



**A content analysis of existing  
national strategies addressing  
violence against children in the EU:  
PIECES Policy Paper #1**

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## Introduction

Violence against children is widespread in every country across the world (UNICEF, 2014). One barrier to effective intervention is the failure to recognise children's experiences as being 'violence' (UNICEF, 2013). In high income countries (HICs) the historical trend has been for legal recognition of types of violence against children to grow over time, with early policy focusing largely on severe physical violence and neglect ('child cruelty') and recognition and action against child sexual abuse, exposure to domestic violence, emotional abuse and sexual exploitation following later (Parton, 1985; Radford, 2012). Violence against children today has been defined in line with article 19 of the Convention on the Rights of the Child (CRC) as being 'all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse' directed at children, in any location and whether by an adult or peer perpetrator (Pinheiro, 2006). Here this broad definition of violence against children will be used together with self-harm and suicide, which is recognised as 'self-directed violence' by the World Health Organisation and often strongly associated in children with experiences of violence (WHO, 2014).

- Findings from several research studies of violence against children in Europe show that homicides are a leading cause of preventable injury and death among children. There are around 9,100 injury related deaths of children and young people aged 0-19 years in the European Union each year, one third due to intentional injury (MacKay & Vincenten, 2014).
- 18 million children across Europe have suffered some form of sexual abuse. 14% of girls and 6% of boys report at least one experience of sexual abuse during childhood (Stoltenbourg et al, 2011).
- 44 million children across the WHO European Region have experienced physical violence. Almost 1 in 4 (23%) boys and girls are victims of parental physical abuse (Sethi et al, 2013).
- 55 million children across the WHO European Region, 29% of boys and girls, have experiences some form of mental abuse (Sethi et al, 2013).
- 18% of boys and girls across the WHO European Region have experienced emotional neglect and 16% have experienced physical neglect in childhood (Sethi et al, 2013).

Rates of bullying in schools range from 45% boys and 36% girls in Lithuania to 9% of boys and 5% of girls in Sweden (Craig et al, 2009). Child suicide rates range from 6.58 suicides per 100,000 of the under 19 year old male population in Lithuania to 0.40 in Greece and from 2.09 suicides per 100,000 of the under 19 year old female population in Ireland to 0.11 in Greece (MacKay & Vincenten, 2014).

There are considerable variations in the prevalence rates for violence against children across countries in Europe (Nectoux & Sengoelge, 2015). Although poor data make cross national comparisons difficult, rates of violence tend to be generally higher in countries in Central and Eastern Europe than in Northern and Southern Europe (Sethi et al, 2013). The burden and detrimental consequences of violence for children's health, wellbeing and future prospects are well known (Gilbert et al, 2009). Global public health, human rights and violence prevention bodies have urged nation states to create systematic frameworks to respond to violence against children that are integrated into national planning processes (Pinheiro, 2006; WHO, 2014). This includes having an integrated and coordinated national strategy, policy or plan of action and laws that comply with the CRC as recommended by General Comment 13 of the United Nations and the Committee of Ministers of the Council of Europe (COE, 2009; UN, 2011). Strategies should aim to prevent and protect children from all forms of violence (EC DG Justice, 2015; UN, 2011).

Much child protection research has focused on the evaluation of specific interventions, such as a particular therapy to aid recovery (e.g., MacDonald et al, 2012) or a preventive programme such as a home visiting programme with young parents (e.g., Dodge & Lambellet Coleman, 2009). Surprisingly little research exists on the effective implementation of national policies although much is known from child protection research about what does not work well. Mapping of legislation, policy and action plans shows that many nation states across the world have plans and relevant policy to prevent and respond to violence against children but there are gaps in implementation (MacKay & Vincenten, 2014; Netherlands Youth Institute, 2013; UNICEF, 2013; WHO, 2014).

To further explore existing national policies, legislation, plans or strategies on violence against children across the EU, an in-depth investigation was included as part of the project 'Policy Investigation in Europe on Child Endangerment and Support (PIECES)'. PIECES is a two year initiative led and coordinated by the European Child Safety Alliance in partnership with experts in Austria, England, France, Lithuania, Romania and Spain, whose purpose is to conduct in-depth investigations of six policy areas in violence against children (VAC) in EU Member States provide a better understanding of how those policies are being implemented, monitored and evaluated with the intent of assisting in further defining good practice in the field (see Appendix 1 for a full description of the PIECES project).

This report presents a summary of findings from Policy area 1, which examined national policies, legislation, plans or strategies on violence against children, focusing in detail on plans and policies on child maltreatment, violence in schools and communities and self-harm and suicide.



## Rationale and Objectives

The current study builds on previous work on preventing intentional child injury in Europe by the European Child Safety Alliance (MacKay & Vincenten, 2014). While that project mapped the existence of plans, information on whether or not plans in place were implemented was not collected. Areas likely to influence implementation such as having operational definitions, creating a lead agency, providing adequate resources, etc. were not explored. These types of details make it much easier to assess how well member states are adhering to recommendations and to identify potential gaps where further action is needed. Thus this investigation looked into those details, focusing on plans and policies in three areas - child maltreatment, violence in schools and communities and self-harm and suicide. The main objectives of the research were:

- To develop and receive expert review of the evidence on effective national strategy implementation
- To survey key informants on national strategy implementation identified in the Member States
- To analyse, synthesise and report findings
- To consult with experts and disseminate findings



# Methods

## Survey development

The survey questions were developed to capture whether EU member states had comprehensive plans and policies that recognised all types of inter-personal violence against children, as well as self-directed violence, i.e. self-harm and suicide (see appendix 2). With reference to three areas i) child maltreatment by caregivers, ii) violence against children in schools and communities and iii) self-harm and suicide, the survey aimed to find out if nation states had:

- Plans that implemented the (CRC) and addressed other key issues in preventing and responding to violence;
- Addressed capacity and allocated resources for implementation and monitoring;
- Based the plans and policies on evidence from research on effective responses and on the experiences and views of children themselves.

The initial survey was drafted by the lead author and reviewed by the project team until agreement was reached on the content, phrasing, and definitions. Special attention was devoted to eliminating duplication of issues by the members of the research consortium, while still covering the highest possible range of related aspects. The internal review process was followed by an external panel of either independent or public body experts in the area of violence against children from countries including Greece, the UK, and Canada, as well as from the European charter of the International Society for the Prevention of Child Abuse and Neglect (ISPCAN). Following revisions, the survey questions were uploaded to a web-based survey platform in English only. The on-line survey and survey process were piloted in six countries (Austria, France, Lithuania, Romania, Spain and UK-England) and adjusted prior to contacting the remaining countries.

## Respondents and survey process

Purposive snowball sampling was used to develop a database of potential respondents. All 28 EU member states plus Norway were included, and due to decentralisation of responsibility for aspects of policy related to VAC in the UK, attempts were made to complete a separate survey for England, Northern Ireland, Scotland and Wales (total n=32). Contact was first made with experts identified during a previous project examining violence against children (MacKay & Vincenten, 2014) and the WHO violence & injury prevention focal points in EU member states (MS) and appropriate respondents were sought. Additional respondents were identified through PIECES project team member's professional networks and experts contacted also recommended people. The data collection process involved identifying and contacting an expert within each country who could review the proposed list of respondents for all six policy areas including existing national plans and policies, recommend alternative respondents if needed, and assist in encouraging completion of the survey by those invited to participate. Following this an email inviting participation was then sent to each potential respondent along with a letter of support from the main funder - Directorate General of Justice and Consumers - and a web link and passwords to allow completion of the on-line survey. No incentive was provided to complete the questionnaire, however arrangements were also made to complete the surveys over the telephone in a few cases where there were technical or language difficulties. If the invited respondent was unable/unwilling to participate they were also asked to suggest alternate respondents. Invited respondents were contacted up to 10 times (minimum 3

contacts), prior to moving onto an alternate respondent. No ethics review was sought as no confidential information was gathered other than respondent identity and they were assured this would be kept confidential.

Data collection for the remaining countries initially took place over a 6-month period from May to October but was extended to January 2015 in an attempt to increase the response rate. Completed surveys were converted to an Excel spreadsheet and distributed to the lead author for review and analysis.

## Data Analysis

Due to the small numbers of countries covered the scope for statistical analysis was limited and the analysis is mostly descriptive and thematic. An SPSS database was created to produce descriptive statistics. In addition, answers to open ended survey questions provided by 13 country respondents were extracted from the Excel data sheet, pasted into a Word file and analysed thematically.

## Results

### Response

The response rate to the survey was 59%, with responses provided by 19 out of the 32 countries (counting Scotland, Northern Ireland, England and Wales separately). Two countries, Austria and Sweden, provided limited and incomplete answers. A second country respondent, from England, seems to have misunderstood the focus of the survey and offered no data at all on current policy, focusing only on the contested observation that England lacks a national plan of action to prevent and respond to violence against children. It is not known whether or not other respondents had similar misunderstandings that may have influenced the answers given. Two country contacts, Bulgaria and Norway, did not complete the survey but instead sent copies of their national strategies. The plans addressed many questions covered in the survey so data was entered directly from the national action plan on to the survey form. In one country, Scotland, the expert informants were too busy to complete the survey but agreed instead to verify information the principal researcher gained from her own search online for relevant strategies, national plans and policies. Where data was incomplete for a country the non-responses have been scored as negative responses and included in the overall totals. Among the 19 country respondents, seven (37%) were members of a government department, seven (37%) were academics/ senior practitioners and five (26%) were working in violence prevention or child protection focused non-government organisations (NGOs).

### Definitions and issues covered

Failure to operationalise a comprehensive and agreed definition of violence among EU member states hinders cross national comparison, impacts on monitoring and is highly likely to influence recognition of the problem. Ten out of nineteen countries (53%) surveyed had an agreed definition of violence against children. Nine countries (47%) had an agreed definition of child maltreatment. Definitions and concepts in some other countries exist but are scattered across different source documents. As a respondent from Slovakia remarked: 'Although there is not a definition of child maltreatment per se, several legally acknowledged terms refer to it, including child abuse, neglect and torture.'



Seventeen out of the nineteen countries (89%) had a plan or policy on violence against children. All covered child maltreatment. Twelve countries (63%) had a policy on school or community violence. Six states (32%) had a policy to prevent child suicide and/or self-harm. The 17 states with a policy on violence against children are shown in Table 1. Where information on the dates of the plan was provided, most had relatively recently updated or agreed a national action plan, although the respondent for Romania reported an end date for the national plan for child maltreatment of 2013.

To assess their breadth and scope, respondents were asked which specific areas of 'violence' their national plans/strategies/policies addressed. The results for the 28 possible options available are shown in Table 2. (Belgium and Sweden have been excluded due to the non-response to these questions).

**Table 1 – National action plans/policies on violence against children showing dates for implementation**

Country	Start date CM* plan	End date CM plan	Start date SV** plan	End date SV plan	Start date Suicide plan	End date Suicide plan
Belgium	Not given	Not given	No plan	-	No plan	-
Bulgaria	2008	2018	2008	2018	No plan	-
Croatia	2011	2016	No plan	-	2011	2013
Czech Republic	2008	2018	No plan	-	No plan	-
Denmark	2013	2016	Not given	Not given	No plan	-
Finland	2014	2019	2003	Not given	2010	2014
Greece	2014	Not given	2014	Not given	No plan	-
Italy	2014	2016	2014	2015	No plan	-
Lithuania	2011	2015	2004	2014	2014	2016
Luxembourg	Not given	Not given	Not given	Not given	No plan	-
Netherlands	2012	2016	Not given	Not given	No plan	-
Norway	Not given	Not given	No plan	-	No plan	-
Romania	2008	2013	Not given	Not given	No plan	-
Scotland	Not given	Not given	Not given	Not given	No plan	No plan
Slovakia	2014	2016	No plan	-	No plan	-
Spain	2013	2016	2013	2016	2010	Not given
Sweden	Not given	Not given	Not given	Not given	Not given	Not given

\*CM = child maltreatment plan; \*\*SV = school or community violence plan.



Table 2: Types of violence against children covered by national\* policies or plans

Type of violence	BG	HR	CZ	DK	FI	EL	IT	LT	LU	NL	NO	RO	UK2	SK	ES
Physical violence in the family	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
Child neglect	✓		✓	✓	✓	✓	✓		✓		✓	✓	✓	✓	✓
Child abandonment			✓	✓				✓				✓			✓
Child sexual abuse	✓		✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Child sexual exploitation	✓		✓	✓		✓	✓	✓			✓			✓	✓
Corporal punishment			✓	✓	✓				✓		✓	✓		✓	✓
Emotional abuse			✓	✓	✓	✓	✓	✓			✓		✓	✓	✓
Exposure to domestic violence		✓	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓
Intimate partner violence				✓							✓				✓
Child prostitution	✓	✓	✓	✓		✓	✓				✓	✓		✓	✓
Child pornography		✓	✓	✓			✓				✓	✓		✓	✓
Child solicitation/grooming		✓	✓	✓			✓	✓			✓			✓	✓
Bullying and/or cyber bullying			✓	✓		✓	✓	✓		✓	✓		✓	✓	✓
Peer violence				✓				✓			✓		✓		✓
Gang violence				✓											✓
Violence in schools	✓		✓	✓		✓	✓	✓			✓	✓	✓		✓
Violence in workplaces	✓		✓	✓			✓					✓			✓
Community violence	✓		✓	✓		✓	✓	✓			✓	✓	✓		✓
Violence in 'care'			✓	✓			✓	✓			✓	✓			✓
Violence in the justice system	✓			✓		✓	✓				✓	✓		✓	✓
Force or restraint in secure accommodation				✓											✓
Online abuse	✓		✓	✓			✓	✓			✓		✓		
FGM			✓	✓	✓						✓		✓		✓
Forced marriage			✓	✓							✓		✓		✓
Child marriage			✓	✓											✓
Harmful traditional practices			✓	✓							✓				✓
Self harm			✓					✓			✓				
Suicidal behaviour			✓					✓			✓				✓

\*Codes used to identify countries are the two letter ISO country codes, BG Bulgaria, HR Croatia, CZ Czech Republic, DK Denmark, FI Finland, EL Greece, IT Italy, LT Lithuania, LU Luxembourg, NL Netherlands, NO Norway, RO Romania, UK2 Scotland, SK Slovakia, ES Spain.



A summary of some of the key areas of violence against children covered in the plans and policies is presented in Table 3. Belgium and Sweden have been excluded due to the non-response to these questions.

**Table 3: Summary of policy, plan and strategy types**

Policy , plan or strategy type	YES (#)	NO (#)
Policy, plan or strategy on any type of VAC	17	2 (Total N=19)
Broad focus (policy, plan or strategy covers 23-26 types of VAC)	4	11 (Total N=15)
Medium range (covers 10-16 types of VAC)	7	8
Narrow focus (covers 4-6 types of VAC)	4	11
Physical violence	14	1
Corporal punishment	8	7
Sexual abuse	13	2
Sexual exploitation	9	6
Neglect	12	3
Exposure to domestic violence	12	3
Abandonment	5	10
School violence	10	5
Suicide and/or self-harm	6	9

Totalling the number of types of violence addressed in national plans or policies, the 15 countries providing responses to these questions, divided into three groups, those with a broad focus covering a wide range of issues (Spain, Denmark, Norway and the Czech Republic), those with a limited focus covering few areas of violence (Croatia, Finland, Luxemburg, Netherlands) and those in the medium range (Bulgaria, Greece, Lithuania, Romania, Scotland and Slovakia). Apart from this clustering of national policies into broad, medium or narrow focus, there seemed to be no particular pattern to the areas of violence included in the policies and plans. It may be that the areas covered reflect the history and context of the problems and responses that have developed in each particular country.

The most commonly covered areas of violence against children to be addressed by plans/strategies/policies were physical violence (87%) and sexual abuse (80%), followed by neglect and exposure to domestic violence (both 73%), corporal punishment (53%), school violence (67%) and sexual exploitation (53%). Plans covering child abandonment and suicide/self-harm were less frequently mentioned with only five states having plans on child suicide/self-harm (Croatia, Finland, Lithuania, Norway and Spain) and five states with plans including abandonment (Croatia, Denmark, Lithuania, Romania and Spain). Least likely to appear in plans were gang violence and the use of force or restraint against children in secure accommodation (only mentioned by Denmark and Spain).

Looking at the qualitative responses to open ended questions, the respondent from Belgium pointed out that different definitions of 'violence' exist in different communities:

“We use 2 definitions of child maltreatment, one for each Community (French and Flemish. Flemish community uses the definition in Article 19 § 1 of the UN Convention on the Rights of the Child (...all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child). French community defines child maltreatment as any situation of physical violence, physical abuse, sexual abuse, psychological abuse or gross negligence that compromise the physical, psychological or emotional development; an attitude or behaviour (of the) abuser may be intentional or unintentional.”



The Belgium respondent also pointed out that different plans exist for the two communities.

“We don't have ONE plan in our country. We have several plans en fonction of the thema or en fonction of the community: - for the French community: “Plan d'actions du Gouvernement de la Communauté française au Parlement de la Communauté française relatif à l'application de la Convention internationale des droits de l'enfant - décret du 28 janvier 2004» - for Flemish community : «Vlaams actie plan kinderrechten 2011-2014» - at federal level : «The fight against trafficking in human beings - Action Plan 2012-2014.”

The survey was not able to assess in more detail whether or not these differences between policies could cause contradictions that impact on effective implementation. It is possible that these policy contradictions were present in other member states.

## Resources and evidence

Respondents for each nation were asked to comment on just one of the plans most relevant in each of the three following areas of violence against children: child maltreatment; school or community based violence; child suicide and/or self-harm. Respondents were asked whether their national plans in these three areas of violence against children drew upon or included:

- Any research evidence on the scale and nature of the problem of violence against children;
- Research evidence on the effectiveness of interventions;
- Allocation of resources for implementation;
- Monitoring of impact.



Results are presented in Table 4. As can be seen, 60% of the plans for child maltreatment and 44% of those for school and community violence had resources allocated, just over half had some monitoring. Four out of the five states with national policies or plans on child suicide had allocated resources, five had monitoring and 3- 4 drew on research evidence to inform their responses.

For child maltreatment, plans more often drew on research into prevalence and impact and less often made reference to effective responses. Seven out of eleven states reported to have plans responding to school and community violence had drawn on research evidence on prevalence, impact and effective responses.

**Table 4: Evidence and resources issues covered in national plans and policies.**

Type of plan	Number who had a plan	Resources	Monitoring	Based on research on prevalence & impact	Based on research on effective responses
Child maltreatment	16	56% (n= 9)	44% (n=7)	75% (n=12)	63% (n=10)
School & community violence	11	36% (n=4)	45% (n=5)	64% (n=7)	64% (n=7)
Suicide and self harm	6	67% (n=4)	83% (n=5)	67% (n=4)	50% (n=3)

### Sector responsibilities covered by national policies and plans

Respondents were asked which sectors or agencies were covered by national policies and plans on child maltreatment, school and community violence and self-harm and suicide. For each type of plan up to 16 sector/agency options were available, including 'other agencies'. Four nations (Belgium, Bulgaria, Czech Republic and Sweden) did not report any sector responsibilities covered in national child maltreatment policies or plans. Responses for child maltreatment plans ranged from fourteen sectors/agencies covered (Spain and Norway) to two (Slovakia). For school and community violence, nine states reported having plans but one (Bulgaria) did not report on agencies covered. For school and community violence prevention plans, the sectors covered ranged from fourteen (Denmark, Norway, Spain) to one (Romania). For child suicide and self-harm, six states reported having plans and all but Sweden gave details of the agencies included. The sectors covered ranged from sixteen (Spain) to seven (Lithuania).

Agencies included in the three types of plans were grouped for comparison under sector headings as follows:

- Health/public health sector – covering health, emergency health, psychiatry and mental health, public health (5).
- Justice system and police sector – covering police, prisons and services working with offenders, criminal court services, family court services (5).
- Child welfare/protection sector – covering child protection and child welfare, voluntary sector and NGOs, children's commissioner/ombudsman (4).
- Education/early years sector – covering education, early years and nursery care (3).

- Drug/alcohol services (2).
- Immigration sector – covering immigration services (1).

A summary of the sectors areas covered by the three different types of plans is presented in Table 5. It should be noted that respondents were asked to refer to just one national plan or policy most relevant to child maltreatment, school and community violence and suicide and self-harm. In some cases it may be possible that the responsibilities of sectors are set out in other national policies and strategies not covered by the plan chosen by the respondent.



**Table 5: Sector responsibilities covered by national policies and plans (N)**

Sector area	Child maltreatment (total number of country plans = 16)	School (total number of country plans = 11)	Suicide (total number of country plans = 6)
Health/public health agencies	11	7	5
Justice system & police	10	4	3
Child welfare/protection	11	7	4
Education/early years	8	8	5
Drug/alcohol	7	4	4
Immigration	5	2	2
Other	0	2	0

## Content of child maltreatment policies and plans

Respondents were asked to provide information on the content of child maltreatment policies and plans. A total of 32 possible areas of content were offered for selection, as shown in Table 6. Belgium and Sweden were excluded from the analysis as no responses were given in this section.

The content areas countries most frequently covered in their plans and policies on child maltreatment were primary prevention (covered by 13 out of 14 who replied), identification of maltreated children (covered by 13 out of 14 who replied) and training for professionals (covered by 12 out of 14 who replied). The areas least likely to be included in policies and plans were child victim compensation, covered only in Denmark, prevention of self-harm, covered only by Norway and the Czech Republic, and addressing the needs of Roma and traveller children, covered by Greece, Romania and Spain.



**Table 6: Content of national\* child maltreatment policies and plans**

Content area	BG	HR	CZ	DK	FI	EL	LT	LU	NL	NO	RO	UK2	SK	ES
1. Implement CRC		✓	✓	✓	✓	✓			✓	✓		✓		
2. Lead government department	DK	✓	✓	✓	✓	✓	✓		✓	✓	✓	DK	✓	
3. Primary prevention	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓
4. Self-harm prevention			✓							✓				
5. Early intervention	✓			✓	✓					✓	✓	✓	✓	✓
6. Infant injury & death	✓		✓	✓	✓					✓		DK		✓
7. Advice for children	✓	✓		✓				✓		✓	✓	✓	✓	✓
8. Child helpline	✓		✓	✓		✓	✓		✓	✓				✓
9. Identification	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
10. Training professionals	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓	✓	✓
11. Emergency protection			✓	✓		✓		✓		✓	✓			✓
12. Assessment			✓	✓	✓					✓	✓	✓		
13. Advocacy for victims				✓	✓					✓				✓
14. Agency responsibilities				✓	✓		✓		✓	✓	✓	✓	✓	
15. Risk assessment					✓					✓		✓	✓	✓
16. Prosecution	✓			✓		✓				✓				✓
17. Child witness	✓			✓	✓	✓	✓			✓			✓	✓
18. Child protection in justice system	✓		✓	✓	✓	✓				✓			✓	✓
19. Protection migrants						✓	✓			✓	✓			✓
20. Protection of Roma children						✓					✓			✓
21. Protection disabled				✓		✓				✓	✓			✓
22. Children in poverty				✓			✓	✓		✓		✓		
23. Perpetrator treatment				✓	✓				✓	✓				✓
24. Treatment child perpetrators	✓		✓	✓						✓				✓
25. Family support	DK		✓	✓	✓		✓		✓	✓	✓	✓		✓
26. Foster care	DK			✓		✓	✓			✓	✓			✓
27. Residential care	DK			✓		✓	✓			✓	✓			✓
28. Detention				✓				✓						✓
29. Adoption				✓		✓	✓							✓
30. Case management				✓				✓		✓		✓	✓	
31. Victim therapy	✓	✓		✓		✓			✓	✓	✓	✓		✓
32. Victim compensation				✓										

✓ = topic covered

DK = don't know

\*Codes used to identify countries are the two letter ISO country codes, BG Bulgaria, HR Croatia, CZ Czech Republic, DK Denmark, FI Finland, EL Greece, IT Italy, LT Lithuania, LU Luxembourg, NL Netherlands, NO Norway, RO Romania, UK2 Scotland, SK Slovakia, ES Spain.

Using the sum totals of the content areas as a measure, Norway, Denmark and Spain emerged as having the most comprehensive child maltreatment policies or plans, covering between 24 and 28 of the 32 content areas. Croatia, Luxembourg, Netherlands and Slovakia had the least comprehensive content in policies and plans covering between 8 and 11 content areas. As respondents were asked to comment on just the ONE most relevant plan in each area of violence prevention, it is possible that other policies or plans existed that were not covered by the survey.

For the purposes of this analysis the 32 content areas were grouped under eight areas of child protection work. These were:



1. Plan or legislation to implement CRC (content area 1);
2. Prevention and early help responses (content areas 3, 4, 5, 6, 7);
3. Improving identification and assessment of maltreated and vulnerable children (content areas 8, 9, 10, 11, 12, 15);
4. Victim support and recovery (content areas 13, 17, 18, 25, 31, 32);
5. Coordination and cross sector working (content areas 2, 14, 30);
6. Equality and diversity (content areas 19, 20, 21, 22);
7. Perpetrator responses (content areas 16, 23, 24);
8. Alternative care for children (content areas 26, 27, 28, 29).

Table 7 presents a summary of responses.

**Table 7: Content areas covered by policies and plans on child maltreatment**

Country	No. of areas covered (32)*	CRC (1)	Prevention & early help (5)	Identify & Assess (6)	Victim support (6)	Coordinate (3)	Equality & diversity (4)	Perpetrator (3)	Alternative care (4)
Bulgaria	12	No	4	3	3	0	0	2	0
Croatia	6	Yes	2	1	1	1	0	0	0
Czech Republic	13	Yes	3	5	2	1	0	1	0
Denmark	28	Yes	4	5	6	3	2	3	4
Finland	15	Yes	3	4	4	2	0	1	0
Greece	15	Yes	0	3	3	1	3	1	3
Lithuania	12	No	1	2	2	2	2	0	3
Luxembourg	8	No	2	2	1	1	1	0	1
Netherlands	10	Yes	1	3	2	2	0	1	0
Norway	28	Yes	5	6	5	3	3	3	2
Romania	16	No	3	4	2	2	3	0	2
Scotland	9	Yes	2	3	1	2	0	0	0
Slovakia	11	No	3	3	2	3	0	0	0
Spain	24	No	4	5	5	0	3	3	4

\*Bracketed figures show the total number of questions on this topic.



Eight states reported having a plan or policy that implemented the CRC. Denmark, Norway and Spain had the highest numbers of content areas covered by their policies and plans across all eight content areas, although Spain scored low in the area of national coordination. Greece and Romania scored relatively high on content relating to equality and diversity. Seven states (Bulgaria, Croatia, Czech Republic, Finland, Netherlands, Scotland and Slovakia) had low content on equality and diversity and on provisions for alternative care and secure accommodation.

Open ended questions in the survey also asked about equality and diversity issues. In Luxembourg the respondent mentioned the growing economic inequality:

“Poverty is progressing in our country and recently the Minister of Health quoted the figure of 25,6% as being the risk for a child born in Luxembourg to suffer from poverty.”

For the Netherlands, reaching out to Roma children was a concern:

“The Roma/traveller’s children who cannot be reached through services as they do not have any documentation and their parents/care-givers do not go to services and/or avoid contact with officials.”

The country respondent from Denmark stressed the importance of universal provisions for children to reach the socially disadvantaged:

“Socially disadvantaged children are often socially isolated and do not have the same knowledge about their own fundamental rights - however, in Denmark the major part of young children attend public institutions (kindergardens and after-school care) and hence have access to counselling and support from adults outside their home.”

## Content of school and community violence policies and plans

Respondents were asked to provide information on the content of school and community violence policies and plans. A total of 28 possible areas of content (including ‘other’) were offered for selection. Results are shown in Table 8.

The content area countries most frequently covered in their plans and policies on school and community violence was training professionals who worked with child victims or offenders (covered by eight out of 10 who replied) followed by primary prevention, providing advice, preventing racial discrimination, implementing anti bullying policies and providing support for child victims or witnesses giving evidence in court (covered by six out of 10 who replied). The areas least likely to be included in policies and plans were regulation of prostitution, sex clubs and commercial sexual activity in communities and risk assessment (each only the included content in two national plans or policies).

Using the sum totals of the content areas as a measure, Norway, Denmark and Spain again emerged as having the most comprehensive school and community violence response plans, covering between 22 and 27 of the 28 content areas. Bulgaria, Luxembourg, Netherlands and Scotland had the least comprehensive content in policies and plans covering between three and seven content areas. The low content reported may have been because other plans or strategies covered certain issues, while respondents were asked to comment on just one strategy or national plan.



**Table 8: Content of national\* school and community violence policies and plans**

Content area	BG	DK	FI	EL	LT	LU	NL	NO	UK2	ES
1. Implement CRC			✓				✓	✓	✓	✓
2. Lead government department		✓	✓				✓	✓		✓
3. Primary prevention		✓	✓	✓			✓	✓	✓	✓
4. Early intervention		✓				✓		✓	✓	✓
5. Advice and information		✓	✓	✓	✓			✓	✓	✓
6. Control of guns		✓	✓							✓
7. Ban violence by teachers		✓	✓							✓
8. Peer support								✓	✓	✓
9. Anti-bullying policies			✓	✓	✓		✓	✓		✓
10. Safe spaces		✓	✓		✓		✓			✓
11. Protection of runaway children		✓		✓						✓
12. Prevention of racist violence		✓	✓	✓	✓			✓		✓
13. Prevention of homophobic violence		✓	✓					✓		✓
14. Prevention of violence against disabled children		✓	✓	✓				✓		✓
15. Prevention of violence against migrant children			✓	✓				✓		✓
16. Community regulation adult sex offenders		✓						✓		✓
17. Policies to control sex trade and prostitution		✓								✓
18. Control of drug and alcohol		✓	✓	✓				✓		✓
19. Child friendly reporting bullying		✓	✓			✓	✓	✓		✓
20. Child friendly reporting violence in the community		✓						✓		✓
21. Professional training	✓	✓	✓	✓	✓			✓	✓	✓
22. Assessment of violent children	✓		✓					✓		✓
23. Risk assessment								✓	✓	✓
24. Diversion of child offender from criminal justice system		✓	✓					✓		✓
25. Child witness support	✓	✓	✓			✓		✓		✓
26. Community sanctions violent children (curfews, etc.)		✓				✓		✓		✓
27. 27. Treatment of violent children		✓	✓		✓			✓		✓
28. 28. Other							✓			

✓ = topic covered

\*Codes used to identify countries are the two letter ISO country codes, BG Bulgaria, DK Denmark, FI Finland, EL Greece, LT Lithuania, LU Luxembourg, NL Netherlands, NO Norway, UK2 Scotland, ES Spain.



Again for the purposes of this analysis the 28 content areas were grouped under seven areas of child protection work. These were:

1. Plan or legislation to implement CRC (content area 1, 2);
2. Prevention and early help responses (content areas 3, 4, 5, 6, 7, 9, 10, 18);
3. Improving identification and assessment of victimised children (content areas 19, 20, 21, 22, 23);
4. Victim support and recovery (content areas 8, 25);
5. Equality and diversity (content areas 11, 12, 13, 14, 15);
6. Perpetrator responses (content areas 16, 17, 26);
7. Diversion of children from the criminal justice system (content areas 24, 27).

Table 9 presents the results. Five states were reported to have policies or plans on school and community violence that implemented the CRC (Denmark, Finland, Netherlands, Norway, Spain). Plans for Denmark, Finland and Spain scored high on prevention and early help content. All reports showed low content focusing on victim support for state policies in this area.

**Table 9: Content areas covered by policies and plans on school and community violence**

Country	No of areas covered (27)*	CRC (2)	Prevention & early help (8)	Identify & Assess (5)	Victim support (2)	Equality & diversity (5)	Perpetrator (3)	Diversion from crime (2)
Bulgaria	3	0	0	2	1	0	0	0
Denmark	22	1	7	3	2	4	3	2
Finland	19	2	7	3	1	4	0	2
Greece	9	0	4	1	0	4	0	0
Lithuania	6	0	3	1	0	1	0	1
Luxembourg	4	0	1	1	1	0	1	0
Netherlands	6	2	3	1	0	0	0	0
Norway	22	2	5	5	2	4	2	2
Scotland	7	2	3	1	1	0	0	0
Spain	27	2	8	5	2	5	3	2

\*Bracketed figures show the total number of questions on this topic. Total excludes 'other'.

## Content of child suicide and self-harm policies and plans

Only six respondents said their country had a policy on child suicide and self-harm. These countries were Croatia, Finland, Lithuania, Norway, Spain and Sweden. Respondents were asked to provide information on the content of self-harm and suicide policies and plans. A total of ten possible areas of content were offered for selection. Sweden did not answer these questions. The content areas covered by the remaining five countries' plans and policies on child suicide and self-harm were: designating a lead agency to implement

strategy, primary prevention, early help and providing advice and information for children and young people. Child death review was a content area least likely to be included in policies and plans (covered only by Finland and Spain).

Using the sum totals of the content areas as a measure, Norway, Finland and Spain emerged as having the most comprehensive child suicide and self-harm policies or plans, covering between nine and 10 of the 10 content areas. Lithuania had the least comprehensive content in policies and plans covering six content areas.



## Good practice and major developments

Respondents were asked in open ended questions to volunteer examples of good practice in implementing policies and plans from their countries.

Slovakia, Croatia and Denmark noted the benefits of effective working together across different sectors and agencies, child friendly interviewing and commitment to children's participation:

“Non formal cooperation of police Zagreb and health institution “Child protection Center of Zagreb”, great effort from Ministry of internal affairs through IPA project of staff education and child friendly room for interviews with children Ombudsman for children forming Youth Council enhancing youth participation in matters that concerns them UNICEF Office in Croatia - program “Schools with zero tolerance to violence” Croatia

“Hot-lines for children and adolescents. Counselling available in schools and day institutions. The establishment of child protection units (Barnehus) regionally. Joint efforts by police, social services and health care system.” Denmark

Advocacy and coordination were issues mentioned also by Finland:

“Finland is just about to start a pilot child advocacy center in South-Western Finland, City of Turku. The Center, LASTA, will support families and children through criminal investigations by coordinatinating the activities of all authorities involved (police, prosecution, health care, child protection) and provide crisis therapy.”

Similar themes were addressed by other respondents, highlighting the benefits of effective cross sector working, child participation and providing resources that were accessible directly to children. Other examples of good practice volunteered by respondents included: child helplines (Lithuania), child friendly interviewing (Lithuania), court ordered parenting programmes (Lithuania), home visitation programmes (Luxembourg), drug and alcohol projects for parents (Luxembourg), Kangaroo method (Luxembourg), school safety for LGBT children (Netherlands), the work of various NGOs (Romania).

Legislation and national strategies were mentioned by eight respondents as having a major impact on work against violence. Lithuania and Croatia referred to the impact of implementing the Council of Europe Convention 2007. In Greece, the National Action Plan for Human Rights was said to be significant. In Romania, Spain and the Netherlands new legislation and national plans were mentioned. In Denmark having a budget to implement the plan was important. Coordinated cross sector working in multi disciplinary teams was mentioned by Lithuania, Denmark and Spain. Finland and Croatia referred to the influence of using evidence at the national level to influence change. In Croatia an epidemiological survey of children's experiences of violence had considerable influence. In Finland an inquiry into child deaths in the family, alongside media campaigns, had been significant.



## Discussion

Although the completed surveys returned were fewer than expected the results are similar to findings in the survey recently published by the World Health Organisation (WHO, 2014). Of the 133 countries included in the WHO global progress study, 21 were EU member states and 18 of them reported having plans/strategies to respond to child maltreatment. Where there was correspondence with country reports from the present study the results tallied. The current study also confirms that the majority of states (89%) have some form of plan or policy on violence against children. More detail about the content, focus and scope for implementation of national policies and plans was collected in the present study in comparison to the global mapping projects. The current study found, despite the majority reporting having some policy on violence against children, some key areas of children's experiences were not addressed in the plans. The majority focused on child maltreatment, while fewer, 59% had a plan covering violence against children in schools and communities and 29% (5) had a plan to prevent and respond to the problem of child suicide and self-harm.

Little attention was given to resources for plans and policies or to the monitoring and evaluation of impact. Only 60% of child maltreatment plans were said to have resources specified for implementation and only 55% of school and community violence plans referred to resources. Levels of monitoring were reported to be low. Only half the child maltreatment plans and 55% of the school and community violence plans were said to be monitored for progress. These are essential elements of implementation (COE, 2009; ECDG Justice, 2015; Netherlands Youth Institute, 2013).

EU guidelines for the promotion and protection of the rights of the child stress protecting children from all forms of violence (COE, 2009) but this research found definitions and scope underpinning national plans vary considerably. Three nations, Norway, Denmark and Spain, stand out as having broad definitions and wide content coverage in their plans. More could be learned by looking in further depth at these countries' approaches. Plans that specifically aimed to implement the responsibilities of the CRC were few in number. It is widely accepted that effective action against violence against children requires both prevention to stop violence happening in the first place and effective protective responses for children who are victims. This combination of prevention and response was reported as a focus from some states but for others – Greece, Lithuania and the Netherlands – there was limited reference to prevention work. Few respondents made reference to work with the perpetrators of violence beyond using the criminal law.

Lessons on good practice gained from this research echo familiar calls for coordination across different sectors, specifying clearly agency/sector responsibilities, child participation, implementing child friendly reporting methods and ensuring that plans and policies are resourced and effectively monitored.

## Limitations

The low response rate to this survey is a limitation. Despite great efforts to try to improve the response rates, the findings cover only half the EU member states. Only one respondent was selected for each nation so there will inevitably be subjective interpretations and partial knowledge about national policies. The England example suggests that respondents may have misunderstood the focus of the survey and consequently ignored national policy and legislation on preventing and responding to violence against children, focusing narrowly instead on whether or not the nation had one strategy or action plan. In addition, where more than one strategy or plan existed, several of the questions asked the respondent to focus on the one most relevant to child maltreatment, school and community violence and suicide and self-harm.

# Conclusions and recommendations

Conclusions are inevitably tentative in light of the low response rate, however many of the recommendations made by European and global bodies such as the Council of Europe (2009), EC DG Justice (2015) the WHO (2014) or the United Nations (2011), are endorsed by the present study. There is consensus that having a plan is a crucial step in preventing and responding to violence against children. Countries without an action plan (Austria and Latvia) are likely to see benefits in adopting comprehensive plans. The broadest plans with broad definitions that address the interconnected experiences of different types of violence children may offer greater prospect of holistically addressing this widespread problem. Policies are needed that fully implement the provisions of CRC, paying attention to children's participation and agency in defining the problem, its extent, impact in context and best responses. As recommended by others, (Netherlands Youth Institute, 2013; EC DG Justice, 2015) there is scope for further cross Europe monitoring of these issues. Progress is unlikely to be seen or measured without greater attention to monitoring and evaluation. The diversity of children's experiences and the particular vulnerabilities of children in disadvantaged and vulnerable groups in different countries needs urgent attention in planning for prevention and response.



## Recommendations

1. EU member states should review the breadth and scope of policies on violence against children to address the areas of violence included in this survey.
2. Accessible and well understood definitions of violence against children are needed across Europe and within each member state so that people who have contact with children can recognise and respond consistently.
3. Plans to prevent and respond to violence against children need to be supported by adequate resources.
4. Plans to prevent and respond to violence against children need to be adequately monitored.
5. There is a need for cross European research on effective responses to prevent and respond to violence against children.
6. Policies and plans should set out clearly the roles and responsibilities of different sectors and how these can be coordinated.
7. A greater focus on prevention is needed in some national plans.
8. Lessons on planning for working with perpetrators of violence could be more widely shared across Europe.
9. There is scope to build on lessons from good and pioneering practice examples mentioned. Mechanisms to support sharing of such lessons should continue to be explored by the EU and international organisations.



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## Appendix 1 – PIECES project description

PIECES – Policy Investigation in Europe on Child Endangerment and Support was a two year initiative led and coordinated by the European Child Safety Alliance (ECSA) in partnership with experts in Austria, England, France, Lithuania, Romania and Spain. The aim of the project was to conduct in-depth investigations of select policy issues in violence against children in the EU28 plus Norway, in order to provide a better understanding of how those policies are being implemented, monitored and evaluated. The intent was that the knowledge gained will assist in further defining good practice in the field of children and violence.

The target audience for the results are national and European governments and agencies who assess, set policy and invest in the prevention of violence against and by children as well as researchers in the field of child maltreatment, with the aim of ultimately preventing violence against all children in the EU with a focus on the most vulnerable children.

The project consisted of four steps:

- Development of a key informant list of those knowledgeable on the adoption, implementation and monitoring of policies to address violence against children in the EU28 plus Norway in order to ensure collection of valid detailed data on existing policies.
- Selection of 6 policies areas for more detailed study with the input of key informants to ensure those selected would have the most benefit to the field in Europe.
- Development and implementation of online surveys addressing the six policy areas selected to capture issues such as scope, target audiences, roles and responsibilities, infrastructure, barriers and enabling factors related to adoption, implementation and monitoring of policies including the level at which these activities/factors occur (national, regional, municipal, community, etc.).
- Analysis, synthesis and expert consultation on survey results and the identification of gaps, recommendations for good practice and issues to be considered when transferring policies to other Member States and priorities for further research.

### Policy Areas explored

The six policy areas selected were:

1. Content analysis of existing national strategies addressing violence against children  
This investigation involved an in-depth look at existing national plans/strategies addressing violence against children to assess what was and was not covered. The investigation used a children's rights framework to explore the content of national strategies on VAC (covering key areas of provisions for primary prevention, protection, bringing justice, overcoming harm and child participation) and their implementation (the legal framework, system response, resources, capacity, coordination, cross sector working responsibilities). Informants were asked about the specific content of national strategies covering child maltreatment, violence against children in schools and communities, preventing child suicide.
2. Data sources on violence against children  
This investigation involved an in-depth exploration of existing routinely collected administrative data and periodic surveys in the area of violence against children, including suicide as a potential outcome of abuse.



3. Reporting and follow-up of violence against children

This investigation explored in-depth the reporting mechanisms for violence against children and the processes for following-up reported cases.

4. Evidence-based violence against children prevention efforts related to building resilience in children and positive parenting

This investigation involved an in-depth exploration of national home visitation programmes (both population-based and targeted programmes) and family support programmes (parenting programmes, etc.).

5. National Child Death Review Committees to inform policy and practice related to violence against children

This investigation involved an in-depth look at national multi-disciplinary child death review committees to identify current practices and the benefits of these reviews for improving policy and practice for preventing and responding to violence against children.

6. National awareness activities on violence against children

This investigation involved an in-depth look at national awareness raising activities related to violence against children.

Each of the six policy areas explored also looked at whether children were consulted on policy/programme development and implementation (child participation) and whether the issue of child poverty/inequalities was considered during policy/programme development, implementation or monitoring (child inequalities).

A summary report regarding the programme, working papers for the other individual policy areas and case studies of good examples of practice are available online at [www.childsafetyeurope.org/PIECES](http://www.childsafetyeurope.org/PIECES).



## Appendix 2 – Paper version of survey questionnaire

### **PIECES: Policy investigation in Europe on Child Endangerment & Support**

#### **In depth investigations - policy area #1: Content analysis of existing national plans/strategies addressing violence against children**

PIECES partner taking lead: Lorraine Radford, University of Central Lancashire, UK

This survey aims to collect information on national plans/strategies on violence against children (covering all forms of neglect and physical violence, sexual and emotional abuse, exposure to parental domestic violence, self-harm and suicide) in European Union Member States. The purpose of the survey is to identify knowledge about good practices that can be shared with policy makers across Europe to inform future planning and implementation. The survey has questions about the content of your national plan(s)/strategy(s) as well as questions on implementation. Not all the questions will be relevant across all national contexts.

As an expert in this field in your country who has agreed to take part, we ask that you please answer as many relevant questions as possible. Where you refer to strategies or guidelines and you can provide an on-line link, please do so.

**Name of respondent:** (Fill in the blank)

**Speciality:** (Fill in the blank)

**Organisation:** (Fill in the blank)

**Position in organisation:** (Fill in blank)

**Address:** (Fill in the blank)

**City:** (Fill in the blank)

**Country:** (Fill in the blank)

**Telephone:** (Fill in the blank)

**E-mail address:** (Fill in the blank)

**1. Is there a nationally agreed legal definition of violence against children in your country?**

(Yes/No – skip to 2/Don't know – skip to 2)

**If yes...**

**1a. What is the definition?** (Fill in the blank including the reference if available)

**2. Is there a nationally agreed legal definition of child maltreatment in your country?**

(Yes/No – skip to 3/Don't know – skip to 3)

**If yes...**

**2a. What is the definition?** (Fill in the blank including the reference if available)

**3. Is violence against children included in any of your country's current national plans/strategies?**

(Yes/No – skip to 33/Don't know – skip to 33)

**If yes...**

**4. Please list the current plans/strategies in your country that specifically include violence against children? (Fill in blank)**

**5. Which of the following do the current national plans/strategies that specifically include violence against children?**

(Tick all that apply)

- Physical violence in the family
- Child neglect
- Child abandonment
- Child sexual abuse
- Child sexual exploitation
- Corporal punishment
- Emotional abuse of children
- Exposure of child to domestic violence
- Dating or intimate partner violence in young people's relationships
- Child prostitution
- Child pornography
- Child solicitation/grooming
- Bullying and/or cyberbullying
- Peer to peer violence
- Gang violence
- Violence in schools
- Violence in workplaces (where minors are working)
- Violence in communities/neighbourhoods/public places
- Violence in 'care' (e.g., foster care, nurseries, care homes, etc.)
- Violence in detention or in the justice system (e.g., by the police, in young offender accommodation, etc.)
- Use of force or restraint in secure accommodation
- Online abuse



- Female genital mutilation/cutting
- Forced marriage
- Child marriage
- Harmful traditional practices
- Self harm
- Suicidal behaviour

### **CHILD MALTREATMENT**

CHILD MALTREATMENT includes physical, sexual or emotional abuse and neglect of children by adults and parents, exposure to parental domestic violence, forced marriage and harmful traditional practices, corporal punishment (e.g. ‘smacking’, etc.), dating violence/violence in young people’s own intimate relationships, violence in ‘care’, violence in detention or in the justice system, use of force or restraint in secure accommodation, online abuse.

If none of the plans/strategies mentioned in Question 3 is relevant to CHILD MALTREATMENT click [HERE](#) to jump to next section (make jump to intro before question #15).

Base your answers to questions 6 to 14 on **the ONE current plan/strategy that is most relevant in your country for CHILD MALTREATMENT issues.**

**6. What is the name of the plan/strategy you are describing as most relevant for Child Maltreatment issues?** (Fill in the blank)

**7. What time period does the plan/strategy cover?**

From (year) \_\_\_\_\_ to (year) \_\_\_\_\_

Not applicable

**8. Which of the following issues does the plan/strategy cover?**

(Tick all that apply):

- National government processes to change or enforce statutes or implement the Convention on the Rights of the Child
- Responsibilities of lead ministry/government department
- Primary prevention of violence against children (i.e. stopping it from happening in the first place)
- Preventing child suicide and self harm as a potential consequence of violence against children
- Early intervention for children identified as being vulnerable (e.g., children in gangs, in high crime areas or with criminal parents, etc.)
- Preventing violence related non accidental injuries and fatalities in infants
- Advice and information provided directly to children



- A national child line (telephone or online) advice/counselling service
- Identification of children who experience violence
- Child protection training of professionals who work with children
- Emergency protection
- Assessment of the child's needs (e.g., using a nationally standardised assessment approach)
- Advocacy for child victims
- Child protection responsibilities of specific sectors/agencies
- Standardised risk assessment and risk management
- Criminal prosecution of adult perpetrators
- Support for child witnesses giving evidence in prosecution
- Protection of children in the criminal justice system
- Protection of migrant, refugee or asylum seeking children
- Protection of Roma or traveller children
- Protection of children with disabilities
- Protection of children from lower socioeconomic groups
- Treatment and rehabilitation of adult perpetrators
- Treatment and rehabilitation of child perpetrators
- Family support to prevent maltreatment and its reoccurrence
- Foster care
- Residential care
- Detention
- Adoption
- Case review and case management
- Services or therapeutic help for child victims
- Child victim compensation (e.g., criminal injuries financial compensation)
- Other (please specify) \_\_\_\_\_



**9. Which of the following areas does the plan/strategy cover?**

(Tick all that apply)

- Resources (e.g., funding, workforce, etc.)
- Building capacity for child protection (improving workforce, filling gaps in services, etc.)
- Coordination of responses at the level of the child and family (e.g., case management by a lead professional, etc.)
- Equality and social inclusion (e.g., responding to children from vulnerable groups such as minorities, etc.)
- Monitoring progress (e.g., having progress indicators, etc.)
- Participation and accountability (e.g., involving children and young people in service design, planning, etc.)
- Other (please specify) \_\_\_\_\_

**10. Which of the following sources of information on the prevalence and/or harmful consequences of violence against children informed the plan/strategy? (Tick all that apply)**

- International research
- National research
- Expert opinion
- The media
- Consultations with children and young people
- Government inquiries
- Public consultations
- Other sources (please specify) \_\_\_\_\_
- No such information was used to inform the strategy

**11. Which of the following sources of information on effective methods to prevent and protect children from violence informed the plan/strategy?**

(Tick all that apply)

- International research
- National research
- Expert opinion
- The media
- Consultations with children and young people

- Government inquiries
- Public consultations
- Evaluation of the strategy
- Other sources (please specify) \_\_\_\_\_

**12. Which sectors or agencies are covered by the plan/strategy?**  
(Tick all that apply)

- Health (treatment and hospital care, etc.)
- Emergency services
- Psychiatric and mental health services
- Public health (surveillance and population based preventive responses)
- Police/public order
- Offender management and prisons
- Child protection/child welfare/social work services
- Criminal court system
- Family court system
- Education
- Early years services
- Drug and alcohol services
- Voluntary sector/NGOs
- Children's commissioner/ombudsman
- Immigration services
- Other (please specify) \_\_\_\_\_

**13. In the context of the plan/strategy, is there a protocol or guidance document setting out the roles and responsibilities of key agencies?**  
(Yes/No/Don't know)

If yes...

**13.a. Please provide a reference** (Fill in the blank)

**14. In implementation of the plan/strategy, which agency is the lead agency?** (Provide name of agency and sector it comes from)



## **VIOLENCE AGAINST CHILDREN IN SCHOOLS AND COMMUNITIES**

**VIOLENCE AGAINST CHILDREN IN SCHOOLS AND COMMUNITIES** includes peer-to-peer violence; gang violence; violence in schools, including bullying and cyber bullying; violence in workplaces/where minors are working; violence in communities/ neighbourhoods/public places.

If none of the plans/strategies mentioned in Question 3 is relevant to VIOLENCE IN SCHOOLS AND COMMUNITIES click [HERE](#) to jump to the next section (make jump to intro before 24).

Base your answers to questions 15 to 23 on **the ONE current plan/strategy in your country that is most relevant for VIOLENCE AGAINST CHILDREN IN SCHOOLS AND COMMUNITIES.**

**15. What is the name of the ONE current plan/strategy most relevant for VIOLENCE AGAINST CHILDREN IN SCHOOLS AND COMMUNITIES?** (Fill in the blank)

**16. What time period does the plan/strategy cover?**

From (year) \_\_\_\_\_ to (year) \_\_\_\_\_

Not applicable

**17. Which of the following issues does the plan/strategy cover?** (Tick all that apply):

- National government processes to change or enforce statutes or implement Convention on the Rights of the Child
- Responsibilities of lead ministry/government department
- Primary prevention of violence against children (i.e. stopping it from happening in the first place such as actions/classes in schools to stop bullying)
- Early intervention for vulnerable children (e.g., children in gangs, in high crime areas or with criminal parents, etc.)
- Advice and information provided directly to children
- Control of guns and knives
- Prohibition of use of violence/punishment by teachers
- Peer support in schools
- Implementation of anti-bullying policies in schools
- Provisions for safe spaces or environments for education, play or leisure activities for children
- Services to protect and support runaway children
- Policies against racist, cultural or religion based violence, harassment and discrimination against children
- Policies against homophobic violence, harassment and discrimination against children





- Policies against violence, harassment and discrimination against children with disabilities
- Policies against violence, harassment and discrimination against immigrant or asylum seeking children
- Policies to regulate or control adult sex offenders in communities
- Policies to regulate or control prostitution, solicitation, sex clubs or commercialized sexual activities in communities
- Policies to control drugs and alcohol
- Child friendly reporting procedures for bullying/cyberbullying
- Child friendly reporting procedures for violence in the community
- Training of professionals who work with child victims or offenders
- Assessment of the needs of violent children (using a nationally standardised assessment approach)
- Standardised risk assessment and risk management
- Policies to divert child offenders from the criminal justice system
- Support for child witnesses/victims of violence giving evidence in prosecution
- Provisions for sanctioning of children who commit acts of violence (e.g. detention, curfews, etc.)
- Treatment and rehabilitation services for children who commit acts of violence
- Other (please specify) \_\_\_\_\_

**18. Which of the following areas does the plan/strategy cover? (Tick all that apply)**

- Resources (e.g., funding, workforce, etc.)
- Building capacity for delivery (e.g., improving workforce, training professionals, filling gaps in services, etc.)
- Coordination of responses at the national or local level (e.g., a lead government department, community safety group, etc.)
- Equality and social inclusion (e.g., responding to children from minority groups, etc.)
- Monitoring progress (e.g., having progress indicators, etc.)
- Participation and accountability (e.g., involving children and young people in service design, planning, public reporting progress, etc.)
- Other (please specify) \_\_\_\_\_



**19. Which of the following sources of information on the prevalence and/or harmful consequences of violence against children in schools and communities informed the plan/strategy?**

(Tick all that apply)

- International research
- National research
- Expert opinion
- The media
- Consultations with children and young people
- Government inquiries
- Public consultations
- Other sources (please specify) \_\_\_\_\_
- No such information was used to inform the strategy

**20. Which of the following sources of information on effective responses to prevent and protect children from violence in schools and communities informed the plan/strategy?**

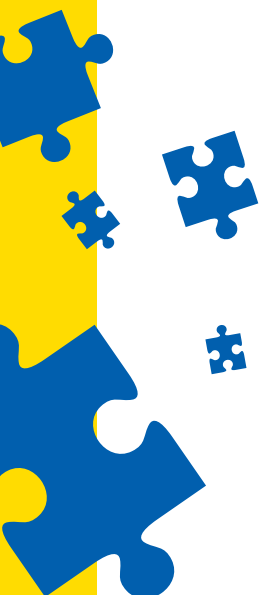
(Tick all that apply)

- International research
- National research
- Expert opinion
- The media
- Consultations with children and young people
- Government inquiries
- Public consultations
- Evaluation of the strategy
- Other sources (please specify) \_\_\_\_\_

**21. Which of the following sectors or agencies are covered by the plan/strategy?**

(Tick all that apply)

- Health (treatment and hospital care, etc.)
- Emergency services
- Psychiatric and mental health services
- Public health (surveillance and population based preventive responses)
- Police





- Offender management and prisons
- Child protection/child welfare services
- Criminal court /youth justice system
- Family court system
- Education
- Early years services
- Drug and alcohol services
- Voluntary sector
- Children's commissioner/ombudsman
- Immigration services
- Other (please specify) \_\_\_\_\_

**22. In the context of the plan/strategy is there a protocol or guidance document setting out the roles and responsibilities of key agencies?**

(Yes/No/Don't know)

If yes...

**22.a. Please provide a reference for the protocol/guidance document.** (Fill in the blank)

**23. In implementation of the plan/strategy which agency is the lead agency?** (Provide name of agency and sector it comes from) (Fill in blank)

**SUICIDE AND SELF HARM**

**SUICIDE and SELF HARM** include intentional acts of self-poisoning or self-injury irrespective of the type of motivation or degree of suicidal intent. Thus it includes suicides, suicide attempts as well as acts where little or no suicidal intent is involved (e.g. where people harm themselves to reduce internal tension, distract themselves from intolerable situations, as a form of interpersonal communication of distress or other difficult feelings, or to punish themselves.)

If none of the plans/strategies mentioned in Question 3 is relevant to SUICIDE AND SELF HARM click [HERE](#) to jump to next section (make jump to intro before 33).

Base your answers to questions 24 to 32 on **the ONE current plan/strategy that is most relevant for responding to SUICIDE AND SELF HARM.**

**24. What is the name of the ONE current plan/strategy that is most relevant to CHILD SUICIDE AND SELF HARM** (Fill in the blank).



**25. What time period does the plan/strategy cover?**

From (year) \_\_\_\_\_ to (year) \_\_\_\_\_  
Not applicable

**26. Which of the following issues does the plan/strategy cover? (Tick all that apply)**

- National government processes to change or enforce statutes or implement the Convention on the Rights of the Child
- Responsibilities of lead ministry/government department
- Primary prevention of child suicide and self harm (i.e. stopping it from happening in the first place – e.g., by policies to improve children’s mental health)
- Early intervention for vulnerable children (e.g., support for children bereaved by parental suicide, training counsellors, etc.)
- Assessment to identify vulnerable children in schools, health services, child welfare, child protection or criminal justice system
- Advice and information provided directly to children
- Policies to control drugs and alcohol
- Training of professionals who work with children to identify those vulnerable to self harm and suicide
- A nationwide child death review system that includes national reviews of child suicides
- Specialist counselling and mental health services for children who self harm or have suicidal thoughts
- Other (please specify) \_\_\_\_\_

**27. Which of the following areas does the plan/strategy cover?**

(Tick all that apply)

- Resources (e.g., funding, workforce, etc.)
- Building capacity for delivery (e.g., improving workforce, training professionals, filling gaps in services, etc.)
- Coordination of responses at the national or local level (e.g., a lead government department, etc.)
- Equality and social inclusion (e.g., responding to children from migrant or minority groups, etc.)
- Monitoring progress (e.g., having progress indicators, etc.)
- Participation and accountability (e.g., involving children and young people in service design, planning, public reporting progress, etc.)
- Other (please specify) \_\_\_\_\_



**28. Which of the following sources of information on the extent of and risk factors associated with child suicide and self harm informed the plan/strategy?**

(Tick all that apply)

- International research
- National research
- Expert opinion
- The media
- Consultations with children and young people
- Government inquiries
- Public consultations
- Other sources (please specify) \_\_\_\_\_
- No such information was used to inform the strategy

**29. Which of the following sources of information on effective responses to prevent and respond to child suicide and self harm informed the plan/strategy?**

(Tick all that apply)

- International research
- National research
- Expert opinion
- The media
- Consultations with children and young people
- Government inquiries
- Public consultations
- Evaluation of the strategy
- Other sources (please specify) \_\_\_\_\_

**30. Which of the following sectors or agencies are covered by the plan/strategy? (Tick all that apply)**

- Health (treatment and hospital care, etc.)
- Emergency services
- Psychiatric and mental health services
- Specialist mental health services for children and adolescents
- Public health (surveillance and population based preventive responses)
- Police



- Offender management and prisons
- Child protection/child welfare services
- Criminal court system
- Family court system
- Education
- Early years services
- Drug and alcohol services
- Voluntary sector
- Children's commissioner/ombudsman
- Immigration services
- Other (please specify) \_\_\_\_\_

**31. In the context of the plan/strategy is there a protocol or guidance document setting out the roles and responsibilities of key agencies?**

(Yes/No/Don't know)

If yes...

**31.a. Please provide the reference for the protocol/guidance document.** (Fill in the blank)

**32. In implementation of the plan/strategy which agency is the lead agency?** (Provide name of agency and sector it comes from) (Fill in the blank)

**EQUALITY AND MONITORING ISSUES**

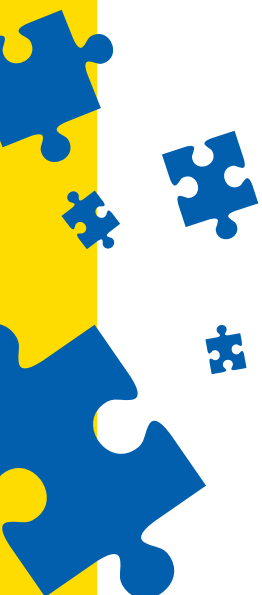
**33.** Children should be equally safe from violence regardless of their age, gender, family income, sexual orientation, disability, culture, ethnicity, immigration status, religious or political beliefs, place of residence or lifestyle.

**Are there any groups of children in your country who are less safe because they are socially disadvantaged?**

(Yes/No-skip to 36/Don't know-skip to 36)

**34. What are the main challenges in meeting these children's needs?**

(Fill in the blank)



35. Can you give any examples from your country that demonstrate good practice for responding to children's diverse needs in the area of protection against violence? (Fill in the blank)

36. Do any of your country's national strategies on violence against children have clearly specified targets for responding to or reducing any of the following? (Tick all that apply)

- Child maltreatment
- Violence in schools
- Bullying/cyber bullying
- Gang violence
- Violence in communities
- Racist violence
- Homophobic violence
- Suicide
- Self harm

37. Are there any systems in place for regular monitoring of the national strategies you described as being most relevant for:

37.a. **Child maltreatment** (Yes/No/Don't know)

37.b. **Violence in schools and communities** (Yes/No/Don't know)  
If yes...

37.b.1. **Does this include regular monitoring of actions related to bullying/cyberbullying** (Yes/No/Don't know)

37.c. **Child suicide and self harm** (Yes/No/Don't know)

38. Have any monitoring reports been published for any of the national strategies you described as being most relevant for:

38.a. **Child maltreatment** (Yes/No/Don't know)

38.b. **Violence in schools and communities** (Yes/No/Don't know)  
If yes...

38.b.1. **Does this include regular monitoring of actions related to bullying/cyberbullying** (Yes/No/Don't know)

38.c. **Child suicide and self harm** (Yes/No/Don't know)



- 39. Is there evidence from monitoring that progress has been made to meet the goals/ targets set out in the national strategies you described as being most relevant for:**
- 39.a. Child maltreatment** (Yes/No/Don't know)
  - 39.b. Violence in schools and communities** (Yes/No/Don't know)  
If yes...
    - 39.b.1. Does this include regular monitoring of actions related to bullying/ cyberbullying** (Yes/No/Don't know)
  - 39.c. Child suicide and self harm** (Yes/No/Don't know)
- 40. Countries address violence against children in different ways. What have been 3 major developments in your country in the past 3 years? (e.g., the formation of a specific organization, passage of specific policies, significant involvement of the media)? (Fill in the blank)**

**Thank you for assisting us to better understand current policies to address violence against children across the European Union.**









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