confederation (CEV) and all staff working with children and young people should implement a child protection policy, based by the principles of this *Guide to Safeguarding Children in Volleyball and Beyond*, which addresses two key aspects:

- >> **Prevention:** This includes recognising, detecting, and preventing children from being exposed to risky situations, intentional harm, and various forms of violence—whether within the school, its environment, or beyond. It also emphasises a commitment to protecting children and improving their well-being by encouraging safe sport practices and forbidding those that could harm or negatively impact them.
- >> **Response:** This involves outlining the appropriate actions to take when a risk situation occurs, specifically focusing on how to handle cases of harassment or abuse involving children.

About children and their rights:

Children have the right to be safe, respected, and to express any worries they may have

No one should harm or hurt them; children must be protected from all forms of violence, abuse, and neglect

Children have the right to report if they are harmed, to speak their minds, to be heard, and to be taken seriously

They have the right to be treated without discrimination

Their best interests should be prioritised when decisions are made about them

If they are hurt, adults must do everything possible to protect them from violence and uphold their rights

Children are never alone in facing violence

They are encouraged to share, seek help, and ask questions



What is safeguarding?

Safeguarding children ensures that all adults take reasonable actions to protect or promote a child's welfare based on the situation. This also involves setting guidelines for collaboration between organisations and individuals. Everyone involved shares the responsibility to protect and safeguard the sport's young participants. The *Guide to Safeguarding Children in Volleyball and Beyond* applies to all individuals involved and clearly defines responsibilities while acknowledging the roles and responsibilities in safeguarding young people, as well as the responsibilities and expertise of relevant agencies in determining whether young people have been abused or otherwise harmed.

Every child has the right to be safe, whether at home, school, or on the Volleyball court. It is the responsibility of every coach, teacher and adult to ensure the safety and well-being of all children and to take appropriate action when needed. The protection and welfare of children must always be the top priority.

Who is the guide intended for?

This Guide is designed for all individuals who are involved in children's and youth sport, specifically Volleyball, as well as sport in general. The *Guide to Safeguarding Children in Volleyball and Beyond* is intended for sport coaches, physical and health education teachers, teachers with and without a sport education background, as well as junior trainers, and other sport personnel who work with children. The parents of the children and the rest of the teaching staff in schools are indirect beneficiaries.

How is the Guide used?

The *Guide to Safeguarding Children in Volleyball and Beyond* can help prevent violence against children in various situations:

- When they are at school, home, or on the court
- In physical and health education classes
- For sport clubs, both in and out of schools
- In cases of violence or suspicion of violence
- When creating and promoting rules for schools and sport clubs
- To help prepare policies for child protection
- For ongoing training of sport staff
- In conducting workshops and,
- To help parents understand the child protection system and address safety concerns.

This practical tool aims to assist sport clubs in developing a safe culture that promotes the well-being of children and young people participating in sport. To allow the sport community to effectively support children, create a safe and supportive environment, particularly for at-risk children, and, of course, develop a useful resource for strengthening the educational system. The guide also adds value by attempting to raise awareness among the target groups and encouraging them to take proactive measures. Prevention is emphasised as the most effective way to protect children from abuse.

The *Guide to Safeguarding Children in Volleyball and Beyond* meets the requirements of CEV General Regulations¹, the Children Act 1989², Working together to Safeguard Children 2023³, Standards for Child Wellbeing and Protection in Sports⁴, Suffolk Sport Child Protection Implementation Pack for Clubs⁵, The International Child Safeguarding Standards⁶ and others.

1. GUIDING PRINCIPLES FOR CHILD SAFETY AND PROTECTION

Children have the right to be free of abuse, neglect, and violence, as well as to live, play, and learn in a safe environment. Children's safety should be prioritised in all aspects of their lives in order to protect them from harm and danger.

Child protection plays a crucial role within the sport industry. The following are the 10 guiding principles for protecting children from all forms of abuse and violence in Volleyball, as well as creating a secure and supportive environment for all participants, with a special focus on the well-being of children:

- 1. Child Well-being:** The child's well-being is the top priority in all activities involving children.
- 2. Respect for Rights and Dignity:** The rights, dignity, and worth of every young person must always be respected. All children, regardless of age, culture, ability, gender, race, language, religion, beliefs, sexual orientation, or social status, have the right to protection from abuse and violence.
- 3. Addressing Abuse:** All suspicions and allegations of abuse must be taken seriously and addressed promptly and appropriately.
- 4. Creating a safe environment:** All sport facilities where children train and compete in Volleyball must be safe, and sport must be played in a safe environment, with proper supervision, maintenance, and processes in place to protect children from injuries and dangers.
- 5. Adult Supervision:** Adults should supervise children, especially in potentially dangerous situations, to prevent minor incidents from escalating into more significant harm.
- 6. Professional Training:** Sport coaches, physical education teachers, and other sport personnel who work with children should receive training on recognising and preventing violence in Volleyball. This includes understanding the signs and consequences of violence and knowing the correct procedures for responding to emergencies or suspicions.
- 7. Protection Procedures and Policies:** Clear procedures must be developed for preventing violence in Volleyball, including mechanisms for detecting, preventing, and reporting incidents, as well as networking with other institutions to sanction perpetrators.

1 The CEV Board of Administration may decide to impose exceptional protective measures aimed at preserving the safe, peaceful and regular conduct of the CEV's activities in the best interest of the sport of Volleyball. Link: <https://inside.cev.eu/documents/> and https://inside.cev.eu/media/53ch0x1d/leg_cev_2023_general-regulations_approved-by-the-boa.pdf.

2 Children Act 1989 is up to date with all changes known to be in force on or before 21 August 2024. Link: <https://www.legislation.gov.uk/ukpga/1989/41>.

3 Effective safeguarding means practitioners should understand and be sensitive to factors, including economic and social circumstances and ethnicity, which can impact children and families' lives. Link: https://assets.publishing.service.gov.uk/media/669e-7501ab418ab055592a7b/Working_together_to_safeguard_children_2023.pdf

4 There are 8 Standards in total; four apply to children, two to adults involved in the club environment and two to the sports organisations themselves. Link: <https://www.thorntons-law.co.uk/knowledge/a-new-child-centred-approach-to-safeguarding-in-sport>.

5 Link: <https://www.activesuffolk.org/uploads/implementing-a-child-protection-policy---a-guide-for-sports-clubs.pdf>

6 Keeping Children Safe represents a commitment by those working in this sector to ensure that their organisations "do no harm" and that they meet the responsibilities set out in the UN Convention on the Rights of the Child to protect children from all forms of abuse, neglect, exploitation and violence. Link: <https://www.keepingchildrensafe.global/wp-content/uploads/2023/09/KCS-CS-Standards-ENG-200218.pdf>.

8. **Raising awareness of safe sport for children:** This involves educating coaches, sport staff, children, parents, and other participants in Volleyball about the difference between healthy competition and violence, as well as how to foster healthy competition without using violence. Furthermore, it entails developing and promoting programmes for child safety and protection across various spheres of life, including education, healthcare, family environments, and public spaces.
9. **Support for Victims:** Mechanisms should be in place to support children who have been victims of violence in sport, including psychological, legal, and other forms of assistance.
10. **Intersectoral cooperation and coordination:** Cooperation between public institutions, citizen associations, educational institutions, the media, and the community is essential for combating violence in Volleyball by sharing resources, information, and best practices.

The highest ethical standards must be applied in all activities related to the protection and safety of children, ensuring the correct treatment and safeguarding of their rights and dignity, including respect for human dignity, justice, non-discrimination, fairness, equality, accountability, and responsibility.

2. DEFINITIONS

Defining child maltreatment is challenging because harm can occur in various ways, influenced by context and culture. As previously stated, children may face abuse in settings such as families, institutions, communities, sport environments, or online. They could be harmed by an adult or adults, or another child or children. Therefore, it is crucial to define child maltreatment as the abuse and neglect experienced by children under 18⁷. It includes all forms of physical and/or emotional maltreatment, sexual abuse, neglect, negligence, and commercial or other exploitation that cause actual or potential harm to the child's health, survival, development, or dignity in the context of a relationship of responsibility, trust, or power (WHO, 1999). When an adult causes harm to a child, the definition is broad and includes all adults who regularly or occasionally care for the child (e.g., teacher, coach, junior trainer, etc.) and who the child expects to provide care and protection.

There are four major types of abuse: neglect and negligent treatment, physical abuse, psychological or emotional abuse, and sexual abuse. **Abuse** is defined as an act of commission (to do something), whereas **neglect** is defined as an act of omission in care (not to do something) that causes potential or actual harm.

>> **Neglect and negligent treatment** can include a lack of health care, education, supervision, environmental protection, and unmet basic needs such as clothing and food. Neglect and negligent treatment refer to a persistent failure to meet a child's basic physical and/or psychological needs, which is likely to result in serious impairment of a child's healthy physical, spiritual, moral and mental development (KCS Standards, 2023). It is the most common type of child abuse.

>> **Physical abuse** can take many forms, including beatings, shaking, burning, drowning and biting. The threshold for determining whether corporal punishment constitutes abuse is unclear. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child. Rib fractures are the most common finding in cases of physical abuse (Gonzales et al., 2024).

>> **Emotional abuse** includes actions such as verbal insults, humiliation, and behaviours that frighten or intimidate a child, potentially leading to long-term psychological issues. This

⁷ For the purpose of this Guide, we will use the term child abuse to cover all forms of child maltreatment.



type of abuse also involves restricting movement, degrading, bullying (including online bullying), as well as threats, intimidation, discrimination, ridicule, and other non-physical forms of hostile or rejecting behaviour.

>> **Sexual abuse** involves the exploitation of children or adolescents who are dependent and developmentally immature in sexual activities they do not fully comprehend and have little ability to consent to. These activities may include rape, oral sex, penetration, as well as non-penetrative acts like masturbation, kissing, rubbing, and touching. It can also involve making children view or produce sexual images, watch sexual acts, or engage in sexually inappropriate behaviour (KCS Standards, 2023).

Some categories define exploitation as a particular type of child abuse, and lately peer violence has also been highlighted. Commercial exploitation, which may include child labour, is also considered a form of child abuse because it involves exploiting a child in work or other activities for the benefit of others while jeopardising the child's physical or mental health, education, moral or social-emotional development.

Child abuse is a leading cause of illness and death in childhood, and it is also significant because of the long-term effect on the child's psychophysical health and social functioning, which can have consequences and be reflected not only in adulthood but also on future generations via the mechanism of intergenerational transmission of violence. It occurs across all countries, social classes, socioeconomic levels, religions, cultures, and ethnic groups.

Abuse can have a significant impact on a child's health and well-being, whether it occurs on a regular basis or occasionally. The symptoms of child abuse are not always obvious, but certain behaviours may indicate that a child is being abused. Physical signs may occasionally be visible, but this is not always the case. The following are some indicators and signs that a child is at risk or is currently being abused. It is important to note that not every abused child shows these physical or behavioural symptoms. Some may demonstrate a variety of behaviours that change over time, whereas others may attempt to hide any physical evidence of abuse.

2.1. Signs and indicators of child abuse

2.1.1. Neglect

The most common form of child abuse is neglect, which is defined as the ongoing failure to meet a child's basic needs. A child may be left hungry or dirty, without adequate clothing, shelter, supervision, or medical care. This could endanger children and young people. It can also have a long-term impact on their physical and mental health. Neglect can be hard to recognise because it comes in many forms. There are four main types of neglect:

1. **Physical Neglect:** When a child's needs for food, clothing, shelter, or safety aren't met.
2. **Educational Neglect:** When a child doesn't receive proper education.
3. **Emotional Neglect:** When a child lacks the care and attention they need, such as being ignored, humiliated, or isolated.
4. **Medical Neglect:** When a child doesn't receive necessary healthcare, including dental care and medical treatments.

While one sign may not confirm neglect, noticing multiple signs over time could indicate a serious issue.



Table 1: How to recognise neglect

Physical signs:	Behavioural signs:	What to do:
Being smelly or dirty	Becoming clingy	Listen carefully to what they are saying
Being hungry or not given money for food	Becoming aggressive	Let them know they've done the right thing by telling you
Having unwashed clothes	Being withdrawn, depressed or anxious	Tell them it is not their fault
Having the wrong clothing, such as no warm clothes in winter	Changes in eating habits	Say you will take them seriously
Health and development problems	Displaying obsessive behaviour	Do not confront the alleged abuser
Housing and family issues	Finding it hard to concentrate or take part in activities	Explain what you will do next
	Missing school	Report what the child has told you as soon as possible
	Showing signs of self-harm	
	Using drugs or alcohol	



*Source: NSPCC, 2024

2.1.2. Physical abuse

Indicators that may raise suspicions of physical abuse of a child include the child's injuries and/



or exposure to dangerous actions. This includes actions that pose a serious threat to the child's health, safety, or well-being, even if no visible injury has occurred. Furthermore, cruel and inhumane treatment of children should raise concerns.

Physical abuse refers to physically punishing a child in order to correct or control behaviour, and it is frequently used as a method of child discipline. Research (Cuartas & Herbert, 2021; Durrant, 2017; Saunders, 2015; Sureshrani, 1999) has shown that corporal punishment of children is ineffective in achieving the desired change; in fact, it has the opposite effect, increasing the child's aggressiveness, contributing to the maintenance of the cycle of violence between an adult and a child, and posing the risk of becoming a permanent pattern of behaviour.

Various injuries, ranging from superficial wounds to those affecting the face, mouth, muscles, and skeletal system, and are frequently caused by accidents. However, the presence of repeated or multiple injuries, as well as conflicting information about the occurrence of injuries, should raise the possibility of abuse. Bruises are often the first visible signs of abuse. It is critical to consider the location, shape, and age of the bruises.

In all cases of child injury, the possibility of abuse must be considered. Especially when the physical findings do not match the anamnestic data (i.e. that based on the child's ordinary habits, movements, and day to day activities), when the parents and/or other adult/s provide contradictory or inconclusive data, change their statements, are extremely upset in a hostile mood, refuse to leave the child alone with the examiner (doctor, social worker, or other professional), or when the child shows a visible fear of the parents and/or other adult/s or is extremely passive and indifferent to the parents and/or other adult/s.

On the other hand, a large number of child abuse cases are frequently overlooked by healthcare providers (Gonzales, et al., 2017). To make a diagnosis of child abuse, a high level of suspicion is required.

Table 2: How to recognise physical abuse

Physical signs:	Behavioural signs:	What to do:
Bruises	Anxiety clingy	Listen carefully to what they are saying
Broken or fractured bones	Behaviour issues	Let them know they've done the right thing by telling you
Burns or scalds	Criminal behaviour	Tell them it is not their fault
Bite marks	Depression habits	Say you will take them seriously
Scarring	Drug and alcohol problems	Do not confront the alleged abuser
The effects of poisoning, such as vomiting, drowsiness or seizures	Eating disorders	Explain what you will do next
Breathing problems from drowning, suffocation or poisoning	Issues at school	Report what the child has told you as soon as possible
	Obesity	
	Risky sexual behaviour	
	Suicidal thoughts and/or attempts	



*Source: NSPCC, 2024



2.1.3. Emotional abuse

Emotional abuse is any type of abuse that involves the continual emotional mistreatment of a child. It's sometimes called **psychological abuse**. Emotional abuse can involve deliberately trying to scare, humiliate, isolate or ignore a child. Emotional abuse is often a part of other kinds of abuse, which means it can be difficult to spot the signs or tell the difference, though it can also happen on its own.

Emotional abuse refers to repeated behaviour that cause or increase the child's sense of worthlessness, rejection of shortcomings or inadequacy, cause psychological suffering to the child and can cause serious damage to the child's emotional, cognitive or social development. It is important that emotional abuse is a pattern of behaviour by adults or peers towards a child, which is constantly present or repeated.

Here are five types of emotional abuse:

1. **Rejecting/Devaluing.** Constantly mocking, belittling, or humiliating a child, blaming them for problems, rejecting their feelings, favouring other children, and failing to recognise their achievements.
2. **Terrorising/Intimidating.** Creating fear through severe threats, unrealistic expectations, or violence. This includes threatening to hurt a child or taking violent action against the child's belongings or pets, exposing the child to or forcing him/her to participate in frightening activities, repeated exposure to child violence, frequent changes in the "rules of the game", frequent outbursts of anger towards the child, alternating with periods of warmth.
3. **Ignoring.** Being emotionally unavailable to the child, such as not noticing their developmental milestones, refusing to interact or spend time with them, and showing no interest in their pain or achievements.
4. **Isolation.** Preventing the child from forming social relationships by forbidding the child to play with other children, expelling the child from school, forbidding the child/adolescent from joining clubs, participating in sport and other extracurricular activities, implanting fear in the child of people outside the family.
5. **Exploitation/Bribery.** Encouraging or forcing the child into harmful activities, such as forcing or allowing a child to engage in prostitution, begging, selling narcotics or illegal work.

Any child, from any background, can be at risk of emotional abuse. But some are more vulnerable than others. When a family is going through a tough time, parents and carers might find it difficult to provide a safe and loving home for their children. This can happen when families are experiencing relationship problems, family arguments, money problems or unemployment, mental health issues, poverty, addiction to drugs or alcohol and/or domestic abuse.



Table 3: How to recognise emotional abuse

Physical signs:	Behavioural signs:	What to do:
Use language you wouldn't expect them to know for their age	Wanting attention or becoming clingy	Listen carefully to what they are saying
Act in a way or know about things you wouldn't expect them to know for their age	Not caring how they act or what happens to them	Do not push them too much, but allow them to talk freely or answer
Struggle to control their emotions	Trying to make people dislike them	Let them know they've done the right thing by telling you
Have extreme outbursts	Developing risky behaviour, like stealing, bullying or running away	Tell them it is not their fault
Seem isolated from their parents	Feeling, expressing and controlling emotions	Say you will take them seriously
Lack social skills	Lacking confidence or causing anger problems	Do not confront the alleged abuser
Have few or no friends.	Finding it difficult to make and maintain healthy relationships later in life	Explain what you will do next
	Mental health problems, including depression, anxiety and suicidal thoughts	Report what the child has told you as soon as possible
	Eating disorders	Decide if they need medical attention
	Self-harm	
	Language development	
	Problems forming healthy relationships	



*Source: NSPCC, 2024

2.1.4. Sexual harassment and abuse

Sexual harassment of a child occurs when an adult engages in sexual activities with a child without their consent, using coercion, blackmail, physical force, or exploiting their power over the child. The purpose of these actions is to provide the adult/s with enjoyment or pleasure. Sexual harassment is a much broader term than sexual abuse. **Harassment** can encompass physical, verbal, and emotional actions, while **abuse** is generally understood to be a physical act⁸. Sexual abuse also happens specifically to children. Children cannot consent to sexual activities, so any sexual acts that occur with a child are considered sexual abuse. It also includes sexual contact between children if there is a significant age difference, such as at least five years, for instance, between a teenager and a young child. It is essential to differentiate between age-appropriate exploration of one's body and sexuality, particularly among adolescents, and behaviours that constitute abuse.

Child sexual abuse contains a wide range of acts, including rape, forcing a child to engage in vaginal, anal, or oral sex, sexualised touching, groping, using a child for adult masturbation, and non-contact activities like voyeurism or exhibitionism in front of the child. It also includes showing or producing pornographic material involving a child. Additionally, sexual abuse covers acts of child prostitution and pornography.

The abuse may range from a single incident involving a stranger to prolonged abuse by a relative, family member or trusted person including rape and exploitation through prostitution and pornography.

The perpetrator of sexual abuse can be a stranger, but more often, it is someone within the child's close circle—someone the child loves and trusts (i.e. teacher, trainer, coach). The abuse typically begins at a very young age with seemingly innocent behaviours and is often kept secret through bribery, threats, or special attention.

Sexual abuse is difficult to detect and even more difficult to prove. In some cases, they only reveal when the child confides in a trusted person. However, that process is often hindered by shame and memories of the child's guilt, fear of punishment, revenge. The abuser often reinforces such memories to the child by threatening or blackmailing the child, e.g. the breakup of the family, for which the child will allegedly be to blame.

Child sexual exploitation

Child sexual exploitation is a form of sexual abuse. It occurs when a child or young person is coerced, manipulated, or deceived into engaging in sexual activity in exchange for items they may require or desire, such as gifts, drugs, money, status, and affection. Children and young people are frequently misled into believing they are in a loving and consensual relationship, so sexual activity may appear consensual. They may trust their abuser and not realise they are being abused.

Child sexual exploitation does not always require physical contact and can also be achieved through the use of technology.

Abusers may use violence and intimidation to frighten or force a child or young person, giving them the impression that they have no other option. They may lend them large sums of money that they are aware will not be repaid, or they may use financial abuse or blackmail to exert control over them. CSE can be perpetrated by anyone, regardless of age, gender, or race. The relationship could be described as friendship, someone to look up to, or romantic. Children and young people who have been exploited may be forced to 'find' or coerce others into joining groups.

⁸ For the purpose of this Guide, we will use the term sexual abuse to cover all forms of sexual harassment.

Grooming

Grooming is when someone develops a relationship, trust, and emotional connection with a child or young person in order to manipulate, exploit, or abuse them. Such a relationship is “nurtured” over a long period of time and frequently leads to penetration and/or oral-genital contact, as well as sexual exploitation and trafficking. Anyone can be a groomer, regardless of age, gender, or race. Grooming can take place over a short or long period of time – from weeks to years. Groomers may also build a relationship with the young person's family or friends to make them seem trustworthy or authoritative. Children and young people can be groomed online, in person or both.

Groomers may also establish a relationship with the young person's family or friends in order to make them appear trustworthy or authoritative. Groomers may also attempt to isolate children from their friends and family, making them feel dependent on them while giving the groomer power and control over them. They may use blackmail to instil guilt and shame in a child or introduce the concept of ‘secrets’ to control, frighten, and intimidate them. It is important to remember that children and young people may not realise they are being groomed. They may experience complex emotions such as loyalty, admiration, love, fear, distress, and confusion.



Table 4: How to recognise sexual abuse

Physical signs:	Behavioural signs:	What to do:
Bruises	Avoiding being alone with or frightened of people or a person they know	Listen carefully to what they are saying
Bleeding, discharge, pains or soreness in their genital or anal area	Language or sexual behaviour you would not expect them to know	Do not push them too much, but allow them to talk freely or answer
Sexually transmitted infections, including in the throat.	Having nightmares or bed-wetting	Let them know they have done the right thing by telling you
Pain/soreness in throat	Alcohol or drug misuse	Tell them know it is not their fault
Pregnancy	Self-harm	Say you will take them seriously
Difficulty in walking/ sitting that are not usual for the child	Changes in eating habits or developing an eating problem	Do not confront the alleged abuser
	Changes in their mood, feeling irritable and angry, or anything out of the ordinary	Report what the child has told you as soon as possible
	Change in normal behaviour for the child, for example suddenly not attending education or avoiding wanting to go home/ running away	Decide if they need medical attention



*Source: NSPCC, 2024

2.1.5. Bullying and cyber-bullying

Bullying (including cyber-bullying or online abuse) is defined as unwanted aggressive behaviour by another child or group of children who are not siblings or romantically involved with the victim. The abuse is repeated over an extended period of time in such a way and to such an extent that the child being bullied finds it difficult to defend himself or herself. These are typically school-aged children. It includes repeated physical, psychological, or social harm and is frequently done in schools and other gathering places for children, as well as online. Bullying, including cyberbullying, can include threatening, spreading rumours or false information, physical or verbal attacks, and intentional exclusion.

The WHO (2022) identifies another category called **youth violence**, which primarily affects children and young adults aged 10 and older (up to 29 years). This type of violence usually occurs in community settings and involves interactions between acquaintances or strangers. It includes bullying and physical assaults, which may or may not involve weapons like guns and knives. Youth violence can also involve gang-related activities.

Discriminatory abuse is a different kind of bullying or abusive behaviour, as it is motivated by a prejudice against specific individuals or groups. This may be due to an individual's ethnic origin, colour, nationality, race, religion or belief, gender, gender reassignment, sexual orientation, or disability. Unfair or unfavourable treatment, culturally insensitive comments, insults and "banter," and incidents on and off the field (including social media) are all potential actions.

Discriminatory comments and remarks, jokes about or targeted abuse directed at disabled children, homophobic, transphobic, sexist, gendered, racist, or faith-based remarks are unacceptable and must be immediately addressed.

Peer-on-peer abuse also includes actions where children abuse other children through behaviours such as "**upskirting**," which involves secretly taking a picture under a person's clothing with the intent to view their genitals or buttocks, either for sexual gratification or to cause the victim humiliation, distress, or alarm. Other forms of peer-on-peer abuse include **sexting** (also known as youth-produced sexual imagery) and **initiation or hazing-type violence and rituals**, which involves any rituals, initiation activities, actions, or situations that, with or without consent, recklessly, intentionally, or unintentionally endanger the physical or emotional wellbeing of children.

Bullying shares many signs and indicators with other forms of abuse, but it differs in that it is typically done by peers⁹. **Cyber-bullying**, on the other hand, is a unique type of abuse because it takes place entirely online. It can happen on any internet-connected device, such as computers, tablets, or mobile phones. Cyber-bullying can take place anywhere online, including on social media, through text messages and messaging apps, emails, online chats, gaming platforms, and live-streaming sites. Children can be targeted by online abuse from people they know or by strangers. This abuse might be linked to other forms of offline abuse, like bullying or grooming, or it may happen solely in the online environment.

9 Good examples from Korea: 1st case: <https://edition.cnn.com/2021/02/17/sport/south-korea-volleyball-twins-bullying-spt-intl/index.html> and 2nd case (age hierarchy): <https://koreajoongangdaily.joins.com/news/2024-02-27/sports/volleyball/V-League-suspends-Oh-Jiyoung-for-bullying-teammates/1990189>

Table 5: How to recognise bullying and cyber-bullying

Physical signs:	Behavioural signs:	What to do:
Spend a lot more or a lot less time than usual online, texting, gaming or using social media	Anxiety	Listen carefully to what they are saying
Seem distant, upset or angry after using the internet or texting	Self – harm	Let them know they have done the right thing by telling you
Be secretive about who they are talking to and what they are doing online or on their mobile phone	Eating disorders	Tell them know it is not their fault
Have lots of new phone numbers, texts or email addresses on their mobile phone, laptop or tablet	Suicidal thoughts	Say you will take them seriously
		Do not confront the alleged abuser
		Explain what you will do next
		Report what the child has told you as soon as possible



**Source: NSPCC, 2024*

Some of the signs of cyber-bullying are very similar to other abuse types (grooming, sexual abuse or child sexual exploitation).

2.2. Effects of child maltreatment and abuse

Emotional abuse often has cumulative effects that may not be immediately visible but become apparent over time. These effects can manifest as changes in a child's behaviour or development, such as delayed growth, attachment issues, intense fear of separation, bedwetting, soiling, habitual disorders (like head-banging or biting), sleep and eating disorders (anorexia, bulimia), unusual emotional responses (phobias, hypochondria, obsessiveness), increased vigilance, sudden behaviour shifts, depression, learning difficulties, declining school performance, lack of interest, suicidal thoughts, self-harm, and antisocial or delinquent behaviour.

However, these symptoms are often multifactorial and cannot be taken as definitive proof of maltreatment. To conclude that a child's behaviour is a result of any kind of abuse, it is essential to consider the entirety of the child's circumstances, including individual, family, and social factors, both past and present.



3. RECOGNITION AND DETECTION OF ABUSE AND VIOLENCE

Recognising, detecting, and preventing violence is crucial in all sport. Violence can occur in various settings such as at home, school, the playground, on the street, or on the sport field. It is important to emphasise that abuse and violence are completely unacceptable and harmful to young athletes. These behaviours have no place in sport. Violence in Volleyball can occur at the individual, relational, or organisational levels.

For young Volleyball players, participating in the sport can bring challenges to their health and well-being, including issues like depression, self-harm, eating disorders, and insomnia. Neglecting the child's well-being can lead to injuries during practice or matches and negatively impact their overall development.

Several threats to young Volleyball players come from the relationships they form while playing the sport. As a result, it is critical to develop, adopt, and implement preventive policies, as well as establish systems for dealing with suspicions and allegations of violence in Volleyball. But, most importantly coaches¹⁰ must learn how to recognise the various levels of violence.

3.1 Levels of Violence

CEV and sport clubs in general, should respond to any type of violence against children, regardless of who commits it, its intensity, or frequency. The sport field should uphold a **zero-tolerance policy** toward violence. Based on the severity of the violence against children, three levels can be identified, which determine the appropriate response, and the roles of all stakeholders involved in the process. To better protect children from violence within the club, it is recommended that coaches, trainers and teams recognise and react according to these three levels of violence:

First Level.

At this level, situations involve the simplest forms of violence and abuse between children, which the coach can resolve independently. Through daily and consistent communication during training, competitions, and trips, the coach addresses incidents such as: pushing, tripping, verbal arguments, insulting words, one-time cursing, mocking, mimicking, non-repeating actions prompted by a specific situation, and comments about the situation itself rather than the athlete's personality, which are all examples of inappropriate behaviour. The children's relationship is not harmed by their actions. Anger subsides, apologies are made, and the children continue playing together.

Second Level.

More complex situations require the coach to report the incident to the club and seek cooperation with the team to protect the children from violence. This includes:

- >> *Forms of abuse between children on and off the field* that disrupt relationships, such as physical, emotional, or sexual abuse. Examples include and are manifested through physical, psychological, or sexual abuse, through posting, video clips, abuse of forums and readings, recording with a camera of violent or humiliating situations, distributing recordings and images, showing pornographic material, showing the intimate parts of the body or undressing, slapping, hitting, threats, blackmail, non-acceptance, exclusion from a group, etc. (Mountjoy, et al., 2015).

¹⁰ For the purpose of this Guide, we will use the term *coach* to cover all adults involved on Volleyball court and beyond, including sport coaches, physical and health education teachers, teachers with and without a sport education background, as well as junior trainers, and other sport personnel who work with children.



- >> *Forms of child abuse with visible physical injuries or psychological changes* observed by the coach that indicate violence off the field, such as abuse by family members, guardians, employees in a school or institution, other unknown adults or peers, whether related to the sport or not, etc.

Third Level.

Complex or prolonged situations that go beyond the first and second levels require the involvement of other institutions to safeguard children from violence. This level includes more severe offenses such as minor and serious physical injuries, beating, drowning, emotional abuse, neglect, sexual abuse, recording and distributing vulgar or violent content, production of pornographic material, seduction of children by adults, exploitation, coercion into sexual activity, rape, and other serious violations of children's rights and freedoms.

In these cases, immediate reporting and the involvement of a dedicated team to protect children from violence are essential.

3.2. Profile of a child victim of violence

The children who experience violence often they share with others certain risk factors and characteristics. Understanding these profiles can help identify and secure them support to those who are exposed to risk.

3.2.1. Demographic factors

Age: Younger children are especially vulnerable, but adolescents also face significant risks, especially in contexts involving peer violence or relationship violence.

Sex: Boys and girls can both be victims of violence, but the types and contexts may differ. Research¹¹ shows that the experiences of abuse in sport can differ significantly between boys and girls, both in terms of prevalence and the types of abuse encountered. Girls are more likely to suffer sexual violence, while boys they can be more inclined towards the physical violence and harassment.

While both boys and girls are vulnerable to sexual abuse in sport, studies suggest that girls are often more frequently targeted. For example, research¹² has shown that girls experience higher rates of non-contact and contact sexual violence in sport settings compared to boys. However, boys who are abused often face greater societal stigma, which can lead to underreporting. Both boys and girls report experiencing emotional abuse, such as verbal harassment, with rates as high as 65% for those involved in sport. Physical violence is also common, affecting approximately 44% of young athletes. However, the context and response to such abuse can differ; boys may face more intense pressure to conform to masculine ideals, while girls may be subjected to gendered expectations and body shaming.

"There are some gender-specific challenges that the Volleyball and sport community must address, such as cultural and gender norms. Girls in sport frequently face challenges due to gender stereotypes, such as the belief that boys are naturally better at sport. This can result in lower support for girls' sport participation and higher dropout rates. Furthermore, girls may not have female role models in sport, which can discourage continued participation. Boys, while less likely

11 Women's Sports Foundation, New National Report Sheds Light on Girls' Sports Participation. Link: https://www.womenssportsfoundation.org/press_release/new-national-report-sheds-light-on-girls-sports-participation/, or World athletics, New research shows scale of child abuse in sport. Link: <https://worldathletics.org/news/news/new-research-child-abuse-in-sport>.

12 Women's Sports Foundation, New National Report Sheds Light on Girls' Sports Participation. Link: https://www.womenssportsfoundation.org/press_release/new-national-report-sheds-light-on-girls-sports-participation/



to report sexual abuse, may face other forms of abuse in sport settings due to hypermasculinity¹³. If they do not conform to traditional male roles, they may face bullying or ridicule, which can manifest as various forms of emotional and physical abuse.

3.2.2. Environmental factors

Family Dynamics: Children from families where violence, substance abuse, or mental health issues are present are at a higher risk of experiencing abuse. The vulnerability of these children is further compounded by parental neglect and lack of supervision. Children in such environments are more likely to suffer from physical, emotional, or sexual abuse due to the chaotic and unstable home environment.

Socioeconomic Status: Poverty and economic needs can increase stress within families and reduce access to protective resources, making children more susceptible to various forms of violence. Economic stress can lead to neglect, as parents may struggle to provide adequate care and supervision, further exposing children to abuse.

3.2.3. Psychological and Behavioural Indicators

Changes in Behaviour: Sudden shifts in a child's behaviour, such as increased aggression, withdrawal, or anxiety, can be significant indicators of abuse. These changes are often the result of trauma and fear, reflecting the child's internal struggle to cope with their experiences.

Mental Health: Victims of violence often exhibit symptoms of mental health disorders, including depression, post-traumatic stress disorder (PTSD), and other anxiety disorders. These children may also experience sleep disturbances, such as insomnia or frequent nightmares, as a result of their trauma.

3.2.4. Social Indicators

Isolation: Children who are isolated from their peers, either due to the control exerted by their abuser or their own withdrawal from social interactions, are at a higher risk of ongoing abuse. Isolation can prevent children from seeking help or support, making it easier for the abuse to continue unnoticed.

Weak Academic Performance: Signs such as frequent absences from school, difficulty concentrating, and declining grades can be red flags that a child is experiencing violence at home or in another environment. Academic struggles often reflect the psychological and emotional toll that abuse takes on a child's ability to focus and perform in school.

3.2.5. Long-Term Influence

Healthcare Issues: Victims of violence are at a higher risk of developing chronic physical and psychological health problems, including substance abuse and eating disorders. These issues often persist into adulthood, affecting the victim's overall quality of life.¹⁴

Social and Relational Difficulties: Children who have experienced abuse may struggle to form healthy relationships and are at a higher risk of engaging in criminal activities or becoming victims of violence in adulthood. These long-term effects highlight the critical importance of early intervention and support for abused children.

¹³ Exaggerated image of hegemonic masculinity, mainly in the media. It overemphasises the ideals, such as physical strength, aggression and sexuality set out for men, thereby reinforcing them. Link: https://eige.europa.eu/publications-resources/the-saurus/terms/1381?language_content_entity=en

¹⁴ For more information, visit World Health Organization (WHO) or American Academy of Pediatrics (AAP). Links: <https://www.who.int/news-room/fact-sheets/detail/child-maltreatment> and <https://www.aap.org/>.

3.3. Profile of a child perpetrator of violence

Who Can Be a Perpetrator?

Research¹⁵ indicates that anyone involved in sport, including coaches, parents, and peers, can be a perpetrator of violence. Notably, peers—other athletes—are often the primary perpetrators, especially in cases involving bullying and verbal abuse. Abovementioned studies suggest that peer-perpetrated violence is common across various sport environments, with one study highlighting that 48% of young athletes reported experiencing bullying from peers in sport settings. While some athletes may be more vulnerable based on their characteristics, the potential for experiencing or perpetrating violence exists for all athletes, regardless of gender, age, or other personal factors (Canty & Giardino, 2022).

Understanding the profile of a child perpetrator of violence can aid in developing effective prevention and intervention strategies. It can help coaches, parents, and sport organisations develop more targeted and effective strategies for preventing violence and supporting at-risk children in sport environments.

Children who engage in violent behaviour typically exhibit several risk factors and characteristics:

3.3.1. Demographic Factors¹⁶

Age: Perpetrators can be as young as preschool age, but violent behaviours are more prevalent among older children and adolescents. According to the CDC, youth violence peaks during adolescence, with approximately 12-18% of adolescents involved in physical fights each year.

Gender: Boys are more likely to engage in physical violence, while girls are often more involved in relational aggression, such as social exclusion or gossip.

3.3.2. Family and Environmental Influences¹⁷

Exposure to Violence: Children exposed to domestic violence or who have been victims of abuse themselves are at a significantly higher risk of becoming perpetrators, as such experiences can normalise aggression as a conflict resolution method. Studies show that about 30% of children who witness domestic violence go on to exhibit violent behaviour themselves.

Parental Influence: Inadequate supervision, inconsistent discipline, and harsh parenting practices are major contributors to the development of violent behaviour in children. Research suggests that children who experience harsh or inconsistent discipline are three times more likely to engage in violent behaviour.

Socioeconomic Status: Children from low-income families face additional pressure that can lead to violent behaviour, and they often have less access to positive recreational activities that could otherwise serve as vents. The correlation between poverty and increased rates of juvenile delinquency has been well-documented¹⁸, with economically disadvantaged children being 2-3 times more likely to engage in violent behaviour (Gunuboh, 2023).

15 The study is called Child Abuse in Sport: European Statistics (CASES). More information: Centre for Child Protection and Safeguarding in Sport, Child Abuse in Sport: European Statistics (CASES). Link: <https://sites.edgehill.ac.uk/cpps/projects/child-abuse-in-sport-european-statistics-cases/>.

16 All statistics are retrieved from Women's Sports Foundation, New National Report Sheds Light on Girls' Sports Participation. Link: https://www.womenssportsfoundation.org/press_release/new-national-report-sheds-light-on-girls-sports-participation/.

17 All statistics are retrieved from https://www.womenssportsfoundation.org/press_release/new-national-report-sheds-light-on-girls-sports-participation/ and <https://worldathletics.org/news/news/new-research-child-abuse-in-sport>.

18 National Academies of Sciences, Engineering, and Medicine. Juvenile Crime, Juvenile Justice, Chapter: The Development of Delinquency. Link: <https://nap.nationalacademies.org/read/9747/chapter/5>



3.3.3. Psychological and Behavioural Characteristics¹⁹

Aggressive Tendencies: Early signs of aggression, such as bullying, can escalate into more severe violent behaviours if not addressed early. Approximately 20% of children are involved in bullying as either perpetrators or victims, and these early behaviours can predict later violence.

Impulsivity and Hyperactivity: Children with conditions like ADHD (Attention-Deficit Hyperactivity Disorder), characterised by impulsivity and hyperactivity, often struggle with self-control, which can lead to aggressive outbursts. These children are at a higher risk for engaging in violent behaviour, especially if their condition is not properly managed.

Mental Health Problems: Mental health issues such as depression, anxiety, and conduct disorders are frequently associated with violent behaviour in children. The National Institute of Mental Health reports that children with conduct disorder are more likely to engage in violent behaviour than their peers.

3.3.4. Social and Peer Influences

Peers: Children who associate with peers who engage in aggressive or delinquent behaviour are more likely to exhibit similar behaviours. Peer influence is a powerful predictor of youth violence, with studies²⁰ showing that 40% of youth violence is peer driven.

Deficits in Social Skills: Difficulty in forming healthy relationships and poor conflict resolution skills can lead children to use violence as a way of interacting with others. Social skills deficits are common among children who engage in violence, and these deficits are often exacerbated by negative peer influences.

3.3.5. Academic and School Factors²¹

Academic Performance: Poor academic performance, frequent absences, and low school engagement are significant risk factors for violent behaviour. Students who struggle academically often experience frustration and low self-esteem, which can lead to acting out through aggression or violence, with school dropouts being 3-4 times more likely to participate in violent activities. Moreover, schools that do not provide adequate support for struggling students or fail to address the root causes of academic underachievement may inadvertently contribute to a higher incidence of violence.

School Environment: A school culture that tolerates bullying or aggression can reinforce violent behaviour among students. Schools that lack effective behaviour management policies may unintentionally contribute to the development of violent behaviours in children.

19 Reports that provide extensive insights into the profiles and prevention of youth violence are retrieved from Centers for Disease Control and Prevention (CDC). Link: <https://www.cdc.gov/> and National Institute of Mental Health (NIMH). Link: <https://www.nimh.nih.gov/>.

20 Child Abuse in Sport: European Statistics (CASES). Link: <https://sites.edgehill.ac.uk/cpss/projects/child-abuse-in-sport-european-statistics-cases/>.

21 For more detailed information, see the research of the Office of Juvenile Justice and Delinquency Prevention about the importance of addressing academic struggles early and providing comprehensive support to students to prevent the escalation into more serious behaviours such as violence. National Institute of Justice: The Causes and Consequences of School Violence: A Review. Link: <https://www.ojp.gov/pdffiles1/nij/302346.pdf>.

3.4. Profile of child witnesses or observers of violence

Children who witness or observe violence are deeply affected by their experiences. These children often display a range of psychological, behavioural, and emotional characteristics as a result of their exposure to violence. Understanding their profile can help in providing appropriate support and interventions.

3.4.1. Demographic factors

Age: Children of all ages can be witnesses to violence, but the impact may vary with age. Younger children tend to show more external signs of anxiety, such as crying or clinging to caregivers, while older children may internalise their experiences, leading to symptoms like depression or withdrawal. Studies²² indicate that younger children may be more likely to exhibit signs of distress immediately, while older children might develop more long-term psychological issues, such as PTSD.

Sex: Both boys and girls can be affected if they witness violence, though their reactions may differ. Boys are more likely to exhibit externalising behaviours, such as aggression and defiance, while girls are more prone to internalising behaviours, such as anxiety, depression, and social withdrawal. These differences highlight the need for gender-sensitive interventions.

3.4.2. Family and Environmental Influences

Family Violence: Children in homes where family violence occurs are at high risk of being witnesses. They may not only see physical violence but also hear verbal abuse, which can be just as harmful. Studies²³ have shown that children who witness domestic violence are at a higher risk of developing emotional and behavioural problems compared to those who do not.

Community Violence: Exposure to community violence, such as gang violence or neighbourhood crime, significantly affects children as well. This exposure can lead to chronic stress and a heightened sense of fear, contributing to long-term emotional and psychological difficulties.

Parental Impact: The behavioural and emotional state of parents after witnessing violence (e.g., depression, anxiety) can influence how children cope with what they have seen. Parents who struggle with their own mental health issues may be less able to provide the emotional support their children need, exacerbating the impact of the trauma on the child.

3.4.3. Psychological and behavioural characteristics

Emotional Anxiety: Children who witness violence may exhibit symptoms of anxiety, fear, depression, and PTSD. They might experience sleep disorders, nightmares, and separation anxiety. Research²⁴ shows that these symptoms can persist long after the violent event, impacting the child's overall well-being.

Behavioural problems: Witnesses to violence can display aggression, defiance, hyperactivity, or withdrawal. They may struggle with attention and concentration, which can lead to academic difficulties. Behavioural issues such as these are often a direct response to the trauma and stress caused by witnessing violence.

22 Preventing School Violence: Building a Safer Future. Link: <https://www.rethinked.com/resources/preventing-school-violence-building-a-safer-future/>

23 National Institute of Justice: The Causes and Consequences of School Violence: A Review. Link: <https://www.ojp.gov/pdffiles1/nij/302346.pdf>

24 Preventing School Violence: Building a Safer Future. Link: <https://www.rethinked.com/resources/preventing-school-violence-building-a-safer-future/>



Responses to trauma: Some children may re-experience the trauma through flashbacks or intrusive thoughts. They may also develop hypervigilance, constantly being on alert for danger, which can further disrupt their daily lives.

3.4.4. Social and relational influence

Interpersonal Relations: Witnessing violence can negatively impact a child's ability to form healthy relationships. They may develop trust issues or attachment problems, making it difficult for them to build and maintain friendships or close family relationships.

Social Skills: These children may struggle with social interactions, leading to isolation or difficulties in peer relationships. They may also replicate violent behaviours in their interactions with others, perpetuating a cycle of violence.

3.4.5. Academic and School factors

Academic Performance: Witnessing violence can lead to significant difficulties in school, including lower grades, frequent absences, and disciplinary problems. The stress and trauma from witnessing violence can severely affect a child's ability to focus and perform academically.

School Environment: A supportive school environment can help mitigate some of the negative effects of witnessing violence. In contrast, a school with high levels of violence or harassment can exacerbate the problems, further harming the child's academic and social development.

3.5. Strategies for intervention and prevention

Addressing the complex issue of child victims of abuse, perpetrators of violence and supporting children who witness violence requires tailored approaches that recognise the unique vulnerabilities of both boys and girls in Volleyball. By focusing on family dynamics, school environments, peer relationships, and therapeutic interventions, participating schools and clubs can significantly reduce the incidence of violence and provide the necessary support for affected children.

Safeguarding strategies for intervention and prevention need to be comprehensive, ensuring that all forms of abuse are addressed, and that there are clear reporting mechanisms and support systems in place for young athletes of both genders. This approach not only helps in mitigating immediate risks but also fosters long-term recovery and resilience in children, ensuring they grow in safer, more supportive environments.

3.5.1. Addressing Child Perpetrators of Violence: A Multifaceted Approach

>> Family Interventions:

Implement programmes that educate parents on positive parenting practices.

Provide support to families experiencing violence to reduce risk factors for children.

>> School-Based Programmes:

Introduce and enforce anti-bullying initiatives.

Offer mental health services within schools.

Foster a positive, inclusive school climate.

>> Peer Support:



Encourage healthy peer relationships.

Implement mentoring and peer mediation programmes to promote positive social interactions.

>> Therapeutic Interventions:

Provide professional counselling and behavioural therapy.

Help children learn non-violent ways to express emotions and resolve conflicts.

3.5.2. Supporting Children Who Witness Violence: Comprehensive Support Systems

>> Therapeutic Interventions:

Offer counselling and trauma-focused therapies to help children process their experiences.

Develop healthy coping mechanisms to address the impact of witnessing violence.

>> Family Support Programmes:

Implement interventions that support the entire family, including parenting and family therapy.

>> School-Based Programmes:

Create safe spaces in schools with access to supportive counselling.

Teach social-emotional skills to help children manage their experiences.

>> Community Resources:

Ensure access to community resources for teachers, coaches, and other leaders to assist children and families affected by violence.



4. Addressing Child Violence and Building a Community Protection Network

4.1. Risk Assessment

The risk assessment process is a critical step in identifying and addressing violence against a child. This process must be comprehensive, timely, and efficient to ensure the child's safety and well-being, following these 5 steps:

Step 1 - Observation: Coaches and staff should carefully observe the child for any changes in behaviour, health, communication, or play. These observations are vital in recognising signs that may indicate abuse. It's important to note that while these signs could be related to other circumstances, such as the loss of a parent, the presence of one or more indicators should always raise concerns.

Step 2 - Significance of Concerns: Staff should never dismiss their concerns as insignificant. Every disclosure, incident, and allegation must be taken seriously and addressed according to the related policies. This proactive approach is crucial in ensuring that no potential case of abuse goes unnoticed.

Step 3 - Conversation: Engaging in conversation with the child is crucial. Coaches should listen to the child's account without questioning, pressuring, or directing them. This approach ensures that the child feels heard and supported. If there is reasonable doubt about the child's safety, the coach should immediately involve the child protection team.

Step 4 - Information Sharing: Effective information sharing is essential for protecting children and promoting their welfare. Inadequate information sharing can lead to missed opportunities for timely intervention. Decisions about sharing information—how much to share, with whom, and when—are critical and should be handled carefully to protect the child's privacy. Data protection in youth sport, including Volleyball, is a critical issue that involves safeguarding the personal information of young athletes.²⁵

Step 5 - Moral Responsibility: Everyone involved in sport has a moral duty to care for children and report any concerns regarding child protection. This collective responsibility helps create a safer environment for all children involved in sport.

By following these steps, sport organisations can effectively assess and address the risks of violence against children, ensuring a safer and more supportive environment for young athletes.

Responding to a Child's Disclosure of Abuse or Neglect:

Find a quiet place	Listen to the child in a peaceful, private space.
Listen calmly and non-judgmentally	Focus on understanding rather than questioning or doubting.
Do not force information	Avoid pressuring the child to provide details or making promises of complete confidentiality.
Reassure the child	Explain that what happened is not their fault.
Allow uninterrupted sharing	Let the child recount events without interruption.
Respect the child's feelings	Acknowledge and validate their emotions.
Offer support	Inform the child that you will try to help but may need to involve other services if necessary.
Keep information secure	Maintain confidentiality and ensure notes are handed over to the Protection Team or relevant authorities.

²⁵ See Annex I for *Data Protection in Youth Sports and Volleyball* in Europe.

4.2. Team to protect children from violence in Volleyball

To enhance the safety and well-being of young Volleyball athletes, European Volleyball Confederation (CEV) strongly advises clubs or schools to establish a Child Protection Team within the entity. This team will focus on addressing and mitigating violence within the sport, particularly in complex situations that exceed the coach's capacity to manage or when serious violence is suspected.

The Child Protection Team will be comprised of key professionals, including the club's sport doctor, a sport associate, and a psychologist. The team will be activated from the second level of violence onwards, ensuring prompt and effective intervention to protect young athletes and promote a safe sporting environment.

Establishing a Child Protection Team will significantly strengthen club's or school's commitment to the safety and well-being of its young athletes. This proactive approach will help create a safer and more supportive environment, ensuring that all children can participate in the sport without fear of violence.²⁶

4.3. Interventions in Cases of On-Field Violence

Prompt intervention in cases of violence is essential to ensure that children feel safe and secure in sporting environments. When coaches witness or suspect violence, abuse, or neglect, they must respond appropriately. The primary goals of intervention are to stop the violence, ensure the child's safety, reduce the risk of recurrence, and mitigate or eliminate its consequences.

After the violence is stopped, the situation should be continuously monitored. Support should be provided directly or through referrals to appropriate services for the children involved—whether they are victims or perpetrators—and their parents.

In severe cases of violence, where the consequences are serious or there is a risk of recurrence, it is necessary to **involve external institutions** such as health services, police, Non-Governmental Organisations (NGOs) or social work centres. Another significant advantage of having a Child Protection Team within the sport is that it ensures responsibility for coordinating with these external institutions, participating in planning and implementing interventions, and monitoring the effectiveness of the measures taken.

Certain situations, particularly those involving physical violence, require an urgent response. This includes caring for the victim, notifying the parents, and immediately involving relevant institutions. If there is any suspicion of family violence where the child is a direct or indirect victim, the coach must inform the appropriate authorities, who will take further steps in consultation with the external institutions such as health services, police, or social work centres.

4.4. Calming the Situation After an Incident of Violence

When an incident of violence occurs, the primary focus is on ensuring the safety of the child victim and managing the situation calmly and effectively. Here's how to approach the situation:

1. Immediate Safety and Separation:

- If physical or severe verbal violence occurs, the coach's first priority is to separate the participants and calm them down. This can be done on the field, in the dressing room, or another appropriate space for discussion.

²⁶ See Annex II for the *Child Protection Team's Objective and Proposed Activities*.



2. Seeking Support:

- If the coach feels uncertain or insecure, they should seek help from colleagues (i.e. Child Protection Team).

3. Calm and Neutral Communication:

- In a calm tone, the coach should explain that the goal is to resolve the conflict. Both sides should have the opportunity to share their perspectives, and child witnesses may also be included in the discussion.

4. Facilitating the Conversation:

- Set ground rules: participants should listen to each other without interruption, avoid mutual insults, and speak honestly.
- Ensure that everyone coordinates their activities to avoid repeatedly questioning the children about the same incident. This helps maintain the flow of important information.

5. Key Guidelines During the Conversation:

- Do not change or interpret the content of the conversation.
- Remain neutral and avoid taking sides.
- Use vocabulary that is appropriate and understandable for the children when discussing violence, abuse, and neglect.
- Check for understanding to ensure that the child's perspective is accurately heard.
- Avoid reacting with shock, disbelief, or accusations.
- Do not promise unrealistic outcomes, such as immediate resolution.
- Inform the children about the steps that will be taken next.
- Clarify who will be informed and involved in assessing and monitoring the situation.

By following these steps, the coach can effectively calm the situation, ensure the safety of all involved, and lay the groundwork for resolving the conflict and addressing the underlying issues.

4.5. Supporting Child Victims in Healing and Returning to the Sport Community

When a child who has experienced violence or abuse, whether outside or within the sport environment, joins a sport club, sport can play a pivotal role in their recovery and in rebuilding their self-esteem. In such cases, the sport club should actively support the child's healing process and work closely with health and social institutions involved in the child's care. To facilitate this, the club should:

- >> Keep a close watch on the behaviour of both the child victim and any known perpetrators, especially if they continue to interact within the club.
- >> Pay attention to the behaviour of other athletes, noting group dynamics, identifying leaders, and assessing the overall atmosphere in the sport. Look for any signs of further violence or, conversely, supportive behaviour within the group.
- >> Maintain open communication with the child's parents, discussing ways to support the child and encouraging cooperation between the family and the club.
- >> Ensure the sport doctor is informed about any medical therapies, psychiatric or psychological support, or other interventions the child is receiving.

Creating a positive and supportive environment within the sport club is essential for the child's healing. The club should foster a caring atmosphere, where staff maintain professional boundaries, coaches act as positive role models, and the relationships between adults and children are built on trust and protective practices. This approach safeguards all participants and promotes a healthy, secure environment for the child to thrive in the sport.

It is highly recommended that all the sport entities involving children establish and implement robust **Child Protection Procedures**²⁷ to prevent and address any instances of injury, violence, or abuse within the sport. These procedures will outline the responsibilities of coaches and sport organisations in creating a safe environment for all young athletes. By taking a proactive approach, they can significantly enhance the protection and well-being of children in Volleyball, ensuring that any risks are managed effectively and that the sport remains a positive force in their lives.



²⁷ See Annex III for The Proposal for Implementing **Child Protection Procedures in Volleyball**.



5. Creating Safety Rules for Children and Staff in the Sport Club

5.1. What to do?

To ensure the safety and protection of both children and employees within the sport club, it is crucial to establish clear, written rules as part of the club's official programme. These rules should cover all aspects of sport life to ensure everyone involved in the club is familiar with and adheres to them.

The key areas to address include:

1. Club Membership and Registration:

- Clearly define the process for registering within the sport club.
- Outline the rights and responsibilities of children, parents, and sport staff.
- Establish procedures for leaving the club and handling club transfers.

2. Protection of Facilities:

- Implement rules for the safe use of sport facilities, changing rooms, and other spaces where children spend time.

3. Travel and Accommodation:

- Set guidelines for stays outside the city/state, including travel, transportation, and overnight accommodations.

4. Adult Supervision:

- Establish guidelines for adult supervision, particularly regarding proximity to children's personal space.

5. Recording and Photography:

- Define rules and obligations related to recording and photography of children during sport activities.

6. Social Media Policies:

- Implement policies for social media usage, including guidelines for contact, and publication of content related to sport activities.

7. Mobile Phone Use:

- Create guidelines for the appropriate use of mobile phones by children and staff.

8. Reporting Procedures:

- Establish clear procedures for reporting accidents, incidents, and injuries.

9. Abuse and Violence Protocols:

- Develop protocols for addressing abuse and violence, including reporting procedures and follow-up actions.

5.2. What Not to Do?

To create a safe and supportive environment for child victims in the sport club, it is essential to avoid the following practices:

- Do not assume parental or guardian responsibilities.
- Do not spend time alone with children out of sight of others.
- Do not enter the homes of children without proper authorisation from parents or guardians.
- Do not involve children in rough, physical, or provocative games or activities.
- Do not engage in any form of inappropriate touching or gestures.
- Do not make sexually suggestive comments to children, even as a joke.
- Do not belittle or ridicule children for their comments or actions.
- Do not offer advice or guidance beyond your expertise or designated role.
- Do not refrain from reporting serious incidents or informing parents about severe cases (third level incidents).
- Do not take inappropriate photos or recordings of children during sport events, especially those with disabilities or in vulnerable positions.
- Do not record videos for coaching purposes during training without obtaining parental consent.
- Do not neglect to ensure that all volunteers and staff are aware of and adhere to the sport club's rules and responsibilities towards children.



6. The Role of Volleyball and Sport Coaches in Preventing Violence Against Children

Participation in sport, particularly Volleyball, integration into the sport community, and the positive influence of sport coaches are significant protective factors for children. These elements can shield children from various social risks, disrupt the chain of risk factors, and prevent the emergence of new risks.

Risk factors are elements that directly cause or contribute to the occurrence of violence. In contrast, protective factors are elements that mitigate these risks, reducing or neutralising the likelihood of violence. It is essential to adopt an individualised approach, as factors generally considered “risky” may not always pose a threat to every child or in every situation. Protective factors promote the healthy development of children, strengthen their resilience, and foster strong attachments to family, school, sport clubs, and trusted adults both inside and outside the family.

The personality and role of a sport coach are crucial in the development and lives of children. A coach serves as a positive role model, someone children can trust, confide in, and share their secrets and concerns with. Coaches help, support, guide, and empower children. They have the ability to teach, inspire, and make meaningful changes in children's lives. For some children, especially those facing crises at home, a coach can become a substitute parent or mentor, noticing changes in the child's behaviour, recognising their stress and emotions, and either solving problems or seeking help for them.

Coaches also serve as the voice of children, speaking up and reporting concerns when the children themselves cannot. This trust must never be betrayed; it should not be abused, manipulated, or taken for granted. For many children, the coach represents the brightest point in their lives, often filled with worries and challenges. Therefore, the coach's role in preventing violence and supporting children is not just significant—it is indispensable.



7. Strengthening the Professional Competencies of Volleyball Coaches and Sport Personnel

Enhancing the professional competencies of Volleyball coaches, physical education teachers, and other sport personnel is crucial for both the development of the sport and the proper care of children involved. Ensuring that these professionals are well-equipped with the latest knowledge, skills, and methods for working with children is essential to delivering high-quality sport education and training at all levels.

The continuous professional development of Volleyball coaches is vital. It not only keeps them updated on the latest techniques in their specific field but also broadens their understanding of the developmental stages of children. This includes knowledge of motor skills, coordination, as well as awareness of issues such as stress, trauma, adverse childhood experiences, post-traumatic reactions, and the types and consequences of violence against children.

Workshops and seminars, often led by psychologists, psychiatrists, and educators, are key components of this ongoing education. These events provide interactive platforms where coaches and sport personnel can exchange ideas, learn from each other's experiences, and apply best practices in their work. This collaborative learning environment ensures that the knowledge gained is practical and directly applicable to their daily interactions with young athletes.

By strengthening the professional competencies of Volleyball coaches, the entities ensure that the training provided is not only of high quality but also tailored to the specific needs of children. This approach supports the overall development and active participation of young athletes in the sport, fostering a positive and enriching environment for their growth.



8. Promotion of Sport in Preventing Violence Against Children and Building a Culture of Non-Violence in Sport

Promoting sport as a means to prevent violence against children and fostering a culture of non-violence in sport is crucial for creating healthy and safe communities. Through children's participation in sport, awareness is heightened among children, parents, participants, and the entire community about the positive role sport play in child development. Key values such as fair play, team spirit, respect, and inclusion are emphasised, contributing to a safe and supportive sport environment.

CEV and the School Project are deeply committed to maintaining a safe and inclusive environment within the sport of Volleyball. CEV and the School Project actively build partnerships with local communities and schools, promoting the exchange of experiences, organising visits to matches, and fostering a culture of positive fan engagement—all of which help reduce the risk of violence.

By promoting sport, particularly Volleyball, CEV and the School Project aim to create communities where violence is unacceptable, and a safe, nurturing atmosphere is the norm. Through the implementation of robust protection and prevention measures, the impact of violence on children is minimised. This approach helps establish reliable and inclusive communities where children can grow and thrive, enjoying their sporting experiences without fear of violence or abuse.

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Appendix I

CEV's Data Protection in Youth Sport and Volleyball

1. Legal Frameworks

General Data Protection Regulation (GDPR):

The GDPR is the primary regulation governing data protection in Europe. It applies to all organisations, including sport clubs, that handle personal data. This includes the European Volleyball Confederation (CEV) and its affiliated clubs and federations.

Under GDPR, any collection of personal data from minors (under 16 in most EU countries) requires explicit consent from a parent or guardian. Clubs must ensure that data processing is lawful, transparent, and for legitimate purposes only.

2. Types of Data Collected in Volleyball

Personal Data: This includes names, contact information, dates of birth, and other identifiers used to manage player registration and participation.

Health and Medical Data: Collected for ensuring player safety, including injury records, medical history, and fitness assessments.

Performance Data: Data related to player performance, such as statistics, video analysis, and training data, which are often used for development purposes.

3. CEV's Data Protection Measures

The CEV is responsible for ensuring that all member federations comply with GDPR regulations.

Data Handling Protocols: CEV mandates strict guidelines on how personal data should be handled, stored, and shared, emphasising the need for encrypted data storage and secure access controls.

Consent Management: Clubs under the CEV must obtain and manage consent forms for collecting data from minors. This includes ensuring that parents or guardians are fully informed about the data collection purposes.

4. Challenges in Data Protection

Compliance Across Borders: The CEV operates across multiple countries, each with slightly different interpretations and implementations of GDPR, which can create challenges in maintaining consistent data protection standards.

Digital Transformation: As Volleyball clubs increasingly use digital platforms for managing teams, training, and competitions, ensuring that these platforms are GDPR-compliant is a significant challenge.

6. Key Statistics

Compliance Audits: Over 70% of national federations under the CEV have undergone GDPR compliance audits in the past two years.

Increased Reporting: There has been a 15% increase in data protection inquiries and breach reports within CEV-affiliated clubs, reflecting a growing awareness and vigilance in data protection matters.

7. Best Practices for Data Protection

Encryption: Encrypting data both in transit and at rest to protect it from unauthorised access.

Access Controls: Limiting access to sensitive information to only those who need it for their roles.

Regular Audits: Conducting regular audits of data protection practices to ensure compliance with legal standards and to identify any potential vulnerabilities.



Appendix II

Proposal for Establishing a Child Protection Team in Volleyball

Proposed Activities of the Child Protection Team:

1. Development of a Child Protection Programme:

- o Create a comprehensive programme for protecting child athletes from violence, integrating it into the club's operations.
- o Revise the programme annually to incorporate new research, best practices, and feedback.
- o Engage children, parents, and club employees in the development process to ensure broad participation and relevance.
- o Publish the programme on the club's website for transparency and accessibility.

2. Training and Awareness:

- o Plan and implement training sessions for all club employees focused on preventing, detecting, and reporting violence.
- o Ensure that staff are equipped with the necessary skills to recognise and respond to signs of violence.

3. Parental Engagement:

- o Collaborate with parents through regular and ad-hoc meetings to discuss topics such as violence prevention, positive parenting, and non-violent communication.
- o Foster a strong partnership with parents to enhance the protective environment around the child athletes.

4. Collaboration with Local Institutions:

- o Establish partnerships with local institutions such as ambulances, social work centres, police, schools, and other sport clubs to ensure a comprehensive approach to child protection.
- o Report and seek immediate assistance when a child requires medical intervention, social work support, or police involvement in serious cases.

5. Record-Keeping and Reporting:

- o Maintain detailed records of any incidents of violence within the club.
- o Prepare regular reports on the implementation of protection measures and the effectiveness of interventions.
- o Development of Intervention Protocols:
 - o Create clear intervention measures, outlining procedures, roles, and responsibilities for all club staff.
 - o Ensure that all employees and technical staff are familiar with these protocols to respond effectively to any incidents.

Appendix III

Proposal for Implementing Child Protection Procedures in Volleyball

These procedures aim to establish clear roles and responsibilities for coaches and sports organizations to ensure a safe environment for all child participants. They focus on developing and enforcing measures that prioritize the safety and well-being of children, preventing injuries, violence, and abuse.

Suggested Procedures:

1. Prioritise Child Welfare:

- o Implement a policy that emphasises the welfare of the child as the primary and paramount concern in all sport activities and services.

2. Maintaining professional boundaries and appropriate behaviour:

- o Everyone who works or volunteers with children is accountable for their behaviour, and every child deserves to be treated with dignity.

3. Promote Open Environments:

- o Ensure that all sport activities take place in open environments with clear communication. Avoid private or unobserved situations where children might be at risk.

4. Equal Treatment for Children with Disabilities:

- o Treat children with disabilities equally, with respect and dignity, ensuring that they receive the same level of care and attention as all other children.

5. Foster Trust and Involvement:

- o Encourage equal relationships between children and adults, based on mutual trust. Involve children in decision-making processes to empower and protect them.

6. Parental Involvement:

- o Involve parents or guardians whenever possible, such as by allowing them to oversee their children in changing rooms. If supervision is required after an incident, ensure that it is conducted by pairs of adults according to the sex/gender of the children, while remaining vigilant that abuse can occur by someone of the same sex/gender.

7. Guidelines for Tournaments and Events:

- o Prohibit adults from entering children's rooms or inviting children into their own rooms during tournaments or events.

8. Role Modelling:

- o Ensure that sport workers act as positive role models for children, refraining from smoking, consuming alcohol, or using profanity in the presence of children.

9. Positive Feedback:

- o Provide children with positive feedback focused on correcting improper movements or techniques, rather than criticising their personalities.

**10. Recognise Developmental Limits:**

- o Acknowledge the developmental capacities of children and avoid excessive training or pushing them beyond their limits against their will.

11. Parental Consent:

- o Obtain written parental consent for any actions taken by the sport club, particularly in cases requiring urgent and essential assistance.

12. Incident Record-Keeping:

- o Maintain detailed records of any incidents or violations, including the actions taken and the outcomes of those actions.

13. Risk Assessment:

- o In cases of violence or abuse, conduct a thorough risk assessment to determine whether the child has been or may be injured while participating in sport activities.

14. Addressing Risks and Allegations:

- o Promptly address any identified risks, especially if there are complaints or allegations against staff members or negligence in caring for children. All reports of abuse or violence should be taken seriously and responded to swiftly.

15. Prepared Statement and Risk Assessment:

- o Require a prepared statement from the applicant, including a written risk assessment, to be reviewed by the Child Protection Team within the sport organisation.



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