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# MULTI-AGENCY APPROACH

## Problems and opportunities in the application of a multi-agency approach

### Position Paper

# INTIT

*INtegrated Trauma Informed Therapy  
for Child Victims of Violence*



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## **Introduction**

According to articles 3,1 and 19,1 of the UN Convention on the Rights of the Child (1989), in all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration. States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parents, legal guardians or any other person who has the care of the child.

The UN Committee on the Rights of the Child (CRC) indicates that protective measures from violence require effective procedures that should include inter-sectoral coordination, mandated by protocols and memorandums of understanding as necessary.<sup>1</sup>

As regards protection and support for child witnesses, the Council of Europe Convention on preventing and combating violence against women and domestic violence states in article 26,1: Parties shall take the necessary legislative or other measures to ensure that in the provision of protection and support services to victims, due account is taken of the rights and needs of child witnesses of all forms of violence covered by the scope of this Convention.<sup>2</sup>

The Guidelines of the Committee of Ministers of the Council of Europe on child-friendly justice (2010) encourage member states to strengthen the interdisciplinary approach when working with children:

- Guideline 16 - With full respect of the child's right to private and family life, close co-operation between different professionals should be encouraged in order to obtain a comprehensive understanding of the child, and an assessment of his or her legal, psychological, social, emotional, physical and cognitive situation.
- Guideline 17 - A common assessment framework should be established for professionals working with or for children (such as lawyers, psychologists, physicians, police, immigration officials, social workers and mediators) in proceedings or

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<sup>1</sup> General comment No. 13: The right of the child to freedom from all forms of violence. (2011). UN Committee on the Rights of the Child (CRC).

<sup>2</sup> Article 26,1. Istanbul Convention on preventing and combating violence against women and domestic violence. CETS no. 210. (2011). Council of Europe.

interventions that involve or affect children to provide any necessary support to those taking decisions, enabling them to best serve children's interests in a given case.

- Guideline 18 - While implementing a multidisciplinary approach, professional rules on confidentiality should be respected.

A multidisciplinary approach to children in conflict with the law is particularly necessary. The existing and growing understanding of children's psychology, needs, behaviour, and development is not always sufficiently shared with professionals in law enforcement. In cases involving children, judges and other legal professionals would benefit from support and advice from other professionals of different disciplines when making decisions directly or indirectly impact the present or future well-being of the child, for example in making an assessment of the best interests of the child or possible harmful effects of the procedure on the child.<sup>3</sup>

There is reasonable evidence to support the idea that multidisciplinary teams are effective in improving criminal justice and mental health responses compared to standard agency practices.<sup>4</sup> Repeated interviews with different individuals, in different locations and by different services in combination with inadequate interviewing methods have been shown by research and clinical experiences to contribute to the retraumatisation of the child.<sup>5</sup>

One of the first multidisciplinary child protection teams was created in Colorado, in the 1950s by paediatrician C. Henry Kempe, co-author of "The Battered Child Syndrome".

The terms "multi-agency work" and "multi-agency partnerships" are often used interchangeably. They refer to the process and outcomes resulting from different agencies, committing themselves to working jointly to improve overall effectiveness. The term "partnership" suggests that all agencies are equal, which of course is not the case. Agencies differ in terms of their size, power, status, structure, resources, and responsibilities. It is important to pay attention to these differences, to balance them where possible and to consider their impact on joint work.<sup>6</sup>

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<sup>3</sup> Guidelines of the Committee of Ministers of the Council of Europe on child-friendly justice. Explanatory Memorandum, (2010) p.66.

<sup>4</sup> James Leslie & Herbert Leah Bromfield (2017). Better Together? A Review of Evidence for Multi-Disciplinary Teams Responding to Physical and Sexual Child Abuse. Abstract. PubMed. <https://doi.org/10.1177/1524838017697268>

<sup>5</sup> Olivia Lind Haldorsson. (2017). European Barnahus Quality Standards Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence. pp. 5, 8. Council of the Baltic Sea States Secretariat and Child Circle. The PROMISE Project series. [www.childrenatrisk.eu/promise](http://www.childrenatrisk.eu/promise)

<sup>6</sup> Rosa Logar & Branislava Marvánová Vargová (2015). Multi-agency Co-operation for Preventing and Combating Domestic Violence, p. 4. Council of Europe.

Multidisciplinary team members experience a number of benefits including, but not limited to:

- Greater appreciation and understanding of the roles, responsibilities, strengths, and limitations of other agencies, systems, and disciplines;
- Increased access to professional and cross disciplinary training;
- More informed decision making with improved outcomes for clients and providers;
- Opportunities to enhance policies and practice that improve system response;
- Collegial support that helps address vicarious trauma.<sup>7</sup>

### **Different models of multi-agency approach**

#### **Children's Advocacy Center model (US)**

The Children's Advocacy Center model, based on a multidisciplinary team approach, pulled together law enforcement, criminal justice, child protective services, and medical and mental health workers into one coordinated team.<sup>8</sup> The goal is to reduce additional trauma to victims of physical or sexual child abuse by working with a multidisciplinary team to conduct one child friendly and professional forensic interview to ensure that children are not revictimised by the very system designed to protect them.<sup>9</sup>

The first Children's Advocacy Center was created in Alabama in 1985. Today there are more than 1000 Children's Advocacy Centers operating in the United States. In 1987, the National Children's Alliance was founded to assist communities seeking to improve their responses to child abuse by establishing, strengthening, and sustaining Children's Advocacy Centers.<sup>10</sup>

A functioning and effective multidisciplinary team approach is the foundation of a Children's Advocacy Center. The primary goal of the multidisciplinary team is to assure the most effective coordinated response possible for every child and family. The purpose of interagency collaboration is to coordinate intervention so as to reduce potential trauma to children and

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<sup>7</sup> National Children's Alliance - Standards for Accredited Members (2017) p.8

<sup>8</sup> <https://www.nationalcac.org/history/>

<sup>9</sup> Children's Advocacy Center. Covina (California) <http://childrensadvocacyctr.org/abo>

<sup>10</sup> National Children's Alliance - Standards for Accredited Members. (2017) p.9

families and improve services overall, while preserving and respecting the rights, mandates and obligations of each agency. Generally, a coordinated, multidisciplinary team approach facilitates efficient gathering and sharing of information, broadens the knowledge base upon which decisions are made and improves communication among agencies. The Children's Advocacy Center/multidisciplinary team has a written interagency agreement that includes:

- Law Enforcement
- Child Protective Services
- Prosecution
- Mental Health
- Medical
- Victim Advocacy
- Child Advocacy Center<sup>11</sup>

### Barnahus Model<sup>12</sup>

Barnahus is recognised as a leading child-friendly, multidisciplinary and interagency model responding to child victims and witnesses of violence. The purpose of Barnahus is to offer each child a coordinated and effective response and to prevent retraumatisation during investigation and court proceedings. The first Barnahus in Europe was set up in Iceland in 1998. Since then, the Barnahus model has gradually spread to the other Nordic countries: Denmark, Norway, Sweden and Finland.<sup>13</sup>

The PROMISE II Project (2017-2019), co-funded by the EU and managed by the Council of the Baltic Sea States Secretariat (Children at Risk Unit), supported activities to promote and establish Barnahus in the following European Countries: Belgium, Bulgaria, Cyprus, Estonia, Finland, Germany, Hungary, Ireland, Latvia and UK. Other countries, such as Spain, are also

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<sup>11</sup> National's Children Alliance. Standards for Accredited Members. (2017) pp. 4-7

<sup>12</sup> For more information about Barnahus in Europe, refer to the I.N.T.I.T. position paper "The Barnahus Model Across the Broader European Context".

<sup>13</sup> National Children's Alliance - Standards for Accredited Members (2017) pp.12,13

beginning to implement the Barnahus model.<sup>14</sup> The PROMISE Barnahus Network was established in 2019, as a key resource for anyone looking to learn more about Barnahus.<sup>15</sup>

As an example, the Barnahus model in Finland includes training of professionals in the child-friendly inter-sectoral co-operation practices, which have been recognised by the Lanzarote Committee of the Council of Europe as a good practice model for multi-disciplinary and interagency services for child victims and witnesses of violence, providing children with access to justice, avoiding re-victimization and ensuring high professional standards for their recovery.<sup>16</sup>

One key role of the Barnahus is to help produce valid evidence for judicial proceedings by eliciting the child's disclosure so that the child does not have to appear in court should the case go to trial. In carrying out this role, the Barnahus offers a one-stop-shop approach, embracing cooperation between relevant authorities and agencies such as police, social services, child protection, physical and mental health services and prosecutor in one child-friendly premise.

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. A structured organisation, with clearly established roles, mandates, coordination mechanisms, budget, measures for monitoring and evaluation, contributes to efficient and collaborative interagency teams, mutual respect of roles and a shared sense of responsibility. 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/caregivers.<sup>17</sup>

### Quality Framework Multi-Disciplinary Approach

In the Netherlands the Quality Framework Multi-Disciplinary Approach to child abuse, domestic violence and sexual violence works as a network with a team consisting of

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<sup>14</sup> <https://www.childrenatrisk.eu/promise/eubarnahus/>

<sup>15</sup> <https://www.barnahus.eu/en/>

<sup>16</sup> 1st CoE Report 2015 on Lanzarote Convention. p.35

<sup>17</sup> Olivia Lind Haldorsson. (2017). Barnahus Quality Standards Summary Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence. pp.20-44. Child Circus. The PROMISE Project series Council of the Baltic Sea States.

professionals who, from and with the permission of their own institutions and, on demand and based on a security or care plan, are deployed in a case.<sup>18</sup>

### Multi-agency approaches in INTIT partner countries: Examples from Italy and Spain

#### *Italy*

Multi-agency work with children victims of violence and abuse in Italy has yet to be fully established. While efforts have been made to establish protocols for cooperation between some agencies involved, notably the Adult Court and the Juvenile Court, cooperation and services integration, where it exists, depends on local or project-based initiatives. Some of these actions have been initiated via EU-funded projects such as MATES – Multi-agency Training Exit Strategies for Radicalized Youth and Fact for Minors: Fostering Alternative Care for Troubled Minors, both of which pointed to the challenges in making multi-agency cooperation and services integration part of standard operating procedure.

This lack of current cooperation, however, provides an incentive for the Ministry of Justice to explore means of systematizing services and assuring the protection of children victims of violence or maltreatment via the development of an integrated approach to service provision in conjunction with the investigation and prosecution of the crime. As identified within the EU-funded project Pro.Vi – Protecting Victims’ Rights, the current system does not allow for the provision of therapeutic care to child victims until the investigation has been completed effectively delaying care and therapy even in acute cases in order to not jeopardize the criminal prosecution. This suggests the need for a substantial change to the legal system and re-thinking of cooperation protocols if child victims are to receive protections and services in a timely manner. The problem is especially acute given that cases may take years to prosecute (refer to Pro.Vi report), potentially leaving children in a condition of therapeutic limbo while awaiting the completion of relevant legal proceedings.

Local and regional multi-agency cooperation has also emerged as the case of the Region of Apulia where the Pediatric Hospital “Giovanni XXIII” in Bari initiated the GIADA project<sup>19</sup>, which has developed from hospital based detection of abuse and neglect to a regionwide multi-

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<sup>18</sup> Quality Framework Multi-Disciplinary Approach: An effective approach to child abuse, domestic violence and sexual violence in the Netherlands. p1.

<sup>19</sup> [www.giadainfanzia.it](http://www.giadainfanzia.it)



agency system for responding to child abuse and neglect including law enforcement and the judicial system.

### Spain

The new Law for the Comprehensive Protection of Children and Adolescents against Violence, pending to be approved soon, adopts a comprehensive and multidisciplinary approach. It includes changes related to the following issues:

- Extension of the term for the prosecution of crimes: The age from which the prescription period for child abuse begins at 35 years;
- Establishment of preconstituted evidence as mandatory up to 14 years of age in order not to revictimize;
- Elimination of Parental Alienation Syndrome (PAS)
- Reinforcement of the duty of all citizens to report any indication of violence to children;
- Specialization of judicial bodies, prosecution and technical teams; and
- Protection of minors during the complaint process.

In several Autonomous Communities the possibility of implanting the Barnahus model is being studied. In Catalonia, the first Barnahus has been launched, as an integrated care unit for children and adolescents who are victims of sexual abuse, with the purpose of later replicating the model to a greater extent.<sup>20</sup>

In relation to the data records of child abuse, the worry about measuring the child abuse phenomenon is something constant in every single one who has technical or professional responsibility linked to the childhood, as well as for other kind of investigators occupied with these types of problems. The Spanish case is particularly difficult because the government is organized on the basis of an autonomic division system. In 2001, the Children's Observatory (OI) began developing common protocols to record notifications of suspected cases of child abuse. Since 2010, there has been a single registry of cases of child abuse, which is made

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[https://dixit.gencat.cat/es/detalls/Noticies/servei\\_pioner\\_atencio\\_integral\\_infants\\_adolescents\\_victimes\\_abusos\\_sexuals.html](https://dixit.gencat.cat/es/detalls/Noticies/servei_pioner_atencio_integral_infants_adolescents_victimes_abusos_sexuals.html)

available to all operators of child protection services in Spain.<sup>21</sup> This Unified Registry of Child Abuse (RUMI), which operates at the state level and is dependent on the Ministry of Social Rights, registers notifications of suspected and confirmed cases of child abuse from the Protection Services of the Autonomous Communities. This Unified Registry facilitates the estimation of the incidence of risk, the study of profiles and other variables that can be analyzed.

### Distinctions between multidisciplinary models

The Children's Advocacy Centre (CAC) model in the US and the Barnahus model share the same overall goal to prevent retraumatisation and to provide a multidisciplinary response to the child. A key difference between both models is that Barnahus are embedded in the public welfare system and the judicial system, which gives them a legal standing as public organisations financed with public funds. In contrast, CAC centres are mostly set up as independent or private non-for-profit organisations.

In Barnahus, the police and prosecution are involved in the multidisciplinary response, but in the CAC model, the service is not formally embedded in the judicial system. A difference is that Barnahus provides a setting in which the child's disclosure is elicited to produce valid evidence for court proceedings, while respecting the rights of the defence. The CAC centres help prepare and support the child to appear in Court and play 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.

An important distinction between the Barnahus approach and other multidisciplinary, interagency services lies in the formal recognition of the judicial system. Depending on the judicial system, and sometimes on the approach and attitude of judges, children in some European countries still have to appear in Court even if there are facilities to hear children in a child-friendly, multidisciplinary setting.

There are a number of multidisciplinary and interagency services similar to the Barnahus model in Europe with a varying degree of involvement of the national health, social services, child protection system and/or local authorities. These centres share the goal to reduce retraumatisation and offer a multidisciplinary response but lack systematic involvement of all

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<sup>21</sup> René Solís de Ovando Segovia (2014). El registro unificado de casos de sospecha de maltrato infantil (RUMI): de una propuesta decidida a una realidad por completar. Revista Infancia, Juventud y Ley nº 5.

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. Others have been established and operate as independent agencies and engage in interagency collaboration in a more informal way. Different European countries have adopted a multidisciplinary and interagency approach to child protection without offering joint services in one child-friendly location.<sup>22</sup>

### **Challenges for the implementation of a multi-disciplinary approach**

There are challenges to relying exclusively on mental health interventions to prevent, address, and mitigate the impact of trauma. These include treatment limitations, issues of availability, access, as well as the quality and lack of attention to contextual factors. Nonclinical settings (e.g., homeless, child welfare, criminal, and juvenile justice) that do not see themselves as having the capacity to provide trauma-specific services can adopt trauma-informed care to support the people they serve. All of society's service settings have the potential to support recovery and mitigate the consequences of unaddressed trauma on health and well-being.<sup>23</sup>

Multidisciplinary and interagency collaboration can bring important benefits to both children and professionals, but 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.<sup>24</sup>

The first report of the Committee of the Parties to the Council of Europe Convention on the protection of children against sexual exploitation and sexual abuse (Lanzarote Convention), adopted in 2015, assessed the criminal law framework and related judicial procedures with respect to the protection of children against sexual abuse in the circle of trust. The Committee notes a great variety of mechanisms for collecting data on child abuse and neglect. There are huge variations in the methods adopted, the variables used, the measurement and recording units used, the approaches adopted and the results obtained, even between various agencies

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<sup>22</sup> Olivia Lind Haldorsson (2017). Barnahus Quality Standards Summary Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence. pp.20-44. Child Circus. The PROMISE Project series Council of the Baltic Sea States.

<sup>23</sup> Carmela J. De Candia et al.(October 2014). Trauma-Informed Care and Trauma-Specific Services: A Comprehensive Approach to Trauma Intervention, pp.10, 17, 18. American Institutes for Research.

<sup>24</sup> Olivia Lind Haldorsson (2017). Barnahus Quality Standards Summary Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence, pp.8-9. Child Circus. The PROMISE Project series Council of the Baltic Sea States.

from the same country. The Committee observes that databases are developed by various agencies operating in separate sectors without any co-ordination between them. There are significant disparities in the operational procedures, scope and focus of the data, depending on their primary target and the sector in which they are recorded. The most decisive factor impacting the type of data which is effectively collected is the sector which is responsible for data collection. There are at least four major sectors involved in dealing with cases of child sexual abuse, each collecting data:

- justice,
- the law enforcement agencies,
- health,
- social services/social welfare

The volume and seriousness of the cases to be dealt with, and accordingly recorded, by each of these sectors differ depending on the specific area of interest of the sector in question. This explains why the data presented by the Parties is only partially or not at all comparable. For example, two Parties may well produce different data for the simple reason that one records criminal cases of child sexual abuse resulting in prosecution or conviction while the other may record cases referred to social welfare centres which include suspicions for which there is no proof, or simple requests for therapeutic interventions. The different data collection mechanisms obtain their data from different sectors and, accordingly, refer to different aspects of the overall child sexual abuse phenomenon, inevitably resulting in incompatibilities between data.

The type and focus of the data collected serve different purposes depending on the sector or agency involved. As a general rule, the justice and law enforcement sectors collect data referring primarily to offences or their perpetrators and can offer information providing insight into the relationship between victim and offender. The agencies in the health and social services/social welfare sectors place a greater emphasis on the child victims, their families, the type of abuse and the measures (both social and law enforcement measures) taken. Collection mechanisms focusing on data relating to the (forensic) examination of the victim tend to provide additional information regarding the health status of victims; those focusing on

offenders tend to cross-reference information from the offenders' criminal record with information on their offending and reoffending history, etc.

These various factors illustrate the challenge involved in having compatible and comparable data collected by various agencies in the same Party, and – more importantly – in drawing up a more complete and reliable statistical picture of the phenomenon of child sexual abuse committed in the circle of trust and identifying trends over time.

The Committee notes that data derived from judicial interviews or any other overall assessment of child victims carried out by specialist centres responsible for dealing with any cases notified to them (for example Barnahus, child advocacy centres, child protection centres) are a very good source of information having both disaggregated and aggregated data that can be made available in a variety of ways.<sup>25</sup>

The Committee considers crucial to avoid the negative consequences which result from inappropriate and repetitive interviewing techniques and adverse facilities where these interviews may take place. To guarantee the rights and best interests of child victims of sexual abuse, authorities need to recognize that they have to act collectively, not just as a government or a judicial system, but all together as a society. Acting collectively means implementing measures to protect children, which are not confined to individual actions, such as incarcerating perpetrators or providing family therapy, but which are truly child-focused and comprehensive with regard to prevention, intervention and rehabilitation. An interdisciplinary and multi-agency approach delivered by all the different entities in society whose responsibility is to carry out these tasks is therefore paramount.<sup>26</sup>

As regards the best interests of the child and child-friendly criminal proceedings in the context of an offence where the presumed perpetrator is someone in the child's circle of trust, the Committee found that Parties should pay more attention to the rules, procedures, measures and settings that have proven to be effective in reducing the child's trauma. The report thus identifies a series of promising practices in different specific areas. Such practices have been highlighted in the report as they have proven to contribute to minimising rupture in the child's life. In particular, the Lanzarote Committee stressed the positive impact on the child of a coordinated and comprehensive approach to cases of sexual abuse of children such as those

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<sup>25</sup> 1st CoE Report (2015) on Lanzarote Convention. pp.21-23

<sup>26</sup> 1st CoE Report (2015) on Lanzarote Convention, p. 27

delivered by Children Houses or similar set-ups. It observed that even though all Parties acknowledge that child victims of sexual abuse should be helped and assisted in a non-traumatising environment, adequate premises to achieve this aim do not exist in all Parties and over their whole territory.<sup>27</sup>

The Committee:

- underlines that a comprehensive approach should be adopted by all relevant authorities so as to take due account of all interests at stake, including psychological and physical well-being and legal, social and economic interests of the child.<sup>28</sup>
- considers that Parties should address and encourage as much as possible the coordination and collaboration of the different players who intervene for and with the child victim during criminal proceedings. This comprehensive and interdisciplinary approach offers extra support to the child victim and in some cases, the possibility for intervention not to be delayed and appropriate support to be provided immediately after the disclosure (Recommendation 24).
- Invites Parties to ensure that the different agencies involved in the coordination and collaboration concerning child sexual abuse are allowed to share personal information as appropriate (Recommendation 25)<sup>29</sup>

The article 30 of the Lanzarote Convention (2007) states that each Party:

- shall adopt a protective approach towards victims, ensuring that the investigations and criminal proceedings do not aggravate the trauma experienced by the child and that the criminal justice response is followed by assistance, where appropriate,
- shall ensure that the investigations and criminal proceedings are treated as priority and carried out without any unjustified delay,
- that the measures applicable are not prejudicial to the rights of the defence and the requirements of a fair and impartial trial.

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<sup>27</sup> Ibid .pp. 3, 4

<sup>28</sup> Ibid. p. 28

<sup>29</sup> 1st CoE Report 2015 on Lanzarote Convention. p. 30

As regards the phase of the interview of the child victim during the investigation, the Committee stresses that it is one of the particularly sensitive phases when there is a significant risk of aggravating trauma for the child. The Parties have developed a series of promising rules and practices to allow the investigation to proceed under good conditions and the child victim to be heard, while reducing the risks of aggravating trauma.<sup>30</sup>

## **Conclusion**

There is enough evidence that shows that multidisciplinary work is key in cases of violence against children to avoid the retraumatization caused by having to go through different services and repeat the statement before the different professionals involved.

Among the different models of multidisciplinary and interagency work, the Children's Advocacy Centre (CAC) in the US and the Barnahus model in the European Nordic countries can be highlighted. Both models share the goal of preventing retraumatization and providing a multidisciplinary response to the child. The Barnahus model has been widely recognized as a good practice to be replicated on a larger scale and in recent years it is being implemented in a greater number of countries.

There are other multidisciplinary and interagency services similar to these models that attempt to reduce retraumatization but lack the participation of key actors, including the police and the judicial system.

The World Health Organisation (WHO) maintains that while stakeholders in many countries are working to eliminate violence against children, their efforts are not always well coordinated and supported, and few initiatives are undertaken at a large scale. Coordination mechanisms are therefore essential as no single sector can deliver the full package of interventions, and no individual government can tackle the growing threats to its children that now transcend national borders.

Data collection represents another cross-cutting concern as many countries do not have adequate administrative data systems and only a small proportion of acts of violence against children are reported to official sources such as education, health, justice or social welfare systems. Surveys provide little in-depth information about specific policies: for this kind of information, administrative data is required.<sup>31</sup>

National child protection systems need to be strengthened to protect children from all types of violence. This includes training on identification of risks for children in potentially vulnerable situations delivered to teachers, social workers, health professionals, psychologists, lawyers, judges, police, probation and

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<sup>30</sup> Ibid. p. 42

<sup>31</sup> INSPIRE: seven strategies for ending violence against children (2016). p.p. 75-79. World Health Organization. <https://www.who.int/publications/i/item/inspire-seven-strategies-for-ending-violence-against-children>

prison officers, journalists, community workers, residential care givers, civil servants and public officials, asylum officers and traditional and religious leaders.<sup>32</sup>

The EU Strategy towards the Eradication of Trafficking in Human Beings 2012–2016 calls on Member States to strengthen child protection systems, underlining that comprehensive child-sensitive protection systems that ensure interagency and multidisciplinary coordination are key in catering to diverse needs of diverse groups of children. This requires the involvement of a more diverse group of actors.<sup>33</sup>

Also the recent “EU strategy for a more effective fight against child sexual abuse” states that child sexual abuse is a complex issue that requires maximum cooperation from all stakeholders. The aim is to provide at EU level, a framework for developing a strong and comprehensive response to these crimes, both in their online and offline form. This strategy includes a coordinated multi-stakeholder action in relation to prevention, investigation and assistance to victims, which have to be able, willing, and ready to act.<sup>34</sup>

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<sup>32</sup>10 Principles for integrated child protection systems. European Child Rights Forum.

[https://ec.europa.eu/info/sites/info/files/10\\_principles\\_for\\_integrated\\_child\\_protection\\_systems\\_en.pdf](https://ec.europa.eu/info/sites/info/files/10_principles_for_integrated_child_protection_systems_en.pdf)

<sup>33</sup> COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS The EU Strategy towards the Eradication of Trafficking in Human Beings 2012–2016. (19/06/2012).

<sup>34</sup> COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS. EU Strategy for a more effective fight against child sexual abuse. (24/07/2020).





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