Barnahus Quality Standards

Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence
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IV. Linking provisions, legal obligations and the European Barnahus Standards - Overview
The European Barnahus Standards represent the first attempt in Europe to define the principles of the interventions and services referred to as the “Barnahus” model. The name Barnahus (“a house for children”) originates from Iceland where the first Barnahus was founded in 1998. Since then, many more Barnahus have been set up, mainly in the Nordic countries.

The almost universal ratification of the United Nations Convention on the rights of the child (UNCRC) has contributed to an emerging convergence of child welfare policies and practices in Europe, fuelled by enhanced collaboration and joint efforts of many different actors including governmental and non-governmental organisations, professional societies and universities. To this we can add the impact of the case law of the European Court of Human Rights and the European Court of Justice, which have referred to the UNCRC in an increasing number of rulings in the last decade. As a result, the two different child welfare traditions in Europe - the policing and procedurally driven “Child Rescue” on the one hand, and the family oriented, less child focused “Family support” on the other - have increasingly been replaced by strategies founded on the rights-based approach embodied in the UNCRC.

These developments have provided the context in which the principles and practice of the Barnahus model have been fostered and continue to spread. The Barnahus can be viewed as an attempt to “operationalize” children’s rights to receive adequate support and protection and to have access to child friendly justice. The European Barnahus Standards embody these operational practices and should therefore be seen as a guidance in a journey toward enhancing the rights of child victims and witnesses.

The Barnahus model embraces a multidisciplinary and interagency approach, ensuring collaboration between different agencies (judicial, social, medical) in one child-friendly premise, which offers comprehensive services for the child and family under one roof. The core of the Barnahus model is the assumption that the child’s disclosure is key both to identify and investigate child abuse for criminal and for protective and therapeutic purposes.

Although the term “Barnahus” has a quite distinct meaning, the Barnahus’ paths of coming into being and their organisational form differ between countries, and sometimes even within countries. There are variations between target groups, the juxtaposition of roles and responsibilities as well as the framework for collaboration between partners in implementing the core functions. This includes for example which professions carry out forensic interviews, which forensic protocol is applied or how therapeutic and medical services are delivered.

These differences in operational set-up underline the flexibility of the model and how ingeniously it has been adapted to diverse legal systems, social structures, cultural traditions and professional practices in the different countries, which is an inspiration and encouragement to those who want to establish a Barnahus. Importantly, the Barnahus is never a fixed model but rather an evolving practice, ready to adapt to the complex needs of children who are victims or witnesses of violence.

It is precisely by setting out a framework, within which there is some scope for flexibility and adaptability, that the importance of the European Barnahus Standards become apparent. There are of course limitations to how diverse implementation can be, while preserving the authenticity of the model. The Barnahus are founded on evidence based practices, including forensic protocols, therapeutic interventions and medical examinations. Fidelity to these evidence based principles of the Barnahus when implementing the model in different cultures is crucial.
Today, the Barnahus principles and practice are, implicitly and explicitly, reflected and promoted in many European legal and policy frameworks from the Council of Europe (CoE) and the European Union (EU), including in the CoE Convention on Protection of Children against Sexual Exploitation and Sexual Abuse (2010)\(^1\), the CoE Guidelines on child friendly justice (2010)\(^2\), the CoE Recommendation for child friendly social services (2011)\(^3\), the EU Directive on combating the sexual abuse and sexual exploitation of children and child pornography (2011)\(^4\) and the EU Directive on minimum standards on the rights, support and protection of victims of crime (2012)\(^5\).

The great majority of European countries have thus committed themselves to implement the obligations set out in international and regional law on which the Barnahus is founded. The application of the **European Barnahus Standards** will hopefully prove to be a valuable tool in this undertaking.

**Bragi Guðbrandsson, March 2017**
I. Introduction
When a child is exposed to violence, a number of different actors, including social services, medical and mental health services and law enforcement actors, have a duty to safeguard and promote the rights and well-being of the child. Each actor carries an individual responsibility to ensure that their role is fulfilled in an effective and child-friendly manner, and that the child’s best interest remains a primary consideration.

Where these actors do not work together, the child can be drawn into parallel enquiries and assessments, moving between different agencies and disciplines, potentially causing repetitious and intimidating experiences. Repeated interviews with different persons, in different locations and by different services in combination with inadequate interviewing methods have been shown by research and clinical experiences to contribute to the retraumatisation of the child.6

This is a serious problem since the child’s disclosure is fundamental to ensure the safety and protection of the child, to determine the need for physical and mental recovery, and to secure a successful and child-friendly7 criminal investigation and judicial process8. In addition, inadvertent inconsistencies between interviews conducted at different times, locations and by people with varying degrees of competence may lead to the child being discredited as a witness.9

In recent years, there has been an increasing recognition that multidisciplinary and interagency (MD/IA) collaboration is crucial to fulfilling the rights of child victims and witnesses of violence to protection, participation, support and assistance. Multidisciplinary and interagency collaboration can bring important benefits to both children and professionals, but it is not always without challenges. It demands commitment and investment from all agencies involved. Solid building blocks for a well-functioning and effective organisation that enables agencies to work together in a coordinated fashion must be put in place. Importantly, the cooperation needs to be set up in a way that places children’s rights, needs and interests at the centre.

Drawing on international and European law and guidance and the Barnahus10 model, this document introduces ten good practice standards, the “European Barnahus Standards”, for multidisciplinary and interagency services for child victims and witnesses of violence in Europe adapted to the child. The key purpose of the standards is to provide a common operational and organisational framework that promotes practice which prevents retraumatisation, while securing valid testimonies for Court, and complies with children’s rights to protection, assistance and child-friendly justice.


A core purpose of the standards is to ensure that measures are put in place to prevent retraumatisation11 of child victims and witnesses of violence. By practising in accordance with the standards, retraumatisation can be prevented, since it involves ensuring that the best interest of the child informs practice and decisions; that the right of the child to be heard is fulfilled without repetitive interviews; that the child is interviewed and supported by specialised and competent professionals; that interviews are carried out in a multidisciplinary environment in one child-friendly premise, offering adequate support to the child and care-givers without undue delay and; that the child is not obliged to appear in Court.12
The standards are inspired by previous work in this area, including the Standards for Accredited Child Advocacy/Protection Centres of the National Children’s Alliance in the USA and the criteria developed for evaluation of Barnahus in Sweden. They have been developed with the input from experienced experts and practitioners from Barnahus and child-friendly centres working with child victims and witnesses of violence in Europe. They are based on what has been demonstrated to work and have genuine added value for the child, the family and the professionals working together.

Importantly, the standards embody a model to fulfil legal obligations set out in European and international law. International and European law typically require general principles, such as best interests of the child and child participation, to be observed and they also contain certain specific provisions concerning key processes, such as interviews with child victims and assistance provided to them. The standards correspond to how these legal provisions can be implemented in day to day practice through cross cutting activities and core functions of the Barnahus. The standards also address the institutional arrangements which underpin the practice, and although these are more rarely provided for in the law itself, they are addressed in authoritative guidance on implementing these laws. In short, the institutional arrangements describe ways of working that enable teams to maximise their ability best to fulfil the legal provisions.

In adopting the standards, it should be noted that it is important continuously to assess and evaluate the organisational set-up and performance of the service. The indicators attached to the standards provide some examples of information that reveal if the standards are met, and to what extent, and eventually supports review of policy and practice. Evaluation also provides important opportunities to ensure that new research, guidance, law and experience inform the practice and set-up of the service. Special efforts should be made to ensure that children are heard and that their views inform the set-up of the service.

This document adopts the definition of violence set out in Article 19 of the Convention on the Rights of the Child: “all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse”.

“Child” is here defined according to article 1 of the UN Convention on the Rights of the Child: “[e]very human being below the age of eighteen years”.

Did you know that?

In 1958, paediatrician Dr C. Henry Kempe set up a pioneer multidisciplinary team addressing child maltreatment in Denver (Colorado, US). Dr C. Henry Kempe and his colleagues later published a paper “The Battered Child Syndrome” which played a key role in establishing and recognising the prevalence and effects of child abuse. In 1977, Dr C. Henry Kempe founded the International Society for the Prevention of Child Abuse and Neglect (ISPCAN), which is a multidisciplinary platform of committed professionals to work toward the prevention and treatment of child abuse, neglect and exploitation globally. In 2006, Barnahus Iceland received the ISPCAN Multidisciplinary Team Award.

www.ispcan.org
Child-friendly justice promotes a comprehensive approach including embracing respect for children’s rights to be heard and receive information; multidisciplinary and interagency collaboration with the aim of avoiding retraumatization and securing outcomes in the best interest of the child; comprehensive and accessible services that meet the individual and complex needs of the child and the non-offending family or caregivers; ensuring high professional standards, training and sufficient resources for staff working with child witnesses and victims of violence and; preventing violence through for example awareness-raising. See PROMISE Vision, http://www.childrenatrisk.eu/promise/ vision


15 The standards have been developed with oral and written input of the PROMISE project expert group with experts from e.g. Barnahus Iceland, Barnahus Linköping (Sweden), Barnahus Stockholm (Sweden), the Child and Youth Protection Centre in Zagreb (Croatia), the MDCK in Haarlem (Netherlands), Linköping University (Sweden) and the Child Protection Program at the University of Iowa. An extensive consultation on the standards and this document has taken place through oral exchange and a written survey with Government Ministries/authorities and/or service representatives from Bulgaria, Cyprus, Estonia, Finland, Ireland, Germany, Hungary, Latvia, Lithuania, Malta, Poland, Romania, United Kingdom (England and Scotland).

16 The standards are for example in line with the Council of Europe’s guidelines on child-friendly justice, and promote key elements of child-friendly justice (accessibility (e.g. standard 3 and 4), age appropriate (e.g. standard 1-3, 5, 6), speedy (e.g. standard 1-3, 5, 6), diligent (e.g. standard 5 and 6), adapted to and focused on the needs of the child (e.g. standard 11-13, 5, 6), respecting the right to due process (e.g. standard 6), respecting the right to participate in and to understand the proceedings (e.g. standard 1,2), respecting the right to private and family life (e.g. standard 1, 3, 4), respecting the right to integrity and dignity (e.g. standard 11, 3, 4)).

17 The table in chapter IV provides an overview of the legal obligations and international guidance that are embodied by the standards. References are also made to relevant legal provisions and guidance under each of the profiles describing the standards in chapter 3. Also see O’Donnell, Rebecca (2017) PROMISE Compendium of Law and Guidance: European and International Instruments concerning Child Victims and Witnesses of Violence, Stockholm, PROMISE Project Series www.childrenatrisk.eu/promise/publications/


19 A Tracking Tool has been developed to offer a simple means to assess where services find themselves in the process of establishing a Barnahus model that incorporates the standards presented in this document. The tracking tool can be downloaded from the PROMISE website, www.childrenatrisk.eu/promise/publications/
II. The Barnahus Model
II. The Barnahus Model

Barnahus (Icelandic for “a house for children”) is recognised as a leading child-friendly, multidisciplinary and interagency model responding to child victims and witnesses of violence.\(^{20}\) The purpose of Barnahus is to offer each child a coordinated and effective response and to prevent retraumatisation during investigation and court proceedings. One key role of the Barnahus is to help produce valid evidence for judicial proceedings by eliciting the child’s disclosure so that the child does not have to appear in Court should the case be prosecuted.\(^{21}\)

In carrying out this role, the Barnahus offers a one-stop-shop approach, embracing cooperation between relevant authorities and agencies such as police, social services, child protection, physical and mental health services and prosecutor in one child-friendly premise. The Barnahus also plays an important role in enhancing awareness and knowledge of violence against children with key stakeholders.\(^{22}\)

A key characteristic of the Nordic Barnahus is that they are embedded in national authorities, such as the social services, health and child protection systems as well as the judicial system. Different national contexts have generated different institutional arrangements to achieve this. For example, in some places, the Barnahus is embedded as a function of the social services and child protection authorities and in others they fall under the health system or law enforcement. Regardless, they embrace multidisciplinary and interagency collaboration in one child-friendly premise. In some places, it is a police officer who interviews the child in the Barnahus; in others it is a child specialist such as psychologist or a social worker. However, all Barnahus ensure that the person who interviews the child receives special training in forensic interviews with children, that there are evidence based protocols for forensic interviews and that the representatives from the multidisciplinary team observe the interview in an adjacent room.

There are a number of multidisciplinary and interagency services similar to the Barnahus model in Europe with a varying degree of involvement of the national health, social services, child protection system and/or local authorities.\(^{23}\)

Another important distinction between the Barnahus approach and other multidisciplinary, interagency services sometimes lies in the formal recognition of the judicial system. Depending on the judicial system, and sometimes on the approach and attitude of judges, children in some European countries still have to appear in Court even if there are facilities to hear children in a child-friendly, multidisciplinary setting. This can be the case even though the services have become an element of the national and/or local authorities, e.g. child protection services or the health system.

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**Key common criteria of Barnahus**

- **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 the child from having 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, is made available;
- **4.** Psychological support and short and long term therapeutic services for trauma to the child and non-offending family members and caretakers are made available;
- **5.** Assessment of the protection needs of the victim and potential siblings in the family is made; and follow up is ensured.
The Children’s Advocacy Centre (CAC) model in the US and the Barnahus model share the same overall goal to prevent retraumatisation and to provide a multidisciplinary response to the child. The police and prosecution are involved in the multidisciplinary response, but in the CAC model, the service is not formally embedded in the judicial system. The child has to appear in court if an indictment is made since the testimony is not taken under the conditions of “due process” as set out in the US system. However, the CAC prepares and supports the child for the court proceedings, and plays an important role in reducing the number of times that the child has to disclose his or her experience, while ensuring that there is a coordinated response by different services for each child.

Other types of multidisciplinary child-friendly centres typically share the goal to reduce retraumatisation and offer a multidisciplinary response but lack systematic involvement of all relevant national and local authorities, including police and prosecutors. Some of these services have been embedded in the national or local health, social services or child protection systems. Other have been established and operate as independent agencies and engage in interagency collaboration in a more informal way.

Some European countries have adopted a multidisciplinary and interagency approach to child protection without offering joint services in one child-friendly location. While some of the standards may be applicable to certain elements of such arrangements, this guidance strongly promotes a “one-stop-shop” approach, through which the child is offered a coordinated response in one child-friendly location. In fact, this is considered a key condition to preventing retraumatisation and seuring the child’s disclosure.

Each national context will have their own specific opportunities and challenges to set up a Barnahus or similar model. The illustrations of five different models below and the examples of noteworthy practice in this document illustrate how different national contexts have generated diversity and ingenuity in setting up and operating Barnahus and similar child-friendly services, while still complying with core principles and values that the standards represent.

Did you know?

The first Children’s Advocacy Center (CAC) was set up in the US in 1985. The aim of the centre was to prevent retraumatisation by providing a child-friendly, safe and neutral environment for forensic interviews, medical examination and treatment. Today there are more than 900 children’s advocacy centres across the United States, housing multidisciplinary teams including law enforcement officers, child protection personnel, prosecutors, lawyers, advocates, mental health therapists and medical personnel, working together to minimize duplication and reduce trauma.

The first Barnahus in Europe was set up in Iceland in 1998. Inspired by the CACs in the US, the Barnahus integrated the CAC forensic interview and child protection approach with the national social services, child protection and judicial system. Since then, the Barnahus model has gradually spread to the other Nordic countries. There are currently more than 50 Barnahus in the Nordic countries, including Denmark, Norway and Sweden, Åland (Finland) and in Greenland and the Faroe Islands.

A key difference between the CAC and Barnahus is that Barnahus are embedded in the public welfare system and the judicial system, which gives them a legal standing as public organisations financed with public funds. In contrast, CAC centres are mostly set up as independent or private non-for-profit organisations.

Another fundamental difference is that Barnahus provides a setting in which the child’s disclosure is elicited to produce valid evidence for court proceedings, while respecting the rights of the defence. The CAC centres help prepare and support the child to appear in Court.

21 In most countries, older children, often above 15 years old, have to appear in court even if an interview has taken place in the Barnahus.


24 For further information about Children’s Advocacy Centers please see box below or visit http://www.nationalchildrensalliance.org/cac-model
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<th>ASSESSMENT, THERAPY, SUPPORT – SPECIALISED MENTAL HEALTH PROFESSIONAL</th>
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| **Court testimonies:**  
  - Responsible for obtaining the child’s testimony under the auspice of a court judge and under observation of the defense as well as the prosecution, the police, the local child protection and the child’s legal advocate  
  - Mediates questions from the judge, the defense and others as appropriate  
  - Testimonies are recorded for usage during court hearing if indictment is made | **Assessment and treatment**  
  - Responsible for mental health assessment on the basis of validated instruments and questionnaires  
  - Responsible for mental health treatment by the application of evidence based therapy |
| **Exploratory interviews:**  
  - Eliciting the child’s narrative if possible in cases where disclosure is absent or ambiguous at the request of the local child protection services  
  - Obtaining the child’s testimony in cases where the suspected offender is below the age of criminal responsibility at the request of the child protection services | **Ensuring access to treatment**  
  - Providing the therapy in the home environment of the child victims in the countryside |
| **MEDICAL EXAMINATION – SPECIALISED MEDICAL STAFF**  
  - Medical examinations are carried out at the request of the police, the local child protection services, the child or the parents  
  - An experienced pediatrician, a gynecologist and a trained nurse, staff of the University Hospital of Iceland, are responsible for the examination  
  - Acute forensic medicals are performed at the University Hospital | **Support to non-offending parents**  
  - Providing counselling and advice to the non-offending parents/caregivers and siblings as appropriate |
| **OTHER TASKS – BARNAHUS TEAM**  
  - Consultation and advice to the local child protection services at requests  
  - Coordination case meeting and case management prior to court testimonies  
  - Interagency meetings for consultation prior referrals to Barnahus  
  - Submission of reports to courts in prosecuted cases  
  - Recording of cases and keeping archives  
  - Education, training and awareness raising |  |

- Formally embedded in the government agency for child protection.
- The government agency ensures funding, financial and staff management.
- The government agency provides legal and other professional guidance and is responsible for administrative issues in collaboration with the courts, the district prosecution, the police, the university hospital and the local child protection which are partners of Barnahus.
BARNAHUS LINKÖPING

The key role of Barnahus is to coordinate the parallel criminal and child welfare investigations

BARNAHUS TEAM

Coordinates interagency collaboration, planning and case management;
Evaluation and development of the mission and activities of the Barnahus;
Management and oversight of the implementation of guidelines and routines;
Producing annual narrative and financial reports of the Barnahus activity to the respective agencies;
Ensuring that data are collected and statistics are compiled;
Crisis support and treatment.

MEDICAL EXAMINATION - SPECIALISED MEDICAL STAFF

- Responsible for medical evaluations and/or forensic medical evaluations
- Actively engages in interagency collaboration, planning and case management

FORENSIC INTERVIEW AND CRIMINAL INVESTIGATION - POLICE and PROSECUTOR

- Responsible for the criminal investigation
- A police officer with special education carries out the forensic interview according to evidence based protocols
- The interview is filmed and the testimony is valid in court
- The prosecutor observes the forensic interview
- Actively engages in interagency collaboration, planning and case management

ASSESSMENT, THERAPY AND SUPPORT - SPECIALISED MENTAL HEALTH PROFESSIONALS/CHILD AND ADOLESCENT PSYCHIATRY

- Responsible for mental health assessment on the basis of validated instruments and questionnaires
- Responsible for mental health treatment
- Provides crisis support
- Actively engages in interagency collaboration, planning and case management

CHILD PROTECTION - SOCIAL SERVICES

- Responsible for child protection assessment and acute risk assessment
- Responsible for information to child and parents/caregivers
- Responsible for follow up with child and parents/caregivers
- Observes forensic interview
- Actively engages in interagency collaboration, planning and case management

ASSESSMENT, THERAPY AND SUPPORT - SPECIALISED MENTAL HEALTH PROFESSIONALS/CHILD AND ADOLESCENT PSYCHIATRY

- Responsible for mental health assessment on the basis of validated instruments and questionnaires
- Responsible for mental health treatment
- Provides crisis support
- Actively engages in interagency collaboration, planning and case management

Formally embedded in the national agency for child and adolescent psychiatry and the social welfare service/child protection service.
A formal agreement signed by the leadership of each participating agency governs the interagency collaboration, operation and funding of the Barnahus.

The Barnahus is financed with public funding. The participating agencies share the costs for the Barnahus on an equal basis.
# Three Nordic Barnahus – Three different models

## Barnahus Stockholm
The key role of Barnahus is to coordinate the parallel criminal and child welfare investigations.

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<th>Assessment and Therapy - Specialised Mental Health Professionals/Child and Adolescent Psychiatry</th>
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<tr>
<td>- Responsible for medical evaluations and/or forensic medical evaluations</td>
<td>- Responsible for mental health assessment on the basis of validated instruments and questionnaires</td>
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<tr>
<td>- Engages actively in interagency collaboration, planning and case management</td>
<td>- Responsible for crisis support</td>
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<td>- Sometimes observes the forensic interview</td>
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<td>- Engages actively in interagency collaboration, planning and case management</td>
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<th>Child Protection - Social Services - Lead Agency</th>
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<tr>
<td>- Responsible for the criminal investigation</td>
<td>- Coordinates interagency collaboration, planning and case management</td>
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<tr>
<td>- A trained police officer carries out the forensic interview according to evidence based protocols</td>
<td>- Responsible for child protection assessment and acute risk assessment</td>
</tr>
<tr>
<td>- The interview is filmed and the testimony is valid in court</td>
<td>- Responsible for information to child and parents/caregivers</td>
</tr>
<tr>
<td>- The prosecutor observes the forensic interview</td>
<td>- Responsible for follow up with child and parents/caregivers</td>
</tr>
<tr>
<td>- Engages actively in interagency collaboration, planning and case management</td>
<td>- Observes forensic interview</td>
</tr>
<tr>
<td></td>
<td>- Engages actively in interagency collaboration, planning and case management</td>
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- The Barnahus is embedded in the social services/child protection services.
- A formal agreement signed by the leadership of each participating agency governs the interagency collaboration, operation and funding of the Barnahus.
- The Barnahus is financed with public funding. The participating agencies share the costs for the Barnahus on an equal basis.
THE CHILD AND YOUTH PROTECTION CENTRE IN ZAGREB
The key role of the Center is to provide effective and systematic support to traumatized children and their families

MEDICAL EXAMINATION - SPECIALISED MEDICAL PROFESSIONALS – NEUROPAEDIATRICIAN
- Responsible for medical evaluations and/or forensic medical evaluations focused on the child's somatic and neurodevelopmental status
- Responsible for referring the child to adequate medical treatment when needed
- Observes the forensic interview
- Participates in planning of the multidisciplinary assessment and treatment
- Engages actively in interagency collaboration, planning and case management

FORENSIC INTERVIEW - MENTAL HEALTH PROFESSIONALS SPECIALISED IN FORENSIC INTERVIEWS/ACCREDITED EXPERT WITNESSES
Initial Interviews:
- Responsible for conducting the initial interview, when a child is referred to the Centre to gather forensic information
- The interview is recorded and sent to relevant agencies

Joint Forensic Interviews (only done upon order by the Court):
- Responsible for conducting the forensic interview which is observed by the judge, the defendant and his/her lawyer, the police and other relevant parties involved in the case. The observing parties can pose questions through the professional who interviews the child
- The interview is filmed and the testimony is valid in court since it has been ordered by the court

SPECIALISED MENTAL HEALTH PROFESSIONALS – LEAD
- Responsible for clinical assessment of the child’s development, mental health and traumatisation, as well as existing needs regarding mental health and child protection
- Psychologists, social pedagogues and speech therapists gather information using validated psychometric instruments;
- Responsible for supporting the child and family through crisis support, treatment and follow up
- Participate in planning of the multidisciplinary assessment and treatment
- Contribute to, and engage actively in interagency collaboration, planning and case management

CHILD PROTECTION - SOCIAL WORK PROFESSIONALS
- Participate in the multidisciplinary assessment, and are responsible for the assessment of the child's social environment and acute risk
- Provide counselling for parents when needed
- Observe the forensic interview
- Participate in the planning of the multidisciplinary assessment and treatment
- Coordinate collaboration with the social welfare center, participate in planning and case management

The Center is embedded in the healthcare system.
The interagency collaboration is governed by governmental protocols of procedure in cases of abuse.
The Center is financed from two funding sources: healthcare insurance and funding by the city government of Zagreb.
Cooperation with the police, social welfare and the judicial system
### MDCK Haarlem

The key role of the MDCK is to coordinate the child welfare and criminal investigations and the planning for long term safety, risk driven care and recovery.

#### MDCK TEAM

- Coordinates interagency collaboration, investigations, planning and case management;
- Facilitates information sharing between agencies;
- Evaluation and development of the mission and activities of the MDCK;
- Management and oversight of the implementation of guidelines and routines;
- Ensuring that data are collected and statistics are compiled, feeding into annual reports and scientific research.

#### SPECIALISED MEDICAL STAFF

- Responsible for medical evaluations and/or forensic medical evaluations
- Engages actively in interagency collaboration, planning and case management

#### SPECIALISED MENTAL HEALTH and YOUTH CARE PROFESSIONALS (for children and for adults/parents)

- Responsible for mental health assessment
- Responsible for mental health treatment
- Responsible for crisis support
- Contributes to interagency collaboration, planning and case management
- Engages actively in interagency collaboration, planning and case management

#### POLICE and PROSECUTOR

- Responsible for the criminal investigation
- A police officer with special education carries out the forensic interview according to evidence based protocols
- The interview is filmed and the testimony is valid in court
- The prosecutor and the defense lawyer can come and watch the interview after it’s done
- Engages actively in interagency collaboration, planning and case management

#### Youth protection and Safe at Home25 (LEAD)

- Responsible for child protection assessment and acute risk assessment
- Responsible for information to child and parents/caregivers
- Responsible for follow up with child and parents/caregivers
- Engages actively in interagency collaboration, planning and case management

> The MDCK is a network of organisations including safe at home, youth protection, medical, judicial/law enforcement, health and youth care organizations.

> A collaboration agreement signed by the leadership of each participating agency governs the interagency collaboration.

> The MDCK premise and running costs are financed together by the hospital, the police and the local government; however the participating organizations and (local) government have not formally regulated contributions and the budget.

25 Safe at Home is the organization to which citizens and professionals report or ask advice about child protection concerns.
III. The European Barnahus Standards
This chapter presents the European Barnahus Standards. The standards are composed of cross-cutting principles and activities, core functions and institutional arrangements that enable child-friendly, effective and collaborative practice. In most cases, the standard consists of several related elements of the overall standard. For example, the standard related to target group includes two elements: “an inclusive and broad definition” and “non-discrimination”.

Together, the standards provide a practical framework for actors who wish to establish and run services that embrace the core principles and features of the Barnahus model. The standards can be used as inspiration and support in continuously developing the cross-cutting activities of the service, core functions and the organisational set up. The standards also provide guidance on building staff capacity as well as prevention work, such as sharing information and building knowledge with important stakeholders.

The description and rationale of the standards and suggested indicators, the related law and guidance and relevant tools are summarised in tables containing the “Standard Profile”. A key to the “Standard Profile”, describing the content, can be found on page 28. The standards are furthermore illustrated by several good practice examples of how the standards have been implemented by experienced Barnahus and child-friendly centres for child victims and witnesses of violence in Europe.

Applying the standards from initial report to trial

The standards are transferable and can be adapted to different national systems and processes related to social services and child protection, health care, criminal investigation and judicial proceedings. Figures III a – e provide illustrative examples of the process from initial report to trial and the role of the Barnahus or child friendly centre in different countries throughout the different steps.

The first standard contains three cross-cutting activities that are applicable to the full process, from initial report to trial: placing the best interests of the child at the centre of practice and decision-making (1.1), ensuring that children’s rights to be heard and receive information are fulfilled (1.2) and preventing undue delay (1.3).

Standards 2-4 relate to institutional arrangements and organisational set-up, for example, ensuring a child-friendly environment, and are relevant to the parts of the process that take place in the Barnahus.

Standard 5-10 deal with core functions and specific activities that the Barnahus undertakes, for example, interagency case management, forensic interviews or medical examination.
Figure III a. Process from initial report to trial and the involvement of Barnahus Iceland

**Disclosure/Reported Suspicion**
Report to child protection services of disclosure or suspicion of violence against a child is mandatory and should be done as soon as possible.

**Child Protection Services Assessment**
The Child Protection Services (CPS) must take action within maximum 7 days to initiate child protection assessment and possible intervention if needed. In acute cases, initial assessment and possible intervention is initiated within 24 hours.

**Referral to Barnahus**
When the disclosure is clear, e.g. the offender is identified, the CPS refers the case to Barnahus and the Police simultaneously without delay. The police request the court judges to take the child’s statement. When disclosure is ambiguous or weak, a referral to Barnahus for exploratory interview is made.

**Initial Planning Meeting**
Planning and case management meetings are held in Barnahus on a weekly basis. All new referrals are addressed at this meeting. The goal is to ensure that the forensic interview (court statement) takes place within 14 days of disclosure for younger children, and max 21 days for teenagers.

**Forensic Interview with child**
The forensic interview (court statement) typically should take place within 1 to 2 weeks after the initial planning meeting, depending on the decision of a court judge. The interview is carried out by a professional in the area of mental health and child development with training in child forensic interviewing.

**Interagency Case Management Meeting**
An inter-agency case management meeting is held on the day of the forensic interview to plan the interview and determine potential action by the respective agencies on the basis of the findings of the interview.

**Medical Examination**
Medical assessment takes place 2-4 weeks after disclosure/reported suspicion. In acute cases medical examination takes place within 72 hours of the abuse to secure forensic evidence.

**Mental Health Assessment**
Mental health assessment takes place within 2-4 weeks after disclosure depending on the characteristics and the situation of the child. In some cases it may be necessary to assess mental health and commence therapy immediately after the forensic interview.

**Crisis Support/Mental health intervention for non-offending caregivers/family**
Non-offending caregivers typically accompany the child to Barnahus where they receive information and advice. In addition they are offered up to three support sessions if needed. If assessed to need more, the CPS is responsible for providing further mental health treatment.

**Criminal Investigation**
A decision to commence a criminal investigation is taken once the case is notified to the police and simultaneous referral is made to Barnahus. Typically the criminal investigation takes 4 to 6 months until the findings are submitted to the prosecution.

**Decision to prosecute**
The time frame for the decision to prosecute is at the moment up to 90 days. However, there is a general agreement among prosecutors that this needs to be reduced to 60 days. The State Prosecution has recently issued instructions with the aim of shortening this time frame.

**Trial**
The trial should take place no longer than 4 weeks after the decision to prosecute. Thus the whole procedure from when the criminal investigation commences until the court ruling takes place would most often take 10 to 14 months. The goal is to ensure that the District Court ruling and the appeal to the Supreme Court would be maximum a year.
Disclosure/ Reported Suspicion
Report to child protection services of disclosure or suspicion of violence against a child is mandatory and should be done as soon as possible.

Child Protection Services Assessment
An assessment of acute protection needs must be done by the Child Protection Services within 24 hours after the case is reported. The Child Protection Services must take a decision within maximum 14 days to initiate further child protection assessment and to inform the parents/caregivers. Child protection assessments are carried out in all cases that concern violence against children, sexual violence and witnessing violence.

Referral to Barnahus
Barnahus is notified by the Child Protection Services as soon as possible. Other members of the interagency team, including the police and the child clinic at the hospital can also refer cases to Barnahus. The Child Protection Services can contact Barnahus for consultation if they are uncertain about a case.

Initial Planning Meeting
An interagency initial planning meeting is held within a week after the notification by one of the members of the interagency team. This is made possible since the Barnahus holds weekly meetings. The Child Protection Services has decided before the meeting if a police report should be filed. If so, the report is handed over to the police at the initial meeting. The prosecutor decides if the child should be interviewed and if a legal representative should be appointed.

Forensic Interview with child
If there is a decision to initiate a criminal investigation and to interview the child, the forensic interview mostly takes place the same week as the initial planning meeting. According to guidelines, the child interview should be performed within 14 days. Before the interview takes place, a short interagency meeting takes place to plan the interview. The forensic interview is carried out by a trained police officer in Barnahus. The following people observe the interview via a television screen in the observation room: the police, public prosecutor, the special representative, a social worker and staff from Barnahus. While the child is being interviewed, a staff member from Barnahus often offers the accompanying person support.

Medical Examination
Medical assessments are carried out in Barnahus the same day as the forensic interview.

Interagency case management meeting
A short case management meeting is held directly after the forensic interview to coordinate timely and effective follow up with the child and parents/family.

Crisis Support/Mental Health Assessment
The child and family can be referred to crisis support by the Child Protection Services or by the police. A mental health assessment is done if the Barnahus team identifies a need to do so.

Follow up meeting
The child and caregivers are invited to Barnahus for a follow up meeting within a week after the forensic interview. If needed, crisis support is provided.

Decision to prosecute
The preliminary investigation must be completed 90 days after reasonable suspicion has been reported. The decision to prosecute is sometime done on the same day as the forensic interview, sometimes it takes longer. Undue delay can be avoided since the prosecutor observes the forensic interview and because of the introduction of “Barnahus weeks” during which the prosecutor does not take on other incoming cases than those treated at Barnahus.

Trial
The trial should take place urgently when it concerns victims under the age of 18. If the suspect is under 18 or arrested during investigation the trial must be scheduled within 2 weeks.
Figure III c. **Process from initial report to trial and the involvement of Barnahus Stockholm**

### Disclosure/Reported Suspicion
Report to child protection services of disclosure or suspicion of violence against a child is mandatory and should be done as soon as possible.

### Medical Examination
Medical assessments are carried in Barnahus out the same day as the forensic interview.

### Child Protection Services (CPS) Assessment
In acute cases, a child protection assessment is initiated within 24 hours. The Child Protection Service (CPS) must decide whether or not to initiate a child protection assessment and inform the parents within 14 days. Child protection assessments are carried out in all cases that concern violence against children, sexual violence and witnessing violence.

### Interagency Case Management Meeting
A short case management meeting is held directly after the forensic interview to coordinate timely and effective follow up with the child and parents/family.

### Crisis Support/Mental Health Assessment
The child and family can be referred to crisis support by the CPS or by the police. The family is offered an initial session within 1-2 weeks. An assessment of mental health and need for further treatment is always performed as a part of the crisis support.

### Referral to Barnahus
Barnahus is often contacted for consultation by the CPS when they receive a report of a suspected crime against a child and then decides whether a police report should be made or not.

### Decision to Prosecute
The preliminary investigation must be completed within 90 days after reasonable suspicion has been reported. The prosecutor is obliged to make a decision whether to prosecute or not within 90 days after the police report has been made.

### Initial Planning Meeting
The CPS makes a police report and the police at Barnahus decides whether an initial criminal investigation should be carried out. The police starts to gather information about the child.

### Trial
The trial should take place urgently when it concerns claimants under the age of 18. If the suspect is under 18 or arrested during investigation, the trial must be scheduled within 2 weeks.

### Initial Criminal Investigation
An initial interagency planning meeting is held as soon as possible after the notification by the CPS. The prosecutor decides if and when the child should be interviewed and if a legal representative should be appointed.

### Forensic Interview with Child
According to guidelines, the child interview should be performed within 14 days. The forensic interview is carried out by a trained police officer in Barnahus. In the adjacent room, the following people witness the interview via a television screen: the police, public prosecutor, the special representative, a social worker and sometimes a psychologist from Barnahus. While the child is being interviewed, a staff member from Barnahus offers the accompanying person support.
Figure III d. Process from initial report to trial and the involvement of the Child and Youth Protection Center in Zagreb

**Disclosure/Reported Suspicion**
Report to child protection services of disclosure or suspicion of violence against a child is mandatory and should be done as soon as possible.

**Child Protection Services Assessment**
Reported suspicion is sent to social services, the police and state attorney, which react as soon as possible.

**Initial Criminal Investigation**
The police must take action within maximum 3 days from suspicion to gather information and provide a report to state attorney. The state attorney must also take action within 3 days and make a report to the investigative judge. The investigative judge must initiate a hearing with the child within 24 hours. A legal representative is assigned to the child.

**Initial Planning Meeting**
Referrals are mostly formal (referred by social services, police, medical doctor, school, day care center, residential care facilities...). Parents may initiate assessment or seek help and advice with a referral from their family doctor. The referrals fall under the national health care system since the Center is a health care institution.

**Referral to the Child and Youth Protection Center**
There are daily team meetings within the Center, when the team exchanges information, manage cases and make joint decisions regarding assessment and treatment plan, according to the individual needs of the child.

**Forensic Interview with child**
Forensic interviews are mostly done at the court, in a separate room, video-linked with the courtroom, with mental health professional conducting the interview. Sometimes, children victims and/or witnesses of abuse and neglect are referred to Child and Youth Protection Center for forensic interviews, where a specifically trained staff member carries out the interview.

**Medical Examination**
Medical examination is a part of multidisciplinary team assessment in the Center, and if necessary, urgent examination (within few days) is carried out. If needed, children are referred to the children’s hospital with which the Center cooperates.

**Interagency case management meeting**
The interagency team works closely on a daily basis and interagency meetings are organised if there is a need.

**Mental Health Assessment**
Mental health assessments take place within few days. The timing is established on the basis of the characteristics and situation of the child.

**Crisis Support and Treatment**
The Center provides crisis support, short-term and long-term treatment, as well as follow-up to children and non-offending caregivers.

**Decision to prosecute**
A decision to prosecute must be taken within 6 months from initial report.

**Trial**
The trial should start no longer than 2 weeks after the decision to prosecute if the suspect is in custody and no longer than 4 weeks if the suspect is not placed in custody.
Disclosure/ Reported Suspicion

Reporting to "Safe at Home" of disclosure or suspicion of violence against a child is regulated by a reporting code and should be done as soon as possible.

Child Protection Services Assessment

Safe at Home decides within 24 hours if help should be provided by a neighbourhood team or if a child protection assessment should be initiated and the case be referred to the MDCK. Assessment and potential intervention is initiated within 24 hours in acute cases.

Referral to MDCK

MDCK is notified by Safe at Home as soon as possible in acute and serious cases. Other members of the interagency team, including the police and the child clinic at the hospital, can also refer cases to Barnahus.

Initial Planning Meeting

An initial interagency planning meeting is held as soon as possible after the referral by Safe at Home to MDCK. The prosecutor decides if and when the child should be interviewed. If the prosecutor decides not to interview the child, the interagency team plans the other assessments that need to take place (including a fact finding interview by a psychologist).

Initial Criminal Investigation

Safe at Home makes a police report if there is a suspicion that a crime has been committed and the police and prosecutor decide whether an initial criminal investigation should be carried out. If so, the police starts to gather information about the child.

Forensic Interview with child

The forensic interview is carried out by a trained police officer within two weeks after the decision by the prosecutor. The interview is always recorded.

Medical Examination

Medical examination is a part of the multidisciplinary team assessment in the Center, and if necessary, an urgent examination (within few days) is carried out (top-toe or medical forensic examination).

Interagency case management meeting

The interagency teams work together on a daily basis and interagency meetings are organised as needed.

Mental Health Assessment

Mental health assessments take place within 10 days. The timing of the assessment is established on the basis of the characteristics and situation of the child and the parents/caregivers. Parents/caregivers are offered an assessment if needed.

Crisis Support

The MDCK offers crisis support, short-term and long-term treatment, as well as follow-up support to children and parents/caregivers.

Decision to prosecute

The prosecutor should make a decision whether to prosecute, without undue delay, after the initial criminal investigation has been finalised.

Trial

Trial should take place without undue delay. If the suspect is in custody, the trial has to start within 104 days.
Key to the reading the Standard Profiles

What is the standard?

This box describes the standard.
Drawing on UN, EU, Council of Europe law and the Barnahus’ model, this document introduces ten good practice standards for child-friendly and effective services to child victims and witnesses of violence. The core aim of the standards is to prevent retraumatisation, secure valid testimonies for Court and comply with children’s rights to protection, assistance and child-friendly justice. The standards support implementation of European and international legal obligations and authoritative guidance.

Why should this standard be met?

This box describes the rationale behind the standard.
References to international and European legal obligations: The standards and indicators embody legal obligations, referred to in this box. These legal obligations, categorized in the PROMISE Compendium on Law and Guidance, are based on specific provisions in international and European legal instruments. Click on the hyperlinks to see a list of recitals and articles in the legal instruments that are of particular relevance to the standard and legal obligation.

References to Guidance: The specific arguments why a standard should be met are based on children’s rights as set out in international and regional law, drawing on authoritative guidance provided by the UN Committee on the Rights of the Child and other bodies such as the Council of Europe.

Research and Experience: The standards also place children’s needs at the centre, with an overall aim to ensure effective and child-friendly practice for all children who are victims or witnesses of violence. The standards are therefore developed taking into account research in relevant areas as well as experience of multidisciplinary and interagency teams28 of what has been demonstrated to work and have a positive impact on the wellbeing of the child victim or witness and their non-offending family members.

Examples of indicators and/or evidence that the standard is being met

This box provides examples of indicators and types of evidence that can be collected to measure if a standard is met.

The indicators can help establish whether and to what extent a service applies a certain standard to its work and support review of policy and practice. The indicators draw on international and regional law and guidance and can, like the standards, be adapted to reflect most legal, policy, socio-economic and cultural environments.

Most of the indicators are policy-related indicators, indicating the existence of relevant policy or procedures, such as a formal interagency agreement. The indicators can also represent physical or technical arrangements, such as the existence of an interview room with audio-visual links to another room in the service. All of these indicators require descriptive information about for example policy, procedures, protocols, physical and technical arrangements in place.

In a few cases quantitative indicators can be used to supplement the policy/procedure indicators, such as the number of days between disclosure or reported suspicion and forensic interview (undue delay). The quantitative indicators require the collection of specific data with a numerical value.

It is important to note that the indicators provide examples of indicators and evidence. Each service should invest time in developing a complete set of indicators for monitoring performance. The indicators and types of evidence proposed here can serve as guidance and inspiration.

It is also important to note that the indicators are strictly related to the operations and performance of the service, and do not provide information about the short term or long term impact and/or outcomes on children who benefit from the services.

Resources

This box includes references to practical tools, guidance, policy, templates and other resources that can help support implementation of the standard.

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28 The references to experience in this section draws on experience and good practice from the PROMISE partners and experts, including Barnahus Iceland, Barnahus Linköping (Sweden), the Child and Youth Protection Centre in Zagreb (Croatia), the MDCK in Haarlem (Netherlands) as well as Barnahus in Denmark and Norway.
Standard 1
Standard 1. Key principles and cross-cutting activities

Standard 1 consists of three key principles, which inform the multidisciplinary practice and decision-making at Barnahus. The principles are operationalised through cross-cutting activities that are implemented as integral parts of the respective core functions set out in standards 5-10. The cross-cutting activities are enabled by the institutional arrangements and organisational set-up contained in standards 2-4.

The key principles and cross-cutting activities embody core provisions in international, regional and national law, including article 3 and 12 of the UN Convention on the Rights of the Child. They are crucial to preventing retraumatisation, which is a central aim of the Barnahus.

1.1 Best interests of the child

**What is the standard?**

1.1 Best interests of the child: The best interests of the child are a primary consideration in all actions and decisions concerning the child and the non-offending family/caregivers/support persons.

**Why should this standard be met?**

**International and regional legal obligations:** The best interests of the child (UNCRC article 3) is a right, a general principle and a rule of procedure. It is relevant to the implementation of the whole Convention, including children’s right to protection against violence.

**Links to legal provisions:**

- *Ensuring the best interests is a primary consideration in the application of the obligations in the Directives*

**Guidance:** UNCRC article 3 requires actors to carefully consider the impact of their actions on children to ensure that the best interests of the child is a primary consideration. The Committee on the Rights of the Child (CRC) emphasises that article 3(3) is relevant to the provision of all services and facilities for children. Services for child victims and witnesses of violence must therefore ensure that decisions on appropriate action are based on an assessment of the best interests of the individual child. The CRC recognises that the concept of the child’s best interests is “complex and its content must be determined on a case-by-case basis”.

**CRC General Comment no 13** emphasises that “the right of children to have their best interests be a primary consideration in all matters involving or affecting them must be respected, especially when they are victims of violence, as well as in all measures of prevention”.

**CRC General Comment no 14** places specific emphasis on multidisciplinary teams in assessing and determining the best interests of the child (GC no 14, para 47). Working together, a multidisciplinary and inter-agency team is particularly well placed to ensure a comprehensive assessment and that the best interests of the child is considered throughout the full process. Common routines and measures help to ensure that the best interests of the child are central to the multidisciplinary and interagency process.

Examples of indicators and/or evidence that the standard is being met

- A framework/routine/process for engaging the multidisciplinary and interagency team in assessing and determining the best interests of the individual child is in place and is systematically implemented;
- A (non-exhaustive and non-hierarchical) list of elements to be included in the best interests assessment with the purpose of ensuring the full and effective enjoyment of the child's rights as set out in law and guidance\(^{37}\) is in place and is systematically used by the Barnahus team;
- Staff are clear about their respective roles and responsibilities in assessing and determining the best interests of the individual child;
- Staff are aware of and have received training on how to apply procedures and tools for this purpose, for example check-lists, protocols and processes to assess and determine the best interests of the individual child;
- The best interests assessments take into account the child's views, the child's identity, preservation of family environment and maintaining relations, care, protection and safety of the child, situation of vulnerability, right to health, education and that the respective elements are balanced\(^{38}\);
- The best interests determination is carried out by qualified professional(s) without undue delay. It is based on established facts and informed by the child and non-offending caregiver(s).

Resources

- A framework for assessing and determining the best interests of the child\(^{39}\) (See below)
- Tools for ensuring consistent and systematic consideration of the best interests of the child (See below)
Placing the best interests of the child at the centre - Barnahus Linköping

Placing the best interests at the centre is a key principle that informs all decisions and interventions concerning a child victim or witness at the Barnahus in Linköping. Taking the best interests of the child as a primary consideration is a central activity across the multidisciplinary process and interventions, which includes information gathering, analysis and planning and reviewing outcomes.

A range of different tools, presented in the box below, support staff in making sure that there is a consistent and systematic consideration of the best interests of the child in the Barnahus.

The tools help the team to ensure that consideration of the best interests is an integral part of planning and case management, that staff are aware of and act on their role and responsibilities, that changes in staff and resources do not disrupt ongoing processes and interventions and that children and caregivers are provided with opportunities to give feedback on decisions and interventions. The tools also help ensure that there is adequate information sharing to support a multidisciplinary assessment and determination of the best interests of the child, although this is sometimes a challenge due to legal restrictions.

Examples of tools to ensure consistent and systematic consideration of the best interests of the child

**Routines and procedures:** Clear routines and procedures are a cornerstone for making sure that the best interests are a primary consideration in decisions and interventions at Barnahus and that there is systematic consideration of the best interests of the child in each case. There are, for example, clear procedures and a standing agenda for the regular inter-agency planning and joint consultation meetings relevant to assessing and determining the best interests of the child.

**Cooperation agreement:** The cooperation agreement, further discussed under standard 2, clearly sets out the commitments of the respective agencies, including roles and responsibilities. This has proven to be crucial to ensure that the engagement of the agencies and the services provided become less sensitive to changes in staff and resources (which can have a negative impact on continuity and consistency in assessing and determining the best interests of the child).

**Checklists:** The Barnahus uses checklists to make sure that the best interests of the child are a primary consideration in decisions and interventions in Barnahus concerning the child victim as well as for assessing and determining the best interests of the child.

**Evaluation:** The Barnahus carries out a periodical evaluation of the operational process and the environment at Barnahus from a child perspective. This helps ensuring that the overall process and environment is child-friendly and sensitive to elements that are fundamental to ensuring that the best interests of the children are given due consideration in general terms and in individual cases.

**Follow up meetings:** The Barnahus organises a meeting with the child and caregivers within a week after the forensic interview at Barnahus. This provides an opportunity to ask the child and the parents for feedback about the experience at Barnahus. Phone interviews are also held with the person who accompanied the child to Barnahus who can provide feedback about how the child experienced the visit at Barnahus.
The UN Committee on the Rights of the Child (CRC) has provided authoritative guidance on how assessment and determination of the best interests of the child should be carried out and what elements should be considered in its General Comment no 14 (2013) on the right of the child to have his or her best interests taken as a primary consideration (art 3, para 1).

The CRC states that "assessing the child's best interests is a unique activity that should be undertaken in each individual case, in the light of the specific circumstances of each child..." including the "individual characteristics of the child or children concerned, such as, inter alia, age, sex, level of maturity, experience, belonging to a minority group, having a physical, sensory or intellectual disability, as well as the social and cultural context in which the child or children find themselves, such as the presence or absence of parents, whether the child lives with them, quality of the relationships between the child and his or her family or caregivers, the environment in relation to safety, the existence of quality alternative means available to the family, extended family or caregivers, etc.

According to the CRC, determining what is in the best interests of the child starts with an assessment of the specific circumstances that make the child unique. This process can be supported by drawing up a "non-exhaustive and non-hierarchical list of elements that could be included in a best interests assessment" that is relevant to the Barnahus context.

The CRC recommends that the list provides concrete guidance, but that it is flexible enough to allow for consideration of other factors that may be relevant for the individual child. The CRC underlines that "elements that are contrary to the rights enshrined in the Convention or that would have an effect contrary to the rights under the Convention cannot be considered as valid in assessing what is best for a child or children".

The CRC considers that the elements below should be taken into account when assessing and determining the child's best interests. The elements must be carefully balanced. For a detailed discussion on each of these elements see General Comment no 14 paragraph 52 ff.

(a) The child's views  
(b) The child's identity  
(c) Preservation of the family environment and maintaining relations  
(d) Care, protection and safety of the child  
(e) Situation of vulnerability  
(f) The child's right to health  
(g) The child's right to education
1.2. Right to be heard and receive information

What is the standard?

**1.2 Right to be heard and receive information:** Children’s rights to express their views and to receive information are respected and fulfilled.

Why should this standard be met?

**International and regional legal obligations:** Children’s right to participation is one of the general principles of the UN Convention on the Rights of the Child (UNCRC). Article 12(2) states that the child should in particular be provided with the opportunity to be heard in any judicial and administrative proceedings affecting the child.

**Links to legal provisions:**
- Taking due account of the views of the child
- Provision of information
- Right to interpretation & translation
- Possibility to order that the child victim be heard through the use of appropriate communication technologies

**Guidance:** The UN Committee on the Rights of the Child (CRC) emphasises that “age should not be a barrier to the child’s right to participate fully in the justice process”. Child victims’ of violence rights to be heard is laid down in article 19 of the UNCRC and has been reaffirmed and clarified several times by the CRC (e.g. CRC General Comment no 1348). The CRC has urged States to “ensure that the views, needs and concerns of child victims who have suffered sexual abuse or other violent crimes be presented and considered in proceedings where their personal interests are affected”. In doing so, States “must undertake all necessary measures to ensure that the right to be heard is exercised ensuring full protection of the child” (CRC General Comment no 1249). Measures should for example be implemented to avoid re-traumatisation, for example avoiding repetition of testimonies and the use of video-taped interviews (General Day of Discussion on the right of the child to be heard43).


**Research and Experience:** The right to receive information and to be heard are fundamental aspects of the multidisciplinary and interagency process. Systematically hearing the views of the child will provide a deeper understanding of the child’s wishes and needs and facilitate determination of the best interest of the child as well as appropriate and sustainable action, including, for example, treatment and therapy. Access to adequate information is a prerequisite for meaningful participation. It will also empower the child and help the child gain control over the situation47.

Children can also provide invaluable feedback which will make the environment, the process and interventions offered in the service child-friendly and appropriate to children’s needs and wishes, if they are provided with opportunities to provide perspectives on their experience at the service.
Examples of indicators and/or evidence that the standard is being met

- Staff receive training on how to communicate, listen and share information with children, adapted to their age and development;
- Forensic interviews are carried out in a manner that helps the child to exercise the right to be heard in judicial proceedings (also see Standard 6 on Forensic Interviews);
- Children and their non-offending parents/care-givers can influence the timing, location and set up of interventions such as treatment and therapy;
- Children are given opportunities to provide feedback on their experience at the service;
- Information is routinely and systematically made available to children and their caregivers, adapted to the age and development of the child;
- Children and caregivers receive information in a language they understand;
- Special efforts are made to ensure that children with special needs or disabilities have the same opportunities to receive information and to be heard.

Resources

MDCK Information material for young children
MDCK Information material for adolescents
MDCK Information material for parents and caregivers

"There was something for the youngster and there were something for adults and something for children. ... So it was really, yes, it was really comfortable to be in the children house."

Girl, 12 years old, interviewed for an evaluation of children’s experiences at a Barnahus in Denmark.

In a recent study carried out by the Fundamental Rights Agency, based on interviews with 392 children in 9 EU Member States, children underline the importance of their right to be heard with understanding and respect, highlighting the need for clear and practical guidelines as well as training for all professionals who come into contact with children.

Children’s feedback on their experience at the service – Barnahus Linköping

The Barnahus in Linköping invites the parents and the child to a follow-up meeting within a week after the forensic interview. Not all parents bring the children along, but if they do so, the child is asked to respond to a survey about his or her experience at the Barnahus.

The survey is adapted to the child’s age, for instance, by using symbols, and is carried out with the support of a staff member. The role of the staff member is adapted to the specific needs and circumstances of the child. In some cases, the staff member reads the questions and helps the child to fill in the responses. In other cases, it is enough to introduce the survey and leave the child to read and answer the questions independently.

The survey includes questions about how it was to be brought to the Barnahus, how the child felt about the environment at the Barnahus, how he or she felt about talking to the police or seeing the doctor. Other questions address the period after the child’s visit to the Barnahus, for instance, how it was for the child to see the parents again after the interview and, if the social workers were present at that moment, what the child thinks about the social workers. The child is also asked how it was to come back to the Barnahus with their parents and if the child felt overall that he or she has been listened to.

The team at the Barnahus in Linköping refrains from administering the survey with the child immediately after the forensic interview. This would not be considered ethical as the child is in a particularly vulnerable situation just after the interview. Another reason for the timing of the survey is that the parents have to give their permission for the child to participate in the survey.

Regulating the involvement of children in Child Protection Assessments in Danish Law

The examination [child protection assessment] shall include a consultation with the child or young person. The consultation may be dispensed with if factors such as the maturity of the child or young person or the nature of the case strongly suggests that the decision should be made without prior consultation. If the consultation cannot be conducted, steps shall be taken to establish the views of the child or young person. The consultation may be conducted without the consent and presence of the custodial parent where this is in the best interests of the child or young person,” § 50:3

Consolidation Act on Social Services\textsuperscript{53}
The Barnahus in Tallinn opened in January 2017. Before the opening, the Barnahus organised a consultation with children and parents to receive feedback on the location of the Barnahus, the interior environment, the service provided and the staff in the Barnahus. The consultation was organised since the Barnahus staff felt that it was imperative to adapt the service to the needs and perspectives of the users.

The consultation was carried out by inviting 11 children, girls and boys aged between 6-15 years, and 9 parents to participate in a simulated visit to the Barnahus. All visits followed the same pattern, replicating the actual process that children and parents undergo when they come to the Barnahus. The participation was voluntary and with the consent of the parents. All visits were recorded.

First the Barnahus Coordinator welcomed the family, directed them to the cloakroom and then invited them to the meeting room. In meeting room, the children were offered a snack and a juice. The staff explained the purpose of Barnahus and what would happen next. The coordinator then showed the parent to the waiting room and the coffee machine, offered the child to use the toilet and then went to the interview room with the child. The interview followed the same procedure as a real forensic interview, but the topic of the interview was Christmas and holidays. The staff used an evidence based protocol (NICHD) and the interview was recorded. After the interview, the child went to the medical examination room to undergo some simple examinations such as weighing and measuring. The children also tried the examination chair/bed. Once the medical examination had been completed, they went back to the meeting room to discuss the visit and the experience. The parents also gave feedback about the waiting room and their experiences.

The feedback from the participants was for most part good. A key finding was that although the environment is important (and was rated highly), the most important aspect of the Barnahus is the people who work there, from the housekeeper to the forensic doctor, and how they behave towards the children.

The children pointed to a few shortcomings that the Barnahus has addressed. Some may seem minor but greatly improves the overall experience in the Barnahus. For example, the children asked for healthier snacks and they didn't like the smell in the waiting room. The children also noted that the sink in the toilet was too high for the younger children and there was no potty available for the youngest children. The older children asked that the medical examination room be adapted to older children as well. The Barnahus will work with students to make the room more adapted to youth. The children also gave suggestions for games and toys that can keep them busy while waiting.

Now operational, the Barnahus in Tallinn continues to ask for feedback from its visitors, using a rating system from 1-5, similar to the one that is used in the school system. The feedback has proven very useful in helping to improve the experience at the Barnahus.
1.3 Avoiding Undue Delay

What is the standard?

1.3 Avoiding Undue Delay: Measures are taken to avoid undue delay, ensuring that forensic interviews, child protection assessments and mental health and medical examinations take place within a stipulated time period and that children benefit from timely information.

Why should services meet this standard?

Links to legal provisions:
No unjustified delay between the reporting of the facts and interviews take place individual assessment of each child’s circumstances and non-offending family members’ needs
Provision of information
Provision of assistance and support

Guidance: The UN Committee on the Rights of the Child (CRC) states that effective help requires that actions, once decided through a participatory process, must not be subject to undue delay (UNCRC General Comment no 1354). Also see CoE Guidelines on Child-friendly Justice55 (2010), Ch. IV.D.4.

Research and Experience: Avoiding undue delay is a fundamental principle of child protection and child-friendly criminal investigations and proceedings. Effective interagency work also relies on avoiding undue delay so that each of the agencies can carry out their respective functions in a timely manner. This has a positive impact on the well-being of the child and can improve the outcomes of the criminal investigation and judicial process. For example, avoiding undue delay between reporting and the forensic interview can make it easier for a child to tell their story and remember details, thus improving the quality and value of the child’s testimony. It may also reduce risk that the child is exposed to pressure to withdraw statements. It also enables an early assessment of potential protection needs without contaminating the evidential value of the child’s statement. This in turn ensures that there is no delay in protecting the child from further exposure to violence. A medical exam done in a timely manner may help physical findings of violence be recognized and documented to guide both treatment processes and judiciary proceedings. It may also allow therapeutic services to start earlier.

Examples of performance indicators and/or evidence that the standard is being met

- Data is collected to support monitoring of time limits in individual cases and to monitor overall performance in avoiding undue delay;
- Joint consultations to prepare for the forensic interview take place as early as possible to avoid delay of the interview;
- The prosecutor who leads the preliminary investigation observes the forensic interview in an adjacent room so that there is no delay in accessing relevant information;
- Social worker(s) observe the forensic interview in an adjacent room so that action to meet needs and protect the child can be taken without delay;
- The Barnahus staff are accessible during the forensic interview to ensure that they can provide immediate crisis intervention if necessary;
- A joint follow up meeting takes place directly after the forensic interview to ensure that everyone is clear about next steps, roles and responsibilities;
- Checklists are used during the interagency meetings before and after the forensic interview to ensure that nothing is missed and that appropriate and adequate action is taken;
- An assessment of the need for medical examination takes place without delay. If medical examination is needed it ideally takes place on the same day as the forensic interview in the premises of the Barnahus;
- An assessment of the need for therapeutic services, including crisis support, takes place without delay.

Quantitative indicators56

- Time passed between disclosure or reported suspicion and the initiation of the child protection assessment;
- Time passed between disclosure or reported suspicion and the first interagency planning meeting;
- Time passed between the interagency planning meeting and the forensic interview;
- Time passed between disclosure or reported suspicion and forensic interview
- Time passed between disclosure or reported suspicion and mental health assessment;
- Time passed between disclosure or reported suspicion and medical examination;
- Time passed between disclosure or reported suspicion and medical/mental health intervention for the child and the non-offending family/care-givers/support persons;
- Time passed between initiation of the preliminary criminal investigation and the decision to prosecute;
- Time passed between initiation of the preliminary criminal investigation and trial.
Avoiding undue delay is a fundamental principle of child protection and child-friendly criminal investigations and proceedings. Yet avoiding undue delay remains a challenge in most countries in Europe. The Barnahus in Linköping has developed an effective operational framework to ensure a timely response in compliance with the relevant national laws and guidance.

The key enabling factor to avoid undue delay is a well-functioning collaboration and communication between the respective agencies, regulated by clear organisational procedures. It is also important that the professionals involved see the benefits of reducing delay from the child’s perspective and for their own planning and performance.

The Barnahus in Linköping holds joint consultation meetings every Monday to discuss potential cases and prepare the interviews. This allows the Barnahus team to carry out the interview with the child within the same week. The meetings follow a predetermined agenda and the person chairing the meeting has a checklist to ensure that all necessary elements are covered. Experience has shown that it is essential for the person who introduces a case in the consultation meeting to be well prepared so that the team quickly can get an adequate overview of the case.

Medical investigations are carried out in the Barnahus on the same day as the interview. The commitment and flexibility of the paediatricians at the hospital is essential to make this possible. The proximity to the hospital is also an important factor since it reduces travel.

A key factor in reducing the investigation time is that the prosecutor observes the interview in the Barnahus in an adjacent room. This allows the prosecutor to instruct the police on next steps immediately. The prosecutor's presence in the Barnahus has become more frequent after the Prosecutor's Office introduced 'Barnahus weeks'. During the Barnahus weeks, the prosecutor does not take on any other incoming cases. This helps to substantially reduce the time required for the investigations.

Another important factor in avoiding delays in the investigations is that the interview with the child and the suspect are held the same day. The interview with the child at the Barnahus is scheduled in the morning while the suspect is interviewed at the police station in the afternoon. This is possible due to careful planning and coordination.

Preventing undue delay is a concern not only for the criminal investigations and proceedings but also for the child protection assessment and the prompt follow-up to the child’s needs. Staff from the Barnahus team therefore observe the interview and offer crisis intervention if there is a need. In addition, there are usually two social workers present who observe the interview with the child. Information that the child shares during the interview will therefore inform the child protection assessment by the social workers and their continued work with the child. The presence of two social workers helps ensure that the case assessment, consideration of the child's best interest and decision making are balanced and informed by different perspectives. This constitutes an added value particularly in complex cases.

Directly after the interview, there is a short meeting with the staff involved to coordinate effective and timely follow up. A checklist is used to ensure that all issues are covered adequately. One of the key considerations in this context is to avoid unnecessary delay in informing the child and caregivers about the next steps and the support that they can benefit from.

Within a week after the interview, the child and caregivers are invited to Barnahus for a follow-up meeting. In cases where one of the caregivers is the suspect under investigation, he or she is also invited, provided that the social services have decided that it is safe and in the best interests of the child. In cases of severe violence or sexual abuse where one of the caregivers is the suspect, the caregiver under investigation will not be present at the follow-up meeting. This meeting offers an opportunity to provide the child and caregiver(s) with updated information and to hear about the child’s experiences and the situation at home since the interview. If needed, crisis support is provided.

The Barnahus in Linköping collects data and keeps statistics about the timing of each activity and delays incurred during the process. This enables monitoring and helps the team to stay informed about further steps required to ensure that undue delay is prevented.
**Goals and Maximum Time Limits - Barnahus Iceland**

**Time passed between disclosure or reported suspicion and the initiation of the child protection assessment**

Suspicion of abuse, or disclosure from a child, should be reported immediately to the Child Protection Services (CPS). Once a report has been received, the CPS must take action to assess the situation of the child within a week, **maximum 7 days**. In acute cases, in particular if the child is at risk, the CPS acts on the same day, or at the latest the day after.

**Time passed between disclosure or reported suspicion and forensic interview**

The time period between the disclosure/reported suspicion and forensic interview should be **maximum 14 days**, in particular for younger children. Younger children are more likely to forget and are often more suggestive. There is also a risk that parents/caregivers affect their testimony. For teenagers, the delay should be a maximum of 21 days.

Barnahus Iceland’s goal is to hold the forensic interview as soon as possible, preferably **within 7 days** of the request for an interview being made to the Barnahus (see below).

**Time passed between request for forensic interview, planning meeting and forensic interview**

Barnahus Iceland has a meeting every week in which new cases are looked at. The Barnahus aims at holding forensic interviews **within 7 days** from the request for court testimony. In acute cases, interviews are scheduled immediately. An interagency meeting is held the same day as the interview with the child to plan the forensic interview and to determine further action by the respective agencies, on the basis of the findings in the interview.

**Time passed between disclosure or reported suspicion and mental health assessment**

The mental health assessment should ideally take place **within 2 weeks** after disclosure/reported suspicion. The time limit can be determined on the basis of an assessment of the child’s characteristics, such as age, the child’s situation, such as relation between the suspected perpetrator and the child, and other variables. For some children it is important to make the assessment and start therapy directly after the forensic interview, whereas in other cases, it is possible to wait 2-3 weeks. The time period between disclosure/reported suspicion and mental health assessment should **never exceed 4 weeks**.

**Time passed between disclosure or reported suspicion and medical examination**

Medical examination should take place **between 2-4 weeks** after disclosure/reported suspicion, except in acute cases where medical assessment should take place within 72 hours of the abuse.
Time passed between disclosure or reported suspicion and medical/mental health intervention for non-offending family/care-givers/support persons

The time limit is similar to that applying in the case of the child victim. The therapist and doctors meet the non-offending parents/caregivers at the same time as the child. If the non-offending parents/caregivers are in need of assessment and treatment, it is provided by the CPS outside of the Barnahus.

Time passed between initiation of the preliminary criminal investigation and the decision to prosecute

The goal is to keep to 6-8 months, with a maximum 12 months’ time period between initiation of the criminal investigation and decision to prosecute. During this period, it is very important that the child receives therapeutic support. The period provides an opportunity for the therapist to assess and share information in Court about the child’s progress and how the abuse has affected child’s life and wellbeing.

Time passed between initiation of the decision to prosecute and trial

The trial should take place no longer than 4 weeks after the decision to prosecute.

Denmark: Law and guidelines to prevent undue delay of child protection assessment and forensic interview

Time passed between disclosure or reported suspicion and the initiation of the child protection assessment

The child protection units in Denmark have to make a decision on whether to initiate a child protection assessment within 24 hours of being notified about knowledge or suspicion of abuse/violence. The child protection unit must finish the assessment within 4 months. The Barnahus also makes an assessment during this period, which is integrated into the child protection assessment.57

Time passed between the between disclosure or reported suspicion and the forensic interview

The forensic interview should take place as soon as possible and, if possible, not later than 7 days after the reported knowledge or suspicion of violence.58
28 The references to experience in this section draws on experience and good practice from the PROMISE partners and experts, including Barnahus Iceland, Barnahus Linköping (Sweden), Barnahus Stockholm (Sweden), the Child and Youth Protection Centre in Zagreb (Croatia), the MDCK in Haarlem (Netherlands) as well as Barnahus in Denmark and Norway.

29 The full framework of standards contributes to the implementation of UNCRC article 19 and 6 (right to life, survival and development). Non-discrimination (UNCRC art 2) is treated below under standard 3 as an integral aspect of determining the target group of the service.

30 Recent interventions on the theory and practice of the best interest of the child can be found in this compilation of essays: The best interests of the child – A dialogue between theory and practice (Council of Europe, March 2016) https://rm.coe.int/CoERMPublicCommonSearch-Services/DisplayDCTMContent?documentId=0900001680657e56

31 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf

32 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf

33 Assessment refers to evaluating and balancing all the elements necessary to make a decision in specific situation. Determination refers to the formal process designed to determine the child's best interests based on the best-interests assessment (CRC GC 14 para 47).


37 See General Comment no 14, paragraph 50 and 80

38 In General Comment no 14, the Committee identifies some situations where it is imperative to balance the elements, including where the different elements considered in a case come into conflict (for example, preserving family environment vs protecting the child from the risk of violence by the parents).


41 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf

42 http://www2.ohchr.org/english/bodies/crc/docs/AdvanceVersions/CRC-C-GC-12.pdf

43 http://www.crin.org/EN/HRBodies/CRC/Pages/DiscussionDays.aspx


47 In a recent study carried out by the Fundamental Rights Agency, based on interviews with 392 children in 9 EU Member States, children underline the importance of their right to be heard with understanding and respect, highlighting the need for clear and practical guidelines as well as training for all professionals who come into contact with children (http://fra.europa.eu/en/press-release/2017/child-friendly-justicechilds-perspective)

48 The location of the treatment is not always flexible, for example where specific services are provided only in one place. Mobile resources and local hearing rooms/service facilities should be used to the greatest extent possible to meet the wishes and needs of the child and parent(s)/caregiver(s).


52 Bornenotat 1/16 (BRNERDET, March 2016) http://www.boerneraadet.dk/media/166117/BRD-Boernenotat_116_Boernehusene.pdf
Standard 2
Standard 2.
Multidisciplinary and Interagency collaboration in the Barnahus

What is the standard?

2.1 Formal status: The Barnahus is formally embedded in the national or local social or child protection services, law enforcement/judicial system or national health system. The Barnahus can operate as an independent service if it enjoys a statutory role, recognised by the national or local authorities, including a formal mandate to collaborate with relevant public agencies.

2.2 Organisation of the multidisciplinary and interagency collaboration in the Barnahus: The collaboration is structured and transparent, including clearly established roles, mandates, coordination mechanisms, budget, measures for monitoring and evaluation, which contribute to efficient processes and ensure continuity and stability.

2.3 Process and practice of the multidisciplinary and interagency collaboration in the Barnahus: The multidisciplinary/interagency intervention begins at the initial report and is guided by a process for collaborative interventions across the continuum of the case.

Why should this standard be met?

Links to legal provisions:
Multi-disciplinarity/coordination/cooperation

Guidance: The UN Committee on the Rights of the Child (CRC) promotes effective procedures, including inter-sectoral coordination, mandated by protocols and memorandums of understanding as necessary (CRC General Comment no 1359). Also see CoE Guidelines for Child-friendly justice (2010) Ch.IV.5; CoE Rec. Child-friendly social services (2011) Ch.V.E and; the EC Reflection paper proposing 10 principles for integrated child protection systems.

Research and Experience: A structured organisation, with clearly established roles, mandates, coordination mechanisms, budget, measures for monitoring and evaluation, contributes to efficient and collaborative interagency teams, mutual respect of roles and a shared sense of responsibility. Formal agreements covering such key elements ensure continuity and commitment from the respective agencies’ leadership. In Denmark, law regulates the features of the Barnahus, including roles and responsibilities of staff, the premises, financing, forms of collaboration and data collection.

The support of a permanent staff member designated to coordinate operations and interventions of the interagency team can help ensure a smooth process and continuity. The coordinator can oversee that the members of the team follow up on their respective responsibilities and detect problems in the multidisciplinary and interagency process at an early stage. The coordinator can furthermore play an important role in planning and keeping to routines and procedures.

Examples of indicators and/or evidence that the standard is being met

Formal status
– The Barnahus is recognised and regulated by the national or local social or child protection, law enforcement/judicial system or national health system through law or formal agreement;
– The Barnahus has a formal mandate from relevant authorities to coordinate the interagency collaboration and to provide multidisciplinary services.

Formal interagency foundational agreements
– A formal interagency foundational agreement signed by authorised representatives commit the respective agencies to multidisciplinary and interagency collaboration and service delivery in the Barnahus;
– The formal foundational agreement covers elements such as purpose, goals, commitments, roles and responsibilities, organisation, finance, privacy, time period and conflict management;
— The formal foundational agreement ensures that all agencies contribute on equal terms so that the collaboration addresses the child’s best interests from all perspectives including health, child protection, legal, and mental health;
— The formal foundational agreement is reviewed and updated regularly to reflect changes in legislation and the respective agencies’ procedures and structures;
— A steering committee, including representatives from the different agencies, oversees and governs the implementation of the formal foundational agreement;
— Staff are aware of formal foundational agreement and have received training in its application.

Coordination
— One or more staff members are mandated to act as the Barnahus coordinators of the interagency collaboration;
— The role of the coordinator is clearly defined in a job function description;
— A Barnahus interagency liaison group meets regularly to discuss practical aspects related to the daily interagency collaboration, including routines and protocols, in Barnahus.

Budget
— The participating agencies commit, through a formal agreement, to contribute to the budget for the Barnahus’ running costs and the Barnahus staff.

Child Safeguarding and other internal policies
— The service has a Child Safeguarding Policy and reporting mechanisms in place, in line with national legislation and covering the four international child safeguarding standards: Policy, People, Procedures and Accountability.
— Staff are supported and guided by key internal policies such as a child safeguarding policy and procedures, staff code of conduct, a whistle-blowing policy, safety procedures and an emergency protocol.

Outline of formal interagency agreement, Barnahus Linköping
(see below)
MDCK Collaboration Agreement
Quality Framework Multi-Disciplinary Approach ++: An effective approach to child abuse, domestic violence and sexual violence in the Netherlands
Keeping Children Safe

Tools, policy

Standard 2
Regulating the establishment and use of Barnahus in the Nordic countries

Denmark
In Denmark, a law was adopted that made it mandatory to establish and use Barnahus on a national level before the establishment of the Barnahus:

"The municipal councils in the region shall establish a children's house in each region to examine a child’s or young person’s circumstances if the child or young person has been exposed to abuse or in the event of any suspicion of such abuse. (2) The Minister for Social Affairs and the Interior may lay down rules governing the layout, operation, financing and duties, etc. of the children’s houses".67

In addition, the Danish Order on Barnahus regulates the operation and key features of the Barnahus (see summary of the order below). There are also quality standards issued by the National Board of Social Services.

Iceland
Barnahus in Iceland was set up without formal regulations, on the basis of an informal agreement between the participating agencies. Today, the Government Agency for Child Protection (Barnaverndarstofa) is mandated to "run special service centres with the objective of promoting interdisciplinary collaboration, and strengthening co-ordination of agencies in the handling of cases of child protection".68

Furthermore, the law on criminal procedure (nr. 88/2008) stipulates that debriefing of child victim aged up to 15 years shall be conducted under the auspices of a court judge "in a facility especially designed for such purposes"69 and with the support of a specially trained person.70 These provisions of the law on criminal procedures are generally understood by court judges to mean that it is mandated to interview children below the age of 15 in Barnahus.

Norway
Barnahus in Norway were initially set up without a formal regulative framework. Today, the Criminal Procedure Act and regulation on facilitated investigative interviews make it mandatory for police and prosecutors to use the Barnahus.71

Sweden
The Barnahus in Sweden were set up without a formal regulative framework. There is currently no law that makes it mandatory to use the Barnahus. However, the National Police Agency, together with the Prosecution Authority, the National Board of Forensic Medicine and the National Board of Health and Welfare, has issued national guidelines and standards that must be fulfilled in order for cooperative operations in shared premises to be called "Barnahus:

"The goal of such cooperative operations is to ensure that children who are suspected of having been exposed to crime enjoy legal protection, proper treatment and support and, if needed, immediate crisis and therapeutic interventions. Throughout the process, the focus shall be on the best interests of the child. The child shall be informed in all matters that affect him or her and shall be given the opportunity to express his or her views to the extent and in such a manner that his or her level of maturity permits. The investigations that are carried out in parallel within the legal system and the social services shall be commenced promptly and shall be conducted as rapidly as consideration for the child and for the complexity of the situation permits. The preliminary investigation shall be completed and a decision made as regards the laying of charges as soon as possible. The investigations are subject to statutory completion deadlines".72

The details of the interagency collaboration in the Barnahus are mostly regulated by formal agreements between the agencies (see example from Barnahus Linköping).
A formal framework for multidisciplinary and interagency collaboration - Barnahus Linköping

The Barnahus team in Linköping consists of five Barnahus staff, around 90 social workers from Social Services in nine nearby municipalities, four prosecutors from the Public Prosecutor’s Office, eleven police officers, five to six paediatricians from the Children’s and Adolescent’s hospital, and a few staff members from the department for Child and Adolescent Psychiatry, the women’s clinic and forensic medicine unit in the nearby hospital.

With so many agencies and staff members involved, a clear organisational framework is imperative to make planning, operations and collaboration work. Collaboration needs to take into account that the team works across different professional procedures, regulations and laws.

To help the Barnahus ensure a smooth and effective service delivery, a formal cooperation agreement, one or several coordinators, strict routines and a liaison/working group have been introduced.

The formal agreement is fundamental to clarifying the parameters of the collaboration, including its purpose, goals, commitments, responsibilities, organisation and finance. The agreement is signed by the leadership of each agency to ensure the continuous commitment and engagement of the respective agencies. An outline of the agreement can be found below. The implementation of the agreement is overseen by the steering group, which includes the representatives from the leadership of the respective agencies.

The daily work at the Barnahus is regulated by strict routines, which all the agencies are committed to follow. The routines cover for instance interagency planning meetings, roles and responsibilities of the professionals observing interviews, procedures for assessing and determining best interests’ as well as for documentation and case tracking.

A liaison/working group has been set up, with representatives from all agencies, which meets once a month. The group contributes to creating a feeling of shared responsibility and active engagement and plays an important role in keeping routines relevant and up to date.

The Barnahus team plays an important role in coordinating the work. The five team members have different professions and roles and all act as coordinators of the interagency collaboration in the Barnahus. The team leader has a special responsibility to liaise with the Steering Group, as well as with the Liaison/Working Group.

The team leader holds the responsibility for:

- Coordination and management of the work of the Barnahus team;
- Evaluation and development of the mission and activities of the Barnahus;
- Management and oversight of the implementation of guidelines and routines;
- Acting as a secretary to the steering group;
- Acting as the chair of the liaison/working group;
- Producing annual narrative and financial reports of the Barnahus activity to the respective agencies;
- Management of study visits and outreach/information about the work of the Barnahus;
- Ensuring that data are collected and statistics are compiled;
- Participation in relevant networks;
- Provide regular information/reports about the work at the Barnahus to the steering group.
Outline of the Barnahus Linköping Interagency Agreement

1 – **Partners.** Defines the partners of the interagency agreement.

2 – **Purpose.** The purpose is defined as ensuring that retraumatisation and that undue delay is avoided. The section describes some of the key principles for the cooperation and handling of cases, including how children should be treated. It addresses the environment and the form of the multidisciplinary collaboration. It provides further for competence building and training to ensure high quality services.

3 – **Goal.** Defines the goals and deliverables of the Barnahus, such as ensuring that the best interests of the child are a primary consideration, ensuring child protection guarantees, professionalism and child-friendliness and preventing retraumatisation.

4 – **Target group.** Defines the target group.

5 – **Geographical scope.** Defines the geographical scope.

6 – **Commitments.** Lists the joint commitments of the participating services, including that they have to attend planning meetings, take responsibility for effective collaboration, ensure information, guidelines, routines and checklists are understood and used, support competence and capacity building and collaborate with other services. Describes the specific commitments of the respective services present in the Barnahus.

7 – **Staff.** Describes the staff structure and responsibilities.

8 – **Organisation.** Describes the organisational structure, including the roles of the steering group and the coordinator, and the liaison/working groups.

9 – **Finance and cost sharing.** Describes how the costs of the Barnahus are shared between the different partners, including the respective agencies’ responsibility to ensure that there is appropriate equipment and staff.

10 – **Venue.** Describes the venue, including that it should be child friendly.

11 – **Documentation.** Describes how documentation is carried out, including the documentation of the respective services and joint protocols.

12 – **Privacy.** Describes the action that the respective agencies have to take to ensure privacy and data protection.

13 – **Follow up.** Defines how the Barnahus monitors budget and the joint and respective annual reports.

14 – **Competence.** Defines actions to be taken to ensure that all services respectively and jointly ensure quality and competence.

15 – **Agreement period.** Defines the agreement period.

16 – **Conflict resolution.** Describes how potential conflicts will be addressed.
The costs for the permanent staff at the Barnahus as well as the rent for the venue and other operational costs are shared between Landstinget [the County Council responsible for all publicly-financed healthcare] in [...] and the nine municipalities in [...]. Landstinget is responsible for the financial reporting.

Landstinget is responsible to ensure that the necessary medical equipment is available in the examination room. The Police is responsible to ensure that necessary technical equipment is available in the interview room and the observation room. Each partner covers its own staff costs, including training for their staff. They also contribute with the costs involved in their staff carrying out their work at the Barnahus.

The total costs for the operation of the Barnahus year [...] is estimated to [...]. Landstinget’s share is 50% and the municipalities' share is 50%.

The municipalities' share is divided on a pro rata basis taking the total population of the commune at the signature of this agreement.

1/12 of the respective municipalities' costs is paid the 30th every month to an account held by Landstinget.”

The Danish Order on Barnahus (Bekendtgørelse om børnehuse) sets out key features of the Danish Barnahus, including roles and responsibilities of staff, the premises, financing, collaboration and data collection.

Tasks and Staff
Paragraph 1 lays down the role of the Barnahus, drawing on the Consolidation Act on Social Services. It establishes that the Barnahus shall have permanent staff, who are qualified in dealing with violence against children and young persons, and that the Barnahus can involve and collaborate with other relevant agencies and experts, for example police, forensic medicine, with specialised knowledge of violence against children. It also establishes that the relevant agencies gather in the premises of the Barnahus to ensure a coordinated and child sensitive multidisciplinary intervention of high quality for each child.

Paragraph 2 stipulates that the Barnahus shall provide advice and guidance to the municipality. Barnahus shall assist the child’s case worker in the social services to assess, examine and investigate the child's needs for protection and assistance, including health care needs as a result of the violence. The Barnahus shall coordinate the investigations and ensure that they are child friendly. The Barnahus shall also offer crisis support and therapy to the child and one or more of the caregivers in cases where Barnahus considers it relevant. The Barnahus shall furthermore be used for video-recorded forensic interviews in cases where the police considers it relevant.

Paragraph 3 stipulates that the Barnahus must be available on the phone around the clock to provide advice in acute cases.
Interior environment
Paragraph 4 and 5 concern the features of the Barnahus premises. The Barnahus must be set up and equipped so it can perform the tasks set out in paragraph 1 and 2. The facilities for video-recorded forensic interviews must conform with existing rules and regulations for forensic interviews with children regarding sexual violence against children. The Barnahus must be decorated and furnished in a child friendly way to ensure that visiting children and young people feel as safe as possible.

Financing
Paragraph 5 and 6 concern the budgeting and financing of the Barnahus. Barnahus have been set up in five regions in Denmark. Each region covers several municipalities. Paragraph 5 states that the municipality that operates the Barnahus determines the budget. Other municipalities in the region can refer children to the Barnahus and share the operating costs. Paragraph 5 lays down that 60% of the budget is financed through a contribution based on a pro rata of the municipalities’ total population of persons aged 0-17 in the region the 1st of January each year and that 40% is covered by fixed costs per child that the municipality refers to the Barnahus.

Collaboration
Paragraph 7 and 8 set down the rules for collaboration, including that each Barnahus sets up formal agreements with each municipality and the police in their respective regions, an institute for forensic medicine and a hospital that is specialised in violence against children. This is to ensure that there are clear procedures for case management, involvement of relevant and competent staff and that each Barnahus maintains high professional standards. The agreements will also ensure consistency in the work of the Barnahus at a national level. Paragraph 8 stipulates that each Barnahus will be a member of a Barnahus network to facilitate continuous exchange of experience.

Data recording and reporting
According to paragraph 9, the Barnahus must collect and record data about the children and young people who receive services at the Barnahus and report this data to the National Board of Social Services for statistical purposes. The National Board of Social Services establishes the reporting format the content that the data should cover.

Bekendtgørelse om børnehuse, BEK. nr. 1153 af 01/10/2013

Safeguarding Children Policy – Child and Youth Protection Centre, Zagreb

An internal policy, embodying the service’s commitment to safeguarding children and protecting them from harm, is an important cornerstone in meeting international, regional and national obligations to protect children from violence and safeguard their human rights.

The Child and Youth Protection Centre in Zagreb has adopted an internal policy that sets a framework for the staff to comply with legal, professional and ethical requirements related to working with child victims and witnesses of violence. The framework includes considerations for safeguarding and protecting children. This policy has implications on all areas of work of the Centre and ensures quality and transparency.

The policy outlines procedures to protect children, procedures for the multidisciplinary cooperation as well as assessment, treatment and forensic interviews. The policy also specifies minimum requirements for staff, ethical principles and key responsibilities. Procedures for recruiting staff, including screening, are also included.
Protecting children from harm – Safeguarding Children Policy and Procedures

All organisations working directly for and with children should be guided by child safeguarding policies and have reporting mechanisms in place. The Keeping Children Safe network has established four international child safeguarding standards:

**Standard 1: Policy**
The organisation develops a policy that describes how it is committed to preventing, and responding appropriately to, harm to children

**Standard 2: People**
The organisation places clear responsibilities and expectations on its staff and associates and supports them to understand and act in line with these

**Standard 3: Procedures**
The organisation creates a child-safe environment through implementing child safeguarding procedures that are applied across the organisation

**Standard 4: Accountability**
The organisation monitors and reviews its safeguarding measures

For more information, see Keeping Children Safe75.

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59 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf
65 www.keepingchildrensafe.org.uk
67 Consolidation Act on Social Services, §50 a–(l), http://english.sim.dk/media/14900/consolidation-act-on-social-services.pdf
69 Law on criminal procedure (nr. 88/2008), art 9
70 Law on criminal procedure (nr. 88/2008), art 123
71 Straffeprosessloven (Criminal Procedure Act), 239, 239 a-f, http://www lovdata.no/
72 Delredovisning av regeringsuppdrag avseende gemensamma nationella riktlinjer kring barn som misstänks vara utsatta för brott och kriterier för landets Barnahus (Rikspolisstyrelsen, Sweden, 2009)
73 https://www.retsinformation.dk/Forms/R0710.aspx?id=158447
75 http://www.keepingchildrensafe.org.uk/
Standard 3
Standard 3. Inclusive Target Group

What is the standard?

3.1 Inclusive/broad definition of target group: The Barnahus target group includes all children who are victims and/or witnesses of crime involving all forms of violence.
Non-offending family/caregivers are included as a secondary target group.

3.2 Non-discrimination: Special effort is made to reach all child victims and witnesses regardless of form of violence.

Why should this standard be met?

International and regional legal obligations: Non-discrimination is a fundamental principle of the UN Convention on the Rights of the Child (article 2 UNCRC) and is crucial to the implementation of UNCRC article 19 on children’s right to freedom from violence.

Links to legal provisions:
Non-discrimination
Provisions concerning identifying victims, including specific provisions identifying children as a victim of crime, such as age assessment provision, family members

Guidance: The Committee on the Rights of the Child (CRC) stresses that States parties shall take adequate measures to assure to every child the right to protection from all forms of violence "without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status". States parties must furthermore make proactive efforts to ensure that children in potentially vulnerable situations are assured their right to protection on an equal basis with all other children (CRC General Comment no 137).


Research and Experience: The Barnahus can play an important role in implementing the obligations of State parties by including a broad target group in its mission and by ensuring equal access and services to all children who are referred to the service.

Examples of indicators and/or evidence that the standard is being met

Defining the target group
– The target groups are defined in the mission statement/formal foundational agreement of the Barnahus;
– The target groups include all children who are victims or witnesses of all forms of violence, including but not limited to physical and mental abuse, domestic violence, sexual abuse and exploitation, commercial exploitation, trafficking, genital mutilation and crime with honour motives.

Non-discrimination
– A multidisciplinary and interagency response is offered to all children who are referred to the Barnahus. Child protection assessment, criminal investigation, medical and mental health examination, crisis intervention and follow up is planned and carried out in close cooperation between the respective agencies in all cases;
– The services are accessible to children regardless of where they live. Mobile resources and local hearing rooms are used as necessary, especially for the initial investigation, the continuous crisis intervention and treatment and for follow up;
– The Barnahus is made available and accessible to children with special needs and disabilities ensuring that they receive the same amount of information, guidance and opportunities to express their views and disclose in interviews;
– Interpretation is offered to children and non-offending caregivers when needed, ensuring that they receive the same amount of information, guidance and opportunities to express their views and disclose in interviews.
Inclusive and broad definition of the target group

Barnahus Iceland provides services to three main target groups. They include children between the ages of 3.5 and 18 years old who are victims of sexual abuse, who are victims of physical abuse and/or domestic violence or who are unaccompanied and asylum-seeking children. A secondary target group are the children’s non-offending parent(s)/caregiver(s). They receive counselling and advice and are engaged in the child’s therapy.

Children and adolescents who are victims of sexual abuse and sexual exploitation have been a target group from the very beginning. They include children who are victims of online grooming and internet related sexual abuse and children who have been induced or coerced to engage in sexual activities. In some cases, the alleged perpetrators are children themselves, below the age of criminal responsibility.

In cases of sexual abuse and exploitation, the services at the Barnahus are available for children who have given a disclosure and there is an open criminal investigation. In addition, services are provided to children referred to the Barnahus by the local child protection services where there is a strong suspicion that abuse has occurred but the child has not yet disclosed or has given an ambiguous disclosure (for example exploratory interviews).

Since the beginning of 2015, Barnahus Iceland has also provided services to children who are victims and/or witnesses of physical abuse and/or domestic violence. These children are referred to the Barnahus only in cases where there is an open criminal investigation.

More recently, Barnahus Iceland has started to provide services for unaccompanied children and children who are asylum seekers. In February 2016, the Government Agency for Child Protection and the Directorate of Immigration decided on a pilot project to carry out joint investigative interviews at Barnahus Iceland. The aim is to ensure a child-friendly processing of asylum applications, to identify possible trauma and facilitate the assessment of children's needs. The project was adopted with the consent of the Ministry of the Interior and the Ministry of Welfare. The number of unaccompanied and asylum seeking children has been low in Iceland but is expected to grow in the future.

Access regardless of the place of residence

Barnahus Iceland provides services to all children from the previously mentioned target groups regardless of where in Iceland they live, in rural areas or in the capital. In the majority of cases, children and their non-offending parents/caregivers come to the Barnahus for exploratory or forensic interviews. The Barnahus is located in the City of Reykjavik. Following the initial investigations, children who are in need of treatment receive treatment and follow-up services in the municipalities where they live. The Barnahus therapists travel around the country to provide treatment as needed. Children who live in the capital area come to the Barnahus for treatment and follow-up, although in some cases, therapists might meet the children at their schools or homes.

Interpretation

Interpreters facilitate the communication between the Barnahus staff and children as well as parents/caregivers who do not speak Icelandic or English. Interpreters are available during the forensic interviews, treatment sessions and/or medical examinations. In addition, the therapists and forensic interviewers at the Barnahus speak a variety of languages, making it easier to provide services in a language familiar to the child and/or caregiver(s).

Access for children with disabilities

Barnahus Iceland is wheelchair accessible on the first floor where there are facilities for children with special needs. The premises include a wheelchair accessible lavatory, therapy room, medical examination room and forensic interviewing room. Interviews with children with hearing and communication disabilities are facilitated by specialists in sign language when appropriate.
Defining Target Group in the National Guidelines for Barnahus in Sweden

“The target group consists of children potentially exposed to:

- Assault and other crimes involving violence in accordance with chapter 3 of the Swedish Penal Code (Crimes against Life and Health),
- Unlawful deprivation of liberty, gross violation of integrity, unlawful coercion, unlawful threat, molestation and other crimes in accordance with Chapter 4 of the Swedish Penal Code (Crimes against Liberty and Peace), and when inquiries are instituted in parallel by social agencies, the public prosecution and the police,
- Rape of a child, sexual abuse of a child, sexual coercion, purchase of a sexual act from a child and other crimes in accordance with Chapter 6 of the Swedish Penal Code (Sexual Crimes)
- Genital Mutilation of women in accordance with the Act on Prohibiting the Genital Mutilation of Women (1982:316)

The target group also includes children exposed to domestic violence (witnesses of violence, direct or indirect).

The types of crimes listed above include honour crimes.

When appropriate, collaboration should also be extended to cover children who are perpetrators of sexual crime.”

The national guidelines also specify that the target group includes children exposed to trafficking in human beings (page 4).

(Progress report regarding a government mission to establish common national guidelines for multiagency collaboration in inquiries relating children who may be exposed to crime and standards for national Children’s Advocacy Centres, para 4.3)

76 Violence is here defined according to the UNCRC article 19 and the CRC General Comment no 13 (2011): “all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse”.
77 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf
80 Where the target group is defined in legislation or national guidelines, such as for example in Denmark and Sweden, access should at a minimum be guaranteed for the groups covered by law. All services should strive towards encompassing a broad target group, which includes all forms of violence. However, many services have started out with a narrower group, for example only covering sexual abuse and sexual exploitation and slowly moved towards covering additional forms of violence.
81 Possible grounds of discrimination include, but are not limited to, national or ethnic origin, race, language, religion, gender, sexual orientation, socioeconomic status, disability and refugee status. Special efforts may be needed to reach particularly vulnerable children.
82 Some forms of crisis interventions, such as emergency medical care, might not form part of the Barnahus service delivery.
Standard 4
Standard 4. Child Friendly Environment

What is the standard?

4.1 Place and Accessibility: The Barnahus premises are preferably situated in a detached building located in an environment familiar to children, for example, a residential area. The premises should be accessible by public transport. The premises are accessible, including for children with disabilities and/or special needs.

4.2 Interior Environment: Furnishing and material are child and family-friendly and age-appropriate, especially in the waiting rooms. The premises are physically safe for children at all ages and developmental stages, including for children with disabilities and/or special needs.

4.3 Privacy: There are separate, soundproof and private areas available to ensure privacy.

4.4 Preventing contact with the suspected perpetrator: The Barnahus is set up so that contact between victim and alleged offender is avoided at all times.

4.5 Interview room: The Barnahus provides for live observation of interviews in a room other than the interview room for the interagency team.

Why should services meet this standard?

Links to legal provisions:
Interviews take place in premises designed or adapted for this purpose
Right to avoid contact between victim and offender


Research and Experience: The situation and set up of the building is crucial to ensuring access to the service for all children and to securing the privacy and safety of the child. Providing a safe, neutral and child-friendly environment is central to reducing anxiety and preventing retraumatisation. A child-friendly environment better enables children to disclose, which is fundamental to ensure the safety and protection of the child, to determine the need for physical and mental recovery, and to secure a successful criminal investigation and judicial process.

Examples of evidence that the standard is being met

Place and accessibility

— The Barnahus is located in child-friendly area, for example residential area, or in a strategic location (e.g. vicinity to hospital);
— Public transportation is within walking distance to the Barnahus;
— The Barnahus is equipped with a ramp or platform lift.

Interior Environment

— The child is welcomed by a friendly staff member and offered something to drink;
— Content, for example toys, magazines and books, and furniture in the waiting area meet needs of both younger and older children, children with special needs and disabilities;
— The interior has been designed according to best practice guidance to maintain indoor accessibility, for example there is only one floor or lifts, corridors are kept open and toilets are accessible;
— Safety inspections of the premises are carried out regularly.

Privacy

— Separate waiting rooms are available if needed to protect the privacy or safety of the child or if required by law enforcement for forensic reasons;
— The rooms are soundproof;
— The location and sign-posting are discreet.

Preventing contact with the suspected perpetrator

— Suspected perpetrators are interviewed and provided services in another location;
— If the suspected perpetrator has access to services in the same building;
— There are different entrances and areas for children and non-offending family/caregivers and suspected perpetrators;
— Appointments with children and suspected perpetrators are scheduled to avoid contact.

Interview Room

— Interview and observation room are separated but connected via intercom audio-visual systems;
— The observation of the interview is done on a screen in an adjacent observation room;
— The room is comfortable and child-friendly. It is furnished and decorated to avoid distraction;
— The camera is set up so it can follow the child and capture hand movements if the child is drawing or showing something.
The Barnahus in Reykjavik and Linköping have carefully chosen their locations and interior environment bearing in mind key elements including accessibility, privacy, preventing contact with the suspected perpetrator and the design of the interview room.

**Location and accessibility**

**Barnahus Iceland** has located its services in a house in a residential area, providing a safe and quiet environment. The building and location make the children feel as if they are coming to a private house, and not a police station, hospital or other authority.

**Barnahus Linköping** is located in a former pre-school building in the vicinity of a hospital, police office, prosecutor’s office and a centre for forensic medicine. The area around the building is green and child-friendly.

The location of both Barnahus are easily accessible by public transport and by car. Entrances have been equipped to ensure access for children with disabilities.

**Interior environment**

Barnahus in Iceland and Linköping are designed to maximize children’s comfort and enhance their sense of safety. Waiting rooms are furnished and equipped to suit both younger and older children. Upon arrival, children are greeted by friendly and welcoming staff and are offered a drink.

As children walk into **Barnahus Iceland** they see pictures on the walls that were drawn by other children, cuddly toys and a colourful child sized coat hanger. There are two waiting rooms, one is designed for pre-schoolers and young children while the other is for pre-teens and teenagers. In addition, there is one open waiting area.
The waiting room designed for the younger children provides a safe environment where they can play with a variety of age-appropriate toys. There are, for instance, two toy castles with figures and furniture, puzzles, colouring books, markers and colours, a small kitchen with appliances, small tables and chairs and cuddly toys.

The waiting room designed for pre-teens and teenagers is decorated in a "modern" style. There are magazines for teenagers, a football table, age-appropriate board games and comfortable chairs and furniture that offer privacy. The Barnahus has a Wi-Fi internet connection and a digital tablet available with a variety of games. There is also an open waiting area where parents/caregivers can find magazines and newspapers.

There are two waiting rooms in Barnahus Linköping, furnished in a child-friendly manner, including small furniture for the younger children. There are age-appropriate toys and games that can keep both younger and older children busy while they are waiting. Most toys are stacked away in drawers and can be brought out when needed. There are also some items to fiddle with to reduce stress. These items can be brought to the interview and it is therefore important that they do not emit any sounds. If needed, the Barnahus has “small buddies” that the children can take home. The Barnahus in Sweden are however generally reluctant to give gifts to children who have come for a police interview since it can be perceived as an award for making a disclosure.

Each waiting room has a wall with children's drawings so that the children can see that there have been other children at the Barnahus before them. Barnahus Linköping offers free WiFi and it is possible to watch movies and play different board games or Wii.

On their way to Barnahus Linköping, children are shown a small brochure, including pictures of the Barnahus environment, to prepare them for the visit.

**Privacy**

There are no other activities in the respective Barnahus and the entrances are used exclusively for the Barnahus visitors and staff.
In Iceland, there is no logo on the outside of the house and the Barnahus’ address does not appear in the National Online Telephone Directory nor is it identifiable publicly in any other way. There are two separate entrances to the premises, which makes it possible to receive different children and caregivers at the same time without having them meet each other. The interview rooms are soundproof to ensure privacy.

In Linköping, the two waiting rooms are situated in different parts of the building, with the respective interview rooms nearby. There is never more than one child in the waiting room at the same time, except for siblings. The observation rooms for professionals listening to the interview are not situated next to the waiting rooms. As in Iceland, the interview rooms are soundproof.

**Preventing contact with the suspected perpetrator**
The suspected perpetrators do not come to Barnahus Iceland, but are represented by the defence lawyers who are present in the observation room during the forensic interviews. The court judge can allow the defendant to observe a life transmission of the interview with the child at the Barnahus on a television screen in the court house if he/she demands it.

In child sexual abuse cases, it would typically be a non-offending parent/caregiver that accompanies the child to the Barnahus in Iceland. In cases of physical and domestic violence, it is more common that the child lives with the parent/caregiver who is suspected of having been abusive. In such cases, a social worker from the local Child Protection Service accompanies the child to the Barnahus since the child protection worker is responsible for ensuring the child’s safety.

In Sweden, a special representative is appointed if the parents or caregivers are suspected of abuse. This is also the case when there is reason to believe that a non-offending parent or caregiver, due to his/her relation with the suspected perpetrator, will not act in the best interests of the child. The special representative has the right to take decisions regarding interviews and medical examinations, including accompanying the child to the forensic interview, without notifying the parents or caregivers. In Linköping, the interviews with suspected perpetrators are always conducted at the police station and never at the Barnahus, in order to avoid potential contact between the child and the suspected perpetrator at the Barnahus.

**Interview room**
A core aim of the Barnahus is to provide a child-friendly environment during forensic interviews in order to reduce the level of anxiety of the child. This is crucial for the child’s well-being and for successfully eliciting the child’s disclosure. It is therefore important that the setting of the interview is carefully designed to make the child feel comfortable and safe.

Barnahus Iceland is equipped with two interview rooms. They are of different sizes and are at different levels of the three-floor building. Both rooms have comfortable age appropriate chairs and tables. Toys or other items for comforting the child are provided but kept to a minimum as they can distract the child during the interview. The rooms are small as experience has shown that small rooms are more likely to enhance feelings of closeness and safety in children when disclosing. The interviewing rooms are equipped with cameras and sound systems that enable the live observation of interviews in the observation room.

One of the forensic interviewing rooms is primarily used when court hearings are conducted at the premises. This room is adjacent to a large conference room where court hearings and exploratory interviews are observed. In the conference room, observers watch the live interview through a television screen and are able to communicate with the interviewer during the live interview. The interviewer has an earpiece that allows the observers to communicate with the interviewer and ask questions through a microphone placed in the conference room.

The other interviewing room is used only during exploratory interviews. It is adjacent to an observing area where Child Pro-
tection Service staff can watch the interview with the child live through a computer screen and are able to communicate with the interviewer.

**Barnahus Linköping** also has two interview rooms of different sizes, each with an observation room close-by. It is sometimes a challenge to ensure that the interview room looks nice and warm, without adding things that distract the child's attention or activate the imagination of the child, such as posters, art or toys.

In Linköping, there is always a sheepskin on the child's chair, which makes the chair cosy and gives the children something to fiddle with. Attention to details is very important; if there is a clock in the room, for instance, its sound must not be too loud. Colours are important to make the room look nice, but it is important to consider how they come out on the video-recording. Certain colours, such as bright red, appear too bright on the screen and may distract viewers.

The interview rooms are equipped with cameras for live screening in the observation room and recording of the interview. There are no dual mirrors as that is considered more respectful of the child. The use of dual mirrors can also be distracting for the child. If the child is moving around in the room, there is a camera that follows the child. There is also a camera filming the small table next to the child's chair, in case the child is drawing or showing something on the table. The use of earbuds for direct communication during the interview is possible and has been tested, but is rarely used since it is perceived to interfere with the interview. Instead, there is a short break towards the end of the interview, when the forensic interviewer goes to the observation room to confer with the professionals who observe the interview.
83 Child-friendly here means focussed on, adapted and sensitive to, the specific needs of children.

84 Family/parents/care-givers are not allowed to observe the interview with the child.


87 Therapeutic meetings including the perpetrator and the child can in some cases be held in the premises if it is deemed in the best interests of the child. The safety and the wellbeing of the child are primary considerations. In cases of sexual violence and severe cases of other forms of violence the perpetrator should never be allowed to enter the Barnahus premises.

88 An evaluation in 2010 of children’s experiences at Barnahus in Sweden found that teenagers felt that the interior of the Barnahus was too "childish" and that they wanted more things for older children to engage with while waiting. The same study found that teenagers, more often than younger children, found it a negative experience to have to wait for their interview since it made them more nervous. (Kaldal, A., Diesen, C., Beije, J., Diesen, E 2010. Barnahusutredningen. Stockholm: Jure Förlag AB)
Standard 5
5.1 **Formal procedures and routines**: Interagency case review and planning is integral to the work of the Barnahus team and the respective agencies in the Barnahus and is formalised by mutually agreed upon procedures and routines.

5.2 **Continuous case planning and review**: Case review and planning meetings, involving the relevant agencies in the interagency team, takes place on a regular basis in the Barnahus.

5.3 **Continuous case tracking**: The Barnahus ensures continuous documentation and access to relevant case information to the interagency team members on the progress of the case until case closure.

5.4 **Support Person**: A designated, trained individual or member of the Barnahus team monitors the multidisciplinary response to ensure that there is continuous support and follow up with the child and non-offending family/care-givers.

Interagency planning, case review and case tracking can be shaped by restrictions from sharing information in national legislation, or lack of legislation that enables and mandates services to share case specific information. A high level of integration requires a clear and careful approach to confidentiality obligations and may require a step by step approach to ensure the right exchange of information can take place. It may also be necessary to find solutions, such as interagency data protection protocols, to address legal restrictions and/or regulations imposed by professional organisations on the respective professionals to share case specific information.

### Links to legal provisions:

**Ensuring the best interests** is a primary consideration in the application of the obligations in the Directives Individual assessment of each child’s circumstances and non-offending family members’ needs

**Multi-disciplinarity/ coordination/cooperation Circle of Trust provisions**

**Guidance**: The UN Committee on the Rights of the Child (CRC) emphasises effective procedures for the implementation of children’s right to be protected from violence (art 19 UNCRC), including inter-sectoral coordination, which is mandated by protocols and memorandum of understanding as necessary. The CRC also states that “professionals working within the child protection system need to be trained in interagency cooperation and protocols for collaboration”. The process will involve: (a) a participatory, multidisciplinary assessment of the short- and long-term needs of the child, caregivers and family, which invites and gives due weight to the child’s views as well as those of the caregivers and family; (b) sharing of the assessment results with the child, caregivers and family; (c) referral of the child and family to a range of services to meet those needs; and (d) follow-up and evaluation of the adequateness of the intervention. (General Comment no 13).


### Research and Experience: Interagency case planning, supported by procedures and protocols, is important to ensuring multidisciplinary, coordinated, efficient and relevant interventions by the interagency team and the respective agencies. Case tracking and case review enable the team, to the greatest extent possible and in accordance with legal requirements and the best interest of the child, to collect and share information so that specific cases can be consulted and revisited through all stages of the investigative and judicial process. Case tracking furthermore allows the interagency team to monitor progress and outcomes of cases referred to the service.

Adequate victim support and follow up by a designated professional throughout the process can help reduce anxiety and trauma of the child and non-offending family/care-giver. A crucial aspect of victim support is ensuring that there is continuous information available to the child and the non-offending caregivers and that the child’s views are given adequate weight. It also contributes to ensuring that the best interest of the child guides the process and that short, medium and long-term outcomes for the child are maximised. Children and their non-offending families/care-givers may need guidance and support in strengthening their capacity to support the child, understanding the judicial process, the rights of the child and the treatment that is available.
Examples of indicators and/or evidence that the standard is being met

Formal procedures and routines

- The Barnahus has formal procedures for case management, including for planning meetings, documentation and follow up;
- A protocol supporting the interagency team to deal with privacy and data protection is in place;
- A system is in place to evaluate the impact of the multidisciplinary response on the child;
- The case review and planning is coordinated and facilitated by a designated Barnahus staff member;
- Staff are aware of, and have received training on procedures and routines.

Interagency planning and case review

- An initial meeting is held in the Barnahus to plan the multidisciplinary intervention and to coordinate action including all relevant agencies;
- A follow up meeting is held in the Barnahus after the forensic interview and medical examination, with all relevant professionals to inform them of the findings and to plan and coordinate continued interventions;
- There are regular meetings in the Barnahus between relevant agencies to review cases, exchange updated information and evaluate impact of the multidisciplinary and interagency intervention;
- The case review involves all agencies on an equal basis and is not dominated by an agency to the detriment of other disciplines;
- In cases where the child has learning disabilities or special needs, professionals with expertise, and preferably one who has prior knowledge of the child concerned, are consulted for planning of all services including forensic interview, medical examination and therapy.

Continuous case tracking

- The Barnahus systematically documents case specific information, including but not limited to: the victim's and family's demographics, forensic interviews and attendance at forensic interviews, number of multidisciplinary case review meetings held, agency representation at these meetings, therapeutic reports and medical reports where possible.

Support Person

- The child and caregivers are provided with continuous support and regular information throughout the whole investigative and judicial process;
- Follow up after the judicial process and treatment has been finalised is organised according to the needs of the child and family/care-givers;
- A designated, trained individual or member of the interagency team monitors the multidisciplinary response to ensure that there is continuous support and follow up with the child and non-offending family/care-givers;
- If the role as support person/ordinator is carried out by an authority that is not present in the service, a team member in the service is responsible for liaising with this authority, ensuring adequate communication and follow up.

Resources

- MDCK Collaboration Agreement, including Privacy Protocol
- Stockholm Barnahus Planning Meeting Agenda (see below)
Interagency planning meetings have a central function in the conception and ongoing work of most of the Barnahus in Sweden. The purpose of the interagency planning meetings is to exchange information and to assess the child’s needs through different perspectives – medical, psychological, judicial/legal and social. All these perspectives need to be taken into account in order to make a comprehensive plan, which places the child’s best interests at the centre of all services whilst ensuring that legal requirements for any legal proceedings are met. The professional contacts made during the meetings and the joint ownership of the interagency case plan also serve as a foundation for continued cooperation and follow-up of each specific case.

As soon as a police report is made to Barnahus Stockholm, the police together with a coordinator from the child protection services make an assessment whether an interagency planning meeting is required to discuss the specific case. In cases where there is no previous knowledge about the child or the family and where it is not known whether there are complicating factors such as neuropsychiatric diagnoses or mental illness, the planning is usually done only by the police and the child protection services. In such cases, an interagency planning meeting involving all agencies is not convened since there is no information to share. Interagency planning meetings are held in about 30% of the cases which both the police and the child protection services investigate.

Interagency planning meetings are held at set times every week. The police, prosecutor, child protection services, child- and adolescent psychiatry and the hospital-based Child Protection Team are always invited to the meeting. In some cases, other experts are invited to participate, for instance, in cases of honour-related violence. Efforts are made to ensure that all agencies, including those who are not based in Barnahus, participate in the meeting, either in person or by teleconferencing. There are plans to introduce video-conferencing in order to enable participation when personal attendance at Barnahus is not possible.

The coordinator of the child protection services chairs the meeting according to a standardised agenda. Each case is discussed for approximately 30 minutes. All the participants are expected to be well prepared as they have been informed about the case in advance and they know what it is expected of them. Each agency is responsible for taking their own notes from the meeting.

Initially, the interagency planning meetings were unstructured and could continue for a very long time. This led to frustration and participants sometimes lost their motivation to participate. The clear structure and agenda for the meeting has helped to redress this and to limit the duration of the meeting. Mutual trust and respect among the different agencies is fundamental and any critique should be presented in a constructive way.

It is critical that all agencies understand the importance of the interagency planning meetings. The formal interagency cooperation agreement of Barnahus Stockholm provides a clear framework for the collaboration. This is important in situations when the necessity of interagency planning meetings is questioned or when the meetings are not prioritized by the respective agencies.

Documentation
Laws in Sweden place restrictions on the documentation of cases in Barnahus. There is extensive general documentation at Barnahus, from which data and statistics can be retrieved, however not relating to specific cases.

The different agencies assume responsibility for their own documentation and are bound by their respective rules and regulations. They are however allowed to share information to some extent in planning meetings throughout the process of working with a specific case.

The interagency meetings are therefore central to planning and case review. The child protection services hold the overall responsibility for the case, including the follow-up. They are often in a position to detect if there is a need for further interagency case review meetings where information can be shared.
1. Introduction and framework of the meeting
   › Introduction of participants: Name and agency
   › Documentation from the meeting: Common notes from meeting or each agency separately
   › Confidentiality Considerations: Are any of the participating agencies bound by confidentiality – short information

2. Purpose of the Meeting
   › Exchange of information and joint planning
   › Ensuring that child perspective and best interests are primary considerations
   › Determining specific purpose related to the case

3. Background and previous knowledge about case
   › Social services:
     - Previous investigation about violence in the family – when
     - Previous interventions and results
   › Policy/Prosecutor:
     - Are the previous police reports regarding someone in the family, for example in relation to violence, substance abuse or other serious crimes?
     - Review of potential case journals of the Child protection team and the Agency for Child and Adolescent Psychiatry

4. Planning ahead of the Forensic Interview
   › What action have the respective agencies carried out since the police report was made?
   › Day of Forensic Interview:
     - Date and Time
     - Legal representative and person known to the child who will accompany the child to Barnahus
     - Specific characteristics and situation of the child such as language, special needs, situation at home
     - Presence in observation room by the Agency for Child and Adolescent Psychiatry

5. Planning after the Forensic Interview - things to consider already at this stage
   › Child Protection Assessment – different scenarios
   › How will the child’s caregiver be informed?
   › Planning of the child’s potential reunification with the parents/caregivers after the interview
   › Prosecutor and Police thoughts on next steps
   › Crisis intervention
   › Medical Examination
   › Who will provide information to the child regarding decisions and actions – CRC article 12

6. Other Issues
   › Are there siblings who may have witnessed the violence?
   › Other, including potential need for interpretation

7. Summary of interagency meeting
   › Summary of meeting
   › If changes are required to the planning, all agencies need to be informed
Erik, an 8-year old boy, lives with both his parents and has no siblings. One day after a lesson at school, Erik tells his teacher that his mother hits him when she gets angry. The school reports this to the child protection services, which report the case to the police. After a week, an interagency planning meeting is held at the Barnahus with the participation of the police, the child protection services, the prosecutor, child- and adolescent psychiatry and the hospital-based child protection team. All the professionals share the information they have about Erik and his family. The interagency team decides that Erik is going to be interviewed by the police at the Barnahus a few days later. Since it is not clear whether Erik's father can protect him from the mother’s violence, a legal representative for Erik is appointed. The legal representative meets Erik at school the same day as the interview takes place. She explains to Erik where they are going and Erik can see a picture of the building and the police officer whom he will talk to. Erik’s teacher joins them and comes along to the Barnahus so that Eric is accompanied by a person he knows and to make sure he feels safe. At the Barnahus, Erik is met by the police officer who does the interview. During the interview, other professionals such as the prosecutor and a child protection worker watch the interview in the monitor room. The prosecutor decides that Erik needs a forensic medical examination since he talks about getting bruises when his mother hits him. The medical examination takes place at the Barnahus right after the interview. After that, Erik and his teacher return to school. The child protection services arrange a meeting with Erik’s parents the same day. At this meeting, the parents are informed about Erik’s visit to the Barnahus and are given advice about how they can help Erik and how they can care for him without any use of physical or mental violence. The parents are also given a new appointment for a follow-up meeting with the child protection services.

**Roles and Functions of the respective agencies in the interagency meeting – Barnahus Linköping**

**Barnahus**
Chairs the interagency meeting. Responsible to ensure that a joint assessment is made at the meeting on the basis of adequate information from the respective agencies. Responsible to ensure that there is an agreement between the agencies regarding the continuous case planning. Act as secretary and disseminate a meeting notes to the participating agencies.

**Paediatric Unit at the hospital**
Contributes with medical expertise. Makes an initial assessment of needs for medical examination. Share information about potential previous knowledge of the child.

**Agency for Child and Adolescent Psychiatry**
Contributes with child psychiatric expertise. Makes an initial assessment of the case in terms of needs for crisis support and therapeutic interventions. Share information about potential previous knowledge of the child.

**Social Services**
Contributes with psychosocial expertise. Makes an initial assessment of the case in terms of child protection concerns and interventions. Share information about potential previous knowledge of the child.

**Police and Prosecutor**
Contribute with criminal and judicial expertise. Make an initial assessment of need to initiate a criminal investigation.
Regulating Exchange of Information at Barnahus in Danish Law

During the consideration of a case where a children's house is used, cf. section 50a, the staff of the children's house, the police and the prosecution service as well as health authorities, authorised health care professionals and municipal authorities solving tasks in the field of socially disadvantaged children and young persons may mutually exchange information on strictly private aspects concerning the child's or young person's personal and family-related circumstances if any such exchange of information must be deemed necessary in view of the health and development of the child or young person.” 50.1 (c) Consolidation Act on Social Services

Ensuring information exchange in the best interests of the child - Child and Youth Trauma Centre, Haarlem

In 2011, the Haarlem Child and Youth Trauma Centre (MDCK) began to hold weekly multidisciplinary team meetings. The meetings involved professionals from different agencies working in the field of child abuse and neglect and inter-parental violence. The objective was to share information about specific cases.

At the weekly meetings, the professionals presented their cases using anonymised information and data. While discussing these cases within the team, it often became evident that several agencies had been working with the same or related cases without being aware of it. It could happen, for instance, that a psychologist from the forensic psychological institute was working with a perpetrator without knowing that the victim was the perpetrator's child and in treatment with a trauma specialist from the Child and Youth Trauma Centre. Due to data protection rules, the different agencies were not able to exchange information or to collaborate on specific cases.

The team decided that it was absolutely necessary to address this issue and took several steps to enhance their possibilities for information exchange, with due consideration to the best interests of the child. One of these steps was the development of a data protection protocol, which is presented below.

The first concrete step to tackle the obstacles posed by the data protection laws was to seek the informed consent of the parents/caregivers to discuss the case in the multidisciplinary team. The team explained to the parents/caregivers that information sharing was essential to enable them to work with due consideration to the best interests of the child and to ensure that the services provided were effective. While many parents/caregivers were willing to consent to the information exchange, the team also met resistance, especially in high conflict divorce cases.

A second important step was that the professionals from the different agencies participated in a team-training on “working together in a multidisciplinary team” at the Chadwick Child Advocacy Centre in San Diego, USA. The training created a sense of common direction and had a positive impact on the willingness of all team members to share information and to work closely together. However, due to the high turnover of staff in the different agencies, new professionals kept joining the team. This made it difficult to sustain the impact of the training in the longer term. It remains a challenge to find resources for new training opportunities, team building activities and ensuring that know-how is passed on to new team members.
Eventually, it became clear that there was a need for a protocol that would enable the multidisciplinary team to share information about cases while respecting legal regulations. The team decided to task a lawyer with expertise in children’s rights and service provision in cases of child maltreatment to develop a draft data protection protocol. The lawyer visited the Chadwick Child Advocacy Centre to learn about their methods, rules and regulations on sharing information. The learning from this visit informed the drafting of the protocol.

The draft protocol was carefully reviewed by the legal representatives of the participating agencies, including the police, the office of the public prosecutor, the trauma centre and the forensic mental health agency. The data protection protocol was eventually signed by the directors of all agencies involved. The protocol was then sent to the Dutch Data Protection Authority, which approved it.

A manual on information sharing with the data protection protocol will be developed to support exchange of information between staff. The core of the manual consists of a series of questions relating to ethical and legal considerations in sharing information.

The benefits of the data protection protocol are evident in different ways. Sharing data in line with the protocol saves time and prevents undue delay. Professionals have quick access to information and do not need to spend time and effort to seek and request information from individual agencies. Data sharing is also a foundation for quick and tailor-made assistance. It helps ensuring a comprehensive and coherent approach to victim support and enhances the team spirit.

While most agencies agree that sharing information in the best interests of the child is essential for effective interagency cooperation, there remains a risk that clients launch complaints against individual professionals. This is a cause of concern to some of the professionals involved in the Child and Youth Trauma Centre. While the data protection protocol is fully in line with Dutch data protection law, it does not fully protect the individual professional from disciplinary action from their professional association. An important learning is that the risk of disciplinary actions can be avoided if all relevant professional associations are actively involved in the drafting and approval of the protocol. It is therefore essential to ensure that the draft data protection protocol is submitted to all relevant professional associations and receives the official consent from all involved agencies.

The purpose of the privacy protection protocol is to enable the members of the Child and Youth Trauma Centre (MDCK) to share necessary information about a client, his/her parents, and other persons involved in the case with due consideration to the best interests of the child:

“The goal of the MDCK is to facilitate the cooperation of all agencies and their staff, with due consideration of the best interests of the child, and in a coordinated way to assure permanent safety for the child. One of the pillars of the multidisciplinary method is to use all information available to develop a 'plan of action' to end the abuse and to assure help for the child and her/his family. This implies sharing of (necessary) information and case files.” (MDCK Data Protection Protocol)

Cases are referred to the MDCK through the relevant local referral mechanism for children who have experienced abuse or neglect. Before referring a case to the MDCK, the relevant professionals are obliged to inform the parents and children up to the age of 16 years old that all information that is relevant for the safety of the child and the family will be shared among the participating agencies and professionals in the MDCK.
In practice, every case meeting starts with a reminder: “We are sharing only information that is necessary to work with this case and to guarantee permanent safety for the child and her/his family”.

Thereafter, the team leader reads out the names of the child and family members, birth dates and other relevant personal information and the main facts of the case. The meeting then breaks so that all team members can look into the files of their own agency and verify if this child or family is known to their agency. If that is the case, they identify the relevant information to share with the other agencies.

After 30 minutes, the team gathers again. The team members share the relevant information on the case and develop a plan of action. The shared information is saved in the protected files of the MDCK in such a way that all the team members can retrieve information if necessary.

Since the Dutch Law is very restrictive regarding information sharing between agencies, each team member documents in the file records her/his considerations for sharing information with the MDCK team. A common wording is that the safety of the child is at risk, which is evidenced by facts and observations, and that this justifies the sharing of information in the best interests of the child.

89 This role is typically taken up by the social/child protection services as case managers when they are present in the Barnahus. Where social/child protection services are not present, this role can be taken up by a member of the team, who is responsible for liaising with local social/child protection services.

90 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf


93 Social/child protection services typically gather all relevant information, including medical reports, police reports and child protection interventions. All agencies are required to share information with the social/child protection services.

94 Follow up and continued support and assistance is typically provided by the local social/child protection services. Where the social/child protection service is present in the Barnahus, it acts as case manager and ensures overall coordination and follow-up. The case manager also monitors that the key principles are implemented and that the rights of the child are respected throughout the process.


Standard 6
Standard 6. Forensic Interview

What is the standard?

6.1 Evidence-based Practice and Protocols: Forensic interviews are carried out according to evidence-based practice and protocols, which ensure the quality and quantity of the evidence obtained. The main aim of the interview is to avoid retraumatisation and to elicit the child’s free narrative in as much detail as possible while complying with the rules of evidence and the rights of the defence.

6.2 Specialised Staff: Forensic interviews are carried out by specialised staff members who receive regular training in conducting forensic interviewing.

6.3 Location and recording: Forensic interviews are conducted in the Barnahus. Interviews are audio-visually recorded in order to avoid repeated interviewing by different professionals who require access to the child’s disclosure.

6.4 Multidisciplinary and interagency presence: The forensic interview is carried out by a single professional. All relevant members of the multidisciplinary, interagency team are able to observe the forensic interview; either live in an adjacent room, or recorded. There is a system of interaction between the interviewer and the observers so that questions can be posed to the child via the interviewer.

6.5 Respecting defendant’s right to a fair trial and “equality of arms”: Arrangements are in place that allows the defence to pose questions to the child victim/witness via a forensic interviewer. Should the accused person have the legal right to observe the child’s testimony, this is done by audio-visual transmission to avoid potential contact between the accused and the child.

6.6 Adapted to child: The interview is adapted to the child’s age, development and cultural background and takes into account special needs including interpretation. This may include minimising the length of interviews, allowing breaks, and potentially conducting the interview over more than one session. The number of interviews is limited to the minimum necessary for the criminal investigation. The same professional conducts the interview if multiple interviews are necessary.

Why should services meet this standard?

Links to legal provisions:
Provision of information
Right to interpretation & translation
Adapted procedures in investigations and judicial proceedings involving children
Interviews take place, where necessary in premises designed or adapted for this purpose
Interviews are carried out by or through professionals trained for this purpose
The same persons, if possible and were appropriate, conduct all interviews with children
Interviews of victims of sexual violence, gender-based violence or violence in close relationships being carried out by persons of the same sex
The number of interviews is as limited as possible and interviews are carried out only where strictly necessary and for the purpose of the investigations and proceedings
All interviews with a child victim or where appropriate a child witness, may be audio-visually recorded and that such recordings may be used as evidence in criminal court proceedings
Possibility to order that the child victim be heard through the use of appropriate communication technologies
Right to avoid contact between victim and offender
Training & tools
Multi-disciplinarity/coordination/cooperation

Guidance: The UN Committee on the Rights of the Child (CRC) emphasises that “Investigation of instances of violence, whether reported by the child, a representative or an external party, must be undertaken by qualified professionals who have received role-specific and comprehensive training, and require a child rights-based and child-sensitive approach. Rigorous but child-sensitive investigation procedures will help to ensure
that violence is correctly identified and help provide evidence for administrative, civil, child-protection and criminal proceedings. Extreme care must be taken to avoid subjecting the child to further harm through the process of the investigation. Towards this end, all parties are obliged to invite and give due weight to the child’s views.” (UNCRC General Comment no 139). The CRC furthermore states that when children’s rights are violated States need to give particular attention to ensuring that there are effective, child-sensitive procedures available to children” (General Comment no 5). It furthermore urges States parties “to adopt and implement rules and proceedings for child victims of physical violence, sexual abuse or other violent crimes ensuring that repetition of testimonies be avoided by the use of video-taped interviews to reduce retraumatisation” (General Day of Discussion on the right of the child to be heard101). Also see CoE Guidelines on Child-friendly justice102 Ch. IV.D.6 and the EC Reflection paper proposing 10 principles for integrated child protection systems103, European Commission, for example Principles 1, 2 and 6.

Research and Experience: Research has shown that repeated interviews can be very traumatic for the child and cause retraumatisation. Such retraumatisation can even have more harmful effects on the child than the abuse itself. Special measures therefore need to be taken to ensure that children are provided with opportunities to give evidence in an emotionally and physically safe and conducive environment to prevent retraumatisation and to secure a successful criminal investigation and judicial process. Research has also shown that repeated interviews carried out by people who are not specifically trained in forensic interviewing are likely to distort the child’s account of events by suggestive questioning with detrimental effects on the criminal investigation. Steps therefore must be taken to ensure that the forensic interview conforms to requirements of rules of evidence and respects the rights of the defence so that the evidence gathered is valid in court.104

Examples of performance indicators and/or evidence that the standard is being met

Evidence-based Practice and Protocols
- Evidence-based protocols, such as NICHD or NCAC, are used for all forensic interviews and exploratory interviews;
- Interviewers are trained in using evidence-based practice and protocols;
- Evidence gathered by forensic interviewers is consistently recognised as valid in court.

Specialised Staff
- Forensic and exploratory interviews are only carried out by specialised staff;
- Staff receive regular training in conducting forensic interviews;
- Staff receive regular guidance, supervision and counselling, including through peer review (also see standard 9).

Location and recording
- Special child-friendly forensic interview rooms are available in the Barnahus;
- Interview rooms are equipped with a camera and a sound system, which allows high quality recording and live view of the forensic interview;
- All interviews are audio-visually recorded;
- Recordings of interviews are stored in a safe location with restricted access.

Multidisciplinary and interagency presence
- Interviews are routinely carried out by one single professional, with relevant professionals observing from another room;
- Facilities are available for live observation of interviews on screen in another room;
- Facilities are available to allow observers to, if necessary, communicate directly with the interviewer through an earpiece;
- Forensic interviewers should be trained how to use the interpreter during the interview;
- The interviewer explains the role of the interpreter to the child and the interpreter. The interviewer recommends if the interpreter should be connected via telecom or be present in the interview room as well as the position of the interpreter in the interview room. The interpretation is checked by a second interpreter to ensure accuracy;
- Exploratory interviews with unaccompanied and asylum-seeking children are observed by relevant immigration authorities; the child’s legal guardian and other appropriate professionals;
- A checklist guides the observing team and ensures that everyone is clear about their roles and responsibilities;
- Non-offending family and caregivers are not allowed to observe the forensic interview.
Respecting defendant’s right to a fair trial and “equality of arms”:

- The defence lawyer is offered an opportunity to question the child following disclosure, for example through a second interview of the child;
- If a second interview is requested, it is confined to additional questions and does not include a repetition of questions from the first interview;
- If a second interview is requested, it is carried out by the same professional who conducted the first interview;
- The accused perpetrator does not have access to the Barnahus premises, but can be allowed to observe the interview through an audio-visual transmission.

Adapted to child:

- The number of interviews is limited to the absolute minimum necessary for the criminal investigation;
- The same professional conducts the interviews if multiple interviews are necessary;
- The interview is adapted to the individual’s situation and characteristics in terms of age, development, linguistic, cognitive and social level, cultural background, emotional state;
- Special needs are explored and met;
- Interpretation is offered if necessary.

Tools, policy, resources

NICHD Investigative Interview Protocol
NCAC Child Forensic Interview Structure
APSAC practice guidelines on forensic interviewing
The Corner House Forensic Interview Protocol
Evidence-based Practice and Protocols
There are two types of forensic interviews in the Barnahus: testimonies for court hearings and exploratory interviews, which each serve multiple purposes for the judicial system and the medical-and child protection services. Both types of interviews are carried out according to evidence-based practice and protocols.

There are two interviewing protocols in use at the Barnahus in Iceland. One is the internationally recognized NCAC (National Children’s Advocacy Center) Child Forensic Interview Structure protocol and the other one is the NICHD (National Institute of Child Health and Human Development) International Evidence-Based Investigative Interviewing of Children protocol. The forensic interviewers at Barnahus Iceland are professionals in the area of mental health and have an educational background in child development. They are trained in the use of one or both of the protocols.

The NCAC Child Forensic Interview Structure is a flexible structure that can be adapted to children of different ages and cultural backgrounds. It is appropriate for interviewing children who may have experienced sexual or physical abuse or who may have witnessed violence. The NCAC forensic interview model emphasizes a flexible thinking and decision-making approach throughout the interview, as opposed to a scripted format. Each component of the model has been informed by research. A panel of practising experts reviews the protocol annually in order to identify the need for appropriate additions or adaptations.109

The NICHD Protocol has been developed with specific consideration for child development issues, including linguistic capabilities, memory, suggestibility, forensic needs, interviewer behaviour, and the effects of stress and trauma. It has been developed by an interdisciplinary team that included researchers, forensic interviewers, police officers and legal professionals who were seeking an evidenced-based approach to forensic interviewing.110

Exploratory interviews
The earlier a case of violence against a child is identified and referred to the Barnahus, the better are the chances for the child to recover and receive appropriate treatment. Identifying sexual violence against a child is especially difficult as the child does not always show any obvious signs or disclose the abuse. Children might however give indications and signs that can raise suspicions that sexual abuse or sexual exploitation has happened. For instance, a suspicion of child sexual abuse might arise if a child displays knowledge or interest in sexual acts that are inappropriate to his/her age, draws sexual acts or complains of genital pain. A suspicion might also arise if a child shows extreme changes in mood and/or behaviour and exhibits sexual behaviour inappropriate to his/her age.

In cases of suspected child abuse, the Icelandic law obliges all officials, professionals and other persons who work with children to report cases of suspected child abuse to the Child Protection Services (CPS). The child protection services often refer these cases to the Barnahus for exploratory interviews. It should be noted that exploratory interviews are almost only confined to cases of suspicion of sexual abuse and exploitation. An exception from this are interviews with unaccompanied and asylum seeking children where the aim is to document the child’s narratives in the context of the asylum application and to identify possible trauma, including abuse to which they may have exposed to during their journeys.

Exploratory interviews in suspected child sexual abuse cases are conducted when the child’s disclosure is weak or ambiguous, when the alleged offender is below the age of criminal responsibility and in cases where the child makes a disclosure.
but refuses to reveal the name of the perpetrator. Siblings of victims of child sexual abuse may be referred to the Barnahus for exploratory interviews in cases where the perpetrator is in the victim's circle of trust and has had access to them. Such exploratory interviews may be conducted even when the siblings have not disclosed any sexual abuse.

Exploratory interviews are carried out by using evidence-based forensic interviewing protocols. They are only observed by the staff of the child protection services. If the child makes a disclosure of sexual abuse during an exploratory interview, the interviewer makes sure not to ask further questions but listens carefully to the child's disclosure and thereafter stops the interview by thanking the child for coming to the Barnahus. Immediately after the disclosure, the observing child protection worker refers the case to the police for criminal investigation. A second interview follows under the auspice of a judge (see below), preferably by the same interviewer.

After the exploratory interview, the child remains in one of the waiting rooms at the Barnahus while the non-offending parent(s) or caregiver(s) speak to the interviewer and the child protection worker. During this meeting, the interviewer goes through the main points of the exploratory interview and gives advice on how to deal with issues that may have come in the interview. This can for example include how to address changes in the behaviour of the child or recommendations about steps to take in order to protect the child in the future. All cases where children disclose sexual abuse during an exploratory interview are assessed in order to decide if the child needs to be referred to medical evaluation and/or treatment services at the Barnahus.

In cases where the alleged perpetrator is below the age of criminal responsibility or when children refuse to disclose the name of the perpetrator, exploratory interviews are conducted in order to give children the possibility to tell their story and to document the narrative. This is considered important to gather all the information and details necessary for the treatment and follow-up services.

**Joint Forensic Interviews - Court Testimony**

The most distinctive feature of the Barnahus in Iceland is the possibility for a child victim to give his/her testimony at the Barnahus under the auspices of a court judge during the investigative process. The child’s testimony given during the joint forensic interview automatically becomes a court statement if an indictment is made.

The aim is to save the child from having to repeat the statement at the courthouse and to potentially confront the defendant at the trial. The child's testimony can furthermore be elicited without undue delay, whereas trials might take place more than a year after the initial disclosure. The evidential value of the child's statement is generally considered to be greater the shorter the time period that passes between the abuse and the forensic interview. It can furthermore not be argued that the disclosure is affected by treatment interventions or other factors which may occur in the extended period between the disclosure and the trial.

The basic idea of the forensic interview is to strike a balance between the two basic human rights principles of “due process” or “the defendant's right to a fair trial” one the one hand and the “best interest of the child” on the other hand. The interviews therefore have to be arranged so that the defence lawyer can observe the child’s testimony and question the child victim. At the Barnahus, this is made possible via the interviewer as appropriate. This arrangement is in line with practices that have been established as appropriate procedure in the case-law of the European Court of Human Rights.

It should be noted that the accused person is not allowed access to the Barnahus for the purposes of observing the child’s testimony. The court judge may permit that the accused can watch the interview via an audio-visual transmission, in which case the accused is typically located in the court house. However, this very rarely takes place.
**Recording of interviews**
There are two forensic interviewing rooms. All interviews with children are audio-visually recorded. The recorded files are kept in a safe archive. If legal action is pursued, both the judge and the police investigators receive a copy of the recorded interview. The recording is admitted as a valid testimony in court proceedings. Recordings are also available to the different professionals in Barnahus who require access to the child’s disclosure for medical examination or therapy.

**Multidisciplinary and interagency presence**
Forensic interviews are carried out by a single trained forensic interviewer. All the relevant members of the multidisciplinary, interagency team are able to observe the forensic interview live in an adjacent room. The interviewer wears an earpiece and the observers are able to communicate with the interviewer through a microphone located in the observing room.

The Barnahus in Iceland strongly believe in the importance of avoiding repeated interviews of the child by many agencies in different locations, including in the courtroom. Research has shown that repeated interviews can be very traumatic for the child. Repeated interviews are likely to cause retraumatisation of the child, which can have even more harmful effects on the child than the abuse itself.

**During forensic/court hearing interviews**, the interview is observed in an adjacent room by the judge, who is formally in charge of the procedure, a social worker from CPS, the police, the prosecution, the defence attorney and the child’s advocate. The interview is audio-visually recorded for multiple purposes, to inform the assessment by the child protection services and the criminal investigation and as court testimony at the main proceedings if an indictment is made. This arrangement makes it possible in most cases to conduct only one interview as the child is not required to appear in court.

**During exploratory interviews**, a child protection worker observes the live interview in an adjacent room through a TV screen or a computer screen.

**Exploratory interviews with unaccompanied minors and children who are asylum seekers** are observed by a representative from the Directorate of Immigration, the child’s legal guardian and the social worker in charge of the case from the local child protection services. The police may be included in some cases, for example if there is a suspicion of trafficking.

**Adapted to the child**
The interview is adapted to the child’s development, age and cultural background. Interviews take into account children’s special needs and are adapted to children with physical or developmental disabilities. In practice, this may require the length of the interview to be reduced, to allow for breaks and potentially conducting the interview by the same professional in more than one session. Interpreters are used in cases where children are not proficient in a language spoken by the interviewer or when children use sign language.
Promoting forensic interviews in child-friendly premises by trained professionals - Child and Youth Protection Centre, Zagreb

The Child and Youth Protection Centre in Zagreb aims to secure adequate and valid information for court proceedings and to minimise potential retraumatisation of the child. To this end, the Centre offers a child-friendly premise where interviews are conducted by a single specialised staff member following an evidence-based protocol.

The Centre works with a multidisciplinary approach in order to ensure that each child is offered a comprehensive response. The team consists of psychologists, psychiatrists, a neuro-pae-diatician, social workers, social pedagogues, a speech therapist, nurses and a jurist. Depending on the specific needs of the child, these professionals put together a team of different staff members. According to the Act of the Juvenile Court, it is prohibited to interview children in the court room during hearings. The interviews with children should be done in a separate room by a social pedagogue. The interview is transmitted via video-link to the court room. Only with a special court order can the forensic interview be done at the Child and Youth Protection Centre and a recording be used as evidence in the legal proceedings.

The Child and Youth Protection Centre strongly encourages judges to interview children in the Centre so that the interview can be carried out by a trained professional in a child-friendly environment. The judges and other involved parties can observe the interview from another room and pose questions to the child via the forensic interviewer. Judges are however often reluctant to come to the Centre and to carry out the interview via another professional.

The Centre therefore advocates for law reform to ensure that it becomes mandatory in the future for interviews to take place at the Centre and are conducted by a trained professional. The experience from Norway, for instance, has inspired the advocacy for law reform in Croatia, as a recent law stipulates that interviews with children should, as a general rule, take place at the Barnahus.111
Initial interviews
The initial interview is made when a child is referred to the Child and Youth Protection Centre with the purpose of gathering forensic information. Initial interviews are carried out without the presence of social services, police, school or other parties involved. A specialised staff member, who is trained in forensic interviewing, conducts the interview. The report from the interview is sent to other relevant agencies. This is the first step in the multidisciplinary assessment. At this stage, the Centre gathers also other relevant information from the child’s caretakers and from other services. In addition, the Centre assesses the mental and physical health of the child. The information is shared with law enforcement, the state attorney and/or social welfare services, together with recommendations for further steps in protecting the child.

Joint Forensic Interviews
The joint forensic interviews form part of an arrangement with the courts to ensure child-friendly, evidence-based interviews in court proceedings. Joint forensic interviews are carried out by a specialised forensic interviewer from the Centre. In a separate room at the Centre that is audio-visually linked with the interviewing room, the interview is observed by the judge, the defendant and his/her lawyer, the police and other relevant parties involved in the case. The observing parties can pose questions through the professional who interviews the child. The interviewer adapts the questions posed by the observing parties to the developmental level, emotional state and specific characteristics of the child.

Forensic evaluations upon a court order
Forensic evaluations are done upon a court order. They are conducted by staff members of the Centre who are accredited expert witnesses (e.g. psychologists, psychiatrists or social workers). In order to conduct a forensic evaluation, the child is interviewed by the accredited expert at the Centre. Forensic evaluations include credibility assessments of child victims and witnesses of violence, child custody evaluations and forensic evaluations of juvenile offenders.

Evidence-based protocols
All mental health professionals at the Centre are trained to conduct forensic interviews in a child-friendly and evidence-based way. The professionals have to be able to strike the sensitive balance between gathering relevant information that can be used in court and protecting the child from retraumatisation. This requires skills such as building an adequate rapport with the child, active listening and information processing and asking developmentally appropriate and non-suggestive questions. It is sometimes a challenge to balance the clinical role (assisting and supporting the child) and the forensic role (obtaining forensically adequate information).
Experience shows that it is important to invest time and effort in the first phases of the interview, including the introduction, rapport building, basic rules, narrative practice and addressing episodic memory. Taking time for these first steps helps to obtain more forensically relevant information in a shorter period of time. It also reduces the risk of retraumatisation of the child. The interviewers are trained in extended forensic interviewing and are therefore prepared to handle cases where several interviews are needed. This sometimes happens if the child is shy or reluctant to disclose, if the child is traumatised and/or if the child is very young or has a disability.

The introduction of evidence-based protocols, such as the NICHD protocol, for forensic interviews with children has improved the quality, effectiveness and efficiency of the service provided at the Child and Youth Protection Centre. The quality of the forensic interview is increased and the risk of retraumatisation is minimised. Evidence based protocols are proven to reduce suggestibility and increase the amount of forensically adequate information obtained through the interview.

Forensic interviews with children with special needs – Barnahus Linköping

The joint consultation meetings, which are regularly held at the Barnahus in Linköping, are important as a preparation for the forensic interview. As the parents/caregivers usually are not informed in advance about the forensic interview with the child, information about the child cannot be obtained from them. It is therefore essential that the team at the Barnahus is able to gather information from other sources. If the child has special needs, the Barnahus team gathers information with due consideration to the child’s needs. The following specialists may need to be contacted in order to gather information about children with special needs:

- Special needs with speech: The police officer who will interview the child contacts the child’s speech therapist. If the child does not have a speech therapist, the police officer contacts a speech therapist who can provide advice and help.
- Special needs related to developmental disabilities: The police officer who will interview the child contacts the child’s specialist from the child rehabilitation unit. If there is no specialist in the child rehabilitation unit who knows the child, contact is made with a specialist who can provide advice and help.
- Special needs related to physical disability: The larger interview room at the Barnahus is booked if the child comes in a wheelchair. The premises are adapted to ensure indoor accessibility.
- Special needs with regard to sight and hearing impairments: Contacts are made with specialists who can provide help, for example a sign language interpreter.
- Special needs on the basis of neuropsychiatric disorders (for example ADHD, autism): Child psychiatric expertise is present at the joint consultation meetings and in the adjacent observation room during the interview.
- Special needs according to honour-related violence and genital mutilation: A handbook is available that can guide the Barnahus team in handling these cases. In addition, specialised expertise is available from national authorities. At the women’s clinic and the children’s hospital, there are specialised doctors who can be involved in these cases.
- Other special needs: The police officer who conducts the interview or the social worker in charge of the case contacts the child’s teacher at school or preschool for general information about the child. This helps to clarify, for instance, if the child is shy or talkative.
Interpretation
In some cases, an interpreter is needed to assist in the communication with the child during the forensic interview. The forensic interviewer is trained to ensure that the interview is not affected by personal beliefs, attitudes and emotional reactions to the disclosure. A general interpreter may not have this kind of training and awareness.

The Barnahus in Linköping aims to avoid that the interpreter is present in the interview room. Interpreters are instead connected via conference telephone. This helps to reduce the potential impact that the interpreter might have on the child and the disclosure. It is important to ensure that the interpreter is not acquainted in any way with the child or the family so that there is no risk that the interview is affected by personal connections. It is therefore recommended that the interpreter calls in from a different part of the country that is remote from the victim’s community.

The Barnahus in Linköping has had a few cases of honour-related violence where the interpreter tried to influence the child not to disclose or interpreted the child’s statements falsely. One way of securing that the interpretation is correct, is to ask a second interpreter to validate a transcript of the interview. It is good practice to inform the interpreter that a second interpreter may review the interview.

The experience at the Barnahus has shown that the language skills of the child need to be carefully assessed. The level of understanding and spoken language which is sufficient for the child to interact in preschool, for instance, is not necessarily sufficient for the child to participate in a forensic police interview in Swedish.

Forensic Interviews - Barnahus Stockholm

At the Barnahus in Stockholm, the forensic interview is carried out by staff employed by the police. The staff who carry out the forensic interviews with children must have completed a special University education in evidence based forensic interview methodology, with a focus on children and youth. The education includes a few courses on child development psychology and children with special needs. The education includes both theory and practice and is integrated into the work of the forensic interviewer during a couple of years. Once the education has been completed there is continuous quality control, peer review and access to supervision.

The forensic interview methodology in the Barnahus is based on evidence based protocols, including the NICHD protocol and is a central part of the criminal investigation in Barnahus. The criminal investigation is carried out by at least two police employees based in the Barnahus. At least one of the investigators is a trained forensic interviewer.

The forensic interview is prepared by gathering information from people with prior knowledge of the child’s developmental status and language skills. Psychologists based in the Barnahus are also consulted before the interview. A Barnahus psychologist observes the interview if there is a need for additional expertise in child psychology during the interview.
A forensic interview can be defined as “a single session, recorded interview designed to elicit a child's unique information when there are concerns of possible abuse or when the child has witnessed violence against another person” (http://www.nationalcac.org/forensic-interview-services) or “a structured conversation with a child intended to elicit detailed information about a possible event(s) that the child may have experienced or witnessed” (http://www.smallvoices.org/what_we_do/forensic_interviews.html). The forensic interview collects information from the child pertaining to, or suitable for courts of law.

Relevant members may vary depending on national practice, legal procedures and law. It can for example include a psychologist (if the interview is carried out by the police) social services, law enforcement, legal guardian, prosecutor, judge. Family/care-givers are not allowed to observe the interview.

Standard 7
**Standard 7. Medical Examination**

**What is the standard?**

7.1 **Evaluation:** Medical evaluations and/or forensic medical evaluations are routinely carried out in the Barnahus premises by specialised staff.

7.2 **Treatment:** Medical treatment is carried out in the Barnahus premises (unless urgent or complicated cases require special interventions at a hospital setting, as an outpatient or inpatient).

7.3 **Staff:** The medical examination is carried out by specialised staff who are trained on recognizing indicators of physical, sexual, and emotional abuse as well as child neglect.

7.4 **Case review and planning:** Medical staff is present in case review and planning meetings as appropriate.

7.5 **Information and child participation:** Children and family/caregivers receive adequate information regarding available and necessary treatments and can influence the timing, location and set up of interventions.

**Why should this standard be met?**

**Links to legal provisions:**
- Taking due account of the views of the child
- Provision of information
- Right to interpretation & translation
- Provision of assistance and support
- Individual assessment of each child’s circumstances and non-offending family members’ needs
- Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations
- Training and Tools (Forensic) Medical examinations are kept to a minimum

**Guidance:** The UN Committee on the Rights of the Child (CRC) has emphasised that different types of victim support, including medical, mental health, social and legal services, should be made available to the child and the non-offending caregivers and other family members. The CRC also promotes follow up and longer term interventions. Victim support should be decided through a participatory approach and should not be subject to undue delay. Special attention must be given to inviting and giving due weight to the child’s views (CRC General Comment no 13). The CRC furthermore emphasises measures to promote physical and psychological recovery of victims of violence, including medical services. Medical examination, treatment and potential referral to specialised medical treatment should form an integral part of the services that a Barnahus offers, to ensure the victims’ right to health and to secure forensic evidence. (CRC General Comment no 13)

Also see CoE Guidelines on child-friendly health care (2011) Ch. IV.

**Research and Experience:** Multiple forms of abuse and neglect may co-occur in a given child, some of which may be easily missed without a medical examination. Thus, a medical examination of every child will increase the diagnostic accuracy in every case.

**Why should this standard be met?**

**Examples of indicators and/or evidence that the standard is being met**

**Evaluation**
- Medical evaluations and/or forensic medical evaluations are routinely carried out in the Barnahus premises.

**Treatment**
- Medical treatment is carried out in the Barnahus premises as relevant;
- The Barnahus liaises with a local hospital for referral of relevant cases for further evaluation and treatment, including urgent or complicated cases that require special interventions at a hospital setting, as an outpatient or inpatient as well as with hospitals referring concerning cases to the service.

**Staff**
- The medical evaluation and treatment in the Barnahus are carried out by a paediatrician, gynaecologist, forensic medicine physician or an advanced nurse with specialised training on child abuse and neglect.
depending on the needs of the child;
- Staff is competent in photo documentation of injuries and lesions on the victim's body;
- Staff have access to, and competence to use, equipment for child-friendly general and genital examination in the Barnahus (e.g. video-colposcope for examination of sexual abuse and a high quality camera for physical abuse). If there is no such equipment, the child is referred to a service which can perform the examination without delay.

### Medical evaluation and treatment – Child and Youth Trauma Centre, Haarlem

When a child is referred to the Child and Youth Trauma Centre in Haarlem, the team meets in an initial planning meeting to share information. The team jointly decides if a medical evaluation is necessary. In the great majority of cases, a medical evaluation is considered necessary in order to identify physical harm, malnutrition or old bone fractures. A medical evaluation is however also often beneficial for the mental well-being of the child and the parents/caregivers. It is important for the child to hear from a doctor that his/her body is fine and that any potential physical injuries can be treated. It can be a huge relief for children and their parents/caregivers to get the confirmation from a doctor that the child has not contracted any sexually transmitted diseases, is not pregnant or suffered permanent physical injuries.

In the hospital where the Child and Youth Trauma Centre is based, three paediatricians are trained in medical evaluations of child abuse and neglect cases. They are present in the Centre on two afternoons per week. Medical evaluations can be scheduled on the afternoon when the paediatricians are present or, in case of emergencies, the paediatricians can be called in to perform an evaluation. A paediatric nurse is present at the Centre at all times.

The medical evaluation is carried out by one of the paediatricians together with the paediatric nurse. Both the doctors and the nurse have gone through specialised training, they regularly attend courses and conferences and have access to recent research and literature in this area.

The paediatrician and nurse have access to the necessary equipment to carry out child-friendly examinations. Video-colposcope for examination of sexual abuse can be carried out in the department of gynaecology in the hospital where the Centre is located. Radiology to identify old and new bone fractures is also available in the hospital. If relevant, a forensic doctor from the Dutch Forensic Institute, specialized in forensic exams of children/adolescents, can come to the Centre within an hour, and carry out a forensic medical exam in a special room which is set up according to existing rules and regulations on the environment in which forensic examinations must be carried out.

Specialised medical treatment is provided in the hospital. If necessary, the child can be transported to the Amsterdam Medical Center, a University Hospital, which is 15 minutes away. A highly specialized medical team is available there, including specialised paediatricians and a radiologist specialized in assessing cases of child maltreatment.
Medical examination and Treatment - Barnahus Linköping

The Barnahus in Linköping has a fully equipped medical examination room and a video-colposcope. In cases where a medical examination is needed, it always takes place at the Barnahus. Blood samples and x-rays are taken at hospitals.

Medical examinations are carried out by the paediatrician on call, often together with a forensic doctor. If the genitals of a child have to be examined, a nurse from the Division of Paediatric Urology Neuro and Bowel Disorders usually works closely with the paediatrician as they have experience and are good at supporting children during the examination. It is mostly the same paediatrician, who has extensive experience and expertise in the area, who carries out examinations in cases of sexual abuse. In cases of suspected child sexual abuse of a child who has reached puberty, a gynaecologist from the women’s clinic carries out the examination.

The medical examinations are mostly done on the same day of the forensic interview, taking into account the best interests of the child and ensuring that there is proper input to child protection and risk assessment. In urgent cases, the medical examination is carried out on the same day when Barnahus receives the report about the case.

The paediatricians’ expertise is important throughout case management in the Barnahus and they are present in the joint consultations meetings where cases are planned and reviewed.

This routine can be maintained thanks to the rotating schedules of the paediatricians in the hospital, in which the Barnahus is a regular and recurrent feature. A Child Protection Team in the region’s health care system has been set up in all different departments of the hospital, which contributes towards spreading information about child abuse among health care workers.

112 A medical forensic examination can be described as an examination looking for injuries and taking samples that may be used as evidence in a police investigation or in court.

113 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf

114 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf


116 Circumstances that require urgent medical evaluation include, but are not limited to, physical and/or genital complaints that require urgent attention, need for emergency contraception, need for sexually transmitted infection screening and prophylaxis, need for suicidal ideation evaluation. In some places the service carries out suicidal ideation evaluation. If there is a high suicidal risk, the child is then referred to a psychiatric hospital.
Standard 8
Standard 8. Therapeutic Services

What is the standard?

8.1 Assessment and Treatment: Assessment and treatment is routinely made available for child victims and witnesses who are referred to the Barnahus.

8.2 Staff: Mental health services and treatment are provided by professionals with specialised training and expertise.

8.3 Information and child participation: Children and family/care-givers receive adequate information regarding available treatments and can influence the timing, location and set up of interventions.

8.4 Crisis Intervention: The Barnahus has a clear organisational structure and permanent staff, which routinely offers crisis support intervention for the child and non-offending family members/care-givers if needed.

Why should this standard be met?

International and European legal obligations: Article 39 of the UN Convention on the Rights of the Child (UNCRC) requires States Parties to take "all appropriate measures to promote physical and psychological recovery and social reintegration of any child victim of any form of neglect, exploitation, or abuse [...]."

Links to legal provisions:
- Taking due account of the views of the child
- Provision of information
- Right to interpretation & translation
- Provision of assistance and support
- Individual assessment of each child’s circumstances and non-offending family members’ needs
- Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations/Training and Tools

Guidance: The UN Committee on the Rights of the Child (CRC) has emphasised that different types of victim support, including medical, mental health, social and legal services, should be made available to the child and the non-offending caregivers and other family members. The CRC also promotes follow up and longer term interventions. Victim support should be decided through a participatory approach and should not be subject to undue delay. Special attention must be given to inviting and giving due weight to the child’s views (CRC General Comment no 13(20).)


Research and Experience: Effective treatment for the child and, if needed, the non-offending family members/care-givers, can minimise negative social, emotional and developmental effects of the trauma on the child. Avoiding undue delay is central to ensuring effective treatment, and children and non-offending family members/care-givers in need of treatment should therefore be offered therapeutic/mental health services as soon as possible.
Assessment and Treatment

- Mental health assessment is routinely carried out in the Barnahus on the basis of validated instruments and questionnaires, serving as a basis for developing an evidence-based and trauma-informed treatment plan;
- Treatment is adapted to the individual characteristics of the child, including age, development, linguistic, cognitive and social level, cultural background, emotional state;
- The first formal therapy session starts as soon after the forensic interview as possible in order to avoid contamination of the child's narrative, while avoiding undue delay. If urgent interventions are needed, treatment in a forensically sensitive manner is offered;
- If needed, children are offered short-term and long-term treatment. If the Barnahus does not offer long-term treatment, the child is referred to another therapeutic/mental health service that offer long-term treatment;
- Assessment and treatment are never made conditional on the victim’s willingness to cooperate in the criminal investigation, prosecution or trial.

Staff

- Staff members providing mental health services have received specialised training in assessment and treatment of child victims and witnesses of violence;
- Staff members have access to regular training opportunities; guidance, supervision and counselling.

Information and child participation

- Children and non-offending parents/care-givers are routinely offered information about treatments available to them;
- Children and non-offending parents/caregivers are provided with opportunities to influence the treatment plan, including timing, location and set up;
- Information and treatment is made available in a language that children and family/care-givers understand;
- Special efforts are made to ensure that victim support meet special needs, including those of children with disabilities.

Crisis Intervention

- There is a clear organisational structure and permanent, trained staff for crisis support in the Barnahus;
- Crisis support is routinely offered in the Barnahus to all children and non-offending family members/care-givers who are in need.

Resources

NB. The tools included here are examples and is not an exhaustive list of assessment and treatment approaches that are empirically validated. All services should carefully select the resources they apply in their work and ensure that they are adequately translated and standardized in the national context.

Assessment: UCLA PTSD Index for DSM-IV (Child Version and Parent Version)\(^{24}\), Beck Youth Inventory (BYI)\(^{25}\), Multidimensional Anxiety Scale for Children (MASC)\(^{26}\), Children's Depression Inventory (CDI)\(^{27}\), Depression Anxiety Stress Scales (DASS)\(^{28}\), Anxiety Disorders Interview Schedule for DSM-IV Child Version (ADIS-IV Child)\(^{29}\) and Clinician Administered PTSD Scale (CAPS)\(^{30}\), Trauma Symptom Checklist for Children\(^{31}\), Trauma Symptom Checklist for Younger Children\(^{32}\) and Trauma Symptom Inventory, for adolescents older than 16 years\(^{33}\); Child Behaviour Checklist (CBCL)\(^{34}\). Also see: www.cebc4cw.org

Treatment: Trauma Focused Cognitive Behavioral Therapy\(^{35}\) (TFGBT), Cognitive Processing Therapy\(^{36}\) (CPT), Cognitive Behavioral Therapy\(^{37}\) (CBT), Eye Movement Desensitization and Reprocessing therapy\(^{38}\) (EMDR).
Support services
After a child has gone through an exploratory or a court hearing interview, the Barnahus team decides whether the child requires further services in the Barnahus (e.g. a medical examination or therapeutic services). Therapeutic services are always offered when a child discloses abuse. The child is referred to a therapist who carries out an assessment and provides the appropriate treatment and follow-up. The therapists at the Barnahus are all mental health professionals and are trained in trauma focused therapy.

According to the national law, it is not mandatory to refer children who are over 15 years old to the Barnahus for forensic interviewing. Some adolescents, 15 to 18 years old, make their statements at the police station. Nevertheless, they are entitled to the therapeutic services offered by the Barnahus as well as medical examination if that is considered helpful or necessary.

Therapists at the Barnahus work in collaboration with the Child Protection Services (CPS) as well as a number of other treatment providers including the Child and Adolescent Psychiatric Ward of the National University Hospital and the State Assessment Centre for Youth for children and adolescents.

A case worker from the Child Protection Services coordinates the multidisciplinary team ensuring the continuous support and follow up with the child and his/her family/caregiver(s). The Barnahus staff is responsible for the treatment services provided to the child and up to three sessions for the non-offending parents/caregivers. This involves a regular communication with the case workers from the Child Protection Services. This collaboration allows for the cooperation with the Child Protection Service caseworkers to ensure the welfare of children and families who receive services at the Barnahus.

Assessment
Assessment of treatment needs is the first step taken to determine a plan for treatment and psycho-education. If the child requires further treatment, evidence-based trauma-focused treatment can be provided.

The first three therapy sessions are dedicated to assessment and psycho-education. The assessment is an essential part of the treatment. Without assessment, the treatment needs of the particular child cannot be established. One important goal of treatment is to know the history of the traumatic exposure and to identify symptoms of post-traumatic stress disorder.

With pre-schoolers and children up to 7 years of age, it is also good to consult with the caregiver on the child’s symptoms and behaviour. Symptoms to look for in younger children are changes in sleep patterns, moods, appetite and behaviour. Children above 8 years of age usually fill out self-assessment questionnaires or go through structured clinical interviews.
**Treatment**

After the assessment, an individual treatment plan is developed to guide the continued service provision at the Barnahus. If the child lives outside the capital area, the follow-up services are provided in the child’s home community according to the treatment plan. The therapist in the Barnahus work with evidence-based treatment approaches such as Trauma Focused Cognitive Behavioural Therapy (TFCBT), Cognitive Processing Therapy (CPT), Cognitive Behavioural Therapy (CBT) and in some cases Eye Movement Desensitization and Reprocessing Therapy (EMDR).

When working with pre-schoolers, treatment is provided in the form of psycho-education for children and their non-offending parents/caregivers. In a play-therapy room at the Barnahus, the treatment providers engage the children in different activities; for instance, they encourage the children to use toys in order to tell their stories or express their emotions. This method is mainly used with smaller children. A variety of materials are used during play-therapy, such as a sand-therapy box with different figures; a wooden doll house with wooden furniture and family figures; animal figures; clay and play dough; paint and brushes; or crafts materials.

Family therapy is provided in cases where families are going through a crises and need immediate support. At the Barnahus, the family therapy is provided primarily to establish the needs of the family and what problems they are facing. The families are referred to the Child Protection Services for further family therapy sessions when needed.

The Barnahus has also developed a self-confidence course to help teenagers improve their self-esteem. Teenagers are referred to the course after they have gone through a trauma-focused treatment if they still exhibit symptoms of low self-esteem.

**Staff**

All therapist and forensic interviewers at the Barnahus are professionals with higher-education degrees, for instance in psychology, Master in Social Work, MS in family therapy, criminology and pedagogy. They are all trained in a variety of treatment interventions and receive regular supervision from experienced psychologists in the field.
The key mission of the Child and Youth Protection Centre of Zagreb is to provide support to children who have experienced traumatic events. As a part of the public health system, the Centre is accessible to children regardless of the family’s financial situation. Basic health insurance is mandatory in Croatia and funded by the State.

Options for support

Individual treatment plans are developed on the basis of a multidisciplinary assessment done at the Centre. The treatment plan takes into account circumstances such as the mental and physical wellbeing of the child, the status and capacity of the child’s support network, the child’s place of residence and pending court proceedings. Depending on their needs, the child and the family of the child can be provided with short- or long-term support.

The Centre supports the child and family by providing access to information, crisis support and different forms of treatment including counselling, evidence-based and trauma-informed psychotherapy, speech-language therapy or pharmacotherapy. If the child is not able to come for treatment in the Centre, for instance due to the distance from his or her home, the team provides recommendations for alternative treatment to be provided where the child lives. The children and families receive information regarding the available treatment services and can influence the timing and form of these services.

The therapeutic support in the Centre is based on evidence-based trauma-informed therapy. The experts at the Centre are trained in different psychotherapeutic approaches and offer the clients a wide range of possibilities, which ensure that the specific needs of the family can be met.

The therapy typically begins after the forensic interview in order not to influence the child’s testimony. When the court proceedings are still ongoing and the child is expected to testify, the treatment is done in a forensically sensitive manner.

Supporting the non-abusive parent/caregiver

Experience with the healing process of child victims and witnesses of abuse has shown that the support from a non-abusive caregiver is one of the most important preconditions for the child’s recovery. Children who are trying to speak out about abuse often face disregard, minimisation of their experiences, disbelief, blame or pressure to deny the abuse. The behaviour of the non-abusive parent/caregiver can range from lack of adequate support to emotionally neglectful or abusive behaviour. The limited capacity of the parent/caregiver to support the child can sometimes be related to longstanding problematic personal or family patterns. It can however also be the temporary effect of the emotional process of accepting the new reality. Parents/caregivers can be deeply emotionally affected, being torn by guilt, grief, fear for the future or anger at the perpetrator, themselves or the child. Parents/caregivers can also have a distorted perception of the situation due to false beliefs about abuse, or conflicts of loyalty between the child and the abusive parent/caregiver. In addition, they can have difficulties caring for the child or coping with the changes in the child’s emotional wellbeing and behaviour, which have been caused by experiencing or witnessing violence.

By understanding the parent’s or caregiver’s protective role and developing skills for coping with emotional distress and to support the child, it is possible to achieve the transition from being the non-abusive parent/caregiver to being a supportive parent/caregiver.
The non-offending parent/caregiver and other family members, for instance siblings, can be included in the treatment of the child when the trauma focused cognitive behavioural therapy model is used (see the following section for more information). They can also be provided with basic psycho-education, individual counselling, individual therapy or group support.

When the needs of the parent/caregiver surpass the possibilities provided by these forms of support and therapy, they are usually provided with individual therapy. This might be the case when they have a personal experience of abuse that has not been processed, or in cases of longstanding limitations in parenting capacity.\textsuperscript{142}

Trauma focused cognitive behavioural therapy (TF-CBT)

TF-CBT is an evidence-based treatment approach that has been proven to help children and their caregivers overcome trauma-related difficulties.\textsuperscript{143} The main goals of this model are to reduce emotional and behavioural difficulties related to trauma, help the child and the family to process the traumatic experience and to achieve a normal course of child development.

TF-CBT has been shown to be successful with children and adolescents aged between 3 and 18 years’ old who have significant emotional problems related to traumatic life events. This can, for example, include symptoms of posttraumatic stress disorder, fear, anxiety or depression. The treatment can be provided with or without parental participation, in many different settings such as parental homes, foster care, kinship care, group homes, and with children of different cultural backgrounds.

Resources in therapeutic work

The most important resource for the therapeutic work of the Centre is its library of scientific books and online courses by respected experts. They enable the Centre’s staff to follow new developments and research about abuse and neglect and the therapeutic work with children and families.

Therapeutic work with children allows for creativity even when it follows a specific model such as TF-CBT. For instance, the Centre uses therapeutic workbooks and worksheets, therapeutic storybooks, drawing or painting materials, kinetic sand, a sand tray with miniatures and figurines, dolls, doll houses, and a wide range of other creative materials such as magic wand and traffic lights.

The Centre has also published numerous brochures and leaflets. During the psycho-educational sessions, the parent/caregiver is often overwhelmed by emotional distress and/or the amount of new information. They can therefore have difficulties understanding or remembering the information provided by the professional. The written material allows them to access the information when they feel ready for it or want to look for specific information.\textsuperscript{144}

Opportunities and Challenges

The Centre is often exposed to the challenge of responding to the child’s needs in a timely manner without influencing the child’s testimony. The court proceedings in Croatia can some-
times take years. However, evidence shows that immediate sup-
port reduces the risk and severity of long-term consequences of trauma. The Centre handles this dilemma by conducting the treatment in a forensically sensitive manner as long as court proceedings are ongoing and the child is expected to testify. The child can be strengthened by supporting the development of coping skills such as relaxation and stress management skills, affective expression and modulation and cognitive coping. As long as the court proceeding is ongoing, there is a need to postpone the processing of the traumatic events.

The Centre plays an important role in strengthening the social support network of the child. However, working with a non-supportive non-abusive parent can make the therapist feel anger towards the parent for failing to support the child in need. There can also be a risk that a therapist feels tempted to take over some aspects of the parental role. In order to prevent this from happening, it is important for the therapist to be mindful of his/her reaction and to engage in regular supervision.

Maria came to the Child and Youth Protection Centre with her mother after disclosing sexual abuse. Maria had seen the advertisement for the child helpline on TV and this prompted her to tell her mother about her experience of abuse. Her father had died when she was 5 years old. Two years later, her mother remarried and the abuse started soon after. Maria is now 12 years old. Her mother was shocked by what Maria told her. She was emotionally distressed and felt guilty but she was also support-
ive and believed her daughter.

The information gathered through the multidisciplinary assess-
ment and the forensic interview by the psychologist confirmed
the sexual abuse by Maria’s stepfather. Maria was diagnosed
with post-traumatic stress disorder. Associated difficulties of
concentrating, lack of motivation and anxiety had caused her
difficulties in school, including moderate difficulties in academ-
ic achievement and in the relationship with her peers.

Following the assessment, the team recommended psychother-
apy as well as support by a social pedagogue related to learning
and peer relations. The psychologist initiated psychotherapy fol-
lowing the TF-CBT model. Since Maria was expected to testify in
Court, the therapy was done in a forensically sensitive manner.

After the court proceedings, the therapy continued. Both Maria
and her mother felt reluctant for Maria to testify in Court and
were afraid that talking about the events again would have a
negative effect on Maria, but received support from the ther-
apist to go through with it. The treatment continued with pro-
cessing trauma related cognitions, which were largely related
to Maria’s feelings of shame and guilt. The final sessions were
focused on developing skills related to personal safety and ed-
ucating Maria about sexuality in a developmentally appropriate
manner, in order to reduce the risk of revictimisation and pro-

Case Example from the Child and Youth Protection Centre, Zagreb

Maria was provided with information about sexual abuse,
common misconceptions and most usual emotional and be-
havioural reactions. She learned to attribute her difficulties to
the traumatic experience and that made her “finally feel like
there was nothing wrong with her, like she was normal”. At the
same time, psycho-education helped her mother gain a better
understanding of Maria’s situation, communicate more effec-
tively and manage Maria’s emotional and behavioural reactions.
Subsequently, the individual sessions focused on developing
skills that helped Maria and her mother cope more effectively,
such as relaxation and stress management skills and cognitive
coping, without directly processing the traumatic events.
mote healthy development. After the TF-CBT treatment, which lasted for a year and a half, Maria continued to receive follow-up services. The sessions became less frequent with periods of greater support when she started forming first romantic relationships in her adolescence and when her stepfather, who had been convicted, was released from prison.

**Combined Parent Child Cognitive Behavioural Therapy, Barnahus Linköping**

Sometimes, in less serious cases, a child can remain in contact with an abusive parent/caregiver. If the social services conclude that it is safe and in the best interests of the child, they can refer the child and parents/caregivers, including the abusive parent, to a joint treatment. Such treatment can only happen in less serious cases of abuse and if the abusive parent/caregiver has admitted the abuse.

In these cases, the Barnahus in Linköping offers an evidence-based treatment programme called Combined Parent Child Cognitive Behavioural Therapy (CPC- CBT). The objectives of the treatment are to decrease the risk of recurrent physical abuse and to assist parents in correcting unrealistic expectations and misinterpretations of the child’s behaviour. The treatment also aims to improve anger management and use of non-violent child-rearing skills, to increase positive parent-child interactions and to improve the child’s overall emotional adjustment.145

The treatment programme is rolled out in approximately 16 sessions and requires two therapists. The parent(s)/caregiver(s) and the child see their respective therapists separately. At the end of each session, they all meet together. The therapists work with the parents/caregivers with a focus on psycho-education, commitment to no violence, cognitive and management skills, mindfulness and problem-solving skills. The parents/caregivers also have to write a letter to the child where they assume full responsibility for the violence. The therapy with the child addresses the effects of the violence on the child, coping skills, problem-solving skills and trauma narrative. In the joint family-session there is a focus on establishing a permission to talk about the violence, the parents’/caregivers’ use of acquired skills with the child, development of a family safety plan, sharing the trauma narrative and the letter in which the parent assume full responsibility for the violence.
The process of determining needs and formulating a treatment plan may vary depending on the specifics of the case at hand.

118 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf
122 http://ec.europa.eu/justice/fundamental-rights/files/2015_forum_roc_back-

123 This may for example occur when court proceedings are still ongoing and the child may have been summoned as a witness, which is required in some European countries.


131 See http://www.johnbriere.com/tscc.htm
132 See http://www.johnbriere.com/tsccy.htm
133 See http://www.johnbriere.com/tsi.htm
135 See e.g. https://tcgbt.musc.edu/
136 See e.g. https://cpt.musc.edu/
137 See e.g. http://www.nacbt.org/
138 See e.g. http://www.emdrc.org/
140 For more information about treatment options, see e.g. http://www.nctsn.org/nctsn_assets/pdfs/CCG_Book.pdf.
141 Depending on their therapeutic background, the Centre’s staff can also provide treatment based on the following approaches: play therapy, cognitive-behavioural therapy, gestalt therapy, psychoanalysis, transactional analysis, systemic therapy and integrative therapy.
144 The materials that are most often used are those aiming to support children who have been sexually abused (http://www.polklinika-djeca.hr/english/publications/its-happened-what-now%E2%80%8A/), witnessed domestic violence (http://www.polklinika-djeca.hr/english/publications/witnessing-family-violence/), or experienced any form of trauma (http://www.polklinika-djeca.hr/english/publications/the-child-and-trauma/).
Standard 9
## Standard 9. Capacity Building

### What is the standard?

<table>
<thead>
<tr>
<th>9.1 Training of professionals: The members of the Barnahus team and involved agencies are provided regular training in their specific areas of expertise and are offered joint training in cross-cutting issues.</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.2 Guidance, supervision, counselling: The members of the Barnahus team have access to regular guidance, supervision, counselling and peer review both in relation to individual cases and in addressing professional and personal emotional strain, challenges and ethical dilemmas in working with child victims and witnesses of violence.</td>
</tr>
</tbody>
</table>

### Why should this standard be met?

**Links to legal provisions:**
- Interviews are carried out by or through professionals trained for this purpose
- Provision of assistance and support
- Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations/Training & tools

**Guidance:** The UN Committee on the Rights of the Child (CRC) emphasises broad education measures, including on a child rights approach to UNCRC article 19. Professionals should be provided “initial and in-service general and role-specific training (including inter-sectoral where necessary)”. The CRC also states that “Professionals working within the child protection system need to be trained in interagency cooperation and protocols for collaboration” (CRC General Comment no 13).

Also see CoE Guideline of Child-friendly justice (2011); CoE Rec on Child-friendly social services; Child-friendly social services; and; EC Reflection paper proposing 10 principles for integrated child protection systems.

**Research and Experience:** Specialised and trained staff is emphasised as a key indicator under various standards in this document. Continuous in-service training and education for professionals associated with the Barnahus is essential to ensure qualified staff and a high standard of the services provided. Joint training can help enhance multidisciplinary and interagency collaborative team work for example by building a common understanding and consensus as well as better understanding of the respective agencies’ roles and responsibilities.

In order to ensure professional conduct, high quality interventions and to protect staff from burn-out, it is imperative that staff have access to both individual and group guidance, supervision, counselling and peer review on a regular basis.

### Examples of indicators and/or evidence that the standard is being met

**Training of professionals**
- There is clear plan for developing the competence and continued education of staff working with children in the Barnahus;
- The Barnahus staff have individual training plans which are fully implemented and reviewed regularly;
- The members of the interagency team are offered regular joint training and capacity building activities, e.g. in cross-cutting and multidisciplinary issues, according to the specific needs of the staff.

**Guidance, supervision, counselling**
- The members of the Barnahus team have access to both individual and group guidance, supervision and professional support;
- The members of the Barnahus team have access to individual and group counselling related to individual cases and to address professional and personal emotional strain, challenges and ethical dilemmas in working with child victims and witnesses of violence.

### Resources

See for example www.nationalcac.org for training opportunities, webinars and other online resources
Building capacity - Barnahus Linköping

Education for social workers in interviewing children
Social workers play a central role in soliciting information about the child’s situation. The Barnahus in Linköping offers education for social workers to make them more confident in talking to children about difficult issues, such as abuse. Twice a year, the social workers who work with child protection assessments are offered a special training in interviewing children. The training includes general information about child victims of violence and trauma and practical training in different interview methodologies.

The participants are asked to video-record three interviews with children, which are analysed in the training. The participants receive feedback and guidance on their performance. The video recording is a challenging element of the training as it is sometimes difficult to obtain the consent from children and parents to record the interview. However, it is worthwhile, since the impact on the performance of the social workers is excellent. The training is popular among social workers and there is always a waiting list to participate in the courses.

Needs-based training
The Barnahus in Linköping also regularly organises workshops on issues that are of relevance for the collaborating agencies, such as new national guidelines and/or new research. The topics covered can for instance include deadly violence against children, online sexual behaviour and children’s sexuality. The trainings are mostly free of charge.

Training is a very important aspect of the Barnahus, but it is sometimes a challenge to keep up with new developments and continuously assess training needs. Training has therefore been included as a central element in the formal cooperation agreements and an annual budget has been allocated to ensure that it is prioritised, planned and financed.

The Barnahus also organises a “Barnahus Day” for the collaborating agencies, the other Barnahus in Sweden and other relevant actors. This event aims to stimulate exchange of knowledge and experience on issues of common interest that are central to multidisciplinary and interagency responses to violence against children.

Capacity and professional competence building: Education and supervision - Child and Youth Protection Centre, Zagreb

The Child and Youth Protection Centre in Zagreb encourages staff to participate in training courses, conferences as well as postgraduate studies and provides financial and organisational support to the staff for continued education. Every year, the Centre prepares an annual plan for continuous training and education. Every staff member is asked to state their preferences and needs which feeds into the development of the plan.

The Centre continuously organises in-house training by professionals from within Croatia and from abroad. Training has been provided, for instance, on trauma and empathy, attachment and trauma, trauma-focused cognitive behavioural therapy and work with non-offending parents. In addition, the staff members receive periodic and updated training on evidenced-based methods for conducting forensic interviews with children, including extended forensic interviews.

Supervision
There are two types of supervision in the Centre: supervision that is related to casework, in particular complicated cases;
and supervision addressing the professionals' well-being, coping strategies, attitudes and ethical dilemmas. The overall purpose of the supervision in the Centre is to ensure that the services provided are of high quality and in the best interests of children and to reduce risks of staff burn-out.

The participation in supervision is mandatory for all professionals working with children. Supervision takes place twice a month during the staff members' working hours. During the supervision, which is guided by an external supervisor, the staff members discuss specific cases, as well as professional and personal challenges and ethical dilemmas in working with children who are victims and witnesses of violence.

The investment in education, training and supervision has had a significant impact on the interagency collaboration at the Child and Youth Protection Centre. It has helped strengthening the professional network and created a strong sense of working towards a shared objective. The ongoing training of professionals has also helped enhancing the quality and efficiency of Centre's overall work.

146 http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.33_en.pdf
150 Training may include, but is not limited to: child development; understanding the phenomenon of child abuse and neglect; conducting forensic interviews; child-friendly, trauma sensitive approach in conducting clinical and forensic assessments; providing different forms of evidence based trauma focused treatment; understanding of the legal context and requirements; identifying risk factors and supporting families at risk with the aim of preventing retraumatization; supporting non-offending parents.
151 The latest trainings were held by Barbara Bonner (National Center on the Sexual Behavior of Youth, Oklahoma) on TF-CBT, and Linda C. Steel (National Children’s Advocacy Center, Alabama) on forensic interviewing.
152 Some of the educational topics include: causes and consequences of child abuse and neglect; rapport building and talking with a sexually abused child; child development and developmental psychopathology; child protection in criminal matters; gathering evidence and forensic interviewing of children; crisis support interventions; different forms of psychotherapeutic interventions; supporting non-abusive parents and family; legal context; and prevention of child abuse and neglect.
Standard 10
Standard 10. Prevention: Information sharing, awareness raising and external competence building

## What is the standard?

### 10.1 Data Collection, information sharing and awareness raising:

Aggregated and disaggregated data/statistics is collected and shared with relevant stakeholders, including decision-makers, academia, child protection professionals, and the broader public, to create awareness about violence against children and the role of MD/IA responses, to facilitate research and to support evidence-based legislation, policy and procedures.

### 10.2 External competence building:

The Barnahus offers targeted action to increase competence and knowledge among professionals working for and with children, by for example organising study visits, information meetings, lectures and producing written material.

## Why should services meet this standard?

### International and European legal obligations:

- Necessary measures to protect the privacy, identity and image of child victims and to prevent the public dissemination of any information that could lead to their identification
- Training and Tools Data and Monitoring
- Awareness Raising
- Prevention

Guidance: The UN Committee on the Rights of the Child State encourage open discussion about violence, including the engagement of media and civil society. State parties to the UNCRC should furthermore establish "comprehensive and reliable national data collection system in order to ensure systematic monitoring and evaluation of systems (impact analyses), services, programmes and outcomes". Services for child victims and witnesses of violence can contribute with important input to the collection of data. (UNCRC General Comment no 13)

Also see EC Reflection paper proposing 10 principles for integrated child protection systems, including principles 3, 5, 6, 9

### Research and Experience:

Outreach work, which can involve sharing general and specific data, statistics and information about violence against children and provide information about adequate prevention and response, can serve as an important prevention measure. External awareness-raising and competence building can help build public awareness and support, enhance competence of professionals and increase support for multidisciplinary and interagency responses among decision-makers and legislators. Working with the media can be an important tool to reach out and inform a broader audience. In all work with the media, there must be adequate safeguards to protect the child’s identity and interests.

## Examples of evidence that the standard is being met

### Child Safeguarding

- Measures to safeguard children and to protect their privacy and data in the context of all outreach work are taken, including safe storage and restricted access to data;
- Ethical guidelines for media involvement are in place and are implemented;
- Guidelines for appropriate, relevant and ethical Barnahus involvement in awareness raising, competence building and contributions to campaigns, studies, research, consultations are in place and are consistently implemented;
- The Barnahus staff are aware of, and have received training in relevant ethical guidelines.

### Awareness raising and Competence Building

- Study visits for professionals, decision-makers, academia, media and other relevant stakeholders are organised by the Barnahus;
- The Barnahus offers lectures, training, workshops for professionals and students;
- The Barnahus contributes to public campaigns as appropriate.

### Data Collection and Research

- A system to collect disaggregated data is in place and systematically used to collect relevant disaggregated data;
- The Barnahus contributes to research, studies, surveys and consultations, taking into account ethical considerations.
Why does the Centre collaborate with the media?

Working with child victims of violence has given the staff at the Centre a unique experience and understanding of the feelings, thoughts and needs of these children. This knowledge and experience is critical in supporting caregivers, decision-makers and other professionals in contact with children and to encourage them to take action to prevent and respond to violence against children.

Collaboration with the media

The Child and Youth Protection Centre often works with the media. Media has the reach and the power to raise awareness and to educate, to activate the critical masses needed to motivate decision makers and to challenge systemic, cultural and socio-economic shortcomings.

It can also help children who open up and speak about abuse and violence that they have been exposed to and raise awareness with persons who the child discloses to.

The partnership with the media also helped setting up the Child and Youth Protection Centre. The media reporting generated political support and the willingness of professionals to start developing a child-friendly organization specialized in supporting traumatised children through a multidisciplinary and interagency approach.

Media as a partner to prevent and respond to violence against children - Child and Youth Protection Centre, Zagreb

The Child and Youth Protection Centre provides media with general information, including scientific data and research, about the prevalence and consequences of abuse, the needs of abused children and how to support them. The Centre also provides specific information about topics related to child abuse and neglect when individual cases are brought to the attention of the media. The Centre sometimes shares drawings and letters of children who have been abused to create an empathic understanding of the abused child. The drawings and letters are always shared with the consent of the child and caregivers. Personal information is protected and never disclosed. The Centre also regularly appear in TV and radio and contribute to news articles in papers.

Facing challenges

The first steps to talk openly about child abuse and neglect in public is often a great challenge. When the Centre started doing this 20 years ago, many were unaware of, or denied, that child abuse and neglect actually happened in Croatia. It has taken many years and a lot of effort by the professional community to reach the point where the topic is discussed openly in the media.

Resources

Safeguarding Children: Keeping Children Safe
Media Guidelines: APA Media Guidelines, EFPA Board of Ethics Media Guidelines, BASPCAN Media Guidelines

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Media

- Media work, with the purpose of supporting prevention and awareness-raising with the public, is a formal aspect of the service's function and features in relevant staff members' job descriptions;
- Relevant Barnahus staff members are provided with opportunities for media training.

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Standard 10

Safeguarding Children: Keeping Children Safe
Media Guidelines: APA Media Guidelines, EFPA Board of Ethics Media Guidelines, BASPCAN Media Guidelines

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Media — Media work, with the purpose of supporting prevention and awareness-raising with the public, is a formal aspect of the service’s function and features in relevant staff members’ job descriptions; — Relevant Barnahus staff members are provided with opportunities for media training.
The Centre benefits from cooperating with several extremely professional reporters on a regular basis. However, the Centre has made the experience that media professionals who have not yet developed an adequate understanding and sensitivity to child abuse or who lack knowledge of ethical standards often are susceptible to unprofessional and unethical reporting. They tend to focus solely on the sensational aspects of the case. Sensationalist reporting dismisses the opportunities to promote positive practices or to educate the public on prevention and adequate responses. Journalists who are unaware of ethical standards are also less likely to report about topics related to child abuse and neglect when there are no high profile cases in the public attention.

The Child and Youth Protection Centre has encountered reporters who have disrespected the right to privacy of the child, sometimes even endangering the child. Others have contributed to the retraumatisation of the child by interviewing the child in an inappropriate manner in order to gain higher viewing ratings.

The Centre therefore demands that the media professionals they work are well informed and committed to ethical considerations and guidelines. The Centre contributes by raising awareness and sensitising media professionals to ethical issues and encourages ethical reporting. The Centre reserves the right to refuse to collaborate with journalists if ethical standards are not respected.

Identification and adequate attention to child victims and witnesses of violence is an important aspect of preventing and addressing violence against children. Therefore, the Barnahus in Linköping invites staff from all pre-schools and schools to information evenings once a year. The invitation is extended to all the nine municipalities that belong to the Barnahus catchment area.

The preschool and school staff make a study visit in the Barnahus and receive a briefing about the “Barnahus-process”. They are informed about key issues that are important to think about if a child spontaneously discloses information about abuse to them and what to expect if they have to accompany a child to the Barnahus. They are also encouraged to be attentive to potential abuse and to have the courage to see and listen to children who disclose.

It is a challenge to reach such a large target group of professionals. Meetings are held on several evenings and members of the Barnahus team take turns to organise and host meetings. The meetings have become very popular and participants generally feel that they become better equipped to handle their own unease in dealing with situations of violence against children.

The Barnahus also responds to specific requests and often meets with different groups of professionals to provide information and discuss concerns. It is also possible to receive counselling over the phone.
The Child and Youth Protection Centre provides training for relevant groups of officials and professionals at the local, national and international level. The aim is to train relevant officials and professionals working with children throughout Croatia and to ensure that child protection services are available to each child in the country. The training and educational activities are based on relevant international legal frameworks, guidelines and recommendations as well as research findings. The main aim is to integrate existing and up-to-date knowledge into a comprehensive, child-centred and evidence-based approach.

Local educational programmes and activities are financed by the City of Zagreb, while national educational programs and activities are financed through different Croatian ministries.

The training initiatives are delivered in cooperation with the national Government, Ministries and authorities. They target social services, the health care system, the educational system, law enforcement, the judiciary and NGOs. The training of social workers, for instance, was delivered in cooperation with the Ministry of Social Policy and Youth. In two series of training courses, professionals from all social services in Croatia were included. A training programme conducted in cooperation with the Ministry of Science, Education and Sports reached all elementary schools and high schools. Paediatricians were trained in cooperation with the Ministry of Health. The training had been prepared on the basis of a study, which assessed the knowledge and attitudes of paediatricians with regard to child abuse and neglect. The study revealed a limited knowledge among paediatricians and the need for specific education. Judges were educated in cooperation with the Judicial Academy.

The Centre also cooperates with the Association of Youth and Family Judges and Specialists. The two institutions offer joint training programmes and events to facilitate exchange of experience primarily in the field of child-friendly justice.

The Child and Youth Protection Centre serves as an academic educational centre for students of psychology, social work, education and rehabilitation sciences, teacher education, the law department and the police academy. By training the students from these faculties and institutions, the Centre promotes the early identification of child abuse and neglect, adequate responses to disclosure, support after disclosure and the implementation of child-friendly practices.

The Centre’s Director introduced new academic courses with a focus on child abuse and neglect, forensic interviewing of child victims, and parenting skills at the Department of Psychology, University of Zagreb. Students from these faculties can gain practical experience at the Centre. The Centre’s staff members act as mentors for practitioners and interns from different faculties, including social work, education and rehabilitation sciences, social pedagogy and psychology.

The Centre cooperates also with the School of Dental Medicine at the University of Zagreb. They conduct joint research on dental anxiety of sexually abused children. In addition, the Centre’s staff members teach courses on child abuse and neglect, child-friendly justice, child rights and other themes in different faculties and postgraduate studies and publish academic articles and books.

The NGO Brave Phone is based on the premises of the Child and Youth Protection Centre. It aims to help and protect abused and neglected children. It provides social services for children, parents and professionals, with a strong focus on protection, support and prevention. The staff members of the Centre provide continuous training and supervision to the 180 volunteers of Brave Phone.
The main challenges in ensuring continuous training and education relates to the limited budget available for this purpose. Policy makers are often not aware of the importance of investing resources in education and providing political and organisational support to training programmes. The Child and Youth Protection Centre succeeded to overcome the organisational challenges by finding a large lecture hall for training and academic courses.

As part of the Centre’s educational and training activities, it supports children, families and professionals through brochures, leaflets, guidelines and other printed material. This material aims to prevent abusive/neglectful behaviour and inappropriate reactions to disclosure. Children often disclose to trusted adults such as parents, grandparents, aunts and uncles, neighbours or teachers. These persons have the power to stop the abuse or, on the other side, they might disregard the child’s disclosure or re-traumatise the child by inappropriate reactions. A large body of research has evidenced that the support and understanding from these persons is decisive for children who disclose. Children who have been abused confirm this. The level of awareness of the person to whom a child discloses abuse is therefore of paramount importance. It supports the course of the treatment and can be used for psycho-education.

Thus far, the Centre has developed and shared 350,000 brochures and leaflets with children, parents and professionals free of charge, in cooperation with the City of Zagreb.

“I want to withdraw my statement because of my mom. They love each other, and I don’t want him to go to jail. She called me a hundred times, asking me not to take her husband away from her. Now, mom will be happy and I will be happier for her. It’s my fault that he behaves badly towards her.

All of it happened, but my mom never believed me, nor did my teacher, or anyone else I told. Often I can’t sleep at night because my mom doesn’t trust me. I feel like I don’t have anyone. I want my mom to be happy, then she will love me.”

Sexually abused girl, 11

The Centre also puts a lot of effort into continuous scientific activities. It conducts research, which informs the collaboration with the media and stakeholders in raising awareness. The Centre collaborates with governmental agencies and institutions and non-governmental organisations to develop prevention and response programmes to violence against children that are informed by research and evidence.

155 www.keepingchildresnsafe.org.uk
156 www.apa.org/pubs/authors/media/
IV. Linking provisions, legal obligations and the European Barnahus Standards - Overview

The first column in the table (Practice/Operational Standard) lists the European Barnahus Standards.

The second column indicates legal obligations that are most relevant to each standard. The legal obligations derive from the PROMISE framework of legal obligations. The framework was developed in the PROMISE Compendium of law and guidance to set out the key obligations towards victims of crime and their involvement in criminal proceedings. This framework was used to create profiles of each of the relevant laws in terms of these key obligations. The profiles of the three instruments covered in the table can be found below.

The third column in the table (Legal Instruments) indicates the specific articles in the three European legal instruments specified above which relate to the relevant obligations. This column also refers to recitals in these legal instruments which provide important interpretative guidance on the legal obligations.

To see the full text of the recitals and articles in the respective legal instruments, click on the hyperlink in the third column. To see the full mapping of the instruments according to the framework of legal obligations, go to Annex 1 (‘Victim Rights Directive’), Annex 2 (‘Child Sexual Abuse Directive’) and Annex 3 (‘Lanzarote Convention’).
<table>
<thead>
<tr>
<th><strong>BARNAHUS STANDARD</strong></th>
<th><strong>RELEVANT LEGAL OBLIGATION</strong></th>
<th><strong>LEGAL INSTRUMENT</strong></th>
<th><strong>EXPLANATORY COMMENT</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1. Best interest of the child</td>
<td>Ensuring the best interests is a primary consideration in the application of the obligations in the Directives</td>
<td>Victim Rights Directive: Recital 14, Article 1.2  Child Sexual Abuse Directive: Recital 2, 6, 30, Article 18.1  Lanzarote Convention: Article 30.1</td>
<td>References to recitals and articles refer to general obligations to ensure the best interest of the child. See standard 1.2, 1.3, 4-10 for specific legal obligations related to a certain practice.</td>
</tr>
<tr>
<td>1.2. Right to be heard and receive information</td>
<td>Taking due account of the views of the child</td>
<td>Victim Rights Directive: Recital 14, 42, Article 1.2; 10.1  Sexual Abuse Directive: 19.3  Lanzarote Convention: Article 1.1, 31.1</td>
<td>Also see standard 6, Forensic Interviews regarding the right to be heard in criminal investigations. Also see standard 7 and 8.</td>
</tr>
<tr>
<td>1.3. Possibility to order that the child victim be heard through the use of appropriate communication technologies</td>
<td>No unjustified delay between the reporting of the facts and interviews take place</td>
<td>Victim Rights Directive: Article 20. (a)  Child Sexual Abuse Directive: Article 20.3 (a)  Lanzarote Convention: Article 30.3, Art 35.1a.</td>
<td>Also see standard 6, 7 and 8.</td>
</tr>
<tr>
<td>1.5. Individual assessment of each child’s circumstances and non-offending family members’ needs</td>
<td>Individual assessment of each child’s circumstances and non-offending family members’ needs</td>
<td>Victim Rights Directive: Article 22.1</td>
<td>Also see standard 1.2</td>
</tr>
<tr>
<td>1.6. Provision of information</td>
<td>Provision of information</td>
<td>Victim Rights Directive: Recital 21, 26, 30, 31, Article 1.1; 3; 4; 6  Lanzarote Convention: Article 31.1 a, b, 31.2, 31.6</td>
<td>Also see standard 6 and 8. Article 31.6 of the Lanzarote Convention is included here due to its reference to information being provided in a language that the child can understand.</td>
</tr>
<tr>
<td>1.7. Right to interpretation &amp; translation</td>
<td>Right to interpretation &amp; translation</td>
<td>Victim Rights Directive: Recital 34, 36, Article 5.2-3; 7.1-7.8  Lanzarote Convention: Article 31.6</td>
<td>Also see standard 6 and 8.</td>
</tr>
<tr>
<td>1.8. Possibility to order that the child victim be heard through the use of appropriate communication technologies</td>
<td>Provision of information</td>
<td>Victim Rights Directive: Article 23.3 (a) (b)  Sexual Abuse Directive: Article 20.5 (b)  Lanzarote Convention: Article 36.2 b</td>
<td>Also see standard 6.</td>
</tr>
<tr>
<td>2. Multidisciplinary and interagency collaboration in Barnahus</td>
<td>Non-discrimination</td>
<td>Victim Rights Directive: Recital 9, 10, 15, 19, 66, Article 1; 22.3  Lanzarote Convention: Article 10.1, 10.3, 11.1</td>
<td>Also see Lanzarote Convention article 5.3 and 15 regarding preventative measures and article 38.1 a-c regarding international cooperation.</td>
</tr>
<tr>
<td>3. Target Group</td>
<td>Non-discrimination</td>
<td>Victim Rights Directive: Recital 9, 10, 15, 19, 66, Article 1; 22.3  Lanzarote Convention: Article 2</td>
<td>The recitals and articles stated here set out a broad obligation to ensure that all children have equal right and access to justice and assistance.</td>
</tr>
<tr>
<td></td>
<td>Provisions concerning identifying victims, including specific provisions identifying children as a victim of crime, such as age assessment provision, family members</td>
<td>Victim Rights Directive: Recital 19, Article 1; 21.1, 17, 24.2  Sexual Abuse Directive: Article 18.2, 18.3, 19.5  Lanzarote Convention: Article 3 a, 11.2, 14.4, 34.2, 35.3</td>
<td>These articles are directly relevant to forensic interviews, interagency planning and case management, medical examination and therapeutic services.</td>
</tr>
<tr>
<td>Section</td>
<td>Description</td>
<td>References</td>
<td>Additional Notes</td>
</tr>
<tr>
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<tr>
<td>4. Child Friendly Environment</td>
<td>Interviews take place in premises designed or adapted for this purpose</td>
<td>Victim Rights Directive: Article 9.1; 9.3; 12.1; 18; 22.1; 22.4; 26 Sexual Abuse Directive: Article 20.3 Lanzarote Convention: Art 35.1.b</td>
<td>Also see standard 6.</td>
</tr>
<tr>
<td></td>
<td>Right to avoid contact between victim and offender</td>
<td>Victim Rights Directive: Article 19 1-2</td>
<td>Also see Lanzarote Convention articles 31.1. Also see standard 6.</td>
</tr>
<tr>
<td>5. Interagency Case Management</td>
<td>Ensuring the best interests is a primary consideration in the application of the obligations in the Directives</td>
<td>Victim Rights Directive: Article 1 (c) 2 Sexual Abuse Directive: 18.1, 19.2 Lanzarote Convention: Article 30.1</td>
<td>The interagency team must take the best interest of the child as a core consideration in all planning and case management.</td>
</tr>
<tr>
<td></td>
<td>Individual assessment of each child's circumstances and non-offending family members' needs</td>
<td>Victim Rights Directive: Recital 9, 55, 56, 58, Article 22.1-7 Sexual Abuse Directive: 19.3</td>
<td>The recitals and articles here refer to the role of the interagency team to carry out individual assessments and develop plans.</td>
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<td>Multi-disciplinarity/ coordination/ cooperation</td>
<td>Victim Rights Directive: Recital 62, Article 26.1 Lanzarote Convention: Art 10.1</td>
<td>Also see Lanzarote Convention article 38.1 a-c regarding international cooperation.</td>
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<td>Circle of Trust provisions</td>
<td>Victim Rights Directive: Recital 18 Sexual Abuse Directive: Recital 30, Article 19.1 Lanzarote Convention: Article 14.1</td>
<td>The recitals and articles refer to the role of the interagency team role in ensuring that children are protected from further abuse.</td>
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| Provision of information | Victim Rights Directive: Recital 21; 26, 30, 31, Article 11; 31.1-3; 41-2; 6  
Lanzarote Convention: Article 31.1, 312 | Also see standard 1.2 |
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| | Right to interpretation & translation | Victim Rights Directive: Article 9.1; 9.3; 12.1; 18; 22.1; 22.4; 26  
Lanzarote Convention: Article 31.6 | Also see standard 1.2. Article 31.6 of the Lanzarote Convention is included here due to its reference to information being provided in a language that the child can understand. |
| Adapted procedures in investigations and judicial proceedings involving children | Victim Rights Directive: Recital 58, 59, 66, Article 11, 18, 23.1  
Lanzarote Convention: Article 30.1-4, 31.1 | Also see standard 1.1-1.3. Standard 1.3 includes a legal obligation to ensure that there is no unjustified delay between the reporting of the facts and interviews. |
| Interviews take place, where necessary in premises designed or adapted for this purpose | Victim Rights Directive: Article 23.2 (b)  
Sexual Abuse Directive: Article 20.3  
Lanzarote Convention: Article 35.1 (b) | Also see standard 4. |
| Interviews are carried out by or through professionals trained for this purpose | Victim Rights Directive: Article 23.2 (b)  
Sexual Abuse Directive: Article 20.3 (c)  
Lanzarote Convention: Article 35.1 (c) | Also see Training and tools below. |
| The same persons, if possible and were appropriate, conduct all interviews with children | Victim Rights Directive: Article 23.2 (c)  
Sexual Abuse Directive: Article 20.3 (d)  
Lanzarote Convention: Article 35.1 (d) | |
| Interviews of victims of sexual violence, gender-based violence or violence in close relationships being carried out by persons of the same sex | Victim Rights Directive: Article 23.2 (d) | |
| The number of interviews is as limited as possible and interviews are carried out only where strictly necessary and for the purpose of the investigations and proceedings | Victim Rights Directive: Article 20(b)  
Sexual Abuse Directive: Article 20.3 (e)  
Lanzarote Convention: Article 35.1 (e) | |
| All interviews with a child victim or where appropriate a child witness, may be audio-visually recorded and that such recordings may be used as evidence in criminal court proceedings | Victim Rights Directive: Article 24.1 (a)  
Sexual Abuse Directive: Article 20.4  
Lanzarote Convention: Article 35.2 | Also see standard 1.2. |
| Possibility to order that the child victim be heard through the use of appropriate communication technologies | Victim Rights Directive: Recital 58, Article 23.3 (a) (b)  
Sexual Abuse Directive: Article 20.5 (b)  
Lanzarote Convention: Article 36.2 b | Also see standard 1.2. |
| Right to avoid contact between victim and offender | Victim Rights Directive: Recital 58, Article 19 1-2  
Sexual Abuse Directive: Recital 30  
Lanzarote Convention: Article 31.1 | Also see standard 4. |
| Training & tools | Victim Rights Directive: Recital 61, 63, Article 25  
Sexual Abuse Directive: Recital 30 A  
Lanzarote Convention: Article 5.1, 5.2, 35.1 (c), 36.1 | Also see standard 9. |
| Multi-disciplinarity/coordination/cooperation | Victim Rights Directive: Recital 38, 62, Article 26.1  
Lanzarote Convention: Article 10.1. | Also see standard 5. |
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<td>Victim Rights Directive: Article 1.1; 3; 4; 6 Lanzarote Convention: Article 31.1, 31.6</td>
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<td>Also see standard 9.</td>
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<td>CRIMINAL INVESTIGATION: (Forensic) Medical examinations are kept to a minimum.</td>
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<td>9. Capacity-building</td>
<td>Interviews are carried out by or through professionals trained for this purpose.</td>
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<td>Victim Rights Directive: Article 23.2 (b) Sexual Abuse Directive: Article 20.3 (c) Lanzarote Convention: Article 35.1 (c)</td>
<td>Also see standard 6.</td>
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<td>Provision of assistance and support</td>
<td>Victim Rights Directive: Recital 66, Article 8. 1-5, 9. 1.-3, 25. 4 Lanzarote Convention: Article 5.1, 5.2</td>
<td>Also see standard 7 and 8.</td>
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<td>Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations/ Training &amp; tools</td>
<td>Victim Rights Directive: Recital 61, 62, 66, Article 25 Sexual Abuse Directive: Recital 30, 36, Article 20.3 (c) Lanzarote Convention: Article 5.1, 5.2, 35.1 (c ) , 36.1</td>
<td>Also see standard 6, 7 and 8.</td>
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<td>10. Prevention: Information sharing and external competence building</td>
<td>Necessary measures to protect the privacy, identity and image of child victims and to prevent the public dissemination of any information that could lead to their identification.</td>
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<td>Victim Rights Directive: Article 21. 1-2 Sexual Abuse Directive: Article 20.6 Lanzarote Convention: Article 31.1 (e)</td>
<td>This legal obligation is fundamental to all of the work of the service; however, the legal instruments mainly focus on this in the context of judicial proceedings.</td>
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<td>Data and Monitoring</td>
<td>Victim Rights Directive: Recital 62, 64 Sexual Abuse Directive: Recital 44 Lanzarote Convention: Art 10.2 (b)</td>
<td>It may also be of interest to see the Lanzarote Convention chapter X which focusses on monitoring mechanisms at CoE level.</td>
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<td>Awareness Raising</td>
<td>Victim Rights Directive: Recital 62, Article 26.2 Sexual Abuse Directive: Recital 34, 45, Article 23.1- 23.3 Lanzarote Convention: Article 5, 6 and 8</td>
<td>Also see Lanzarote Convention articles 10.1, 10.3, which focus on collaboration to prevent sexual abuse and exploitation. Article 26.1 of the Victim Rights Directive and article 38 of the Lanzarote Convention are included here due to their reference to exchange of best practices in the context of international cooperation.</td>
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Annex 1

(9) Victims of crime should be protected from secondary and repeat victimisation, from intimidation and from retaliation, should receive appropriate support to facilitate their recovery and should be provided with sufficient access to justice...

(17) Women victims of gender-based violence and their children often require special support and protection because of the high risk of secondary and repeat victimisation, of intimidation and of retaliation connected with such violence.

(46) Restorative justice services, including for example victim-offender mediation, family group conferencing and sentencing circles, can be of great benefit to the victim, but require safeguards to prevent secondary and repeat victimisation, intimidation and retaliation...

(52) Measures should be available to protect the safety and dignity of victims and their family members from secondary and repeat victimisation, from intimidation and from retaliation, such as interim injunctions or protection or restraining orders.

(53) The risk of secondary and repeat victimisation, of intimidation and of retaliation by the offender or as a result of participation in criminal proceedings should be limited by carrying out proceedings in a coordinated and respectful manner, enabling victims to establish trust in authorities. Interaction with competent authorities should be as easy as possible whilst limiting the number of unnecessary interactions the victim has with them through, for example, video recording of interviews and allowing its use in court proceedings. As wide a range of measures as possible should be made available to practitioners to prevent distress to the victim during court proceedings in particular as a result of visual contact with the offender, his or her family, associates or members of the public. To that end, Member States should be encouraged to introduce, especially in relation to court buildings and police stations, feasible and practical measures enabling the facilities to include amenities such as separate entrances and waiting areas for victims. In addition, Member States should, to the extent possible, plan the criminal proceedings so that contacts between victims and their family members and offenders are avoided, such as by summoning victims and offenders to hearings at different times.

(54) Protecting the privacy of the victim can be an important means of preventing secondary and repeat victimisation, intimidation and retaliation and can be achieved through a range of measures including non-disclosure or limitations on the disclosure of information concerning the identity and whereabouts of the victim. Such protection is particularly important for child victims, and includes non-disclosure of the name of the child...

(55) Some victims are particularly at risk of secondary and repeat victimisation, of intimidation and of retaliation by the offender during criminal proceedings. It is possible that such a risk derives from the personal characteristics of the
victim or the type, nature or circumstances of the crime. Only through individual assessments, carried out at the earliest opportunity, can such a risk be effectively identified. Such assessments should be carried out for all victims to determine whether they are at risk of secondary and repeat victimisation, of intimidation and of retaliation and what special protection measures they require.

(57) Victims of human trafficking, terrorism, organised crime, violence in close relationships, sexual violence or exploitation, gender-based violence, hate crime, and victims with disabilities and child victims tend to experience a high rate of secondary and repeat victimisation, of intimidation and of retaliation. Particular care should be taken when assessing whether such victims are at risk of such victimisation, intimidation and of retaliation and there should be a strong presumption that those victims will benefit from special protection measures.

(58) Victims who have been identified as vulnerable to secondary and repeat victimisation, to intimidation and to retaliation should be offered appropriate measures to protect them during criminal proceedings.

(63) In order to encourage and facilitate reporting of crimes and to allow victims to break the cycle of repeat victimisation, it is essential that reliable support services are available to victims and that competent authorities are prepared to respond to victims’ reports in a respectful, sensitive, professional and non-discriminatory manner.

**Article 9.1.** Victim support services, as referred to in Article 8(1), shall, as a minimum, provide: ...(e) unless otherwise provided by other public or private services, advice relating to the risk and prevention of secondary and repeat victimisation, of intimidation and of retaliation...

**Article 9.3.** Unless otherwise provided by other public or private services, specialist support services referred to in Article 8(3), shall, as a minimum, develop and provide:
(a) shelters or any other appropriate interim accommodation for victims in need of a safe place due to an imminent risk of secondary and repeat victimisation, of intimidation and of retaliation;

**Article 12.** 1. Member States shall take measures to safeguard the victim from secondary and repeat victimisation, from intimidation and from retaliation, to be applied when providing any restorative justice services.

**Article 18.** Without prejudice to the rights of the defence, Member States shall ensure that measures are available to protect victims and their family members from secondary and repeat victimisation, from intimidation and from retaliation, including against the risk of emotional or psychological harm, and to protect the dignity of victims during questioning and when testifying. When necessary, such measures shall also include procedures established under national law for the physical protection of victims and their family members...

**Article 22.** 1. Member States shall ensure that victims receive a timely and individual assessment, in accordance with national procedures, to identify specific protection needs and to determine whether and to what extent they would ben-
enefit from special measures in the course of criminal proceedings, as provided for under Articles 23 and 24, due to their particular vulnerability to secondary and repeat victimisation, to intimidation and to retaliation.

**Article 22. 4.** For the purposes of this Directive, child victims shall be presumed to have specific protection needs due to their vulnerability to secondary and repeat victimisation, to intimidation and to retaliation. To determine whether and to what extent they would benefit from special measures as provided for under Articles 23 and 24, child victims shall be subject to an individual assessment as provided for in paragraph 1 of this Article.

**Article 26** Member States shall take appropriate action, including through the internet, aimed at raising awareness of the rights set out in this Directive, reducing the risk of victimisation, and minimising the negative impact of crime and the risks of secondary and repeat victimisation, of intimidation and of retaliation, in particular by targeting groups at risk such as children, victims of gender-based violence and violence in close relationships. Such action may include information and awareness raising campaigns and research and education programmes, where appropriate in cooperation with relevant civil society organisations and other stakeholders.

(14) In applying this Directive, children’s best interests must be a primary consideration, in accordance with the Charter of Fundamental Rights of the European Union and the United Nations Convention on the Rights of the Child adopted on 20 November 1989. Child victims should be considered and treated as the full bearers of rights set out in this Directive and should be entitled to exercise those rights in a manner that takes into account their capacity to form their own views.

(19) A person should be considered to be a victim regardless of whether an offender is identified, apprehended, prosecuted or convicted and regardless of the familial relationship between them. It is possible that family members of victims are also harmed as a result of the crime. In particular, family members of a person whose death has been directly caused by a criminal offence could be harmed as a result of the crime. Such family members, who are indirect victims of the crime, should therefore also benefit from protection under this Directive. However, Member States should be able to establish procedures to limit the number of family members who can benefit from the rights set out in this Directive. In the case of a child, the child or, unless this is not in the best interests of the child, the holder of parental responsibility on behalf of the child, should be entitled to exercise the rights set out in this Directive.

**Article 1. 2** Member States shall ensure that in the application of this Directive, where the victim is a child, the child’s best interests shall be a primary consideration and shall be assessed on an individual basis. A child-sensitive approach, taking due account of the child’s age, maturity, views, needs and concerns, shall prevail. The child and the holder of parental responsibility or other legal representative, if any, shall be informed of any measures or rights specifically focused on the child.
(9) Crime is a wrong against society as well as a violation of the individual rights of victims. As such, victims of crime should be recognised and treated in a respectful, sensitive and professional manner without discrimination of any kind based on any ground such as race, colour, ethnic or social origin, genetic features, language, religion or belief, political or any other opinion, membership of a national minority, property, birth, disability, age, gender, gender expression, gender identity, sexual orientation, residence status or health.

(10) This Directive does not address the conditions of the residence of victims of crime in the territory of the Member States. Member States should take the necessary measures to ensure that the rights set out in this Directive are not made conditional on the victim's residence status in their territory or on the victim's citizenship or nationality. Reporting a crime and participating in criminal proceedings do not create any rights regarding the residence status of the victim.

(15) In applying this Directive, Member States should ensure that victims with disabilities are able to benefit fully from the rights set out in this Directive, on an equal basis with others, including by facilitating the accessibility to premises where criminal proceedings are conducted and access to information.

(17) Violence that is directed against a person because of that person's gender, gender identity or gender expression or that affects persons of a particular gender disproportionately, is understood as gender-based violence. It may result in physical, sexual, emotional or psychological harm, or economic loss, to the victim. Gender-based violence is understood to be a form of discrimination and a violation of the fundamental freedoms of the victim and includes violence in close relationships, sexual violence (including rape, sexual assault and harassment), trafficking in human beings, slavery, and different forms of harmful practices, such as forced marriages, female genital mutilation and so-called 'honour crimes'. Women victims of gender-based violence and their children often require special support and protection because of the high risk of secondary and repeat victimisation, of intimidation and of retaliation connected with such violence.

(25) Without prejudice to rules relating to limitation periods, the delayed reporting of a criminal offence due to fear of retaliation, humiliation or stigmatisation should not result in refusing acknowledgement of the victim's complaint.

(56) Individual assessments should take into account the personal characteristics of the victim such as his or her age, gender and gender identity or expression, ethnicity, race, religion, sexual orientation, health, disability, residence status, communication difficulties, relationship to or dependence on the offender and previous experience of crime. They should also take into account the type or nature and the circumstances of the crime such as whether it is a hate crime, a bias crime or a crime committed with a discriminatory motive, sexual violence, violence in a close relationship, whether the offender was in a position of control, whether the victim's residence is in a high crime or gang dominated area, or whether the victim's country of origin is not the Member State where the crime was committed.

(66) This Directive respects fundamental rights and observes the principles recognised by the Charter of Fundamental Rights of the European Union. In particular, it seeks to promote the right to dignity, life, physical and mental integrity, liberty and security, respect for private and family life, the right to property, the principle of non-discrimination, the
principle of equality between women and men, the rights of the child, the elderly and persons with disabilities, and the right to a fair trial.

**Article 1.** Member States shall ensure that victims are recognised and treated in a respectful, sensitive, tailored, professional and non-discriminatory manner, in all contacts with victim support or restorative justice services or a competent authority, operating within the context of criminal proceedings. The rights set out in this Directive shall apply to victims in a non-discriminatory manner, including with respect to their residence status...

**Article 22 3.** In the context of the individual assessment, particular attention shall be paid to victims who have suffered considerable harm due to the severity of the crime; victims who have suffered a crime committed with a bias or discriminatory motive which could, in particular, be related to their personal characteristics; victims whose relationship to and dependence on the offender make them particularly vulnerable. In this regard, victims of terrorism, organised crime, human trafficking, gender-based violence, violence in a close relationship, sexual violence, exploitation or hate crime, and victims with disabilities shall be duly considered.

**Article 25.5** In accordance with the duties involved, and the nature and level of contact the practitioner has with victims, training shall aim to enable the practitioner to recognise victims and to treat them in a respectful, professional and non-discriminatory manner.

**Taking due account of the views of the child**

(14) In applying this Directive, children’s best interests must be a primary consideration, in accordance with the Charter of Fundamental Rights of the European Union and the United Nations Convention on the Rights of the Child adopted on 20 November 1989. Child victims should be considered and treated as the full bearers of rights set out in this Directive and should be entitled to exercise those rights in a manner that takes into account their capacity to form their own views.

(41) The right of victims to be heard should be considered to have been fulfilled where victims are permitted to make statements or explanations in writing.

(42) The right of child victims to be heard in criminal proceedings should not be precluded solely on the basis that the victim is a child or on the basis of that victim’s age.

(58) Victims who have been identified as vulnerable to secondary and repeat victimisation, to intimidation and to retaliation should be offered appropriate measures to protect them during criminal proceedings. The exact nature of such measures should be determined through the individual assessment, taking into account the wishes of the victim. The extent of any such measure should be determined without prejudice to the rights of the defence and in accordance with rules of judicial discretion. The victims' concerns and fears in relation to proceedings should be a key factor in determining whether they need any particular measure.
Article 1.2. Member States shall ensure that in the application of this Directive, where the victim is a child, the child’s best interests shall be a primary consideration and shall be assessed on an individual basis. A child-sensitive approach, taking due account of the child’s age, maturity, views, needs and concerns, shall prevail. The child and the holder of parental responsibility or other legal representative, if any, shall be informed of any measures or rights specifically focused on the child.

Article 10.1. Member States shall ensure that victims may be heard during criminal proceedings and may provide evidence. Where a child victim is to be heard, due account shall be taken of the child’s age and maturity. 2. The procedural rules under which victims may be heard during criminal proceedings and may provide evidence shall be determined by national law.

(19) A person should be considered to be a victim regardless of whether an offender is identified, apprehended, prosecuted or convicted and regardless of the familial relationship between them. It is possible that family members of victims are also harmed as a result of the crime. In particular, family members of a person whose death has been directly caused by a criminal offence could be harmed as a result of the crime. Such family members, who are indirect victims of the crime, should therefore also benefit from protection under this Directive. However, Member States should be able to establish procedures to limit the number of family members who can benefit from the rights set out in this Directive. In the case of a child, the child or, unless this is not in the best interests of the child, the holder of parental responsibility on behalf of the child, should be entitled to exercise the rights set out in this Directive. This Directive is without prejudice to any national administrative procedures required to establish that a person is a victim.

Article 1.1. Member States shall ensure that victims are recognised and treated in a respectful, sensitive, tailored, professional and non-discriminatory manner, in all contacts with victim support or restorative justice services or a competent authority, operating within the context of criminal proceedings. The rights set out in this Directive shall apply to victims in a non-discriminatory manner, including with respect to their residence status.

Article 2.1 (a) ‘victim’ means:

(i) a natural person who has suffered harm, including physical, mental or emotional harm or economic loss which was directly caused by a criminal offence;

(ii) family members of a person whose death was directly caused by a criminal offence and who have suffered harm as a result of that person’s death;

(b) ‘family members’ means the spouse, the person who is living with the victim in a committed intimate relationship, in a joint household and on a stable and continuous basis, the relatives in direct line, the siblings and the dependants of the victim;
Article 2 (c) ‘child’ means any person below 18 years of age;

Article 2.2. Member States may establish procedures:

(a) to limit the number of family members who may benefit from the rights set out in this Directive taking into account the individual circumstances of each case; and

(b) in relation to paragraph (1)(a)(ii), to determine which family members have priority in relation to the exercise of the rights set out in this Directive.

Article 17 Rights of victims resident in another Member State
1. Member States shall ensure that their competent authorities can take appropriate measures to minimise the difficulties faced where the victim is a resident of a Member State other than that where the criminal offence was committed, particularly with regard to the organisation of the proceedings. For this purpose, the authorities of the Member State where the criminal offence was committed shall, in particular, be in a position:

(a) to take a statement from the victim immediately after the complaint with regard to the criminal offence is made to the competent authority;

(b) to have recourse to the extent possible to the provisions on video conferencing and telephone conference calls laid down in the Convention on Mutual Assistance in Criminal Matters between the Member States of the European Union of 29 May 2000 (1) for the purpose of hearing victims who are resident abroad.

2. Member States shall ensure that victims of a criminal offence committed in Member States other than that where they reside may make a complaint to the competent authorities of the Member State of residence, if they are unable to do so in the Member State where the criminal offence was committed or, in the event of a serious offence, as determined by national law of that Member State, if they do not wish to do so.

3. Member States shall ensure that the competent authority to which the victim makes a complaint transmits it without delay to the competent authority of the Member State in which the criminal offence was committed, if the competence to institute the proceedings has not been exercised by the Member State in which the complaint was made.

Article 24. 2. Where the age of a victim is uncertain and there are reasons to believe that the victim is a child, the victim shall, for the purposes of this Directive, be presumed to be a child.
ASSISTANCE & SUPPORT

Provision of information

(15) In applying this Directive, Member States should ensure that victims with disabilities are able to benefit fully from the rights set out in this Directive, on an equal basis with others, including by facilitating the accessibility to premises where criminal proceedings are conducted and access to information.

(21) Information and advice provided by competent authorities, victim support services and restorative justice services should, as far as possible, be given by means of a range of media and in a manner which can be understood by the victim. Such information and advice should be provided in simple and accessible language. It should also be ensured that the victim can be understood during proceedings. In this respect, the victim’s knowledge of the language used to provide information, age, maturity, intellectual and emotional capacity, literacy and any mental or physical impairment should be taken into account. Particular account should be taken of difficulties in understanding or communicating which may be due to a disability of some kind, such as hearing or speech impediments. Equally, limitations on a victim’s ability to communicate information should be taken into account during criminal proceedings.

(23) Information about reimbursement of expenses should be provided, from the time of the first contact with a competent authority, for example in a leaflet stating the basic conditions for such reimbursement of expenses. Member States should not be required, at this early stage of the criminal proceedings, to decide on whether the victim concerned fulfils the conditions for reimbursement of expenses.

(26) When providing information, sufficient detail should be given to ensure that victims are treated in a respectful manner and to enable them to make informed decisions about their participation in proceedings. In this respect, information allowing the victim to know about the current status of any proceedings is particularly important. This is equally relevant for information to enable a victim to decide whether to request a review of a decision not to prosecute. Unless otherwise required, it should be possible to provide the information communicated to the victim orally or in writing, including through electronic means.

(27) Information to a victim should be provided to the last known correspondence address or electronic contact details given to the competent authority by the victim. In exceptional cases, for example due to the high number of victims involved in a case, it should be possible to provide information through the press, through an official website of the competent authority or through a similar communication channel.

(28) Member States should not be obliged to provide information where disclosure of that information could affect the proper handling of a case or harm a given case or person, or if they consider it contrary to the essential interests of their security.

(29) Competent authorities should ensure that victims receive updated contact details for communication about their case unless the victim has expressed a wish not to receive such information.
(30) A reference to a ‘decision’ in the context of the right to information, interpretation and translation, should be understood only as a reference to the finding of guilt or otherwise ending criminal proceedings. The reasons for that decision should be provided to the victim through a copy of the document which contains that decision or through a brief summary of them.

(31) The right to information about the time and place of a trial resulting from the complaint with regard to a criminal offence suffered by the victim should also apply to information about the time and place of a hearing related to an appeal of a judgment in the case.

(32) Specific information about the release or the escape of the offender should be given to victims, upon request, at least in cases where there might be a danger or an identified risk of harm to the victims, unless there is an identified risk of harm to the offender which would result from the notification.

(33) Victims should receive information about any right to appeal of a decision to release the offender, if such a right exists in national law.

**Article 1.1.** The purpose of this Directive is to ensure that victims of crime receive appropriate information, support and protection and are able to participate in criminal proceedings.

**Article 3.1.** Member States shall take appropriate measures to assist victims to understand and to be understood from the first contact and during any further necessary interaction they have with a competent authority in the context of criminal proceedings, including where information is provided by that authority.

2. Member States shall ensure that communications with victims are given in simple and accessible language, orally or in writing. Such communications shall take into account the personal characteristics of the victim including any disability which may affect the ability to understand or to be understood.

3. Unless contrary to the interests of the victim or unless the course of proceedings would be prejudiced, Member States shall allow victims to be accompanied by a person of their choice in the first contact with a competent authority where, due to the impact of the crime, the victim requires assistance to understand or to be understood.

**Article 4.1.** Member States shall ensure that victims are offered the following information, without unnecessary delay, from their first contact with a competent authority in order to enable them to access the rights set out in this Directive:

(a) the type of support they can obtain and from whom, including, where relevant, basic information about access to medical support, any specialist support, including psychological support, and alternative accommodation;

(b) the procedures for making complaints with regard to a criminal offence and their role in connection with such procedures;

(c) how and under what conditions they can obtain protection, including protection measures;
(d) how and under what conditions they can access legal advice, legal aid and any other sort of advice;

(e) how and under what conditions they can access compensation;

(f) how and under what conditions they are entitled to interpretation and translation;

(g) if they are resident in a Member State other than that where the criminal offence was committed, any special measures, procedures or arrangements, which are available to protect their interests in the Member State where the first contact with the competent authority is made;

(h) the available procedures for making complaints where their rights are not respected by the competent authority operating within the context of criminal proceedings;

(i) the contact details for communications about their case;

(j) the available restorative justice services;

(k) how and under what conditions expenses incurred as a result of their participation in the criminal proceedings can be reimbursed.

2. The extent or detail of information referred to in paragraph 1 may vary depending on the specific needs and personal circumstances of the victim and the type or nature of the crime. Additional details may also be provided at later stages depending on the needs of the victim and the relevance, at each stage of proceedings, of such details.

Article 5.1. Member States shall ensure that victims receive written acknowledgement of their formal complaint made by them to the competent authority of a Member State, stating the basic elements of the criminal offence concerned.

Article 6.1. Member States shall ensure that victims are notified without unnecessary delay of their right to receive the following information about the criminal proceedings instituted as a result of the complaint with regard to a criminal offence suffered by the victim and that, upon request, they receive such information:

(a) any decision not to proceed with or to end an investigation or not to prosecute the offender;

(b) the time and place of the trial, and the nature of the charges against the offender.

2. Member States shall ensure that, in accordance with their role in the relevant criminal justice system, victims are notified without unnecessary delay of their right to receive the following information about the criminal proceedings instituted as a result of the complaint with regard to a criminal offence suffered by them and that, upon request, they receive such information:
(a) any final judgment in a trial;

(b) information enabling the victim to know about the state of the criminal proceedings, unless in exceptional cases the proper handling of the case may be adversely affected by such notification.

3. Information provided for under paragraph 1(a) and paragraph 2(a) shall include reasons or a brief summary of reasons for the decision concerned, except in the case of a jury decision or a decision where the reasons are confidential in which cases the reasons are not provided as a matter of national law.

4. The wish of victims as to whether or not to receive information shall bind the competent authority, unless that information must be provided due to the entitlement of the victim to active participation in the criminal proceedings. Member States shall allow victims to modify their wish at any moment, and shall take such modification into account.

5. Member States shall ensure that victims are offered the opportunity to be notified, without unnecessary delay, when the person remanded in custody, prosecuted or sentenced for criminal offences concerning them is released from or has escaped detention. Furthermore, Member States shall ensure that victims are informed of any relevant measures issued for their protection in case of release or escape of the offender.

6. Victims shall, upon request, receive the information provided for in paragraph 5 at least in cases where there is a danger or an identified risk of harm to them, unless there is an identified risk of harm to the offender which would result from the notification.

Right to interpretation & translation

(34) Justice cannot be effectively achieved unless victims can properly explain the circumstances of the crime and provide their evidence in a manner understandable to the competent authorities. It is equally important to ensure that victims are treated in a respectful manner and that they are able to access their rights. Interpretation should therefore be made available, free of charge, during questioning of the victim and in order to enable them to participate actively in court hearings, in accordance with the role of the victim in the relevant criminal justice system. For other aspects of criminal proceedings, the need for interpretation and translation can vary depending on specific issues, the role of the victim in the relevant criminal justice system and his or her involvement in proceedings and any specific rights they have. As such, interpretation and translation for these other cases need only be provided to the extent necessary for victims to exercise their rights.

(35) The victim should have the right to challenge a decision finding that there is no need for interpretation or translation, in accordance with procedures in national law. That right does not entail the obligation for Member States to provide for a separate mechanism or complaint procedure in which such decision may be challenged and should not unreasonably prolong the criminal proceedings. An internal review of the decision in accordance with existing national procedures would suffice.
(36) The fact that a victim speaks a language which is not widely spoken should not, in itself, be grounds to decide that interpretation or translation would unreasonably prolong the criminal proceedings.

Article 5 2. Member States shall ensure that victims who wish to make a complaint with regard to a criminal offence and who do not understand or speak the language of the competent authority be enabled to make the complaint in a language that they understand or by receiving the necessary linguistic assistance.

3. Member States shall ensure that victims who do not understand or speak the language of the competent authority, receive translation, free of charge, of the written acknowledgement of their complaint provided for in paragraph 1, if they so request, in a language that they understand.

Article 7.1. Member States shall ensure that victims who do not understand or speak the language of the criminal proceedings concerned are provided, upon request, with interpretation in accordance with their role in the relevant criminal justice system in criminal proceedings, free of charge, at least during any interviews or questioning of the victim during criminal proceedings before investigative and judicial authorities, including during police questioning, and interpretation for their active participation in court hearings and any necessary interim hearings.

2. Without prejudice to the rights of the defence and in accordance with rules of judicial discretion, communication technology such as videoconferencing, telephone or internet may be used, unless the physical presence of the interpreter is required in order for the victims to properly exercise their rights or to understand the proceedings.

3. Member States shall ensure that victims who do not understand or speak the language of the criminal proceedings concerned are provided, in accordance with their role in the relevant criminal justice system in criminal proceedings, upon request, with translations of information essential to the exercise of their rights in criminal proceedings in a language that they understand, free of charge, to the extent that such information is made available to the victims. Translations of such information shall include at least any decision ending the criminal proceedings related to the criminal offence suffered by the victim, and upon the victim's request, reasons or a brief summary of reasons for such decision, except in the case of a jury decision or a decision where the reasons are confidential in which cases the reasons are not provided as a matter of national law.

4. Member States shall ensure that victims who are entitled to information about the time and place of the trial in accordance with Article 6(1)(b) and who do not understand the language of the competent authority, are provided with a translation of the information to which they are entitled, upon request.

5. Victims may submit a reasoned request to consider a document as essential. There shall be no requirement to translate passages of essential documents which are not relevant for the purpose of enabling victims to actively participate in the criminal proceedings.
6. Notwithstanding paragraphs 1 and 3, an oral translation or oral summary of essential documents may be provided instead of a written translation on condition that such oral translation or oral summary does not prejudice the fairness of the proceedings.

7. Member States shall ensure that the competent authority assesses whether victims need interpretation or translation as provided for under paragraphs 1 and 3. Victims may challenge a decision not to provide interpretation or translation. The procedural rules for such a challenge shall be determined by national law.

8. Interpretation and translation and any consideration of a challenge of a decision not to provide interpretation or translation under this Article shall not unreasonably prolong the criminal proceedings.

(17) Women victims of gender-based violence and their children often require special support and protection because of the high risk of secondary and repeat victimisation, of intimidation and of retaliation connected with such violence.

(37) Support should be available from the moment the competent authorities are aware of the victim and throughout criminal proceedings and for an appropriate time after such proceedings in accordance with the needs of the victim and the rights set out in this Directive. Support should be provided through a variety of means, without excessive formalities and through a sufficient geographical distribution across the Member State to allow all victims the opportunity to access such services. Victims who have suffered considerable harm due to the severity of the crime could require specialist support services.

(38) Persons who are particularly vulnerable or who find themselves in situations that expose them to a particularly high risk of harm, such as persons subjected to repeat violence in close relationships, victims of gender-based violence, or persons who fall victim to other types of crime in a Member State of which they are not nationals or residents, should be provided with specialist support and legal protection. Specialist support services should be based on an integrated and targeted approach which should, in particular, take into account the specific needs of victims, the severity of the harm suffered as a result of a criminal offence, as well as the relationship between victims, offenders, children and their wider social environment. A main task of these services and their staff, which play an important role in supporting the victim to recover from and overcome potential harm or trauma as a result of a criminal offence, should be to inform victims about the rights set out in this Directive so that they can take decisions in a supportive environment that treats them with dignity, respect and sensitivity. The types of support that such specialist support services should offer could include providing shelter and safe accommodation, immediate medical support, referral to medical and forensic examination for evidence in cases of rape or sexual assault, short and long-term psychological counselling, trauma care, legal advice, advocacy and specific services for children as direct or indirect victims.

(39) Victim support services are not required to provide extensive specialist and professional expertise themselves. If necessary, victim support services should assist victims in calling on existing professional support, such as psychologists.
(40) Although the provision of support should not be dependent on victims making a complaint with regard to a criminal offence to a competent authority such as the police, such authorities are often best placed to inform victims of the possibility of support. Member States are therefore encouraged to establish appropriate conditions to enable the referral of victims to victim support services, including by ensuring that data protection requirements can be and are adhered to. Repeat referrals should be avoided.

(51) If the victim has left the territory of the Member State where the criminal offence was committed, that Member State should no longer be obliged to provide assistance, support and protection except for what is directly related to any criminal proceedings it is conducting regarding the criminal offence concerned, such as special protection measures during court proceedings. The Member State of the victim’s residence should provide assistance, support and protection required for the victim’s need to recover.

(61) Member States should ensure such training for police services and court staff. Equally, training should be promoted for lawyers, prosecutors and judges and for practitioners who provide victim support or restorative justice services. This requirement should include training on the specific support services to which victims should be referred or specialist training where their work focuses on victims with specific needs and specific psychological training, as appropriate. Where relevant, such training should be gender sensitive. Member States’ actions on training should be complemented by guidelines, recommendations and exchange of best practices in accordance with the Budapest roadmap.

(62) Member States should encourage and work closely with civil society organisations, including recognised and active non-governmental organisations working with victims of crime, in particular in policymaking initiatives, information and awareness-raising campaigns, research and education programmes and in training, as well as in monitoring and evaluating the impact of measures to support and protect victims of crime. For victims of crime to receive the proper degree of assistance, support and protection, public services should work in a coordinated manner and should be involved at all administrative levels — at Union level, and at national, regional and local level. Victims should be assisted in finding and addressing the competent authorities in order to avoid repeat referrals. Member States should consider developing ‘sole points of access’ or ‘one-stop shops’, that address victims’ multiple needs when involved in criminal proceedings, including the need to receive information, assistance, support, protection and compensation.

(63) In order to encourage and facilitate reporting of crimes and to allow victims to break the cycle of repeat victimisation, it is essential that reliable support services are available to victims and that competent authorities are prepared to respond to victims’ reports in a respectful, sensitive, professional and non-discriminatory manner. This could increase victims’ confidence in the criminal justice systems of Member States and reduce the number of unreported crimes. Practitioners who are likely to receive complaints from victims with regard to criminal offences should be appropriately trained to facilitate reporting of crimes, and measures should be put in place to enable third-party reporting, including by civil society organisations. It should be possible to make use of communication technology, such as e-mail, video recordings or online electronic forms for making complaints.
(64) Relevant statistical data can include data recorded by the judicial authorities and by law enforcement agencies and, as far as possible, administrative data compiled by healthcare and social welfare services and by public and non-governmental victim support or restorative justice services and other organisations working with victims of crime. Judicial data can include information about reported crime, the number of cases that are investigated and persons prosecuted and sentenced. Service-based administrative data can include, as far as possible, data on how victims are using services provided by government agencies and public and private support organisations, such as the number of referrals by police to victim support services, the number of victims that request, receive or do not receive support or restorative justice.

**Article 8.**

1. Member States shall ensure that victims, in accordance with their needs, have access to confidential victim support services, free of charge, acting in the interests of the victims before, during and for an appropriate time after criminal proceedings. Family members shall have access to victim support services in accordance with their needs and the degree of harm suffered as a result of the criminal offence committed against the victim.

2. Member States shall facilitate the referral of victims, by the competent authority that received the complaint and by other relevant entities, to victim support services.

3. Member States shall take measures to establish free of charge and confidential specialist support services in addition to, or as an integrated part of, general victim support services, or to enable victim support organisations to call on existing specialised entities providing such specialist support. Victims, in accordance with their specific needs, shall have access to such services and family members shall have access in accordance with their specific needs and the degree of harm suffered as a result of the criminal offence committed against the victim.

4. Victim support services and any specialist support services may be set up as public or non-governmental organisations and may be organised on a professional or voluntary basis.

5. Member States shall ensure that access to any victim support services is not dependent on a victim making a formal complaint with regard to a criminal offence to a competent authority.

**Article 9.**

1. Victim support services, as referred to in Article 8(1), shall, as a minimum, provide:

   (a) information, advice and support relevant to the rights of victims including on accessing national compensation schemes for criminal injuries, and on their role in criminal proceedings including preparation for attendance at the trial;

   (b) information about or direct referral to any relevant specialist support services in place;

   (c) emotional and, where available, psychological support;

   (d) advice relating to financial and practical issues arising from the crime;
(e) unless otherwise provided by other public or private services, advice relating to the risk and prevention of secondary and repeat victimisation, of intimidation and of retaliation.

2. Member States shall encourage victim support services to pay particular attention to the specific needs of victims who have suffered considerable harm due to the severity of the crime.

3. Unless otherwise provided by other public or private services, specialist support services referred to in Article 8(3), shall, as a minimum, develop and provide:

   (a) shelters or any other appropriate interim accommodation for victims in need of a safe place due to an imminent risk of secondary and repeat victimisation, of intimidation and of retaliation;

   (b) targeted and integrated support for victims with specific needs, such as victims of sexual violence, victims of gender-based violence and victims of violence in close relationships, including trauma support and counselling.

Article 25, 4. Through their public services or by funding victim support organisations, Member States shall encourage initiatives enabling those providing victim support and restorative justice services to receive adequate training to a level appropriate to their contact with victims and observe professional standards to ensure such services are provided in an impartial, respectful and professional manner.

(9) In all contacts with a competent authority operating within the context of criminal proceedings, and any service coming into contact with victims, such as victim support or restorative justice services, the personal situation and immediate needs, age, gender, possible disability and maturity of victims of crime should be taken into account while fully respecting their physical, mental and moral integrity...

(55) Some victims are particularly at risk of secondary and repeat victimisation, of intimidation and of retaliation by the offender during criminal proceedings. It is possible that such a risk derives from the personal characteristics of the victim or the type, nature or circumstances of the crime. Only through individual assessments, carried out at the earliest opportunity, can such a risk be effectively identified. Such assessments should be carried out for all victims to determine whether they are at risk of secondary and repeat victimisation, of intimidation and of retaliation and what special protection measures they require.

(56) Individual assessments should take into account the personal characteristics of the victim such as his or her age, gender and gender identity or expression, ethnicity, race, religion, sexual orientation, health, disability, residence status, communication difficulties, relationship to or dependence on the offender and previous experience of crime. They should also take into account the type or nature and the circumstances of the crime such as whether it is a hate crime, a bias crime or a crime committed with a discriminatory motive, sexual violence, violence in a close relationship, whether the
offender was in a position of control, whether the victim's residence is in a high crime or gang dominated area, or whether the victim's country of origin is not the Member State where the crime was committed.

(58) Victims who have been identified as vulnerable to secondary and repeat victimisation, to intimidation and to retaliation should be offered appropriate measures to protect them during criminal proceedings. The exact nature of such measures should be determined through the individual assessment, taking into account the wish of the victim. The extent of any such measure should be determined without prejudice to the rights of the defence and in accordance with rules of judicial discretion. The victims' concerns and fears in relation to proceedings should be a key factor in determining whether they need any particular measure.

(61) Persons who are likely to be involved in the individual assessment to identify victims' specific protection needs and to determine their need for special protection measures should receive specific training on how to carry out such an assessment.

Article 22. 1. Member States shall ensure that victims receive a timely and individual assessment, in accordance with national procedures, to identify specific protection needs and to determine whether and to what extent they would benefit from special measures in the course of criminal proceedings, as provided for under Articles 23 and 24, due to their particular vulnerability to secondary and repeat victimisation, to intimidation and to retaliation.

2. The individual assessment shall, in particular, take into account:
   (a) the personal characteristics of the victim;
   (b) the type or nature of the crime; and
   (c) the circumstances of the crime.

3. In the context of the individual assessment, particular attention shall be paid to victims who have suffered considerable harm due to the severity of the crime; victims who have suffered a crime committed with a bias or discriminatory motive which could, in particular, be related to their personal characteristics; victims whose relationship to and dependence on the offender make them particularly vulnerable. In this regard, victims of terrorism, organised crime, human trafficking, gender-based violence, violence in a close relationship, sexual violence, exploitation or hate crime, and victims with disabilities shall be duly considered.

4. For the purposes of this Directive, child victims shall be presumed to have specific protection needs due to their vulnerability to secondary and repeat victimisation, to intimidation and to retaliation. To determine whether and to what extent they would benefit from special measures as provided for under Articles 23 and 24, child victims shall be subject to an individual assessment as provided for in paragraph 1 of this Article.

5. The extent of the individual assessment may be adapted according to the severity of the crime and the degree of apparent harm suffered by the victim.
6. Individual assessments shall be carried out with the close involvement of the victim and shall take into account their wishes including where they do not wish to benefit from special measures as provided for in Articles 23 and 24.

7. If the elements that form the basis of the individual assessment have changed significantly, Member States shall ensure that it is updated throughout the criminal proceedings.

(18) Where violence is committed in a close relationship, it is committed by a person who is a current or former spouse, or partner or other family member of the victim, whether or not the offender shares or has shared the same household with the victim. Such violence could cover physical, sexual, psychological or economic violence and could result in physical, mental or emotional harm or economic loss. Violence in close relationships is a serious and often hidden social problem which could cause systematic psychological and physical trauma with severe consequences because the offender is a person whom the victim should be able to trust. Victims of violence in close relationships may therefore be in need of special protection measures. Women are affected disproportionately by this type of violence and the situation can be worse if the woman is dependent on the offender economically, socially or as regards her right to residence.

(46) Restorative justice services, including for example victim-offender mediation, family group conferencing and sentencing circles, can be of great benefit to the victim, but require safeguards to prevent secondary and repeat victimisation, intimidation and retaliation. Such services should therefore have as a primary consideration the interests and needs of the victim, repairing the harm done to the victim and avoiding further harm. Factors such as the nature and severity of the crime, the ensuing degree of trauma, the repeat violation of a victim’s physical, sexual, or psychological integrity, power imbalances, and the age, maturity or intellectual capacity of the victim, which could limit or reduce the victim’s ability to make an informed choice or could prejudice a positive outcome for the victim, should be taken into consideration in referring a case to the restorative justice services and in conducting a restorative justice process. Restorative justice processes should, in principle, be confidential, unless agreed otherwise by the parties, or as required by national law due to an overriding public interest. Factors such as threats made or any forms of violence committed during the process may be considered as requiring disclosure in the public interest.

(60) Where, in accordance with this Directive, a guardian or a representative is to be appointed for a child, those roles could be performed by the same person or by a legal person, an institution or an authority.

**Article 24.1 (b)** in criminal investigations and proceedings, in accordance with the role of victims in the relevant criminal justice system, competent authorities appoint a special representative for child victims where, according to national law, the holders of parental responsibility are precluded from representing the child victim as a result of a conflict of interest between them and the child victim, or where the child victim is unaccompanied or separated from the family.
Legal counselling and representation

**Article 13** Member States shall ensure that victims have access to legal aid, where they have the status of parties to criminal proceedings. The conditions or procedural rules under which victims have access to legal aid shall be determined by national law.

**Article 24.1** (c) where the child victim has the right to a lawyer, he or she has the right to legal advice and representation, in his or her own name, in proceedings where there is, or there could be, a conflict of interest between the child victim and the holders of parental responsibility.

REPORTING/ INVESTIGATION/ COURT PROCEEDINGS

**Investigation & Prosecution do not depend on report/ accusation by victim**

n/a

**Reporting**

(63) In order to encourage and facilitate reporting of crimes and to allow victims to break the cycle of repeat victimisation, it is essential that reliable support services are available to victims and that competent authorities are prepared to respond to victims’ reports in a respectful, sensitive, professional and non-discriminatory manner. This could increase victims’ confidence in the criminal justice systems of Member States and reduce the number of unreported crimes. Practitioners who are likely to receive complaints from victims with regard to criminal offences should be appropriately trained to facilitate reporting of crimes, and measures should be put in place to enable third-party reporting, including by civil society organisations. It should be possible to make use of communication technology, such as e-mail, video recordings or online electronic forms for making complaints.

**Adapted procedures in investigations and judicial proceedings involving children**

(59) Immediate operational needs and constraints may make it impossible to ensure, for example, that the same police officer consistently interview the victim; illness, maternity or parental leave are examples of such constraints. Furthermore, premises specially designed for interviews with victims may not be available due, for example, to renovation. In the event of such operational or practical constraints, a special measure envisaged following an individual assessment may not be possible to provide on a case-by-case basis.

**Article 18** Without prejudice to the rights of the defence, Member States shall ensure that measures are available to protect victims and their family members from secondary and repeat victimisation, from intimidation and from retaliation, including against the risk of emotional or psychological harm, and to protect the dignity of victims during questioning and when testifying. When necessary, such measures shall also include procedures established under national law for the physical protection of victims and their family members.
Article 22. 1. Member States shall ensure that victims receive a timely and individual assessment, in accordance with national procedures, to identify specific protection needs and to determine whether and to what extent they would benefit from special measures in the course of criminal proceedings, as provided for under Articles 23 and 24, due to their particular vulnerability to secondary and repeat victimisation, to intimidation and to retaliation. (See section on individual needs assessment.)

Article 23. 1. Without prejudice to the rights of the defence and in accordance with rules of judicial discretion, Member States shall ensure that victims with specific protection needs who benefit from special measures identified as a result of an individual assessment provided for in Article 22(1), may benefit from the measures provided for in paragraphs 2 and 3 of this Article. A special measure envisaged following the individual assessment shall not be made available if operational or practical constraints make this impossible, or where there is an urgent need to interview the victim and failure to do so could harm the victim or another person or could prejudice the course of the proceedings.

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**CRIMINAL INVESTIGATION: No unjustified delay between the reporting of the facts and interviews take place**

**Article 20.** (a) interviews of victims are conducted without unjustified delay after the complaint with regard to a criminal offence has been made to the competent authority;

**CRIMINAL INVESTIGATION: Medical examinations are kept to a minimum**

**Article 20** (c) (d) medical examinations are kept to a minimum and are carried out only where strictly necessary for the purposes of the criminal proceedings

**CRIMINAL INVESTIGATION: Interviews take pace, where necessary in premises designed or adapted for that purpose**

**Article 23. 2** (a) interviews with the victim being carried out in premises designed or adapted for that purpose;
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<th>CRIMINAL INVESTIGATION:</th>
<th>Article 23. 2 (b) interviews with the victim being carried out by or through professionals trained for that purpose;</th>
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<td>Interviews are carried out by or through professionals trained for this purpose</td>
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<td>CRIMINAL INVESTIGATION: The same persons, if possible and were appropriate, conduct all interviews with children</td>
<td>Article 23. 2 (c) all interviews with the victim being conducted by the same persons unless this is contrary to the good administration of justice;</td>
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<td>CRIMINAL INVESTIGATION: Interviews of victims of sexual violence, gender-based violence or violence in close relationships being carried out by persons of the same sex</td>
<td>Article 23. 2 (d) all interviews with victims of sexual violence, gender-based violence or violence in close relationships, unless conducted by a prosecutor or a judge, being conducted by a person of the same sex as the victim, if the victim so wishes, provided that the course of the criminal proceedings will not be prejudiced.</td>
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<td>CRIMINAL INVESTIGATION: The number of interviews is as limited as possible and interviews are carried out only where strictly necessary and for the purpose of the investigations and proceedings</td>
<td>Article 20 (b) the number of interviews of victims is kept to a minimum and interviews are carried out only where strictly necessary for the purposes of the criminal investigation;</td>
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<td><strong>CRIMINAL INVESTIGATION:</strong> Accompaniment by legal representative or where appropriate by an adult of his or her choice unless a reasoned decision has been made to the contrary in respect of that person.</td>
<td>Article 20 (c) victims may be accompanied by their legal representative and a person of their choice, unless a reasoned decision has been made to the contrary;</td>
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<td><strong>CRIMINAL INVESTIGATION/COURT PROCEEDING:</strong> All interviews with a child victim or where appropriate a child witness, may be audiovisually recorded and that such recordings may be used as evidence in criminal court proceedings</td>
<td>Article 24.1 (a) in criminal investigations, all interviews with the child victim may be audiovisually recorded and such recorded interviews may be used as evidence in criminal proceedings; The procedural rules for the audiovisual recordings referred to in point (a) of the first subparagraph and the use thereof shall be determined by national law.</td>
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<tr>
<td><strong>COURT PROCEEDING:</strong> Possibility to order that the hearing take place without the presence of the public</td>
<td>Article 23.3 (d) measures allowing a hearing to take place without the presence of the public.</td>
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<tr>
<td><strong>COURT PROCEEDING:</strong> Possibility to order that the child victim be heard through the use of appropriate communication technologies</td>
<td>Article 23.3 (a) measures to avoid visual contact between victims and offenders including during the giving of evidence, by appropriate means including the use of communication technology; (b) measures to ensure that the victim may be heard in the courtroom without being present, in particular through the use of appropriate communication technology;</td>
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(54) Protecting the privacy of the victim can be an important means of preventing secondary and repeat victimisation, intimidation and retaliation and can be achieved through a range of measures including non-disclosure or limitations on the disclosure of information concerning the identity and whereabouts of the victim. Such protection is particularly important for child victims, and includes non-disclosure of the name of the child. However, there might be cases where, exceptionally, the child can benefit from the disclosure or even widespread publication of information, for example where a child has been abducted. Measures to protect the privacy and images of victims and of their family members should always be consistent with the right to a fair trial and freedom of expression, as recognised in Articles 6 and 10, respectively, of the European Convention for the Protection of Human Rights and Fundamental Freedoms.

(68) Personal data processed when implementing this Directive should be protected in accordance with Council Framework Decision 2008/977/JHA of 27 November 2008 on the protection of personal data processed in the framework of police and judicial cooperation in criminal matters (1) and in accordance with the principles laid down in the Council of Europe Convention of 28 January 1981 for the Protection of Individuals with regard to Automatic Processing of Personal Data, which all Member States have ratified.

**Article 21.** 1. Member States shall ensure that competent authorities may take during the criminal proceedings appropriate measures to protect the privacy, including personal characteristics of the victim taken into account in the individual assessment provided for under Article 22, and images of victims and of their family members. Furthermore, Member States shall ensure that competent authorities may take all lawful measures to prevent public dissemination of any information that could lead to the identification of a child victim.

2. In order to protect the privacy, personal integrity and personal data of victims, Member States shall, with respect for freedom of expression and information and freedom and pluralism of the media, encourage the media to take self-regulatory measures.

**Article 23.** 3 (c) measures to avoid unnecessary questioning concerning the victim's private life not related to the criminal offence;

**Article 19.** 1. Member States shall establish the necessary conditions to enable avoidance of contact between victims and their family members, where necessary, and the offender within premises where criminal proceedings are conducted, unless the criminal proceedings require such contact.

2. Member States shall ensure that new court premises have separate waiting areas for victims.
Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations

See Article 25

Necessary measures to find durable solutions for unaccompanied children who have been trafficked

N/A

Other measures

Training & tools

(61) Persons who are likely to be involved in the individual assessment to identify victims’ specific protection needs and to determine their need for special protection measures should receive specific training on how to carry out such an assessment. Member States should ensure such training for police services and court staff. Equally, training should be promoted for lawyers, prosecutors and judges and for practitioners who provide victim support or restorative justice services. This requirement should include training on the specific support services to which victims should be referred or specialist training where their work focuses on victims with specific needs and specific psychological training, as appropriate. Where relevant, such training should be gender sensitive. Member States’ actions on training should be complemented by guidelines, recommendations and exchange of best practices in accordance with the Budapest roadmap.

(63) In order to encourage and facilitate reporting of crimes and to allow victims to break the cycle of repeat victimisation, it is essential that reliable support services are available to victims and that competent authorities are prepared to respond to victims’ reports in a respectful, sensitive, professional and non-discriminatory manner. This could increase victims’ confidence in the criminal justice systems of Member States and reduce the number of unreported crimes. Practitioners who are likely to receive complaints from victims with regard to criminal offences should be appropriately trained to facilitate reporting of crimes, and measures should be put in place to enable third-party reporting, including by civil society organisations. It should be possible to make use of communication technology, such as e-mail, video recordings or online electronic forms for making complaints.

Article 25. Member States shall ensure that officials likely to come into contact with victims, such as police officers and court staff, receive both general and specialist training to a level appropriate to their contact with victims to increase their awareness of the needs of victims and to enable them to deal with victims in an impartial, respectful and professional manner.
2. Without prejudice to judicial independence and differences in the organisation of the judiciary across the Union, Member States shall request that those responsible for the training of judges and prosecutors involved in criminal proceedings make available both general and specialist training to increase the awareness of judges and prosecutors of the needs of victims.

3. With due respect for the independence of the legal profession, Member States shall recommend that those responsible for the training of lawyers make available both general and specialist training to increase the awareness of lawyers of the needs of victims.

4. Through their public services or by funding victim support organisations, Member States shall encourage initiatives enabling those providing victim support and restorative justice services to receive adequate training to a level appropriate to their contact with victims and observe professional standards to ensure such services are provided in an impartial, respectful and professional manner.

5. In accordance with the duties involved, and the nature and level of contact the practitioner has with victims, training shall aim to enable the practitioner to recognise victims and to treat them in a respectful, professional and non-discriminatory manner.

Multi-disciplinarity/coordination

(38) Specialist support services should be based on an integrated and targeted approach which should, in particular, take into account the specific needs of victims, the severity of the harm suffered as a result of a criminal offence, as well as the relationship between victims, offenders, children and their wider social environment...

(62) For victims of crime to receive the proper degree of assistance, support and protection, public services should work in a coordinated manner and should be involved at all administrative levels — at Union level, and at national, regional and local level. Victims should be assisted in finding and addressing the competent authorities in order to avoid repeat referrals. Member States should consider developing ‘sole points of access’ or ‘one-stop shops’, that address victims’ multiple needs when involved in criminal proceedings, including the need to receive information, assistance, support, protection and compensation.

International cooperation

**Article 26**. Member States shall take appropriate action to facilitate cooperation between Member States to improve the access of victims to the rights set out in this Directive and under national law. Such cooperation shall be aimed at least at:

(a) the exchange of best practices;
(b) consultation in individual cases; and
(c) assistance to European networks working on matters directly relevant to victims’ rights.
Data and monitoring

(62) Member States should encourage and work closely with civil society organisations, including recognised and active non-governmental organisations working with victims of crime, in particular in policymaking initiatives, information and awareness-raising campaigns, research and education programmes and in training, as well as in monitoring and evaluating the impact of measures to support and protect victims of crime.

(64) Systematic and adequate statistical data collection is recognised as an essential component of effective policymaking in the field of rights set out in this Directive. In order to facilitate evaluation of the application of this Directive, Member States should communicate to the Commission relevant statistical data related to the application of national procedures on victims of crime, including at least the number and type of the reported crimes and, as far as such data are known and are available, the number and age and gender of the victims. Relevant statistical data can include data recorded by the judicial authorities and by law enforcement agencies and, as far as possible, administrative data compiled by healthcare and social welfare services and by public and non-governmental victim support or restorative justice services and other organisations working with victims of crime. Judicial data can include information about reported crime, the number of cases that are investigated and persons prosecuted and sentenced. Service-based administrative data can include, as far as possible, data on how victims are using services provided by government agencies and public and private support organisations, such as the number of referrals by police to victim support services, the number of victims that request, receive or do not receive support or restorative justice.

Awareness Raising

(62) Member States should encourage and work closely with civil society organisations, including recognised and active non-governmental organisations working with victims of crime, in particular in policymaking initiatives, information and awareness-raising campaigns, research and education programmes and in training, as well as in monitoring and evaluating the impact of measures to support and protect victims of crime.

**Article 26. 2.** Member States shall take appropriate action, including through the internet, aimed at raising awareness of the rights set out in this Directive, reducing the risk of victimisation, and minimising the negative impact of crime and the risks of secondary and repeat victimisation, of intimidation and of retaliation, in particular by targeting groups at risk such as children, victims of gender-based violence and violence in close relationships. Such action may include information and awareness raising campaigns and research and education programmes, where appropriate in cooperation with relevant civil society organisations and other stakeholders.
**Prevention**

**Article 26 1.** Member States shall take appropriate action to facilitate cooperation between Member States to improve the access of victims to the rights set out in this Directive and under national law. Such cooperation shall be aimed at least at:

(a) the exchange of best practices;
(b) consultation in individual cases; and
(c) assistance to European networks working on matters directly relevant to victims’ rights.

**Article 26. 2.** Member States shall take appropriate action, including through the internet, aimed at raising awareness of the rights set out in this Directive, reducing the risk of victimisation, and minimising the negative impact of crime and the risks of secondary and repeat victimisation, of intimidation and of retaliation, in particular by targeting groups at risk such as children, victims of gender-based violence and violence in close relationships. Such action may include information and awareness raising campaigns and research and education programmes, where appropriate in cooperation with relevant civil society organisations and other stakeholders.

**Other**

Right of victims when making a complaint: Article 5.1. Member States shall ensure that victims receive written acknowledgement of their formal complaint made by them to the competent authority of a Member State, stating the basic elements of the criminal offence concerned.

Right to review of a decision not to prosecute: Recital 43 The right to a review of a decision not to prosecute should be understood as referring to decisions taken by prosecutors and investigative judges or law enforcement authorities such as police officers, but not to the decisions taken by courts. Any review of a decision not to prosecute should be carried out by a different person or authority to that which made the original decision, unless the initial decision not to prosecute was taken by the highest prosecuting authority, against whose decision no review can be made, in which case the review may be carried out by that same authority. The right to a review of a decision not to prosecute does not concern special procedures, such as proceedings against members of parliament or government, in relation to the exercise of their official position.

**Article 11. 1.** Member States shall ensure that victims, in accordance with their role in the relevant criminal justice system, have the right to a review of a decision not to prosecute. The procedural rules for such a review shall be determined by national law.

2. Where, in accordance with national law, the role of the victim in the relevant criminal justice system will be established only after a decision to prosecute the offender has been taken, Member States shall ensure that at least the victims of serious crimes have the right to a review of a decision not to prosecute. The procedural rules for such a review shall be determined by national law.

3. Member States shall ensure that victims are notified without unnecessary delay of their right to receive, and that they receive sufficient information to decide whether to request a review of any decision not to prosecute upon request.
4. Where the decision not to prosecute is taken by the highest prosecuting authority against whose decision no review may be carried out under national law, the review may be carried out by the same authority.

Restorative justice procedures: Recital 46 Restorative justice services, including for example victim-offender mediation, family group conferencing and sentencing circles, can be of great benefit to the victim, but require safeguards to prevent secondary and repeat victimisation, intimidation and retaliation. Such services should therefore have as a primary consideration the interests and needs of the victim, repairing the harm done to the victim and avoiding further harm. Factors such as the nature and severity of the crime, the ensuing degree of trauma, the repeat violation of a victim’s physical, sexual, or psychological integrity, power imbalances, and the age, maturity or intellectual capacity of the victim, which could limit or reduce the victim’s ability to make an informed choice or could prejudice a positive outcome for the victim, should be taken into consideration in referring a case to the restorative justice services and in conducting a restorative justice process. Restorative justice processes should, in principle, be confidential, unless agreed otherwise by the parties, or as required by national law due to an overriding public interest. Factors such as threats made or any forms of violence committed during the process may be considered as requiring disclosure in the public interest.

Article 12 1. Member States shall take measures to safeguard the victim from secondary and repeat victimisation, from intimidation and from retaliation, to be applied when providing any restorative justice services. Such measures shall ensure that victims who choose to participate in restorative justice processes have access to safe and competent restorative justice services, subject to at least the following conditions:

(a) the restorative justice services are used only if they are in the interest of the victim, subject to any safety considerations, and are based on the victim’s free and informed consent, which may be withdrawn at any time;

(b) before agreeing to participate in the restorative justice process, the victim is provided with full and unbiased information about that process and the potential outcomes as well as information about the procedures for supervising the implementation of any agreement;

(c) the offender has acknowledged the basic facts of the case;

(d) any agreement is arrived at voluntarily and may be taken into account in any further criminal proceedings;

(e) discussions in restorative justice processes that are not conducted in public are confidential and are not subsequently disclosed, except with the agreement of the parties or as required by national law due to an overriding public interest.

2. Member States shall facilitate the referral of cases, as appropriate to restorative justice services, including through the establishment of procedures or guidelines on the conditions for such referral.
Right to recover expenses: Recital 47 Victims should not be expected to incur expenses in relation to their participation in criminal proceedings. Member States should be required to reimburse only necessary expenses of victims in relation to their participation in criminal proceedings and should not be required to reimburse victims’ legal fees. Member States should be able to impose conditions in regard to the reimbursement of expenses in national law, such as time limits for claiming reimbursement, standard rates for subsistence and travel costs and maximum daily amounts for loss of earnings. The right to reimbursement of expenses in criminal proceedings should not arise in a situation where a victim makes a statement on a criminal offence. Expenses should only be covered to the extent that the victim is obliged or requested by the competent authorities to be present and actively participate in the criminal proceedings.

**Article 14:** Member States shall afford victims who participate in criminal proceedings, the possibility of reimbursement of expenses incurred as a result of their active participation in criminal proceedings, in accordance with their role in the relevant criminal justice system. The conditions or procedural rules under which victims may be reimbursed shall be determined by national law.

Return of recoverable property: Recital 48 Recoverable property which is seized in criminal proceedings should be returned as soon as possible to the victim of the crime, subject to exceptional circumstances, such as in a dispute concerning the ownership or where the possession of the property or the property itself is illegal. The right to have property returned should be without prejudice to its legitimate retention for the purposes of other legal proceedings.

**Article 15:** Member States shall ensure that, following a decision by a competent authority, recoverable property which is seized in the course of criminal proceedings is returned to victims without delay, unless required for the purposes of criminal proceedings. The conditions or procedural rules under which such property is returned to the victims shall be determined by national law.

Right to Compensation: Recital 49 The right to a decision on compensation from the offender and the relevant applicable procedure should also apply to victims resident in a Member State other than the Member State where the criminal offence was committed.

**Article 16.1.** Member States shall ensure that, in the course of criminal proceedings, victims are entitled to obtain a decision on compensation by the offender, within a reasonable time, except where national law provides for such a decision to be made in other legal proceedings.

2. Member States shall promote measures to encourage offenders to provide adequate compensation to victims.

**Rights of Victim Resident in Another Member State:** see Article 17
Annex 2

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<tr>
<td><strong>GENERAL PRINCIPLES</strong></td>
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</table>
| Avoiding repeat or secondary victimisation of victims | Recital 24 Secondary victimisation should be avoided for victims of offences referred to in this Directive. In Member States where prostitution or the appearance in pornography is punishable under national criminal law, it should be possible not to prosecute or impose penalties under those laws where the child concerned has committed those acts as a result of being victim of sexual exploitation or where the child was compelled to participate in child pornography.  
Recital 30 Furthermore, participation in criminal proceedings by child victims should not cause additional trauma to the extent possible, as a result of interviews or visual contact with offenders. A good understanding of children and how they behave when faced with traumatic experiences will help to ensure a high quality of evidence-taking and also reduce the stress placed on children when carrying out the necessary measures. |
| Ensuring the best interests is a primary consideration in the application of the obligations in the Directives | Recital 2 In accordance with Article 6(1) of the Treaty on European Union, the Union recognises the rights, freedoms and principles set out in the Charter of Fundamental Rights of the European Union, in which Article 24(2) provides that in all actions relating to children, whether taken by public authorities or private institutions, the child’s best interests must be a primary consideration...  
Recital 6 Serious criminal offences such as the sexual exploitation of children and child pornography require a comprehensive approach covering the prosecution of offenders, the protection of child victims, and prevention of the phenomenon. The child’s best interests must be a primary consideration when carrying out any measures to combat these offences in accordance with the Charter of Fundamental Rights of the European Union and the United Nations Convention on the Rights of the Child. Framework Decision 2004/68/JHA should be replaced by a new instrument providing such comprehensive legal framework to achieve that purpose.  
Recital 30 Measures to protect child victims should be adopted in their best interest, taking into account an assessment of their needs... |
| Non-discrimination | Recital 10 [mentions a group against which there is frequently discrimination but not in the context of non-discrimination but rather in terms of definition of offences:] Disability by itself does not automatically constitute an impossibility to consent to sexual relations. However, the abuse of the existence of such a disability in order to engage in sexual activities with a child should be criminalised. |
| Taking due account of the views of the child | 19.3. Member States shall take the necessary measures to ensure that the specific actions to assist and support child victims in enjoying their rights under this Directive, are undertaken following an individual assessment of the special circumstances of each particular child victim, taking due account of the child’s views, needs and concerns. |
TARGET GROUP

Target Group: Provisions concerning identifying victims, including specific provisions identifying children as a victim of crime, such as age assessment provisions, family members

**Article 15.4.** Member States shall take the necessary measures to enable investigative units or services to attempt to identify the victims of the offences referred to in Articles 3 to 7, in particular by analysing child pornography material, such as photographs and audiovisual recordings transmitted or made available by means of information and communication technology.

**Article 18.2.** Member States shall take the necessary measures to ensure that a child is provided with assistance and support as soon as the competent authorities have a reasonable-grounds indication for believing that a child might have been subject to any of the offences referred to in Articles 3 to 7.

3. Member States shall ensure that, where the age of a person subject to any of the offences referred to in Articles 3 to 7 is uncertain and there are reasons to believe that the person is a child, that person is presumed to be a child in order to receive immediate access to assistance, support and protection in accordance with Articles 19 and 20.

**Article 19.5.** Member States shall take measures, where appropriate and possible, to provide assistance and support to the family of the child victim in enjoying the rights under this Directive when the family is in the territory of the Member States. In particular, Member States shall, where appropriate and possible, apply Article 4 of Framework Decision 2001/220/JHA to the family of the child victim.

ASSISTANCE & SUPPORT

<table>
<thead>
<tr>
<th>Provision of information</th>
<th>None</th>
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<tr>
<td>Right to interpretation &amp; translation</td>
<td>None</td>
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</table>
**Provision of assistance & support**

<table>
<thead>
<tr>
<th>Recital 23</th>
<th>The use of seized and confiscated instrumentalities and the proceeds from the offences referred to in this Directive to support victims' assistance and protection should be encouraged.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recital 31</td>
<td>Member States should consider giving short and long term assistance to child victims. Any harm caused by the sexual abuse and sexual exploitation of a child is significant and should be addressed. Because of the nature of the harm caused by sexual abuse and sexual exploitation, such assistance should continue for as long as necessary for the child's physical and psychological recovery and may last into adulthood if necessary. Assistance and advice should be considered to be extended to parents or guardians of the child victims where they are not involved as suspects in relation to the offence concerned, in order to help them to assist child victims throughout the proceedings.</td>
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<tr>
<th>Article 19.2</th>
<th>Member States shall take the necessary measures to ensure that assistance and support for a child victim are not made conditional on the child victim's willingness to cooperate in the criminal investigation, prosecution or trial.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Article 18.1</td>
<td>Child victims of the offences referred to in Articles 3 to 7 shall be provided assistance, support and protection in accordance with Articles 19 and 20, taking into account the best interests of the child.</td>
</tr>
<tr>
<td>Article 19.1</td>
<td>Member States shall take the necessary measures to ensure that assistance and support are provided to victims before, during and for an appropriate period of time after the conclusion of criminal proceedings in order to enable them to exercise the rights set out in Framework Decision 2001/220/JHA, and in this Directive. Member States shall, in particular, take the necessary steps to ensure protection for children who report cases of abuse within their family.</td>
</tr>
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</table>

| 4. | Child victims of any of the offences referred to in Articles 3 to 7 shall be considered as particularly vulnerable victims pursuant to Article 2(2), Article 8(4) and Article 14(1) of Framework Decision 2001/220/JHA. EN 17.12.2011 Official Journal of the European Union L 335/ |

**Individual assessment of each child's circumstances and non-offending family members' needs**

| 19.3. | Member States shall take the necessary measures to ensure that the specific actions to assist and support child victims in enjoying their rights under this Directive, are undertaken following an individual assessment of the special circumstances of each particular child victim, taking due account of the child's views, needs and concerns. |

**Circle of Trust provisions**

<table>
<thead>
<tr>
<th>Recital 30</th>
<th>Child victims should have easy access to legal remedies and measures to address conflicts of interest where sexual abuse or sexual exploitation of a child occurs within the family.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Article 19 (1)</td>
<td>Member States shall, in particular, take the necessary steps to ensure protection for children who report cases of abuse within their family.</td>
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<tr>
<td>Representation where appropriate for children deprived of parental care or where their interests conflict with those of their parents</td>
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<tr>
<td><strong>Recital 30</strong> When a special representative should be appointed for a child during a criminal investigation or proceeding, this role may be also carried out by a legal person, an institution or an authority.</td>
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<tr>
<td><strong>Article 20.1</strong> Member States shall take the necessary measures to ensure that in criminal investigations and proceedings, in accordance with the role of victims in the relevant justice system, competent authorities appoint a special representative for the child victim where, under national law, the holders of parental responsibility are precluded from representing the child as a result of a conflict of interest between them and the child victim, or where the child is unaccompanied or separated from the family.</td>
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<tr>
<th>Legal counselling and representation</th>
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<tr>
<td><strong>Recital 32</strong> Framework Decision 2001/220/JHA establishes a set of victims’ rights in criminal proceedings, including the right to protection and compensation. In addition child victims of sexual abuse, sexual exploitation and child pornography should be given access to legal counselling and, in accordance with the role of victims in the relevant justice systems, to legal representation, including for the purpose of claiming compensation. Such legal counselling and legal representation could also be provided by the competent authorities for the purpose of claiming compensation from the State. The purpose of legal counselling is to enable victims to be informed and receive advice about the various possibilities open to them. Legal counselling should be provided by a person having received appropriate legal training without necessarily being a lawyer. Legal counselling and, in accordance with the role of victims in the relevant justice systems, legal representation should be provided free of charge, at least when the victim does not have sufficient financial resources, in a manner consistent with the internal procedures of Member States.</td>
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<tr>
<td><strong>Article 20.2</strong> Member States shall ensure that child victims have, without delay, access to legal counselling and, in accordance with the role of victims in the relevant justice system, to legal representation, including for the purpose of claiming compensation. Legal counselling and legal representation shall be free of charge where the victim does not have sufficient financial resources.</td>
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**REPORTING/INVESTIGATION/COURT PROCEEDINGS**
### Reporting obligations

**Recital 28** Member States should encourage any person who has knowledge or suspicion of the sexual abuse or sexual exploitation of a child to report to the competent services. It is the responsibility of each Member State to determine the competent authorities to which such suspicions may be reported. Those competent authorities should not be limited to child protection services or relevant social services. The requirement of suspicion ‘in good faith’ should be aimed at preventing the provision being invoked to authorise the denunciation of purely imaginary or untrue facts carried out with malicious intent.

**Article 16. 1.** Member States shall take the necessary measures to ensure that the confidentiality rules imposed by national law on certain professionals whose main duty is to work with children do not constitute an obstacle to the possibility, for those professionals, of their reporting to the services responsible for child protection any situation where they have reasonable grounds for believing that a child is the victim of offences referred to in Articles 3 to 7.

**Article 16. 2** Member States shall take the necessary measures to encourage any person who knows about or suspects, in good faith that any of the offences referred to in Articles 3 to 7 have been committed, to report this to the competent services.

### Investigation & Prosecution do not depend on report/accusation by victim

**Recital 26.** To ensure successful investigations and prosecutions of the offences referred to in this Directive, their initiation should not depend, in principle, on a report or accusation made by the victim or by his or her representative.

**Article 15. 1.** Member States shall take the necessary measures to ensure that investigations into or the prosecution of the offences referred to in Articles 3 to 7 are not dependent on a report or accusation being made by the victim or by his or her representative, and that criminal proceedings may continue even if that person has withdrawn his or her statements.

### Criminal Proceedings: Investigation & Court Proceedings: Adapted For Children

**Article 20.3.** necessary measures to ensure that in criminal investigations, that it may be ordered that...(a) interviews with the child victim take place without unjustified delay after the facts have been reported to the competent authorities;

### Criminal INVESTIGATIONS: No unjustified delay between the reporting of the facts and interviews take place

None
<table>
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<tr>
<th>CRIMINAL INVESTIGATION: Interviews take pace, where necessary in premises designed or adapted for this purpose</th>
<th>Article 20.3. necessary measures to ensure that in criminal investigations. that it may be ordered that..(b) interviews with the child victim take place, where necessary, in premises designed or adapted for this purpose;</th>
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<tr>
<td>CRIMINAL INVESTIGATION: Interviews are carried out by or through professionals trained for this purpose</td>
<td>Article 20.3. necessary measures to ensure that in criminal investigations. that it may be ordered that..(c) interviews with the child victim are carried out by or through professionals trained for this purpose;</td>
</tr>
<tr>
<td>CRIMINAL INVESTIGATION: The same persons, if possible and were appropriate, conduct all interviews with children</td>
<td>Article 20.3. necessary measures to ensure that in criminal investigations.. that it may be ordered that..(d) the same persons, if possible and where appropriate, conduct all interviews with the child victim;</td>
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<tr>
<td>CRIMINAL INVESTIGATION: Interviews of victims of sexual violence, gender-based violence or violence in close relationships being carried out by persons of the same sex</td>
<td>None</td>
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<tr>
<td>CRIMINAL INVESTIGATION: The number of interviews is as limited as possible and interviews are carried out only where strictly necessary and for the purpose of the investigations and proceedings</td>
<td>Article 20.3. necessary measures to ensure that in criminal investigations.. that it may be ordered that..(e) the number of interviews is as limited as possible and interviews are carried out only where strictly necessary for the purpose of criminal investigations and proceedings;</td>
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<tr>
<td>CRIMINAL INVESTIGATION: Accompaniment by legal representative or where appropriate by an adult of his or her choice unless a reasoned decision has been made to the contrary in respect of that person.</td>
<td>Article 20.3. necessary measures to ensure that in criminal investigations.. that it may be ordered that..(f) the child victim may be accompanied by his or her legal representative or, where appropriate, by an adult of his or her choice, unless a reasoned decision has been made to the contrary in respect of that person.</td>
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<td>Article</td>
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<td><strong>Article 20.4</strong></td>
<td>Member States shall take the necessary measures to ensure that in criminal investigations of any of the offences referred to in Articles 3 to 7 all interviews with the child victim or, where appropriate, with a child witness, may be audio-visually recorded and that such audio-visually recorded interviews may be used as evidence in criminal court proceedings, in accordance with the rules under their national law.</td>
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<td><strong>Article 20.5</strong></td>
<td>Necessary measures to ensure that in criminal court proceedings, it may be ordered that:</td>
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<td>(a) the hearing take place without the presence of the public;</td>
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<tr>
<td><strong>Article 20.5</strong></td>
<td>Necessary measures to ensure that in criminal court proceedings, it may be ordered that:</td>
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<td>(b) the child victim be heard in the courtroom without being present, in particular through the use of appropriate communication technologies.</td>
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<tr>
<td><strong>Article 20.6</strong></td>
<td>Member States shall take the necessary measures, where in the interest of child victims and taking into account other overriding interests, to protect the privacy, identity and image of child victims, and to prevent the public dissemination of any information that could lead to their identification.</td>
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<tr>
<td><strong>Recital 30</strong></td>
<td>Furthermore, participation in criminal proceedings by child victims should not cause additional trauma to the extent possible, as a result of interviews or visual contact with offenders.</td>
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<td><strong>N/A</strong></td>
<td>N/A</td>
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</table>
Recital 30 A good understanding of children and how they behave when faced with traumatic experiences will help to ensure a high quality of evidence-taking and also reduce the stress placed on children when carrying out the necessary measures.

Recital 36 Professionals likely to come into contact with child victims of sexual abuse and sexual exploitation should be adequately trained to identify and deal with such victims. That training should be promoted for members of the following categories when they are likely to come into contact with child victims: police officers, public prosecutors, lawyers, members of the judiciary and court officials, child and health care personnel, but could also involve other groups of persons who are likely to encounter child victims of sexual abuse and sexual exploitation in their work.

Article 23.1 Member States shall take appropriate measures, such as education and training, to discourage and reduce the demand that fosters all forms of sexual exploitation of children.

Article 23.3 Member States shall promote regular training for officials likely to come into contact with child victims of sexual abuse or exploitation, including front-line police officers, aimed at enabling them to identify and deal with child victims and potential child victims of sexual abuse or exploitation.

Recital 35 Regarding the system of reporting sexual abuse and sexual exploitation of children and helping children in need, hotlines under the number 116 000 for missing children, 116 006 for victims of crime and 116 111 for children, as introduced by Commission Decision 2007/116/EC of 15 February 2007 on reserving the national numbering beginning with 116 for harmonised numbers for harmonised services of social value (1), should be promoted and experience regarding their functioning should be taken into account.

Recital 44 Member States are encouraged to create mechanisms for data collection or focal points, at the national or local levels and in collaboration with civil society, for the purpose of observing and evaluating the phenomenon of sexual abuse and sexual exploitation of children. In order to be able to properly evaluate the results of actions to combat sexual abuse and sexual exploitation of children and child pornography, the Union should continue to develop its work on methodologies and data collection methods to produce comparable statistics.
**Awareness Raising**

**Recital 34** Member States should establish and/or strengthen policies to prevent sexual abuse and sexual exploitation of children, including measures to discourage and reduce the demand that fosters all forms of sexual exploitation of children, and measures to reduce the risk of children becoming victims, by means of, information and awareness-raising campaigns, and research and education programmes. In such initiatives, Member States should adopt a child-rights based approach. Particular care should be taken to ensure that awareness-raising campaigns aimed at children are appropriate and sufficiently easy to understand. The establishment of help-lines or hotlines should be considered.

**Recital 45** Member States should take appropriate action for setting up information services to provide information on how to recognise the signs of sexual abuse and sexual exploitation.

**Prevention**

**Recital 33** see preventative measures re child sex tourism

**Recital 34** see above awareness raising/ & research & education... child friendly materials... establishment of help lines and hotlines

**Recital 37** intervention programmes or measures.

**Article 21** measures against advertising child sex tourism

**Article 22** Member States shall take the necessary measures to ensure that persons who fear that they might commit any of the offences referred to in Articles 3 to 7 may have access, where appropriate, to effective intervention programmes or measures designed to evaluate and prevent the risk of such offences being committed.

**Article 23 1.** Member States shall take appropriate measures, such as education and training, to discourage and reduce the demand that fosters all forms of sexual exploitation of children.

2. Member States shall take appropriate action, including through the Internet, such as information and awareness-raising campaigns, research and education programmes, where appropriate in cooperation with relevant civil society organisations and other stakeholders, aimed at raising awareness and reducing the risk of children, becoming victims of sexual abuse or exploitation.

3. Member States shall promote regular training for officials likely to come into contact with child victims of sexual abuse or exploitation, including front-line police officers, aimed at enabling them to identify and deal with child victims and potential child victims of sexual abuse or exploitation.
OTHER PROVISIONS CONCERNING CONTACT WITH CHILDREN OR IMAGES OF CHILDREN

Recital 40 Where the danger posed by the offenders and the possible risks of repetition of the offences make it appropriate, convicted offenders should be temporarily or permanently prevented from exercising at least professional activities involving direct and regular contacts with children. Employers when recruiting for a post involving direct and regular contact with children are entitled to be informed of existing convictions for sexual offences against children entered in the criminal record, or of existing disqualifications. For the purposes of this Directive, the term ‘employers’ should also cover persons running an organisation that is active in volunteer work related to the supervision and/or care of children involving direct and regular contact with children. The manner in which such information is delivered, such as for example access via the person concerned, and the precise content of the information, the meaning of organised voluntary activities and direct and regular contact with children should be laid down in accordance with national law.

Article 25. 1. Member States shall take the necessary measures to ensure the prompt removal of web pages containing or disseminating child pornography hosted in their territory and to endeavour to obtain the removal of such pages hosted outside of their territory.

2. Member States may take measures to block access to web pages containing or disseminating child pornography towards the Internet users within their territory. These measures must be set by transparent procedures and provide adequate safeguards, in particular to ensure that the restriction is limited to what is necessary and proportionate, and that users are informed of the reason for the restriction. Those safeguards shall also include the possibility of judicial redress.

Right to compensation: Article 20 (2). Member States shall ensure that child victims have, without delay, access to legal counselling and, in accordance with the role of victims in the relevant justice system, to legal representation, including for the purpose of claiming compensation.

Right to non-prosecution/non-punishment: Recital 30 Moreover, child victims should be protected from penalties, for example under national legislation on prostitution, if they bring their case to the attention of competent authorities.

Article 14 Member States shall, in accordance with the basic principles of their legal systems take the necessary measures to ensure that competent national authorities are entitled not to prosecute or impose penalties on child victims of sexual abuse and sexual exploitation for their involvement in criminal activities, which they have been compelled to commit as a direct consequence of being subjected to any of the acts referred to in Article 4(2), (3), (5) and (6), and in Article 5(6).

Removing/blocking images:

(46) Child pornography, which constitutes child sexual abuse images, is a specific type of content which cannot be construed as the expression of an opinion. To combat it, it is necessary to reduce the circulation of child sexual abuse material by making it more difficult for offenders to upload such content onto the publicly accessible web. Action is therefore necessary to remove the content and apprehend those guilty of making, distributing or downloading child sexual abuse images. With a view to supporting the Union’s efforts to combat child pornography, Member States should use their best endeavours to cooperate with third countries in seeking to secure the removal of such content from servers within their territory.
(47) However, despite such efforts, the removal of child pornography content at its source is often not possible when the original materials are not located within the Union, either because the State where the servers are hosted is not willing to cooperate or because obtaining removal of the material from the State concerned proves to be particularly long. Mechanisms may also be put in place to block access from the Union’s territory to Internet pages identified as containing or disseminating child pornography. The measures undertaken by Member States in accordance with this Directive in order to remove or, where appropriate, block websites containing child pornography could be based on various types of public action, such as legislative, non-legislative, judicial or other. In that context, this Directive is without prejudice to voluntary action taken by the Internet industry to prevent the misuse of its services or to any support for such action by Member States. Whichever basis for action or method is chosen, Member States should ensure that it provides an adequate level of legal certainty and predictability to users and service providers. Both with a view to the removal and the blocking of child abuse content, cooperation between public authorities should be established and strengthened, particularly in the interests of ensuring that national lists of websites containing child pornography material are as complete as possible and of avoiding duplication of work. Any such developments must take account of the rights of the end users and comply with existing legal and judicial procedures and the European Convention for the Protection of Human Rights and Fundamental Freedoms and the Charter of Fundamental Rights of the European Union. The Safer Internet Programme has set up a network of hotlines the goal of which is to collect information and to ensure coverage and exchange of reports on the major types of illegal content online.
Annex 3

Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (‘Lanzarote Convention’)
Avoiding repeat or secondary victimisation of victims

**Article 30. 2** Each Party shall adopt a protective approach towards victims, ensuring that the investigations and criminal proceedings do not aggravate the trauma experienced by the child and that the criminal justice response is followed by assistance, where appropriate...

**Article 31. 1** Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by: ...; b. ensuring, at least in cases where the victims and their families might be in danger, that they may be informed, if necessary, when the person prosecuted or convicted is released temporarily or definitively; ... f. providing for their safety, as well as that of their families and witnesses on their behalf, from intimidation, retaliation and repeat victimisation; g. ensuring that contact between victims and perpetrators within court and law enforcement agency premises is avoided, unless the competent authorities establish otherwise in the best interests of the child or when the investigations or proceedings require such contact.

Ensuring the best interests is a primary consideration in the application of the obligations in the Directives

Considering that every child has the right to such measures of protection as are required by his or her status as a minor, on the part of his or her family, society and the State;

... Considering that the well-being and best interests of children are fundamental values shared by all member States and must be promoted without any discrimination;

**Article 30 1** Each Party shall take the necessary legislative or other measures to ensure that investigations and criminal proceedings are carried out in the best interests and respecting the rights of the child.

**Article 31. 1** Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by: ...; g. ensuring that contact between victims and perpetrators within court and law enforcement agency premises is avoided, unless the competent authorities establish otherwise in the best interests of the child or when the investigations or proceedings require such contact.

Non-discrimination

**Article 2** The implementation of the provisions of this Convention by the Parties, in particular the enjoyment of measures to protect the rights of victims, shall be secured without discrimination on any ground such as sex, race, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth, sexual orientation, state of health, disability or other status.
Taking due account of the views of the child

Article 14. 1 Each Party shall take the necessary legislative or other measures to assist victims, in the short and long term, in their physical and psycho-social recovery. Measures taken pursuant to this paragraph shall take due account of the child’s views, needs and concerns.

Article 31. 1 Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by: ... c enabling them, in a manner consistent with the procedural rules of internal law, to be heard, to supply evidence and to choose the means of having their views, needs and concerns presented, directly or through an intermediary, and considered;

TARGET GROUP

Provisions concerning identifying victims, including specific provisions identifying children as a victim of crime, such as age assessment provisions

Article 3 a. “child” shall mean any person under the age of 18 years; b. “sexual exploitation and sexual abuse of children” shall include the behaviour as referred to in Articles 18 to 23 of this Convention; c “victim” shall mean any child subject to sexual exploitation or sexual abuse.

Article 11. 2 Each Party shall take the necessary legislative or other measures to ensure that when the age of the victim is uncertain and there are reasons to believe that the victim is a child, the protection and assistance measures provided for children shall be accorded to him or her pending verification of his or her age.

Article 14. 4 Each Party shall take the necessary legislative or other measures to ensure that the persons who are close to the victim may benefit, where appropriate, from therapeutic assistance, notably emergency psychological care.

Article 34.2 Each Party shall take the necessary legislative or other measures to ensure that uncertainty as to the actual age of the victim shall not prevent the initiation of criminal investigations.

Article 35. 3 When the age of the victim is uncertain and there are reasons to believe that the victim is a child, the measures established in paragraphs 1 and 2 shall be applied pending verification of his or her age.

ASSISTANCE & SUPPORT

Provision of information

Article 31. 1 Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by: a informing them of their rights and the services at their disposal and, unless they do not wish to receive such information, the follow-up given to their complaint, the charges, the general progress of the investigation or proceedings, and their role therein as well as the outcome of their cases;

Article 31. 2 Each Party shall ensure that victims have access, as from their first contact with the competent authorities, to information on relevant judicial and administrative proceedings.

Article 31. 6 Each Party shall ensure that the information given to victims in conformity with the provisions of this article is provided in a manner adapted to their age and maturity and in a language that they can understand.
| **Right to interpretation & translation** | **Article 31. 6** Each Party shall ensure that the information given to victims in conformity with the provisions of this article is provided in a manner adapted to their age and maturity and in a language that they can understand. |
| **Provision of assistance & support** | **Article 14. 1** Each Party shall take the necessary legislative or other measures to assist victims, in the short and long term, in their physical and psycho-social recovery. Measures taken pursuant to this paragraph shall take due account of the child’s views, needs and concerns. |

|  | 2 Each Party shall take measures, under the conditions provided for by its internal law, to co-operate with non-governmental organisations, other relevant organisations or other elements of civil society engaged in assistance to victims. |
|  | 3 When the parents or persons who have care of the child are involved in his or her sexual exploitation or sexual abuse, the intervention procedures taken in application of Article 11, paragraph 1, shall include: |
|  | – the possibility of removing the alleged perpetrator; |
|  | – the possibility of removing the victim from his or her family environment. The conditions and duration of such removal shall be determined in accordance with the best interests of the child. |
|  | 4 Each Party shall take the necessary legislative or other measures to ensure that the persons who are close to the victim may benefit, where appropriate, from therapeutic assistance, notably emergency psychological care. |

| None | **Article 31. 1** Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by: |
|  | – d providing them with appropriate support services so that their rights and interests are duly presented and taken into account; |

| None | **Article 31. 5** Each Party shall provide, by means of legislative or other measures, in accordance with the conditions provided for by its internal law, the possibility for groups, foundations, associations or governmental or non-governmental organisations, to assist and/or support the victims with their consent during criminal proceedings concerning the offences established in accordance with this Convention. |

| **Individual assessment of each child’s circumstances and non-offending family members’ needs** | None |
| **Circle of Trust provisions** | **Article 14. 3** When the parents or persons who have care of the child are involved in his or her sexual exploitation or sexual abuse, the intervention procedures taken in application of Article 11, paragraph 1, shall include: |
|  | – the possibility of removing the alleged perpetrator; |
|  | – the possibility of removing the victim from his or her family environment. The conditions and duration of such removal shall be determined in accordance with the best interests of the child. |
**Representation where appropriate for children deprived of parental care or where their interests conflict with those of their parents**

*Article 31. 4 Each Party shall provide for the possibility for the judicial authorities to appoint a special representative for the victim when, by internal law, he or she may have the status of a party to the criminal proceedings and where the holders of parental responsibility are precluded from representing the child in such proceedings as a result of a conflict of interest between them and the victim.*

**Legal counselling and representation**

*Article 31. 3 Each Party shall ensure that victims have access, provided free of charge where warranted, to legal aid when it is possible for them to have the status of parties to criminal proceedings.*

**REPORTING/INVESTIGATION/COURT PROCEEDING**

**Reporting**

*Article 25. 6 For the prosecution of the offences established in accordance with Articles 18, 19, 20, paragraph 1.a, and 21 of this Convention, each Party shall take the necessary legislative or other measures to ensure that its jurisdiction as regards paragraphs 1.d and e is not subordinated to the condition that the prosecution can only be initiated following a report from the victim or a denunciation from the State of the place where the offence was committed.*

*Article 32. Each Party shall take the necessary legislative or other measures to ensure that investigations or prosecution of offences established in accordance with this Convention shall not be dependent upon the report or accusation made by a victim, and that the proceedings may continue even if the victim has withdrawn his or her statements.*

*Article 12. 1 Each Party shall take the necessary legislative or other measures to ensure that the confidentiality rules imposed by internal law on certain professionals called upon to work in contact with children do not constitute an obstacle to the possibility, for those professionals, of their reporting to the services responsible for child protection any situation where they have reasonable grounds for believing that a child is the victim of sexual exploitation or sexual abuse.*

*2 Each Party shall take the necessary legislative or other measures to encourage any person who knows about or suspects, in good faith, sexual exploitation or sexual abuse of children to report these facts to the competent services.*

*Article 13; Each Party shall take the necessary legislative or other measures to encourage and support the setting up of information services, such as telephone or Internet helplines, to provide advice to callers, even confidentially or with due regard for their anonymity.*
### Adapted procedures in investigations and judicial proceedings involving children

**Article 30.** 1 Each Party shall take the necessary legislative or other measures to ensure that investigations and criminal proceedings are carried out in the best interests and respecting the rights of the child.

2 Each Party shall adopt a protective approach towards victims, ensuring that the investigations and criminal proceedings do not aggravate the trauma experienced by the child and that the criminal justice response is followed by assistance, where appropriate.

3 Each Party shall ensure that the investigations and criminal proceedings are treated as priority and carried out without any unjustified delay.

4 Each Party shall ensure that the measures applicable under the current chapter are not prejudicial to the rights of the defence and the requirements of a fair and impartial trial, in conformity with Article 6 of the Convention for the Protection of Human Rights and Fundamental Freedoms.

**Article 31.** 1 Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by: [see a – g elsewhere in the table]
CRIMINAL INVESTIGATION:
The same persons, if possible and where appropriate, conduct all interviews with children

Article 35.1 Each Party shall take the necessary legislative or other measures to ensure that:

d the same persons, if possible and where appropriate, conduct all interviews with the child;

CRIMINAL INVESTIGATION:
Interviews of victims of sexual violence, gender-based violence or violence in close relationships being carried out by persons of the same sex

None

CRIMINAL INVESTIGATION:
The number of interviews is as limited as possible and interviews are carried out only where strictly necessary and for the purpose of the investigations and proceedings

Article 35.1 Each Party shall take the necessary legislative or other measures to ensure that:

e the number of interviews is as limited as possible and in so far as strictly necessary for the purpose of criminal proceedings;

CRIMINAL INVESTIGATION:
Accompaniment by legal representative or where appropriate by an adult of his or her choice unless a reasoned decision has been made to the contrary in respect of that person.

Article 35.1 Each Party shall take the necessary legislative or other measures to ensure that:

f the child may be accompanied by his or her legal representative or, where appropriate, an adult of his or her choice, unless a reasoned decision has been made to the contrary in respect of that person.

CRIMINAL INVESTIGATION/COURT PROCEEDING All interviews with a child victim or where appropriate a child witness, may be audio-visually recorded and that such recordings may be used as evidence in criminal court proceedings

Article 35.2 Each Party shall take the necessary legislative or other measures to ensure that all interviews with the victim or, where appropriate, those with a child witness, may be videotaped and that these videotaped interviews may be accepted as evidence during the court proceedings, according to the rules provided by its internal law.
| COURT PROCEEDING: Possibility to order that the hearing take place without the presence of the public | Article 36.2 Each Party shall take the necessary legislative or other measures to ensure, according to the rules provided by its internal law, that:  
\begin{itemize} 
  \item [a] the judge may order the hearing to take place without the presence of the public; 
\end{itemize} |
|---|---|
| COURT PROCEEDING: Possibility to order that the child victim be heard through the use of appropriate communication technologies | Article 36.2 Each Party shall take the necessary legislative or other measures to ensure, according to the rules provided by its internal law, that:  
\begin{itemize} 
  \item [b] the victim may be heard in the courtroom without being present, notably through the use of appropriate communication technologies. 
\end{itemize} |
| CRIMINAL PROCEEDINGS/GENERAL Necessary measures to protect the privacy, identity and image of child victims and to prevent the public dissemination of any information that could lead to their identification. | Article 31.1 Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by:  
\begin{itemize} 
  \item [e] protecting their privacy, their identity and their image and by taking measures in accordance with internal law to prevent the public dissemination of any information that could lead to their identification; 
\end{itemize} |
| CRIMINAL PROCEEDINGS/GENERAL Right to avoid contact between victim and offender | Article 31.1 Each Party shall take the necessary legislative or other measures to protect the rights and interests of victims, including their special needs as witnesses, at all stages of investigations and criminal proceedings, in particular by \(g\), ensuring that contact between victims and perpetrators within court and law enforcement agency premises is avoided, unless the competent authorities establish otherwise in the best interests of the child or when the investigations or proceedings require such contact. |
| Necessary measures to find durable solutions for unaccompanied children who have been trafficked | n/a |
Training & tools

Article 5.1 Each Party shall take the necessary legislative or other measures to encourage awareness of the protection and rights of children among persons who have regular contacts with children in the education, health, social protection, judicial and law-enforcement sectors and in areas relating to sport, culture and leisure activities.

2 Each Party shall take the necessary legislative or other measures to ensure that the persons referred to in paragraph 1 have an adequate knowledge of sexual exploitation and sexual abuse of children, of the means to identify them and of the possibility mentioned in Article 12, paragraph 1.

3 Each Party shall take the necessary legislative or other measures, in conformity with its internal law, to ensure that the conditions to accede to those professions whose exercise implies regular contacts with children ensure that the candidates to these professions have not been convicted of acts of sexual exploitation or sexual abuse of children.

Article 34.1 Each Party shall adopt such measures as may be necessary to ensure that persons, units or services in charge of investigations are specialised in the field of combating sexual exploitation and sexual abuse of children or that persons are trained for this purpose. Such units or services shall have adequate financial resources.

Article 35.1 Each Party shall take the necessary legislative or other measures to ensure that:

- interviews with the child are carried out by professionals trained for this purpose;

Article 36.1 Each Party shall take the necessary legislative or other measures, with due respect for the rules governing the autonomy of legal professions, to ensure that training on children’s rights and sexual exploitation and sexual abuse of children is available for the benefit of all persons involved in the proceedings, in particular judges, prosecutors and lawyers.
Article 10. 1 Each Party shall take the necessary measures to ensure the co-ordination on a national or local level between the different agencies in charge of the protection from, the prevention of and the fight against sexual exploitation and sexual abuse of children, notably the education sector, the health sector, the social services and the law-enforcement and judicial authorities.

2 Each Party shall take the necessary legislative or other measures to set up or designate: a. independent competent national or local institutions for the promotion and protection of the rights of the child, ensuring that they are provided with specific resources and responsibilities...;

3 Each Party shall encourage co-operation between the competent state authorities, civil society and the private sector, in order to better prevent and combat sexual exploitation and sexual abuse of children.

Article 11. 1 Each Party shall establish effective social programmes and set up multidisciplinary structures to provide the necessary support for victims, their close relatives and for any person who is responsible for their care.

Article 13. Each Party shall take the necessary legislative or other measures to encourage and support the setting up of information services, such as telephone or Internet helplines, to provide advice to callers, even confidentially or with due regard for their anonymity.

Article 14. 2 Each Party shall take measures, under the conditions provided for by its internal law, to co-operate with non-governmental organisations, other relevant organisations or other elements of civil society engaged in assistance to victims.

International cooperation

Article 38. 1 The Parties shall co-operate with each other, in accordance with the provisions of this Convention, and through the application of relevant applicable international and regional instruments, arrangements agreed on the basis of uniform or reciprocal legislation and internal laws, to the widest extent possible, for the purpose of:

a preventing and combating sexual exploitation and sexual abuse of children;

b protecting and providing assistance to victims;

c investigations or proceedings concerning the offences established in accordance with this Convention.

2 Each Party shall take the necessary legislative or other measures to ensure that victims of an offence established in accordance with this Convention in the territory of a Party other than the one where they reside may make a complaint before the competent authorities of their State of residence.
### Data & Monitoring

**Article 10. 2** Each Party shall take the necessary legislative or other measures to set up or designate: ..  
- mechanisms for data collection or focal points, at the national or local levels and in collaboration with civil society, for the purpose of observing and evaluating the phenomenon of sexual exploitation and sexual abuse of children, with due respect for the requirements of personal data protection.

See also Chapter X – Monitoring mechanism: at CoE level.

### Awareness Raising

**Article 5** Each Party shall take the necessary legislative or other measures to encourage awareness of the protection and rights of children among persons who have regular contacts with children in the education, health, social protection, judicial and law-enforcement sectors and in areas relating to sport, culture and leisure activities.

2. Each Party shall take the necessary legislative or other measures to ensure that the persons referred to in paragraph 1 have an adequate knowledge of sexual exploitation and sexual abuse of children, of the means to identify them and of the possibility mentioned in Article 12, paragraph 1.

**Article 6** Each Party shall take the necessary legislative or other measures to ensure that children, during primary and secondary education, receive information on the risks of sexual exploitation and sexual abuse, as well as on the means to protect themselves, adapted to their evolving capacity. This information, provided in collaboration with parents, where appropriate, shall be given within a more general context of information on sexuality and shall pay special attention to situations of risk, especially those involving the use of new information and communication technologies.

**Article 8** 1 Each Party shall promote or conduct awareness raising campaigns addressed to the general public providing information on the phenomenon of sexual exploitation and sexual abuse of children and on the preventive measures which can be taken.

2 Each Party shall take the necessary legislative or other measures to prevent or prohibit the dissemination of materials advertising the offences established in accordance with this Convention.

**Article 9** (here or other) Each Party shall encourage the participation of children, according to their evolving capacity, in the development and the implementation of state policies, programmes or other initiatives concerning the fight against sexual exploitation and sexual abuse of children.
2. Each Party shall encourage the private sector, in particular the information and communication technology sector, the tourism and travel industry and the banking and finance sectors, as well as civil society, to participate in the elaboration and implementation of policies to prevent sexual exploitation and sexual abuse of children and to implement internal norms through self-regulation or co-regulation.

3. Each Party shall encourage the media to provide appropriate information concerning all aspects of sexual exploitation and sexual abuse of children, with due respect for the independence of the media and freedom of the press.

4. Each Party shall encourage the financing, including, where appropriate, by the creation of funds, of the projects and programmes carried out by civil society aiming at preventing and protecting children from sexual exploitation and sexual abuse.

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<tr>
<th>Prevention</th>
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<tr>
<td><strong>Article 4</strong> Each Party shall take the necessary legislative or other measures to prevent all forms of sexual exploitation and sexual abuse of children and to protect children.</td>
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<tr>
<td><strong>Article 7</strong> Each Party shall ensure that persons who fear that they might commit any of the offences established in accordance with this Convention may have access, where appropriate, to elective intervention programmes or measures designed to evaluate and prevent the risk of offences being committed.</td>
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<th>Other (compensation.. non prosecution &amp; non punishment)</th>
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<td><strong>Article 5. 3</strong> Each Party shall take the necessary legislative or other measures, in conformity with its internal law, to ensure that the conditions to accede to those professions whose exercise implies regular contacts with children ensure that the candidates to these professions have not been convicted of acts of sexual exploitation or sexual abuse of children.</td>
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<tr>
<td><strong>Article 15.16.17</strong> Intervention programmes or measures</td>
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Annex 3