# Barnahus Quality Standards Summary

Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence

## **The PROMISE Project series**

www.childrenatrisk.eu/promise

**Publisher:** Council of the Baltic Sea States Secretariat and Child Circle

Author: Olivia Lind Haldorsson Child Circle

#### Foreword and key contributions:

Bragi Guðbrandsson The Government Agency for Child Protection, Iceland

#### **Expert Group:**

Gordana Buljan Flander Centre for Child and Youth Protection, Zagreb Åsa Landberg Psychologist and Psychotherapist Resmiye Oral Child Protection Program, University of Iowa Carl Göran Svedin Barnafrid – Nationellt kunskapscentrum, Linköping University

Review on law and guidance: Rebecca O'Donnell Child Circle

## **Review and Good Practice:**

Janet van Bavel Children and Youth Trauma Centre, Haarlem Tea Brezinscak Centre for Child and Youth Protection, Zagreb Britta Bäumer Child and Adolescent Psychiatric Trauma Unit, Barnahus Stockholm Ylva Edling Child and Adolescent Psychiatric Trauma Unit. Barnahus Stockholm Ólöf Ásta Farestveit Barnahus Revkiavik Anna Frank-Viron Children's House, Children's Protection Department, Social Insurance Board Turid Heiberg Council of the Baltic Sea States Secretariat Peter van der Linden Verwey-Jonker Institute Anna Nelsson Barnahus Linköping Anna M Petersson Barnahus Linköping Ana Marija Spanic Centre for Child and Youth Protection, Zagreb Andrea Wagner Thomsen Centre for Children, Youth and Families, National Board for Social Services

## **Pilot contributions:**

Michael van Aswegen TUSLA Ireland Dainora Bernackiene Children Division, Family and Communities Department, Ministry of Social Security and Labour, Lithuania Andreea Bijii Save the Children Romania Laura Celmale Association Center Dardedze, Latvia Adina Mihaela Codres Ministry of Labour, Family, Social Protection and Elderly, National Authority for the Protection Children Rights and Adoption, Romania ESZTER Foundation Hungary Maria Keller-Hamela Empowering Children Foundation. Poland Vasiliki Kourri Hope for Children CRC Policy Center, Cyprus Ann Lind-Liiberg Department of Children and Families, Ministry of Social Affairs Viola Läänerand Child Protection Unit, Estonian Social Insurance Board. Estonia Andrea Moehringer ChildHood Germany Lauris Neikens Children and Family Policy Department, Ministry of Welfare, Latvia Beata Wojtkowska Empowering Children Foundation

## **Pilot Country Exchange:**

Bulgaria: Social Activities and Practices Institute (SAPI) Cyprus: Hope for Children CRC Policy Center and Ministry for Social Services England: NHS England Estonia: Child Protection Unit, Estonian Social Insurance Board and Department of Children and Families, Ministry of Social Affairs Germany: ChildHood Germany Hungary: Barnahus Szombatehly, ESZTER Foundation and Hungarian Church Aid Ireland: Irish Police Force and TUSI A Latvia: Association Center Dardedze and Children and Family Policy Department, Ministry of Welfare Lithuania: Children Division, Family and Communities Department, Ministry of Social Security and Labour and State Social Home, "Užuovėja" Luxemburg: Ministry of Education, Children and Youth Malta: FSWS-Appogg, Child Protection Services Poland: Empowering Children Foundation Romania: Ministry of Labour, Family, Social Protection and Elderly, National Authority for the Protection of Children Rights and Adoption and Save the Children Romania Scotland: Children First Scotland and Scottish Courts and Tribunal Service

## Editors:

Rebecca O'Donnell Daja Wenke

#### Layout:

Christine Ashton Shawnna von Blixen

## Implementing the Barnahus Quality Standards throughout Europe

PROMISE is supporting Europe to adopt the Barnahus model as a standard practice for providing child victims and witnesses of violence rapid access to justice and care. We undertake this work to fulfil the PROMISE vision: a Europe where the human rights of children to protection from violence, support and to be heard are fulfilled.

A Barnahus provides multi-disciplinary and interagency collaboration to ensure that child victims and witnesses of violence benefit from a child-friendly, professional and effective response in a safe environment which prevents (re)traumatisation. With the formal support from national authorities, PROMISE provides opportunities to translate national commitment into action and engage internationally in the process. In addition, regular networking and strategic communications continually activate our growing network of professionals and stakeholders who are committed to introducing and expanding Barnahus services nationally.

The first PROMISE project (2015-2017) set European standards and engaged a broad network of professionals. The second PROMISE project (2017-2019) promoted national level progress towards meeting the standards and formalised the PROMISE Barnahus Network. Future work will expand these activities to include University training, case management tools, and a European accreditation system.

PROMISE is managed by the Children at Risk Unit at the Council of the Baltic Sea States Secretariat in close collaboration with Child Circle.

## Access the PROMISE tools and learn more at <u>www.childrenatrisk.eu/promise</u>



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## Contents

The PROMISE Vision	2
Foreword	5
Introduction	8
The Barnahus Model	13
The Barnahus Standards	19
Key to reading the Standard Profiles	21
Standard 1: Key principles and cross-cutting activities	24
Standard 2: Multidisciplinary and interagency collaboration in	20
Barnahus	
Standard 3: Inclusive Target Group	46
Standard 4: Child Friendly Environment	49
Standard 5: Interagency case management	53
Standard 6: Forensic Interviews	61
Standard 7: Medical Examination	68
Standard 8: Therapeutic Services	72
Standard 9: Capacity Building	77
Standard 10: Prevention: Information sharing, awareness raising external competence building	
Linking provisions, legal obligations and the European Barnahus Standards: Overview	84
Endnotes	.102

## **The PROMISE Vision**

The vision of the PROMISE project is a Europe where the human rights of children to protection from violence, support and to be heard are fulfilled. To this end, child victims and witnesses of violence in Europe are protected by child-friendly interventions and rapid access to justice and care, based on the following main principles:

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

The Barnahus model refers to multi-disciplinary and interagency interventions organised in a child-friendly setting fulfilling the following criteria:

- 1. The forensic interview is carried out according to an evidence-based protocol;
- The evidentiary validity of the child's statement respects the due process, whilst avoiding a need for the child to repeat her/his statement during court proceedings if an indictment is made;
- A medical evaluation is carried out for forensic investigative purposes and to ensure the child's physical well-being and recovery;
- 4. Psychological support is available, including short and longterm therapeutic services addressing the trauma of the child and non-offending family members and caretakers;
- 5. An assessment of protection needs is carried out and followed up concerning the child victim and siblings in the family.

PROMISE supports the involvement of national and local agencies, governmental and non-governmental, in establishing Barnahus and child-friendly institutions. It inspires progress in all countries by sharing good practices and high-quality standards for a European approach such as:

 Preventing, investigating and responding to violence against children through multi-disciplinary and interagency cooperation among professionals and agencies in social and health care and criminal law before, during and after the judicial proceedings;

- Identifying good practices in a) coordination, joint work and mutual adjustment between agencies; b) cooperation between agencies; and c) collaboration in terms of shared services among agencies in a spirit of collective policymaking;
- 3. Raising awareness on the rights of the child to a non-violent childhood.

To achieve this Vision, PROMISE promotes and supports the establishment of the Barnahus model, or similar models, in all countries in Europe. PROMISE inspires globally for increased multidisciplinary and interagency collaboration so that child victims and witnesses of violence benefit from a child-friendly, professional and effective response in a safe environment. Both the European and the global network of professionals are supported in spreading the PROMISE vision through different means of communication.

The work within PROMISE is grounded in the UN Convention on the Rights of the Child, the EU Victim Rights Directive, the EU Child Sexual Abuse Directive, the EU Anti-Trafficking Directive and the Council of Europe Lanzarote Convention. It also draws from relevant EU and Council of Europe recommendations and guidelines concerning integrated child protection systems, child-friendly justice and childfriendly social services.

## Foreword

The *European Barnahus Standards* represent the first attempt in Europe to define the principles of the interventions and services referred to as the "Barnahus" model. The name Barnahus ("a house for children") originates from Iceland where the first Barnahus was founded in 1998. Since then, many more Barnahus have been set up, mainly in the Nordic countries.

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

These developments have provided the context in which the principles and practice of the Barnahus model have been fostered and continue to spread. The Barnahus can be viewed as an attempt to "operationalize" children's rights to receive adequate support and protection and to have access to child friendly justice. The *European* 

#### Foreword

*Barnahus Standards* embody these operational practices and should therefore be seen as a guidance in a journey toward enhancing the rights of child victims and witnesses.

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

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

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

#### Foreword

It is precisely by setting out a framework, within which there is some scope for flexibility and adaptability, that the importance of the *European Barnahus Standards* become apparent. There are of course limitations to how diverse implementation can be, while preserving the authenticity of the model. The Barnahus are founded on evidence based practices, including forensic protocols, therapeutic interventions and medical examinations. Fidelity to these evidence based principles of the Barnahus when implementing the model in different cultures is crucial.

Today, the Barnahus principles and practice are, implicitly and explicitly, reflected and promoted in many European legal and policy frameworks from the Council of Europe (CoE) and the European Union (EU), including in the CoE Convention on Protection of Children against Sexual Exploitation and Sexual Abuse (2010)<sup>1</sup>, the CoE Guidelines on child friendly justice (2010)<sup>2</sup>, the CoE Recommendation for child friendly social services (2011)<sup>3</sup>, the EU Directive on combating the sexual abuse and sexual exploitation of children and child pornography (2011)<sup>4</sup> and the EU Directive on minimum standards on the rights, support and protection of victims of crime (2012)<sup>5</sup>.

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

Bragi Guðbrandsson, March 2017

## Introduction

When a child is exposed to violence, many different actors, including social services, medical and mental health services and law enforcement actors, have a duty to safeguard and promote the rights and well-being of the child. Each actor carries an individual responsibility to ensure that their role is fulfilled in an effective and child-friendly manner, and that the best interests of the child remains a primary consideration.

Where these actors do not work together, the child can be drawn into parallel enquiries and assessments, moving between different agencies and disciplines. Repeated interviews with different persons, in different locations and by different services in combination with inadequate interviewing methods have been shown by research and clinical experiences to contribute to (re)traumatisation of the child.<sup>6</sup>

This is a serious problem since the child's disclosure is fundamental to ensure the safety and protection of the child, to determine the need for physical and mental recovery, and to secure a successful and child-friendly<sup>7</sup> criminal investigation and judicial process<sup>8</sup>. In addition, inadvertent inconsistencies between interviews conducted at different times, locations and by people with varying degrees of competence may lead to the child being discredited as a witness.<sup>9</sup>

In recent years, there has been an increasing recognition that multidisciplinary and interagency (MD/IA) collaboration is crucial to fulfilling the rights of child victims and witnesses of violence to protection, participation, support and assistance. Multi-disciplinary and interagency collaboration can bring important benefits to both

#### Introduction

children and professionals, but it is not always without challenges. It demands commitment and investment from all agencies involved. Solid building blocks for a well-functioning and effective organisation that enables agencies to work together in a coordinated fashion must be put in place. Importantly, the cooperation needs to be set up in a way that places children's rights, needs and interests at the centre.

Drawing on international and European law and guidance and the Barnahus<sup>10</sup> model, this document introduces ten good practice standards, the "European Barnahus Standards", for multidisciplinary and interagency services for child victims and witnesses of violence in Europe adapted to the child. This document is a summary of the full version of the guidance which introduces the standards.<sup>11</sup>

The key purpose of the standards is to provide a common operational and organisational framework that promotes practice which prevents (re)traumatisation<sup>12</sup> and complies with children's rights to protection, assistance and child-friendly justice, while securing valid testimonies for Court.

The standards are a collection of cross-cutting principles and activities, core functions and institutional arrangements that enable child-friendly, effective and coordinated interventions, including: 1.1 Best interests of the child; 1.2 Children's rights to be heard and receive information; 1.3 Preventing Undue Delay; 2. Multidisciplinary and Interagency Organisation; 3. Target Group; Child-friendly environment; 5. Interagency planning and case management; 6. Forensic Interviews; 7. Medical Examination; 8. Therapeutic services; 9. Capacity building and; 10. Prevention: Information sharing and external competence building. By practising in accordance with the standards, (re)traumatisation can be prevented, since it involves ensuring that the best interest of the child informs practice and decisions; that the right of the child to be heard is fulfilled without repetitive interviews; that the child is interviewed and supported by specialised and competent professionals; that interviews are carried out in a multidisciplinary environment in one child-friendly premise, offering adequate support to the child and care-givers without undue delay and; that the child is not obliged to appear in Court.<sup>13</sup>

The standards are inspired by previous work in this area, including the Standards for Accredited Child Advocacy/Protection Centres of the National Children's Alliance<sup>14</sup> in the USA and the criteria developed for evaluation of Barnahus in Sweden<sup>15</sup>. They have been developed with the input from experienced experts and practitioners from Barnahus and child-friendly centres working with child victims and witnesses of violence in Europe. They are based on what has been demonstrated to work and have genuine added value for the child, the family and the professionals working together<sup>16</sup>.

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

#### Introduction

addressed in authoritative guidance on implementing these laws<sup>17</sup>. In short, the institutional arrangements describe ways of working that enable teams to maximise their ability best to fulfil the legal provisions.<sup>18</sup>

The standards have been formulated to ensure transferability and adaptability, recognising that they will be implemented in different political, legal, judicial, socio-economic and cultural contexts.<sup>19</sup>

In adopting the standards, it should be noted that it is important continuously to assess and evaluate the organisational set-up and performance of the service. The indicators attached to the standards provide some examples of information that reveals to what extent the standards are met and can support review of policy and practice. Evaluation also provides important opportunities to ensure that new research, guidance, law and experience inform the practice and setup of the service. Special efforts should be made to ensure that children are heard and that their views inform the set-up of the service.<sup>20</sup> This document adopts the definition of violence set out in Article 19 of the Convention on the Rights of the Child: "all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse".

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

## Learn More

The full version of this guidance includes illustrative examples of noteworthy practice from prominent Barnahus and child-friendly services in Europe, displaying how different types of services and national contexts have generated different approaches while keeping to the fundamental principles, activities and arrangements outlined in the standards.<sup>21</sup>

See also the *Interagency Agreement Template and Guidance*, which can help you explore elements that are crucial to implementing the standards in your specific context. The purpose of the guidance and template is to provide inspiration and guidance for drafting an interagency agreement which formalises multidisciplinary and interagency (MDIA) team collaboration between agencies involved in Barnahus.<sup>22</sup>

## **The Barnahus Model**

Barnahus (Icelandic for "a house for children") is recognised as a leading child-friendly, multidisciplinary and interagency model responding to child victims and witnesses of violence.<sup>23</sup> The purpose of Barnahus is to offer each child a coordinated and effective response and to prevent (re)traumatisation during investigation and court proceedings.

One key role of the Barnahus is to help produce valid evidence for judicial proceedings by eliciting the child's disclosure so that the child does not have to appear in Court if the case is prosecuted.<sup>24</sup>

In carrying out this role, the Barnahus offers a one-stop-shop approach, embracing cooperation between relevant authorities and agencies such as the police, social services, child protection, physical and mental health services and the prosecutor in one child-friendly premise. The Barnahus also plays an important role in enhancing awareness and knowledge of violence against children with key stakeholders.<sup>25</sup>

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

There are a few other multidisciplinary and interagency services that are similar to the Barnahus model in Europe. These services typically have a varying degree of involvement of the national health, social services, child protection system and/or local authorities.<sup>26</sup>

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

The Children's Advocacy Centre (CAC) model<sup>27</sup> in the US and the Barnahus model share the same overall goal to prevent (re)traumatisation and to provide a multidisciplinary response to the child. The police and prosecution are involved, but in the CAC model, the service is not formally embedded in the judicial system. The child typically must appear in court if an indictment is made since, depending on state law, the testimony is not taken under the conditions of "due process". However, the CAC prepares and supports the child for the court proceedings and plays an important role in reducing the number of times that the child has to disclose his or her experience, while ensuring that there is a coordinated response by different services for each child.

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

Some European countries have adopted a multidisciplinary and interagency approach to child protection without offering joint services in one child-friendly location. While some of the standards may be applicable to certain elements of such arrangements, this guidance strongly promotes a "one-stop-shop" approach, where the child is offered a coordinated response in one child-friendly location. In fact, this is considered a key condition to preventing (re)traumatisation and securing the child's disclosure.

The model on the following page illustrates how the Barnahus in Iceland has been set up. The full guidance includes Barnahus models and similar services in other countries.

BARNAHU	BARNAHUS Iceland
The key role of Barnahus i	The key role of Barnahus is to coordinate the parallel
criminal and child v	criminal and child welfare investigations
Coordinates interagency collaboration.	Coordinates interagency collaboration, esp. with regard of evidence collection;
Conducts forensic interviews by a	Conducts forensic interviews by applying evidence based protocols;
Provides consultation and advice in individua	Provides consultation and advice in individual cases in collaboration with partner agencies;
Provides specialised assessment an	Provides consultation and advice to non-offending for child victims of violence;
Provides consultation and advice to non	Provides consultation and advice to non-offending parents and other caretakers;
Provides consultation and advice to local child	Provides consultation and advice to local child protection services, and others as appropriate.
FORENSIC INTERVIEWS - MENTAL HEALTH PROFESSIONALS	ASSESSMENT, THERAPY, SUPPORT –
SPECIALISED IN FORENSIC INTERVIEWS	SPECIALISED MENTAL HEALTH PROFESSIONAL
<ul> <li>Court testimonies:         <ul> <li>Responsible for obtaining the child's testimony under the auspice of a court judge and under observation of the defense as well as the prosecution, the police, the local child protection and the child's approach of a court indicate obtained and obtained in the child.</li> </ul> </li> </ul>	Assessment and treatment - Responsible for mental health assessment on the basis of validated instruments and questionnaires - Responsible for mental health treatment by the application of evidence based therapy
<ul> <li>meanates questions non unsjouge, the detense and others as</li></ul>	Ensuring access to treatment
propriate <li>Testimonies are recorded for usage during court hearing if</li>	- Providing the therapy in the home environment of the child
indictment is made	victims in the countryside
<ul> <li>Exploratory interviews:</li> <li>Eliciting the child's narrative if possible in cases where disclosure is absent or ambiguous at the request of the local child protection services</li> <li>Obtaining the child's testimony in cases where the suspected offender is below the age of criminal responsibility at the request of the child protection services</li> </ul>	Support to non-offending parents      Providing counselling and advice to the non-offending parents/ caregivers and siblings as appropriate
<ul> <li>MEDICAL EXAMINATION - SPECIALISED MEDICAL STAFF</li> <li>Medical examinations are carried out at the request of the police, the local child protection services, the child or the parents</li> <li>An experimend pediatrician, a gynecologist and a trained nurse, staff of the University Hospital of Iceland, are responsible for the examination</li> <li>Acute forensic medicals are performed at the University Hospital</li> </ul>	OTHER TASKS - BARNAHUS TEAM - Consultation and advice to the local child protection services at requests. - Coordination case meeting and case management prior to court testimonies - Intragency meetings for consultation prior referrals to Barnahus - Submission of reports to courts in prosecuted cases - Recording of cases and keeping archives - Education, training and awareness raising
<ul> <li>&gt; Formally embedded in the government agency for child protection.</li> <li>&gt; The government agency provides legal and staff management.</li> <li>&gt; The government agency provides legal and other professional guidance and is responsible for administrative issues in collaboration with the courts, the district prosecution, the police, the university hospital and the local child protection which are partners of Barnahus.</li> </ul>	ent. and is responsible for administrative issues in niversity hospital and the local child protection which

## Key common criteria of Barnahus

Barnahus offers a child-friendly, safe environment for children, bringing together all relevant services under one roof.

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

## Learn More

Each national context will have their own specific opportunities and challenges to set up a Barnahus or similar model. The full version of this guidance includes illustrations of five different models and examples of noteworthy practice which show how different national contexts have generated diversity and ingenuity in setting up and operating Barnahus and similar child-friendly services, while complying with the core principles and values that the standards represent.<sup>28</sup>

See also the *Interagency Agreement Template and Guidance*, which can help you explore elements that are crucial to implementing the standards in your specific context.<sup>29</sup>

## **The Barnahus Standards**

This chapter presents the European Barnahus Standards. The standards are composed of cross-cutting principles and activities, core functions and institutional arrangements that enable childfriendly, effective and collaborative practice. In most cases, the standard consists of several related elements of the overall standard. For example, the standard related to target group includes two elements: "an inclusive and broad definition" and "nondiscrimination".

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

The description and rationale of the standards and suggested indicators, the related law and guidance and relevant tools are summarised in tables containing the "Standard Profile". <u>A key to the</u> "Standard Profile", describing the content, can be found on page 21.

The standards are transferable and can be adapted to different national systems and processes related to social services and child protection<sup>30</sup>, health care, criminal investigation and judicial proceedings.

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

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

Standard 5-10 deal with core functions and specific activities that the Barnahus undertakes, for example, interagency case management, forensic interviews or medical examination.

## Learn More

The full version of this guidance includes several good practice illustrating how the standards have been implemented by experienced Barnahus and child-friendly centres for child victims and witnesses of violence in Europe. It also contains tools and extracts from law and guidance that provide further guidance in applying the standards. It furthermore includes illustrative examples of the process from initial report to trial and the role of the Barnahus and child friendly services in several countries.<sup>31</sup> See also the *Interagency Agreement Template and Guidance*, which can help you explore elements that are crucial to implementing the standards in your specific context.<sup>32</sup>

## Key to reading the Standard Profiles

## What is the standard?

Drawing on UN, EU, Council of Europe law and the Barnahus model, this document introduces ten good practice standards for childfriendly and effective services for child victims and witnesses of violence. The core aim of the standards is to provide a framework which prevents (re)traumatisation, secures valid testimonies for Court and complies with children's rights to protection, assistance and child-friendly justice.

The standards support implementation of European and international legal obligations and authoritative guidance on the implementation of relevant law and policy.

## Why should this standard be met?

References to international and European legal obligations: The standards and indicators embody legal obligations, referred to in this box. These legal obligations, categorised in the PROMISE Compendium on Law and Guidance, are based on specific provisions in international and European legal instruments. The table at the end of this document includes a list of provisions and legal instruments that are of particular relevance to the respective standards and legal obligations.

**References to Guidance:** The specific arguments concerning why a standard should be met draw on authoritative guidance provided by the UN Committee on the Rights of the Child and other bodies such as the Council of Europe.

**Research and Experience:** The standards place children's needs at the centre, with an overall aim to ensure effective and child-friendly practice for all children who are victims or witnesses of violence. The standards are therefore developed considering research and experience of multidisciplinary and interagency teams of what has been demonstrated to work and have a positive impact on the wellbeing of the child victim or witness and their non-offending family members.

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

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

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

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

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

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

## Learn More

The full version of this guidance includes references to practical tools, guidance, policy, templates and other resources that can help support implementation of the standard, including the See also the *Interagency Agreement Template and Guidance*.<sup>33</sup>

# Standard 1: Key principles and cross-cutting activities

Standard 1 consists of three key principles, which inform the multidisciplinary practice and decision-making at Barnahus.

The principles are operationalised through cross-cutting activities that are implemented as integral parts of the respective core functions set out in standards 5-10.

The cross-cutting activities are enabled by the institutional arrangements and organisational set-up contained in standards 2-4.

The key principles and cross-cutting activities embody core provisions in international, regional and national law, including article 3 and 12 of the UN Convention on the Rights of the Child.<sup>34</sup> They are crucial to preventing (re)traumatisation, which is a central aim of the Barnahus.

The key principles and cross-cutting activities covered by Standard 1 focus on:

- Ensuring that the best interests of the child are placed at the centre of practice and decision-making (standard 1.1);
- That children's rights to be heard are fulfilled without causing (re)traumatisation, including through providing them with adequate information at all times (standard 1.2) and;
- Ensuring that protection, assistance and justice processes are undertaken in a timely way (standard 1.3).

Child safeguarding is a crucial principle and cross-cutting activity which is treated specifically under standard 2 and 10.

## Standard 1.1 Best interests of the child

## What is the standard?

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

## Why should this standard be met?

International legal obligations: The best interests of the child (UNCRC article 3) is a right, a general principle and a rule of procedure. It is relevant to the implementation of the whole Convention, including children's right to protection against violence. UNCRC article 3 requires actors to carefully consider the impact of their actions on children to ensure that the best interests of the child are a primary consideration. The Committee on the Rights of the Child (CRC) emphasises that article 3(3) is relevant to the provision of all services and facilities for children. Services for child victims and witnesses of violence must therefore ensure that decisions on appropriate action are based on an assessment of the best interests of the individual child. The CRC recognises that the concept of the child's best interests is "complex and its content must be determined on a case-by-case basis".<sup>35</sup>

## **European legal provisions:**

• Ensuring the best interests is a primary consideration in the application of the obligations in the Directives.

**Guidance:** CRC General Comment no 13 emphasises that "the right of children to have their best interests be a primary consideration in all matters involving or affecting them must be respected, especially when they are victims of violence, as well as in all measures of prevention". CRC General Comment no 14 places specific emphasis on multidisciplinary teams in assessing and determining<sup>36</sup> the best interests of the child (GC no 14, para 47). Working together, a multidisciplinary and inter-agency team is particularly well placed to ensure a comprehensive assessment and that the best interests of the child is considered throughout the full process. Common routines and measures help to ensure that the best interests of the child are central to the multidisciplinary and interagency process.

Also see CoE Guidelines for Child friendly justice (2010) Ch. 3. D.; CoE Rec. Child-friendly social services (2011) Ch. 3.A and; the EC Reflection paper proposing 10 principles for integrated child protection systems.

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

- A framework/routine/process for engaging the multidisciplinary and interagency team in assessing and determining the best interests of the individual child is in place and is systematically implemented;
- A (non-exhaustive and non-hierarchical) list of elements to be included in the best interests assessment with the purpose of ensuring the full and effective enjoyment of the child's rights as set out in law and guidance is in place and is systematically used by the Barnahus team;

- Staff are clear about their respective roles and responsibilities in assessing and determining the best interests of the individual child;
- Staff are aware of and have received training on how to apply procedures and tools for this purpose, for example checklists, protocols and processes to assess and determine the best interests of the individual child;
- The best interests assessments take into account the child's views, the child's identity, preservation of family environment and maintaining relations, care, protection and safety of the child, situation of vulnerability, right to health, education and that the respective elements are balanced<sup>37</sup>;
- The best interests determination is carried out by qualified professional(s) without undue delay. It is based on established facts and informed by the child and nonoffending caregiver(s).

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

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

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

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

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

**Follow up meetings:** The Barnahus organises a meeting with the child and caregivers within a week after the forensic interview at Barnahus. This provides an opportunity to ask the child and the parents for feedback about the experience at Barnahus. Phone interviews are also held with the person who accompanied the child to Barnahus about how the child experienced the visit at Barnahus.

## A framework for assessing and determining the best interests of the child

The UN Committee on the Rights of the Child (CRC) has provided authoritative guidance on how assessment and determination of the best interests of the child should be carried out and what elements should be considered in its General Comment no 14 (2013) on the right of the child to have his or her best interests taken as a primary consideration (art 3, para 1).

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

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

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

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

- The child's views
- The child's identity
- Preservation of the family environment and maintaining relations
- Care, protection and safety of the child
- Situation of vulnerability
- The child's right to health
- The child's right to education

# Standard 1.2 Right to be heard and to receive information

## What is the standard?

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

## Why should this standard be met?

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

## **European legal provisions:**

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

**Guidance:** The UN Committee on the Rights of the Child (CRC) emphasises that "age should not be a barrier to the child's right to participate fully in the justice process". The right of child victims of violence to be heard is laid down in article 19 of the UNCRC and has been reaffirmed and clarified by the CRC, for example in General Comment no 13. The CRC has urged States to "ensure that the views, needs and concerns of child victims who have suffered sexual abuse or other violent crimes be presented and considered in proceedings where their personal interests are affected". In doing so, States "must undertake all necessary measures to ensure that the right to be heard is exercised ensuring full protection of the child" (CRC General Comment no 12). Measures should be implemented to avoid re-traumatisation, for example avoiding repetition of testimonies and the use of video-taped interviews (General Day of Discussion on the right of the child to be heard).

Also see the CoE Guidelines for Child-friendly justice (2010) Ch. IV.D.3; CoE Rec. Child-friendly social services (2011) Ch. 3. B and; the EC Reflection paper proposing 10 principles for integrated child protection systems, including principle 1. **Research and Experience:** The right to receive information and to be heard are fundamental aspects of the multidisciplinary and interagency process. Systematically hearing the views of the child will provide a deeper understanding of the child's wishes and needs and facilitate determination of the best interests of the child as well as appropriate and sustainable action, including, for example, treatment and therapy. Access to adequate information is a prerequisite for meaningful participation. It will also empower the child and help the child gain control over the situation.

When children are provided with opportunities to share feedback on their experience at the service, they can contribute to making the environment, the process and interventions more child-friendly and appropriate to children's needs and wishes.

In a recent study carried out by the Fundamental Rights Agency, based on interviews with 392 children in 9 EU Member States, children underline the importance of their right to be heard with understanding and respect. They highlight the need for clear and practical guidelines as well as training for all professionals who come into contact with children.<sup>38</sup>

"It's just good to be heard and that it's going to make a difference" —16 year old girl, victim, sexual abuse

"I hardly got (any) information about it, because my foster parents hold everything back" -15 year old girl, victim, sexual abuse<sup>39</sup>

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

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

#### Learn More

To learn more about how this standards can be implemented in terms of gathering children's perspectives on their experience in Barnahus, see *Standard 1.2. Child Participation Tool*, which provides guidance and a selection of sample questionnaires.<sup>40</sup>

## Standard 1.3 Avoiding Undue Delay

### What is the standard?

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

### Why should this standard be met?

#### **European legal provisions:**

- No unjustified delay between the reporting of the facts and interviews take place
- Individual assessment of each child's circumstances and nonoffending family members' needs
- Provision of information
- Provision of assistance and support

**Guidance:** The UN Committee on the Rights of the Child (CRC) states that effective help requires that actions, once decided through a participatory process, must not be subject to undue delay (UNCRC General Comment no 13). Also see CoE Guidelines on Child-friendly Justice (2010), Ch. IV.D.4. **Research and Experience:** Avoiding undue delay is a fundamental principle of child protection and child-friendly criminal investigations and proceedings. Effective interagency work also relies on avoiding undue delay so that each of the agencies can carry out their respective functions in a timely manner. This has a positive impact on the well-being of the child and can improve the outcomes of the criminal investigation and judicial process. For example, avoiding undue delay between reporting and the forensic interview can make it easier for a child to tell their story and remember details, thus improving the quality and value of the child's testimony. It may also reduce risk that the child is exposed to pressure to withdraw statements. It also enables an early assessment of potential protection needs without contaminating the evidential value of the child's statement. This in turn ensures that there is no delay in protecting the child from further exposure to violence. A medical examination done in a timely manner can reveal evidence of physical violence which can guide both treatment processes and judiciary proceedings. It may also allow therapeutic services to start earlier.

"I just wanted everything to be over. But it was taking ages and we kept getting more visits saying it was going to be even longer ... I wanted it to be over for me to get my normal life back again. But then it was months and months before that actually happened." -12 year old girl, victim, sexual abuse<sup>41</sup>

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

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

## **Quantitative indicators**

- Time passed between disclosure or reported suspicion and the initiation of the child protection assessment;
- Time passed between disclosure or reported suspicion and the first interagency planning meeting;
- Time passed between the interagency planning meeting and the forensic inter-view;
- Time passed between disclosure or reported suspicion and forensic interview;
- Time passed between disclosure or reported suspicion and mental health assessment;
- Time passed between disclosure or reported suspicion and medical examination;
- Time passed between disclosure or reported suspicion and medical/mental health intervention for the child and the non-offending family/care-givers/sup-port persons;
- Time passed between initiation of the preliminary criminal investigation and the decision to prosecute;
- Time passed between initiation of the preliminary criminal investigation and trial.

# Standard 2: Multidisciplinary and interagency collaboration in Barnahus

## What is the standard?

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

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

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

### Why should this standard be met?

**European legal provisions:** 

Multi-disciplinarity/coordination/cooperation

**Guidance:** The UN Committee on the Rights of the Child (CRC) promotes effective procedures, including inter-sectoral coordination, mandated by protocols and memorandums of understanding as necessary (CRC General Comment no 13). Also see CoE Guidelines for Child-friendly justice (2010) Ch.IV.5; CoE Rec. Child-friendly social services (2011) Ch.V.E and; the EC Reflection paper proposing 10 principles for integrated child protection systems.

**Research and Experience:** A structured organisation, with clearly established roles, mandates, coordination mechanisms, budget, measures for monitoring and evaluation, contributes to efficient and collaborative interagency teams, mutual respect of roles and a sense of shared responsibility. Formal agreements help ensure continuity and commitment from the respective agencies' leadership. The support of a permanent staff member designated to coordinate operations and interventions of the interagency team can help ensure a smooth process and continuity. The coordinator can oversee that the members of the team follow up on their respective responsibilities and detect problems in the multidisciplinary and interagency process at an early stage. The coordinator can furthermore play an important role in planning and keeping to routines and procedures.

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

#### **Formal status**

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

#### Formal interagency foundational agreements

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

• Staff are aware of formal foundational agreement and have received training in its application.

#### Coordination

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

#### Budget

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

#### Child Safeguarding and other internal policies

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

# Regulating the establishment and use of Barnahus in the Nordic countries<sup>42</sup>

#### Denmark

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

"The municipal councils in the region shall establish a children's house (Barnahus) in each region to examine a child's or young person's circumstances if the child or young person has been exposed to abuse or in the event of any suspicion of such abuse.

(2) The Minister for Social Affairs and the Interior may lay down rules governing the layout, operation, financing and duties, etc. of the children's houses".<sup>43</sup>

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

### Iceland

Barnahus in Iceland was set up without formal regulations, based on an informal agreement between the participating agencies. Today, the Government Agency for Child Protection (Barnaverndarstofa) is mandated to "run special service centres with the objective of promoting interdisciplinary collaboration, and strengthening coordination of agencies in the handling of cases of child protection"<sup>44</sup>

Furthermore, the law on criminal procedure (nr. 88/2008) stipulates that debriefing of child victims aged up to 15 years shall be

conducted under the auspices of a court judge "in a facility especially designed for such purposes"<sup>45</sup> and with the support of a specially trained person<sup>46</sup>. These provisions of the law on criminal procedures are generally understood by court judges to mean that it is mandated to interview children below the age of 15 in Barnahus.

#### Norway

Barnahus in Norway were initially set up without a formal regulative framework. Today, the Criminal Procedure Act and regulation on facilitated investigative interviews make it mandatory for police and prosecutors to use the Barnahus.<sup>47</sup>

#### Sweden

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

"The goal of such cooperative operations is to ensure that children who are suspected of having been exposed to crime enjoy legal protection, proper treatment and support and, if needed, immediate crisis and therapeutic interventions. Throughout the process, the focus shall be on the best interests of the child. The child shall be informed in all matters that affect him or her and shall be given the opportunity to express his or her views to the extent and in such a manner that his or her level of maturity permits. The investigations that are carried out in parallel within the legal system and the social services shall be commenced promptly and shall be conducted as rapidly as consideration for the child and for the complexity of the situation permits. The preliminary investigation shall be completed and a decision made as regards the laying of charges as soon as possible. The investigations are subject to statutory completion deadlines".<sup>48</sup>

The details of the interagency collaboration in the Barnahus are mostly regulated by formal agreements between the agencies (see example from Barnahus Linköping).

## **Standard 3: Inclusive Target Group**

### What is the standard?

**3.1 Inclusive/broad definition of target group:** The Barnahus target group includes all children who are victims and/or witnesses of crime involving all forms of violence<sup>49</sup>. Non-offending family/care-givers are included as a secondary target group.

**3.2 Non-discrimination:** Special efforts are made to reach all child victims and witnesses regardless of form of violence.

### Why should this standard be met?

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

#### **European legal provisions:**

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

**Guidance:** The Committee on the Rights of the Child (CRC) stresses that States parties shall take adequate measures to assure to every child the right to protection from all forms of violence "without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status". States parties must furthermore make proactive efforts to ensure that children in potentially vulnerable situations are assured their right to protection on an equal basis with all other children (CRC General Comment no 13). Also see CoE Guidelines for Child-friendly justice (2010) Ch.III.D and CoE Rec. on Child-friendly social services (2011) Ch.V.B

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

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

#### Defining the target group

- The target groups are defined in the mission statement or formal foundational agreement of the Barnahus;
- The target groups include all children who are victims or witnesses of all forms of violence, including but not limited to physical and mental abuse, domestic violence, sexual abuse and exploitation, commercial exploitation, trafficking, genital mutilation and crime with honour motives<sup>50</sup>.

#### Non-discrimination

- A multidisciplinary and interagency response is offered to all<sup>51</sup> children who are referred to the Barnahus. Child protection assessment, criminal investigation, medical and mental health examination, crisis intervention<sup>52</sup> and follow up is planned and carried out in all cases;
- The services are accessible to children regardless of where they live. Mobile resources and local hearing rooms are used as necessary, especially for the initial investigation, continuous crisis intervention and treatment and for follow up;
- The Barnahus is made available and accessible to children with special needs and disabilities so that they receive equitable information, guidance and opportunities to express their views and disclose in interviews;
- Interpretation is offered to children and non-offending caregivers when needed, ensuring that they receive adequate information, guidance and opportunities to express their views and disclose in interviews.

# Standard 4: Child Friendly<sup>53</sup> Environment

## What is the standard?

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

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

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

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

**4.5 Interview room:** The Barnahus provides for live observation of interviews in a room other than the interview room for the interagency team<sup>54</sup>.

### Why should this standard be met?

#### **European legal provisions:**

- Interviews take place in premises designed or adapted for this purpose
- Right to avoid contact between victim and offender

**Guidance:** CoE Guidelines for Child-friendly justice (2010) Ch. IV.D.5 and CoE Rec. on Child-friendly social services (2011) Ch.IV.B.

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

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

#### Place and accessibility

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

#### **Interior Environment**

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

#### Privacy

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

#### Preventing contact with the suspected perpetrator<sup>55</sup>

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

#### **Interview Room**

- Interview and observation room are separated but connected via intercom audio-visual systems;
- The observation of the interview is done on a screen in an adjacent observation room;
- The room is comfortable and child-friendly. It is furnished and decorated to avoid distraction;
- The camera is set up so it can follow the child and capture hand movements if the child is drawing or showing something.

# Standard 5: Interagency case management<sup>56</sup>

## What is the standard?

**5.1 Formal procedures and routines:** Interagency case review and planning is integral to the work of the Barnahus team and the respective agencies in the Barnahus and is formalised by mutually agreed upon procedures and routines.

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

**5.3 Continuous case tracking:** The Barnahus ensures continuous documentation and access to relevant case information for interagency team members on the progress of the case until the case is closed, observing national laws on data protection, privacy and confidentiality.

**5.4 Support Person**<sup>57:</sup> A designated, trained individual or member of the Barnahus team monitors the multidisciplinary response to ensure that there is continuous support and follow up with the child and non-offending family/care-givers.

## Why should this standard be met?

#### **European legal provisions:**

- Ensuring the best interests is a primary consideration in the application of the obligations in the Directives
- Individual assessment of each child's circumstances and nonoffending family members' needs
- Multidisciplinarity/coordination/cooperation
- Circle of Trust provisions

Guidance: The UN Committee on the Rights of the Child (CRC) emphasises effective procedures for the implementation of children's right to be protected from violence (art 19 UNCRC), including intersectoral coordination, which is mandated by protocols and memorandum of understanding as necessary. The CRC also states that "professionals working within the child protection system need to be trained in interagency cooperation and protocols for collaboration". The process will involve: (a) a participatory, multidisciplinary assessment of the short- and long-term needs of the child, caregivers and family, which invites and gives due weight to the child's views as well as those of the caregivers and family; (b) sharing of the assessment results with the child, caregivers and family; (c) referral of the child and family to a range of services to meet those needs; and (d) follow-up and evaluation of the adequateness of the intervention. (General Comment no 13). Also see CoE Guidelines for child-friendly justice (2010) Ch. 4.A.5 and CoE Rec. Child-friendly social services (2011) Ch. V.E, Hd, and J.

**Research and Experience:** Interagency case planning, supported by procedures and protocols, is important to ensuring multidisciplinary, coordinated, efficient and relevant interventions by the interagency

team and the respective agencies. Case tracking and case review enable the team, to the greatest extent possible and in accordance with legal requirements and the best interest of the child, to collect and share information so that specific cases can be consulted and revisited through all stages of the investigative and judicial process. Case tracking furthermore allows the interagency team to monitor progress and outcomes of cases referred to the service. Adequate victim support and follow up by a designated professional throughout the process can help reduce anxiety and trauma of the child and nonoffending family/care-givers. A crucial aspect of victim support is to ensure that there is continuous information available to the child and the non-offending caregivers and that the child's views are given adequate consideration. Non-offending families/ care-givers may need guidance and support in strengthening their capacity to support the child, understanding the judicial process, the rights of the child and the treatment that is available.

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

#### Formal procedures and routines

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

• Staff are aware of and have received training on procedures and routines.

#### Interagency planning and case review

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

#### **Continuous case tracking**

 The Barnahus systematically documents case specific information, at all times respecting national law and policy on data protection, privacy and confidentiality. Information that is collected includes, but may not be limited to: the victim's and family's demographics, forensic interviews and attendance at forensic interviews, number of multidisciplinary case review meetings held, agency representation at these meetings, therapeutic reports and medical reports where possible.<sup>58</sup>

#### **Support Person**

- The child and caregivers are provided with continuous support and regular information throughout the whole investigative and judicial process;
- Follow up after the judicial process and treatment has been finalised is organised according to the needs of the child and family/caregivers<sup>59</sup>;
- A designated, trained individual or member of the interagency team monitors the multidisciplinary response to ensure that there is continuous support and follow up with the child and non-offending family/caregivers;
- If the role as support person/coordinator is carried out by an authority that is not present in the service, a team member in the service is responsible for liaising with this authority, ensuring adequate communication and follow up.

# Regulating Exchange of Information at Barnahus in Danish Law

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

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

#### Barnahus

Chairs the interagency meeting. Responsible for ensuring a joint assessment is made at the meeting based on information from the respective agencies. Responsible for ensuring there is an agreement between the agencies on continuous case planning. Acts as secretary to the Steering group and disseminates meeting notes to the participating agencies.

#### Paediatric Unit at the hospital

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

#### Agency for Child and Adolescent Psychiatry

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

#### **Police and Prosecutor**

Contribute with criminal and judicial expertise. Make an initial assessment of need to initiate a criminal investigation.

#### **Social Services**

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

# Standing Agenda for Interagency Meeting at Stockholm Barnahus

#### Introduction and framework of the meeting

- Introduction of participants: Name and agency
- Documentation from the meeting: Common notes from meeting or each agency separately
- Confidentiality Considerations: Are any of the participating agencies bound by confidentiality short information

#### **Purpose of the Meeting**

- Exchange of information and joint planning
- Ensuring that child perspective and best interests are primary considerations
- Determining specific purpose related to the case

#### Background and previous knowledge about case

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

#### Planning ahead of the Forensic Interview

• What action have the respective agencies carried out since the police report was made?

#### Planning for the Day of Forensic Interview:

- Date and Time
- Legal representative and person known to the child who will accompany the child to Barnahus
- Specific characteristics and situation of the child such as language, special needs, situation at home
- Presence in observation room by the Agency for Child and Adolescent Psychiatry

#### Planning after the Forensic Interview - things to consider already

- Child Protection Assessment different scenarios
- How will the child's caregiver be informed?
- Planning of the child's potential reunification with the parents/caregivers after the interview
- Prosecutor and Police thoughts on next steps
- Crisis intervention
- Medical Examination
- Who will provide information to the child regarding decisions and actions CRC art 12

#### **Other Issues**

- Are there siblings who may have witnessed the violence?
- Other, including potential need for interpretation

#### Summary of interagency meeting

- Summary of meeting
- If changes are required to the planning, all agencies need to be informed

# Standard 6: Forensic Interviews<sup>60</sup>

## What is the standard?

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

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

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

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

**6.5 Respecting defendant's right to a fair trial and "equality of arms":** Arrangements are in place that allows the defence to pose questions to the child victim/witness via a forensic interviewer.

Should the accused person have the legal right to observe the child's testimony, this is done by audio-visual transmission to avoid potential contact between the accused and the child.

**6.6 Adapted to child:** The interview is adapted to the child's age, development and cultural background and considers special needs, including interpretation. This may include minimising the length of interviews, allowing breaks, and potentially conducting the interview over more than one session. The number of interviews is limited to the minimum necessary for the criminal investigation. The same professional conducts the interview if multiple interviews are necessary. All arrangements are made in the best interests of the child, which in some cases can involve carrying out more interviews and/or changing the professional who interviews the child.

## Why should this standard be met?

#### **European legal provisions:**

- Provision of information
- Right to interpretation & translation
- Adapted procedures in investigations and judicial proceedings involving children
- Interviews take place, where necessary in premises designed or adapted for this purpose
- Interviews are carried out by or through professionals trained for this purpose
- The same persons, if possible and were appropriate, conduct all interviews with children
- Interviews of victims of sexual violence, gender-based violence or violence in close relationships being carried out by persons of the same sex

- The number of interviews is as limited as possible and interviews are carried out only where strictly necessary and for the purpose of the investigations and proceedings
- All interviews with a child victim or where appropriate a child witness, may be audio-visually recorded and that such recordings may be used as evidence in criminal court proceedings
- Possibility to order that the child victim be heard through the use of appropriate communication technologies
- Right to avoid contact between victim and offender
- Training & tools
- Multidisciplinarity/coordination/cooperation

Guidance: The UN Committee on the Rights of the Child (CRC) emphasises that "Investigation of instances of violence, whether reported by the child, a representative or an external party, must be undertaken by gualified professionals who have received role-specific and comprehensive training, and require a child rights-based and child-sensitive approach. Rigorous but child-sensitive investigation procedures will help to ensure that violence is correctly identified and help provide evidence for administrative, civil, child-protection and criminal proceedings. Extreme care must be taken to avoid subjecting the child to further harm through the process of the investigation. Towards this end, all parties are obliged to invite and give due weight to the child's views." (UNCRC General Comment no 13). The CRC furthermore states that when children's rights are violated "States need to give particular attention to ensuring that there are effective, child-sensitive procedures available to children" (General Comment no 5). It furthermore urges States parties "to adopt and implement rules and proceedings for child victims of

physical violence, sexual abuse or other violent crimes ensuring that repetition of testimonies be avoided by the use of video-taped interviews to reduce retraumatisation" (General Day of Discussion on the right of the child to be heard). Also see CoE Guidelines on Childfriendly justice Ch. IV.D.6 and the EC Reflection paper proposing 10 principles for integrated child protection systems, European Commission, for example Principles 1, 2 and 6.

**Research and Experience:** Research has shown that repeated interviews can be very traumatic for the child and that retraumatisation can be more harmful to the child than the abuse itself. Special measures must therefore be taken to ensure that children are provided with opportunities to give evidence in an emotionally and physically safe and conducive setting. Research has also shown that repeated interviews carried out by people who are not specifically trained in forensic interviewing can distort the child's account of events, for example by suggestive questioning. Forensic interviews must conform to requirements of rules of evidence and respect the rights of the defence so that the evidence gathered is valid in court.<sup>61</sup>

# Examples of indicators and/or evidence that the standard is being met<sup>62</sup>

#### **Evidence-based Practice and Protocols**

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

#### **Specialised Staff**

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

#### Location and recording

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

#### Multidisciplinary and interagency presence

- Interviews are routinely carried out by one single professional, with relevant professionals observing from another room;
- Facilities are available for live observation of interviews on screen in another room;
- Facilities are available to allow observers to, if necessary, communicate directly with the interviewer through an earpiece;
- Forensic interviewers should be trained how to use interpretation during the interview;

- The interviewer explains the role of the interpreter to the child and the interpreter. The interviewer recommends if the interpreter should be connected via telecom or be present in the interview room as well as the position of the interpreter in the interview room. The interpretation is checked by a second interpreter to ensure accuracy;
- Exploratory interviews with unaccompanied and asylumseeking children are observed by relevant immigration authorities; the child's legal guardian and other appropriate professionals;
- A checklist guides the observing team and ensures that everyone is clear about their roles and responsibilities;
- Non-offending family and caregivers are not allowed to observe the forensic interview.

#### Adapted to child

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

#### Respecting defendant's right to a fair trial and "equality of arms":

• The defence lawyer is offered an opportunity to question the child following disclosure, for example through a second interview of the child;

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

"They expect kids to answer some uncomfortable questions and they ask them with their official tone, which makes kids feel uneasy and makes it harder to answer" —15-year old girl, victim, sexual abuse

"These people who run the interviews. I think they are the most important – they should be calm and friendly. It is the key thing." — 16 year old boy, victim, domestic violence

"They shouldn't torture the child to tell the story so many times ... Very torturous. But just tell it once, I guess, for example... Directly to the psychologist to tell an investigator, tell someone, and then they should transfer all testimony to the judge and the child should not be called in again. And the worst case, the child should tell the judge ... But not in court." -14 year old girl, victim, sexual abuse

"It was unpleasant for me that I had to retell several times what had happened – police officers, investigating officers, preliminary investigating officers perhaps, I don't know what exactly they were, but it was unpleasant that I had to retell the same thing more than once." -16 year old boy, victim and witness, sexual abuse<sup>63</sup>

# **Standard 7: Medical Examination**

### What is the standard?

**7.1 Evaluation:** Medical evaluations and/or forensic medical evaluations are routinely carried out in the Barnahus premises by specialised staff<sup>64</sup>.

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

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

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

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

### Why should this standard be met?

#### **European legal provisions:**

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

**Guidance:** The UN Committee on the Rights of the Child (CRC) has emphasised that different types of victim support, including medical, mental health, social and legal services, should be made available to the child and the non-offending caregivers and other family members. The CRC also promotes follow up and longer-term interventions. Victim support should be decided through a participatory approach and undue delay must be avoided. Special attention must be given to inviting and giving due weight to the child's views (CRC General Comment no 13). The CRC furthermore emphasises measures to promote physical and psychological recovery of victims of violence, including medical services (CRC General Comment no 13). Also see CoE Guidelines on child-friendly health care (2011) Ch. IV.19 **Research and Experience:** A medical examination of every child will increase the diagnostic accuracy in every case. Multiple forms of abuse and neglect sometimes occur at the same time, some of which may be easily missed without a medical examination.

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

#### **Evaluation and Treatment**

- Medical examination, treatment and potential referral to specialised medical treatment forms an integral part of the services that a Barnahus offers;
- Medical evaluations and/or forensic medical evaluations are routinely carried out in the Barnahus premises
- Medical treatment is carried out in the Barnahus premises as relevant;
- The Barnahus liaises with a local hospital for referral of relevant cases for further evaluation and treatment, including urgent or complicated cases that require special interventions at a hospital setting, as an outpatient or inpatient as well as with hospitals referring concerning cases to the service.

#### Staff

- The medical evaluation and treatment in the Barnahus are carried out by a paediatrician, gynaecologist, forensic medicine physician or an advanced nurse with specialised training on child abuse and neglect depending on the needs of the child;
- Staff is competent in photo documentation of injuries and lesions on the victim's body;

 Staff have access to, and competence to use, equipment for child-friendly general and genital examination in the Barnahus (e.g. video-colposcope for examination of sexual abuse and a high-quality camera for physical abuse). If there is no such equipment, the child is referred to a service which can perform the examination without delay.

#### Case review and planning

• Medical staff is present in the forum for case review and planning that takes place on initial assessment and for follow-up case review meetings as appropriate.

#### **Information and Child Participation**

- Children and caregivers are provided with adequate information about the examination and available treatment;
- The Barnahus invites and gives due weight to the child's views regarding examination and treatment.

# **Standard 8: Therapeutic Services**

## What is the standard?

**8.1 Assessment and Treatment**<sup>65</sup>: Assessment and treatment is routinely made available for child victims and witnesses who are referred to the Barnahus.

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

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

**8.4 Crisis Intervention:** The Barnahus has a clear organisational structure and permanent staff to routinely offer crisis support interventions for the child and non-offending family members/caregivers if needed.

### Why should this standard be met?

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

#### **European legal provisions:**

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

**Guidance:** The UN Committee on the Rights of the Child (CRC) has emphasised that different types of victim support, including medical, mental health, social and legal services, should be made available to the child and the non-offending caregivers and other family members. The CRC also promotes follow up and longer-term interventions. Victim support should be decided through a participatory approach and should not be subject to undue delay. Special attention must be given to inviting and giving due weight to the child's views (CRC General Comment no 13). The CRC has also reaffirmed that treatment "is one of the many services needed to "promote physical and psychological recovery and social reintegration" for children who have experienced violence. According to article 39 of the UNCRC, such treatment must take place "in an environment which fosters the health, self-respect and dignity of the child". Special attention must be given to inviting and giving due weight to the child's views. The CRC also emphasises that services should include non-offending families (CRC General Comment no 13). Also see CoE Guideline of Child-friendly justice (2011) Ch. V.J.; CoE Rec on Child-friendly social services (2011) Ch. IV.B, V.E.1-3 and; EC Reflection paper proposing 10 principles for integrated child protection systems, Principles 1 and 6.

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

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

#### **Assessment and Treatment**

- Mental health assessments are routinely carried out in the Barnahus based on validated instruments and questionnaires. The assessments serve as a basis for developing an evidence-based and trauma-informed treatment plan;
- Treatment is adapted to the individual characteristics of the child, including age, development, linguistic, cognitive and social level, cultural background, emotional state;
- The first formal therapy session starts as soon *after* the forensic interview as possible in order to avoid contamination of the child's narrative. If urgent interventions are needed, treatment in a forensically sensitive manner is offered<sup>66</sup>;
- If needed, children are offered short-term and long-term treatment. If the Barnahus does not offer long-term treatment, the child is referred to another therapeutic/mental health service that offer long-term treatment;
- Assessment and treatment are never made conditional on the victim's willingness to cooperate in the criminal investigation, prosecution or trial.

#### Staff

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

#### Information and child participation

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

#### **Crisis Intervention**

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

# **Standard 9: Capacity Building**

## What is the standard?

**9.1 Training of professionals:** The members of the Barnahus team and involved agencies are provided regular training in their specific areas of expertise and are offered joint training in cross-cutting issues and interagency collaboration.

**9.2 Guidance, supervision, counselling:** The members of the Barnahus team have access to regular guidance, supervision, counselling and peer review both in relation to individual cases and in addressing professional and personal emotional strain, challenges and ethical dilemmas in working with child victims and witnesses of violence.

### Why should this standard be met?

#### **European legal provisions:**

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

**Guidance:** The UN Committee on the Rights of the Child (CRC) emphasises broad education measures, including on a child rights approach to UNCRC article 19. Professionals should be provided "initial and in-service general and role-specific training (including inter-sectoral where necessary)". The CRC also states that "Professionals working within the child protection system need to be trained in interagency cooperation and protocols for collaboration" (CRC General Comment no 13). Also see CoE Guideline of Childfriendly justice (2011); CoE Rec on Child-friendly social services (2011) and; EC Reflection paper proposing 10 principles for integrated child protection systems.

**Research and Experience:** Specialised and trained staff is emphasised as a key indicator under various standards in this document. Continuous in-service training and education for professionals associated with the Barnahus is essential to ensure qualified staff and a high standard of the services provided. Joint training can help enhance multidisciplinary and interagency collaborative team work for example by building a common understanding and consensus as well as better understanding of the respective agencies' roles and responsibilities. In order to ensure professional conduct, high quality interventions and to protect staff from burn-out, it is imperative that staff have access to both individual and group guidance, supervision, counselling and peer review on a regular basis.

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

#### **Training of professionals**

- There is clear plan for developing the competence and continued education of staff working with children in the Barnahus<sup>67</sup>;
- The Barnahus staff have individual training plans which are fully implemented and reviewed regularly;
- The members of the interagency team are offered regular joint training and capacity building activities, e.g. in cross-cutting issues and multidisciplinary collaboration.

#### Guidance, supervision, counselling

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

# Standard 10: Prevention: Information sharing, awareness raising and external competence building

## What is the standard?

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

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

### Why should this standard be met?

#### **European legal provisions:**

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

**Guidance:** The UN Committee on the Rights of the Child State encourage open discussion about violence, including the engagement of media and civil society. State parties to the UNCRC should furthermore establish "comprehensive and reliable national data collection system in order to ensure systematic monitoring and evaluation of systems (impact analyses), services, programmes and outcomes". Services for child victims and witnesses of violence can contribute with important input to the collection of data. (UNCRC General Comment no 13). Also see EC Reflection paper proposing 10 principles for integrated child protection systems, including principles 3, 5, 6, 9

**Research and Experience:** Outreach work, which can involve sharing general and specific data, statistics and information about violence against children and provide information about adequate prevention and response can serve as an important prevention measure. External awareness-raising and competence building can help build public awareness and support, enhance competence of professionals

Standard 10: Prevention: Information sharing, awareness raising and external competence building

and increase support for multidisciplinary and interagency responses among decision-makers and legislators. Working with the media can be an important tool to reach out and inform a broader audience. In all work with the media, there must be adequate safeguards to protect the child's identity and interests.

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

#### **Child Safeguarding**

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

Standard 10: Prevention: Information sharing, awareness raising and external competence building

#### Awareness raising and Competence Building

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

#### **Data Collection and Research**

- A system to collect data is in place and systematically used to collect relevant disaggregated data;
- The Barnahus contributes to research, studies, surveys and consultations, carefully considering ethical obligations.

#### Media

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

The table on the following pages shows the relationship between the European Barnahus Standards and key legal obligations set out in three European legal instruments: the 2010 Council of Europe Convention for the protection of children against sexual exploitation and sexual abuse (the Lanzarote Convention), the EU Directive of 13 December 2011 on combating the sexual abuse and sexual exploitation of children and child pornography ('Child Sexual Abuse Directive') and the EU Directive of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime ('Victim Rights Directive).

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

The second column (Relevant Legal Obligation) indicates the legal obligations that are most relevant to each standard. The legal obligations derive from the PROMISE framework of legal obligations. The framework was developed in the PROMISE Compendium of law and guidance<sup>68</sup> to set out the key obligations towards victims of crime and their involvement in criminal proceedings. This framework was used to create profiles of each of the relevant laws in terms of these key obligations.

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

#### Learn More

The full text of the recitals and articles in the respective legal instruments can be found in the full version<sup>69</sup> of this document or in the PROMISE Compendium of Law and Guidance<sup>70</sup>.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
1.1. Best interest of the child	Ensuring the best interests is a primary consideration in the application of the obligations in the Directives	Victim Rights Directive: Recital 14, Article 1.2 Child Sexual Abuse Directive: Recital 2, 6, 30, Article 18.1 Lanzarote Convention: Article 30.1	References to recitals and articles refer to general obligations to ensure the best interest of the child. See standard 1.2, 1.3, 4-10 for specific legal obligations related to a certain practice.
1.2. Right to be heard and receive information	Taking due account of the views of the child	Victim Rights Directive: Recital 14, 42, Article 1. 2; 10.1 Sexual Abuse Directive: 19.3 Lanzarote Convention: Art 14.1,31.1	Also see standard 6, Forensic Interviews regarding the right to be heard in criminal investigations. Also see standard 7 and 8.
	Provision of information	Victim Rights Directive: Recital 21, 26, 30, 31, Article 1.1.; 3; 4; 6 Lanzarote Convention: Article 31.1 a, b, 31.2, 31.6	Also see standard 6, 7 and 8.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
cont. 1.2. Right to be heard and receive information	Right to interpretation & translation	Victim Rights Directive: Recital 34, 36, Article 5.2-3; 7.1-7.8 Lanzarote Convention: Article 31.6 .	Also see standard 6 and 8. Article 31.6 of the Lanzarote Convention is included here due to its reference to information being provided in a language that the child can understand.
	Possibility to order that the child victim be heard through the use of appropriate communication technologies	Victim Rights Directive: Article 23.3 (a) (b) Sexual Abuse Directive: Article 20.5 (b) Lanzarote Convention: Article 36.2 b	Also see standard 6.
1.3. Preventing undue delay	No unjustified delay between the reporting of the facts and interviews take place	Victim Rights Directive: Article 20. (a) Child Sexual Abuse Directive: Article 20.3 (a) Lanzarote Convention: Article 30.3, Art 35.1.a.	References to recitals and articles are included here where there are specific references that relate to preventing undue delay.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
cont. 1.3. Preventing undue delay	Individual assessment of each child's circumstances and non- offending family members' needs	Victim Rights Directive: Article 22.1	Also see standard 5, 7
	Provision of information	Victim Rights Directive: Article 4.1, 6.1 Lanzarote Convention: Article 31. 2	Also see standard 1.2
	Provision of assistance and support	Child Sexual Abuse Directive: Article 18.2, 18.3	Also see standard 8
2. Multidisciplinary and interagency collaboration in Barnahus	Multi-disciplinarity/ coordination/cooperati on	Victim Rights Directive: Recital 38, 62, Article 26. 1 Lanzarote Convention: Article 10.1, 10.3, 11.1	Also see Lanzarote Convention article 5.3 and 15 regarding preventive measures and article 38.1 a-c regarding international cooperation.
3. Target Group	Non-discrimination	Victim Rights Directive: Recital 9, 10, 15, 19, 66, Article 1 ; 22.3 Lanzarote Convention: Article 2	The recitals and articles stated here set out a broad obligation to ensure that all children have equal right and access to justice and assistance.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	Provisions concerning identifying victims, including specific provisions identifying children as a victim of crime, such as age assessment provision, family members	Victim Rights Directive: Recital 19, Article 1; 2.1, 17, 24.2 Sexual Abuse Directive: Article 18.2, 18.3, 19.5 Lanzarote Convention: Article 3 a, 11.2, 14.4, 34.2, 35.3	These articles are directly relevant to forensic interviews, inter-agency planning and case management, medical examination and therapeutic services.
4. Child Friendly Environment	Interviews take place in premises designed or adapted for this purpose	Victim Rights Directive: Article 9.1.; 9.3; 12. 1; 18; 22. 1; 22.4; 26 Sexual Abuse Directive: Article 20.3 Lanzarote Convention: Art 35.1.b	Also see standard 6.
	Right to avoid contact between victim and offender	Victim Rights Directive: Article 19 12 Sexual Abuse Directive: Recital 30	Also see Lanzarote Convention articles 31.1. Also see standard 6.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
5. Interagency Case Management	Ensuring the best interests is a primary consideration in the application of the obligations in the Directives	Victim Rights Directive: Article 1 (c) 2 Sexual Abuse Directive: 18.1, 19.2 Lanzarote Convention: Article 30.1	The interagency team must take the best interest of the child as a core consideration in all planning and case management.
	Individual assessment of each child's circumstances and non- offending family members' needs	Victim Rights Directive: Recital 9, 55, 56, 58, Article 22.1-7 Sexual Abuse Directive: 19.3	The recitals and articles here refer to the role of the interagency team to carry out individual assessments and develop plans.
	Multi-disciplinarity/ coordination/ cooperation	Victim Rights Directive: Recital 62, Article 26. 1 Lanzarote Convention: Art 10.1	Also see Lanzarote Convention article 38.1 a-c regarding international cooperation.
cont. 5. Interagency Case Management	Circle of Trust provisions	Victim Rights Directive: Recital 18 Sexual Abuse Directive: Recital 30, Article 19.1 Lanzarote Convention: Article 14.1	The recitals and articles refer to the role of the interagency team role in ensuring that children are protected from further abuse.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
6. Forensic Interviews	Provision of information	Victim Rights Directive: Recital 21, 26, 30, 31, Article 1.1.; 3.1-3; 4.1-2; 6 Lanzarote Convention: Article 31.1, 31.2	Also see standard 1.2
	Right to interpretation & translation	Victim Rights Directive: Article 9.1.; 9.3; 12. 1; 18; 22. 1; 22.4; 26 Lanzarote Convention: 31.6	Also see standard 1.2. Article 31.6 of the Lanzarote Convention is included here due to its reference to information being provided in a language that the child can understand.
cont. 6. Forensic Interviews	Adapted procedures in investigations and judicial proceedings involving children	Victim Rights Directive: Recital 58, 59, 66, Article 1.1, 18, 23. 1. Lanzarote Convention: Article 30.1-4, 31.1	Also see standard 1.1-1.3. Standard 1.3 includes a legal obligation to ensure that there is no unjustified delay between the reporting of the facts and interviews.
	Interviews take place, where necessary in premises designed or adapted for this purpose	Victim Rights Directive: Article 23.2 (b) Sexual Abuse Directive: Article 20.3 Lanzarote Convention: Article 35.1 (b)	Also see standard 4.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	Interviews are carried out by or through professionals trained for this purpose	Victim Rights Directive: Article 23.2 (b) Sexual Abuse Directive: Article 20.3 (c) Lanzarote Convention: Article 35.1 (c)	Also see Training and tools below.
	The same persons, if possible and were appropriate, conduct all interviews with children	Victim Rights Directive: Article 23.2 (c) Sexual Abuse Directive: Article 20.3 (d) Lanzarote Convention: Article 35.1 (d)	
cont. 6. Forensic Interviews	Interviews of victims of sexual violence, gender- based violence or violence in close relationships being carried out by persons of the same sex	Victim Rights Directive: Article 23.2 (d)	

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	The number of interviews is as limited as possible and interviews are carried out only where strictly necessary and for the purpose of the investigations and proceedings	Victim Rights Directive: Article 20(b) Sexual Abuse Directive: Article 20.3 (e) Lanzarote Convention: Article 35.1 (e)	
cont. 6. Forensic Interviews	All interviews with a child victim or where appropriate a child witness, may be audio- visually recorded and that such recordings may be used as evidence in criminal court proceedings	Victim Rights Directive: Article 24. 1 (a) Sexual Abuse Directive: Article 20.4 4 Lanzarote Convention: Article 35.2	Also see standard 1.2.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	Possibility to order that the child victim be heard through the use of appropriate communication technologies	Victim Rights Directive: Recital 58, Article 23.3 (a) (b) Sexual Abuse Directive: Article 20.5 (b) Lanzarote Convention: Article 36.2 b	Also see standard 1.2.
	Right to avoid contact between victim and offender	Victim Rights Directive: Recital 58, Article 19 12 Sexual Abuse Directive: Recital 30 Lanzarote Convention: Article 31.1	Also see standard 4.
cont. 7. Medical Examination	Training & tools	Victim Rights Directive: Recital 61, 63, Article 25 Sexual Abuse Directive: Recital 30 A Lanzarote Convention: Article 5.1, 5.2, 35.1 (c), 36.1	Also see standard 9.
	Multi- disciplinarity/coordinati on/cooperation	Victim Rights Directive: Recital 38, 62, Article 26. 1 Lanzarote Convention: Article 10.1.	Also see standard 5.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
7. Medical Examination	Taking due account of the views of the child	Victim Rights Directive: Article 1. 2; 10.1 and 10.2 Sexual Abuse Directive: 19.3 Lanzarote Convention: Article 14.1	Also see standard 1.2.
	Provision of information	Victim Rights Directive: Article 1.1.; 3; 4; 6 Lanzarote Convention: Article 31.1, 31.6	Also see standard 1.2.
cont. 7. Medical Examination	Right to interpretation & translation	Victim Rights Directive: Article 5.2-3; 7.1-7.8 Lanzarote Convention: 31.6	Also see standard 1.2. Article 31.6 of the Lanzarote Convention is included here due to its reference to information being provided in a language that the child can understand.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	Provision of assistance and support	Victim Rights Directive: Recital 38, Article 8. 1-5, 9. 13, 25. 4 Sexual Abuse Directive: Recital 31, Article 18.1 Lanzarote Convention: Article 14.1	
	Individual assessment of each child's circumstances and non- offending family members' needs	Victim Rights Directive: Recital 9, 55, 56, Article 22. 1, 22.4 Sexual Abuse Directive: 19.3	Also see standard 5.
cont. 7. Medical Examination	Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations /Training and Tools	Victim Rights Directive: Article 25.4 Sexual Abuse Directive: Recital 36 Lanzarote Convention: Article 5.1, 5.2	Also see standard 9.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	CRIMINAL INVESTIGATION: (Forensic) Medical examinations are kept to a minimum	Victim Rights Directive: Article 20 (c) (d)	
8. Therapeutic Services/Mental Health	Taking due account of the views of the child	Victim Rights Directive: Article 1. 2; 10.1 and 10.2 Sexual Abuse Directive: 19.3 Lanzarote Convention: Article 14.1	Also see standard 1.2.
cont. 8. Therapeutic Services/Mental Health	Provision of information	Victim Rights Directive: Article 1.1.; 3; 4; 6 Lanzarote Convention: Article 31.1, 31.6	
	Right to interpretation & translation	Victim Rights Directive: Article 5.2-3; 7.1-7.8 Lanzarote Convention: 31.6	Also see standard 1.2. Article 31.6 of the Lanzarote Convention is included here due to its reference to information being provided in a language that the child can understand.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	Provision of assistance and support	Victim Rights Directive: Article 1.1, 8. 1-5, 9, 17, 25. 4 Sexual Abuse Directive: Recital 31, Article 18.2, 18.3, 19.1-19.5 Lanzarote Convention: Art 11.1, Art 14.1, 14.4	Also see Lanzarote Convention article 38.1 b regarding multi-disciplinarity in relation to international cooperation
cont. 8. Therapeutic Services/Mental Health	Individual assessment of each child's circumstances and non- offending family members' needs	Victim Rights Directive: Recital 9, 55, 56, 56, Article 22.1, 22.4 Sexual Abuse Directive: 19.3	Also see standard 5.
	Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations/Training and Tools	Victim Rights Directive: Recital 66, Article 25.4 Sexual Abuse Directive: Recital 30, 36 Lanzarote Convention: Article 5.1, 5.2	Also see standard 9.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
9. Capacity building	Interviews are carried out by or through professionals trained for this purpose	Victim Rights Directive: Article 23.2 (b) Sexual Abuse Directive: Article 20.3 (c) Lanzarote Convention: Article 35.1 (c)	Also see standard 6.
cont. 9. Capacity building	Provision of assistance and support	Victim Rights Directive: Recital 66, Article 8. 1-5, 9. 13, 25. 4 Lanzarote Convention: Article 5.1, 5.2	Also see standard 7 and 8.
	Involvement of trained professionals in psychosocial assessment, forensic interview and physical examinations/Training & tools	Victim Rights Directive: Recital 61, 62, 66, Article 25 Sexual Abuse Directive: Recital 30, 36, Article 20.3 (c) Lanzarote Convention: Article 5.1, 5.2, 35.1 (c), 36.1	Also see standard 6, 7 and 8.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
10. Prevention: Information sharing and external competence building	Necessary measures to protect the privacy, identity and image of child victims and to prevent the public dissemination of any information that could lead to their identification	Victim Rights Directive: Article 21. 1-2 Sexual Abuse Directive: Article 20.6 Lanzarote Convention: Article 31.1 (e)	This legal obligation is fundamental to all of the work of the service; however, the legal instruments mainly focus on this in the context of judicial proceedings.
cont. 10. Prevention: Information sharing and external competence building	Training and Tools	Victim Rights Directive: Recital 61, 62, Article 25, 26.1 Sexual Abuse Directive: Recital 30, 36, Article 23.1, 23.3 Lanzarote Convention: Article 5.1, 5.2, 35.1 (c), 36.1, 38	Article 26.1 of the Victim Rights Directive and article 38 of the Lanzarote Convention are included here due to their reference to exchange of best practices in the context of international cooperation.
	Data and Monitoring	Victim Rights Directive: Recital 62, 64 Sexual Abuse Directive: Recital 44 Lanzarote Convention: Art 10.2 (b)	It may also be of interest to see the Lanzarote Convention chapter X which focusses on monitoring mechanisms at CoE level.

BARNAHUS STANDARD	RELEVANT LEGAL OBLIGATION	LEGAL INSTRUMENT	EXPLANATORY COMMENT
	Awareness Raising	Victim Rights Directive: Recital 62, Article 26.2 Sexual Abuse Directive: Recital 34, 45, Article 23.1- 23.3 Lanzarote Convention: Article 5, 6 and 8	
cont. 10. Prevention: Information sharing and external competence building	Prevention	Victim Rights Directive: Article 26.1, 26.2 Sexual Abuse Directive: Recital 34, 37, 45, Article 22, 23.1-3 Lanzarote Convention: Article 4, 5.3, 7, 15, 16, 17, 38.	Also see Lanzarote Convention articles 10.1, 10.3, which focus on collaboration to prevent sexual abuse and exploitation. Article 26.1 of the Victim Rights Directive and article 38 of the Lanzarote Convention are included here due to their reference to exchange of best practices in the context of international cooperation.

## Endnotes

<sup>1</sup>Council of Europe Convention for the protection of children against sexual exploitation and sexual abuse (CETS N°201)

<sup>2</sup> Guidelines of the Committee of Ministers of the Council of Europe on child friendly justice (Adopted by the Committee of Ministers on 17 November 2010 at the1098th meeting of the Ministers' Deputies)

**3** Council of Europe Recommendation on children's rights and social services friendly to children and families

<sup>4</sup> DIRECTIVE 2011/93/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL 13 December 2011 on combating the sexual abuse and sexual exploitation of children and child pornography

<sup>5</sup> DIRECTIVE 2012/29/EU OF THE EUROPE-AN PARLIAMENT AND OF THE COUNCIL of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA

<sup>6</sup> See for example: Henry, Jim (1997). Following Disclosure, System Intervention Trauma to Child Sexual Abuse Victims. Journal of Interpersonal Violence 1997 12: 499; Newgent, Rebecca A., Fender-Scarr, Lisa K. and Bromley, Jamie L. (2002). The Retraumatization of Child Sexual Abuse: The Second Insult. National Institute for Trauma and Loss in Children, Volume 2, Number 2, Fall 2002; Newlin, Chris, Cordisco Steele, Linda, Chamberlin, Andra, Anderson, Jennifer, Kenniston, Julie, Russell, Amy, Stewart, Heather and Vaughan-Eden, Viola (2014). Child Forensic Interviewing: Best Practices. U.S. Department of Justice Office of Justice Programs Office of Juvenile Justice and Delinquency Prevention; Westcott Helen L. and Davies, Graham M (eds) (2002). Children's Testimony: A Hand-book of Psychological Research and Forensic Practice. Wiley Series of the Psychology of Crime, Policing and Law, July 2002; Jansson, Helene, Rathje, Pia and Gade Hansen, Søren (2015). The experience of children testifying in court in cases of sexual abuse. Sexological Clinic at PCK Copenhagen, Center for Sexual Abuse, Rigshospitalet Copenhagen and the National Council for Children, Denmark

<sup>7</sup> Child-friendly justice "refers to justice systems which guarantee the respect the effective implementation of all children's rights at the highest attainable level" (Council of Europe, Guidelines of the Committee of Ministers of the Council of Europe on child-friendly justice and their explanatory memorandum (2011), p. 4.)

<sup>8</sup> Criminal investigations and judicial proceedings, including the way in which children are involved, may vary across Europe. The European Commission has carried out an extensive study on children's involvement in civil, administrative and criminal judicial proceedings in the 28 Member States of the EU in which it collected and collated all available statistics and published a policy brief summary reports and 29 country reports for each of the three areas of justice (Summary of contextual overviews on children's involvement in criminal judicial proceedings in 28 Member States of the European Union, European Union 2014)

<sup>9</sup>See footnote 6 for references

<sup>10</sup> The Barnahus model, further discussed in chapter 2, is recognized as a leading multidisciplinary and interagency service for child victims and witnesses of violence. See footnote 12 for references.

<sup>11</sup> Lind Haldorsson, Olivia (2017) European Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence <u>www.childrenatrisk.eu/promise/standards</u>

<sup>12.</sup> We are here referring to potential traumatisation of the child and/or retraumatisation, which is the process of relapse into a state of trauma triggered by an event, such as several hearings at court or several interviews. Revictimisation refers to the process of repeatedly being victimised.

<sup>13</sup>The European Barnahus standards pro-mote a comprehensive approach including embracing respect for children's rights to be heard and receive information; multi-disciplinary and interagency collaboration with the aim of avoiding retraumatisation and securing outcomes in the best interest of the child; comprehensive and accessible services that meet the individual and complex needs of the child and the non-of-fending family or caregivers; ensuring high professional standards, training and sufficient resources for staff working with child witnesses and victims of violence and; preventing violence through for example awareness-raising. See PROMISE Vision, <u>http://www.childcentre.info/promise/publications</u>

<sup>14</sup> Standards for Accredited Members (National Children's Alliance, 2017) <u>http://www.nationalchildrensalliance.org/sites/default/files/downloads/NCA-Standards-for-Accredited-Members-2017.pdf</u>

<sup>15</sup> Landberg, Åsa and Svedin, Carl Göran (2013). Inuti ett Barnahus, A quality re-view of 23 Swedish Barnahus. Stockholm, Rädda Barnen English: http://www.barnafrid.se/custom/uploads/2016/10/Inuti-ett-Barnahus\_ENG.pdf

<sup>16</sup>The standards have been developed with oral and written input of the PROMISE project expert group with experts from e.g. Barnahus Iceland, Barnahus Linköping (Sweden), Barnahus Stockholm (Sweden), the Child and Youth Protection Centre in Zagreb (Croatia), the MDCK in Haarlem (Netherlands), Linköping University (Sweden) and the Child Protection Pro-gram at the University of Iowa. An extensive consultation on the standards and this document has taken place through oral exchange and a written survey with Government Ministries/authorities and/ or service representatives from Bulgaria, Cyprus, Estonia, Finland,

#### Endnotes

Ireland, Germany, Hungary, Latvia, Lithuania, Malta, Poland, Romania, UK (England and Scotland).

<sup>17</sup>The standards are for example in line with the Council of Europe's guidelines on childfriendly justice, and promote key elements of child-friendly justice (accessible (e.g. standard 3 and 4), age appropriate (e.g. standard 1.1, 5, 6), speedy (e.g. standard 1-3, 5, 6), diligent (e.g. standard 5 and 6), adapted to and focused on the needs of the child (e.g. standard 1.1-1.3, 5, 6), respecting the right to due process (e.g. standard 6), respecting the right to participate in and to understand the proceedings (e.g. standard1.2), respecting the right to private and family life (e.g. standard 1.1, 3, 4), respecting the right to integrity and dignity (e.g. standard 1.1, 3, 4)).

<sup>18</sup> The table in chapter IV provides an overview of the legal obligations and international guidance that are embodied by the standards. References are also made to relevant legal provisions and guidance under each of the profiles describing the standards in chapter 3. Also see O'Donnell, Rebecca (2017) PROMISE Compendium of Law and Guidance: European and Inter-national Instruments concerning Child Victims and Witnesses of Violence, Stockholm, PROMISE Project Series www.child-centre.info/promise/publications/

<sup>19</sup> Wenke, Daja and Heiberg, Turid (2017) Enabling Child-sensitive Justice: The Success Story of the Barnahus Model and its Expansion in Europe, Stockholm, The PROMISE Project Series, <a href="http://www.child-centre.info/promise/publications/">http://www.child-centre.info/promise/publications/</a>

<sup>20</sup> A Tracking Tool has been developed to offer a simple means to assess where services find themselves in the process of establishing a Barnahus model that incorporates the standards presented in this document. The tracking tool can be downloaded from the PROMISE website, www.childcentre.info/promise/publications/

<sup>21</sup>Lind Haldorsson, Olivia (2017) European Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence <u>www.childrenatrisk.eu/promise/standards</u>

<sup>22</sup> Lind Haldorsson, Olivia (2019) Standard 2. Multidisciplinary & Interagency Collaboration: Interagency Agreement: Template and guidance <u>www.childrenatrisk.eu/promise/standards</u> <sup>23</sup> Wenke, Daja and Heiberg, Turid (2017) Enabling Child-sensitive Justice: The Success Story of the Barnahus Model and its Expansion in Europe, Stockholm, The PROMISE Project Series, <u>http://www.childcentre.eu/promise/publications</u>, p 4. See also the EC REC-RDAP-CHIL-AG-2016 call which emphasises the Barnahus model: "proposals must aim to ensure a childfriendly response to violence against children that is interagency, multidisciplinary, comprehensive and, where possible, under one roof (Barnahus/children's house model).

<sup>24</sup> In most countries, older children, often above 15 years old, have to appear in court even if an interview has taken place in the Barnahus.

#### Endnotes

<sup>25</sup> The Nordic Barnahus have different key roles: Denmark: To assist the municipalities' local child welfare services, Iceland: To coordinate the parallel criminal and child welfare investigations, Norway: To facilitate the police investigative interview, Sweden: To coordinate the parallel criminal and child welfare investigations (Bakketeig, Elisiv (2016). The barnahus model in the Nordic countries. Paper presented at PROMISE – Regional conference and study visit, Linköping 28-29 November 2016. Based on Johansson, Susanna, Kari Stefansen, Anna Kaldal & Elisiv Bakketeig (in press, 2017): Implementing the Nordic Barnahus model: Characteristics and local adaptions. In Johansson, S., Stefansen, K., Kaldal, A. & Bakketeig, E. (red.). Collaborating against child abuse: Exploring the Nordic Barnahus Model.)

<sup>26</sup> See for example PROMISE Stakeholder mapping, <u>http://www.childcentre.eu/promise/publications</u>

<sup>27</sup> For further information about Children's Advocacy Centers visit <u>http://www.nationalchildrensalliance.org/cac-model</u>

<sup>28</sup> Lind Haldorsson, Olivia (2017) European Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence www.childrenatrisk.eu/promise/standards

<sup>29</sup> Lind Haldorsson, Olivia (2019) Standard 2. Multidisciplinary & Interagency Collaboration: Interagency Agreement: Template and guidance <u>www.childrenatrisk.eu/promise/standards</u> <sup>30</sup> This includes child protection assessments, which are objective evaluations of the risk that the child is exposed to further violence by parent(s)/caregiver(s). It informs decisions regarding ongoing interventions with the family and/or a removal of the child from the home.

<sup>31</sup> Lind Haldorsson, Olivia (2017) European Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence <a href="http://www.childrenatrisk.eu/promise/standards">www.childrenatrisk.eu/promise/standards</a>

 <sup>32</sup> Lind Haldorsson, Olivia (2019) Standard 2. Multidisciplinary & Interagency Collaboration: Interagency Agreement: Template and guidance <u>www.childrenatrisk.eu/promise/standards</u>
 <sup>33</sup> Lind Haldorsson, Olivia (2017) European Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence <u>www.childrenatrisk.eu/promise/standards</u>

<sup>34</sup>The full framework of standards contributes to the implementation of UNCRC article 19 and 6 (right to life, survival and development). Non-discrimination (UNCRC art 2) is treated below under standard 3 as an integral aspect of determining the target group of the service.

<sup>35</sup> Recent interventions on the theory and practice of the best interest of the child can be found in this compilation of essays: The best interests of the child – A dialogue between theory and practice (Council of Europe, March 2016) <u>https://</u>

#### rm.coe.int/CoERMPublicCommonSearch-Services/DisplayDCTMContent?documentld=0900001680657e56

<sup>36</sup> Assessment refers to evaluating and balancing all the elements necessary to make a decision in specific situation. Determination refers to the formal process designed to determine the child's best interests based on the best interests assessment (CRC GC 14, para 47).

<sup>37</sup> In General Comment no 14, the Commit-tee identifies some situations where it is imperative to balance the elements, including where the different elements considered in a case come into conflict (for example, preserving family environment vs protect-ing the child from the risk of violence by the parents).

<sup>38</sup> Child-friendly justice: Perspectives and experiences of children involved in judicial proceedings as victims, witnesses or parties in nine EU Member States (EU Fundamental Rights Agency, February 2017) <u>http://fra.europa.eu/en/press-release/2017/child-friendly-justicechilds-perspective</u>

<sup>39</sup> Quotes from: Child-friendly justice: Perspectives and experiences of children involved in judicial proceedings as victims, witnesses or parties in nine EU Member States (EU Fundamental Rights Agency, February 2017) <u>http://fra.europa.eu/en/press-</u> <u>release/2017/child-friendly-justice-childs-perspective</u>

<sup>40</sup> Lind Haldorsson, Olivia & Heiberg, Turid: Standard 1.2: Child Participation Tool (CBSS 2019)

<sup>41</sup>Quote from: Child-friendly justice: Perspectives and experiences of children involved in judicial proceedings as victims, witnesses or parties in nine EU Member States (EU Fundamental Rights Agency, February 2017) <u>http://fra.europa.eu/en/press-</u>release/2017/child-friendly-justice-childs-perspective

<sup>42</sup> This summary draws on: Bakketeig, Elisiv (2016). The barnahus model in the Nordic countries. Paper presented at PROM-ISE – Regional conference and study visit, Linköping 28-29 November 2016. Based on Johansson, Susanna, Kari Stefansen, Anna Kaldal & Elisiv Bakketeig (in press, 2017): Implementing the Nordic Barnahus model: Characteristics and local adaptations. In Johansson, S., Stefansen, K., Kaldal, A. & Bakketeig, E. (red.). Collaborating against child abuse: Exploring the Nordic Barnahus Model. London: Palgrave. Landberg, Åsa and Svedin, Carl Göran (2013). Inuti a Barnahus: A Quality Review of 23 Swedish Barnahus, Stockholm: Rädda Barnen. Information received from the Icelandic Government Agency for Child Protection (February 2016).

<sup>43</sup> Consolidation Act on Social Services, §50 a.–(1), <u>http://english.sim.dk/me-</u> <u>dia/14900/consolidation-act-on-social-services.pdf</u>

<sup>44</sup> Child Protection Act, art 7, <u>https://eng.velferdarraduneyti.is/media/acrobat-en-</u> <u>skar\_sidur/Child-Protection-Act-as-amended-2015.pdf</u>

#### Endnotes

<sup>45</sup> Law on criminal procedure (nr.88/2008), art 9

<sup>46</sup> Straffeprosessloven (Criminal Procedure Act), 239, 239 a-f., <u>http://www.lovdata.no/</u>

<sup>47</sup> Delredovisning av regeringsuppdrag avseende gemensamma nationella riktlin-jer kring barn som misstänks vara utsatta för brott och kriterier för landets Barnahus (Rikspolisstyrelsen, Sweden, 2009

<sup>48</sup> <u>https://www.retsinformation.dk/Forms/R0710.aspx?id=158447</u>

<sup>49</sup> Violence is here defined according to the UNCRC article 19 and the CRC General Comment no 13 (2011): "all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse".

<sup>50</sup>Where the target group is defined in legislation or national guidelines, such as for example in Denmark and Sweden, access should at a minimum be guaranteed for the groups covered by law. All services should strive towards encompassing a broad tar-get group, which includes all forms of violence. However, many services have started out with a narrower group, for example only covering sexual abuse and sexual exploitation and slowly moved towards covering additional forms of violence.

<sup>51</sup> Possible grounds of discrimination include, but are not limited to, national or ethnic origin, race, language, religion, gen-der, sexual orientation, socioeconomic status, disability and refugee status. Special efforts may be needed to reach particularly vulnerable children.

<sup>52</sup> Some forms of crisis interventions, such as emergency medical care, might not form part of the Barnahus service delivery.

<sup>53</sup> Child-friendly here means focussed on, adapted and sensitive to, the specific needs of children.

<sup>54</sup> Family/parents/care-givers are not allowed to observe the interview with the child.

<sup>55</sup> Therapeutic meetings including the perpetrator and the child can in some cases be held in the premises if it is deemed in the best interests of the child. The safety and the wellbeing of the child are primary considerations. In cases of sexual violence and severe cases of other forms of violence the perpetrator should never be allowed to enter the Barnahus premises.

<sup>56</sup> Interagency planning, case review and case tracking can be shaped by restrictions from sharing information in national legislation, or lack of legislation that enables and mandates services to share case specific in-formation. A high level of integration requires a clear and careful approach to confidentiality obligations and may require a step by step approach to ensure the right exchange of information can take place. It may also be necessary to find solutions, such as interagency data protection protocols, to address legal restrictions and/or

regulations imposed by professional organisations on the respective professionals to share case specific information.

<sup>57</sup>This role is typically taken up by the social/child protection services as case managers when they are present in the Barnahus. Where social/child protection services are not present, this role can be taken up by a member of the team, who is responsible for liaising with local social/ child protection services.

<sup>58</sup> Social/child protection services typically gather all relevant information, including medical reports, police reports and child protection interventions. All agencies are required to share information with the social/child protection services.

<sup>59</sup> Follow up and continued support and assistance is typically provided by the local social/child protection services. Where the social/child protection service is present in the Barnahus, it acts as case manager and ensures overall coordination and follow-up. The case manager also monitors that the key principles are implemented and that the rights of the child are respected throughout the process.

<sup>60</sup> A forensic interview can be defined as "a single session, recorded interview designed to elicit a child's unique information when there are concerns of possible abuse or when the child has witnessed violence against another person" (<u>http://www.nationalcac.org/forensic-interviewservices</u>) or "a structured conversation with a child intended to elicit detailed information about a possible event(s) that the child may have experienced or witnessed". (<u>http://www.smallvoices.org/what we do/forensic interviews.html</u>). The forensic interview collects information from the child pertaining to, or suitable for courts of law.

<sup>61</sup>The research referred to here is documented in several publications, including, but not limited to: Henry, Jim (1997). Following Disclosure, System Intervention Trauma to Child Sexual Abuse Victims. Journal of Interpersonal Violence 1997 12: 499; Newgent, Rebecca A., Fender-Scarr, Lisa K. and Bromley, Jamie L. (2002). The Retraumatization of Child Sexual Abuse: The Second Insult. National Institute for Trauma and Loss in Children, Volume 2, Number 2, Fall 2002; Newlin, Chris, Cordisco Steele, Linda, Chamberlin, Andra, Anderson, Jennifer, Kenniston, Julie, Russell, Amy, Stewart, Heather and Vaughan-Eden, Viola (2014). Child Forensic Interviewing: Best Practices. U.S. Department of Justice Office of Justice Programs Office of Juvenile Justice and Delinquency Prevention; Westcott Helen L. and Davies, Graham M (eds) (2002). Children's Testimony: A Handbook of Psychological Research and Forensic Practice. Wiley Series of the Psychology of Crime, Policing and Law, July 2002; Jansson, Helene, Rath-je, Pia and Gade Hansen, Søren (2015). The experience of children testifying in court in cases of sexual abuse. Sexological Clinic at PCK Copenhagen, Center for Sexual Abuse, Rigshospitalet Copenhagen and the National Council for Children, Denmark.

<sup>62</sup> All arrangements to adapt to the child should consider the best interests of the child. In some cases, this may mean that the indicators related to number of interviews and using the

#### Endnotes

same interviewer may not be applicable, since it may be in the best interests of a certain child to undergo multiple interviews or that another person interviews the child if there are more than one interview.

<sup>63</sup> Quotes from: Child-friendly justice: Perspectives and experiences of children involved in judicial proceedings as victims, witnesses or parties in nine EU Member States (EU Fundamental Rights Agency, February 2017) <u>http://fra.europa.eu/en/press-release/2017/child-friendly-justice-childs-perspective</u>

<sup>64</sup> A medical forensic examination can be described as an examination looking for injuries and taking samples that may be used as evidence in a police investigation or in court.

<sup>65</sup> The process of determining needs and formulating a treatment plan may vary depending on the specificities of the case at hand.

<sup>66</sup> This may for example occur when court proceedings are still ongoing and the child may have been summoned as a witness, which is required in some European countries.

<sup>67</sup> Training may include, but is not limited to: child development; understanding the phenomenon of child abuse and neglect; conducting forensic interviews; child-friendly, trauma sensitive approach in conducting clinical and forensic assessments; providing different forms of evidence based trauma focused treatment; understanding of the legal context and requirements; identifying risk factors and supporting families at risk with the aim of preventing retraumatisation; supporting non-offending parents.

<sup>68</sup> O'Donnell, Rebecca (2017) PROMISE Compendium of Law and Guidance: European and International Instruments concerning Child Victims and Witnesses of Violence, Stockholm, PROMISE Project Series

<sup>69</sup> Lind Haldorsson, Olivia (2017) European Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence <u>www.childrenatrisk.eu/promise/standards</u>

<sup>70</sup> O'Donnell, Rebecca (2017) PROMISE Compendium of Law and Guidance: European and International Instruments concerning Child Victims and Witnesses of Violence, Stockholm, PROMISE Project Series

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