



Reporting and follow-up of violence against children in the EU: PIECES Policy Paper #3

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Introduction

The Protection of children against violence continues to be a challenging responsibility of modern states worldwide including the European Union despite the accumulation of a wide knowledgebase and numerous recent international and European treaties (UN, 2013; CE 2009; EC, 2013). These treaties acknowledge that children experiencing child abuse and neglect are at increased risk of experiencing mental health consequences in their childhood and adulthood (e.g., self-harm and suicidal ideation), physical health sequelae and delinquent behavior (Radford et al., 2011; Fry et al., 2012; Davidson, 2010). Child abuse and neglect experiences are also associated with increased service use, and low economic functioning along adult life due to difficulties with educational achievement, employment and loss of productivity (McGavock, 2014; Davidson, 2010).

European member states' governments have committed themselves both as members of the UN and as members of the EU to do all in their power to reduce violence against children and its devastating consequences. According to European Union Agency for Fundamental Rights (FRA, 2014) and following The United Nations Children's Fund (UNICEF, 2009) definition of an integrated child protection system, 'an integrated child protection system places the child at the system's centre and ... ensures that all essential actors and systems – education, health, welfare, justice, civil society, community and family – work in concert to prevent abuse, exploitation, neglect and other forms of violence against children and to protect and assist children in these situations'.

In the last 25 years, due to the boost provided by the UN Convention of the Rights of the Child (CRC), national child protection services have undergone evaluation and reform. National and local authorities as service developers have increasingly realised the need for exchange of information about effective practices in the area of child protection, starting with coming to agreement on a definition of child maltreatment. One of the first inter-country research projects, which included 16 OECD countries, found that despite a common understanding of child abuse and neglect concepts, government interventions were far from universal and followed two very different paths with regard to reporting of child maltreatment (Daro, et al., 1992). According to the author, some countries had adopted a mandatory reporting model, while others, especially in Western Europe, had adopted a more permissive, voluntary reporting system. A decade ago, the study by Bromfield and Higgins (2005) investigated policies, procedures, guidelines and documents and revealed variations between the ways nations accomplish their responsibilities towards protecting children. They describe protection systems as encompassing a broad spectrum of child and family services aimed at prevention and intervention in order to address child maltreatment, including a large range of services from home visitation and family support, to child abuse and neglect investigation and different forms of placement.

Based on the UN study on violence (2006), as well as the recent preliminary report of FRA (2014) and the authors' reports and experiences learnt in previous EU projects (BECAN, 2011), European states have an unequal distribution of referral, reporting and follow up child protection systems. As Pinheiro (2006) concludes, and all other research whether new or old confirm, only a slight percentage of the widespread prevalence of violence against children is reported and followed up. This is due to several causes and results in children not receiving the help they need. Among the identified reasons is the low capacity of collecting, recording and investigating reports of violence against children. Another

reason is the unfriendly character of child protection services that are often perceived as worsening the situation of families and children. The lack of a common definition of violence might hold back professionals to interfere in some violence situations in families, ethnic or religious groups, or communities and create unequal treatment of children or groups of children.

In November 2009, the Committee of Ministers of the Council of Europe (representing its 47 member states) adopted the “Council of Europe Policy guidelines on integrated national strategies for the protection of children from violence”. ‘The guidelines’ core recommendations call for the development of an integrated national strategy for the protection of children from violence. The strategy is understood as a multi-faceted and systematic framework fully integrated into a national policy for the promotion and protection of the rights of the child, with a specific timeframe, with realistic targets, co-ordinated and monitored by a single agency (where possible, and in conformity with national regulations), supported by adequate human and financial resources and based on current scientific knowledge. The guidelines encourage the setting up of child-friendly services and mechanisms. These are understood as safeguarding the rights of the child and pursuing children’s best interests. An important recommendation calls for the mandatory reporting by all relevant professionals of incidents of violence against children. The guidelines recommend strengthening international co-operation to prevent violence against children Europe-wide’ (Council of Europe, 2009, p.8).

Children’s rights are seen by the European Commission as fundamental rights and their respect is required by the Article 24 of the legally binding European Union Charter of Fundamental Rights (EC, 2010). In its efforts to strengthen human rights, including children’s rights and their protection against violence, the European Union has encouraged the development of community policies related to the protection of children’s rights, and the fight against trafficking in human beings and sexual exploitation (EC, 11; EC 2013). It also funded action research projects, stimulated and funded the expansion of evidence-based knowledge, awareness-raising and promotion of the ‘of zero tolerance towards violence’ campaigns, victim support programs and the reporting of incidences of violence to the competent authorities (especially by Daphne funding programs).

‘Policy Investigation in Europe on Child Endangerment and Support (PIECES)’ is a 2 year initiative led and coordinated by the European Child Safety Alliance in partnership with experts in Austria, France, Lithuania, Romania, Spain and the United Kingdom. The project is supported by the European Commission DG Justice DAPHNE programme. The purpose of the project is to conduct in-depth investigations of 6 policy issues in violence against children in the EU28, in order to provide a better understanding of how those policies are being implemented, monitored and evaluated. The project will also assist in further defining good practice in the field of children and violence (see Appendix 1 for a full description of the project).

This report presents a summary of findings from Policy area 3, titled which examined reporting mechanisms regarding violence against children and how the reports are handled within EU Member States. It includes a look at the coverage of European countries by compulsory reporting systems in this field and their accessibility by adult and child populations, describes the respondents views on the level of specialization in reporting services and points to existing gaps in training of professionals working in this field.



Rationale and Objectives

The rationale for investigating reporting systems and services is based on the recommendations of the UN report on Violence (2006) that among other commitments requires improved access and quality of support services for victims arguing that early access to quality support services can help to mitigate the impact of the violent event on the victim (Newell, 2008) and the provision of effective reporting systems for children to allow children who are victimised to reach trained professionals that may include child help-lines as well as formal mechanisms to report victimisation. The current investigation therefore looks at the coverage of European countries by mandatory reporting systems in this field and where such systems exist, whether they are accessible by adult and child populations. It also describes the respondents' view on the level of specialization in reporting services and points out the gaps existing in training of professionals working in this field. For the scope of the investigation, referral services were characterized to accept and deal with information – known reports or referrals – on children subject to violence reported by a child or any other person supporting the child.

The general scope of the research is to describe the similarities and differences in creating accessible and child-friendly reporting systems and follow up services of non-accidental violence against children in EU member states as well as to identify discrepancies in the way reports on violence against children are further handled and followed up within the child protection systems. In order to contribute to the European knowledge base, the objectives were further delineated:

- To gather EU wide expert views on policies regarding reporting systems and follow up services for cases of violence against children
- To contribute to the evaluation of EU wide progress towards integrated child protection systems by identifying gaps in the advancement to child friendly, responsive, professionalized and evidence-based services, as well as details of best practices that can be used by other countries
- To identify issues and gaps in the area of protection of children against violence that need more attention across EU countries, as well as achievements and best practices that could be transferred to other countries
- To identify needs for further research investment that could be funded by in the frame of the Horizon 2020 to improve the evidence base of service development across our EU Union countries



Methods

Survey development

The whole PIECES project is based on the CRC definition of violence, mainly article 19¹. The concept of violence is hereby used as described in the Worldwide Report on Violence by Pinheiro (2006) 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. It also draws upon the definition of violence as “the intentional use of physical force or power, threatened or actual, against a child, by an individual or group that either results in or has a high likelihood of resulting in actual or potential harm to the child’s health, survival, development or dignity.” (as in the World Report on Violence and Health, by Krug et al 2002).

Within the normative framework of the CRC allows children not only to be protected against any form of violence, but also to claim those rights if they are infringed. It also obliges duty bearers, as local, regional and governmental authorities, to develop services, manage staff and train them in order to respond to cases of violence. We therefore asked questions about the access of children, as right bearers, to get the help they need from the child protection system as well as questions regarding the way duty bearers fulfil their obligations to assure that each child can live in a family, school and community environment free of violence.

To address the scope of reporting and follow-up, our investigation included two categories of information:

- a) Indicators related to service provision on the structural dimension, reflecting on the existence of policies, procedures, guidelines and instruments necessary to respond to children in situation of violence; and
- b) process-related indicators that express the level of implementation of the provisions, procedures and instruments, as well as the level of training of personnel who implement policies at national, local or regional level.

The process of questionnaire development included several stages, beginning with addressing a large number of research questions surrounding the main recommendations of the UN Report on Violence against Children (Pinheiro, 2006) regarding reporting and follow up services for cases of violence against children: accessibility and child friendliness of the system, the professionalization of services via the existence of guidelines and procedures, the existence of underlying research and specialization through training of the personnel working in the services, and the need to focus on vulnerable children. Our questions therefore aimed to investigate whether experts in the EU’s MS report that their countries have developed accessible and child-friendly reporting systems and services involved in the administration of violence against children, who coordinates these systems and services (where exist) and if mechanisms of reporting are known both by the adult and child populations.

Another essential point in combating violence against children is the existence of a mandatory reporting system in cases of violence against children and the consequences of not reporting violence. Following the stages of case management, we also looked at

¹ Art. 19 of the CRC formulates clearly that children should be protected from all forms of violence; other articles complete the right of children to be protected, like Art. 24 (states the right to health); Art. 28/2 (school discipline without violence); Art. 37 (protection from torture and other forms of inhuman treatment or punishment); Art. 39 (the right to treatment and rehabilitation), Art. 9, 20 (separation from parents, alternative care), Art. 25 (regular review of placement) Art. 27, 24, 26, 28, 29, 31 (adequate living standard, access to health services, social security, education, rest). UN policy framework continued to evolve towards banning physical punishment General Comment No. 8 (2006) on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment (UNCRC, 1989).



how reports are documented and further handled, along with what kind of initial risk evaluation methods and instruments are used for following up reports of violence against children.

Throughout the questionnaire we asked whether services are organized and cases approached in such a way that groups of children at risk (such as children with disabilities, children belonging to minorities, Roma, and migrants) are given special attention. Another line of investigation looked at the professionalization of the workforce dealing with cases of violence against children: Is there specialized staff to receive reports? Is there a systematic training of personnel in order to ensure reporting of violence? Are there national/regional guidelines and assessment tools? Are there national/regional guidelines for following up cases of violence against children? Is there mandatory training for those who work on cases of violence against children?

The final questionnaire contains 50 questions (see appendix 2) grouped around the five main issues:

1. Reporting systems for violence against children. Distribution of the services and information for the population, including children.
2. Mandatory reporting and its consequences (what is required to be reported and by whom).
3. Investigation, risk assessment.
4. Follow-up of cases of violence against children.
5. Training of professionals working in referral and follow-up services.

The initial survey was drafted by the authors 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.



Results

Response

From the 28 EU member states plus Norway, 26 experts from 23 countries completed the survey: Austria, Belgium (2), Bulgaria, Croatia, Denmark, Finland, France, Germany (2), Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxemburg, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Spain and UK-England (2). This represents a response rate of 72% across the 32 possible surveys and covers 79% of the EU states plus Norway, leaving 21% of the member states uncovered.

In three countries more than one questionnaire was completed representing separate regions or autonomous districts of these countries (Belgium, Germany and England). Among the 23 countries with respondents, 12 (44%) were working in violence prevention or child protection focused NGOs, eight (30%) were academics/senior practitioners, seven (26%) were members of a government department, and two (7%) were other.

Reporting Systems

According to the guidelines of the Council of Europe, reporting systems are the “authorities to whom violence against children can be reported” (CE, 2009, p.24). The existence of reporting services, through which children and others can report information on situations of violence against children, was confirmed by experts in all of the respondent countries (Table 1). While for most of the countries (90%) such services were reported as available in all localities, Belgium and Spain were exceptions, where reporting was seen as possible only in cities.

Regarding the question on who can report violence against children, in 19 of the 23 responding countries (78.26%) any person can write a written report in almost all countries (except Denmark and Luxemburg) and make a report in person or by telephone, except Spain, where children can report only by phone and Austria, where only professionals can report in person (but neither children, nor family members). In the UK there are differences both between England, N. Ireland, Scotland and Wales and also within the constituent counties. For example, in some of the counties in England anybody can report by phone, online or in writing, but reporting in person is not possible because the address of the service is kept confidential. However in Norfolk county anybody can report in person or by phone.

The large majority of respondents (85%) stated that children can report being victims of violence. In the case of Germany – according to the two experts responding – there are differences between states (Bundesländern) regarding reporting by children. In North Rhine-Westphalia, only adults can report violence against children, whereas in Bavaria, child victims can only report by telephone while other children can report in person. Written reports are accepted in 20 of the 23 responding countries (87%), the exceptions being Denmark, Luxemburg, and probably Italy. In Hungary, it was noted that in the case of reports by phone, a personal or written report is also required and in Luxemburg reporting by children other than the victim cannot be made by phone. Online reporting was only possible in 16 of the 23 countries (70%).



Standardised procedures, guidelines and forms

The reporting process is standardised in 11 of the 19 countries (58%) that provided a response, as presented in Table 2.

Table 2. Standardised procedures, guidelines and forms (n=22)

	Standardised referral procedure	Specific referral forms exist	Standardised referral guidelines exist
Austria	No	No	No
Belgium	No	No	No
Bulgaria	Yes	No	Yes
Croatia	Yes	-	Yes
Denmark	Yes	Yes	Yes
France	No	No	Yes
Finland	Yes	No	No
Germany (Bavaria)	No	No	Yes
Germany (North Rhine-Westphalia)	Yes	No	Yes
Greece	Yes	No	Yes
Hungary	No	No	No
Ireland	Yes	Yes	Yes
Italy	No	No	No
Lithuania	Yes	Yes	Yes
Luxemburg	No	No	No
Netherland	Yes	No	Yes
Norway	No	Yes	No
Poland	No	No	No
Portugal	Yes	Yes	Yes
Romania	No	No	No
Slovakia	Yes	No	Yes
Spain	Yes	Yes	Yes
UK (Hertfordshire, England)	Yes	Yes	Yes



Special reporting forms exist in the following countries:

Denmark - <http://ast.dk/born-familie/underretninger/underretninger-om-born-og-unge>

Ireland - http://www.tusla.ie/uploads/content/Children_First_SRF.pdf

Lithuania - <https://www.e-tar.lt/portal/en/legalAct/TAR.6D8233F6C4E9>

Norway - www.barnevernet.no



	Reporting services	In person referrals allowed by					Telephone reports allowed by					Other means of reporting allowed	
	Where available	Child victims	Other children	Adult family members	Other adults	Professionals	Child victims	Other children	Adult family members	Other adults	Professionals	In writing	Online
Austria	All localities	No	No	No	No	No	No	No	No	Yes	Yes	Yes	Yes
Belgium	Only in cities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Bulgaria	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Croatia	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Denmark	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Finland	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
France	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Germany (Bavaria)	All localities	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
Germany (North Rhine-Westphalia)	All localities	No	No	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes
Greece	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hungary	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Ireland	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Italy	In the majority of cities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	-	-
Latvia	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Lithuania	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Luxemburg	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Netherlands	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Norway	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No



	Reporting services	In person referrals allowed by					Telephone reports allowed by					Other means of reporting allowed	
	Where available	Children allowed to report										In writing	Online
		Child victims	Other children	Adult family members	Other adults	Professionals	Child victims	Other children	Adult family members	Other adults	Professionals		
Poland	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Portugal	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Romania	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Slovakia	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Spain	Only in cities	No	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
UK (Hertfordshire, England)	All localities	No	No	No	No	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes
UK (Norfolk, England)	All localities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No



Portugal (website not provided)

Spain - <http://www.fapmi.es/contenido1.asp?sec=27&pp=1>

UK - <http://www.hertsdirect.org/docs/pdf/c/childprotectionform.pdf>

The reporting procedures are standardised in Bulgaria, Croatia, Finland, Greece, Germany, the Netherlands and Slovakia as well, but the reporting forms to be completed by professionals are not. National guidelines for accepting reports exist in 14 of the 22 countries (64%).

Children's help-lines exist in all states, except in Finland and they are free of charge in all of the countries reporting. With respect to their mandate, there are general help-lines aiming to protect children's rights as well as special help-lines addressing violence against children. Help-lines are run by NGOs in some countries and by the government in others. In Poland the help-line is run by the national Ombudsperson. Due to financial difficulties in some countries (e.g., Romania, Hungary) help-lines are functional for only a select number of hours.

"Brave Phone is non-governmental, non-profit organization established in 1997 aiming to help and protect abused and neglected children and to implement social services for children, their parents and professionals." (Slovakia).

"The 1056 Helpline first began operation in 1997. Its primary purpose was to protect and defend children's rights. In May 2007, it was recognized by the Ministry of Health and Social Solidarity as "the National Helpline for Children". It is a member of Child Helpline International. It operates throughout Greece on a 24-hour basis, 7 days a week and calls made to it from card-phones and mobiles are free." (Greece)

"In Hungary special helplines for children are not specifically aiming at violence and these cases can be reported only if children disclose the needed information and if their consent is given [...] Due to the lack of resources children helplines are not functioning 24 hours." (Hungary)

"Children's Ombudsman Helpline, dedicated to children & youth, has two functions – children's hotline and a referral telephone. Children's Ombudsman copes with all children's rights and their infringement (e.g., violence issues, emotional problems, education, and family relations). The referral on the child's right breach can be made by this hotline." (Poland)

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Anonymity of the reporting source

In 11 of 15 countries (69%) that provided answers regarding anonymity of the reporting source there is legislation that protects the anonymity of the sources in cases of suspected violence against children (Belgium, Finland, France, Germany, Lithuania, Luxembourg, the Netherlands, Romania, Slovakia, Spain and UK), while in the remaining four countries (31%) no such legislation exists (Bulgaria, Greece, Norway, and Poland). No information was provided for Austria, Croatia, Denmark, Hungary, Ireland, Italy, Latvia or Portugal.

According to respondents, on-going promotion, awareness campaigns, or other initiatives to promote reporting services or help-lines for cases of violence against children are organised in 15 of the 19 countries (79%) providing a response. Austria, Bulgaria, Hungary and Slovakia reported no such campaigns and no information was provided for Ireland, Italy, Latvia and Portugal.

Evaluation of the reporting system and services

In eight out of the 15 countries (53%) where information was available there have been previous evaluations of the reporting system (Table 3). Links to one or more evaluation reports were provided for three out of the eight countries:

- Italy: http://www.pariopportunita.gov.it/Images/relazione_def_2011-2012%20.pdf
- Spain: Compromiso con la Calidad. Sistema de Gestión de la Mejora Continua, la Información y el Conocimiento) <http://www.fapmi.es/contenido1.asp?sec=16&pp=1>
- UK: The Munro Review of Children Protection (three separate reports) <https://www.gov.uk/government/collections/munro-review>
- UK: OFSTED inspections of services: <https://www.gov.uk/government/collections/ofsted-inspections-of-local-authority-childrens-services>

In Hungary and Slovakia the experts indicated the evaluations of the reporting system were non-systematic:

“There have been some investigations made by the Ombudsman and the courts in cases of child death due to violence but no evaluation, not any substantial consequences.” (Hungary)

“Although it is not an evaluation per se, the reporting systems functioning under the state offices and institutions are currently revised due to implementation of the National Strategy on Preventing Violence against Children. The aim is to guarantee a coordinated sharing of information, as well as timely intervention.” (Slovakia)



Table 3. Evaluation of the child abuse reporting system and services (n=20)

	Reporting system evaluated	Children participate in system evaluation	Specialised personnel receive referrals	Referral service evaluated
Austria	No	No	Yes	No
Belgium	No	No	Yes	No
Bulgaria	No	No	Yes	No
Croatia	Don't know	No	Yes	Don't Know
Denmark	Yes	Don't know	Yes	Yes
Finland	No	No	Yes	Yes
France	Don't know	Don't know	Yes	Yes
Germany (Bavaria)	No	No	-	-
Germany (North Rhine-Westphalia)	No	No	Yes	No
Greece	No	No	Yes	No
Hungary	Yes	No	No	No
Italy	Yes	Don't know	Yes	Don't know
Lithuania	-	-	Yes	Yes
Luxemburg	No	No	Yes	No
Netherlands	Yes	Yes	Yes	Don't know
Norway	Yes	Yes	No	-
Poland	Don't know	Don't know	Yes	-
Romania	Don't know	No	No	Yes
Slovakia	Yes	No	Yes	No
Spain	Yes	No	Yes	Yes
UK (England)	Yes	Yes	Yes	Yes

In three (15%) of the responding countries (England, the Netherlands and Norway) experts indicated that children are involved in the evaluation of the reporting system. To this short list we can add Slovakia, where the expert mentioned that children are involved in the evaluation of the functioning of the Helpline:

“The Child Helpline under the Slovak Committee for UNICEF has been active in the field of participation of children... it has come up with the initiative of youth advisors to the help-line’s functioning.” (Slovakia)

The personnel recording reports (receiving reports) are reported as being specialised in 17 of the 20 responding countries (85%), but not in Hungary, Norway or Romania.

“Child welfare social workers without any specific training, incidental evaluation. No supervision, no accountability, no consequences even in very severe, widely known, published cases.” (Hungary)

Reporting/referral services are regularly evaluated in seven out of the 20 responding countries (42.9%) (Denmark, France, Lithuania, the Netherlands, Romania, Spain and UK), while not regularly evaluated in 8 countries.

“(Evaluation) is incidental; it depends on the local service provider, his/her attitude, motivation, skills, willingness.” (Hungary)



Who deals with the reports/referrals?

The following professional categories were mentioned as dealing with referrals:

- “Social workers from the Child Welfare Services” (Austria)
- “Every town in the country has centre for social welfare with its employees (social workers, psychologists, jurists) who deal with the referrals. The number of persons involved depends on the size of the town and the centre.”(Croatia)
- “Social workers and psychologists” (Greece)
- “There are teams of specialists that give the psychosocial and educational services directly to children and their parents but also teams trained to work in telephone lines to answer online.” (Lithuania)
- “For helpline 119, there are 50 professionals answering the calls. They are mostly trained psychologists, social workers or law specialists. They are under the supervision of a team of coordinators who organize regular de/ briefing meetings of the team” (Slovakia)
- “Staff within each local authority children’s services department” (UK - England)

Mandatory reporting

The policy guidelines of the European council “call for the mandatory reporting by all relevant professionals of incidents regarding violence against children” (CE, 2009, p. 25). Mandatory reporting refers to legislation that specifies who is required by law to report suspected cases of child abuse and neglect, and to whom they are referred. However the specifics of legislative arrangements vary considerably in the different member states (Table 4). Comprehensive mandatory reporting requiring all citizens to report child abuse was only reported in six countries: Croatia, Denmark, Finland, France, Germany and Spain. In the majority of the countries responding there is select mandatory reporting, which covers designated professional groups, and some forms of violence or high severity violence.

“There is a mandatory reporting for professionals as stated by the law. However, individual citizens do not have the obligation, unless it is a case with high severity (again stated by the law)” (Slovakia).

In Poland professionals are not obliged to report child labor, but reporting is mandatory for the other forms of violence against children. In Belgium and Luxemburg there is no mandatory reporting for professionals.



Table 4. Mandatory reporting and its Consequences (n=17)

	Prof	Teachers	Doctors and nurses	Child Protection Services	Social Workers	Psychologists	Police	Lawyers	Public	Are there consequences?		Consequences of failing to report
										Prof	Public	
Austria	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	-
Belgium	No	NA	NA	NA	NA	NA	NA	NA	No	NA	NA	NA
Bulgaria	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	NA	Missing
Croatia	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Fines
Denmark	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Missing	No	Missing
Finland	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Accused in court
France	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	3 years prison; 45.000 EUR fine
Germany (North Rhine Westphalia)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Missing	Missing
Greece	Yes	Yes	No	No	Yes	No	No	No	No	Missing	NA	Missing
Hungary	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	NA	Fines, can loose job, suspended
Italy	No	NA	NA	NA	NA	NA	NA	NA	No	NA	NA	NA
Lithuania	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	NA
Luxemburg	No	NA	NA	NA	NA	NA	NA	NA	No	NA	NA	NA
Netherlands	No	NA	NA	NA	NA	NA	NA	NA	No	NA	NA	NA
Norway	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	NA	Litigation, lose position
Poland	Yes, certain forms	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Liabe of not fulfilling duties
Romania	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Y/N	No	Fines
Slovakia	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Y/N	Yes	Fines
Spain	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Missing
UK (England)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	No	Investigated, suspended

Prof= Professionals Missing= Missing/Don't know Y/N= yes for some, no for other categories NA = Not Applicable

In some countries there are certain professional categories for which reporting is not obligatory by law (e.g., lawyers in Slovakia). In Greece teachers are the only professionals who are mandated by law to submit reports for CAN cases, although there is no penalty in case of non-reporting.

In Hungary, in agreement with the WHO recommendations following the UN report, community nurses and health visitors were mentioned among other professionals who have an obligation to report violence against children.

In some countries (Belgium, Luxembourg and parts of the UK) there is a system of voluntary reporting. In the UK this is strengthened by guidelines for professionals and interagency protocols emphasising the duty of care professionals have in relation to children. This is probably why both of the experts from England considered that reporting is obligatory for professional groups in England, even if it is not mandatory by law. In addition, in England, even if reporting is not mandatory for the general public, one of the experts mentioned that:

“General public (extended family members, neighbors, people on the street or in the supermarket) who witness abuse against children have an ethical obligation to report it to Social Services or Police.” (England)

For ten countries respondents mentioned consequences for not reporting known situations of violence against children:

- In Croatia, Finland, France, Germany, Hungary, Norway, Spain and the UK there are consequences for all professional categories.
- In Romania and Slovakia there are consequences only for some categories of professionals. In Romania this applies to medical personnel, child protection staff, social workers and psychologists; while in Slovakia the expert mentioned consequences for health care personnel and the police.
- For the general public, in most countries consequences exist generally only for very serious forms of violence. An exception is France, where the consequences for the public not reporting can be very serious.

In some of the countries, such as England, experts indicated the obligation to report is taken very seriously.

“Serious case reviews investigate failure from professionals to report abuse or concerns about children; professionals investigated are suspended and sometimes not allowed to work in the social care field again if found guilty“.
(England)

However, in some countries there may be situations when in principle there are consequences for not reporting, but in practice the consequences are not applied, as some of the experts explain:

“In principle yes, in practice NO”. (Hungary)

“It is very difficult to prove the intention of not reporting”. (Croatia)

The consequences for not reporting vary (Table 4). They can be severe such as in France, where the punishment can be up to three years of imprisonment and a 45 000 EUR fine for professionals as well as any adult from the public. Other consequences mentioned by respondents in Croatia, England, Hungary, Germany, Romania, Slovakia and Spain included: imposing the attendance to training seminars, paying fines, dismissal or suspension of work, investigation, and criminal prosecution. If local authorities are involved in the cases, they too might have to pay fines.



Investigation and risk assessment

Monitoring the process of investigation to ensure that it has been carried out as required by procedures was mentioned as being performed in seven countries (Croatia, Denmark, Luxemburg, the Netherlands, Norway, Slovakia and the UK-England) (Table 5). The reports are investigated by professionals from child protection services in nine countries (Bulgaria, Croatia, France, Finland, Lithuania, Romania, Slovakia, Spain and the UK). In four (Austria, Denmark, Greece and Luxembourg) the reports are investigated by professionals other than child protection workers.

“Child protection units have been established in all regions - cases of alleged child maltreatment, sexual abuse and violence are referred to specialist teams in the unit that coordinate the investigation with police and pediatric unit.” (Denmark)

In Austria, Luxembourg and Poland the cases are investigated by other professionals such as psychologists, social workers, police, prosecutors and family judges. In the Netherlands:

“All referrals - if made - are screened and investigated in case of suspicion of child maltreatment. Most not suspicious pre-screened referrals are re-referred and tried to be solved on voluntarily base with professionals close to the family.”(NL expert)

In Belgium, Hungary and Italy the cases are not necessarily investigated by any professional.

Risk evaluation

Risk assessment is performed in fifteen countries (75%) reporting on this issue except Belgium, Bulgaria, Finland, Hungary, the Netherlands. Risk assessment is performed using nationally standardised guidelines in Croatia, Lithuania, Poland and Slovakia, and regional/municipal guidelines are used in Denmark, France and Spain. However in Denmark the regional/municipal guidelines do not require standardised assessment forms. There are no guidelines for doing risk assessment in Bulgaria, Greece, Italy, Luxembourg, Norway or Romania.

“Probably in every field that is involved in investigating of the situation of a child (abuse) there is a procedure to evaluate the risk, but many times this is informal (spontaneous, based on the knowledge and experience of the professional).”(Romania)

Standardised assessment instruments such as nationally and regionally used questionnaires are reported to be circulated in Croatia, Germany, Lithuania, Slovakia, Spain and the UK:

- Slovakia: “These are standardised norms of action of particular professionals (e.g., child protection services”.
- Spain: <http://www.fapmi.es/denuncia.asp>
- UK: Safeguarding Assessment and Analysis Framework <http://www.childandfamilytraining.org.uk/27/Safeguarding-Assessment-and-Analysis-Framework-SAAF>
- UK: Graded Care Profile: <http://www.nspcc.org.uk/fighting-for-childhood/our-services/services-for-children-and-families/graded-care-profile/>

Table 5. Investigation and risk assessment (n=20)

	Reported cases investigated	Monitoring of investigations	Risk assessments conducted for reported cases	Standardised risk assessment tools exist
Austria	Not necessarily investigated by child protection workers	No	Yes, but there are no guidelines	No
Belgium	Not necessarily investigated by any professional	No	No	Missing
Bulgaria	Yes, by child protection workers	No	No	No
Croatia	Yes, by child protection workers	Yes	Yes: using national standardised guidelines	Don't Know
Denmark	Yes, by professionals other than child protection workers	Yes	Yes: using regional/ municipal guidelines	No
Finland	Yes, by child protection workers	Don't know	No	No
France	Yes, by child protection workers	Don't know	Yes: using regional/ municipal guidelines	Yes
Germany (North Rhine-Westphalia)	Yes, by child protection workers	Yes	Yes: there are no guidelines	Yes
Greece	Yes, by professionals other than child protection workers	No	Yes- there are no guidelines	No
Hungary	Not necessarily investigated	No	No	Yes
Italy	Not necessarily investigated	Yes	Yes: there are no guidelines	Don't know
Lithuania	Yes, by child protection workers	Missing	Yes: using national standardised guidelines	Missing
Luxembourg	Yes, by professionals other than child protection workers	Yes	Yes: there are no guidelines	Missing
Netherlands	Other	Yes	No	No
Norway	Yes, by professionals other than child protection workers	Yes	Yes: there are no guidelines	No
Poland	Yes, by professionals other than child protection workers	Yes	Yes: using national standardised guidelines	Yes
Romania	Yes, by child protection workers	Don't know	Yes: there are no guidelines	Yes
Slovakia	Yes, by child protection workers	Yes	Yes: using national standardised guidelines	No
Spain	Yes, by child protection workers	No	Yes: using regional/ municipal guidelines	Yes
UK	Yes, by child protection workers	Yes	Yes: using national standardised guidelines	Yes



- UK: Structured Decision making Model <http://www.nccdglobal.org/assessment/structured-decision-making-sdm-model>
- Hungary: “MÓDSZERTANI ÚTMUTATÓ A gyermekvédelmi észlel- és jelz rendszer m ködtetése kapcsan a gyermek bántalmazásának felismerésére és megszüntetésére irányuló szektorsemleges egységes elvek és módszertan“ <http://www.kormany.hu/download/b/52/00000/gyermek%20bántalmazásának%20felismerésére%20és%20megszüntetésére%20irányuló%20egységes%20elvek%20és%20módszertan.pdf>

The Polish expert mentioned that different categories of tools were used by different services such as, for example by the Police (<https://www.msw.gov.pl/pl/aktualnosci/12442,35-tys-policjantow-przeszkolonych-jak-wykrywac-przemoc-domowa.html>) and interdisciplinary teams involved in working with domestic violence.

Specialists interviewing children are most often social workers, but in some countries this task is the responsibility of psychologists, the police or the justice system (e.g., Poland) (Figure 1). The expert from the Netherlands mentioned among others ortho pedagogues and the Italian expert mentioned family members. In all countries, except for Germany, experts mentioned that child victims of violence have the legal right to counseling and therapy.

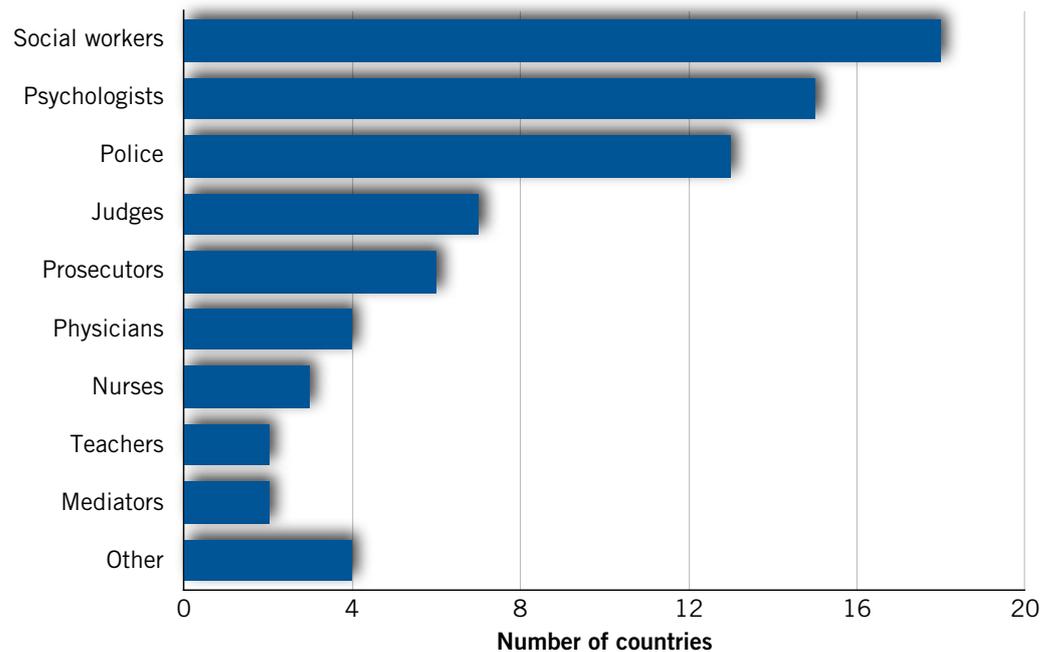


Figure 1. Specialists interviewing children

Follow-up in substantiated cases of child abuse and neglect

Follow-up procedures of substantiated cases of child abuse and neglect are reported to be used in eight countries (40%) – Croatia, Denmark, Germany, Italy, Lithuania, the Netherlands, Romania and Spain (Table 6). Guidelines and monitoring procedures for follow up are reported in only five countries (25%) – Croatia, Denmark, Lithuania, the Netherlands and Spain. The coordinators of the follow-up service in these countries are Social services or Child protection services.



Table 6. Policies for follow-up of substantiated cases of child abuse and neglect (n=20)

	Policy requiring follow-up	Who is responsible for follow-up?	Guidelines for follow-up	Who enforces the policy?
Austria	No	N/A	N/A	N/A
Belgium	Don't know	Missing	Missing	Missing
Bulgaria	No	N/A	N/A	N/A
Croatia	Yes	Social workers (Center for social welfare)	Yes	Ministry of Social Policy and Youth
Denmark	Yes	Social service of individual municipality	Yes	Ministry of Children and Social Affairs by: Socialstyrelsen
Finland	Don't know	Missing	Missing	Missing
France	No	N/A	N/A	N/A
Germany	Yes	Child protection services	No	Missing
Greece	No	N/A	N/A	N/A
Hungary	No	N/A	N/A	N/A
Italy	Yes	The administration	No	N/A
Lithuania	Yes	The specialist of the children rights protection services	Yes	Ministry of Social Security and Labour
Luxembourg	Don't know	Missing	Missing	Missing
Netherlands	Yes	AMK, Veilig Thuis, Care provisions, Child Protection Board, Youth Care	Yes	By Law; Mandatory Reporting Code.
Norway	No	N/A	N/A	N/A
Poland	No	N/A	N/A	N/A
Romania	Yes	Child protection services in collaboration with the social worker from the local government.	No	Missing
Slovakia	No	N/A	N/A	N/A
Spain	Yes	Social services-child protection authority	Yes	Ministry of Health-Equity-Social Affairs Regional Child Protection authorities
UK	No	N/A	N/A	N/A



Training

Mandatory training for professionals in contact with children to facilitate reporting of violence against children exists in Denmark, Spain and the UK-England for all professional categories and in Norway for all except perhaps NGOs (Table 7). In France mandatory training is limited to teachers/educators and day-care personnel; in Belgium it is limited to the police and legal personnel, while in Luxemburg to the police and NGOs. In Denmark and Spain for many categories of specialists the training is integrated as part of their initial training. Training is reported to be nationally standardised for teachers and day-care personnel in France, health-care personnel in Slovakia and teachers in Spain.

Table 7. Mandatory training for professionals in contact with children (n=20)

	Medical personnel	Educators/ teachers	Day/ residential care personnel	Police	Legal personnel	NGOs
Austria	No	No	No	No	No	No
Belgium	No	No	No	Yes	Yes	No
Bulgaria	No	No	No	No	No	No
Croatia	No	No	Don't know	Don't know	No	No
Denmark	Yes	Yes	Yes	Yes	Yes	Yes
France	No	Yes	Yes	Don't know	Don't know	Don't know
Finland	No	No	No	No	No	No
Germany (North Rhine-Westphalia)	No	No	No	No	No	No
Greece	No	No	No	No	No	No
Hungary	No	No	No	No	No	No
Italy	Yes	Yes	Yes	Yes	Don't know	Don't know
Lithuania	Yes	Yes	Yes	Yes	Yes	Yes
Luxembourg	No	No	No	Yes	No	Yes
Netherlands	No	No	No	No	No	No
Norway	Yes	Yes	Yes	Yes	Yes	Don't know
Poland	No	No	No	No	No	No
Romania	No	No	No	Don't know	No	Don't know
Slovakia	No	No	No	Don't know	No	Don't know
Spain	Yes	Yes	Yes	Yes	Don't know	Yes
UK	Yes	Yes	Yes	Yes	Yes	Yes

With respect to mandatory training for those services that receive referrals for violence against children (Table 8) in the UK-England there is nationally standardised training for all categories of services/institutions and in Norway for almost all of the categories.

In France there is a mandatory training for help-lines, in Greece for the staff of at least one help-line, while in Slovakia this applies for NGOs and the police, and in Spain for public social services/child protection and for those working in the legal system. In Denmark and Luxemburg only the personnel of the legal system are trained in all services. However in 10 of the 20 responding countries (50%) experts stated that there is no training for personnel in referral services.



Table 8. Mandatory training for those who receive referrals of VAC (n=20)

	Public social services/child protection	Help-lines	NGOs	Police	Legal system
Austria	No	Some services	Some services	Some services	Some services
Belgium	No	No	No	No	No
Bulgaria	Some services	Some services	No	No	No
Croatia	No	No	Some services	Some services	Don't know
Denmark	Some services	Some services	Don't know	Don't know	All services
Finland	No	No	No	No	Don't know
France	Don't know	All services	All services	Don't know	Don't know
Germany (North Rhine-Westphalia)	No	No	No	No	No
Greece	No	Some services	No	No	No
Hungary	No	No	No	No	No
Italy	Some services	Some services	Some services	Don't know	All services
Lithuania	Some services	Some services	Some services	Some services	Some services
Luxembourg	Don't know	Don't know	Don't know	Some services	All services
Netherlands	No	No	No	No	No
Norway	All services	All services	Don't know	All services	Don't know
Poland	No	No	No	No	No
Romania	No	No	No	No	No
Slovakia	Don't know	All services	All services	Some services	Don't know
Spain	All services	All services	Don't know	Don't know	All services
UK (England)	All services	All services	All services	All services	All services



An institute with the mandate to coordinate reporting/referral services was reported as existing in 8 of 18 countries (44%) that responded to the question (Bulgaria, Croatia, Denmark, France, the Netherlands, Slovakia, Romania, and the UK-England). Investigation is also coordinated by an institution in 8 countries (44%), although the countries differ (Austria, Bulgaria, Denmark, France, Italy, Luxemburg, Slovakia, Romania, and the UK-England). Regarding intervention one more country is added, Slovakia, but in Luxemburg only the investigation is coordinated by an institution. Follow-up services are coordinated in 7 countries (39%). There are five countries (28%) in which there is an institution that provides an overview of services (Table 9). The coordinating institutions are mainly Child protection/Social Services/Welfare services, Youth Care (Netherlands), Police (Italy), Judicial Institution (Luxemburg), Governmental Institutions, Ministries or Ministerial Agencies especially for the overview of the system (Finland, Romania).



Discussion

Children's rights to protection are included in the European Charter of Fundamental Rights and thus MS are bound to respect children's rights. The European Union's policy is to make these rights as effective as possible, including the right of children to be protected against any form of violence and therefore in the last decade studies have been prepared and consultations have taken place to develop guidance on basic requirements to fulfill these rights. In the last decade, following critiques on the lack of action to improve MS's legislation to safeguard children (e.g., Stalford and Drywood, 2009) the European Commission mobilized stakeholders working on the rights of the child and child protection and elaborated its Agenda for the Rights of the child (European Commission, 2011). In an overall report on MS response to violence against children, the Commission explored the opportunities for the MS to lessen the gaps of their child protection systems, and develop standards for their legal bases (EC, 2010). To respond to the necessity of MS to better coordinate responses to situations of violence against children according integrated child protection systems should be developed. According to FRA (2015):

“In integrated child protection systems, the emphasis should be on primary prevention and the development of generic services for children and families. However, the identification, reporting and referral procedures of children in need of protection are also of paramount importance. Procedures and methods of assessment by competent authorities of the reporting of cases should reflect the principle of the best interests of the child and seek to take into consideration children's views”.

Among many other data, FRA has collected data on the existence of legal obligations for professionals to report cases of child abuse, neglect and violence; the provisions of MS to assess the risk of violence in a multidisciplinary perspective; and the monitoring capacity of the child protections systems.

The analysis of FRA follows the basic framework drawn by recommendations of the UN Report (2012:5) that there is a need to establish “safe, well-publicized, confidential and accessible” reporting mechanisms for children victims of violence. The implementation of child-friendly reporting mechanisms including help-lines through which children can speak with a trained counselor, was among the recommendations of the United Nations study (2007) on violence against children as well. Children need to be aware of these mechanisms, so the same study recommended that “in every locality and every setting there should be well publicized easily accessible services to investigate reports of violence against children” (UN, 2012:5).

During our study we analysed several aspects of the reporting system and mechanisms in the respondent countries. Our results show that with respect to accessibility, reporting services facilitate the receipt of information on situations of violence against children and are available for professionals, adults and children in all localities, in 90% of the respondent countries. Exceptions were Belgium and Spain, where reporting is possible only to services existing in cities. In 86% of the countries children can make referrals themselves, in 10% (Germany and UK-England) there are differences at the regional level; in Spain children can make referrals by telephone and in Austria only specialists can report. This responds to the recommendation of the Council of Europe (2009) that children should be actively engaged in and empowered, according to their evolving capacity and with their informed consent, to participate meaningfully in the implementation of policies and programs to prevent violence, with the mention that having the possibility to report doesn't necessarily mean that they are really reporting violence – further evaluations of the child violence against children country data would be necessary.



The UN study (2006) also recommends the creation of ways to report violence through new technologies and we found that in 69.56% of the countries it is possible to report online. This might suggest that there is a need for the remaining 30% of countries to invest in creating ways to report violence against children through new technologies.

In addition, children's help-lines exist (except in Finland) and they are free of charge in all of the countries. This respects the above mentioned recommendation of the Council of Europe (2009) that children should be actively engaged and "the state and other appropriate actors should listen carefully to children's views in the light of the contribution that the child's perspective can bring to the quality of solutions under examination" (CE, 2009, p. 10). Unfortunately, due to financial difficulties, in some countries help-lines are functional only during a limited number of hours (e.g., Romania, Hungary). MS without help-lines should invest in their creation (e.g., Finland) and those operating for a limited number of hours should be expanded to be functional 24 hours a day/7 days a week.

On-going promotion, awareness campaigns, or other initiatives to promote referral services or help-lines are organised in 77% of the 23 countries. There are no campaigns in Austria, Bulgaria, Hungary or Slovakia. Further efforts are needed from these countries to invest in awareness raising campaigns to promote reporting and reporting/referral services.

The existence of standardised procedures, guidelines and tools make reporting more accessible for professionals and the public. According to respondents, some countries (Austria, Belgium, Hungary, Luxemburg and Romania) have no standardised procedures, guidelines or tools, while other countries have standardised procedures but no standardised reporting instruments. Standardised tools such as nationally and regionally used assessment questionnaires are reported in only six countries (Croatia, Germany, Lithuania, Slovakia, Spain and the UK, Slovakia, Spain, Croatia, Germany, Lithuania).

The findings of previous research studies suggests that the application of assessment tools has the potential to improve assessment practices and decision-making, and in this way it has clear benefits for children. However, there are only a few assessment tools that are evidence-based concerning their rigor and validity. Although there is general recognition of the need to move towards the use of 'structured' analysis and decision-making, based on standardised tools and professionals judgment, there is currently limited evidence about the effectiveness of the available tools in the field of child protection, and further piloting of these instruments and research is now needed (Barlow, 2012). Recent studies of the implementation of assessment tools have also pointed to harmful unintended consequences of their introduction, when they are introduced without high quality and comprehensive training and supervisory and management support (Barlow, 2012). This suggests the need for further research working with those member states yet to validate and implement standardised procedures, guidelines and tools. During their implementation high quality training and supervisory support should be organized.

In most of the countries (83%), including the new member states Bulgaria, Croatia and Romania, there is mandatory reporting for professionals for all forms of violence against children. The exceptions are Belgium and Luxemburg. Comprehensive mandatory reporting requiring all citizens to report child abuse was only reported in six countries: Croatia, Denmark, Finland, France, Germany and Spain. In some other countries the adult population has to report violence against children only for cases with high severity (e.g., Slovakia). The FRA study (2015) came to the same conclusion - only a few MS have specific reporting obligations addressing civilians. In the majority of the countries responding there is select mandatory reporting, which covers designated professional groups, and some forms of violence or high severity violence.



There is a worldwide debate regarding the utility of mandatory reporting and punitive measures in case of failure to report. As stated by Svevo-Cianci et al. (2010), the existence of a mandatory reporting system is an essential element of the quality of the child protection system. Recommendations from the UN and the Council of Europe are also in favor of this, adding that mandatory reporting by civilians would increase chances that violence against children remains unreported. Others, especially professionals object to mandatory reporting, fearing over-reporting and the overwhelming of already low capacity child protection services. In addition there are researchers (e.g., Wallace and Bunting, 2007), who argue that systems which respond to child abuse reports with punitive, legally based investigations aimed primarily at evidence gathering actually divert professionals away from safeguarding children and are of little or no real benefit. Further research is needed to evaluate the benefits and limitations of mandatory reporting in the context of different child protection approaches.

In almost 70% of the responding countries there is no legislation to protect the anonymity of reporting sources, which can discourage even professionals from reporting suspected cases of violence against children. Such protective legislation is in place in four countries (Bulgaria, Greece, Norway and Poland). This seems to be a huge gap and further efforts are needed in the majority of the EU countries to legally protect the anonymity of reporting sources.

Evaluation of the system and the services provided for children is, according to FRA (2009), one of the output indicators of an integrated child protection system. There have been previous evaluations of the reporting system in four of the surveyed countries (Denmark, Norway, Spain and UK-England), while informal evaluations have also taken place in other countries (e.g., Hungary and Slovakia). This suggests for many EU countries the importance of future investments in evaluation of the reporting system including services.

Children are involved in the evaluation of the reporting system in only three of the reporting countries (15%): the Netherlands, Norway and the UK-England, although in Slovakia children are involved in the evaluation of the functioning of the helpline service. FRA (2014) obtained higher numbers with regard to children's participation, mainly in the domain of planning the services, not necessarily in evaluating the referral services. However given that aligning the reporting issue to children's rights means that children should have the right to participate in not only the planning but also the evaluation of services as well, further investments are needed to involve children in the evaluation of the reporting system and services.

In two countries (Belgium and Hungary) suspected cases of violence against children are not necessarily investigated, while risk assessment is performed in all responding countries except Belgium (94%). The child protection approach in Belgium is the Family Service Model and the pathways into child welfare services in Belgium are predominantly identified and addressed through the health sector. This approach has been evaluated as offering a highly therapeutic approach to child protection (Wallace, 2007). This model might be also considered as an alternative by countries where the child protection system is struggling with excessive workload or it is built mainly on legal procedures. In an analysis that compared formal assessment and more therapeutic based models, Marneffe (2002) found that the Belgian system centered on solidarity with parents and on confidence, using systemic assessment and voluntary request for help by parents, resulted in a higher rate of referral to child help services and a lower failure rate. Monitoring the process of investigation to ensure that it has been carried out as required by procedures was mentioned as being performed in seven countries (Croatia, Denmark, Luxemburg, the Netherlands, Norway, Slovakia and the UK-England). Risk assessment is performed in fifteen countries (75%) reporting on this issue except Belgium, Bulgaria, Finland, Hungary, the Netherlands, in six other countries there are no guidelines. Established cases of child abuse and neglect are reported to be followed-up in six countries (Croatia, Denmark, Germany, Lithuania, Romania and Spain).



It seems that there is a big difference in the pathways followed by different EU countries on their route to meet the requirements of Integrated Child Protection Systems. In the United Kingdom where there are standardised procedures and many tools and instruments, the centralized procedures, standardised formats and the dependency of social workers on the rules and rigid timetables are often criticized (Munroe Report, 2011). The authors of this report recommended that the UK make child protection services less procedurally driven and to work to obtain a better balance between professional judgment and prescriptions. However, there is the chance that lack of standardization may introduce inequities between local authorities. Other countries, like some of the post-communist countries are at the beginning of the professionalization of their child-protection systems and there are no standards, tools or instruments. Or if there are legal standards based on the EC and UN requirements, there has been no investment in capacity building for specialists and no evaluation of services. One result of this can be that the whole system can become highly bureaucratic and defensive. It is therefore very important that these countries reflect on and learn from the lessons of countries with a longstanding experience in child protection through collaborative research.

The importance of investment in capacity building and training is also highlighted in several international documents. For example, the recommendations of the UN for reducing violence against children state that, “capacity building and training initiatives should be developed to ensure that those working with and for children have the necessary knowledge and skills.” (UN, 2012:24). The recent Mapping study conducted by FRA (2014) identified that under-reporting is due to the failure of professionals to recognise abuse and fulfill their professional responsibilities to protect children. This is in line with our finding that there is still a great need in many countries for comprehensive training of professionals working with children in protective and other institutions in how to listen to children and identify victimisation. Our study shows that there are only a few countries that invest in mandatory training for professionals who are in contact with children such as educators, health professionals and the police (e.g., Denmark, Norway, Spain and UK-England for all professional categories and Belgium, France, Italy Luxemburg and Slovakia for specific professional categories such as teachers, police and personnel working in NGOs). The same countries invest in the training for professionals dealing with reporting. Looking at the range of the responses related to training, the high number of negative and non-responses (46%) implies low investment of a significant part of the countries in developing competences of the workforce, especially for public social services/child protection. Training related to operation of help-lines is more widespread, however even there it does not occur in all countries. Lack of mandatory training in all types of referral services is widely spread throughout Europe and in all kind of services, which might have consequences on how cases are handled further than referrals. There is a gap in the training of the professionals who are in contact with children (e.g., educators, teachers, health professionals, etc.) who are expected to report violence against children, but also in the training of specialists who deal with the reports, who perform the investigations and follow-up of established cases. Much more should be invested in continued education and training of professionals who are in contact with children with the aim of increasing the reporting of violence against children. MS should invest more in the initial as well as continuing education and training of staff of child protection/social/family services, in order to increase their capacity and skills to safeguard children and offer to use evidence based instruments and offer quality services.

Our results also suggest social workers represent the main professional category working with violence against children. In spite of this well established career path, not all countries offer social workers training programmes to improve their competencies. In addition, despite evidence regarding the benefits of involving community nurses in reporting child abuse (Browne, 2013), the present inter-country research shows low involvement of health professionals in reporting and managing child related violence.

Other differences in responses show sub-national variations, indicating decentralization of responsibilities previously managed at the national or regional level to the local level. This type of model decreases the challenges of coordinating and monitoring services at local level and increases local responsibilities, but it can lead to inequalities and increase the challenge of monitoring and coordinating what is happening at national level.

According to FRA (2015) to ensure effective integrated child protection systems attention should be paid on cross-sectorial coordination. In decentralised systems the need for cooperation and coordination is even more vital (FRA, 2014). Our results show that there is a coordinating institution in less than half of the countries responding.



Limitations

The intent of this research project was to obtain answers from key respondents from all 28 EU MS plus Norway. In general we have depended on the expertise of only one respondent regarding each country's system of referrals and follow up. Thus, despite efforts to ensure the respondent was well positioned to knowledgeably respond, the responses to some questions might have introduced some bias. Further, for federalized countries or those with autonomous districts we might present a limited perspective given that we do not have information from every state or region. According to the FRA (2015) some of the Member States do not have a common legal instrument. A very obvious example is the UK, where the constituent countries (England, N. Ireland, Scotland and Wales) each have their own related legislation, and we only have answers from England. Other examples are Spain's autonomous regions and Belgium's federal states which have each elaborated their own laws. German and Austrian federal law addresses child protection responsibilities; however, they only set up the general framework for state and regional laws, while leaving room for variation.

A third limitation with respect to describing the situation in the EU, concerns the 79% coverage of the EU countries plus Norway represented in the results. Experts in the rest of the member states did not respond, chose not to participate or committed to complete the survey but did not manage to fulfill that commitment. For some of the questions the response rate is even lower, because some of the respondents completed only part of the survey. As a consequence, our results have only a partial coverage of the EU countries and do not represent a complete or exhaustive picture of the MS' efforts in the area of reporting and follow up of cases of violence against children.

Despite the limitations described, the findings for each of our thematic areas provide a reasonably comprehensive view of some of the main structural, process and outcome indicators of the protection systems of the European countries involved in the study and can be used to suggest that further consultations are needed to close the European gaps.



Conclusions and recommendations

Although the EU has embarked on common action since 2006 ‘to build Europe for Children and with Children’ to follow up on the Recommendations of the UN Study on Violence, national and regional epidemiological studies repeatedly emphasise the underreporting of violence against children, including severe forms of all kinds of abuse and neglect, trafficking and exploitation of children. The EU has also launched calls and action research programmes to develop the capacity to reduce violence against children and its consequences.

During our analysis, in accordance with the normative framework of the UN CRC, we regarded children as right holders to be protected against any form of violence and to claim their rights if they are infringed. Therefore we asked questions about the involvement of children in the child protection system, while also examining the way MS fulfil their obligations to assure that each child can live safely. Our results show that MS finance a large range of services to respond to violence against children: there are accessible specialized reporting services; free helplines for children; children have the legal right to counselling and support in almost all of the countries and there is some degree of coordination to respond to situations of violence against children in each of the countries that responded to the survey. In almost all of the countries professionals are obliged to report suspected cases of child abuse as a result of mandatory reporting laws or professional guidelines strengthened by inter-agency protocols, but this does not necessarily apply to all professional groups. In some of the countries there are clear reporting procedures and there are guidelines and forms which help professionals and civilians to report violence against children.

In spite of the progress that is being made, there are still gaps in what could be an integrated child protection system throughout the EU. The countries that have most recently joined the EU may have previously experienced a process of monitoring of their child protection systems, and have successfully adopted laws that have made reporting mandatory. On the other hand, adopting laws in itself does not make the system successful, as can be seen in several of the comments from experts in Hungary and Romania when mentioning the non-application of existing legal procedures.

In some of the countries there are clear reporting procedures, forms and guidelines (e.g., Spain and the UK-England). In a number of countries this is missing, which can create delays or leads to the underreporting of cases (FRA, 2015). This might be a particular problem in the case of the ex-communist countries, with a degree of centralization which doesn't have a long-standing experience with the provision of services.

Our research shows that there is a need to validate and implement different standardised assessment tools in many MS. As Barlow (2012) states, there are potential benefits of using different standardised assessment tools that are clearly based on the best available evidence including: Decision-Priority Tools – to prioritise cases at the point of referral; Risk/Safety Assessment Tools - part of the initial assessment stage; and Strengths and Needs Assessment Tools - as part of a more structured in-depth assessment. Research suggests there is currently limited evidence about the effectiveness of the available tools in the field of child protection, and further piloting of these instruments and research is now needed. Thus countries should invest in validation and implementation of instruments and tools.

There are other areas as well where the majority of the countries still need to increase investment and improve existing policies. These include high quality, comprehensive training of the professionals who are in contact with children (educators, teachers, health professionals, etc.) who are expected to report violence against children, but also in the training of specialists who deal with the reports, who perform the investigations and follow-up and improving services for follow-up and monitoring of reported cases of child

abuse and neglect. For most of the countries there have not been previous evaluations of the reporting system to assess the quality and impact of existing policies or the efficiency of the services and children are not involved in the evaluation of the reporting system in most of the countries. Thus more attention should be paid on evaluating reporting services and on child-participation.

In most of the countries future investments should be encouraged to create legislation that protects the anonymity of referral sources. We found several ex-communist countries, new MS that had developed policies adhering to higher requirements and adopted strong legal standards, such as a mandatory reporting system and follow up of cases (e.g., Bulgaria and Romania). But, unfortunately, in many countries existing standards are not applied because there is little or no training for specialists, and according to the FRA (2014) a lack of human resources and a heavy workload of professionals. The involvement of other services, the development of strong inter-agency collaboration protocols, an opening towards a more therapeutic approach developed in the frame of the Family Service Model might create new possibilities. On the other hand, in some of the countries approaching child protection using the Family Service Model (e.g., Belgium and Finland) might leave many children in high risk situations by not creating the obligations for professionals and the possibility for children to report (i.e. lack of help-lines in Finland), by not performing risk assessment and not investigating cases. These countries also have something to learn from countries working with a legally based Child Protection approach.

Our findings suggest that the Recommendations of the UN (2006) and of the Council of Europe (2013) are far from being fully implemented, in spite of progress being made in many countries, including those newly acceded to the EU. Particularly practical implementation often lags behind the laws, principles and policies, which is where inter-country learning presents a real opportunity. From the perspectives of the UN CRC we found uneven opportunities across Europe and regions, leaving many child victims without the chance to claim their rights. This puts a question mark on the commitment of the respondent states to invest in reducing violence against children.

Recommendations

1. Each MS should include in its development strategy periodic reviews of the structures, procedures and outcomes of its Child Protection systems.
2. Evaluations should be made available for professionals and researchers in searchable databases, as they can become baselines for further progress.
3. Children victims of violence should be mobilized to express their feelings about their experiences by getting in contact with Child Protection.
4. Existing research on opportunities and ethics of children's participation in evaluative processes should be made available to professionals working with children victims of violence.
5. Some of the states should invest in accessibility of services in every locality and for everybody, including children.
6. Most of the states should invest more in awareness raising, including advertisement of reporting services.
7. Further research is needed to understand the impact of different reporting modalities and effects of advertisement on decision to report.
8. Further research is needed to evaluate the benefits and limitations of mandatory reporting systems and to follow the evolution of reported cases. Previous research showed that for the first years after the introduction of mandatory reporting child death rate has not decline, but further investigation is needed for longer periods.



9. Member States need to invest in capacity building and increased support for specialists with respect to reporting (mandatory or voluntary). Professionals from better-staffed reporting services would fear over-reporting less and favor investigation of alleged cases.
10. MS should invest in helplines and ensure services cover 24 hours and 7 days week. Lack of funding cannot justify the lack of helpline services during holidays, weekends or evenings. Training and supervision for respondents of helplines has to be standardised and continuous.
11. Research on helplines and the training materials should be made available to public and professionals via databases.
12. Professionalization of services should continue in the direction of developing standardised procedures, guidelines and forms for reporting and risk-assessment, especially for countries with relatively young child-protection systems (like the post-communist countries).
13. Future transversal and longitudinal research is needed to elaborate indicators on the quality and impact of existing procedures and policies.
14. Member States need to invest in the validation and implementation of different standardised assessment tools, especially those that are supported by evidence and in those countries where no such tools exist.
15. Research on the impact of procedures and assessment instruments should be further developed in all services. Training materials should incorporate research findings. Research findings should be made available to professionals and researchers via databases.
16. The anonymity of victims and witnesses should be strictly protected and national laws should be accordingly introduced.
17. MS should develop guidelines for similar procedures on investigation of alleged cases of violence against children, so they would also work in cases of trans-national victimizations
18. Besides specialized child protection services, family-friendly services should be developed in all member-states as efficient ways to improve parenting practices
19. Databases should be developed that allow follow up of children along the different services: social, medical, educational, legal and therapeutic.
20. MS should develop guidelines for procedures on following up investigation of substantiated cases of violence against children.
21. Training should necessarily cover professionals in educational, medical, legal services on how to identify and report violence against children.
22. Training for professionals responding to cases of children exposed to violence should be developed using evidence based proceedings, instruments, tools and practices.
23. Training should comprise guidelines on working with evidence based instruments and practices
24. Further research is needed for evaluating training needs of professionals working in child protection and other services in contact with children.
25. Coordinated child protection services can only emerge if coordination improves and fosters collaboration of different services, as well as monitoring of results.
26. Coordination should be based on solid electronic databases that collects inter-sectoral data, and allow analysis of the impact of the system. Further research is needed to develop electronic, inter-sectoral databases that allow the impact of the system.

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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.



Appendix 2 – Paper version of survey questionnaire

PIECES: Policy investigation in Europe on Child Endangerment & Support

In depth investigations - policy area #3: Reporting and follow-up of violence against children

PIECES partner taking lead: Maria Roth, Department of Social Work, Babes Bolyai University (RO).

This survey aims to collect information on information on the national reporting and follow-up systems for cases of violence against children in European Union Member States and some of the characteristics of those systems. 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 reporting systems including whether reporting is mandatory and for whom; investigation and follow-up of reported cases, whether there is training for those working with child victims and coordination of services.

As an expert in this field in your country who has agreed to take part, we ask that you please answer as many questions as possible. Where relevant, please provide hyperlinks to documents (e.g. strategies, guidelines, etc.).

Name of respondent: (Fill in the blank)

Profession/Specialty: (Fill in the blank)

Organisation: (Fill in the blank)

Position in organisation: (Fill in the 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)

I. Reporting systems for violence against children: spread of the services and publicity/informing of the population (including children)

1. Are there referral service(s) through which children and others can report situations of violence against children? By referral service(s) we mean services that accept and deal with information reported by a child or any other person – known as referrals¹ or reports – on children subject to violence. Referral services may be specialized or non-

¹ A referral is a concern about a single child or a family group; a single incident or multiple incidents expressed to a service with responsibilities in the area of child protection.

specialised services, help-lines, NGO-s, or public services
(tick answer which best represents situation in your country)

- No – (skip to #6)
- Yes but only in the big cities (200.000 people and more)
- Yes but only in cities regardless of size
- Yes but only in cities and larger rural communities
- Yes in all localities regardless of size
- Other (please specify) _____

2. By what means are the referrals done? (Tick all that apply)

- In person by the child victim
- In person by a child other than the victim
- In person by an adult family member
- In person by another adult
- In person by a professional

- By telephone by the child victim
- By telephone by a child other than the victim
- By telephone by an adult family member
- By telephone by another adult
- By telephone by a professional

- In writing
- On- line
- Other (please specify) _____

3. Are the processes for referral standardised across the country?
Yes/No/Don't know

4. Is there a standard referral form used across the country?
(Yes/No/Don't know)

If yes...

4.a. Please provide a copy or on-line link to the form if available. (Fill in the blank)

5. Are there national guidelines for accepting referrals?
(Yes/No/Don't know)



6. Are there child friendly help-lines encouraging reporting of violence against children?
(Yes/No/Don't know)

If yes...

6.a. Are the help-lines free? (Yes/No/Don't know)

6.b. Please describe their mandate and if available provide an on-line link (Fill in the blank)

7. Is there legislation in your country that protects the anonymity of referral sources in reported cases of suspected violence against children?
(Yes/No/Don't know)

8. Are there on-going promotions, awareness campaigns, or other initiatives to promote referral services or help-line in case of violence against children?
(Yes/No/Don't know)

If Yes...

8.a. Please briefly describe and if available provide an on-line link for further information (Fill in the blank)

9. Has there been any evaluation of reporting systems in your country/region?
(Yes/No/Don't know)

If Yes...

9.a. Please briefly describe and if available provide an on-line link/reference for further information (Fill in the blank)

10. Were children asked to evaluate the referral system in order to gain a child's perspective on how well the system works for the child as a client?

(Yes/No/Don't know)

If Yes...

10.a. Please briefly describe and if available provide an on-line link for further information (Fill in the blank)

11. Are there specialist staff trained to deal with the referrals?
Yes-please specify _____/No/Don't know

12. Are referral services evaluated? (e.g., are you aware of any reports in this area?)
(Yes/No/Don't know)

If Yes...

12.a. What criteria are used to evaluate the referral services? (Tick all that apply)



- Safety of those who report violence against children
- Confidentiality
- Professionalism
- Other (please specify) _____

13. How many referrals in total were received by referral services in 2012 in your country?
Please specify by service if there are different services involved. (Fill in the blank)



II. Mandatory (obligatory) referrals/reporting

14. Is there mandatory reporting for suspected cases of violence against children in your country:

- Yes for all forms of violence against children– skip to 15
- Yes but only for certain forms of violence against children – skip to 14a
- No-skip to 19

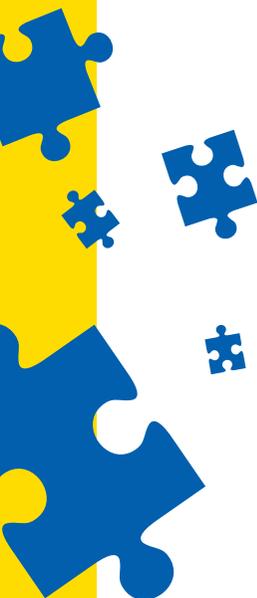
If only for certain forms of violence against children...

14.a. Please indicate which forms of violence (Tick all that apply)

- Physical violence
- Neglect
- Abandonment
- Sexual abuse
- Sexual exploitation (including pornography and prostitution)
- Child solicitation/grooming
- Female genital mutilation (FGM)
- Child labour
- Neglect
- Emotional violence
- Exposure to domestic violence
- Child trafficking
- Child abuse related fatalities
- Child neglect related fatalities
- Other (please specify) _____



	Educators/ Teachers	Child-care personnel	Medical/ Health personnel	Child protection personnel	Social workers	Psycho- logists	Police	Lawyers	Other (specify) _____
15. Are the following professional groups legally obligated to refer/report suspected violence against children?	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know
16. Are there consequences for not referring/reporting?	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know
16.a If yes, what are the consequences?	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)
17. Is enforcement monitored?	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know	Yes No Don't know



18. Are adults in the general population legally obligated to report violence against children?

Yes/No/Don't know

If Yes...

18.a. How are the public made aware of this obligation? (Fill in the blank)

18.b. Are there any consequences for the general public for not reporting?
Yes/No- skip to 19/Don't know- skip to 19

18.c. What are the consequences for not reporting? (Fill in the blank)

18.d. Is enforcement monitored?
Yes/No/Don't know



III. Investigation and risk assessment

19. Are all referrals/reports of suspected violence against children followed up with investigations?

- Yes, all referrals/reports have to be investigated by child protection workers
- Referrals are not necessarily investigated by child protection workers
- Referrals are investigated by professionals other than child protection workers (please specify which professionals) _____
- Referrals are not necessarily investigated by any professional
- Other (please specify) _____

20. If an investigation is required, is there monitoring done to ensure that it has been carried out?

Yes/No/Don't know

21. Is there a formal risk assessment process following the referral? By formal risk assessment process we mean an evaluation of how safe children are in their environment.

- Yes risk evaluation is conducted using national standardized guidelines
- Yes risk evaluation is conducted using regional/municipal guidelines
- Yes risk evaluation is conducted, but there are no guidelines
- No – skip to 24
- Don't know skip to 24

22. Are there standardised tools/instruments for doing a formal risk assessment?

Yes/No/Don't know

If Yes...

21a. Please briefly describe the standardised tools/instruments used and if available provide an on-line link or a reference (Fill in the blank)



23. Which sectors are involved in formal risk assessment? (Tick all that apply)

- Child protection/ Social services
- Police
- Justice
- Health
- Education
- NGO-s/Non-profit sector
- Other (please specify) _____

24. Which professional groups conduct the interviews with children, if an interview is part of a risk evaluation?

- Social workers
- Psychologists
- Police
- Nurses
- Physicians
- Prosecutors
- Judges
- Teachers
- Mediators
- Other (please specify) _____

25. Do children who are exposed to the following types of violence have a legal right to counselling and therapy?

- 25.a. Physical violence: Yes/No/Don't know
- 25.b. Sexual violence: Yes/No/Don't know
- 25.c. Sexual exploitation: Yes/No/Don't know
- 25.d. Female genital mutilation (FGM): Yes/No/Don't know
- 25.e. Child labour: Yes/No/Don't know
- 25.f. Neglect: Yes/No/Don't know
- 25.g. Emotional violence: Yes/No/Don't know
- 25.h. Exposure to domestic violence: Yes/No/Don't know
- 25.i. Child trafficking: Yes/No/Don't know

IV. Follow-up for cases of violence against children

26. Is it policy to follow-up cases of violence against children (e.g., policy sets out that services should continue to check on identified risk situations and the needs of child-victims of violence even when the child is no longer evaluated to be in immediate danger)?

Yes/No – skip to #26/Don't know- skip to #26

If yes...

26.a. Who is responsible for doing the follow-up? (Fill in the blank)

26.b. Are there any nationally standardised guidelines for follow up of child-victims of violence?

Yes/No – skip to 25.b/Don't know –skip to 25b

If yes...

26.b.1. Who sets the standardised guidelines? (Fill in the blank)

26.c. Is follow-up monitored to ensure it has been carried out?

Yes/No/Don't know



V. Training

	Medical/ health personnel	Educators/ teachers	Day/ residential care personnel	Police	Legal personnel	NGOs ¹
27. Is there mandatory training/ preparation for any of the following professionals in contact with children to facilitate reporting of violence against children?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
If No/Don't know for all skip to 27 If Yes						
27.a. Is training standardised nationally?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
27.b. Who enforces the mandatory training?	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)
27.c. How many hours of training or preparation/per year are required? Please specify if there are a specified number of hours for initial training and then additional hours of retraining / continuing education required each year.	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)



	Public social services/child protection	Help lines	NGOs	Police	Legal system
28. Is there mandatory training/preparation for those who receive referrals of violence against children?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
If No/Don't know for all skip to 28 If Yes					
28.a. Is training standardised nationally?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
28.b. Who enforces the mandatory training?	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)
28.c. How many hours of training or preparation/per year are required? Please specify if there are a specified number of hours for initial training and then additional hours of retraining / continuing education required each year.	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)

	Specialized public social services/child protection services	Non-specialized public social services	NGOs	Police	Legal system
29. Is there mandatory training/ preparation for professionals who do risk assessment in cases of violence against children?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
If No/Don't know for all skip to 29 If Yes					
29.a. Is training standardised nationally?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
29.b. Who enforces the mandatory training?	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)
29.c. How many hours of training or preparation/per year are required? Please specify if there are a specified number of hours for initial training and then additional hours of retraining /continuing education required each year.	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)



	Specialized public social services/child protection services	Non-specialized public social services	NGOs	Police	Legal system
30. Is there mandatory training for professionals who interview child victims of violence?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
If No/Don't know for all skip to 30 If Yes					
30.a. Is training standardised nationally?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
30.b. Who enforces the mandatory training?	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)
30.c. How many hours of training or preparation/per year are required? Please specify if there are a specified number of hours for initial training and then additional hours of retraining /continuing education required each year.	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)

	Specialized public social services/child protection services	Non-specialized public social services	NGOs	Police	Legal system
31. Is there mandatory training for professionals who follow up child victims of violence?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
If No/Don't know for all skip to 31 If Yes					
31.a. Is training standardised nationally?	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know	Yes/No/Don't know
31.b. Who enforces the mandatory training?	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)
31.c. How many hours of training or preparation/per year are required? Please specify if there are a specified number of hours for initial training and then additional hours of retraining /continuing education required each year.	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)	(Fill in the blank)

(Footnotes)

1 NGOs working with children and their families

VI. Coordination of services

32. Is there one institution that takes the lead for coordinating referral services for cases of violence against children in your country?
(Yes/No – skip to #31.c/Don't know – skip to #32)

If yes...

32.a. What is the name of the institution? (Fill in the blank)

32.b. To which sector does the institution belong? (Tick one)

- Social services/child protection
- Health services
- Judicial system
- Police
- Education
- NGO-s/Non-profit sector
- Other (please specify) _____

If no...

32.c. Please comment on the impact on the system if there is no specified lead? (Fill in the blank)

33. Is there one institution takes the lead for coordinating investigation/assessment services for cases of violence against children in your country?
(Yes/No – skip to #32.c/Don't know – skip to #33)

If yes...

33.a. What is the name of the institution? (Fill in the blank)

33.b. To which sector does the institution belong? (Tick one)

- Social services/child protection
- Health services
- Judicial system
- Police
- Education
- NGO-s/Non-profit sector
- Other (please specify) _____



If no...

33.c. Please comment on the impact on the system if there is no specified lead? (Fill in the blank)

34. Is there one institution that takes the lead for coordinating intervention services/treatment of children/family assistance for cases of violence against children in your country?

(Yes/No – skip to #33.c/Don't know – skip to #34)

If yes...

34.a. What is the name of the institution? (Fill in the blank)

34.b. To which sector does the institution belong? (Tick one)

- Social services/child protection
- Health services
- Judicial system
- Police
- Education
- NGO-s/Non-profit sector
- Other (please specify) _____

If no...

34.c. Please comment on the impact on the system if there is no specified lead? (Fill in the blank)

35. Is there one institution takes the lead for coordinating follow-up services for cases of violence against children in your country?

(Yes/No – skip to #34.c/Don't know – skip to #35)

If yes...

35.a. What is the name of the institution? (Fill in the blank)

35.b. To which sector does the institution belong? (Tick one)

- Social services/child protection
- Health services
- Judicial system
- Police
- Education
- NGO-s/Non-profit sector
- Other (please specify) _____

If no...

35.c. Please comment on the impact on the system if there is no specified lead? (Fill in the blank)

36. Is there one institution with an overall lead for coordinating an overview of all services for cases of violence against children in your country?
(Yes/No – skip to #35.c./Don't know – skip to end)

If yes...

36.a. What is the name of the institution? (Fill in the blank)

36.b. To which sector does the institution belong? (Tick one)

- Social services/child protection
- Health services
- Judicial system
- Police
- Education
- NGO-s/Non-profit sector
- Other (please specify) _____

If no...

36.c. Please comment on the impact on the system if there is no specified lead? (Fill in the blank)



Thank you for assisting us to better understand current reporting and follow-up practices in the area of violence against children across the European Union.





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