

PROMISE

Stakeholder mapping

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PROMISE: STAKE HOLDER MAPPING

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The information in this report is based on the results of online questionnaires, so therefore maybe not always complete.

The researchers want to thank all the contact persons from the selected countries for sharing the relevant information from their formally organized structure with them.

1 *Summary of the results of the stakeholder mapping*

For the PROMISE project, the Verwey-Jonker Institute undertook a stakeholder mapping. The objective was to establish a database of key stakeholders, serving as the basis for selecting target services for the PROMISE project. In this chapter we give a summary of the results. First we describe the procedure of the stakeholder mapping followed by an analysis of the main results.

1.1 *The procedure of the stakeholder mapping*

The objective of the stakeholder mapping was:

to map relevant models like, or similar to the Barnahus (Children's House) framework for child victims of violence across Europe.

The researchers wanted to get an overview of the various international MD/IA models or Formally Organized Structures (FOS) and the way they work. They started with drafting an online questionnaire. Before sending it out, several experts in the field (child psychologists and managers of institutions dealing with child abuse) were asked for feedback. After some adjustments the questionnaire was uploaded in the computer based programme NetQuest. The questions were drafted to get initial information on formally organized structures in this area and on aspects like: *what is their main focus, whom are working there, how do they cooperate, are they led by laws and regulations, do they receive government funding and if there are assessment(s) tool available.*

Letters and links to the questionnaire have been sent to contacts in 25 countries, and most of the time to both government representatives as well as child abuse centres / services / structures. 24 filled in questionnaires were received on January, 25th 2016. After that a few more came in. The main outcomes of these 24 answered questionnaires were presented at the first PROMISE expert meeting in Zagreb on February, 3th 2016. The countries the researchers received information from are: Bulgaria, Croatia, Cyprus, Estonia, Finland, Hungary (2), Iceland, Latvia, Lithuania, Malta, Netherlands (2), Poland, Romania, Slovakia (2), Spain, Sweden (2), UK. The organisations were either government representatives, NGO's, hospitals or institutions. They are all active in the field of child abuse, child neglect, domestic violence, sexual abuse, and so on.

1.2 *The results of the stakeholder mapping*

Most Formally Organised Structures (FOS) strive towards a multidisciplinary team. It differs per country what kind of additional professionals/services are active in a FOS (on top of the various professions mentioned in the questionnaire).

Services provided by FOS

'Social work activities' is the service most offered by FOS (78,3%). 'Mental health examination' comes in second place (60,9%). The service mentioned the least is 'criminal investigation'. This answer was given by 21,7% of the participants. It was also answered that forensic interviewing is only offered by 9 of the 23 FOS. Medical evaluation is mentioned in 10 of the 23 FOS's in the form of medical treatment.

Violence types

We asked the participants if they can tell us what kind of violence is addressed by the work in their FOS. Almost all FOS focus on sexual abuse. This is mentioned by 95,7% of the participants (22 of 23).

The FOS's focus also on other forms of violence, this includes: child abuse and physical abuse exploitation (both 91,3%) and domestic violence & 'peer abuse (both 82,6%). The work of the FOS does not concentrate so much on child neglect. Additional forms of abuse that were mentioned by the various FOS are honor-related threat, female genital mutilation, abandoned children, children who are witnesses of violence between parents, cyber bullying, child marriage & substance abuse.

Target groups

Child victims of violence is the biggest target group for the different FOS's (87%). The second largest target group is 'parents'(82,6%). Furthermore, the participants also indicated that their FOS is aimed at: adolescents, victims of domestic violence, human trafficking, children who commit crimes and children in residential care.

Funding

22 participants answered the question if they receive government or other funding to fulfil their tasks. 59,1% (13 out of 22) receives government or other funding. 17,1% get other forms of funding. Some do not get funding at all.

Professionals in the FOS

Based on the quantitative analysis it seems that 'therapeutic staff' is the most frequent form of professional service in the FOS's of the different countries. This option was selected by 83,3% of the participants. The second most mentioned form of professional service is 'social services', with 75%. The service that is mentioned the least is 'judges', only 33.3% of the participants says that judges are part of FOS. Additionally, 45,8% indicates that 'forensic medicine', 'prosecutors' & 'police' are represented within the FOS. Other professionals and/or services that were mentioned are: educational psychologists, schools, special educators, social workers, speech therapists, sociologists & volunteers.

Child friendly practices

Most FOS have child friendly procedures, such as:

- a child friendly environment;
- located in a residential area;
- an interior that is designed to maximize the child's comfort e.g. by toys, pictures and selection of colours.

Sometimes other child friendly practices were mentioned:

- a special child friendly location where all the investigations (including forensic interview and forensic examination) can take place
- recording of interviews
- using standards of the APSAC interview when a psychologist is doing the interview and/or that the police has a comparable interview dealing with criminal law situations.
- well trained staff in the approach on child abuse and neglect and on trauma evaluation.

Laws & regulations

Participants were asked if there are national laws or policies in place in their country that oblige specifically the existence of formally organized structures providing services to child victims and witnesses of violence. About half of the group answered 'yes', the other answered 'no'. Another question that has been presented to the participants is *What is exactly obliged by law or further regulations?* Again, the participants gave different answers to this question. To give some insight in the types of the answers, we would like to present some examples below.

The Barnahus Stockholm (BS) explains that all professionals working with children are mandatory to report to social services if they think a child is at risk. Additionally, the authorities are obliged to cooperate and to share relevant information in cases of child abuse. CPS (social service) in their turn, are obliged to investigate all cases where child abuse is suspected.

The Ministry of Social Security and Labour (MSSL) in Lithuania. Based on the information given by the MSSL, it appears that in Lithuania there are work restrictions for persons found guilty of the crimes against children's sexual independence and integrity. Families who abuse alcohol or psychotropic substances or due to the lack of social skills are incapable of properly caring for and supervising the child are included in the Register of Social Risk Families with Children according to their place of residence by the order of the director of the municipal administration upon the recommendation of Child Rights Protection offices. The Child Rights Protection offices ensure the child rights protection and the implementation and supervision of laws and regulations that regulate the child rights protection.

The Hospital Infantil Universitario Nino Jesus from Spain. Spain tells us that different codes are used, such as the Penal Code, the Civil Code, the Criminal Procedure Act, etc. required to notify, attend, protect.

In the Netherlands it was answered that there is a Code that stimulates citizens and professionals to inform the reporting centre for child abuse cases 'Veilig Thuis' (Home safely) when there is suspicion of child abuse or neglect.

NARUC from Slovakia: the Slovak legislation includes mandatory reporting of child abuse and neglect (Law No. 300/2005 (Penal Code, § 340 includes mandatory reporting), but wording of the law makes it possible to avoid the mandatory reporting in most cases. This results in a very low rate of reporting cases of child abuse. There exist also internal directives for physicians, teachers and other professionals that oblige them to report when they suspect or know of abusive or neglectful situations. Their report may be sent to either the child protection services or a law enforcement agency (police, prosecutor). Nevertheless, these directives are very often avoided too.

The legislation and/or other regulations in Slovakia does not support multidisciplinary collaboration in cases of child abuse, whether on the basis of formal protocols or other instruments.

2 *The formally organized structures*

We asked the respondents to give a short description about the mission, primary goals and way of working of their formally organized structure. In this chapter, we call out the answers.

2.1 *Belgium: Belgium: Confidential CAN Centre*

The ‘Confidential CAN Centre’ (Vertrouwenscentrum Kindermishandeling) is a multidisciplinary centre for help and assistance in cases of suspected child abuse, - neglect or sexual abuse (CAN). The Centre is acknowledged by the Flemish Government (Welfare Department). Everybody who is concerned about the possibility that a child is victim of CAN can report it. Each report is considered confidential information and the anonymity of the report can, if necessary, be guaranteed. Help is free and preferably offered without any judicial intervention.

2.2 *Bulgaria: Social Activities And Practices Institute - SAPI*

“ We are a Bulgarian NGO that combines the efforts of professionals in the social sphere - social workers, psychologists, university professors, etc. for the development of modern social work in Bulgaria, particularly in the field of protection of children and families at risk. We are an NGO that already 15 years has been working for the professionalization of social work with children and families in Bulgaria. We organize our activities in four programs „Social Services for Children and Families“, „Children and Justice - Prevention of Abuse“, „Trainings“, and „Methodological Support and Research“. Within the first one, the Institute provides social services to vulnerable individuals, groups and communities via the social complexes and centers its manages in the cities of Sofia, Shoumen, Vidin, Montana, Stara Zagora and Sliven. The Program „Children and Justice - Prevention of Abuse“ encourages the development of policies supporting children victims of abuse, victims or witnesses of crimes, perpetrators, as well as the development of justice provision, adapted to the needs of the children. Thanks to the support of the Oak Foundation and the partnership with the Nobody’s Children in 2008 we began the development of a new practice of participation of children in legal procedures, based on their rights and protecting their best interest. The first three child-friendly interviewing facilities (s.c. in Bulgaria blue rooms) was opened in Bulgaria by SAPI in the period 2008/2009, along with the trainings of a team specialized to assist interrogations of children. The first trainers were from Poland, England and Scotland. Later we continued to invite experts from France, Finland, Belgium.

Now in Bulgaria we have 14 specialized child-friendly interviewing facilities that provide a friendly atmosphere, safe environment, contact with the interrogated through a mirror, video records. 9 of these rooms are created by SAPI, 2 by UNICEF-Bulgaria. They are located in social services buildings where a wide range of services is offered - shelter, emotional support, questioning, and therapy. Trained representatives of different institutions and authorities throughout the country; for almost five years we provide trainings for police officers, judges and prosecutors at the National Institute of Justice and the Police Academy”

2.3 Croatia: Child Protection Centre of Zagreb

The Child Protection Centre of Zagreb is a health care institution (basic health care insurance in Croatia is mandatory and provided by the state), aiming to provide effective and systematic support of traumatized children and their families. The work of the Center is based on a multidisciplinary approach and strong cooperation between institutions within the child protection system (which includes the nongovernmental sector), as well as implementation of empirically based practices (such as forensic interview protocols and trauma focused forms of treatment) and child friendly practices. The Centre also provides training for students and professionals in Croatia and throughout the region. A main challenge for the Centre is to establish closer cooperation with the justice system, including being supported by necessary child-friendly procedures and practices. The Centre also strongly emphasizes partnership with the media in achieving child protection.

2.4 Cyprus: Social Welfare Services

The Social Welfare Services aim to safeguard social cohesion and social solidarity through social support to families, vulnerable individuals and communities. In order to achieve the above-mentioned goals the Social Welfare Services, among others,

- provide support to the family unit so family members may effectively perform their role;
- support families and individuals who are facing social problems;
- provide protection and care to children (including foster care and residential care) and other vulnerable groups of people;
- sensitize non-governmental organizations and local authorities to provide quality social services on the local level.

2.5 Estonia: Children's Mental Health Centre

Children's Mental Health Centre's mission is to provide North-Estonia with a children's mental health centre and by coordinating, training and supervising the network of mental health centres, it will also improve mental health services in other regions of Estonia. The centre will serve as a pilot case of an integrated system and services to other sectors. It also focused on developing a concept of child abuse diagnostics system for Estonia, forming and training an outreach team.

2.6 Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot 2014-2016

Finland has had a set of Forensic Child and Adolescent Psychiatry units since 2008. The units operate in University hospitals in 5 districts. The units investigate reports of sexual abuse and/or assault upon request for assistance from the police or prosecutor in cases of young and/or children with special needs. They do intensive forensic interviewing and case-analyses.

2.7 Germany: World Childhood Foundation

The World Childhood Foundation acts as a liaison between donors and community-based organizations and is presently supporting over 100 projects located in 16 countries. They identify, review and support existing projects as well as new initiatives and efforts that are aligned with the mission; to defend the rights of children and to promote better living conditions for vulnerable and exploited children at risk all over the world. The target groups are children who are victims of abuse, street children, child-

ren in alternative care and families at risk. “ And we stimulate, promote and develop supportive environments and solutions to prevent sexual abuse, exploitation and violence against children” .

2.8 Hungary: ESZTER Foundation

ESZTER Foundation is a public benefit foundation, established in 1991. ESZTER Foundation’s mission is to provide psychotherapeutic treatment and social support to victims of violent sexual crimes, to promote their legal protection, to prevent such crimes and to support law enforcement. From the very beginnings, one of the Foundation’s main goals was to establish and operate a centre which provides help - primarily in the form of psychological rehabilitation and legal counselling - to victims of violence, while also organising and coordinating other (child protection, social, educational, etc.) activities. Since 1994, the main activity of ESZTER Foundation has been the operation of ESZTER Centre. Besides providing the services of the Centre, the Foundation also carries out a number of other tasks related to helping the victims of sexual assault and domestic violence, such as organising campaigns, conducting research, releasing publications and participating in international as well as domestic projects, in order to develop the professional work required to support victims.

2.9 Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider

Public Benefit Association of Social Service Provider was established in 2008 by the employees of the Family Support and Child Welfare Services in Szombathely. The aim of this organization is to improve the social status and quality of life of the people live in Vas County. Following this roles: the organization provides information about the social and child protection services availability in the county, supporting those who need help, families, elderly people, youth in connection with their wellbeing, mental health, life-counselling, housing, support minority people in the same field living in segregation, cooperates with authorities and other service providers to enhance the support of the vulnerable groups. Promoting programmes in connection with protecting and supporting the victims of violence, and organize training for adults about the prevention of abuse and neglect.

2.10 Iceland: Barnahus

Barnahus (which literally means Children’s house) is a child-friendly, interdisciplinary and multiagency centre whereby different professionals work under one roof in investigating suspected child sexual abuse cases and providing appropriate support for child victims in line with the Children Advocacy Centre model. The basic concept of Barnahus is to avoid subjecting the child to repeated interviews by many agencies in different locations, including the courtroom, if an indictment is made. Research has shown that when this happens, it can be very traumatic for the child. Another aim of the Children’s house is to provide a child friendly environment for investigative interviews which reduces the level of anxiety of the child which in turn is crucial for successfully eliciting the child’s disclosure.

2.11 Latvia: Establishment Centre Dardedze, NGO

Centre Dardedze is non-governmental organization founded in 2001, with the aim to protect children from abuse.

Vision: Every child in Latvia is loved, protected, respected and cared for living in a safe environment free from all forms of violence or abuse.

Mission: To provide and implement programs and services that educate society (children, young people, parents, families, professionals and society in large), provide adequate support to victims of abuse and promote understanding that prevents all forms of child abuse in Latvia and region.

Three directions of the work:

1. Counselling sessions for children and families faced with abuse, as well as provide support to every family with children. In cooperation with State police we also provide child interviews in criminal proceedings in the cases when interview takes place with the aid of technical means in the presence of a psychologist.
2. Develop and implement preventive programs to protect children from abuse;
3. Perform researches, analyse legislation, do the advocacy work, gather experience and latest techniques, develop publications, provide trainings for professionals and promote children's participation in decision-making

2.12 Latvia: Ministry of Welfare

The Ministry of Welfare is the leading state administration institution in the field of employment, social protection, protection of the rights of the child, children and family rights, as well as equal rights for persons with a disability and gender equality.

The mission of the ministry is to stabilize the situation of a person at risk, diminish the possibility of setting in of a social risk, and promote fair legal relations in employment, healthy and safe work conditions, gender equality thus enabling every individual to be able to ensure adequate quality of life by herself/himself. Ministry's work is concentrated on the four main courses of action:

1. compensation of losses of income and of additional expenses for a person in case of the setting in of a social risk; the main assignments are: to ensure restitution of income when retiring, during incapacity of work, in case of a disability, maternity, illness and unemployment; to ensure functioning and development of the state social insurance system;
2. financial support to certain groups of people; main assignment in this field: to improve material situation of families with children, persons with disability, seniors, children who have lost their supporters and of persons who were members of the elimination of the aftermath of the disaster at the Chernobyl Nuclear Power Plant;
3. activities for the provision and implementation of social rights; the main assignments in relation to that are: to increase the competitiveness and quality of work force, decrease unemployment; ensure the rights of the employed and legal, safe and harmless to health work environment as well as to decrease illegal employment; ensure professionally provided and qualitative social services and social assistance;
4. policy planning in the policy sector and monitoring of its implementation; the main assignment: to plan and implement effective policy which is oriented on the results.

The Ministry of Welfare is responsible institution, which ensures the implementation of activities co-funded by the European Union funds. In the field of welfare both support from the European Social Fund and European Regional Development Fund are available.

The Ministry of Welfare operates in accordance to the Law on State Administration Structure Law and the Bylaw of the Ministry of Welfare. The policy priorities of the Ministry of Welfare are defined in accordance of the Declaration of the planned actions of the Cabinet of Ministers as well as according to the policy planning documents developed by the ministry.

2.13 Lithuania: A Help Centre for children, who were victims of sexual abuse

The project is funded from the European Economic Area Financial mechanism and Lithuanian budget, together with a partner - Government Agency for Child Protection in Iceland "Barnaverndarstofa". When implementing the project, the care home for children and mothers "Užuovėja" wants to establish an institution of specialized complex services in Lithuania, which would be meant for children,

who were victims of sexual abuse and sexual exploitation as well as for their family members, at the same time ensuring the coordinated inter-agency cooperation. The centre will provide different kinds of help (psychological, social, legal and medical). The house will be opened in April, 2016.

2.14 Lithuania: Republic of Lithuania Ministry of Social security and Labour

The Ministry of Social Security and Labour (hereinafter - the Ministry) pursued international commitments to implement the provisions of the Council of Europe Convention on the Protection of Children against Sexual Abuse. The Ministry has been implementing the project "Establishing of the Support Centre for Child Victims of Sexual Abuse) of the 2009-2016 European Economic Area Financial Mechanisms. The project is implemented by the child and mother care home "Uzuoveja". Seeking to implement Directive 2011/93/EU of the European Parliament and of the Council of 3 December 2011 on combating sexual abuse and sexual exploitation of Children, and child pornography replacing the Council Framework Decision 2004/68/JHA, the Seimas (the Parliament of Lithuania) passed the Law Amending Articles 1, 43 and 47 of the Republic of Lithuania Law on Fundamentals of Protection of the Rights of the Child No. I-1234 and Supplementing the Law with Article 57-1 and Annex prepared by the Ministry.

2.15 Malta: Foundation for Social Welfare Services

'The Foundation for Social Welfare Services was established on the 24th March 1998, with responsibility in the fields of social services, inter alia, the agencies of the said Foundation in relation to the work of Aġenzija Sedqa and Aġenzija Appoġġ. In 2001, Aġenzija Sapport, formerly known as Supported Living Division, has also been incorporated within the spectrum of the Foundation.

Agency Appogg, in particular, comprises over 30 services, all focusing on children, families and adults in vulnerable situations and/or at risk of social exclusion, and communities. In line with Government policy the Agency offers services to:

- support and work with families and/or individuals at risk of poverty and social exclusion to empower them to attain the best quality of life;
- protect and support children and young persons who are being abused and/or are at risk of abuse;
- be a voice for children and advocate for their rights;
- support children and young persons who are living in out of home care and work towards their re-integration with their families when this is indicated in their best interest;
- provide permanent alternative family based care when re-integration is not possible;- recruit, train, assess and support alternative care providers for children and young persons who need to be removed from their own family environment;
- support and assist adults, young persons and children who are in vulnerable situations and whose needs can be met through the services currently offered by the Agency;- support the therapeutic process with such identified persons;- empower and support families in their needs, with particular emphasis on their parenting role, so as to promote a healthy living environment for children and families;- support and work with families and/or individuals at risk of poverty and social exclusion to empower them to attain the best quality of life;- work on enhancing community networks to support families and individuals within their environment with special emphasis on those at risk of poverty and/or social exclusion;- network with stakeholders involved in supporting vulnerable children, families and communities to create a continuum of services to maximise an active participation of service users in society;- promote and implement a zero tolerance to domestic violence and all other forms of abuse, violence and/or exploitation;- raise awareness on various social issues in particular those addressed by the Agency's services;- make efficient use of available resources to work towards helping service users gain access to services in a timely manner;- work towards efficient and effective services at all levels of intervention - enhance intra-agency communication and collaboration to ensure best quality services; - create an environment conducive to best practices; advocate for the resources necessary to provide the Agency's services.

2.16 The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)

PROMISE partner KENTER has the MDCK in Hoofddorp. This is a Barnahus-like Multidisciplinary Center on Child Maltreatment. MDCK Kenter and Fier (in Leeuwarden) are the two initiatives in the Netherlands that initially embraced in the Netherlands the Child Advocacy Centre (CAC)-approach from USA. MDCK Kenter is stakeholder and PROMISE intermediate for all Netherlands Multidisciplinary Interagency Service initiatives that are working on becoming a Child Friendly Center or Barnahus and Fier is partner in that process. MDCK is the first Netherlands Child Friendly Center establishing all “Barnahus criteria”, including offering one single location for its services (instead of multi agency cooperation on different locations). At the centre functions everyday an inter-sectoral team, consisting of specialists in medical care (paediatrician), the juridical system (police officer, sometimes prosecutor), the child care system (including safe at home workers, therapists and so on) and the adult and forensic psychiatry. They can immediately take care in cases of acute or structural insecurity of the child, they can investigate the situation and can give therapy and accompaniment to the child and the whole system around the child (www.mdck.nl). One team of professionals under one roof!

2.17 The Netherlands: Stichting Fier

MDCK Kenter and Fier (in Leeuwarden) are the two initiatives in the Netherlands that initially embraced in the Netherlands the Child Advocacy Centre (CAC)-approach from USA. MDCK Kenter is stakeholder and PROMISE intermediate for all Netherlands Multidisciplinary Interagency Service initiatives that are working on becoming a Child Friendly Center or Barnahus and Fier is partner in that process.

‘Fier is an expert and treatment centre in the field of violence in dependent relationships. Our aims are: prevention of violence, ending violence and helping victims with the consequences of violence. We focus on all those involved in violence: boys and girls, men and women, perpetrators, victims and witnesses of violence (often children). We focus everyone aged from 9 months to 99 years. Our approach involves the whole system around the victim. Besides support of victims, we strive to have a leading position in our field of expertise. Therefore we conduct research and work on innovations. We also ask for social and political attention for the various forms of violence in dependent relationships, such as lover boys, (inter)national trafficking, honour-related violence, child abuse, domestic violence, and abuse of elderly people.’

2.18 Poland: Nobody's Children Foundation

‘The Nobody's Children Foundation exists to ensure a safe childhood to every child. We protect children from abuse and help child victims. We carry out our mission by:

- Teaching adults how to treat children without abuse;
- Showing them what to do when they suspect a child might have been abused;
- Teaching children how to avoid violence and abuse;
- Offering psychological and legal help to abused children and their caregivers;
- Lobbying for modifications of the Polish law to ensure the best possible protection of children's interests’.

2.19 Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)

- NAPCR works with World Vision on establishing Barnahus in Romania
- Subordinated to Ministry of Labour, Family, Social Protection and Elderly. The mission of the NAPRCA is to monitor the observance of all children's rights and to take all measures contributing to the foundation of a dignified society for children, engaging in this process central and local

public authorities, civil society, parents and children. The duties of the NAPRCA are in the field of protection and promotion of children's rights:

- Prepares draft legislation in the field of protection and promotion of children's rights,
- Ensures follow-up and harmonious application of the legislation in the field of protection and promotion of children's rights,
- Identifies the professional training requirements of staff involved in the protection and promotion of children's rights and works with other private,
- Public institutions and other organisations for underpinning and drawing up programmes to meet these requirements,
- Keeps track at national level of all associations, foundations and federations working in its activity field,
- As well as of the services rendered by them, proposes that the Government recognize them as being of public use, under the terms of the law, takes the necessary measures or, where appropriate, proposes the necessary actions to be taken by competent authorities or institutions in order to prevent or, where appropriate, to eliminate the effects of any acts or deeds which infringe the principles and rules of the international treaties in the field of children's rights, to which Romania is party, with the approval of the Minister for Labour, Family, Social Protection and Elderly and with the Government mandate, initiates, negotiates and concludes international cooperation documents in the field of the protection and promotion of children's rights.

2.20 Romania: World Vision

World Vision works with NAPCR on establishing Barnahus in Romania.

'World Vision is a Christian humanitarian organization dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. Working in nearly 100 countries around the world, World Vision serves all people, regardless of religion, race, ethnicity, or gender. Child well-being in rural areas is the organization's focus in Romania. World Vision Romania aims to change mentalities regarding community involvement in the children's lives based on child protection concepts. World Vision believes the best way to improve children's lives is through child-focused development. We work with communities and children through a range of programmes that promote change and improve their well-being. World Vision's development work aims to ensure that children:

CHILDREN ENJOYING GOOD HEALTH

Dedicated to promoting child well-being in the communities where it works, World Vision Romania strives to improve health through projects targeting both children and parents. Through different educational activities and awareness campaigns, children and adults learn about basic hygiene, about how to protect themselves from diseases and substance abuse, reduce discrimination and offer support to those who are suffering. Also, several hundreds of pregnant women and young mothers are learning how to better care for their children through World Vision health activities.

CHILDREN EDUCATED FOR LIFE

At the beginning of 2001, hundreds of children from vulnerable rural families were given the chance to make their dream of continuing their education a reality. Through different scholarship projects, children were able to finish high school while also benefiting from educational seminars and social activities designed to help them adjust to living in an urban environment. Also, thousands of other children were able to both enrich their knowledge and find new creative, positive ways to spend their free time as part of different kids clubs set up in rural communities across the country.

CHILDREN CARED FOR, PROTECTED AND PARTICIPATING

Through different projects and initiatives more and more children and youth are learning about their rights and responsibilities - both as children and as community members - and are encouraged to express themselves in different ways (through seminars and workshops with different topics - advocacy photography, volunteering etc.)

High school students, especially beneficiaries of the scholarship projects, are proving to be inspired by what World Vision was able to do for them and are excited to get involved and give back some of what they received. Already, they have designed and organised different campaigns (book or toy raising campaigns, clown shows for younger children etc.) to the benefit of rural communities and are gradually being transformed from beneficiaries into contributing volunteers.

World Vision Romania offers services to children and parents all over Romania, especially in rural areas. The services offered are multidisciplinary and differ locally. With the support of National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA) World Vision Romania is broadening its services in order to become a Barnahus-like Service Initiative.

2.21 Scotland: Stop to listen

'My project Stop to Listen is part of a national Children's Charity in Scotland. Stop to Listen has a multi-agency steering group made up of representatives of senior managers and chaired by the Assistant Chief Constable Police Scotland. The aim of Stop to Listen is to develop and improve service responses to child sexual abuse and exploitation. This can be achieved in a number of ways:

- By targeting prevention and early identification of need - slowing down the pace of how we work with children and young people, and involve them and their families in the decisions that affect them
 - Make our processes to protect children genuinely child-centred and child-friendly; Work in close collaboration across agencies
 - Improve staff knowledge, skills, confidence and provide them with excellent support to work with sexual abuse and exploitation;
 - Provide high-quality trauma and recovery services
- Four pathfinder local authority areas have been identified to test out changes to practice, culture and processes. Local stakeholders will work with the development manager to identify what areas they would like to improve, identify resources, data collection and evaluation.

2.22 Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children (based at the Ministry of Labour, Social Affairs and Family of the Slovak Republic)

In January 2014, the government of the Slovak Republic adopted a resolution that incorporates establishment of the National Coordination Centre for Resolving the Issues of Violence against Children. The Centre coordinates implementation of the National Strategy for Protection of Children from Violence which is a fundamental and interdepartmental strategic document aiming to achieve a qualitative change in the perception of and solutions to violence against children by networking and integration of sectorial policies and institutional entities. Within the scope of the Strategy, the Centre cooperates with ministries, regional and local self-government, non-governmental organisations, other institutions and experts in the field. Furthermore, the Centre coordinates implementation of the UN Convention on the Rights of the Child in the Slovak Republic and respective reporting procedures.

2.23 Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze

"Child Advocacy Centre (CAC) is a new program of our organization. We are just about to open CAC (March 2016). To build CAC, we received financial support from the Velux Foundation for the period of 4 years (January 2016 - December 2019). We collaborate with The National Focal Point for the Issues of Violence against Children/= National Coordination Centre for Resolving the Issues of Violence against Children (founded at the end of 2014, <http://detstvobeznasilia.gov.sk/en/>), as well as with the representatives of relevant institutions at national, regional and local levels. In our CAC we plan to use our experience gained over years of working with child victims of abuse and neglect. Naruc provides help and support to abused children, women and families at risk of domestic violence since 1997. In

our Naruc Child Crisis we provide comprehensive residential services to at-risk children and their families. We also run a program for the victims of domestic violence (2 advisory centres in the cities of Zilina and Cadca). As child advocates we protect the rights and interests of abused and neglected children. Through our preventive and education activities we teach children how to protect themselves from violence and train professionals working with and for children. www.naruc.sk

2.24 Spain: Menor Hospital Infantil Universitario Niño Jesus

University Children's Hospital "Baby Jesus" of Madrid, is a public institution of the Madrid Health Service, which provides health services specialized in the specialty of Pediatrics and Specific Areas, pediatric patients (aged 0-18 years) of the Community Madrid and all regions, in line with current regulations and legislation. The commitments are: The provision of quality pediatric care oriented health outcomes. The specialized medical training. Biomedical research with national and international recognition. View: ' We want to be and recognize us as a referral center for pediatric care, which aims to be: High quality. Efficient and effective. Safe for the patient. Ethical, professional and responsible. Coordinated with the different levels of care. We want to be a center of excellence in biomedical research, with a high technological and innovative development in the search results. We want to have the best professionals, close to the citizens and contribute to the rational use of medicine and resources available through clinical care and training aimed at continuous improvement. We want to remain the first hospital of choice for the training of resident physicians in the specialty of Pediatrics and their specific areas'. Values: 'We are professionals who offer children (pediatric patients) comprehensive care, taking care of their family and leisure environment during their stay in the hospital, and oriented to the protection of their rights as children and detection of possible ill treatment in all our activities . Integration and respect for different cultures, habits and backgrounds of citizens. Maximum confidentiality and efficiency in the patient-physician-hospital relationship. Participation and integration of all professionals and employees of the organization. Commitment to educate and assist citizens in all health-related issues. Commitment to provide high quality training to health specialists'. (http://www.madrid.org/cs/Satellite?cid=1142460182687&language=es&pagename=HospitalNinoJesus%2FPpage%2FHNIJ_contenidoFinal)

2.25 Sweden: Barnahus Linköping

Barnahus Linköping is a multidisciplinary and interagency service between public prosecutor, police, social services in nine municipalities, Child- and Adolescent psychiatry and forensic medicine. The basic idea is that children should not have to go to the police station to be interviewed, to the hospital for a Medical examination and for example Child- and Adolescent Psychiatry for crisis support. The Children instead go to one Place, specially adapted for Children. Barnahus Linköping provide joint consultation meetings, forensic interviews, Medical examinations and crisis support. We also provide trauma focused assessments, information meetings for parents (and eventually children) and combined parent child cognitive behavioural therapy. The collaboration agreement also includes spreading knowledge about physical and sexual abuse against Children

2.26 Sweden: Barnahus Stockholm

The purpose is that children who are victims of crimes concerning physical and sexual abuse shall get the best possible, professional and coherent treatment, experience and support, both regarding the psychosocial and the legal process. Another purpose is to prevent more damages to victimized children.

2.27 United Kingdom: NHS England - London

NHS England (London) commissions specialist health services including sexual assault referral centres. Mayor's Office of Police and Crime (MOPAC) commissions victim services in London including rape centres. HS England(London) and MOPAC commissioned a review of child sexual abuse in London in 2014. The review found gaps in the reporting and support of victims and in 2015 recommended the Barnahus model for London. Since then a programme of implementation has commenced across London involving health, social care, police, judicial and voluntary agencies.

The implementation is in progress and working towards setting up hubs of child sexual abuse/exploitation services during 2016/17 in five sectors in London. At the same time funding is being sourced to set up Child Houses based on the Barnahus model in London. Multiple government agencies are supportive in principle of the model including Ministry of Justice, Department of Health, Crown Prosecution Service, Metropolitan Police.

3 *Overview Tables by formally organized structure*

In the overview tables in this and the next chapter the answers of the respondents on the key elements of their formally organized structure are reproduced. In these tables, also information from Germany, Scotland and another initiative from Romania is involved. These three were not involved in the analysis of the results because the questionnaires were filled in after the deadline. From some other formally organized structures, we received updated information after the deadline. This information is also put in the tables but also not analysed in the results as described above. The researchers didn't get a reaction from Ireland, Denmark, Greece, Luxembourg, Portugal and Slovenia, though they repeatedly asked them to fill in the questionnaire. They are therefore excluded in the analyses of these PROMISE stake holder mapping. The answers are reproduced in tables on the following categories:

List of used categories

- Contact person
- Collaboration other actors
- Professionals / services represented
- Staff educated/trained
- Kind of violence addressed
- Works with
- Services provided
- Steps taken in the fact finding practice / the assessment / diagnostics
- Child friendly practices used
- Activities aiming at prevention of child abuse/neglect
- Follow up after treatment/aftercare policy
- Government funding
- Tools used to assess the quality of (policy) service
- National laws/policies that oblige the existence of FOS
- Obligated by law or further regulations
- Other relevant information
- Other multi-agency/multi-disciplinary structures

Related to the answers on the questions (see appendix). In this chapter the tables are represented by initiative. In the next chapter by category.

3.1 Belgium: Confidential CAN Center

Contact person

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Collaboration other actors

“Integrated Youth Care” is the Flemish framework in which several services working with minors are involved, collaborate and share information. In some case it is also possible for information exchange and joint case management with legal services

Professionals / services represented

- Social services
- psychologists
- educational scientists
- doctors

Staff educated/trained

Yes, therapeutic (systemic point of view) and forensic (confidential doctors)

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Domestic violence
- Sexual abuse

Works with

- Child protection assessment
- Medical examination and treatment
- Social work activities

Services provided

- Child Protection Assessment
- Medical examination and treatment
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

n.a.

Child friendly practices used

n.a.

Activities aiming at prevention of child abuse/neglect

N/A

Follow up after treatment/aftercare policy

N/A

Government funding

Yes

Tools used to assess the quality of (policy) service

N/A

National laws/policies that oblige the existence of FOS

N/A

Obligated by law or further regulations

N/A

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

N/A

3.2 Bulgaria: SAPI

Contact person

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Collaboration other actors

Based on the National Agreement for action in case of violence against a child, when a signal is registered a working meeting on local level is carried out up to 24 hours after the signal. No later than one hour after the signal an examination of the case is launch by the Department of Child Protection /DCP/ that manages the case. In the six cities in which we operate we are members of the working group and, usually, immediately at the first meeting we start with information on the rights and the assessment of the child and the family. The assessment is done according to an agreed framework. The assessment is a process and starts with an initial assessment, which shows the needs for protection, medical treatment, willingness to participate in legal proceedings and needs for special measures of protection as friendly environment, interviewing by specially trained psychologist or social worker based on special

methodology (protocol), etc. The assessment continues with identifying the needs for psychotherapy and social support of the child and the family.

Professionals / services represented

- Social services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry - on request of the prosecutor or the court
- Prosecutors
- Police
- Lawyers
- Judges

Staff educated/trained

Yes

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
- Other,, interviewing children; social case work; resilience; therapeutic approach;
- systematic approach in work with families; conducting group work and therapeutic workshops

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Forensic interviewing
- Medical examination and treatment
- Social Work activities

Steps taken in the fact finding practice / the assessment / diagnostics

“ Usually we start the work with informing the child and / or the family and/or the representative about the rights related to the particular situation, depending on who sends the case and at what stage it is. The next step is to assess the child’s needs and to plan the activi-

ties for support, work with the family, etc. We make a review of the case together with the client and the DCP representatives” .

Child friendly practices used

“ We ensure special trained staff , child friendly environment, recording of interviews, psychotherapy. When interviewing we use an Adaptation of the Protocol on the questioning of children, which was developed by the National Institute of Child Health and Human Development in the USA. This adaptation is made by a PhD in law and psychology Thomas Lyon, and it is known as 10-steps methodology for children interrogation” .

Activities aiming at prevention of child abuse/neglect

We do campaigns against child abuse, conduct outreach activities to inform the public about the consequences of violence against children. We do trainings for parents, teachers, social workers, doctors and others professionals in recognizing the signs of violence, for better treatment of children, good parenting.

Follow up after treatment/aftercare policy

We try to support the child and family in the long term, but there are not reliable tools to track the case after its closure bu the DCP

Government funding

The social services we provided to the municipalities are financed by the state budget. The local authorities outsource the services to an NGO or other private provider. Thus we manage centers for social services in six cities. We attract additional funding within projects from private donors, European and national programs. The practice of child- friendly justice, which we have developed since2007 is fully financed within projects. We have created 9 specialized rooms for interviewing children and we have cooperated for 5 more. Currently, with the support of UNICEF Bulgaria we pilot in Bulgaria Child Centres for Advocacy and Support “Protection Zone”; it assists children victims of abuse and their families In the Centres a specialized approach is introduced, and the services provided to the children combine legislative, medical, psychological, therapeutic, and social services with child-friendly procedures and environment.

Tools used to assess the quality of (policy) service

We have developed our own system for monitoring and assessment of the service quality. There are Standards for social services quality that are monitored and assessed by the SACP

National laws/policies that oblige the existence of FOS

N/A

Obligated by law or further regulations

In the Criminal Procedure Code it is provided the compulsory participation of a psychologist or a pedagogue in the interrogation of children under 14, which allows the inclusion of our trained specialists. The law also gives the possibility the hearing to be carried out at a neutral location. Currently, changes in the Criminal Procedure Code are in a process in connection with the transposition of Directive 2012/29 for minimum standards to protect victims of crime and there is a chance our pilot practice to become national.

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

Since 2014 SAPI has been implementing the "Listen to the child - Justice befriends the child" Project, which contributes to meeting the requirements of Article 22 of the Directive in respect of implementing an integrated approach to working with child victims of crimes based on an individual needs assessment. The integrated approach includes best practices for making an individual assessment and a model of a protocol for local cooperation and interinstitutional coordination in cases of crimes against children. This integrated model is based on good practices from 6 European countries and is being piloted in Bulgaria, and this will serve to improve the practice in the other partner countries under the project: France, Romania, Italy. In Bulgaria the model will be piloted under the project in one municipality and will serve as a model for changing the practice at national level. Under the currently implemented project "Listen to the child - Justice befriends the child" it is envisaged to develop a training program and to elaborate a protocol for local cooperation when working on cases of child victims of crime.

3.3 Croatia: *Child Protection Centre of Zagreb*

Contact person

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Collaboration other actors

The work of the Center is based on the understanding that effective child protection can be achieved only through collaboration between different institutions of the child protection system. This is achieved through:

- exchanging information with institutions involved in the individual case (e.g. educational institutions, residential care facilities, social services, police)
- reporting violations of children's rights to relevant institutions (e.g. social services, police, state attorney) - in Croatia reporting is mandatory and
- developing specific recommendations for educational institutions, with the aim of
- supporting the adjustment of the child following national protocols which determine a standardized procedure in protecting child victims and witnesses for all authorities and institutions involved conducting forensic interviews within clinical assessments, and sharing information obtained in the interviews with relevant institutions (all of the Center's professionals working with children are trained in forensic interviewing)
- conducting forensic evaluations at the order of the court, done by specially trained professionals
- collaboration with judges during the court proceedings - encouraging judges to conduct forensic interviews on the Center's premises with a specially trained expert interviewing the child, respecting the child's age, developmental level, emotional state and characteristics of the child, with an aim of reducing the risk of retraumatization due to repeated interviews in multiple settings. The child is being interviewed in one room, with all involved parties observing the interview from another room connected via video link, that can ask questions through the Center's expert. Besides interagency collaboration, the work of the Center includes intraag-

ency cooperation, with regular information exchange, joint case management and planning, multidisciplinary team meetings and work supervision

Professionals / services represented

- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Lawyers
- Paediatrician
- Speech therapist

Staff educated/trained

The professionals working at our Center are specially educated in:

- child development
- understanding the phenomenon of child abuse and neglect, as well as signs, short-term and longterm consequences of child abuse and neglect
- building rapport with a child, conducting clinical and forensic assessments with children who were exposed to different forms of traumatic events - this includes identifying abuse/neglect, assessing the consequences of traumatic events and the needs of the child, child friendly approach, writing reports
- providing different forms of psychotherapy (trauma focused cognitivebehavioral therapy, play therapy, cognitivebehavioral therapy, Gestalt therapy, psychoanalysis, transactional analysis and/or systemic therapy)
- conducting forensic interviews with traumatized children
- understanding of the legal context and requirements
- identifying risk factors and supporting families at risk with the aim of preventing child abuse and/or neglect
- supporting nonabusive parents
- Center's experts are involved in regular supervision where specific cases are discussed, as well as professional and personal challenges and ethical dilemmas in working with children victims and/or witnesses of violence.

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse

- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Forensic interviewing
- Forensic examination
- Child protection assessment
- Medical examination and treatment (paediatrics)
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

The child is referred to the Centre by the police and/or social services, or is brought by concerned parent/caregiver, sometimes following a recommendation of a child's school, kindergarten, health professional or others. A multidisciplinary team assessment is made, tailored according to the individual needs of the child and specifics of the case. The available experts include: psychologists, psychiatrists, neurological paediatrician, social workers, special educators, speech therapists and a lawyer. All of the experts working with children are trained in forensic interviewing. In cases of child victims and witnesses the team assessment includes a forensic interview, which is conducted by a single professional, in order to avoid retraumatization by repeated questioning. The assessment also includes gathering relevant information from other institutions. Based on assessment results, multidisciplinary team chooses and plans the treatment, according to the needs of the individual child and his family, provides recommendations for other institutions if needed, and informs relevant institutions about any violations of the child's rights. Some of our professionals are also court experts, and conduct forensic evaluations at the order of court.

Child friendly practices used

- staff trained in providing clinical assessment and empirically based treatment staff trained in forensic interviewing child friendly environment avoiding repeated questioning at the Centre concerning the event child friendly approach, adapted according to the developmental status, special needs and emotional state of the child use of child friendly and evidence based interviewing protocols and developmentally appropriate techniques (e.g. drawings, anatomical drawings and dolls) minimizing the necessary length of the forensic interview, conducting the forensic evaluation
- assessment in more than one session if needed
- encouraging judges to interview children on the Centre's premises, in specially equipped forensic rooms, (Centre's interviewer and the child in one room, and SA, judge, defendant, defence lawyer, social worker, police and other involved parties in another room), judge and involved parties ask the child through the mental health expert who adapts the questions according to the developmental level and emotional state of the child - the whole procedure is video recorded and can be used in court proceedings.

Activities aiming at prevention of child abuse/neglect

Our work is aimed also at prevention of child abuse and neglect. We strongly cooperate with media on awareness raising campaigns (media appearances - TV, radio, newspaper, electronic media; the latest one has been translating and promoting Council of Europe video aiming to prevent child sexual abuse in Croatia). In addition, we organize and conduct different activities for children, parents and all professionals working with children, aiming on prevention. Our Centre is an educational base for students of different faculties, teaching the students about child abuse and neglect prevention, recognition and adequate responding, treatment and follow-up. One of the activities of our Centre refers to publishing brochures and leaflets for children, parents and professionals that are available online and also distributed free of charge to the beneficiaries. We also strongly cooperate with NGOs aiming at child abuse and neglect, in forms of

educating and supervising their volunteers and workers, as well as cooperating in other awareness raising activities. All prevention activities are based on the results of research conducted by our Centre, but also in cooperation with other child protection GOs and NGOs

Follow up after treatment/aftercare policy

The multidisciplinary team carefully plans and provides the treatment for the child and the child's family (including the non-offending parent). During the court procedures, which often last for a considerable amount of time, support is provided for the child and the family, and the treatment is conducted in a forensically sensitive manner. After the treatment, the child is included in multiple follow-up sessions, according to the needs of the child and the specifics of the case.

Government funding

Yes

Tools used to assess the quality of (policy) service

The Centre keeps a database of all cases, which includes information about patient characteristics, results of testing procedures, assessment findings and provided treatment. Based on the collected data, an annual report is made, containing the overview of our current practice, recognizable trends and changes, and recommendations for the future.

National laws/policies that oblige the existence of FOS

No

Obligated by law or further regulations

In Croatia there are no national laws or policies in place that oblige specifically the existence of formally organized structures providing services to child victims and witnesses of violence. This is done through the existence of social services and health care system which is defined more broadly.

Other relevant information

Our Centre is recognized as a model of good practice in Europe and has received ISPCAN Multidisciplinary Team Award in 2008, recognizing our Centre for its significant contribution to the welfare of children. Experts from our Centre are often invited to share their knowledge and experiences regarding child abuse and protection across Europe. The work of our

Centre also includes regional and international cooperation in this field.

Other multi-agency/multi-disciplinary structures

N/A

3.4 Cyprus: Social Welfare Services

Contact person

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Collaboration other actors

By legislation, the Social Welfare Services are required to coordinate all actors involved in child victim protection/support (e.g. through multidisciplinary meetings). Actors include the Police, the Child Mental Health Services, the Service for Educational Psychology and the School.

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police
- Lawyers
- Judges
- Educational Psychologists, Schools

Staff educated/trained

No

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse
- Peer abuse Domestic violence
- Sexual abuse Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

- Residential care

Services provided

- Child protection assessment
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

Home visit, interviewing with the child/parents, referral and coordination with stakeholders, mobilising process of issuing of restriction/child removal order if child is in danger etc.

Child friendly practices used

Not yet at place. We are in the process of adopting a child friendly model.

Activities aiming at prevention of child abuse/neglect

No

Follow up after treatment/aftercare policy

Cooperation with the child/family continues on a voluntary basis unless the child is in danger.

Government funding

Yes

Tools used to assess the quality of (policy) service

No tools available.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

The Police, the Social Welfare Services and the Mental Health Services are obliged to protect and support. The Ministry of Education is obliged to implement preventive actions.

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

N/A

3.5 Estonia: Children's Mental Health Centre

Contact person

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Collaboration other actors

No.

Professionals / services represented

- Social Services
- Therapeutic staff
- Child and adolescent psychiatry

Staff educated/trained

No.

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation

These target groups are covered, but only from the psychiatric point of view with collaboration with the social and education sector to provide the child with best possible care but there is no concrete specialization.

Works with

Child victims of violence

Services provided

- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

The child psychologist have been trained to conduct the preliminary interview to detect possible child sexual abuse.

Child friendly practices used

All the mentioned practices, except the child friendly environment, are used in the Police while investigating a child abuse case. The current policy is that the people conducting the interview with a child victim/witness remain the same (especially trained police officers, recording of interviews, child friendly and evidence based techniques) but the

location will change - for that the Children's Mental Health Centre is fit for.

Activities aiming at prevention of child abuse/neglect

Not yet, except for the over-all psychiatric and psychological help to children with mental health problems that can prevent future victimization.

Follow up after treatment/aftercare policy

There is currently no definite follow-up system in place, it varies from one location (local municipality) to another but the issue of follow-up and case management also after the treatment/care is currently being developed.

Government funding

Yes

Tools used to assess the quality of (policy) service

The quality-assessment system is also currently being developed. The aim is to regularly receive feedback from the service provider who is in charge for the treatment/care of the child. Another issue that needs to precede to the treatment is the assessment of the child's individual needs and referring the child to accurate therapy/care - this question is also being solved at the moment (the aim is to bring it also under the competency of Children's Mental Health Centre even though the Centre may not remain as the sole service provider for the child's treatment).

National laws/policies that oblige the existence of FOS

No

Obligated by law or further regulations

The law puts the threshold to law enforcement - the referral, investigation etc. This is the system that needs to be changed to give more room to integrated services that can be provided by other sectors such as health care and social protection.

Other relevant information

Children's Mental Health Centre is a treatment centre that diagnose, offer treatment and in some cases joint case management with social and educational sector. Tallinn's Children's Mental Health Centre has been newly built - it started its work in late 2015. It aims to provide integrated services and the vision is to

create under this Centre also a multidisciplinary centre that 1) detects possible child abuse, 2) provides the child friendly environment for the investigative interviews, 3) provides medical examination, 4) provides assessment of the needs of the child and in some cases also 5) the treatment (there is also the victim support service in place that separately deals with abused children but as mentioned, it lacks the assessment-part so there is no certainty whether the therapy is the correct one, also it lacks supervision/ follow-up - these issues need to be solved but the victim support can in some cases be more suitable for the child, for instance in country regions etc).

Other multi-agency/multi-disciplinary structures

There are none.

3.6 Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot

Contact person

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Collaboration other actors

Information exchange and protocols of cooperation.

The Federation of mother and child homes and shelters and Pilot area mother and child home as well as Victim Support (NGO).

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police
- Lawyers
- Judges

Staff educated/trained

Yes, interviewing.

Kind of violence addressed

- Child abuse
- Neglect
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Criminal investigation
- Forensic interviewing
- Forensic examination
- Child protection assessment
- Mental health examination

Steps taken in the fact finding practice / the assessment / diagnostics

Risk assessment/background information gathering and then a multi-professional working group if deemed necessary.

Child friendly practices used

Specially trained staff, child friendly environment, recording interviews, specialised interviewing procedures and techniques.

Supporting the child and the family and the participation of the child.

Activities aiming at prevention of child abuse/neglect

Early detection is the aim

Follow up after treatment/aftercare policy

Under development in the pilot.

Government funding

Yes

Tools used to assess the quality of (policy) service

Under development in the pilot.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

N/A

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

N/A

3.7 Germany: World Childhood Foundation

Contact person

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Collaboration other actors

'At the moment we collaborate through Information Exchange and Joint planning with strategically important partners in Germany as

- the Independent Commissioner Johann Wilhelm Rörig
- the Monitoring Authority for children's rights
- the Federal Centre for Health Education
- the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth'

Professionals / services represented

'Since we are a foundation supporting projects, there are neither professionals nor services within our structure'

Staff educated/trained

No

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse

Works with

- Child victims
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Mental health
- Social work activities
- Other

Steps taken in the fact finding practice / the assessment / diagnostics

In Germany, there is no Barnahus/CAC-modell established yet.

Child friendly practices used

'In the German Projects we fund especially trained staff in counselling Centers, which have child friendly rooms, but no recording of interviews yet'

Activities aiming at prevention of child abuse/neglect

'As a foundation we support counseling centers that are also engaged in the field of prevention. They offer child abuse- prevention activities by means of Theater Plays or Sound collages in schools and youth centers or through a short film, which will be shown at schools and in the social media. Some of our counseling centers train youth welfare staff, Train social workers or even give lectures on that topic in universities.

Follow up after treatment/aftercare policy

'All the supported projects need to state follow-up/aftercare practice in their applications. With some of the Clients, it is hard to follow up, since they move (refugees for example) If Trauma therapy is given, a follow up is done, but sometimes it is hard to measure a General impact. It is more about individual changes.

Government funding

No, donations

Tools used to assess the quality of (policy) service

We assess the quality of the applications through an Advisory Board. We visit with the Projects twice a year. Project reports are mandatory twice a year. At the end of funding, Projects need to turn in an external evaluation, often done by universities.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

'In Germany, there are formally organized structures providing services to child victims, but they do not cooperate very well. They act

on the basis of SGB V, SGB VIII (Social Security Statutes), KJHG (Child and Youth Welfare Act)

Other relevant information

'World Childhood Foundation supports many Barnahus and CAC in Sweden, the United States of America, in South Africa, and in Belarus. Here in Germany, there is no such Barnahus. We intend to set up this structure.

Other multi-agency/multi-disciplinary structures

not yet

3.8 Hungary: ESZTER Foundation

Contact person

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Collaboration other actors

Giving supervision to the professionals of and accepting referrals from the child protection system and victim support service, participating in case conferences, joint projects.

Professionals / services represented

- Therapeutic staff
- Child and adolescent psychiatry
- Lawyers

Staff educated/trained

clinical psychology

Kind of violence addressed

- Child abuse
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Medical examination and treatment
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

Interview.

Child friendly practices used

Specially trained staff, child friendly environment, characteristics of the therapy techniques.

Activities aiming at prevention of child abuse/neglect

Campaigns

Follow up after treatment/aftercare policy

No follow-up

Government funding

Other: ESZTER Foundation finances the Centre from donations, grants and voluntary contributions from its clients.

Tools used to assess the quality of (policy) service

Continuous supervision

National laws/policies that oblige the existence of FOS

No

Obligated by law or further regulations

Referral of child abuse.

Other relevant information

Further information: <http://eszteralapitvany.hu/?lang=en>

Other multi-agency/multi-disciplinary structures

- Kék Vonal Gyermekkrízis Alapítvány (Kék Vonal Child Crisis Foundation) - Család, Gyermek, Ifjúság Egyesület (Family, Child, Youth Association) - Maria Herczog

3.9 Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider

Contact person

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Collaboration other actors

Through information exchange: Pálos Károly Family Support and Child Welfare Services, local Child Protection Services (TEGYESZ), local and district legal guardian authorities, city and district criminal investigation judges, juvenile prosecutors, patrons' network, professional guardians, foster parents' network, paediatrician, city and county health visitors' network, schools' psychologist, school counselling services, Child Neuroscience Centre, State Victim Support Office.

Reporting obligations: to legal guardian authorities, police, city and district notary

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Forensic medicine
- Sociologists

Staff educated/trained

Yes, 3 persons were trained in giving support to victims of violence and victims protection, 2 persons were trained in the prevention of sexual abuse of children

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse
- Peer abuse Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Forensic examination
- Child protection assessment
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

- based on individual report record has been taken

- it is a must to report the case directly to the police by the individual (private prosecution)
- the case is investigated by the Family Support and Child Welfare Services provider
- prepare an interview with the child (first social worker, second the official psychologist and then the therapist. Following that, the interview series followed by the police, paediatrician, 3-4 more cases by the forensic psychologists

Child friendly practices used

We don't use and don't have such a place or techniques, but there are few so called „child friendly rooms” in police stations, court of justices and trained professionals who handle cases there.

Activities aiming at prevention of child abuse/neglect

Yes, there are two trained professionals who hold sensitizing trainings for adults about the recognition of child abuse and neglect.

Follow up after treatment/aftercare policy

N/A

Government funding

Yes

Tools used to assess the quality of (policy) service

N/A

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

The Child Protection Act.

Other relevant information

All regulations, policies, cooperation agreements and protocols concerning child friendly justice and protection of child victims/witnesses of violence based on the Hungarian Child Protection Act. We don't have our own procedures and protocols in place.

Other multi-agency/multi-disciplinary structures

N/A

3.10 Iceland: Barnahus

Contact person

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Collaboration other actors

The activities are based on a partnership between the State Police, the State Prosecution, the University Hospital and the local child protection services as well as the Government Agency for Child Protection which is responsible for its operation.

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police
- Lawyers
- Judges

Staff educated/trained

Yes, everyone except project manager

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers
- Family members

Services provided

- Forensic interviewing
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

CPS sends referrals to Barnahus and the therapist does the assessment and treatment.

Child friendly practices used

The Children's House is located in a residential area and its interior is designed to maximize the child's comfort e.g. by toys, pictures and selection of colours. The child is interviewed in a special room by a trained investigative interviewer according to evidence based protocol. The interview is observed in a different room by a judge, who is formally in charge of the procedure, a social worker from the child protection authorities, the police, the prosecution, the defence attorney and the child's advocate. As referred to above the interview is videotaped for multiple purposes, including child protection and criminal investigation and as court testimony at the main proceedings if an indictment is made. This arrangement makes it possible in most cases to do with only one interview with the child as the child need not appear in court. After the interview the child may have the medical examination in the medical room of the house. The findings are documented by paediatricians through the use of a colposcope, a state-of-the-art equipment that records the examination on a video. The House also provides treatment services for child victims of sexual abuse and their families. The child is assessed for therapeutic purposes and an individual treatment plan is designed and executed either at the facilities or, if the child lives outside of the capital area, as near to the home environment as possible. The forensic interview protocol used is based on NICHHD evidence based protocol.

Activities aiming at prevention of child abuse/neglect

We are not working with prevention in Barnahus but the staff provides counselling for people who work with children, CPS and public alike. After therapy sessions the therapist teach the child and the parents to cope with unwanted behaviour and to prevent that the child will be abused again.

Follow up after treatment/aftercare policy

Children are provided treatment until it is estimated that they don't need more session in collaboration with parents, the child and

the CPS. According to treatment protocol (TF-CBT) Which is evidence based they need 12-20 sessions and usually more. The case is not closed until there are conclusions in the court system and after that Barnahus keeps the case open for up to 6 months. No formal follow up or after treatment have been provided but Barnahus is considering improvement in that area. Parents to young children are informed about possible treatment or therapy need later in live when they become teenagers.

Government funding

Yes

Tools used to assess the quality of (policy) service

The use of formal assessment is used in the-
rapy and If children are showing signs of PTSD, anxiety, depression or any other feeling they have after the abuse they answer the same list later in the therapy to evaluate the success in therapy. The therapy continues until the child is feeling better and the parents are satisfied with the result of the treatment. The assessment tools who are used are UCLA, CDI, DASS, BYI, CBCL, MASC, BDI-II and PSS-SR. Our service only uses evidence based equipment tools and therapy program. We use also evidence based protocol for out forensic interview and try to retrain as often as possible. Every changes they do in the protocol we adjust to our work.

National laws/policies that oblige the existence of FOS

Yes

Obliged by law or further regulations

When children need special treatment which the municipalities or the CPS can't arrange the government can put provide the specialized service for the child as non-institutional. Therefor Barnahus, which is run by the government, provides therapy for children all around Iceland in their hometown. Another law related to public hearing in child abuse cases allows for the forensic interviews of children under the age of 15 can be carried out by specialists. These interviews need to be conducted in a specially equipped room. Even though Barnahus is not specifically mentioned in the law it has all the equipment and employees to qualify for a judge's request for such an interview. Even though the interview

is conducted by a specialist without the physical presence of anybody else, the judge still controls the interview via a communications device. Even though these interviews are conducted at the time of police investigation the recording can be used as the child's testimony in court.

Other relevant information

Barnahus serves the whole country in Iceland. The therapist meet the child in their own hometown every other week. Because we just have one multi agency service like Barnahus we have all information about sexual abuse in the country. All children who have been abused gets the same service wherever they live in our country. We have database with over 100 variables where we follow each case from the beginning to the end in the legal system. We have information about the nature of the abuse, age of the child and so on. Students from the university can do some research every year to look into the nature of abuse here in Iceland. All the specialization is at one place which can be advance for our service.

Other multi-agency/multi-disciplinary structures

N/A

3.11 Latvia: Establishment Centre Dardedze, NGO

Contact person

Laura Celmale

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Collaboration other actors

1. STATE institutions: In legislation working groups by Ministry of Welfare, Ministry of Justice, Parliamentary Human Rights Commission etc.
2. As an NGO we organize national expert council for mapping and situation analysis on how child rights are respected in practice during criminal proceedings
3. Municipalities: In various projects we are working together with different municipalities developing a child and family-friendly

environment for the effective prevention of violence

4. OTHER NGO's: we are involved in the child welfare network where different organizations work together on improving cooperation in the field of child protection

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Police
- Lawyers
- Psychologist

Staff educated/trained

Child abuse, all forms of violence, children's rights

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers
- Educational work for professionals who work with children, preventive programs for young children and teens

Services provided

- Forensic interviewing
- Forensic examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

For purposes of criminal proceedings we provide video of the child interviews. At the request of the national police force we provide psychological studies for child victims and prepare Psychologist's Opinion for criminal proceedings.

Child friendly practices used

There are 2 kinds of interviews in criminal proceedings in Latvia:

1. A child is interviewed by the police-person who has special knowledge in communication with minors or in the presence of a teacher or psychologist
2. If the psychologist concludes that a face-to-face interview may have negative consequences for the child's physical and emotional well-being, the interview takes place with the aid of technical means in the presence only of a psychologist without presence of police officer or prosecutor. (usually used in sexual violence cases).

In our centre we provide No2 type of interviews. We have specially trained staff, our interviewing procedure is based on NICHD protocol, we have child friendly environment. But situation is different if the procedure takes place in police office, where there are no child friendly rooms, not trained staff, no specialized police officers who work with children etc.

Activities aiming at prevention of child abuse/neglect

. Sexual abuse preventive program for young children Dzimba Safety trip (provided for children groups in our centre), 2. Dzimba safety agent program in kindergartens of Latvia; 3. Preventive anti-bullying program for teens "Courage to be friendly"; 4. Anti-bullying program for kindergartens the school of the Big Life; 5. Program "Safe Beginnings" - for new parents (with children 0-2) at risk to learn non-violent and child friendly parenting skills, teaching them the importance of playful parenting 6. Program "Fathers matter" - a special 6 meetings group to encourage fathers to be more involved in emotional parenting of their children/reduce/prevent violence 7. Program "Pathways to competence" - for parents with children 0-7 on non-violent parenting approaches and help them build their own informal support networks to prevent child abuse in these families 8. Program Guidelines in parenting a teenager - for parents with children 9-14 on positive non-violent and child-supportive parenting Different training programs for different professionals working with children.

Follow up after treatment/aftercare policy

In Latvia State provides free rehabilitation for children and adults who are victims of violence. Unfortunately in practice it sometimes means that the child is removed from the family and placed in a crisis centre for 30 days

and then sent back to the family. From year 2016 there is a State provided service for all victims - helpline, where it is possible to receive information about legal, social etc issues. In Latvia unfortunately yet there are no common practice or assistance centres for victims.

Government funding

Other: we have governmental support for one of our programs - dzimba safety program. Lot of services.

Tools used to assess the quality of (policy) service

Our interview process is based on NICHD protocol. We recently evaluated all the work of our organization by participating in the Child 6 principles project funded by OAK.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

Rehabilitation for abuse victims State compensation for victims in criminal proceedings Helpline (but not specific procedures or help centres) for abuse victims State provides mandatory legal assistance to a child victim and victim's representative in criminal proceedings for an offense related to the violence caused by the person from whom the victim is a minor or otherwise dependent, or in the cases of sexual abuse.

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

N/A

3.12 Latvia: Ministry of Welfare

Contact person

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Collaboration other actors

The Ministry of Welfare is providing state financing for the social rehabilitation services for children who have become victims of

illegal actions (including violence), trafficking in human beings as well as for adult members of the family who have become victims of violence as well as for perpetrators who have committed violent acts in the family. It means that the state is cooperating with private service providers who are providing those state funded services. To monitor how the service providers are providing those services the ministry is regularly requesting information from them - both personalized information and statistical data. The Ministry of Welfare is also organizing yearly seminars for local government social services where topical matters are being discussed.

The Ministry of Welfare has a good cooperation with a number of NGOs working in the field such as foundation "Centrs "Dardedze"". Foundation "Centrs "Dardedze"" has established a National Expert Council in order to assess the necessary improvements in the system for the protection and support if minors who are victims of sexual violence and abuse and how to introduce good practice examples such as "Barnahus".

Professionals / services represented

- Social Services
- Therapeutic staff
- Forensic medicine
- Lawyers
- Psychologist, local governments, child protection services (also called orphan's court); child care institution, prison, social correction educational institution, parents, guardians, foster families, NGO "Children's Fund", respective service provider

Staff educated/trained

The personnel is trained according to the program on the special knowledge in the field of the protection of the rights of the child

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- State and local government institutions
- NGOs

Services provided

Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

Psychologists or social worker provides an opinion whether a child needs social rehabilitation; the opinion is provided according to the application of the victim's parent, guardian, the head of an institution (where the child resides), foster family or orphan's court

Child friendly practices used

The Law on the Protection of the Rights of the Child provides for that professionals defined by this law need to acquire special training before they contact children; they also need to provide a certificate of criminal record; there are no specific procedures how the psychologist or social worker provides the opinion about the need for the child to receive social rehabilitation service as a victim of illegal actions, including sexual abuse and exploitation.

Activities aiming at prevention of child abuse/neglect

Yes, the Ministry of Welfare implements preventive activities, too. For example the ministry has provided financial support for the provision of educational programs for children "Džimbas skola" by foundation "Centres "Dardedze"". This program teaches children how to be safe and protect themselves from persons who want to hurt them. the program includes tips on how children should react in case someone attempts to sexually abuse them (<http://www.dzimba.lv/>). The State Inspectorate for Protection of Children's Rights (subordinate institution to the Ministry of Welfare) is also regularly implementing educational and training activities to prevent child abuse and neglect. For example in cooperation with foundation "Centrs "Dardedze"" professionals in boarding schools and child care institutions were trained on how to identify child sexual abuse, specific monitoring measures were introduced by the inspectorate.

Follow up after treatment/aftercare policy

There is no formal policy regarding follow up after treatment. The practices varies depending on the local government.

Government funding

Yes

Tools used to assess the quality of (policy) service

There are no specific tools. The government has delegated the assignment of state administration to provided social rehabilitation services to children who are victims of illegal acts to the NGO "Latvijas Bērnu fonds" (Latvian Children's Foundation). According to this assignment Latvijas Bērnu fonds has to ensure the organization of provision of the social rehabilitation service to the children who are victims of illegal acts (to sign agreements with local governments, allocate financing to certain service providers organize public procurements etc.). The Ministry of Welfare is supervising how the state funding is being spent by Latvijas Bērnu fonds. The supervision is ensured by requesting a monthly report from Latvijas Bērnu fonds about the expenditure of financing, including personalized information about children who have received the rehabilitation services.

National laws/policies that oblige the existence of FOS

No

Obligated by law or further regulations

Social Services and Social Assistance Law obliges that state has to ensure that children who have become victims of illegal acts receive social rehabilitation services. The law also delegates the responsibility to organize the provision of social rehabilitation of children victims of illegal acts to Latvijas Bērnu fonds. The Cabinet of Ministers provides specific requirements for services providers providing social rehabilitation services for children who are victims of illegal acts: Cabinet Regulation No. 291 Adopted 3 June 2003 "Requirements for Social Service Providers". If the services is being provided in an institution then the regulations define the types of premises where the services should be provided. The requirements about special knowledge on the rights of the child does not apply to all the involved specialists in the social rehabilitation such as medical staff etc.

Other relevant information

I would gladly provide any additional information. I really hope that I understand the questions correctly. I was mostly describing the Ministry of Welfare as such instead of a structure formed of several institutions or

organizations. Probably Dardedze's National Council of Experts suits better for the term "formally organized structure".

Other multi-agency/multi-disciplinary structures

Most of such cooperation mechanisms are project based and are terminated after the termination of a project. However there are number of positive examples at the municipality level on the cooperation between institutions. Contact information: Dzintra Kozaka, e-mail address: dzintra.kozaka@dome.cesis.lv, phone number: + 371 29126373. Ms. Kozaka has also had positive experience in the implementation of projects on the prevention of antisocial behaviour of minors.

3.13 Lithuania: A Help Centre for children, who were victims of sexual abuse

Contact person

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Collaboration other actors

We collaborate with a partner - Government Agency for Child Protection in Iceland "Barnaverndarstofa", with BARNAHUS in Island. The people who work in Island BARNAHUS are one of the main lectures in Lithuania for people who will be working in the centre in Lithuania. We also collaborate with MR.BRAGI GUDBRANSSON. He is also one of the main lectures in Lithuania.

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police
- Lawyers
- Judges

Staff educated/trained

Yes, they are educated and training now in everything.

Kind of violence addressed

- Child abuse
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution)

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Child protection assessment
- Medical examination and treatment (paediatrics)
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

I just can write formally what are the plans to do, because as I mentioned we'll be opened just in April in 2016.

Child friendly practices used

Child friendly environment, recording of interviews.

Activities aiming at prevention of child abuse/neglect

Yes

Follow up after treatment/aftercare policy

N/A

Government funding

Yes

Tools used to assess the quality of (policy) service

The collaboration with Iceland BARNAHUS

National laws/policies that oblige the existence of FOS

Yes

Obliged by law or further regulations

N/A

Other relevant information

The centre will offer the following complex services: - Temporary accommodation, for children and their non-violent parents (guardians). - Research survey: the centre will have

specially equipped and child-friendly survey equipment, which would allow safe speaking with a child about his/her experience and to make a record of this conversation. - Medical examination: the centre will have a specially equipped and child-friendly room, where children could be examined by doctors and the symptoms of the experienced trauma could be assessed together with the general condition of a child's health. Also other works that are no less important will be performed: psychological assessment of the child, assessment of the child's social environment and psychological help for a child.

Other multi-agency/multi-disciplinary structures

It's the first centre in Lithuania.

3.14 Lithuania: Republic of Lithuania Ministry of Social security and Labour

Contact person

Dainora Bernackiene

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0046-761225280

Collaboration other actors

The Ministry collaborates with other institutions, NGO and others through information exchange, protocols of cooperation etc.

Professionals / services represented

- Law enforcement institution

Staff educated/trained

Yes. The police, social services, child and adolescent psychiatry staff and paediatric staff are specialized and educated in child victims.

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse (youngsters abusing parents)
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation
- Abandoned children

Works with

- Child victims of violence

- Child witnesses of violence
- Parents
- Care givers
- Children who committed a crime

Services provided

- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

The Ministry while elaborating the programme "Children and Youth at Risk" under the European Economic Area Financial Mechanism is planning to implement a measure "The Establishment of Help Centre for victims of sexual exploitation and sexual abuse of children." The centre will provide integrated assistance (psychological, social, legal, medical). The project aims to strengthen cooperation among the specialists from different departments. Training for specialists working with child victims of sexual abuse and their families has already started.

Child friendly practices used

Trained staff, child friendly environment. The interdepartmental action plan (guidelines) for cases of sexual abuse of children is being prepared. These guidelines aim at helping Lithuanian institutions responsible for the child wellbeing, health, and protection of rights, at more efficiently implementing functions related to the Protection of the Child and the child's representation in criminal proceedings in order to protect the child's rights and legitimate interests, and at ensuring a closer interdepartmental and interinstitutional cooperation.

Activities aiming at prevention of child abuse/neglect

'Disseminating information about the Rights of the Child through mass media. It should be noted that the Ministry of Education and Science, the Ministry of the Interior as well as non-governmental organisations have been actively participating in the process of solving the cyberbullying problem.

Follow up after treatment/aftercare policy

NGO provide complex assistance (psychological, social and legal) to abused children, as well as to their family members through the implementation of national and international projects. Regional Child Rights Protection Institutions organise services and help for

abandoned and abused children. Centres of Social services provide social, psychological support to children and their families.

Government funding

Yes

Tools used to assess the quality of (policy) service

Social workers regularly evaluate changes in the family and together with the Child Rights Protection offices decide whether they should continue to providing services to the family, work with it, change or provide additional services or other measures had to be applied to the family.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

Work restrictions for persons found guilty of the crimes against children's sexual independence and integrity. Families who abuse alcohol or psychotropic substances or due to the lack of Social skills are incapable of properly caring for and supervising the child are included in the Register of Social Risk Families with Children according to their place of residence by the order of the director of the municipal administration upon the recommendation of Child Rights Protection offices. The Child Rights Protection offices ensure the child rights protection and the implementation and supervision of laws and regulations that regulate the child rights protection.

Other relevant information

The Ministry established additional job positions of Social workers dealing with social risk families. The Ministry finances Child day care centres who provide services to both children and families. An increasing number of Child day care centres projects has been financed every year and the number of children provided with their services has been growing.

Other multi-agency/multi-disciplinary structures

Children support centre - ausra@plc.lt

Contact person

Ms. Ruth Sciberras

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Collaboration other actors

The Foundation works closely with the International Social Services.

Internally, the Foundation has a large number of protocols, exchange information, have joint case management and design joint care plans. The Foundation also has a large number of protocols and exchange information with external entities such as education, health, police, probation and parole, justice system, NGOs amongst others.

Professionals / services represented

- Social services
- Youth care
- Therapeutic staff
- The foundation also has a number of residential homes.

Staff educated/trained

Yes, social work, family therapy and psychotherapists mainly.

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse
- Peer abuse Domestic violence
- Sexual abuse Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
- Cyber bullying, Helpline

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers
- Adolescents, victims of Domestic Violence and Human Trafficking

Services provided

- Child protection assessment
- Medical examination and treatment (paediatrics)
- Mental health examination
- Social work activities

3.15 Malta: Foundation for Social Welfare Services

Steps taken in the fact finding practice / the assessment / diagnostics

Investigation, Assessment, Interventions and Therapy.

Child friendly practices used

Child Protection workers receive specialised training from time to time, offer child friendly environment, investigate, and are trained in interviewing procedures and techniques.

Activities aiming at prevention of child abuse/neglect

Yes, prevention is carried out regularly in schools, by way of media campaigns and media programs.

Follow up after treatment/aftercare policy

The Foundation continues to follow children throughout different stages in life, offer therapy and aftercare. It also offers services for children and adults.

Government funding

Yes

Tools used to assess the quality of (policy) service

The Foundation makes use of measurable outcomes to ensure that the care plan is being followed and to receive feedback from service users re. the service being provided.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

It mainly obliges the agency to receive referrals in relation to child protection, investigate them and in very serious cases recommend that a care order is issued. It is also the designated agency to deal with Domestic Violence issues.

Other relevant information

The Foundation is also bound to follow the Lanzarote convention.

Other multi-agency/multi-disciplinary structures

There are two NGOs which provide primary and secondary shelter for Domestic Violence victims and their children. The Police Department mainly the Vice Squad The Education Department.

3.16 The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)

Contact person

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Collaboration other actors

We exchange information, are making one integrated action plan in cases of child abuse and maltreatment with one case manager and joint case action; we have a protocol of cooperation and are planning scientific research on this method

Partners: police, prosecution, child protection board, Veilig Thuis, child and adult psychiatry, forensic psychiatry, paediatricians, youth care including specialized youth care for mentally restricted children and/or parents, child protection services. Education, welfare and youth health are joining in the second shell

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police

Staff educated/trained

In diagnostic research, safety planning, therapy and system approach.

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation
- Parental abuse is possible, but mostly is addressed in the forensic chain

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Criminal Investigation
- Forensic Interviewing
- Forensic Examination
- Child protection assessment
- Medical examination and treatment (paediatrics)
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

When a child is referred to the centre mostly Veilig Thuis checks the known information and asks for further information from school, the family doctor and other persons in the direct network around the child and the family. After that the team meets and makes a plan of investigation and help. Often there is a risk assessment with parents and family, the child gets a medical and mental health examination and a forensic interview if necessary (in that case we mostly start with the interview unless there is physical harm than the paediatrician is the first one to see the child. After the examination a further action plan is made. Safety of the child is always the first issue.

Child friendly practices used

There is a special child friendly location where all the investigations (including forensic interview and forensic examination) can take place. Interviews are recorded. The standard of the APSAC interview are used when a psychologist is doing the interview. The police has a comparable interview criminal law situations. The staff is well trained in the approach on child abuse and neglect and on trauma evaluation.

Activities aiming at prevention of child abuse/neglect

No, not explicitly. We are the specialists when there are strong suspicions on child abuse and neglect.

Follow up after treatment/aftercare policy

The MDCK does follow up till treatment has been ended and the situation is assessed as safe. After half a year we do a follow up, also for research purposes.

Government funding

Other: all organisations that participate contribute and next to that we receive a fee for the hiring of the building (it is situated in

the hospital in our region, from the local government.

Tools used to assess the quality of (policy) service

Evaluation with the team, we also record the time it takes to do the investigations etc.. Scientific research starts in May 2016 (the centre has been opened in November 2015).

National laws/policies that oblige the existence of FOS

No

Obligated by law or further regulations

There is a code that stimulates citizens and professionals to inform Veilig Thuis when there is suspicion of child abuse or neglect.

Other relevant information

In the Netherlands the community of local governments has just adopted the idea of MDA++ (multidisciplinary approach on all family violence including child abuse and neglect). The first + means specialized, the second one multi-sectoral. They agreed to realize this approach before the end of 2018. The MDCK is a precursor in this development. The Centres on Rape and there are Sexual Assault are precursors too. The MDCK includes a CSG in February 2016.

Other multi-agency/multi-disciplinary structures

The CSG's also see the target audience till 18 in cases of acute assault (they work for victims of rape from 0 till 100). There is only one MDCK with an own location; there are other forms of network collaboration: - CSG Iva Bicanic - MDCK Friesland Anneke Jelsma - FJC Tilburg Gerriane Rozema - FJC Venlo Matthieu Goedhard - Netwerk Gelderland Anita Kraak - Veilig Verder Teams Den Haag Ria Andrews - TASK AMC Tianne Teeuw/Sonja Brillenslijper - UMC Utrecht (WKZ) Elise van de Putte.

3.17 The Netherlands: *Stichting Fier*

Contact person

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Collaboration other actors

Public prosecution, police, hospital (including paediatricians), mental health, addiction care, forensic care, social teams working in neighbourhoods and districts, education, Safe Home (Veilig Thuis), the Safety House, child welfare, the certified institution, court.

Professionals / services represented

- Social services
- Youth care
- Therapeutic staff
- Child and adolescent psychiatry

Staff educated/trained

Yes, in Infant mental health, child and youth trauma treatment

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse (youngsters abusing parents)
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation
- Honour related violence
- Genital mutilation
- Abuse of elderly people
- Violent/abusive divorce

Works with

- Child victims of violence
- Child witnesses of violence
 - Parents
 - Care givers

Services provided

- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

Our organisation does not engage in fact finding practices. Most clients are diagnosed with trauma or trauma related problems.

Child friendly practices used

The staff working for the child and youth trauma centre is especially trained to work with children. The staff working in the infant mental health team, Kindspoor and Jongerenpoor are so too. Therapy rooms are especially equipped for children, we have playing rooms too.

Activities aiming at prevention of child abuse/neglect

Yes, we provide training. Furthermore, one could say that we engage in secondary and tertiary prevention, by stopping violence and preventing re-victimisation.

Follow up after treatment/aftercare policy

Violence in dependent relationships often involves relapse. Therefore, aftercare is essential.

Government funding

Yes

Tools used to assess the quality of (policy) service

Several tools, among others the ROM and the CQ Index.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

Child check (Kind Check), reporting code domestic violence and child abuse, Safe Home (Veilig Thuis), Certified Institution, Council for Child Protection.

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

We collaborate with the following organisations: - Immediate Help in case of Domestic Violence and Child Abuse - Centre for Sexual Violence - MDCK

3.18 Poland: *Nobody's Children Foundation*

Contact person

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Collaboration other actors

National Police Headquarters, Social Services, Interdisciplinary team.

Professionals / services represented

- Therapeutic staff
- Child and adolescent psychiatry
- Prosecutors
- Lawyers
- Judges
- Forensic psychologists

Staff educated/trained

Yes: prevention, intervention, therapy, interviewing

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Forensic interviewing
- Child protection assessment
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

Psychological assessment, contacts with other institution which can have info about the child's situation

Child friendly practices used

n.a.

Activities aiming at prevention of child abuse/neglect

N/A

Follow up after treatment/aftercare policy

N/A

Government funding

N/A

Tools used to assess the quality of (policy) service

N/A

National laws/policies that oblige the existence of FOS

N/A

Obligated by law or further regulations

N/A

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

N/A

3.19 Romania: *National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)*

Contact person

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Collaboration other actors

47 General Departments for Social Assistance and Child Protection, ministries and other governmental institutions, NGOs, professional associations (social workers, psychologists and medical doctors) Collaboration is according to the role of NAPRCA.

Professionals / services represented

- Therapeutic staff
- Paediatrics
- Social workers, legal counsellor

Staff educated/trained

Few, yes.

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
- Female genital mutilation and child marriage

Works with

Professionals

Services provided

Other

Steps taken in the fact finding practice / the assessment / diagnostics

No direct services, only measures in the field of methodological coordination, drafting legislation and control.

Child friendly practices used

No direct services. Activities aiming at prevention of child abuse/neglect

Follow up after treatment/aftercare policy

Prevention is part of the legislation, which was initiated and drafted by NAPCRA. Prevention measures are included in Law no. 272/2004 on the protection and promotion of child rights and prevention models are included in Government Decision no. 49/2011, annex 1 for approval of the framework methodology for prevention and intervention through multidisciplinary team and networking in case of violence against children and family violence

Government funding

Yes

Tools used to assess the quality of (policy) service

For the institution is the internal audit. For policy is the monitoring of the national strategy for protection and promotion of child rights (in present GD no. 1113/2014).

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

Law no. 272/2004 on the protection and promotion of child rights.

Other relevant information

There is a Coordination Council in the field of protection and promotion of children's rights and adoption working with the President. The Coordination Council comprises only one representative at management level from the central institutions, Ombudsman, National Union of County Councils in Romania, Association of Directors of Directorates-General of Social Welfare and Child Protection, Federation of Non-Governmental Organizations for the Protection of the Right of the Child in Romania, National College of Social Workers in Romania, College of Psychologists in Romania and other bodies. The main duties of the Coordination Council in the field of protection and promotion of children's rights and adoption are the following: a) ensures cooperation among institutions and organizations whose representatives make up the Council, in view of carrying out the national public policy and the Government Plan in the field of protection and promotion of children's rights and adoption; b) monitors the application of law in the field of protection and promotion of children's rights and adoption and the Community acquires in the field; c) assesses the effects of the measures regarding the application of the Community acquires in the field; d) makes proposals regarding the improvement of the legal framework in the field of protection and promotion of children's rights and adoption; e) makes proposals for improving and strengthening the interinstitutional relations among public authorities involved in the field of protection and promotion of children's rights and adoption.

Other multi-agency/multi-disciplinary structures

N/A

3.20 Romania

Contact person

Daniela Buzducea

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Collaboration other actors

We collaborate with various Romanian actors both at county and national levels, such as

General Departments for Social Assistance and Child Protection, local mayor offices, social workers network, police representatives, Psychologists bodies, lawyers, School Inspectorates, Public Health Departments, various other NGOs for case referrals, information exchange, joint case management, joint planning, protocols of cooperation.

Professionals / services represented

- Social services
- Youth care
- Therapeutic staff
- Paediatrics
- Child and adolescent psychiatry
- Law enforcement institution.

Staff educated/trained

Yes, social work, mental and psychosocial support, counselling

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse (youngsters
- Peer abuse)
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers
- Child protection consultative committees in rural communities

Services provided

- Child protection assessment
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

We gather detailed info about the situation and we assess the needs, we liaise with the local partners - child protection departments, police, social workers so that we share information and coordinate our case management responsibilities. World Vision has an internal child protection reporting system where we feed in info about such cases, we continue to monitor the situation and we periodically follow-up.

Child friendly practices used

All World Vision staff receive child protection training and use child friendly techniques for all interaction with children.

Activities aiming at prevention of child abuse/neglect

Yes, various child abuse prevention, child rights awareness campaigns, Parents school, peer education

Follow up after treatment/aftercare policy

Once a case management was completed, follow-up is done in order to monitor the child is safe and protected, the family and community are protective and support the child. All info is reported through the Child protection Reporter system.

Government funding

Yes

Tools used to assess the quality of (policy) service

'All cases reported through the Child Protection Reporter system are monitored by the Child Protection specialists team in World Vision. When the child protection incident is very serious, a multi-disciplinary team is involved in the response, including psychologists, international lawyers, communication officers etc. All social services developed by World Vision are accredited by the local government through the social inspection institution.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

In the Law no. 272/2004 on the protection and promotion of child rights, section 3, the child's protection against abuse and neglect, abuse against children is defined as „any voluntary action of a person who is in a relation of responsibility, trust or authority over the child, through which the child's life and his/her physical, mental, spiritual, moral and social development as well as his/her physical integrity and physical or mental health are endangered”.

Through this statutory act one also understands „the voluntary or involuntary omission of a person responsible for raising, caring and educating the child to take any measure

subordinated to this responsibility, thus endangering the child's life, physical, mental, spiritual, moral or social development, bodily integrity, physical or mental health".

In order to base their policies, programs and initiatives on a good grasp of the phenomenon, The National Authority for Protection of Child Rights has elaborated a data collecting instrument concerning cases of abuse, exploitation and child neglect. Law no. 272/2004 on the protection and promotion of child rights, represents the core of the new legislation. This law „regulates the legal frame concerning the observance, the promotion and the guarantee of child rights" (art. 1 of the Law) and its direct beneficiaries are: Romanian citizen children who live in Romania, Romanian citizen children who live abroad; children without citizenship who live in Romania; children who request or benefit from a form of protection under the conditions of the legal regulations concerning the status and regime of refugees in Romania; foreign citizen children who live in Romania, in urgency situations (art. 3 of the Law).

The main regulations of the current legislation are the following:

- The regulation of the application of the following principles, in order to observe and guarantee child rights: equal chances and non-discrimination, insuring individual and personalized child care, multi-sectorial intervention and public-private partnership, observing the child's dignity and insuring his/her protection against any form of abuse or exploitation, listening to and considering the child's opinion, depending on his/her age and maturity, insuring stability and continuity in raising, caring and educating the child, without ignoring his/her ethnic, cultural and language origin, taking rapid decisions if a measure of protection needs to be taken, interpreting legal norms in the field in correlation with the set of related regulations;

- Regulating the obligation to observe, promote and guarantee child rights that are established by law, for public authorities, authorized private bodies, as well as for natural or legal persons who are responsible for the child's protection, in conformity with the UN Convention provisions concerning child rights and the set of principles and provisions of the conventions and international treaties that have been approved in Romania;
- Regulating the prevalence of best interest for the child not only related with any other

regulations or legal acts issued or concluded in the field, but also related with the rights and obligations of the child's parents, of his/her legal representatives, as well as any other person in the care of whom he/she has legally been placed - the prevalence of this principle is also imposed by all the actions and decisions that concern children, which are carried out by public authorities or by authorized private organizations, as well as by clauses solved by legal courts;

- The parents' responsibility will be defined as primordial in order to raise and insure the child's development - the parents have the obligation to execute their rights and fulfil their obligations to the child offering priority to the best interest of the child.

Other relevant information

World Vision Romania is an active member of the Federation of Non-governmental Organizations for Child protection in Romania.

Other multi-agency/multi-disciplinary structures

The Federation of Non-governmental Organizations for Child protection in Romania (FONPC) is the main dialogue partner of the state, specialized in developing and redefining the children welfare policy, from the child rights perspective, using and developing a coherent and comprehensive experience and expertise of its members.

<http://www.fonpc.ro>

3.21 Scotland: Stop to Listen

Contact person

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Collaboration other actors

At my project level I collaborate via the multi-agency steering group which includes Police, Social Work, Crown Office, Health, Education, Scottish Children's Reporter's Administration. Within the pilot areas I collaborate with local stakeholders across services. I also sit on the national child sexual exploitation sub group and my project forms part of the Government action plan.

I have good links with the Scottish Government who sit on the Stop to Listen Steering Group

and with other agencies such as the Crown Office Procurator Fiscal's Service who I offer training to regarding the experience of child witnesses. I will sit on various strategic groups with relevance to child protection

Staff educated/trained

Police and social workers are trained in joint investigative interviewing. Therapeutic staff/child and adolescent Psychiatry will have specific training in CBT, Counselling, systemic family therapy, EMDR etc

Kind of violence addressed

- Child abuse
- Peer abuse
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child victims of violence
- Child witnesses of violence

Services provided

- Criminal investigation
- Forensic interviewing
- Forensic examination
- Child protection assessment
- Medical examination and treatment (paediatrics)
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

'Not directly applicable as my project is more strategic in nature, this would be the task of the pathfinder areas when they have identified their test of change. In terms of child protection practice more generally, there is a Initial Referral Discussion with Police, Social Work and Health to determine the next steps.

Child friendly practices used

Social Work and Police staff are trained in joint investigative interviewing national guidance. This is based on a phased approach which is similar to the NICHD Protocol. Interviews are video recorded and there are fixed sites and mobile equipment to allow flexibility of environment. There is no consistent child friendly environment across Scotland, some fixed sites are in police stations and this will vary in different areas.

Activities aiming at prevention of child abuse/neglect

Yes, the pathfinder areas will consider prevention of child sexual abuse and exploitation

Follow up after treatment/aftercare policy

'Therapeutic support is not consistently offered across Scotland. Where this is provided this is mainly offered by NGO's with some provision in Child and Adolescent Mental Health Services. It would be dependant on referring agencies to have an awareness of what is available (or not!) locally.

Government funding

My project is funded by a Charitable Trust

Tools used to assess the quality of (policy) service

Evaluation model will be identified as part of the pathfinders

National laws/policies that oblige the existence of FOS

no

Obligated by law or further regulations

Special measures for children attending court i.e. use of CCTV link, screens, closed court etc. Police/social workers should take into account the national guidance for interviewing child witnesses. Some additional policy areas such as the Child Sexual Exploitation Action Plan and Survivors Strategy aim to provide practice standards, and a trauma training framework for the workforce.

Other relevant information

'There are many others practice guidance/ protocols which are relevant in specific areas i.e. CSE, neglect, substance misuse, FGM, trafficking etc.

Other multi-agency/multi-disciplinary structures

'Justice for Children Group which is a umbrella group of organisations which has been campaigning over several years to improve child centred responses for children who have to attend court. My organisation chairs this meeting and therefore I would be the contact for this

3.22 Slovak Republic: *National Coordination Centre for Resolving the Issues of Violence against Children*

Contact person

Mr. Karel Molin

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Collaboration other actors

On the national level, we cooperate with the aim of achieving information exchange and harmonisation of departmental policies primarily with the following entities:

- Ministry of Labour, Social Affairs and Family of the Slovak Republic
- Ministry of Education, Science, Research and Sport of the Slovak Republic
- Ministry of Interior of the Slovak Republic

Professionals / services represented

- Social services
- Youth care
- Therapeutic staff
- Paediatrics
- Prosecutors
- Police
- Judges
- Counselling. (Note to paediatrics and judges: In comparison with other professionals they are both relatively autonomous (judges in particular). Therefore, their participation on the local ground varies and in general has so far been very limited.)

Staff educated/trained

No.

Kind of violence addressed

- Child abuse
- Neglect
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
- With regard to local specificities, also drug abuse.

Works with

It is important to point out that participants of the local coordination meetings directly work with the above mentioned individuals. The Centre itself does not, as it is a coordination entity on the national level.

Services provided

n.a.

Steps taken in the fact finding practice / the assessment / diagnostics

The Centre is a coordination body and due to its competences does not engage in individual cases. Provided anyone addresses the Centre with a particular case, we may provide adequate information as to which relevant institution to turn to.

Child friendly practices used

n.a.

Activities aiming at prevention of child abuse/neglect

Yes, within the scope of the National Coordination Centre for Resolving the Issues of Violence against Children we have been conducting activities regarding raising awareness among the public (both adults and children) about the topic: - press releases and interviews, - information provided via the website specifically designated for this purpose (www.detstvobeznasilia.gov.sk) and our Facebook account (www.facebook.com/NKSpreRPNnD) - media campaign (spots on radio, TV, online tools) - competition for nurseries, primary, secondary and special schools - printed materials distributed on the local ground

Follow up after treatment/aftercare policy

N/A

Government funding

Other: The question is irrelevant as the Centre functions as an organisational structure within a governmental ministry.

Tools used to assess the quality of (policy) service

N/A

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

The core legislative framework is embedded in the Act No. 305/2005 on the Socio-legal Protection of the Child and on Social Guardianship. The Act includes provisions on measures taken regarding children, including victims of violence. It also defines obligations of the local self-government bodies regarding facilities established by them which provide services to children.

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

N/A

3.23 Slovakia:

**Naruc - Help for Children in Crisis /
Náruč - Pomoc deťom v kríze**

Contact person

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Collaboration other actors

Cooperation with child protection services at regional level: in some cases (especially in cases of children placed in our residential crisis centre) joint planning, formalized cooperation, exchange of information.

Cooperation with newly created District Child Protection Committees (the DCPC -s were created in 2015, in 46 districts, resulting from the National Strategy to Protect Children from Violence (adopted in 2014). Naruc is a member of informal advisory/consultancy group.

Cooperation with law enforcement, teachers, psychologists, paediatricians, social workers... in specific cases of abused and neglected children (exchange of information, providing interviewing room, providing safe place as well as psychological, social and legal services Cooperation with the representatives of local and regional governments (The Zilina Self-Governing Region, The City of Zilina, municipalities) - especially in the field of CAN/CSA prevention

Cooperation with national authorities like The Ministry of Labour, Social Issues and Family, The National Focal Point for the Issues of

Violence against Children...) - mostly in the field of child advocacy at the policy level (as a member of expert groups we are involved in activities aimed at creating legislation and working procedures focused on child protection (right now in the working group preparing the amendment of the law no. 305 on Social and Legal Protection of Children and Social Guardianship).

Our cooperation with partners has not been systematic, though, nor has it been carried out under one roof. We hope to achieve positive change in this within our newly created Child Advocacy Centre.

Professionals / services represented

- Social Services
- Therapeutic staff
- Paediatrics
- Lawyers
- Experts in child advocacy at policy level

Staff educated/trained

Yes. All members of our staff have achieved a university degree in relevant field (psychology, social work, law). Most of them have many years of experience working with CAN/CSA victims within our Child Crisis Centre or in their clinical practice.

Kind of violence addressed

- Child abuse
- Peer abuse
- Sexual abuse
- parental abuse is possible but mostly is addressed in the forensic chain

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Medical examination and treatment (paediatrics)
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

At the time being, various steps are taken by various institutions that have specific competencies provided by law (child protection services, law enforcement...). Typically, their steps are not coordinated. As an accredited NGO, we have limited competencies resulting

in limited range of services and procedures, e.g. a risk assessment, psycho diagnosis, therapy, social work with children and their families, accompanying children during the law enforcement procedures and at court, providing legal advice/support to children and/or their family members, providing a safe, child focused and child friendly interrogation room equipped with one-way mirror and audio / video equipment (for the purpose of police interviewing...) If we achieve the objectives of our project, we believe that our Child Advocacy Centre will create a space for providing multidisciplinary, interagency assistance to child abuse victims, similar to those run successfully abroad.

Child friendly practices used

Especially trained staff: Most members of our staff have many years of experience and most of them went through special trainings aimed at the work with child abuse victims. Our psychologists have professional training in psychotherapy as well as in the interviewing procedures and techniques. The rest of the team went through trainings on shorter basis but we plan to continue in their special education.

- Child friendly environment (a special room for interviewing children)
- Recording of interviews

Activities aiming at prevention of child abuse/neglect

We believe that prevention is the best way how to reduce child abuse. Our school-based preventive programs are designed to provide child abuse prevention and safety information to school children. They include age-level-appropriate techniques like classroom discussion, videos and other interactive activities. Our goal is to educate children about what child abuse is, make them aware of potential abusers and teach them what to do when they are abused or feel that they are vulnerable to abuse. In our preventive programs, we use different methodological approaches, both from international and our own sources, e.g. • Kiko and the Hand (Council of Europe) • How to Protect Children (Michele Elliott) • Jacob in danger (Naruc)

Follow up after treatment/aftercare policy

As far as our CAC program is concerned, we do not have special policy and practice, yet. Hopefully, it will be possible to use our expe-

rience gained in the work with clients of our Child Crisis Centre and their families. We expect that such policy and practice will be developed in cooperation with our partners/ multidisciplinary team.

Government funding

Other: At the time being the only funding we receive comes from the Velux Foundation.

Tools used to assess the quality of (policy) service

As our CAC program is a new one, we do not have special tools to assess the quality of the service. We expect that such tools will be developed in cooperation with our partners/ multidisciplinary team.

National laws/policies that oblige the existence of FOS

No

Obligated by law or further regulations

There is a code that stimulates citizens and professionals to inform Veilig Thuis when there is suspicion of child abuse or neglect. Slovak legislation includes mandatory reporting of child abuse and neglect (Law No. 300/2005 (Penal Code, § 340 includes mandatory reporting), but wording of the law makes it possible to avoid the mandatory reporting in most cases. This results in a very low rate of reporting cases of child abuse. There exist also internal directives for physicians, teachers and other professionals that oblige them to report when they suspect or know of abusive or neglectful situations. Their report may be sent to either the child protection services or a law enforcement agency (police, prosecutor). Nevertheless, these directives are very often avoided, too... Our legislation and/or other regulations do not support multidisciplinary collaboration in cases of child abuse, whether on the basis of formal protocols or other instruments.

Other relevant information

Naruc Child Advocacy Centre's main objectives: To provide a welcoming place where children suspected of being abused are interviewed by specially-trained professionals and where they and their families receive services designed to promote healing and reduce the trauma of abuse. To provide a space for multidisciplinary, interagency cooperation; To provide a safe, child focused and child friendly

space, including interrogation room equipped with one-way mirror and audio / video equipment; To create an informal platform of professionals working in the field, who are committed to contribute to creating a better and more efficient system of protection children from violence (including proposals of changes in legislation, directives and working procedures). Core staff: 2 psychologist, a social worker, supervisor/advocacy expert + external lawyer, paediatrician, child gynaecologist Expected cooperation with: Child protection services, law enforcement, paediatricians, psychologist, psychiatrists, teachers, other people/institutions involved in cases of child abuse; key actors in the field at national, regional and local levels

Other multi-agency/multi-disciplinary structures

In the light of above mentioned information it is evident that there are no formally cooperating structures working in the field on regular basis. We have already mentioned key actors using ad hoc multidisciplinary approach in processes aimed at protecting children from violence. Contacts of key actors can be found on the website of National Coordination Centre for Resolving the Issues of Violence against Children, <http://detstvobeznasilia.gov.sk/en/>. Director of the National Coordination Centre: Karel Molin E-mail: Karel.Molin@employment.gov.sk Tel: +421 918 245 849

3.24 Spain: *la Familia y el Menor, Hospital Infantil Universitario Niño Jesús*

Contact person

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Collaboration other actors

In the hospital diagnosis and treatment, working with the system of protection and judges - police, developing protocols. In the system of protection: in caring for children in protection centres and coordinating medical care. In the service program abuse: developing protocols and training courses organized training courses for different levels of care for children (health, social monetization services,

education, police, etc.) With the judicial system: organizing training with the General Council of the Judiciary. With the Observatory for Children (Ministry of Health and Social Services) developing systems for detecting, notification and registration of cases, developing strategic plans, etc. With associations: promoting awareness campaigns, training of professionals.

Professionals / services represented

- Social Services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police
- Lawyers
- Judges

Staff educated/trained

Yes, all professionals.

Kind of violence addressed

- Child abuse
- Neglect
- Parental abuse
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

Works with

- Child witnesses of violence
- Parents
- Care givers

Services provided

- Medical examination and treatment (paediatrics)
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

According to the competencies of different jobs. i.e. Hospital in the diagnosis and treatment, care and monitoring CPS.

Child friendly practices used

We believe that children should be at the centre of attention, everything must be done

according to the best interests of the child, we should try to avoid re-victimization, criterion of minimum intervention, etc.

Activities aiming at prevention of child abuse/neglect

Through awareness, training of professionals, publishing brochures.

Follow up after treatment/aftercare policy

All cases are followed up. Is required to review the cases at least every 6 months if there is intervention.

Government funding

We are part of the system of government protection. The partner associations receive funding for their work.

Tools used to assess the quality of (policy) service

The work is done in teams and being evaluated. The Prosecutor has the function of superior surveillance.

National laws/policies that oblige the existence of FOS

Yes

Obliged by law or further regulations

The Penal Code, the Civil Code, the Criminal Procedure Act, etc. required to notify, attend, protect.

Other relevant information

We consider very important work: - The works of the Child abuse attention program since 1998 and the work of the CIASI (Centre of Integral Attention child sexual abuse) since 2006

- Legislation updating. The recent Organic Law 8/2015 of 22 July and Law 26/2015, of July 28, modifying the system of protection of children and adolescents, established the register of people with condemnations of sexual offenses, the obligation not to be on record persons working with children

Other multi-agency/multi-disciplinary structures

I think is very important the work of the work of the CIASI (Centre of Integral Attention child sexual abuse). It is part of the work of my organization but this entrusted to an Association (TRAMA).

3.25 Sweden: Barnabus Linköping

Contact person

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0046-702754844

Collaboration other actors

We collaborate with public prosecutor, police, social services in nine municipalities, Children's hospital, Child- and Adolescent psychiatry, forensic medicine. We have joint consultation meetings, formally cooperation agreement, liaison group meetings every month and a steering committee.

Professionals / services represented

- Social services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police
- Lawyers
- Judges

Staff educated/trained

Yes, more or less in all of the professionals.

Kind of violence addressed

- Child abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation
- Children acting out sexually against others
- Children who witnesses violent between parents
- Genital mutilation Honour-related threat and violence

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Forensic interviewing
- Forensic examination
- Child protection assessment
- Medical examination and treatment (paediatrics)

- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

- Joint consolation meeting.
- forensic interview.
- Ev. medical examination/forensic examination. 4: Child protection assessment.
- crisis support.

Child friendly practices used

Child friendly environment, not located adjacent to any of the collaborative partners (neutral environment). All interviews are recorded since children under 15 years old don't participate in person in an eventually trial. Forensic interviews are done by specially trained police and according to NICHHD Investigation Interview Protocol (from USA and the training centre in Huntsville). Specially trained staff. Specialist Psychiatry for Children who have been physical and sexual abused and for Children acting out sexually against others.

Activities aiming at prevention of child abuse/neglect

Yes: - By spreading knowledge about the target group, in many different kind of ways.
- Information- and education meetings for personal from preschool and school. - Education aimed to social workers about interviewing children in the target group. - By our homepage: www.barnahuslinkoping.se

Follow up after treatment/aftercare policy

Mostly through evaluation and statistics, not so often individually.

Government funding

NoTools used to assess the quality of (policy) service

Statistic evaluation through a data system called Bonigi, and by looking in our documentation.

National laws/policies that oblige the existence of FOS

Yes

Obliged by law or further regulations

For example: Social services has to start protection assessments in every case regarding physical or/and sexual abuse against Children, and for Children who witness vio-

lence between parents. The assessments have a time limit. There are some time limits for the police when it comes to the preliminary investigation, for example that the Child interview should be done within two weeks. Children have the right to a special representative who is designated by the District Court. There are also other regulations from the government about Children as victims of crimes.

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

There are around 30 Barnahus in Sweden and they all look different in organisations and settings.

3.26 Sweden: Barnahus Stockholm

Contact person

Anders Forsberg
anders.forsberg@stockholm.se
0046-761225280

Collaboration other actors

Joint case management and planning with social services, the police, child- and adolescent psychiatry, prosecutors. Weekly multidisciplinary team meetings in order to exchange information and plan. There is a formal cooperation agreement between all the authorities mentioned above. Possibilities to consult the other participating authorities whenever needed.

Professionals / services represented

- Social services
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police

Staff educated/trained

Yes. The police, social services, child and adolescent psychiatry staff and paediatric staff are specialized and educated in child victims.

Kind of violence addressed

- Child abuse
- Peer abuse
- Domestic violence
- Sexual abuse
- Physical abuse exploitation
- Female genital mutilation
- Child marriage

Works with

- Child victims of violence
- Child witnesses of violence
- Parents
- Care givers

Services provided

- Criminal investigation
- Forensic interviewing
- Forensic examination
- Mental health examination
- Social work activities

Steps taken in the fact finding practice / the assessment / diagnostics

Please contact us if you want more information or not enough space.

Child friendly practices used

- Especially trained staff
- Child friendly environment
- Recording of interviews

During the child interview, other professionals such as the child protection services, prosecutors etc., watch the interview in the monitor room. The aim is that the child should not have to repeat its story many times.

Activities aiming at prevention of child abuse/neglect

No

Follow up after treatment/aftercare policy

There is no follow up from Barnahus Stockholm today. We would like to develop this.

Government funding

Yes

Tools used to assess the quality of (policy) service

Each authority are responsible for their own assessment of quality and uses adequate tools for that. There is no common quality assessment today at Barnahus Stockholm but there is a process going on for developing a kind of tool.

National laws/policies that oblige the existence of FOS

No

Obligated by law or further regulations

- Mandatory reporting to social services. All professionals working with children are mandatory to report to CPS if they think a child is at risk. - Authorities are obliged to cooperate and to share relevant information in cases of child abuse. - CPS are obliged to investigate all cases where child abuse is suspected. There are a lot more detailed regulations and legislation regarding child abuse in Sweden. Please contact us if you want more detailed information.

Other relevant information

N/A

Other multi-agency/multi-disciplinary structures

There are 30 Barnahus in Sweden.

3.27 United Kingdom: NHS England - London

Contact person

Emma Harewood
emmaharewood@nhs.net
0044-7887 895528

Collaboration other actors

'Implementation of the Child House model in London is led by a pan-London Steering group with membership including: NHS England, MOPAC, Department of Health, Crown Prosecution Service, Metropolitan Police, Director of London Clinical Commissioning Groups, Paediatricians, Mental health experts, voluntary sector representatives, public health, Royal College of Paediatricians and Child Health, Community Safety partnership. This group is chaired by an independent chair who sits on the London Safeguarding Board. Below this structure are five local steering groups with a similar attendance list as above, but from local boroughs. The steering groups are ensuring that each sector in London is developing shared care pathways and models in line with the Child House model recommendations. The providers in health, social care,

voluntary sector and police are working to set up joint services.

The information cards are sent and aggregated at the regional level by the Regional "Social Assistance" Directorate, Regional "Police" Directorates and the district administrations, and the SACP summarizes and analyzes the results at national level.

Based on the national data SACP prepares annual report on the implementation of the Coordination Mechanism and makes recommendations for optimization and improvement of cooperation in dealing with cases of child victims of abuse or risk of violence and interaction in crisis intervention.

The information is disaggregated by type of violence, gender, age, environment (in family, school, etc.) and does not contain any data which may reveal the identity of the child victim.

Professionals / services represented

- Social services
- Youth care
- Therapeutic staff
- Forensic medicine
- Paediatrics
- Child and adolescent psychiatry
- Prosecutors
- Police
- Lawyers
- Judges
- voluntary services and charities

Staff educated/trained

Some.

Kind of violence addressed

- Peer abuse
- Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
- Female genital mutilation

Works with

- Child victims of violence
- Parents
- Professionals working with children

Services provided

- Forensic interviewing
- Forensic examination
- Child protection assessment
- Medical examination and treatment (paediatrics)
- Mental health examination

Steps taken in the fact finding practice / the assessment / diagnostics

Model is currently being developed in each sector.

Child friendly practices used

- specially trained doctors and examiners in forensics and paediatrics
- specially trained child adolescent mental health teams but child sexual abuse cases currently seen by generic teams child friendly environment in some locations e.g. new paediatric Havens service from 2016, some children centres Achieving Best Evidence interviews
- specially trained police and soon to pilot with child psychologist undertaking the interviews (in paediatric Havens)
- Access to Triangle centre interviewing for complex cases.

However working to improve peer review, training, competency (through centralisation of services so >20 per year), specialist skills, interview techniques etc.

Activities aiming at prevention of child abuse/neglect

The Child House implementation programme is working towards increasing reporting and identification of victims. Once the CSA hubs or Child Houses are in place there will be a London awareness campaign and work with schools, police, social care and health professionals. Currently each borough in London has detailed plans for reduce risk of child sexual exploitation already in place and works closely with local borough police and community safety teams. Also there are many voluntary organisations and charities that support work in this area.

Follow up after treatment/aftercare policy

The review found gaps in current aftercare, and therefore we are implementing changes in London. There are approximately 12,500 children and young people that are sexually abused each year in London (estimate based on NSPCC research). Of those only 4000 children and young people report sexual abuse to the authorities in London, less than 1000 access health services for a medical examination. Then very few are able to access mental health or emotional support, as referral criteria require a diagnosis of mental illness. This leaves a significant gap for children and their families in recovery from CSA.

Government funding

Yes

Tools used to assess the quality of (policy) service

Currently all borough services are monitored by their local safeguarding children board and clinical commissioners. In future the pan-London Steering group has developed a set of indicators to better measure the outcomes of children from a health perspective and with regards to police and judicial outcomes. These indicators are being finalised now.

National laws/policies that oblige the existence of FOS

Yes

Obligated by law or further regulations

Section 47 - Children Act 1989 Working together to safeguard children Crown Prosecution guidance on prosecuting child cases ABE

interview guidance Criminal Justice Act 2003
Youth Justice and Criminal Evidence Act 1999

Other relevant information

We are currently seeking funding to deliver the Child House model in London from various government and charitable sources and will know by Spring 2016. We have applied for funding for two Child Houses with 2016/17 implementation and development of service, 2017/18 service open to children and families.

Other multi-agency/multi-disciplinary structures

We need to include a London or national judge in the steering group. There are other colleagues in the UK also working towards improving child sexual abuse services e.g. Manchester Paediatric Sexual assault referral centre, National Society for Prevention of Cruelty to Children (NSPCC).

4 Overview Tables by category

4.1 Contactperson

	Formally organized structure	Contactperson
1	Belgium: Confidential CAN Center	Erik Van Dooren erik.vandooren@vkbrussel.be
2	Bulgaria: SAPI	Prof. PhD Nelli Petrova-Dimitrova npetrova@sapibg.org
3	Croatia: Child Protection Centre of Zagreb	Gordana Buljan Flander gordana.flander@poliklinika-djeca.hr +38513436576
4	Cyprus: Social Welfare Services	Director of Social Welfare Services director@sws.mlsi.gov.cy +35722406602
5	Estonia: Children's Mental Health Centre	Joanna Karu joanna.karu@sm.ee +447887895528
6	Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot	Minna Sinkkonen minna.sinkkonen@thl.fi +358295247032
7	Germany World Childhood Foundation	Andrea Möhringer andrea.moehringer@childhood.org
8	Hungary: ESZTER Foundation	György Virág gyuri.virag@gmail.com +36309628286
9	Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider	Tímea Tóth szocialis.egyesulet@gmail.com +36 94 331-375 / +36 30 2682522
10	Iceland: Barnahus	Ólöf Ásta Farestveit olof@barnahus.is +3545302500
11	Latvia: Establishment CentreDardedze, NGO	Laura Celmale laura.celmale@centrsdardedze.lv +37167600685
12	Latvia: Ministry of Welfare	Mr. Lauris Neikens Lauris.Neikens@lm.gov.lv +371 26406129
13	Lithuania: A Help Centre for children, who were victims of sexual abuse	Gyte Bekstiene gyte.bekstiene@uzuoveja.lt +37068677858

	Formally organized structure	Contactperson
14	Lithuania: Republic of Lithuania Ministry of Social security and Labour	Dainora Bernackiene dainora.bernackiene@soc-min.lt 0046-761225280
15	Malta: Foundation for Social Welfare Services	Ms. Ruth Sciberras ruth-rose.sciberras@gov.mt +356-22959273
16	The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)	Janet van Bavel vbavel@kenterjeugdhulp.nl +31653953941
17	Netherlands: Stichting Fier	Anke van Dijk directie@fier.nl 00316-33747615
18	Poland: Nobody's Children Foundation	Maria Keller-Hamela maria.keller-hamela@fdn.pl +48226160268
19	Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)	Adina Codres adina.codres@anpfdc.ro
20	Romania	Daniela Buzducea Daniela_Buzducea@wvi.org 004021-2229101
21	Scotland: Stop to listen	Ruth Sills ruth.sills@children1st.org.uk
22	Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children	Mr. Karel Molin karel.molin@employment.gov.sk 00421-22046 2718
23	Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze	Mara Leitmanova oz.naruc@naruc.sk +421907038969
24	Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesús	José A. Díaz Huertas jdiazh@salud.madrid.org +34606005426
25	Sweden: Barnahus Linköping	Anna Petersson and Anna Nelson anna.m.petersson@regionostergotland.se 0046-702754844
26	Sweden: Barnahus Stockholm	Anders Forsberg anders.forsberg@stockholm.se 0046-761225280
27	United Kingdom: NHS England - London	Emma Harewood emmaharewood@nhs.net 0044-7887 895528

4.2 “Collaboration other actors” by formally organized structure

1. **Belgium: Confidential CAN Center**

“Integrated Youth Care” is the Flemish framework in which several services working with minors are involved, collaborate and share information. In some case it is also possible for information exchange and joint case management with legal services

2. **Bulgaria: SAPI**

Based on the National Agreement for action in case of violence against a child, when a signal is registered a working meeting on local level is carried out up to 24 hours after the signal. No later than one hour after the signal an examination of the case is launch by the Department of Child Protection /DCP/ that manages the case. In the six cities in which we operate we are members of the working group and, usually, immediately at the first meeting we start with information on the rights and the assessment of the child and the family. The assessment is done according to an agreed framework. The assessment is a process and starts with an initial assessment, which shows the needs for protection, medical treatment, willingness to participate in legal proceedings and needs for special measures of protection as friendly environment, interviewing by specially trained psychologist or social worker based on special methodology (protocol), etc. The assessment continues with identifying the needs for psychotherapy and social support of the child and the family.

3. **‘Croatia: Child Protection Centre of Zagreb**

The work of the Center is based on the understanding that effective child protection can be achieved only through collaboration between different institutions of the child protection system. This is achieved through:

- exchanging information with institutions involved in the individual case (e.g. educational institutions, residential care facilities, social services, police)
- reporting violations of children’s rights to relevant institutions (e.g. social services, police, state attorney) - in Croatia reporting is mandatory and
- developing specific recommendations for educational institutions, with the aim of supporting the adjustment of the child following national protocols which determine a standardized procedure in protecting child victims and witnesses for all authorities and institutions involved conducting forensic interviews within clinical assessments, and sharing information obtained in the interviews with relevant institutions (all of the Center’s professionals working with children are trained in forensic interviewing)
- conducting forensic evaluations at the order of the court, done by specially trained professionals
- collaboration with judges during the court proceedings
- encouraging judges to conduct forensic interviews on the Center’s premises with a specially trained expert interviewing the child, respecting the child’s age, developmental level, emotional state and characteristics of the child, with an aim of reducing the risk of retraumatization due to repeated interviews in multiple settings. The child is being interviewed in one room, with all involved parties observing the interview from another room connected via video link, that can ask questions through the Center’s expert.
- besides interagency collaboration, the work of the Center includes intra-agency cooperation, with regular information exchange, joint case management and planning, multidisciplinary team meetings and work supervision

4. **Cyprus: Social Welfare Services**

By legislation, the Social Welfare Services are required to coordinate all actors involved in child victim protection/support (e.g. through multidisciplinary meetings). Actors include the Police, the Child Mental Health Services, the Service for Educational Psychology and the School.

5. **Estonia: Children’s Mental Health Centre**

No.

6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot**
Information exchange and protocols of cooperation. The Federation of mother and child homes and shelters and Pilot area mother and child home as well as Victim Support (NGO).
7. **Germany: World Childhood Foundation**
'At the moment we collaborate through Information Exchange and Joint planning with strategically important partners in Germany as
 - the Independent Commissioner Johann Wilhelm Rörig
 - the Monitoring Authority for children's rights
 - the Federal Centre for Health Education
 - the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth'
8. **Hungary: ESZTER Foundation**
Giving supervision to the professionals of and accepting referrals from the child protection system and victim support service, participating in case conferences, joint projects.
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
Through information exchange: Pálos Károly Family Support and Child Welfare Services, local Child Protection Services (TEGYESZ), local and district legal guardian authorities, city and district criminal investigation judges, juvenile prosecutors, patrons' network, professional guardians, foster parents' network, paediatrician, city and county health visitors' network, schools' psychologist, school counselling services, Child Neuroscience Centre, State Victim Support Office.
10. **Iceland: Barnahus**
The activities are based on a partnership between the State Police, the State Prosecution, the University Hospital and the local child protection services as well as the Government Agency for Child Protection which is responsible for its operation.
11. **Latvia: Establishment Centre Dardedze, NGO**
 1. CSTATE institutions: In legislation working groups by Ministry of Welfare, Ministry of Justice, Parliamentary Human Rights Commission etc.
 2. As an NGO we organize national expert council for mapping and situation analysis on how child rights are respected in practice during criminal proceedings
 3. Municipalities: In various projects we are working together with different municipalities developing a child and family-friendly environment for the effective prevention of violence
 4. OTHER NGO's: we are involved in the child welfare network where different organizations work together on improving cooperation in the field of child protection
12. **Latvia: Ministry of Welfare**
The Ministry of Welfare is providing state financing for the social rehabilitation services for children who have become victims of illegal actions (including violence), trafficking in human beings as well as for adult members of the family who have become victims of violence as well as for perpetrators who have committed violent acts in the family. It means that the state is cooperating with private service providers who are providing those state funded services. To monitor how the service providers are providing those services the ministry is regularly requesting information from them - both personalized information and statistical data. The Ministry of Welfare is also organizing yearly seminars for local government social services where topical matters are being discussed. The Ministry of Welfare has a good cooperation with a number of NGOs working in the field such as foundation "Centrs "Dardedze"". Foundation "Centrs "Dardedze"" has established a National Expert Council in order to assess the necessary improvements in the system for the protection and support of minors who are victims of sexual violence and abuse and how to introduce good practice examples such as "Barnahus".
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
We collaborate with a partner - Government Agency for Child Protection in Iceland "Barnaverndarstofa", with BARNAHUS in Iceland. The people who work in Iceland BARNAHUS - are one of the main lectures in Lithuania for people who will be working in the centre in Lithuania. We also collaborate with MR.BRAGI GUDBRANSSON. He is also one of the main lectures in Lithuania.

14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
The Ministry collaborates with other institutions, NGO and others through information exchange, protocols of cooperation etc.
15. **Malta: Foundation for Social Welfare Services**
The Foundation works closely with the International Social Services. Internally, the Foundation has a large number of protocols, exchange information, have joint case management and design joint care plans. The Foundation also has a large number of protocols and exchange information with external entities such as education, health, police, probation and parole, justice system, NGOs amongst others.
16. **The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
We exchange information, are making one integrated action plan in cases of child abuse and maltreatment with one case manager and joint case action; we have a protocol of cooperation and are planning scientific research on this method. Partners: police, prosecution, child protection board, Veilig Thuis, child and adult psychiatry, forensic psychiatry, paediatricians, youth care including specialized youth care for mentally restricted children and/or parents, child protection services. Education, welfare and youth health are joining in the second shell
17. **Netherlands: Stichting Fier**
Public prosecution, police, hospital (including paediatricians), mental health, addiction care, forensic care, social teams working in neighbourhoods and districts, education, Safe Home (Veilig Thuis), the Safety House, child welfare, the certified institution, court.
18. **Poland: Nobody's Children Foundation**
National Police Headquarters, Social Services, Interdisciplinary team.
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
47 General Departments for Social Assistance and Child Protection, ministries and other governmental institutions, NGOs, professional associations (social workers, psychologists and medical doctors)
Collaboration is according to the role of NAPRCA.
20. **Romania: World Vision**
We collaborate with various Romanian actors both at county and national levels, such as General Departments for Social Assistance and Child Protection, local mayor offices, social workers network, police representatives, Psychologists bodies, lawyers, School Inspectorates, Public Health Departments, various other NGOs for case referrals, information exchange, joint case management, joint planning, protocols of cooperation.
21. **Scotland: Stop to listen**
At my project level I collaborate via the multi-agency steering group which includes Police, Social Work, Crown Office, Health, Education, Scottish Children's Reporter's Administration. Within the pilot areas I collaborate with local stakeholders across services. I also sit on the national child sexual exploitation sub group and my project forms part of the Government action plan.
I have good links with the Scottish Government who sit on the Stop to Listen Steering Group and with other agencies such as the Crown Office Procurator Fiscal's Service who I offer training to regarding the experience of child witnesses. I will sit on various strategic groups with relevance to child protection
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
On the national level, we cooperate with the aim of achieving information exchange and harmonisation of departmental policies primarily with the following entities:
 - Ministry of Labour, Social Affairs and Family of the Slovak Republic
 - Ministry of Education, Science, Research and Sport of the Slovak Republic
 - Ministry of Interior of the Slovak Republic
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
Cooperation with child protection services at regional level: in some cases (especially in cases of children placed in our residential crisis centre) joint planning, formalized cooperation, exchange of information. Cooperation with newly created District Child Protection Committees (the DCPC -s were

created in 2015, in 46 districts, resulting from the National Strategy to Protect Children from Violence (adopted in 2014). Naruc is a member of informal advisory/consultancy group. Cooperation with law enforcement, teachers, psychologists, paediatricians, social workers...in specific cases of abused and neglected children (exchange of information, providing interviewing room, providing safe place as well as psychological, social and legal services Cooperation with the representatives of local and regional governments (The Zilina Self-Governing Region, The City of Zilina, municipalities) - especially in the field of CAN/CSA prevention Cooperation with national authorities like The Ministry of Labour, Social Issues and Family, The National Focal Point for the Issues of Violence against Children...) - mostly in the field of child advocacy at the policy level (as a member of expert groups we are involved in activities aimed at creating legislation and working procedures focused on child protection (right now in the working group preparing the amendment of the law no. 305 on Social and Legal Protection of Children and Social Guardianship). Our cooperation with partners has not been systematic, though, nor has it been carried out under one roof. We hope to achieve positive change in this within our newly created Child Advocacy Centre.

24. Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesus

In the hospital diagnosis and treatment, working with the system of protection and judges - police, developing protocols. In the system of protection: in caring for children in protection centres and coordinating medical care. In the service program abuse: developing protocols and training courses organized training courses for different levels of care for children (health, social monetization services, education, police, etc.) With the judicial system: organizing training with the General Council of the Judiciary. With the Observatory for Children (Ministry of Health and Social Services) developing systems for detecting, notification and registration of cases, developing strategic plans, etc. With associations: promoting awareness campaigns, training of professionals.

25. Sweden: Barnahus Linköping

We collaborate with public prosecutor, police, social services in nine municipalities, Children's hospital, Child- and Adolescent psychiatry, forensic medicine. We have joint consultation meetings, formally cooperation agreement, liaison group meetings every month and a steering committee.

26. Sweden: Barnahus Stockholm

Joint case management and planning with social services, the police, child- and adolescent psychiatry, prosecutors. Weekly multidisciplinary team meetings in order to exchange information and plan. There is a formal cooperation agreement between all the authorities mentioned above. Possibilities to consult the other participating authorities whenever needed.

27. United Kingdom: NHS England - London

'Implementation of the Child House model in London is led by a pan-London Steering group with membership including: NHS England, MOPAC, Department of Health, Crown Prosecution Service, Metropolitan Police, Director of London Clinical Commissioning Groups, Paediatricians, Mental health experts, voluntary sector representatives, public health, Royal College of Paediatricians and Child Health, Community Safety partnership. This group is chaired by a independent chair who sits on the London Safeguarding Board

Below this structure are five local steering groups with a similar attendance list as above, but from local boroughs. The steering groups are ensuring that each sector in London is developing shared care pathways and models in line with the Child House model recommendations. The providers in health, social care, voluntary sector and police are working to set up joint services.

The information cards are sent and aggregated at the regional level by the Regional "Social Assistance" Directorate, Regional "Police" Directorates and the district administrations, and the SACP summarizes and analyzes the results at national level.

Based on the national data SACP prepares annual report on the implementation of the Coordination Mechanism and makes recommendations for optimization and improvement of cooperation in dealing with cases of child victims of abuse or risk of violence and interaction in crisis intervention.

The information is disaggregated by type of violence, gender, age, environment (in family, school, etc.) and does not contain any data which may reveal the identity of the child victim.

4.3 “Professionals / Services represented” by country / region

1. **Belgium: Confidential CAN Center**
 - Social services
 - psychologists
 - educational scientists,
 - doctors
2. **Bulgaria: SAPI**
Which professionals and/or services are represented in/working within the formally organized structure?
 - Social services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry - on request of the prosecutor or the court
 - Prosecutors
 - Police
 - Lawyers
 - Judges
3. **Croatia: Child Protection Centre of Zagreb**
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Lawyers
 - Paediatrician
 - Speech therapist
4. **Cyprus: Social Welfare Services**
 - Social Services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
 - Lawyers
 - Judges
 - Educational Psychologists, Schools
5. **Estonia: Children’s Mental Health Centre**
 - Social Services
 - Therapeutic staff
 - Child and adolescent psychiatry
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
 - Social Services
7. **Germany: World Childhood Foundation**
‘Since we are a foundation supporting projects, there are neither professionals nor services within our structure’
8. **Hungary: ESZTER Foundation**
 - Therapeutic staff
 - Child and adolescent psychiatry
 - Lawyers
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
 - Social Services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Sociologists
10. **Iceland: Barnahus**
 - Social Services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
 - Lawyers
 - Judges
11. **Latvia: Establishment Centre Dardedze, NGO**
 - Social Services
 - Youth care
 - Therapeutic staff
 - Police
 - Lawyers
 - Psychologist
12. **Latvia: Ministry of Welfare**
 - Social Services
 - Therapeutic staff
 - Forensic medicine
 - Lawyers

- Psychologist, local governments, child protection services (also called orphan's court); child care institution, prison, social correction educational institution, parents, guardians, foster families, NGO "Children's Fund", respective service provider
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
 - Social Services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
 - Lawyers
 - Judges
 14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
 - Law enforcement institution
 15. **Malta: Foundation for Social Welfare Services**
 - Social services
 - Youth care
 - Therapeutic staff
 - The foundation also has a number of residential homes.
 16. **The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
 - Social Services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
 17. **Netherlands: Stichting Fier**
 - Social services
 - Youth care
 - Therapeutic staff
 - Child and adolescent psychiatry
 -
 18. **Poland: Nobody's Children Foundation**
 - Therapeutic staff
 - Child and adolescent psychiatry
 - Prosecutors
 - Lawyers
 - Judges
 - Forensic psychologists
 19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
 - Therapeutic staff
 - Paediatrics
 - Social workers, legal counsellor
 20. **Romania: World Vision**
 - Social services
 - Youth care
 - Therapeutic staff
 - Paediatrics
 - Child and adolescent psychiatry
 - Law enforcement institution.
 21. **Scotland: Stop to listen**
 - Social Services
 - Youth Care
 - Therapeutic staff
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
 22. **Slovak Republic: National Coordination centre for Resolving the Issues of Violence against Children**
 - Social services
 - Youth care
 - Therapeutic staff
 - Paediatrics
 - Prosecutors
 - Police
 - Judges
 - Counselling. (Note to paediatrics and judges: In comparison with other professionals they are both relatively autonomous (judges in particular). Therefore, their participation on the local ground varies and in general has so far been very limited.)
 23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
 - Social Services
 - Therapeutic staff
 - Paediatrics
 - Lawyers
 - Experts in child advocacy at policy level
 24. **Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesus**
 - Social Services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics

- Child and adolescent psychiatry
 - Prosecutors
 - Police
 - Lawyers
 - Judges
25. **Sweden: Barnahus Linköping**
- Social services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
 - Lawyers
 - Judges
26. **Sweden: Barnahus Stockholm**
- Social services
- Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
27. **United Kingdom: NHS England - London**
- Social services
 - Youth care
 - Therapeutic staff
 - Forensic medicine
 - Paediatrics
 - Child and adolescent psychiatry
 - Prosecutors
 - Police
 - Lawyers
 - Judges
 - voluntary services and charities

4.4 “Staff educated / training” by formally organized structure

1. **Belgium: Confidential CAN Center**
Yes, therapeutic (systemic point of view) and forensic (confidential doctors)
2. **Bulgaria: SAPI**
Yes
3. **Croatia: Child Protection Centre of Zagreb**
The professionals working at our Center are specially educated in:
 - child development
 - understanding the phenomenon of child abuse and neglect, as well as signs, short-term and longterm consequences of child abuse and neglect
 - building rapport with a child, conducting clinical and forensic assessments with children who were exposed to different forms of traumatic events - this includes identifying abuse/neglect, assessing the consequences of traumatic events and the needs of the child, child friendly approach, writing reports
 - providing different forms of psychotherapy (trauma focused cognitivebehavioral therapy, play therapy, cognitivebehavioral therapy, Gestalt therapy, psychoanalysis, transactional analysis and/or systemic therapy)
 - conducting forensic interviews with traumatized children
4. **Cyprus: Social Welfare Services**
No
5. **Estonia: Children’s Mental Health Centre**
No.
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
Yes, interviewing.
7. **Germany: World Childhood Foundation**
No
 - understanding of the legal context and requirements
 - identifying risk factors and supporting families at risk with the aim of preventing child abuse and/or neglect
 - supporting nonabusive parents
 - Center’s experts are involved in regular supervision where specific cases are discussed, as well as professional and personal challenges and ethical dilemmas in working with children victims and/or witnesses of violence.
 - Child abuse
 - Peer abuse
 - Sexual abuse

- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
8. **Hungary: ESZTER Foundation**
clinical psychology
 9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
Yes, 3 persons were trained in giving support to victims of violence and victims protection, 2 persons were trained in the prevention of sexual abuse of children
 10. **Iceland: Barnahus**
Yes, everyone except project manager
 11. **Latvia: Establishment Centre Dardedze, NGO**
Child abuse, all forms of violence, children's rights
 12. **Latvia: Ministry of Welfare**
The personnel is trained according to the program on the special knowledge in the field of the protection of the rights of the child
 13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
Yes, they are educated and training now in everything.
 14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
Yes. The police, social services, child and adolescent psychiatry staff and paediatric staff are specialized and educated in child victims.
 15. **Malta: Foundation for Social Welfare Services**
Yes, social work, family therapy and psychotherapists mainly.
 16. **The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
In diagnostic research, safety planning, therapy and system approach.
 17. **Netherlands: Stichting Fier**
Yes, in Infant mental health, child and youth trauma treatment
 18. **Poland: Nobody's Children Foundation**
Yes: prevention, intervention, therapy, interviewing
 19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
Few, yes.
 20. **Romania: World Vision**
Yes, social work, mental and psychosocial support, counselling
 21. **Scotland: Stop to listen**
Police and social workers are trained in joint investigative interviewing.
Therapeutic staff/child and adolescent Psychiatry will have specific training in CBT, Counselling, systemic family therapy, EMDR etc
 22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
No.
 23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
Yes. All members of our staff have achieved a university degree in relevant field (psychology, social work, law). Most of them have many years of experience working with CAN/CSA victims within our Child Crisis Centre or in their clinical practice.
 24. **Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesús**
Yes, all professionals.
 25. **Sweden: Barnahus Linköping**
Yes, more or less in all of the professionals.
 26. **Sweden: Barnahus Stockholm**
Yes. The police, social services, child and adolescent psychiatry staff and paediatric staff are specialized and educated in child victims.
 27. **United Kingdom: NHS England - London**
Some.

4.5 “Kind of violence addressed” by formally organized structure

1. **Belgium: Confidential CAN Center**
 - Child abuse
 - Neglect
 - Peer abuse
 - Domestic violence
 - Sexual abuse
2. **Bulgaria: SAPI**
 - Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
 - Other,, interviewing children; social case work; resilience; therapeutic approach;
 - systematic approach in work with families; conducting group work and therapeutic workshops
3. **Croatia: Child Protection Centre of Zagreb**
 - Center’s experts are involved in regular supervision where specific cases are discussed, as well as professional and personal challenges and ethical dilemmas in working with children victims and/or witnesses of violence.
 - Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
4. **Cyprus: Social Welfare Services**
 - Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
5. **Estonia: Children’s Mental Health Centre**
 - Child abuse
 - Neglect
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
 - Child abuse
 - Neglect
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

These target groups are covered, but only from the psychiatrically point of view with collaboration with the social and education sector to provide the child with best possible care but there is no concrete specialization.
7. **Germany: World Childhood Foundation**
 - Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse
8. **Hungary: ESZTER Foundation**
 - Child abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
 - Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
10. **Iceland: Barnahus**
 - Child abuse
 - Neglect

- Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
11. **Latvia: Establishment Centre Dardedze, NGO**
- Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
12. **Latvia: Ministry of Welfare**
- Child abuse
 - Neglect
 - Peer abuse
 - Domestic violence
 - Sexual abuse Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse Kind of violence addressed**
- Child abuse
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution)
14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
- Child abuse
 - Neglect
 - Parental abuse (youngsters abusing parents)
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation
 - Abandoned children
15. **Malta: Foundation for Social Welfare Services**
- Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
- Domestic violence
 - Sexual abuse
16. **The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
- Child abuse
 - Neglect
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation
 - Parental abuse is possible, but mostly is addressed in the forensic chain
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
 - Cyber bullying, Helpline
17. **Netherlands: Stichting Fier**
- Child abuse
 - Neglect
 - Parental abuse (youngsters abusing parents)
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation
 - Honour related violence
 - Genital mutilation
 - Abuse of elderly people
 - Violent/abusive divorce
18. **Poland: Nobody's Children Foundation**
- Child abuse
 - Neglect
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
- Child abuse
 - Neglect
 - Peer abuse
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).

- Female genital mutilation and child marriage
20. **Romania: World Vision**
- Child abuse
 - Neglect
 - Parental abuse (youngsters
 - Peer abuse)
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
21. **Scotland: Stop to listen**
- Child abuse
 - Peer abuse
 - Sexual abuse
 - Physical abuse
 - Exploitation
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
- Child abuse
 - Neglect
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
 - With regard to local specificities, also drug abuse.
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
- Child abuse
 - Peer abuse
 - Sexual abuse
 - parental abuse is possible but mostly is addressed in the forensic chain
24. **Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesus**
- Child abuse
 - Neglect
 - Parental abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
- Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
25. **Sweden: Barnahus Linköping**
- Child abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation
 - Children acting out sexually against others
Children who witnesses violent between parents
 - Genital mutilation Honour-related threat and violence
26. **Sweden: Barnahus Stockholm**
- Child abuse
 - Peer abuse
 - Domestic violence
 - Sexual abuse
 - Physical abuse exploitation
 - Female genital mutilation
 - Child marriage
 - Care givers
27. **United Kingdom: NHS England - London**
- Peer abuse
 - Sexual abuse
 - Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
 - Female genital mutilation

4.6 “Works with” by formally organized structure

1. **Belgium: Confidential CAN Center**
 - Child protection assessment
 - Medical examination and treatment
 - Social work activities
2. **Bulgaria: SAPI**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
3. **Croatia: Child Protection Centre of Zagreb**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
4. **Cyprus: Social Welfare Services**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
 - Residential care
5. **Estonia: Children’s Mental Health Centre**
Child victims of violence
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
7. **Germany: World Childhood Foundation**
 - Child victims
 - Child witnesses of violence
 - Parents
 - Care givers
 - ‘As a foundation, we support projects
8. **Hungary: ESZTER Foundation**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
10. **Iceland: Barnahus**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
 - Family members
11. **Latvia: Establishment Centre Dardedze, NGO**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
 - Educational work for professionals who work with children, preventive programs for young children and teens
12. **Latvia: Ministry of Welfare**
 - State and local government institutions
 - NGOs
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
 - Children who committed a crime

15. **Malta: Foundation for Social Welfare Services**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
 - Adolescents, victims of Domestic Violence and Human Trafficking
16. **The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
17. **Netherlands: Stichting Fier**

Child victims of violence

 - Child witnesses of violence
 - Parents
 - Care givers
18. **Poland: Nobody's Children Foundation**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**

Professionals
20. **Romania: World Vision**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
 - Child protection consultative committees in rural communities
21. **Scotland: Stop to listen**
 - Child victims of violence
 - Child witnesses of violence
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**

It is important to point out that participants of the local coordination meetings directly work with the above mentioned individuals. The Centre itself does not, as it is a coordination entity on the national level.
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
24. **Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesús**
 - Child witnesses of violence
 - Parents
 - Care givers
25. **Sweden: Barnahus Linköping**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
26. **Sweden: Barnahus Stockholm**
 - Child victims of violence
 - Child witnesses of violence
 - Parents
 - Care givers
27. **United Kingdom: NHS England - London**
 - Child victims of violence
 - Parents
 - Professionals working with children

4.7 “Services provided” by formally organized structure

1. **Belgium: Confidential CAN Center**
 - Child Protection Assessment
 - Medical examination and treatment
 - Mental health examination
 - Social work activities
2. **Bulgaria: SAPI**
 - Forensic interviewing
 - Medical examination and treatment
 - Social Work activities
3. **Croatia: Child Protection Centre of Zagreb**
 - Forensic interviewing
 - Forensic examination
 - Child protection assessment
 - Medical examination and treatment (paediatrics)
 - Mental health examination
 - Social work activities
4. **Cyprus: Social Welfare Services**
 - Child protection assessment
 - Social work activities
5. **Estonia: Children’s Mental Health Centre**
 - Mental health examination
 - Social work activities
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
 - Criminal investigation
 - Forensic interviewing
 - Forensic examination
 - Child protection assessment
 - Mental health examination
7. **Germany: World Childhood Foundation**
 - Mental health
 - Social work activities
 - Other
8. **Hungary: ESZTER Foundation**
 - Medical examination and treatment
 - Social work activities
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
 - Forensic examination
 - Child protection assessment
 - Mental health examination
 - Social work activities
10. **Iceland: Barnahus**
 - Forensic interviewing
 - Mental health examination
 - Social work activities
11. **Latvia: Establishment Centre Dardedze, NGO**
 - Forensic interviewing
 - Forensic examination
 - Social work activities
12. **Latvia: Ministry of Welfare**
 - Social work activities
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
 - Child protection assessment
 - Medical examination and treatment (paediatrics)
 - Mental health examination
 - Social work activities
14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
 - Social work activities
15. **Malta: Foundation for Social Welfare Services**
 - Child protection assessment
 - Medical examination and treatment (paediatrics)
 - Mental health examination
 - Social work activities
16. **The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
 - Criminal Investigation
 - Forensic Interviewing
 - Forensic Examination
 - Child protection assessment
 - Medical examination and treatment (paediatrics)
17. **Netherlands: Stichting Fier**
 - Mental health examination
 - Social work activities
18. **Poland: Nobody’s Children Foundation**
 - Forensic interviewing
 - Child protection assessment
 - Mental health examination
 - Social work activities

19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
Other
20. **Romania: World Vision**
 - Child protection assessment
 - Social work activities
21. **Scotland: Stop to listen**
 - Criminal investigation
 - Forensic interviewing
 - Forensic examination
 - Child protection assessment
 - Medical examination and treatment
 - Mental health examination
 - Social work activities
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
n.a.
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
 - Medical examination and treatment (paediatrics)
 - Social work activities
24. **Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesús**
 - Medical examination and treatment (paediatrics)
 - Mental health examination
 - Social work activities
25. **Sweden: Barnahus Linköping**
 - Forensic interviewing
 - Forensic examination
 - Child protection assessment
 - Medical examination and treatment (paediatrics)
 - Mental health examination
 - Social work activities
26. **Sweden: Barnahus Stockholm**
 - Criminal investigation
 - Forensic interviewing
 - Forensic examination
 - Mental health examination
 - Social work activities
27. **United Kingdom: NHS England - London**
 - Forensic interviewing
 - Forensic examination
 - Child protection assessment
 - Medical examination and treatment (paediatrics)
 - Mental health examination

4.8 “Steps taken in the fact finding practice / the assessment / diagnostics” by formally organized structure

1. **Belgium: Confidential CAN Center**
n.a.
2. **Bulgaria: SAPI**
“ Usually we start the work with informing the child and / or the family and/or the representative about the rights related to the particular situation, depending on who sends the case and at what stage it is. The next step is to assess the child’s needs and to plan the activities for support, work with the family, etc. We make a review of the case together with the client and the DCP representatives”
3. **Croatia: Child Protection Centre of Zagreb**
The child is referred to the Centre by the police and/or social services, or is brought by concerned parent/caregiver, sometimes following a recommendation of a child’s school, kindergarten, health professional or others. A multidisciplinary team assessment is made, tailored according to the individual needs of the child and specifics of the case. The available experts include: psychologists, psychiatrists, neurological paediatrician, social workers, special educators, speech therapists and a lawyer. All of the experts working with children are trained in forensic interviewing. In cases of child victims and witnesses the team assessment includes a forensic interview, which is conducted by a single professional, in order to avoid retraumatization by repeated questioning. The assessment also includes gathering relevant information from other institutions. Based on assessment results, multidisciplinary team chooses and plans the treatment, according to the needs of the individual child and his family, provides recommendations for other institutions if needed, and informs relevant institutions about any violations of the child’s rights. Some of our professionals are also court experts, and conduct forensic evaluations at the order of court.

4. **Cyprus: Social Welfare Services**
Home visit, interviewing with the child/parents, referral and coordination with stakeholders, mobilising process of issuing of restriction/child removal order if child is in danger etc.
5. **Estonia: Children's Mental Health Centre**
The child psychologist have been trained to conduct the preliminary interview to detect possible child sexual abuse.
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot**
Risk assessment/background information gathering and then a multi-professional working group if deemed necessary.
7. **Germany: World Childhood Foundation**
In Germany, there is no Barnahus/CAC-modell established yet.
8. **Hungary: ESZTER Foundation**
Interview.
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
 - based on individual report record has been taken it is a must to report the case directly to the police by the individual (private prosecution)
 - the case is investigated by the Family Support and Child Welfare Services provider
 - prepare an interview with the child (first social worker, second the official psychologist and then the therapist. Following that, the interview series followed by the police, paediatrician, 3-4 more cases by the forensic psychologists
10. **Iceland: Barnahus**
CPS sends referrals to Barnahus and the therapist does the assessment and treatment.
11. **Latvia: Establishment Centre Dardedze, NGO**
For purposes of criminal proceedings we provide video of the child interviews. At the request of the national police force we provide psychological studies for child victims and prepare Psychologist's Opinion for criminal proceedings.
12. **Latvia: Ministry of Welfare**
Psychologists or social worker provides an opinion whether a child needs social rehabilitation; the opinion is provided according to the application of the victim's parent, guardian, the head of an institution (where the child resides), foster family or orphan's court
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
I just can write formally what are the plans to do, because as I mentioned we'll be opened just in April in 2016.
14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
The Ministry while elaborating the programme "Children and Youth at Risk" under the European Economic Area Financial Mechanism is planning to implement a measure "The Establishment of Help Centre for victims of sexual exploitation and sexual abuse of children." The centre will provide integrated assistance (psychological, social, legal, medical). The project aims to strengthen cooperation among the specialists from different departments. Training for specialists working with child victims of sexual abuse and their families has already started.
15. **Malta: Foundation for Social Welfare Services**
Investigation, Assessment, Interventions and Therapy.
16. **The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
When a child is referred to the centre mostly Veilig Thuis checks the known information and asks for further information from school, the family doctor and other persons in the direct network around the child and the family. After that the team meets and makes a plan of investigation and help. Often there is a risk assessment with parents and family, the child gets a medical and mental health examination and a forensic interview if necessary (in that case we mostly start with the interview unless there is physical harm than the paediatrician is the first one to see the child. After the examination a further action plan is made. Safety of the child is always the first issue.
17. **Netherlands: Stichting Fier**
Our organisation does not engage in fact finding practices. Most clients are diagnosed with trauma or trauma related problems.

18. **Poland: Nobody's Children Foundation**
Psychological assessment, contacts with other institution which can have info about the child's situation
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
No direct services, only measures in the field of methodological coordination, drafting legislation and control.
20. **Romania: World Vision**
We gather detailed info about the situation and we assess the needs, we liaise with the local partners - child protection departments, police, social workers so that we share information and coordinate our case management responsibilities. World Vision has an internal child protection reporting system where we feed in info about such cases, we continue to monitor the situation and we periodically follow-up.
21. **Scotland: Stop to listen**
'Not directly applicable as my project is more strategic in nature, this would be the task of the pathfinder areas when they have identified their test of change. In terms of child protection practice more generally, there is a Initial Referral Discussion with Police, Social Work and Health to determine the next steps.
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
The Centre is a coordination body and due to its competences does not engage in individual cases. Provided anyone addresses the Centre with a particular case, we may provide adequate information as to which relevant institution to turn to.
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
At the time being, various steps are taken by various institutions that have specific competencies provided by law (child protection services, law enforcement...). Typically, their steps are not coordinated. As an accredited NGO, we have limited competencies resulting in limited range of services and procedures, e.g. a risk assessment, psycho diagnosis, therapy, social work with children and their families, accompanying children during the law enforcement procedures and at court, providing legal advice/support to children and/or their family members, providing a safe, child focused and child friendly interrogation room equipped with one-way mirror and audio / video equipment (for the purpose of police interviewing...) If we achieve the objectives of our project, we believe that our Child Advocacy Centre will create a space for providing multidisciplinary, interagency assistance to child abuse victims, similar to those run successfully abroad.
24. **Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesus**
According to the competencies of different jobs. i.e. Hospital in the diagnosis and treatment, care and monitoring CPS.
25. **Sweden: Barnahus Linköping**
 - Joint consolation meeting.
 - Forensic interview.
 - Ev. medical examination/forensic examination.
 - Child protection assessment.
 - Crisis support.
26. **Sweden: Barnahus Stockholm**
Please contact us if you want more information not enough space.
27. **United Kingdom: NHS England - London**
Model is currently being developed in each sector.

4.9 “Child friendly practices used” by formally organized structure

1. **Belgium: Confidential CAN Center**
N/A
2. **Bulgaria: SAPI**
“ We ensure special trained staff , child friendly environment, recording of interviews, psychotherapy.
When interviewing we use an Adaptation of the Protocol on the questioning of children, which was developed by the National Institute of Child Health and Human Development in the USA. This adaptation is made by a PhD in law and psychology Thomas Lyon, and it is known as 10-steps methodology for children interrogation” .
3. **Croatia: Child Protection Centre of Zagreb**
 - staff trained in providing clinical assessment and empirically based treatment staff trained in forensic interviewing child friendly environment avoiding repeated questioning at the Centre concerning the event child friendly approach, adapted according to the developmental status, special needs and emotional state of the child use of child friendly and evidence based interviewing protocols and developmentally appropriate techniques (e.g. drawings, anatomical drawings and dolls) minimizing the necessary length of the forensic interview, conducting the forensic evaluation
 - assessment in more than one session if needed
 - encouraging judges to interview children on the Centre’s premises, in specially equipped forensic rooms, (Centre’s interviewer and the child in one room, and SA, judge, defendant, defence lawyer, social worker, police and other involved parties in another room), judge and involved parties ask the child through the mental health expert who adapts the questions according to the developmental level and emotional state of the child - the whole procedure is video recorded and can be used in court proceedings.
4. **Cyprus: Social Welfare Services**
Not yet at place. We are in the process of adopting a child friendly model.
5. **Estonia: Children’s Mental Health Centre**
All the mentioned practices, except the child friendly environment, are used in the Police while investigating a child abuse case. The current policy is that the people conducting the interview with a child victim/witness remain the same (especially trained police officers, recording of interviews, child friendly and evidence based techniques) but the location will change - for that the Children’s Mental Health Centre is fit for.
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
Specially trained staff, child friendly environment, recording interviews, specialised interviewing procedures and techniques.
Supporting the child and the family and the participation of the child.
7. **Germany: World Childhood Foundation**
‘In the German Projects we fund especially trained staff in counselling Centers, which have child friendly rooms, but no recording of interviews yet’
8. **Hungary: ESZTER Foundation**
Specially trained staff, child friendly environment, characteristics of the therapy techniques.
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
We don’t use and don’t have such a place or techniques, but there are few so called „child friendly rooms” in police stations, court of justices and trained professionals who handle cases there.
10. **Iceland: Barnahús**
The Children’s House is located in a residential area and it’s interior is designed to maximize the child’s comfort e.g. by toys, pictures and selection of colours. The child is interviewed in a special room by a trained investigative interviewer according to evidence based protocol. The interview is observed in a different room by a judge, who is formally in charge of the procedure, a social worker from the child protection authorities, the police,

the prosecution, the defence attorney and the child's advocate. As referred to above the interview is videotaped for multiple purposes, including child protection and criminal investigation and as court testimony at the main proceedings if an indictment is made. This arrangement makes it possible in most cases to do with only one interview with the child as the child need not appear in court. After the interview the child may have the medical examination in the medical room of the house. The findings are documented by paediatricians through the use of a colposcope, a state-of-the-art equipment that records the examination on a video. The House also provides treatment services for child victims of sexual abuse and their families. The child is assessed for therapeutic purposes and an individual treatment plan is designed and executed either at the facilities or, if the child lives outside of the capital area, as near to the home environment as possible. The forensic interview protocol used is based on NICHD evidence based protocol.

11. Latvia: Establishment Centre Dardedze, NGO
There are 2 kinds of interviews in criminal proceedings in Latvia:

1. A child is interviewed by the police-person who has special knowledge in communication with minors or in the presence of a teacher or psychologist
2. If the psychologist concludes that a face-to-face interview may have negative consequences for the child's physical and emotional well-being, the interview takes place with the aid of technical means in the presence only of a psychologist without presence of police officer or prosecutor. (usually used in sexual violence cases).

In our centre we provide No2 type of interviews. We have specially trained staff, our interviewing procedure is based on NICHD protocol, we have child friendly environment. But situation is different if the procedure takes place in police office, where there are no child friendly rooms, not trained staff, no specialized police officers who work with children etc.

12. Latvia: Ministry of Welfare
The Law on the Protection of the Rights of the Child provides for that professionals defined by this law need to acquire special training before they contact children; they also need to provide a certificate of criminal record;

there are no specific procedures how the psychologist or social worker provides the opinion about the need for the child to receive social rehabilitation service as a victim of illegal actions, including sexual abuse and exploitation.

13. Lithuania: A Help Centre for children, who were victims of sexual abuse

Child friendly environment, recording of interviews.

14. Lithuania: Republic of Lithuania Ministry of Social security and Labour

Trained staff, child friendly environment. The interdepartmental action plan (guidelines) for cases of sexual abuse of children is being prepared. These guidelines aim at helping Lithuanian institutions responsible for the child wellbeing, health, and protection of rights, at more efficiently implementing functions related to the Protection of the Child and the child's representation in criminal proceedings in order to protect the child's rights and legitimate interests, and at ensuring a closer interdepartmental and interinstitutional cooperation.

15. Malta: Foundation for Social Welfare Services

Child Protection workers receive specialised training from time to time, offer child friendly environment, investigate, and are trained in interviewing procedures and techniques.

- Access to Triangle centre interviewing for complex cases.

However working to improve peer review, training, competency (through centralisation of services so >20 per year), specialist skills, interview techniques etc.

16. The Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)

There is a special child friendly location where all the investigations (including forensic interview and forensic examination) can take place. Interviews are recorded. The standard of the APSAC interview are used when a psychologist is doing the interview. The police has a comparable interview criminal law situations. The staff is well trained in the approach on child abuse and neglect and on trauma evaluation.

17. Netherlands: Stichting Fier

The staff working for the child and youth trauma centre is especially trained to work with children. The staff working in the infant

mental health team, Kindspoor and Jongerenspoor are so too. Therapy rooms are especially equipped for children, we have playing rooms too.

18. **Poland: Nobody's Children Foundation**
n.a.
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
No direct services.
20. **Romania: World Vision**
All World Vision staff receive child protection training and use child friendly techniques for all interaction with children.
21. **Scotland: Stop to listen**
Social Work and Police staff are trained in joint investigative interviewing national guidance.
This is based on a phased approach which is similar to the NICHD Protocol.
Interviews are video recorded and there are fixed sites and mobile equipment to allow flexibility of environment.
There is no consistent child friendly environment across Scotland, some fixed sites are in police stations and this will vary in different areas.
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
n.a.
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
Especially trained staff: Most members of our staff have many years of experience and most of them went through special trainings aimed at the work with child abuse victims. Our psychologists have professional training in psychotherapy as well as in the interviewing procedures and techniques. The rest of the team went through trainings on shorter basis but we plan to continue in their special education.
 - Child friendly environment (a special room for interviewing children)
 - Recording of interviews
24. **Spain: la Familia y el Menor, Hospital Infantil Universitario Niño Jesús**
We believe that children should be at the centre of attention, everything must be done according to the best interests of the child, we

should try to avoid re-victimization, criterion of minimum intervention, etc.

25. **Sweden: Barnahus Linköping**
Child friendly environment, not located adjacent to any of the collaborative partners (neutral environment). All interviews are recorded since children under 15 years old don't participate in person in an eventually trial. Forensic interviews are done by specially trained police and according to NICHD Investigation Interview Protocol (from USA and the training centre in Huntsville). Specially trained staff. Specialist Psychiatry for Children who have been physical and sexual abused and for Children acting out sexually against others.
26. **Sweden: Barnahus Stockholm**
 - Especially trained staff
 - Child friendly environment
 - Recording of interviews
 During the child interview, other professionals such as the child protections services, prosecutors etc., watch the interview in the monitor room. The aim is that the child should not have to repeat its story many times.
27. **United Kingdom: NHS England - London**
 - specially trained doctors and examiners in forensics and paediatrics
 - specially trained child adolescent mental health teams but child sexual abuse cases currently seen by generic teams child friendly environment in some locations e.g. new paediatric Havens service from 2016, some children centres Achieving Best Evidence interviews
 - specially trained police and soon to pilot with child psychologist undertaking the interviews (in paediatric Havens)

4.10 “Activities aiming at prevention of child abuse/neglect” by formally organized structure

1. **Belgium: Confidential Can Center**
N/A
2. **Bulgaria: SAPI**
We do campaigns against child abuse, conduct outreach activities to inform the public about the consequences of violence against children. We do trainings for parents, teachers, social workers, doctors and others professionals in recognizing the signs of violence, for better treatment of children, good parenting.
3. **Croatia: Child Protection Centre of Zagreb**
Our work is aimed also at prevention of child abuse and neglect. We strongly cooperate with media on awareness raising campaigns (media appearances - TV, radio, newspaper, electronic media; the latest one has been translating and promoting Council of Europe video aiming to prevent child sexual abuse in Croatia). In addition, we organize and conduct different activities for children, parents and all professionals working with children, aiming on prevention. Our Centre is an educational base for students of different faculties, teaching the students about child abuse and neglect prevention, recognition and adequate responding, treatment and follow-up. One of the activities of our Centre refers to publishing brochures and leaflets for children, parents and professionals that are available online and also distributed free of charge to the beneficiaries. We also strongly cooperate with NGOs aiming at child abuse and neglect, in forms of educating and supervising their volunteers and workers, as well as cooperating in other awareness raising activities. All prevention activities are based on the results of research conducted by our Centre, but also in cooperation with other child protection GOs and NGO
4. **Cyprus: Social Welfare Services**
No.
5. **Estonia: Children’s Mental Health Centre**
Not yet, except for the over-all psychiatric and psychological help to children with mental health problems that can prevent future victimization.
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
Early detection is the aim.
7. **Germany: World Childhood Foundation**
‘As a foundation we support counseling centers that are also engaged in the field of prevention. They offer child abuse- prevention activities by means of Theater Plays or Sound collages in schools and youth centers or through a short film, which will be shown at schools and in the social media. Some of our counseling centers train youth welfare staff, Train social workers or even give lectures on that topic in universities.
8. **Hungary: ESZTER Foundation**
Campaigns.
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
Yes, there are two trained professionals who hold sensitizing trainings for adults about the recognition of child abuse and neglect.
10. **Iceland: Barnahus**
We are not working with prevention in Barnahus but the staff provides counselling for people who work with children, CPS and public alike. After therapy sessions the therapist teach the child and the parents to cope with unwanted behaviour and to prevent that the child will be abused again.
11. **Latvia: Establishment Centre Dardedze, NGO.**
Sexual abuse preventive program for young children Dzimba Safety trip (provided for children groups in our centre), 2. Dzimba safety agent program in kindergartens of Latvia; 3. Preventive anti-bullying program for teens “Courage to be friendly”; 4. Anti-bullying program for kindergartens the school of the Big Life; 5. Program “Safe Beginnings” - for new parents (with children 0-2) at risk to learn non-violent and child friendly parenting skills, teaching them the importance of playful parenting 6. Program “Fathers matter” - a special 6 meetings group to encourage fathers to be more involved in emotional parenting of their children/reduce/prevent violence 7. Program “Pathways to competence” - for parents with children 0-7 on non-violent parenting approaches and help them build their own informal support networks to pre-

- vent child abuse in these families 8. Program Guidelines in parenting a teenager - for parents with children 9-14 on positive non-violent and child-supportive parenting Different training programs for different professionals working with children.
12. **Latvia: Ministry of Welfare**
Yes, the Ministry of Welfare implements preventive activities, too. For example the ministry has provided financial support for the provision of educational programs for children "Džimbas skola" by foundation "Centres "Dardedze"". This program teaches children how to be safe and protect themselves from persons who want to hurt them. the program includes tips on how children should react in case someone attempts to sexually abuse them (<http://www.dzimba.lv/>). The State Inspectorate for Protection of Children's Rights (subordinate institution to the Ministry of Welfare) is also regularly implementing educational and training activities to prevent child abuse and neglect. For example in cooperation with foundation "Centrs "Dardedze"" professionals in boarding schools and child care institutions were trained on how to identify child sexual abuse, specific monitoring measures were introduced by the inspectorate.
 13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
Yes.
 14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour'**
Disseminating information about the Rights of the Child through mass media. It should be noted that the Ministry of Education and Science, the Ministry of the Interior as well as non-governmental organisations have been actively participating in the process of solving the cyberbullying problem.
 15. **Malta: Foundation for Social Welfare Services**
Yes, prevention is carried out regularly in schools, by way of media campaigns and media programs
 16. **Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
No, not explicitly. We are the specialists when there are strong suspicions on child abuse and neglect
 17. **Netherlands: Stichting Fier**
Yes, we provide training. Furthermore, one could say that we engage in secondary and tertiary prevention, by stopping violence and preventing re-victimisation.
 18. **Poland: Nobody's Children Foundation**
N/A
 19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
Prevention is part of the legislation, which was initiated and drafted by NAPCRA. Prevention measures are included in Law no. 272/2004 on the protection and promotion of child rights and prevention models are included in Government Decision no. 49/2011, annex 1 for approval of the framework methodology for prevention and intervention through multidisciplinary team and networking in case of violence against children and family violence
 20. **Romania: World Vision**
Yes, various child abuse prevention, child rights awareness campaigns, Parents school, peer education
 21. **Scotland: Stop to listen**
Yes, the pathfinder areas will consider prevention of child sexual abuse and exploitation
 22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
Yes, within the scope of the National Coordination Centre for Resolving the Issues of Violence against Children we have been conducting activities regarding raising awareness among the public (both adults and children) about the topic: - press releases and interviews, - information provided via the website specifically designated for this purpose (www.detstvobeznasilia.gov.sk) and our Facebook account (www.facebook.com/NKSpreRPNnD) - media campaign (spots on radio, TV, online tools) - competition for nurseries, primary, secondary and special schools - printed materials distributed on the local ground
 23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
We believe that prevention is the best way how to reduce child abuse. Our school-based preventive programs are designed to provide child abuse prevention and safety information to school children. They include age-level-

appropriate techniques like classroom discussion, videos and other interactive activities. Our goal is to educate children about what child abuse is, make them aware of potential abusers and teach them what to do when they are abused or feel that they are vulnerable to abuse. In our preventive programs, we use different methodological approaches, both from international and our own sources, e.g. • Kiko and the Hand (Council of Europe) • How to Protect Children (Michele Elliott) • Jacob in danger (Naruc)

24. Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus

Through awareness, training of professionals, publishing brochures.

25. Sweden: Barnahus Linköping

Yes: - By spreading knowledge about the target group, in many different kind of ways.
- Information- and education meetings for

personal from preschool and school. - Education aimed to social workers about interviewing children in the target group. - By our homepage: www.barnahuslinkoping.se

26. Sweden: Barnahus Stockholm.
No

27. United Kingdom NHS England - London

The Child House implementation programme is working towards increasing reporting and identification of victims. Once the CSA hubs or Child Houses are in place there will be a London awareness campaign and work with schools, police, social care and health professionals. Currently each borough in London has detailed plans for reduce risk of child sexual exploitation already in place and works closely with local borough police and community safety teams. Also there are many voluntary organisations and charities that support work in this area.

4.11 "Government funding" by formally organized structure

1. Belgium: Confidential Can Center
Yes

2. Bulgaria: SAPI
The social services we provided to the municipalities are financed by the state budget. The local authorities outsource the services to an NGO or other private provider. Thus we manage centers for social services in six cities. We attract additional funding within projects from private donors, European and national programs. The practice of child- friendly justice, which we have developed since 2007 is fully financed within projects. We have created 9 specialized rooms for interviewing children and we have cooperated for 5 more. Currently, with the support of UNICEF Bulgaria we pilot in Bulgaria Child Centres for Advocacy and Support "Protection Zone"; it assists children victims of abuse and their families. In the Centres a specialized approach is introduced, and the services provided to the children combine legislative, medical, psychological, therapeutic, and social services with child- friendly procedures and environment.

3. Croatia: Child Protection Centre of Zagreb
Yes.

4. Cyprus: Social Welfare Services
Yes.

5. Estonia: Children's Mental Health Centre
Yes.

6. Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot
Yes.

7. Germany: World Childhood Foundation
No, donations

8. Hungary: ESZTER Foundation
Other: ESZTER Foundation finances the Centre from donations, grants and voluntary contributions from its clients.
.

9. Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider
Yes.

10. Iceland: Barnahus
Yes

11. **Latvia: Establishment Centre Dardedze, NGO**
Other: we have governmental support for one of our programs - dzimba safety program. Lot of services.
12. **Latvia: Ministry of Welfare**
Yes.
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
Yes.
14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
Yes.
15. **Malta: Foundation for Social Welfare Services**
Yes.
16. **Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
Other: all organisations that participate contribute and next to that we receive a fee for the hiring of the building (it is situated in the hospital in our region, from the local government.
17. **Netherlands: Stichting Fier**
18. **Poland: Nobody's Children Foundation**
Yes.
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
Yes.
20. **Romania: World Vision:**
Yes.
21. **Scotland: Stop to listen**
My project is funded by a Charitable Trust
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
Other: The question is irrelevant as the Centre functions as an organisational structure within a governmental ministry.
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
Other: At the time being the only funding we receive comes from the Velux Foundation.
24. **Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus**
We are part of the system of government protection. The partner associations receive funding for their work.
25. **Sweden: Barnahus Linköping**
No.
26. **Sweden: Barnahus Stockholm**
Yes.
27. **United Kingdom: NHS England - London**
Yes.

4.12 “Tools used to assess the quality of (policy) service” by formally organized structure

1. **Belgium: Confidential Can Center**
N/A
2. **Bulgaria: SAPI**
We have developed our own system for monitoring and assessment of the service quality. There are Standards for social services quality that are monitored and assessed by the SACP
3. **Croatia: Child Protection Centre of Zagreb**
The Centre keeps a database of all cases, which includes information about patient characteristics, results of testing procedures, assessment findings and provided treatment. Based on the collected data, an annual report is made, containing the overview of our current practice, recognizable trends and changes, and recommendations for the future.
4. **Cyprus: Social Welfare Services**
No tools available.
5. **Estonia: Children’s Mental Health Centre**
The quality-assessment system is also currently being developed. The aim is to regularly receive feedback from the service provider who is in charge for the treatment/care of the child. Another issue that needs to precede to the treatment is the assessment of the child’s individual needs and referring the child to accurate therapy/care - this question is also being solved at the moment (the aim is to bring it also under the competency of Children’s Mental Health Centre even though the Centre may not remain as the sole service provider for the child’s treatment).
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
Under development in the pilot.
7. **Germany: World Childhood Foundation**
We assess the quality of the applications through an Advisory Board. We visit with the Projects twice a year. Project reports are mandatory twice a year. At the end of funding, Projects need to turn in an external evaluation, often done by universities.
8. **Hungary: ESZTER Foundation**
Continuous supervision
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
10. **Iceland: Barnahus**
The use of formal assessment is used in therapy and If children are showing signs of PTSD, anxiety, depression or any other feeling they have after the abuse they answer the same list later in the therapy to evaluate the success in therapy. The therapy continues until the child is feeling better and the parents are satisfied with the result of the treatment. The assessment tools who are used are UCLA, CDI, DASS, BYI, CBCL, MASC, BDI-II and PSS-SR. Our service only uses evidence based equipment tools and therapy program. We use also evidence based protocol for out forensic interview and try to retrain as often as possible. Every changes they do in the protocol we adjust to our work.
11. **Latvia: Establishment Centre Dardedze, NGO**
Our interview process is based on NICHD protocol. We recently evaluated all the work of our organization by participating in the Child 6 principles project funded by OAK.
12. **Latvia: Ministry of Welfare**
There are no specific tools. The government has delegated the assignment of state administration to provided social rehabilitation services to children who are victims of illegal acts to the NGO “Latvijas Bērnu fonds” (Latvian Children’s Foundation). According to this assignment Latvijas Bērnu fonds has to ensure the organization of provision of the social rehabilitation service to the children who are victims of illegal acts (to sign agreements with local governments, allocate financing to certain service providers organize public procurements etc.). The Ministry of Welfare is supervising how the state funding is being spent by Latvijas Bērnu fonds. The supervision is ensured by requesting a monthly report from Latvijas Bērnu fonds about the expenditure of financing, including personalized information about children who have received the rehabilitation services.
13. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
Social workers regularly evaluate changes in the family and together with the Child Rights

- Protection offices decide whether they should continue to providing services to the family, work with it, change or provide additional services or other measures had to be applied to the family.
14. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
The collaboration with Iceland BARNAHUS
 15. **Malta: Foundation for Social Welfare Services**
The Foundation makes use of measurable outcomes to ensure that the care plan is being followed and to receive feedback from service users re. the service being provided.
 16. **Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
Evaluation with the team, we also record the time it takes to do the investigations etc.. Scientific research starts in May 2016 (the centre has been opened in November 2015).
 17. **Netherlands: Stichting Fier**
Several tools, among others the ROM and the CQ Index.
 18. **Poland: Nobody's Children Foundation**
N/A
 19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
For the institution is the internal audit. For policy is the monitoring of the national strategy for protection and promotion of child rights (in present GD no. 1113/2014).
 20. **Romania: World Vision:**
'All cases reported through the Child Protection Reporter system are monitored by the Child Protection specialists team in World Vision. When the child protection incident is very serious, a multi-disciplinary team is involved in the response, including psychologists, international lawyers, communication officers etc. All social services developed by World Vision are accredited by the local government through the social inspection institution.
 21. **Scotland: Stop to listen**
Evaluation model will be identified as part of the pathfinders
 22. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc detom v kríze**
As our CAC program is a new one, we do not have special tools to assess the quality of the service. We expect that such tools will be developed in cooperation with our partners/ multidisciplinary team.
 23. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
N/A
 24. **Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus**
The work is done in teams and being evaluated. The Prosecutor has the function of superior surveillance.
 25. **Sweden: Barnahus Linköping**
Statistic evaluation through a data system called Bonigi, and by looking in our documentation.
 26. **Sweden: Barnahus Stockholm**
Each authority are responsible for their own assessment of quality and uses adequate tools for that. There is no common quality assessment today at Barnahus Stockholm but there is a process going on for developing a kind of tool.
 27. **United Kingdom: NHS England - London**
Currently all borough services are monitored by their local safeguarding children board and clinical commissioners. In future the pan-London Steering group has developed a set of indicators to better measure the outcomes of children from a health perspective and with regards to police and judicial outcomes. These indicators are being finalised now.

4.13 “National laws/policies that oblige the existence of FOS” by formally organized structure

Belgium: Confidential Can Center	
Bulgaria: SAPI	
Croatia: Child Protection Centre of Zagreb	No.
Cyprus: Social Welfare Services	Yes.
Estonia: Children's Mental Health Centre	No.
Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot	Yes.
Germany	Yes
Hungary: ESZTER Foundation	No.
Hungary: Szociális Szolgáltatók Közhazsnú Egyesülete	Yes.
Iceland: Barnahus	Yes
Latvia: Establishment Centre Dardedze, NGO	Yes.
Latvia: Ministry of Welfare	No.
Lithuania: A Help Centre for children, who were victims of sexual abuse	Yes.
Lithuania: Republic of Lithuania Ministry of Social security and Labour	Yes.
Malta: Foundation for Social Welfare Services	Yes.
Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)	No.
Netherlands: Stichting Fier	Yes.
Poland: Nobody's Children Foundation	-
Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)	Yes.
Romania: World Vision	Yes.
Scotland: Stop to listen	
Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children	Yes.
Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze	No.
Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus	Yes.
Sweden: Barnahus Linköping	Yes.
Sweden: Barnahus Stockholm	No.
United Kingdom: NHS England - London	Yes.

4.14 “Obligated by law or further regulations” by formally organized structure

1. **Belgium: Confidential Can Center**
N/A
2. **Bulgaria: SAPI**
In the Criminal Procedure Code it is provided the compulsory participation of a psychologist or a pedagogue in the interrogation of children under 14, which allows the inclusion of our trained specialists. The law also gives the possibility the hearing to be carried out at a neutral location. Currently, changes in the Criminal Procedure Code are in a process in connection with the transposition of Directive 2012/29 for minimum standards to protect victims of crime and there is a chance our pilot practice to become national.
3. **Croatia: Child Protection Centre of Zagreb**
In Croatia there are no national laws or policies in place that oblige specifically the existence of formally organized structures providing services to child victims and witnesses of violence. This is done through the existence of social services and health care system which is defined more broadly.
4. **Cyprus: Social Welfare Services**
The Police, the Social Welfare Services and the Mental Health Services are obliged to protect and support. The Ministry of Education is obliged to implement preventive actions.
5. **Estonia: Children’s Mental Health Centre**
The law puts the threshold to law enforcement - the referral, investigation etc. This is the system that needs to be changed to give more room to integrated services that can be provided by other sectors such as health care and social protection.
6. **Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot**
N/A
7. **Germany: World Childhood Foundation**
‘In Germany, there are formally organized structures providing services to child victims, but they do not cooperate very well. They act on the basis of SGB V, SGB VIII (Social Security Statutes), KJHG (Child and Youth Welfare Act)
8. **Hungary: ESZTER Foundation**
Referral of child abuse.
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
The Child Protection Act.
10. **Iceland: Barnahus**
When children need special treatment which the municipalities or the CPS can’t arrange the government can put provide the specialized service for the child as non-institutional. Therefore Barnahus, which is run by the government, provides therapy for children all around Iceland in their hometown. Another law related to public hearing in child abuse cases allows for the forensic interviews of children under the age of 15 can be carried out by specialists. These interviews need to be conducted in a specially equipped room. Even though Barnahus is not specifically mentioned in the law it has all the equipment and employees to qualify for a judge’s request for such an interview. Even though the interview is conducted by a specialist without the physical presence of anybody else, the judge still controls the interview via a communications device. Even though these interviews are conducted at the time of police investigation the recording can be used as the child’s testimony in court.
11. **Latvia: Establishment Centre Dardedze, NGO**
Rehabilitation for abuse victims State compensation for victims in criminal proceedings Helpline (but not specific procedures or help centres) for abuse victims State provides mandatory legal assistance to a child victim and victim’s representative in criminal proceedings for an offense related to the violence caused by the person from whom the victim is a minor or otherwise dependent, or in the cases of sexual abuse.
12. **Latvia: Ministry of Welfare**
Social Services and Social Assistance Law obliges that state has to ensure that children who have become victims of illegal acts receive social rehabilitation services. The law also delegates the responsibility to organize the provision of social rehabilitation of children victims of illegal acts to Latvijas Bērnu fonds. The Cabinet of Ministers provides specific requirements for services providers providing social rehabilitation services for

children who are victims of illegal acts: Cabinet Regulation No. 291 Adopted 3 June 2003 "Requirements for Social Service Providers". If the services is being provided in an institution then the regulations define the types of premises where the services should be provided. The requirements about special knowledge on the rights of the child does not apply to all the involved specialists in the social rehabilitation such as medical staff etc.

13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
N/A
14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
Work restrictions for persons found guilty of the crimes against children's sexual independence and integrity. Families who abuse alcohol or psychotropic substances or due to the lack of Social skills are incapable of properly caring for and supervising the child are included in the Register of Social Risk Families with Children according to their place of residence by the order of the director of the municipal administration upon the recommendation of Child Rights Protection offices. The Child Rights Protection offices ensure the child rights protection and the implementation and supervision of laws and regulations that regulate the child rights protection.
15. **Malta: Foundation for Social Welfare Services**
It mainly obliges the agency to receive referrals in relation to child protection, investigate them and in very serious cases recommend that a care order is issued. It is also the designated agency to deal with Domestic Violence issues.
16. **Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
There is a code that stimulates citizens and professionals to inform Veilig Thuis when there is suspicion of child abuse or neglect.
17. **Netherlands: Stichting Fier**
Child check (Kind Check), reporting code domestic violence and child abuse, Safe Home (Veilig Thuis), Certified Institution, Council for Child Protection.
18. **Poland: Nobody's Children Foundation**
N/A

19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**

Law no. 272/2004 on the protection and promotion of child rights.

20. **Romania: World Vision:**

In the Law no. 272/2004 on the protection and promotion of child rights, section 3, the child's protection against abuse and neglect, abuse against children is defined as „any voluntary action of a person who is in a relation of responsibility, trust or authority over the child, through which the child's life and his/her physical, mental, spiritual, moral and social development as well as his/her physical integrity and physical or mental health are endangered". Through this statutory act one also understands „the voluntary or involuntary omission of a person responsible for raising, caring and educating the child to take any measure subordinated to this responsibility, thus endangering the child's life, physical, mental, spiritual, moral or social development, bodily integrity, physical or mental health". In order to base their policies, programs and initiatives on a good grasp of the phenomenon, The National Authority for Protection of Child Rights has elaborated a data collecting instrument concerning cases of abuse, exploitation and child neglect. Law no. 272/2004 on the protection and promotion of child rights, represents the core of the new legislation. This law „regulates the legal frame concerning the observance, the promotion and the guarantee of child rights" (art. 1 of the Law) and its direct beneficiaries are: Romanian citizen children who live in Romania, Romanian citizen children who live abroad; children without citizenship who live in Romania; children who request or benefit from a form of protection under the conditions of the legal regulations concerning the status and regime of refugees in Romania; foreign citizen children who live in Romania, in urgency situations (art. 3 of the Law). The main regulations of the current legislation are the following:
-The regulation of the application of the following principles, in order to observe and guarantee child rights: equal chances and non-discrimination, insuring individual and personalized child care, multi-sectorial intervention and public-private partnership, observing the child's dignity and insuring his/her protection against any form of abuse or exploi-

tation, listening to and considering the child's opinion, depending on his/her age and maturity, insuring stability and continuity in raising, caring and educating the child, without ignoring his/her ethnic, cultural and language origin, taking rapid decisions if a measure of protection needs to be taken, interpreting legal norms in the field in correlation with the set of related regulations;

- Regulating the obligation to observe, promote and guarantee child rights that are established by law, for public authorities, authorized private bodies, as well as for natural or legal persons who are responsible for the child's protection, in conformity with the UN Convention provisions concerning child rights and the set of principles and provisions of the conventions and international treaties that have been approved in Romania;
- Regulating the prevalence of best interest for the child not only related with any other regulations or legal acts issued or concluded in the field, but also related with the rights and obligations of the child's parents, of his/her legal representatives, as well as any other person in the care of whom he/she has legally been placed - the prevalence of this principle is also imposed by all the actions and decisions that concern children, which are carried out by public authorities or by authorized private organizations, as well as by clauses solved by legal courts;
- The parents' responsibility will be defined as primordial in order to raise and insure the child's development - the parents have the obligation to execute their rights and fulfil their obligations to the child offering priority to the best interest of the child.

21. Scotland: Stop to Listen

Special measures for children attending court i.e. use of CCTV link, screens, closed court etc.
Police/social workers should take into account the national guidance for interviewing child witnesses.
Some additional policy areas such as the Child Sexual Exploitation Action Plan and Survivors Strategy
Aim to provide practice standards, and a trauma training framework for the workforce.

22. Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children

The core legislative framework is embedded in the Act No. 305/2005 on the Socio-legal Protection of the Child and on Social Guardianship. The Act includes provisions on measures taken regarding children, including victims of violence. It also defines obligations of the local self-government bodies regarding facilities established by them which provide services to children.

23. Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc det'om v kríze

There is a code that stimulates citizens and professionals to inform Veilig Thuis when there is suspicion of child abuse or neglect. Slovak legislation includes mandatory reporting of child abuse and neglect (Law No. 300/2005 (Penal Code, § 340 includes mandatory reporting), but wording of the law makes it possible to avoid the mandatory reporting in most cases. This results in a very low rate of reporting cases of child abuse. There exist also internal directives for physicians, teachers and other professionals that oblige them to report when they suspect or know of abusive or neglectful situations. Their report may be sent to either the child protection services or a law enforcement agency (police, prosecutor). Nevertheless, these directives are very often avoided, too... Our legislation and/or other regulations do not support multidisciplinary collaboration in cases of child abuse, whether on the basis of formal protocols or other instruments.

24. Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus

The Penal Code, the Civil Code, the Criminal Procedure Act, etc. required to notify, attend, protect.

25. Sweden: Barnahus Linköping

For example: Social services has to start protection assessments in every case regarding physical or/and sexual abuse against Children, and for Children who witness violence between parents. The assessments have a time limit. There are some time limits for the police when it comes to the preliminary investigation, for example that the Child interview should be done within two weeks. Children have the right to a special represen-

tative who is designated by the District Court. There are also other regulations from the government about Children as victims of crimes.

26. Sweden: Barnahus Stockholm

- Mandatory reporting to social services. All professionals working with children are mandatory to report to CPS if they think a child is at risk. - Authorities are obliged to cooperate and to share relevant information in cases of child abuse. - CPS are obliged to investigate all

cases where child abuse is suspected. There are a lot more detailed regulations and legislation regarding child abuse in Sweden. Please contact us if you want more detailed information.

27. United Kingdom: NHS England - London

Section 47 - Children Act 1989 Working together to safeguard children Crown Prosecution guidance on prosecuting child cases ABE interview guidance Criminal Justice Act 2003 Youth Justice and Criminal Evidence Act 1999

4.15 “Other relevant regulations / policy” by formally organized structure

1. Belgium: Confidential Can Center

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2. Bulgaria: SAPI

In the Criminal Procedure Code it is provided the compulsory participation of a psychologist or a pedagogue in the interrogation of children under 14, which allows the inclusion of our trained specialists. The law also gives the possibility the hearing to be carried out at a neutral location. Currently, changes in the Criminal Procedure Code are in a process in connection with the transposition of Directive 2012/29 for minimum standards to protect victims of crime and there is a chance our pilot practice to become national.

3. Croatia: Child Protection Centre of Zagreb

The practices of our Centre are guided by the: 1. Convention on the Rights of the Child 2. The Council of Europe Convention on Protection of Children against Sexual Exploitation and Sexual Abuse 3. Act on Protection Against Family Violence, Family Act and Criminal Code, prescribing mandatory reporting of violence against children and child neglect; 4. Statute of Child Protection Centre of Zagreb, which regulates the practices of our ethical committee, consisting of staff members and a juvenile judge as an external consultant, which monitors implementation of standards of medical ethics; 5. Sexual Abuse Protocol, Domestic abuse protocol and Peer victimization protocol, national protocols which determine a standardized procedure in protecting child victims and witnesses for all authorities and institutions involved; 6. codes of practice adopted by organizations regulating several professions included in our multidisciplinary

teams, and specific laws regulating these professions (psychologists, medical doctors - psychiatrists and paediatricians, nurses); 7. Child Research Ethics Code of Practice, a national code of ethics regulating research conducted on child participants, as well as research focused on promoting the wellbeing of children.

4. Cyprus: Social Welfare Services

A Manual of Interdisciplinary cooperation between governmental services is followed in the handling of cases of all forms of family violence.

5. Estonia: Children’s Mental Health Centre

There are currently no definite official regulations nor other agreements in place but the discussion and debate over the system regarding abused children has been on since the end of 2014 and in 2016 the aim is to start the pilot project of the preliminary interviews that can lead to other fundamental changes in the current system.

6. Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot

Convention on the rights of the Child Guidelines on Child Friendly Justice <http://www.kaypahoito.fi/web/english/guideline-abstracts/guideline?id=ccs00100>

7. Germany: World Childhood Foundation

‘If a case comes to court, special protective provisions may be taken for children: - questions by judges only; public may be excluded - Video recording instead of inquiry in the courtroom - psychosocial facilitation for children

8. **Hungary: ESZTER Foundation**
Establishment of special rooms for child hearing
9. **Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider**
N/A
10. **Iceland: Barnahus**
N/A
11. **Latvia: Establishment Centre Dardedze, NGO**
In one of our projects we are now carrying out small campaign and provide training for police officers, prosecutors, social workers and custody court professionals on child friendly interviews using NICHD protocol.
12. **Latvia: Ministry of Welfare**
In the Ministry of Welfare there does not exist any such specific agreements and protocols. However, the State Inspectorate for the Protection of the Rights of the Child has the has developed numerous methodological materials for local governments child protection institutions (orphan's courts) regarding interdisciplinary and inter-institutional cooperation.
13. **Lithuania: A Help Centre for children, who were victims of sexual abuse**
N/A
14. **Lithuania: Republic of Lithuania Ministry of Social security and Labour**
The Third Book (Family Law) of the Civil Code of the Republic of Lithuania, The Code of Civil Procedure, The Law on Child Rights Protection, the Ruling on the Order of Determination of the Need of Social Services for a Child of Social Risk Family etc.
15. **Malta: Foundation for Social Welfare Services**
The protocol with the police, the possibility of video conferencing and the working group in relation to cyber bullying.
16. **Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
There is the right for youngsters from 12 years up to give their own opinion in to child judges and the right from youngsters from 16 years up to have their own treatment contract without reporting to parents if they don't want that).
17. **Netherlands: Stichting Fier**
There are mainly (too) many laws and regulations that interfere with adequate assistance / treatment.
18. **Poland: Nobody's Children Foundation**
N/A
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
Main laws: - Law no. 272/2004 on protection and promotion of child rights - Law no. 217/2003 on family violence - Law no. 211/2004 on protection measures for victims of crimes - Law no. 252/2010 for ratification of Lanzarote Convention
20. **Romania: World Vision:**
Romania has accessed the Hague Convention on October 25th 1980 on the civil aspects of international child abduction which was ratified through Law no. 100/1992 and the Ministry of Justice was assigned as a central authority through art. 2 of the accession law, in order to facilitate the application of this convention not only when Romania is the requesting state, but also when Romania is the solicitor. Article 90 of Law 272/2004 acknowledges and admits the existence of cases of violence against children, not only on a family level, but also on an institutional level and it underlines the necessity of taking measures of preventing and controlling violence against children. Article 91 of the same law regulates the responsibility of each person (medical personnel, educational staff, care taker, family worker etc.), who is in a position that allows him/her to observe the child for a sufficient time period, to notify the responsible authorities of possible acts of abuse or neglect in order to assess and intervene to remove the danger under which the child is placed. According to this article, it is not necessary for the person who files the complaint to have material evidence, the existence of elements that generate suspicion concerning a potential abuse being sufficient.
21. **Scotland**
'National multi-agency child protection guidance, Getting it Right for Every Child, Evidence and Procedure Review "the next steps" which makes specific recommendations regarding child witnesses at court and highlights the Barnahus model as best practice.

22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
The core policy document for the work of our Centre is the National Strategy for the Protection of Children against Violence.
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc deťom v kríze**
Slovakia is in the initial stage of applying a holistic, multidisciplinary approach to protecting children from violence. All regulations and working instruments correspond to the fact. We hope that in cooperation with The National Focal Point and other partners, the situation will improve in the coming years.
24. **Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus**
International norms as child friendly Justice, plan against commercial sexual exploitation.
25. **Sweden: Barnahus Stockholm**
We have a cooperation agreement where all participating authorities have a specified description of their commitments.
26. **Sweden: Barnahus Linköping**
The same that mentioned in the last question. For a more detailed description, we would have to consult all the other collaborative partners.
27. **United Kingdom: NHS England - London**
The UK signed the Council of Europe's Convention on the Protection of Children from Sexual Exploitation and Sexual Abuse in 2008 (the Lanzarote Convention). Home Office officials are completing their assessment of what needs to be done. In addition to work on the Convention, the Government has set out a comprehensive programme to tackle sexual violence in the action plan of the Sexual Violence Against Children and Vulnerable People National Group. Under Section 28 of the Youth and Justice criminal Evidence Act. Trial of pre-court cross examination of children and young people under 16 years that are vulnerable under "special measures". Video recorded evidence that is played back at trial so the victim does not need to attend court to give evidence. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/323108/legal-aid-gf-s28-pilot.pdf Guidance to completed trial process for victims under 10 years in 16 weeks <https://www.judiciary.gov.uk/wp-content/uploads/2015/03/police-cps-hmcts-ywi-protocol.pdf>

4.16 "Other relevant information" by formally organized structure

1. **Belgium: Confidential Can Center**
N/A
2. **Bulgaria: SAPI**
N/A
3. **Croatia: Child Protection Centre of Zagreb**
Our Centre is recognized as a model of good practice in Europe and has received ISPCAN Multidisciplinary Team Award in 2008, recognizing our Centre for its significant contribution to the welfare of children. Experts from our Centre are often invited to share their knowledge and experiences regarding child abuse and protection across Europe. The work of our Centre also includes regional and international cooperation in this field.
4. **Cyprus: Social Welfare Services**
N/A
5. **Estonia: Children's Mental Health Centre**
Children's Mental Health Centre is a treatment centre that diagnose, offer treatment and in some cases joint case management with social and educational sector. Tallinn's Children's Mental Health Centre has been newly built - it started its work in late 2015. It aims to provide integrated services and the vision is to create under this Centre also a multidisciplinary centre that 1) detects possible child abuse, 2) provides the child friendly environment for the investigative interviews, 3) provides medical examination, 4) provides assessment of the needs of the child and in some cases also 5) the treatment (there is also the victim support service in place that separately deals with abused children but as mentioned, it lacks the assessment-part so there is no certainty whether the therapy is the correct one, also it lacks supervision/ follow-up - these issues need to be solved but

the victim support can in some cases be more suitable for the child, for instance in country regions etc).

6. Finland: Forensic Child and Adolescent Psychiatry Units / Children's Advocacy Centre Pilot

N/A

7. Germany: World Childhood Foundation
 'World Childhood Foundation supports many Barnahus and CAC in Sweden, the United States of America, in South Africa, and in Belarus. Here in Germany, there is no such Barnahus. We intend to set up this structure.

8. Hungary: ESZTER Foundation
 Further information: <http://eszteralapitvany.hu/?lang=en>

9. Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider
 All regulations, policies, cooperation agreements and protocols concerning child friendly justice and protection of child victims/witnesses of violence based on the Hungarian Child Protection Act. We don't have our own procedures and protocols in place.

10. Iceland: Barnahus
 Barnahus serves the whole country in Iceland. The therapist meet the child in their own hometown every other week. Because we just have one multi agency service like Barnahus we have all information about sexual abuse in the country. All children who have been abused gets the same service wherever they live in our country. We have database with over 100 variables where we follow each case from the beginning to the end in the legal system. We have information about the nature of the abuse, age of the child and so on. Students from the university can do some research every year to look into the nature of abuse here in Iceland. All the specialization is at one place which can be advance for our service.

11. Latvia: Establishment Centre Dardedze, NGO
 N/A

12. Latvia: Ministry of Welfare
 I would gladly provide any additional information. I really hope that I understand the questions correctly. I was mostly describing the Ministry of Welfare as such instead of a

structure formed of several institutions or organizations. Probably Dardedze's National Council of Experts suites better for the term "formally organized structure".

13. Lithuania: A Help Centre for children, who were victims of sexual abuse

The centre will offer the following complex services: - Temporary accommodation, for children and their non-violent parents (guardians). - Research survey: the centre will have specially equipped and child-friendly survey equipment, which would allow safe speaking with a child about his/her experience and to make a record of this conversation. - Medical examination: the centre will have a specially equipped and child-friendly room, where children could be examined by doctors and the symptoms of the experienced trauma could be assessed together with the general condition of a child's health. Also other works that are no less important will be performed: psychological assessment of the child, assessment of the child's social environment and psychological help for a child.

14. Lithuania: Republic of Lithuania Ministry of Social security and Labour

The Ministry established additional job positions of Social workers dealing with social risk families. The Ministry finances Child day care centres who provide services to both children and families. An increasing number of Child day care centres projects has been financed every year and the number of children provided with their services has been growing.

15. Malta: Foundation for Social Welfare Services

The Foundation is also bound to follow the Lanzarote convention.

16. Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)

In the Netherlands the community of local governments has just adopted the idea of MDA++ (multidisciplinary approach on all family violence including child abuse and neglect). The first + means specialized, the second one multi-sectoral. They agreed to realize this approach before the end of 2018. The MDCK is a precursor in this development. The Centres on Rape and there are Sexual Assault are precursors too. The MDCK includes a CSG in February 2016.

17. **Netherlands: Stichting Fier**
N/A
18. **Poland: Nobody's Children Foundation**
N/A
19. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
There is a Coordination Council in the field of protection and promotion of children's rights and adoption working with the President. The Coordination Council comprises only one representative at management level from the central institutions, Ombudsman, National Union of County Councils in Romania, Association of Directors of Directorates-General of Social Welfare and Child Protection, Federation of Non-Governmental Organizations for the Protection of the Right of the Child in Romania, National College of Social Workers in Romania, College of Psychologists in Romania and other bodies. The main duties of the Coordination Council in the field of protection and promotion of children's rights and adoption are the following: a) ensures cooperation among institutions and organizations whose representatives make up the Council, in view of carrying out the national public policy and the Government Plan in the field of protection and promotion of children's rights and adoption; b) monitors the application of law in the field of protection and promotion of children's rights and adoption and the Community acquires in the field; c) assesses the effects of the measures regarding the application of the Community acquires in the field; d) makes proposals regarding the improvement of the legal framework in the field of protection and promotion of children's rights and adoption; e) makes proposals for improving and strengthening the interinstitutional relations among public authorities involved in the field of protection and promotion of children's rights and adoption.
20. **Romania: World Vision:**
World Vision Romania is an active member of the Federation of Non-governmental Organizations for Child protection in Romania.
21. **Scotland: Stop to Listen**
'There are many others practice guidance/ protocols which are relevant in specific areas i.e. CSE, neglect, substance misuse, FGM, trafficking etc.
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
N/A
23. **Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus**
We consider very important work: - The works of the Child abuse attention program since 1998 and the work of the CIASI (Centre of Integral Attention child sexual abuse) since 2006 - Legislation updating. The recent Organic Law 8/2015 of 22 July and Law 26/2015, of July 28, modifying the system of protection of children and adolescents, established the register of people with condemnations of sexual offenses, the obligation not to be on record persons working with children
24. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc detom v kríze**
Naruc Child Advocacy Centre's main objectives: To provide a welcoming place where children suspected of being abused are interviewed by specially-trained professionals and where they and their families receive services designed to promote healing and reduce the trauma of abuse. To provide a space for multidisciplinary, interagency cooperation; To provide a safe, child focused and child friendly space, including interrogation room equipped with one-way mirror and audio / video equipment; To create an informal platform of professionals working in the field, who are committed to contribute to creating a better and more efficient system of protection children from violence (including proposals of changes in legislation, directives and working procedures). Core staff: 2 psychologist, a social worker, supervisor/advocacy expert + external lawyer, paediatrician, child gynaecologist Expected cooperation with: Child protection services, law enforcement, paediatricians, psychologist, psychiatrists, teachers, other people/institutions involved in cases of child abuse; key actors in the field at national, regional and local levels

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| <p>25. Sweden: Barnahus Linköping
N/A</p> <p>26. Sweden: Barnahus Stockholm
N/A</p> | <p>27. United Kingdom: NHS England - London
We are currently seeking funding to deliver the Child House model in London from various government and charitable sources and will know by Spring 2016. We have applied for funding for two Child Houses with 2016/17 implementation and development of service, 2017/18 service open to children and families.</p> |
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4.17 Other multi-agency/multi-disciplinary structures by formally organized structure

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|---|--|
| <p>1. Belgium: Confidential Can Center
N/A</p> <p>2. Bulgaria: SAPI
Since 2014 SAPI has been implementing the “Listen to the child - Justice befriends the child” Project, which contributes to meeting the requirements of Article 22 of the Directive in respect of implementing an integrated approach to working with child victims of crimes based on an individual needs assessment. The integrated approach includes best practices for making an individual assessment and a model of a protocol for local cooperation and interinstitutional coordination in cases of crimes against children. This integrated model is based on good practices from 6 European countries and is being piloted in Bulgaria, and this will serve to improve the practice in the other partner countries under the project: France, Romania, Italy. In Bulgaria the model will be piloted under the project in one municipality and will serve as a model for changing the practice at national level. Under the currently implemented project “Listen to the child - Justice befriends the child” it is envisaged to develop a training program and to elaborate a protocol for local cooperation when working on cases of child victims of crime.</p> <p>3. Croatia: Child Protection Centre of Zagreb
N/A</p> <p>4. Cyprus: Social Welfare Services
N/A</p> <p>5. Estonia: Children’s Mental Health Centre
There are none.</p> <p>6. Finland: Forensic Child and Adolescent Psychiatry Units / Children’s Advocacy Centre Pilot
N/A</p> | <p>7. Germany: World Childhood Foundation
‘ Not yet’</p> <p>8. Hungary: ESZTER Foundation
- Kék Vonal Gyermekkrízis Alapítvány (Kék Vonal Child Crisis Foundation) - Család, Gyermek, Ifjúság Egyesület (Family, Child, Youth Association) - Maria Herczog</p> <p>9. Hungary: Szociális Szolgáltatók Közhasznú Egyesülete / Public Benefit Association of Social Service Provider</p> <p>10. Iceland: Barnahus
N/A</p> <p>11. Latvia: Establishment Centre Dardedze, NGO
N/A</p> <p>12. 24. Latvia: Ministry of Welfare
Most of such cooperation mechanisms are project based and are terminated after the termination of a project. However there are number of positive examples at the municipality level on the cooperation between institutions. Contact information: Dzintra Kozaka, e-mail address: dzintra.kozaka@dome.cesis.lv, phone number: + 371 29126373. Ms. Kozaka has also had positive experience in the implementation of projects on the prevention of antisocial behaviour of minors.</p> <p>13. Lithuania: A Help Centre for children, who were victims of sexual abuse
It’s the first centre in Lithuania.</p> <p>14. Lithuania: Republic of Lithuania Ministry of Social security and Labour
Children support centre - ausra@plc.lt</p> <p>15. Malta: Foundation for Social Welfare Services
There are two NGOs which provide primary and secondary shelter for Domestic Violence victims and their children. The Police</p> |
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Department mainly the Vice Squad The Education Department.

16. **Netherlands: MDCK (Multidisciplinary Centre on Child Abuse and Neglect)**
The CSG's also see the target audience till 18 in cases of acute assault (they work for victims of rape from 0 till 100). There is only one MDCK with an own location; there are other forms of network collaboration: - CSG Iva Bicanic - MDCK Friesland Anneke Jelsma - FJC Tilburg Gerriane Rozema - FJC Venlo Matthieu Goedhard - Netwerk Gelderland Anita Kraak - Veilig Verder Teams Den Haag Ria Andrews - TASK AMC Tianne Teeuw/Sonja Brillenslijper - UMC Utrecht (WKZ) Elise van de Putte
17. **Netherlands: Stichting Fier**
We collaborate with the following organisations: - Immediate Help in case of Domestic Violence and Child Abuse - Centre for Sexual Violence - MDCK
18. **Poland: Nobody's Children Foundation**
N/A
19. **Romania: World Vision:**
The Federation of Non-governmental Organizations for Child protection in Romania (FONPC) is the main dialogue partner of the state, specialized in developing and redefining the children welfare policy, from the child rights perspective, using and developing a coherent and comprehensive experience and expertise of its members
<http://www.fonpc.ro>
20. **Romania: National Authority for the Protection of the Rights of the Child and Adoption (NAPRCA)**
N/A
21. **Scotland: Stop to listen**
'Justice for Children Group which is a umbrella group of organisations which has been campaigning over several years to improve child centred responses for children who have to attend court. My organisation chairs this meeting and therefore I would be the contact for this.
22. **Slovak Republic: National Coordination Centre for Resolving the Issues of Violence against Children**
N/A
23. **Slovakia: Naruc - Help for Children in Crisis / Náruč - Pomoc detom v kríze**
In the light of above mentioned information it is evident that there are no formally cooperating structures working in the field on regular basis. We have already mentioned key actors using ad hoc multidisciplinary approach in processes aimed at protecting children from violence. Contacts of key actors can be found on the website of National Coordination Centre for Resolving the Issues of Violence against Children, <http://detstvobeznasilia.gov.sk/en/>. Director of the National Coordination Centre: Karel Molin E-mail: Karel.Molin@employment.gov.sk Tel: +421 918 245 849
24. **Spain: Direccion General de la Familia y el Menor Hospital Infantil Universitario Niño Jesus**
I think is very important the work of the work of the CIASI (Centre of Integral Attention child sexual abuse).It is part of the work of my organization but this entrusted to an Association (TRAMA).
25. **Sweden: Barnahus Stockholm**
There are 30 Barnahus in Sweden.
26. **Sweden: Barnahus Linköping**
There are around 30 Barnahus in Sweden and they all look different in organisations and settings.
27. **United Kingdom: NHS England - London**
We need to include a London or national judge in the steering group. There are other colleagues in the UK also working towards improving child sexual abuse services e.g. Manchester Paediatric Sexual assault referral centre, National Society for Prevention of Cruelty to Children (NSPCC).

5 *Appendix: Questionnaire*

What is the name of the formally organized structure?

In which country is your formally organized structure based?

Who is the contactperson of this formally organized structure?

What is his/her contact information? Preferably indicate both. - Email address:

What is his/her contact information? Preferably indicate both. - Phone number: (Open)

Please write a short description (max. 10 sentences) about the mission, primary goals, way of working of your formally organized structure.

Do you have any available documentation, reports or research available in English on the formally organized structure. If yes, please send it to Annemieke Wolthuis (awolthuis@verwey-jonker.nl) or to Anna Wroblewska (awroblewska@verwey-jonker.nl).

Do you formally collaborate with other actors providing child victim protection services and how (for example through information exchange, joint case management, joint planning, protocols of cooperation etc)?

How and with whom do you collaborate (for example through information exchange, joint case management, joint planning, protocols of cooperation, etc)?

Which professionals and/or services are represented in/working within the formally organized structure?

- A. Social services
- B. Youth care
- C. Therapeutic staff
- D. Forensic medicine
- E. Paediatrics
- F. Child and adolescent psychiatry
- G. Prosecutors
- H. Police
- I. Lawyers
- J. Judges
- K. Other, if yes please specify:

Is the staff of your formally organized structure specifically educated and/or trained for working with child victims and witnesses of violence? If yes, in what fields.

What kind of violence is addressed by the work?

- A. Child abuse
- B. Neglect
- C. Parental abuse (youngsters abusing parents)
- D. Peer abuse
- E. Domestic violence
- F. Sexual abuse

G. Physical abuse exploitation (including e.g. trafficking, child abuse images, child prostitution).
H. Other, if yes please specify:

Do you work with:

- A. Child victims of violence
- B. Child witnesses of violence
- C. Parents
- D. Care givers
- E. Other, if yes please specify

What kind of services does your formally organized structure provide?

- A. Criminal investigation
- B. Forensic interviewing
- C. Forensic examination
- D. Child protection assessment
- F. Medical examination and treatment (paediatrics)
- E. Mental health examination
- G. Social work activities
- H: Other, if yes please specify:

What are the steps taken in the fact finding practice and/or the assessment/diagnostics when a case has been referred to your formally organised structure?

What kind of child friendly practices are used (e.g. especially trained staff, child friendly environment, recording of interviews, characteristics of interviewing procedures and techniques)?

Does the work of your organization include activities aiming at prevention of child abuse and/or neglect? If yes, please specify.

What is the policy and practice regarding follow up after treatment and/or aftercare?

Do you receive government or other funding to fulfill your tasks? - Other, please specify: (Open)

Which tools are used to assess the quality of the (policy) service?

Do you have any available documentation or reports available on assessment tools in English regarding this topic? If yes, please send it to Annemieke Wolthuis (awolthuis@verwey-jonker.nl) or to Anna Wróblewska (awroblewska@verwey-jonker.nl).

Are there national laws or policies in place in your country that oblige specifically the existence of formally organized structures providing services to child victims and witnesses of violence?

What is exactly obliged by law or further regulations?

What other regulations, policy-, cooperation agreements and protocols concerning child friendly justice and protection of child victims/witnesses of violence are in place and relevant for work within your formally organised structure?

Please specify any other relevant information on your formally organized structure.

Do you know other multi-agency and multi-disciplinary cooperation structures to assist and protect child victims and witnesses of violence, outside of your formally organized structure? If so, could you add possible contact persons in your country?

Colofon

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The PROMISE project:

The Barnahus model supporting children's right to justice and care in Europe

Representatives from several governments and services in Europe are currently participating in exchange meetings to discuss the opportunity of establishing the Barnahus (Children's House) model at national level. This model ensures a child-friendly environment and provides rapid access to justice and quality care for child victims and witnesses of violence. The services are oriented at the needs of the individual child, with a strong focus on avoiding retraumatization.



International and European law guiding the PROMISE project

The objective of the PROMISE project, which will run from 2015 to 2017, is to promote child-friendly, multi-disciplinary and interagency services supporting child victims and witnesses of violenceⁱ. Drawing on UN, EU and Council of Europe law and existing Barnahus models, this project aims to strengthen capacity, knowledge and exchange between government's justice and child welfare sectors, the medical field, public/private forensic and therapeutic services as well as child rights NGOs and advocates. The project promotes a one-stop approach for child victims and witnesses of crime, limiting the number of interviews and ensuring comprehensive care including social, medical, therapeutic and legal support.

The UN Convention on the Rights of the Child is the foundation for many laws with regard to children at risk of violenceⁱⁱ. In recent years, there has been a significant development of law, policy and practice concerning child victims and witnesses of violence at international, regional and national levels. Relevant European legal instruments include for example, the EU Victim Directive, the Directive on combating child sexual abuse and exploitation, the Anti-trafficking Directive and the Council of Europe Lanzarote Convention. The Council of Europe has developed relevant guidelines and recommendations on child-friendly justice and child-friendly social services.

Furthermore, guidance has been developed at the international and European level to strengthen the child protection systems' ability to prevent and respond to violence against children. Such guidance, including the European Commission's reflections on integrated child protection systems, recognizes that a key feature of these systems is a multi-disciplinary, interagency approach to prevent child victimization. The Barnahus model is a leading European multi-disciplinary and interagency practice model responding to child victims and witnesses of violence.

A key goal of the PROMISE Project is to provide high quality standards and practical guidance for a European child-friendly multi-disciplinary and interagency model, underpinned by assessment tools, policy analysis and advocacy. Another central goal of PROMISE is to stimulate the adoption of these practices throughout Europe through exchange and expert meetings, study visits and capacity building between professionals in the field.



This project is funded by the European Union through the Rights, Equality and Citizenship Programme (2014-2020). The project partnership is responsible for the content of this document.

The Promise Vision

The vision of the PROMISE project is to promote the human rights of children and prevent all forms of violence against children. Child victims and witnesses of violence in Europe are to be protected by child-friendly interventions and rapid access to justice and care, based on the following main principles:

1. Respect for the participatory rights of the child by ensuring that he/she is heard and receives adequate information and support to exercise these rights;
2. Multi-disciplinary and interagency collaboration during investigations, procedures, diagnostic and needs assessments and service delivery, with the aim of avoiding retraumatization and securing outcomes that are in the best interests of the child;
3. Comprehensive and accessible services that meet the individual and complex needs of the child and his/her non-offending family or caregivers;
4. Ensuring high professional standards, training and sufficient resources for staff working with child witnesses and victims of violence.

The PROMISE project will be the agent of change by mobilizing national and local agencies, governmental and non-governmental, towards establishing Barnahus and child-friendly centers in many more countries in Europe. The Barnahus modelⁱⁱⁱ refers to multi-disciplinary and interagency interventions organized in a child-friendly setting fulfilling the following criteria^{iv}:

1. Forensic interviews are carried out according to an evidence based protocol;
2. The evidentiary validity of the child's statement is ensured by appropriate arrangements in line with the principles of 'due process'. The aim is to prevent that the child has to repeat his/her statement during court proceedings if an indictment is made;
3. Medical evaluation for forensic investigative purposes as well as to ensure the child's physical well-being and recovery;
4. Psychological support, short and long term therapeutic services for trauma to the child and non-offending family members and caretakers;
5. Assessment of protection needs of the child victim and siblings in the family and follow up.

The PROMISE project will inspire change by sharing good practices and high quality standards for a European approach to the multi-disciplinary and interagency framework and cooperation in all situations such as:

1. Multi-disciplinary and interagency cooperation among social-, health-, and criminal law professionals and agencies to prevent, investigate and respond to violence against children including measures before, during and after the judicial proceedings;
2. Ensure a range of general and specialized social services and mental health care for children and families;
3. Identifying good practices in a) *coordination*, joint work and mutual adjustment between agencies, in b) *cooperation*, agencies influencing and affecting each other and in c) *collaboration*, in terms of shared services among agencies in a spirit of collective policy-making;
4. Ensuring awareness raising at national level of children's rights to a non-violent childhood.

The PROMISE vision, and the work to promote and support the establishment of the Barnahus model, or similar models and child-friendly centers, in all countries in Europe will continue even after the EU funded project comes to an end, through the establishment of a European Network of professionals.



Expectations and outcomes:

The objective of the PROMISE project is to promote child-friendly, multi-disciplinary and interagency (MD/IA) services supporting child victims and witnesses of violence by enhancing the capacity and knowledge of service delivery across Europe and by promoting an effective and enabling environment for MD/IA implementation. The main outcomes of the PROMISE project are:

- **Common good practice, strategies and standards adapted to the national context:** Good practice and transferable strategies for MD/IA services are inspiring existing, new and developing initiatives providing support to child victims and witnesses of violence;
- **A competent workforce:** Professionals across Europe are better equipped to implement and assess child-centred services and to engage with children through MD/IA models, including for therapy, medical assistance and collecting forensic evidence and information from children, safeguarding children's rights, preventing re-victimisation and securing a child friendly justice process, including for particularly vulnerable victims;
- **Child-centred, effective and enabling approaches:** Guidance for governments on the efficient use of resources, legal reform, child-sensitive legal procedures and efficient coordination contributes to creating enabling environments for MD/IA services;
- **Sustainable exchange and mutual learning:** Building on networks and dialogue generated by the project, professionals across Europe play an active and continued role in mutual learning, exchange, development and dissemination of good practice for MD/IA services for child victims and witnesses of violence, inviting other initiatives across Europe to get involved;
- **A strong voice for child protection and child-centred services:** Child rights NGOs and advocates are better equipped to promote a) integrated national child protection systems; b) recognised standards and strategies for MD/IA services for child victims of violence; c) effective and enabling government practice for MD/IA service delivery; and d) methodologies for collecting and assessing data on MD/IA practice and standards;
- **Increased awareness of international and regional law and guidance:** Decision-makers, professionals and child rights NGOs and advocates are aware of, and promote, the rights of child victims/witnesses as set out in EU Directives and Council of Europe Conventions to receive assistance, to be heard and to receive information;
- **Sustainable information flow and dialogue:** The project website, social media and e-learning material are used as resources by decision-makers, professionals and child rights NGOs and advocates to inform good practice by public and private services, government authorities and child rights organisations/advocates.

ⁱ The UN Convention on the Rights of the Child defines **violence** as “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse”.

ⁱⁱ Recently, the: “**Transforming our World: the 2030 Agenda for Sustainable Development**” is highlighting the prevention and protection of children against violence, in particular goal 16.2, which commits States to “end abuse, exploitation, trafficking and all forms of violence and torture of children”. The Goals emphasize access to justice and building effective, accountable and inclusive institutions at all levels.

ⁱⁱⁱ **Child-friendly centers** refer to child-friendly and multidisciplinary settings, which may assume the same tasks as Barnahus without the responsibilities of eliciting the child's disclosure for the purposes of judicial proceedings.

^{iv} The PROMISE project will develop a **comprehensive and detailed list of quality standards** and criteria.





PROMISE

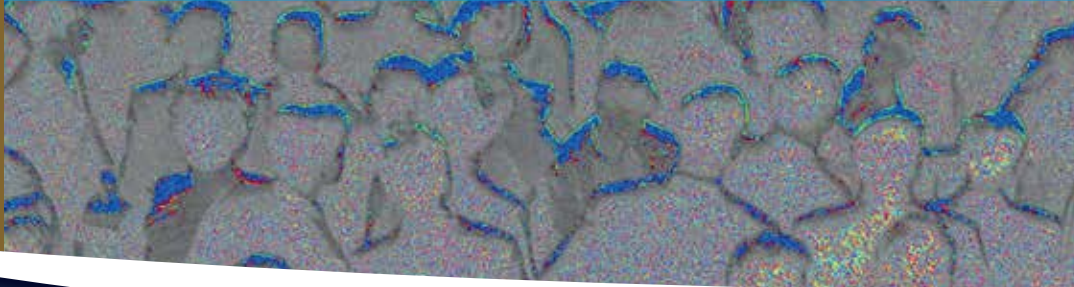
PROMISE is managed by the CBSS Secretariat Children's Unit. Partners include Child Circle, the Verwey-Jonker Institute, Barnahus in Iceland, Linköping and Stockholm and the KENTER in the Netherlands. It also builds on the expertise of prominent specialists in law, sociology, pediatrics, psychology and psychiatry from different European countries.

The Pilot Countries engaged on the project are: Bulgaria, Cyprus, Estonia, Germany, Hungary, Latvia, Lithuania, Malta, Poland, Romania, and the UK (England and Scotland). These countries have been identified as having the interest and potential to transform their current services for supporting child victims and witnesses of violence into a multi-disciplinary and interagency cooperation. The pilot countries will learn from existing Barnahus and similar models and also exchange experiences amongst themselves in order to support national level capacity-building and multi-disciplinary and interagency implementation strategies.

Find out more at www.childcentre.info/promise.



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For the PROMISE project, the Verwey-Jonker Institute undertook a stakeholder mapping. The objective was: *to map relevant models like, or similar to the Barnahus (Children's House) framework for child victims of violence across Europe*. In this report we give a summary of the results. First we describe an analysis of the main results. In overview tables the answers of the respondents on the key elements of their formally organized structure are reproduced.

