



Vision for Specialised Child Protection Services in the Republic of Moldova

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Acronym List

CNPAC	National Centre for Child Abuse Prevention
DV	Domestic violence
EU	European Union
MICS	Multiple Indicator Cluster Survey
MoLSPF	Ministry of Labour, Social Protection and Family
NGO	Non-governmental organisation
P4EC	Partnerships for Every Child
SAFPD	<i>Raion</i> Social Assistance and Family Protection Departments (regional)
SAP	Psycho-pedagogical Assistance Service
TF-CBT	Trauma-focused cognitive behavioural therapy
UNCRC	United Nations Convention on the Rights of the Child
USAID	United States Agency for International Development
US	United States
VAC	Violence against children

Forward

The Ministry of Labour, Social Protection and Family (MoLSPF) and Partnerships for Every Child (P4EC) commissioned this vision work in celebration of ten years of reform in child protection in the Republic of Moldova, and with a desire to continue improving the situation of children through forward-thinking strategies (see Annex A: Terms of Reference). The *Vision for Specialised Child Protection Services in the Republic of Moldova* was supported by the United States Agency for International Development (USAID) project “Children in Moldova are cared for in safe and secure families” and the Oak Foundation project “For a violence free life for children in Moldova”. It has been developed with the contributions of many representatives of national and regional government and their non-government partners.

The common vision on the system of specialised child protection services in Moldova includes the full variety of specialised services needed in order to form an integrated and coherent system to meet the complex needs of children victims and witnesses of child abuse and neglect. The work has been viewed as a process of visioning that recognizes the accomplishments of the past ten years, the present needs and vulnerabilities of children, and the realities of available human and financial resources. The vision comes in support of the recently approved National Action Plan for Child Protection (2016-2020) and its Objective 2: Preventing and combatting violence against and neglect and exploitation of children and promotion of non-violence in child rearing and education.

The visioning process looked at: global best practices in protection of child victims of abuse; progress in the development of specialised services for children victims and witnesses of abuse and neglect; service sustainability; plans for new services and challenges to implementation; strategies, mechanisms, and processes for integrating a system of services; and ways to ensure stakeholder involvement.

Review of country reports provided a view of the needs of children and their families and the abuse, neglect and exploitation that children face in Moldova. Field visits and review of national policy documents and the strategies of different non-governmental organizations (NGOs) informed the analysis of prevention, intervention and treatment services for child victims and witnesses of abuse and violence. Furthermore, review of global promising practices in the prevention, intervention and treatment of child abuse, neglect and violence illustrates the possibility for additional services that could be adapted and replicated in the Republic of Moldova.

The visioning of specialised services looks at taking reform beyond the basic services for children and families and the care of children separated from their parents or those at-risk for separation. It recognises the opportunity to celebrate successes, while also acknowledging that work is not done until every child is safe, nurtured, well cared for and protected in family, in school and in community. This vision puts forth the values that Moldova holds for families and children to move toward a shared view of the future for planning and decision-making.

In May 2016 a group of key stakeholders came together for a three-hour working session focused on further discussion of the current situation and to begin taking steps towards more specialised child protection in Moldova. The framework that resulted was presented at the final session of the celebratory conference, “Ensuring the right to a family for every child: challenges and solutions,” held in Chisinau May 17-19, 2016.

Introduction

A vision considers the values we hold and carries us forward from analysis of where we are now to where, given resources and opportunities, we can realistically be in the future. A vision is a shared view to guide planning and decision-making. The vision for specialised child protection services in the Republic of Moldova celebrates ten years of reform in the sector, and is based on the development of child protection services to date, combined with identification of services which may need to be developed based on international best practices. The vision describes a continuum of specialised services forming an integrated and coherent system to meet the complex needs of children victims and witnesses of child abuse and neglect. It illustrates the conditions needed to get this continuum in place, the pathways to reach the vision, and suggests indicators of success.

The vision for specialised child protection services is aligned with international guidelines and national policy and includes:

- Protection of all children from all forms of abuse, neglect, exploitation and exposure to violence.**
- Provision of strategies and approaches that are child-centered, rights-based and considering children within family systems.**
- Recognition that every child has a right to a family and every family can have the capacity to raise their children.**
- A system of child protection that is coordinated, coherent, integrated and holistic.**
- A range of adequately resourced services for prevention, intervention and recovery/treatment.**
- A diversity of service implementers who are sufficiently resourced and supported to do their work of protecting children and strengthening families.**
- A society with social norms that value children and encourage positive parenting.**

The child rights, care and protection strategies of Moldova are embedded in the system of specialised child protection services that is envisioned, particularly the **National Strategy on Child and Protection** (2014-2020) and **Action Plan for Child Protection** (2016-2020). Such services are beyond the basics of health, education and primary prevention services and, rather, reflect the range of specialised services required to meet the complex needs of child victims and witnesses. They are a critical part of the mandated role of government to fully protect children from harm.

The visioning process looked at the core areas within child protection systems: policies and standards; programmes, services and implementers; coordination and oversight; resourcing; and social norms.



Specialised Child Protection Services

Child protection refers to the prevention and response to violence, exploitation and abuse against children and the programs targeted to children who are vulnerable to such violations of their rights to survival, protection, care and safety as outlined in the United Nations Convention on the Rights of the Child (UNCRC),¹ to which Moldova is signatory. Building a protective environment that both prevents and responds to violence, abuse and exploitation requires government commitment to development of capacity, legislation, changes attitudes and practices, knowledge and opportunities for participation of children, family and community, services and resources, and monitoring.² The **child protection system** includes human and financial resources, laws and standards, governance and coordination, monitoring, and programs and services that promote the wellbeing, safety and rights of the child within the care of family.

Specialised child protection services are those services which go beyond meeting basic needs, such as health, education and primary prevention services and are rather designed to address the complex needs of children at high risk, victims and witnesses of child abuse and neglect. With special focus on this population of children and their families such services are: **prevention, intervention** and **treatment** targeted to different levels: **primary, secondary** and **tertiary**. Primary prevention and secondary services for children and families at-risk are critical components of the coherent and integrated protection system. Tertiary services are often part of the family case management plan and may be monitored by the statutory caseworker. They are aimed to remedy harm that has occurred but also to minimize negative consequences and prevent future maltreatment. Services will fall along a continuum with individual children and families needing coordinated interventions along that continuum.³

Primary services are universal, in that they are directed to the general population, and preventative in that they aim to prevent abuse and neglect *before* it occurs. They may include awareness raising (e.g. public service announcements), parenting education, support groups, family support and strengthening programs (e.g. access to economic support resources), and public service campaigns that provide information on reporting suspected abuse and neglect.

Secondary services are targeted to families or children with certain risks that have been associated with higher incidence of abuse and neglect. They might include more targeted parent education programs (e.g. adolescent parents or substance abusers), parent support groups, home visiting or other home-based programs, respite services for children with special needs, and information and referral services.

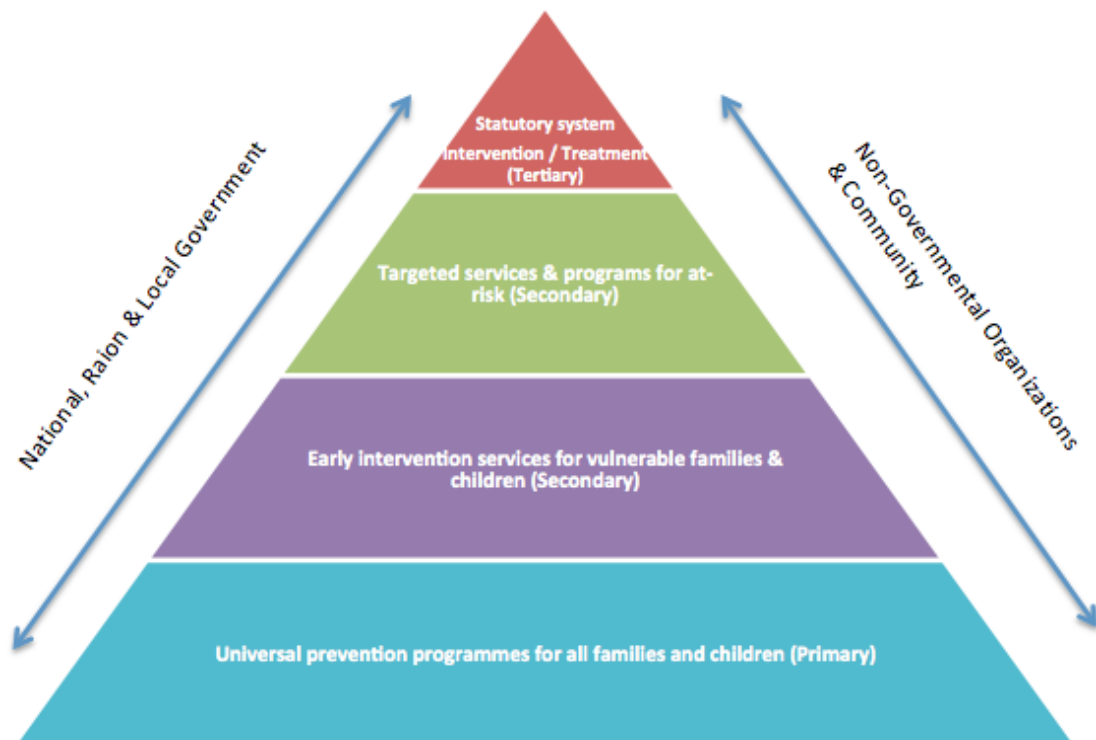
Tertiary services are implemented with families or children in whom abuse or neglect has already occurred and aim to reduce the negative consequences of abuse and neglect and to restore a family's ability to provide care and protection. These services may include a combination of prevention, intervention and treatment such as mental health counselling, parent mentoring, home visiting, parent support groups, substance abuse treatment, etc.

¹ UNICEF. Child Protection Information Sheet: What is Child Protection? Retrieved from: http://www.unicef.org/protection/files/What_is_Child_Protection.pdf

² *Ibid.*

³ Background on child abuse and neglect services adapted from <https://www.childwelfare.gov/topics/preventing/overview/framework/>

Services within the child protection system will ideally address both **risk factors** and **protective factors**. Risk factors are the stressful conditions, events or circumstances that increase a family's chances for poor outcomes,⁴ such as parental substance abuse, health issues or school abandonment. Protective factors are conditions or attributes of individuals, families and communities that mitigate risk and promote health and wellbeing.⁵ Protective factors include: community and other social connections, access to resources and services, knowledge of parenting and child development, child and parent resiliency, and the social-emotional competence of children.



International Best Practices

There are many relevant international and regional practices for consideration in the development of specialised child protection services in Moldova. The following section highlights general trends in practices for intervention, prevention and treatment of child victims of abuse and neglect and illustrates promising practices through examples of flagship programs from different geographic areas (see also Annex E: International Practices Table).

Examples from Europe

In countries such as Germany, Hungary, Portugal, Sweden and the Netherlands there are a diverse range of primary (universal) preventive services.⁶ Although the universal services do not have an

⁴ Adapted from: https://www.childwelfare.gov/pubPDFs/protective_factors.pdf

⁵ *Ibid.*

⁶ Berg-le Clercq, T., & De Baat, M. (2013). What works in tackling child abuse and neglect? A manual for policy makers, managers & professionals. Retrieved from: http://www.cesis.org/admin/modulo_news/ficheiros_noticias/20130305142126-1what_works_in_tackling_child_abuse_and_neglect_manual.pdf

explicit role in detecting child abuse, there are three main types of services that are available in almost all countries:⁷

1. Early child education and care: there's evidence that information sessions in early childhood education and care or school contribute to children's knowledge on sexual abuse and self-protection as well as the percentage of children that disclose experiences of sexual abuse.⁸
2. Health care services for pregnant women: proper prenatal and postnatal care is a promising practice to prevent the maltreatment of infants aged 0-3.⁹
3. Parenting support: programs to improve parents' knowledge of child development are shown to increase parenting skills, understanding of parenting, children's needs and rights as well as strengthen relationships with their children.¹⁰

Eurochild's *Compendium of Inspiring Practices on Early Intervention and Prevention* showcases a diverse range of practices for early intervention and prevention. An early intervention program highlighted in the compendium is the 'Parents House' in France, which provides parenting and family support services. Other promising practices in early intervention include home visiting programs. For example the 'Upholding Birth Program' in Italy targets newborn babies and their mothers. It offers programmed intervention in the home to promote secure attachment in the mother-child relationship and work to include the family unit in a network of services and resources available in the area.¹¹

Example of Intervention program: Nurse-family partnership programs in Europe provide health and child/maternal support through nurse-led home visits (from pregnancy to age 2) to low income first time mothers. Controlled trials are underway in the United Kingdom and in the Netherlands ("VoorZorg/For Care" program) where the program specifically is aimed at preventing child maltreatment.

World Health Organization. (2013). European report on preventing child maltreatment. Retrieved from WHO Regional Office for Europe website: http://www.euro.who.int/_data/assets/pdf_file/0019/217018/European-Report-on-Preventing-Child-Maltreatment.pdf

In the area of prevention, services for parenting programs usually aim, through group sessions, to improve parents' knowledge of child development, parenting skills and strengthen the bond between parent and child. A widely used prevention program is "Triple-P". Developed in Australia, it is used in the US as well as in several European countries such as Germany, Switzerland, the Netherlands and the United Kingdom. It offers various levels of support ranging from universal media messages to intensive parent training offered in different settings.¹²

⁷ European Union. (2012). International project Daphne: Prevent and combat child abuse: What works? An overview of regional approaches, exchange and research. Final report - European Platform for Investing in Children (EPIC) - European Union. Retrieved from http://europa.eu/epic/news/2012/20120925_international_project_daphne_prevent_and_combat_child_abuse_what_works_an_overview_of_regional_approaches_exchange_and_research_final_report_en.htm

⁸ *Ibid.* Berg-le Clercq, T., & De Baat, M. (2013).

⁹ *Ibid.*

¹⁰ *Ibid.*

¹¹ Williams, A. (2012). Compendium of Inspiring Practices on Early Intervention and Prevention. Retrieved from EuroChild website: <http://resourcecentre.savethechildren.se/sites/default/files/documents/6768.pdf>

¹² World Health Organization. (2013). European report on preventing child maltreatment. Retrieved from WHO Regional Office for Europe website: http://www.euro.who.int/_data/assets/pdf_file/0019/217018/European-Report-on-Preventing-Child-Maltreatment.pdf

Example of a Prevention program: A community-based program for parents who are at high risk of or already maltreating their children runs weekly sessions for parents during an eight month period providing training on topics such as organization of family life; coping with children with problems; parenting under situations that change family life; communication and problem-solving skills; and coping with difficult situations.

World Health Organization. (2013). European report on preventing child maltreatment. Retrieved from WHO Regional Office for Europe website: http://www.euro.who.int/_data/assets/pdf_file/0019/217018/European-Report-on-Preventing-Child-Maltreatment.pdf

Case studies of various services highlight the following common features:

- Services aim to work with parents, families and communities to promote a positive environment in which children and young people can grow and thrive;
- Services demonstrate the need to intervene with appropriate, timely measures when children, their parents or families are in a vulnerable situation;
- Services are underpinned by key principles such as a non-judgmental and non-stigmatizing orientation, participatory and strengths-based approach, accessible services for all and early intervention services for the most vulnerable; and
- Services demonstrate inter-service collaboration, as a way of engaging with families, building their resilience and empowering them.¹³

The literature review also found several examples of multi-disciplinary or integrated approaches in providing services to child victims. The multi-disciplinary/integrated services play a role in prevention and/or detection and treatment of child abuse and neglect. Services range from health care services for expectant mothers and children, parenting support, early childhood education, to coordinated medical, psychological and legal assistance for children.¹⁴ Among the most relevant models are the Barnahus Children’s House in Iceland, the Barnecentrum in Stockholm, the Tallinn Family Centre in Estonia and the Cari Foundation in Ireland. The most significant feature of these programs are that they offer a “one stop shop” where professionals providing different services meet at one place in a child- and family-friendly environment.¹⁵ Services include the prosecutor, police, social services, medical-legal expertise, and paediatric and child psychiatric care.¹⁶

Examples from the United States (US)

The US offers an example of robust child protection services and over the past 20 years has made significant progress in developing and testing strategies and interventions to reduce child abuse and neglect, mitigate its consequences, and improve parental and caregiver capacities. Although these approaches have not been evaluated across all communities or populations, research indicates that there is a set of general “core ingredients” in the different approaches regardless of the target population and intended outcome. They include the following:¹⁷

¹³ *Ibid.* Williams, A. (2012).

¹⁴ *Ibid.* Berg-le Clercq, T., & De Baat, M. (2013).

¹⁵ Crime Victim Compensation and Support Authority-Sweden. (2010). Child victims in the Union - Rights and Empowerment A report of the CURE project 2009-2010. Retrieved from: <http://www.brottsoffermyndigheten.se/Filer/B%C3%B6cker/Child%20victims%20in%20the%20Union,%20CURE.pdf>

¹⁶ *Ibid.* Berg-le Clercq, T., & De Baat, M. (2013).

¹⁷ Institute of Medicine & National Research Council. (no date). New Directions in Child Abuse and Neglect Research- Fact Sheet. Retrieved from <https://www.nationalacademies.org/hmd/~media/Files/Report%20Files/2013/Child-Abuse-and-Neglect/IOM-Child-Abuse-Neglect-Fact-Sheet.pdf>

- Linking a clear theory of change to a strong programmatic foundation;
- Establishing feasible programmatic parameters with appropriate duration and dosage so outcomes are possible to achieve;
- Ensuring that professionals and practitioners working with participants are committed and competent in order to achieve desired outcomes; and
- Putting standards and systems of monitoring and evaluation in place to ensure programs deliver quality child sensitive services and care.

The review of literature from the US describes and highlights the current evidence of programs that have been widely used and evaluated to address child abuse and neglect. Within this child abuse and neglect are considered to represent extreme forms of problematic parenting. Typically child welfare systems provide services to families that need assistance in the protection and care of their children. The literature indicates, “Behavioural problems are addressed most effectively through interventions that target parents as the primary change agents.”¹⁸ Parent intervention programs have been widely used and developed as primary services in child abuse and neglect cases. The *New Direction in Child Abuse and Neglect Research* indicates that well established parent management training programs improve child behaviour problems caused by child abuse and neglect.¹⁹

In the area of early intervention the evidence points to initial and long-term benefits from early home visiting models that are successfully implemented by public agencies and community-based organizations in partnership. A treatment intervention that has been widely used throughout the US and tested extensively is Trauma-Focused Cognitive Behavioural Therapy (TF-CBT). TF-CBT is a structured intervention for children and caregivers that address the impact of trauma (including physical and sexual abuse). It has been found that TF-CBT is able to reduce posttraumatic stress, as well as depression and moderate behaviour problems. Many of the programs highlighted in *New Direction in Child Abuse and Neglect Research* have been evaluated however it is important to distinguish that none of these programs have been evaluated across all communities or populations.

Significant progress has been made and the following strategies and interventions are highlighted as excellent practices:

- Family and parent engagement - the employment of new strategies to engage families in case planning and intervention processes, strategies include family teaming, solution-based casework and structured decision-making among others;²⁰
- Home visiting and home-based or centre-based parenting programs;
- Differential response services that enable child protective services to offer multiple approaches for addressing the needs of children and families referred; and
- Trauma-focused therapy and professional practice responses.²¹

¹⁸ In Petersen, A. C., In Joseph, J., In Feit, M. N., National Research Council (U.S.), & National Research Council (U.S.). (2014). Interventions and Service Delivery Systems. In *New directions in child abuse and neglect research* (p. 245). Retrieved from <http://www.nap.edu/read/18331/chapter/8> (pg.248)

¹⁹ *Ibid.* Institute of Medicine & National Research Council. (no date).

²⁰ Child Welfare Information Gateway. (no date). Family Engagement and Retention in Prevention Services. Retrieved from <https://www.childwelfare.gov/topics/preventing/developing/family-engage/>

²¹ *Ibid.* Institute of Medicine and National Research Council (no date).

The Needs of Children in Moldova

Unfortunately children in Moldova are not fully protected and there continue to be violations of their rights. No child should be left behind from care and protection. This visioning work recognises the unmet needs of children for protection from abuse, neglect and violence as well as the need for very specialised services to address the health of families and the recovery of both the child who is abused and the abuser.

The population of the Republic of Moldova is 3,557,634, of which approximately 20% are children under the age of 18 years.²² Fifty-eight per cent of the overall population lives in rural areas, while 64% of children below 14 years of age do. The World Bank reports that economic growth has been steady since the early 2000's however, 12.7% of the population continues to live below the national poverty line and a full one-quarter of Moldova's economically active population is working outside of the country, according some reports.²³

Children in Moldova can face multiple, interrelated vulnerabilities including those related to poverty and lack of access to education, healthcare and other services, which may put them at risk for abuse, neglect, exploitation and being exposed to violence. Family risks highlighted in conversations held as part of the visioning process included alcoholism, domestic violence, absent parents, informal kinship arrangements (e.g. grandparents caring for children), lack of knowledge on child development and parenting, and limited access to services.²⁴ Specifically,²⁵ 28% of children are living below the poverty line; 22% of children live with a single parent; and 21% of children have one or both parents gone abroad for employment.

According to latest figures highlighted in the Multiple Indicator Cluster Survey (MICS) released by UNICEF in 2014: 76% of children ages 2-14 have experienced violent discipline; 48% of children ages 2-14 were subjected to physical punishment; and 69% of children the same age were victims of psychological aggression. UNICEF found that the younger the child is in Moldova the more likely they are to be physically punished and that children from the poorest families are more likely to experience violent discipline.²⁶ The National Police General Inspectorate reported 1,334 registered cases of abuse against children for 2015, of which 574 were prosecuted.²⁷

National Centre for Child Abuse Prevention

Of 611 assisted cases in 2015:

32% emotional abuse

24% physical abuse

29% sexual abuse

15% neglect

35% children 11-15 years old

24% children 8-10 years old

24% 4-7 years old

<http://amicel.cnpac.org.md/statistica>

The need for a range of services around prevention, intervention and treatment of child abuse, neglect and exposure to violence accessible to children within but also outside of the urban hubs is evident. The MoLSPF in partnership with the U.S. Centre for Disease Control will be undertaking a 2016 Violence Against Children study (VAC). This study is expected to provide further evidence on

²² National Bureau of Statistics. (2014). Retrieved from www.statistica.md

²³ Retrieved from Children Left Behind website at <http://www.childrenleftbehind.eu/countries-of-origin-moldova/>

²⁴ Interviews and discussion notes from March 2016

²⁵ Figures from UNICEF. Facts and figures about children in Moldova. Retrieved on February 5, 2015 from: http://www.unicef.org/moldova/overview_11752.html and UNICEF and the Ministry of Health of the Republic of Moldova. (2014). Monitoring the situation of children and women: Multiple indicator cluster survey summary report 2012. Retrieved from: http://www.unicef.org/moldova/Unicef_booklet_ENG.pdf

²⁶ *Ibid*

²⁷ Public communication letter 34/4-243 dated February 4, 2016 retrieved from <http://amicel.cnpac.org.md/statistica>

the need for specialised services, including further information on geographical, gender, age and other considerations for development of services.

Policies and Standards

The vision includes a policy and standards framework that ensures protection for all children from all forms of abuse, neglect, exploitation and exposure to violence, recognizes the primary role of families in protecting children, and supports strategies, approaches and services for children and families.

The system of protection for abused and neglected children and child victims of violence in Moldova is aided greatly by a strong and improving policy framework. To begin with, Moldova is the only country of the EU Eastern Partnership that has included child rights and protection as a priority in the EU Association Agreement, which was signed in 2014.²⁸ This sets the stage for continued work to improve and strengthen the policy framework that protects children. The agreement includes priorities such as strengthening the legal and institutional framework and the improvement of the identification and assistance system for vulnerable children.

The **National Strategy on Child Protection (2014-2020)** (hereafter referred to as *National Strategy*) establishes within its objectives the strengthening of families to care for and protect children, the increase of family-based alternatives for children who need to be separated from their families, as well as the strengthening of skills of the various professional cadres in child protection.²⁹ The Cabinet of Ministers passed the **National Action Plan for Child Protection 2016-2020** (hereafter referred to as *National Action Plan*) on June 2, 2016.³⁰ It includes 125 activities around the three strategic focuses of the National Strategy:

- Ensuring the necessary conditions for raising and educating children in families and reducing child separation and institutionalisation;
- Preventing and combatting violence, neglect and exploitation of children and promoting non-violent practices in raising and educating children; and
- Improving family capacity to ensure growth and harmonious development.

The **Law on Special Protection of Children at Risk or Without Parental Care** (Law 140) was approved by the Parliament in June 2013,³¹ and has generally been applauded for its coverage of vulnerabilities. In its concluding observations, the Committee on the Rights of the Child commended Moldova on the passing of the law.³² Several pieces of secondary legislation have been revised or developed in line with the law including family support legislation and an inter-ministerial mechanism for collaboration on cases of child abuse and neglect.³³ The latter provides the basis for important integrated approaches to child protection as it outlines roles and

²⁸ Terms of Reference

²⁹ Government of Moldova. (2014). The National Strategy on Child Protection (2014-2020).

³⁰ Government of Moldova. (2016). Action Plan on the Strategy for Child Protection 2016-2020.

³¹ Parliament of Moldova. (2013). Law 140 on the Special Protection of Children at Risk and Children Separated from Parents of June 14, 2013.

³² Concluding Observations of the 64th session of the Committee on the Rights of the Child, September-October 2013. Report accessed at: http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx.

³³ Government of Moldova. (2014b). Inter-sectorial cooperation mechanism for the identification, evaluation, referral, assistance and monitoring of child victims and potential child victims of violence, neglect, exploitation and trafficking (HG 270 April 8, 2014).

responsibilities for social assistance, health, education, child protection and police in cases of suspected child abuse, neglect and exposure to exploitation or violence.

While Law 140 is a significant step forward other laws are not in alignment. Laws favour the aggressor rather than supporting the victim. A commonly cited example is in the case of domestic violence: a mother and child will be removed from the home instead of the aggressor. Modifications have been suggested to other laws, such as the Criminal and Penal Codes, in order to strengthen penalties and consequences for violent acts committed against children.

While public spending for social protection and social assistance to vulnerable families has increased over the past ten years,³⁴ The Law on Local Public Financing causes challenges to financing of existing and development of new social services because of the lack of funds in less developed counties (those often with the higher populations of vulnerable children) social services tend to be less developed and/or of lower quality.³⁵ This is problematic as it both threatens sustainability of existing services, and challenges both replication of national models and the development of more specialised services.

The recently released *Child Protection Index Moldova* finds Moldova in need of further development of service standards in order for provisions for funding, accountability and quality to be fully implemented. For example, standards are still lacking or need revision for: rehabilitation centres for victims of domestic violence, kinship care, and specialised psychological counselling for abused children and witnesses of violence.³⁶ Standards for existing services need to be developed as do standards for new models such as the national family resource and assistance centres, centres for street children, psychological assistance in schools, psychological rehabilitation services and others foreseen in the National Action Plan. Consequently the development of standards will lead to the licensing or accreditation of those services and to quality improvements.

Key Policy Actions:

- Create and disseminate guidance to support the implementation of the inter-sectorial mechanism.
- Modify laws in order to strengthen penalties and consequences for violent acts committed against children and in alignment with Law 140.
- Modify the Law on Local Public Financing to ensure financing of existing and development of new social services across all *raions*.
- Establish standards for existing and new children's services.

³⁴ *Ibid.* Government of Moldova. (2014).

³⁵ *Ibid.* Opening Doors for Europe's Children.

³⁶ Guth, A. and Penner-Hall, J. (2015). *Child Protection Index, Moldova 2015: Measuring the Fulfilment of a Child's Rights*. World Vision International, ChildPact and Georgian Coalition for Children and Youth Welfare.

Programmes, Services and Implementers

The vision supports a portfolio of community-based, accessible and easily replicable prevention and protection services targeting risks and approaches for intervention and treatment that build upon existing models or global best practices in responding to needs facing children who are abused, neglected or exposed to violence.

Many of the services that currently exist have been developed by NGOs as part of the demonstration projects aimed at reducing the number of children in institutions and preventing separation of children from their families. A number of *raions* now have significant experience implementing basic services for children and families and innovating new services. This work has been done with significant support from international donors and foundations such as USAID, European Union, World Bank and Oak Foundation. At the time the National Strategy was released a 62% reduction in the number of children in institutions had been achieved in less than ten years.³⁷

Development of community services went hand-in-hand with building local capacity for addressing vulnerability. Inclusive education models led to school-based services such resource rooms and psycho-pedagogical assistance services (SAP). Designed to support the integration of children with special needs into schools, this service now also helps to identify and serve vulnerable children such as victims of abuse. Development of foster care services is another example of a service developed as part of deinstitutionalisation and now providing important support for children who have been abused or for families who need a break in order to continue to be healthy providers (e.g. short break foster care).

The following table outlines **services that exist** in Moldova and address children who are at-risk or who have been abused, neglected or witnesses of violence.³⁸

Prevention Services	Intervention Services	Treatment Services
<p>Awareness Raising: Advisory boards of children Student councils Parent / teacher associations Public awareness campaigns Child Hotline</p> <p>Health Services: Child health services Infant health home visits Youth-friendly medical services Community health centres</p> <p>Parenting Education: Parenting clubs Parenting classes/workshops</p> <p>Early Identification/Direct Services: Early childhood / preschool SAP Child Hotline Schools & School-based psychologists Youth-friendly clinics Day centres for children with disabilities / vulnerable children</p>	<p>Specialist social work/Secondary Family support services Police services Legal counselling Child Hotline (identification) Youth-friendly clinics Maternal-child shelters DV and trafficking shelters Hospitals Special interview rooms Centres for juvenile aggressors</p> <p>Placement Foster care (emergency, long-term, short-term, short break) Hospital beds for domestic violence / abuse cases Temporary Placement centres/ Community homes for children at-risk Placement Centre for the children victims or potential victims of violence, neglect, exploitation and trafficking</p> <p>Centre-based programs:</p>	<p>Counselling – child, adult family Centre based multi-disciplinary treatment services Basic mental health services SAP – counselling services In patient alcohol abuse treatment Medical / health treatment Placement Centre for the children victims or potential victims of violence, neglect, exploitation and trafficking National Centre for Child Abuse Prevention La Strada International Centre for Victims of Trafficking Marioara Centre for Victims of Violence Memoria Centre for Victims of Torture Diaconia Emergency Centre for Mothers and Child Victims of</p>

³⁷ Opening Doors for Europe’s Children. (2016). Strengthening Families, Ending Institutional Care: Moldova.

³⁸ From a rapid desk review (see annex document reference list) and field visit interviews conducted in March 2016.

After school programs for vulnerable children Primary Family support Mayor’s office – community social assistants Police services Personal assistants for disabled Mobile services to home Short break foster care placement (APP) Respite Centres (<i>Respiro</i>) & short break foster care	National Centre for Child Abuse Prevention (CNPAC) La Strada International Centre for Victims of Trafficking Marioara Centre for Victims of Violence Memoria Centre for Victims of Torture Diaconia Emergency Centre for Mothers and Child Victims of Family Violence	Family Violence
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While these services may exist in the country, they are not uniformly developed across all *raions*, nor are they accessible to all who need them. There is a need to scale community-based services to prevent situations of abuse, neglect and exploitation to begin with, support families in need, and refer cases for appropriate and holistic care. **Service gaps** including those services available on a limited basis and those not at all available include the following:

Limited availability	Not available
Legal services Short-term placement services Emergency placement services Psychological services – basic Family support and parenting education Day care centres / child care Employment services Housing support Mental health services – community & inpatient Early childhood programs/preschools Family shelters	Specialised psychologists Specialised counselling services Trained psychologists in legal system Specialised prosecutors Early parenting education & early parental guidance Home visiting Supervised visitation for non-custodial parents Therapeutic foster care

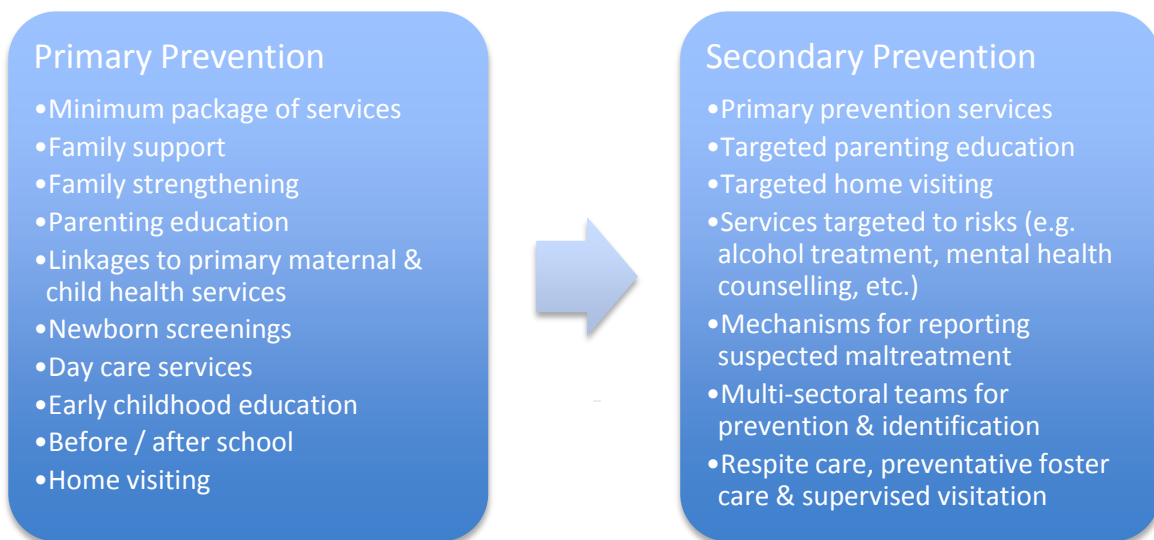
The National Action Plan foresees the national replication of a number of already developed prevention and support services including family support, family strengthening through parenting education, public housing for families with children, and the development of new public services such as day care and early childhood education programmes for working parents. These will be important to both preventing and intervening in cases of abuse and neglect. They will be critical to providing universal services, while a smaller population will require specialised services for abused and neglected children.

Specialized services for child victims of abuse, neglect and exploitation and child witnesses of violence will be developed along a continuum that includes primary and secondary prevention, tertiary level intervention, and treatment services. Services will include strengthening and replication of already developed services (according to need) and the development of new services in order to provide a comprehensive, holistic and responsive system.

Key Service Actions:

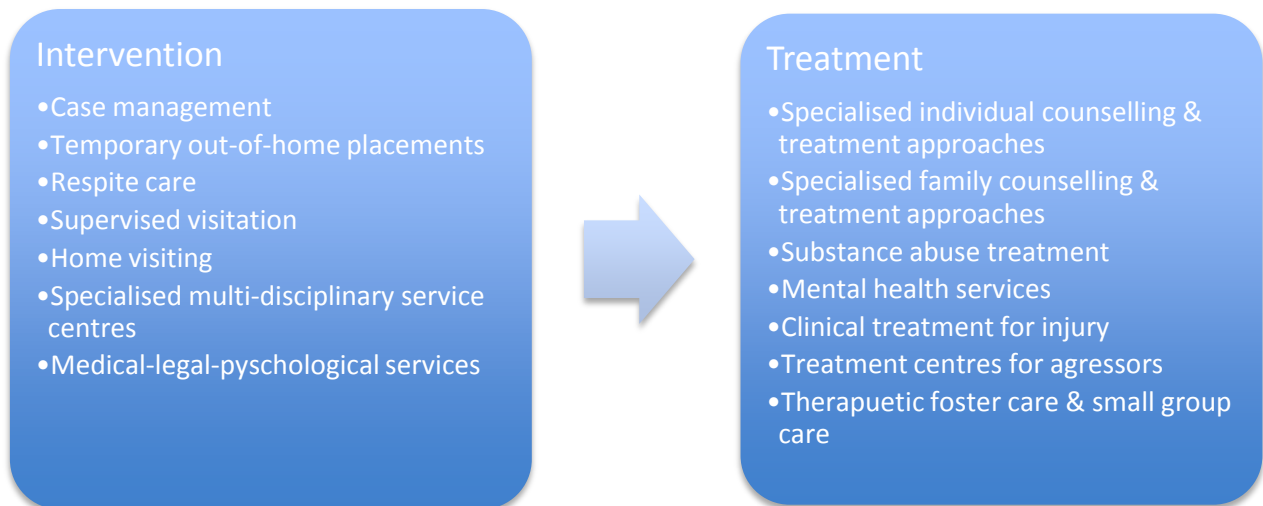
Primary and secondary prevention

- Establish a basic “minimum package” of primary prevention universal services (see box below) that will be accessible to all children at the community level, administered by the local public authority.
- Link the minimum package with government strategies, such as the Education 2020 and the Ministry of Health’s strategy for reducing under-five mortality, which include services such as school psychologists and community mental health services.
- Establish secondary prevention services through *raion* child protection authorities (even if some may be implemented locally) (see box below) replicating some models (e.g. basic parenting education, childline and multi-sector teams) while also developing new services (e.g. home visiting or parenting education for teen parents)
- Create or strengthen partnerships and contracting with local and *raion*- level NGOs for the provision of some prevention services such as parenting education and home visiting.



Tertiary intervention and treatment:

- Establish a set of specialised services for statutory intervention in cases of suspected and substantiated abuse, neglect or exploitation ensuring access across all *raions* (see box below).
- Determine the national location of at least three specialised multi-disciplinary centres using the data outcomes of the upcoming VAC study.
- Replicate legal, medical and psychological services in the above multi-disciplinary centres while introducing new services such as those listed under treatment (see box below), supervised visitation and home visiting.



Coordination and Oversight

The vision for specialised child protection services will need the overall system of child protection to be coordinated, coherent, integrated and holistic.

Protecting children requires a functional, coherent and integrated approach where various sectors work together in a coordinated fashion. Under the Law 140, the MoLSPF is the central coordinating body for child protection. The ministry brings partners from other line ministries, sub-national government and non-government partners in various working groups. These groups remain critical to the implementation of the National Strategy and National Action Plan. The National Child Protection Coordination Council has renewed activity and brings together all of the ministries with responsibility for protecting children’s rights to coordinate the implementation of the National Strategy and National Action Plan. However, further work to improve cross-sector coordination and cooperation mechanisms and clarify roles and responsibilities was highlighted in many conversations with stakeholders.³⁹

One of the central coordination roles is to direct and manage the mechanisms for overseeing the delivery of the protection system at all levels including: overseeing the child protection strategy and coordinating the action plan, spearheading policy reform and standards development, training and ensuring the capacity for protection, providing or coordinating resources, accrediting, licensing and inspecting, developing data systems and monitoring.

The protection of children’s rights does not fall solely under the responsibility of the MoLSPF and for that reason the National Strategy and National Action Plan reflect activities that cut across ministries. The activities are closely coordinated with the Ministry of Education, Ministry of Health and Ministry of Interior and their strategies including *Education 2020* (which includes increasing accessibility to early childhood programs and preschool, psychologists in schools and raising awareness to prevent abuse) and *Strategy for Reducing Under-5 Mortality* (which includes parenting education and other abuse prevention activities).

³⁹ Field visit interviews conducted in March 2016.

Child protection services have been largely decentralized to the *Raion* (regional) Social Assistance and Family Protection Departments (SAFPD) and numerous family- and community-based services have been developed. However the system for addressing child abuse and neglect is reactionary, with responses often fragmented across sectors even with the inter-sectorial mechanism.

Coordination amongst donors will be important to maximize impact, ensure efficiency and align funds with the government's strategies. For example, a number of donors are supporting the development and piloting of parenting education models (e.g. UNICEF and USAID).

Key Coordination Actions:

- Improve sector integration through joint training, multi-disciplinary teamwork, and inter-ministerial and sub-national working groups.
- Provide training to local actors across all *raions* to ensure full functioning of the inter-sector mechanism.
- Improve coordination and communication amongst donors, non-government partners, around what models are working in Moldova and how they can be further rolled out.

Resourcing

The vision requires adequate financial resources and human capacity for implementing the services for prevention, intervention and recovery/treatment.

At the *raion*-level and community-level the lack of resources for services, even basic services, is a real impediment to providing prevention, intervention and treatment services in cases of child abuse and neglect. Wide differences are seen between well-resourced *raions* and those with fewer investments, local, national and donor-based.

Not only do limited resources impact services but also, the workforce projected to provide services are also not fully in place due to finance constraints. For example, the child protection specialist foreseen in Law 140 has yet to be put in place due to budget constraints,⁴⁰ and this position is widely anticipated to provide assistance in the identification of vulnerable children and support to families at-risk at the "front line". Really the National Strategy and National Action Plan will only be as good as the financial and human resources that can be mobilized behind its implementation. Some of those resources will come from partnerships with donors, some from the national budget and some will need to be supported by local resources. Donor resources are expected to become increasingly scarce as Moldova's system for child protection develops.

The human resource capacity from the national to the community levels has been increased over the past ten years. The workforce includes community social assistance officers, *raion*-level social work specialists (managers and supervisors), and many allied professionals such as schoolteachers and health providers. According to the National Strategy, Child Welfare Committees are in place and working to prevent the unnecessary separation of children from families through gatekeeping mechanisms. Under the inter-sectorial mechanism professionals from the different sectors are being trained to collaborate on identification, reporting, assessment, care planning and

⁴⁰ According to multiple interviews from March 2016.

intervention in child protection cases.⁴¹ In most *raions*, although not all, multi-disciplinary teams are in place to review cases of abuse and neglect.

The National Action Plan includes roll out of national models for building the capacity of community actors to identify and assist in cases of violence against children.

The issue of turnover of staff in different cadre (e.g. social work specialists, mayor's office social workers, police, etc.) is a challenge for designing, implementing and sustaining both basic and more specialised services. The above issue is coupled with gaps in capacity of different cadre and the need for more basic and specialised training (e.g. teachers, court/legal workers) and for on-going, regular in-service training (e.g. social work specialists). The Ministry of Education's work on curriculum in basic child protection for all actors may be very timely. Several stakeholders mentioned the idea of regional training centres.

Key Resource Actions

Financial resources:

- Work with the Ministry of Finance and other line ministry partners to establish financing mechanisms to establish and sustain the specialised child protection system.
- Work with donors to further pilot newer service models and continue to build the capacity of the professional cadre needed to implement services.
- Commit regional resources for the social work profession to ensure reasonable caseloads and adequate compensation, supervision and support.
- Commit local resources to put in place the child protection specialists at the local level.
- Establish mechanisms for government contracting of services from non-government providers (e.g. operation and staffing of multi-disciplinary centres, parenting education, home visiting, specialised foster care)

Human resources:

- Provide on-going training for social work, psychologists, teachers, medical professionals, etc. in order to ensure the sustainability of the functioning system for prevention and intervention.
- Develop and implement child abuse and neglect training for judges, lawyers and others in the legal system.
- Establish national training centres (three regionally located) to provide cost effective on-going training of social assistants, social workers, psychologists, multi-sector team members, etc.
- Develop guidelines on the inter-sector mechanism to provide clarity on roles and responsibilities.

Social Norms and Public Attitudes

The vision imagines a country where all children are safe and protected from all forms of harm through a society with social norms that value children and encourage positive parenting.

Better Care Network and the Global Social Service Workforce Alliance. (2015). The Role of Social Service Workforce Development in Care Reform.

In order to address prevention of abuse and neglect and promote healthy families there is need for public awareness targeted to the attitudes and behaviours that accept violence against children as the norm. Sustaining the vision for specialised services will need a shift in social norms towards valuing children and encouraging more positive, less violent forms of disciplining and educating. There is need for the public to understand children as the future of the country.



Photo: Partnerships for Every Child Moldova

Research indicates that the general public supports physical punishment and views domestic abuse as acceptable.⁴² The National Action Plan foresees a promotion campaign of general public awareness to combat ideas around traditional roles of males and females in society within an objective of establishing social norms that recognize the important role of both mothers and fathers in raising children.

Parenting education and skills development will begin to shift attitudes and behaviours of direct caregivers. At the same time, protection from abuse and neglect training for all workers who interact with children will bring new perceptions and ways of treating children. Continued participation of children in activities that impact them, such as through the Advisory Boards of Children, increases awareness in the younger generation and gives voice to children’s experiences. They become the strongest and most compelling advocates for their own rights.

Key Public Awareness Actions:

- Launch a nationwide public awareness campaign around prevention of child abuse, neglect, exploitation and exposure to violence targeted to all citizens.
- Replicate the Advisory Boards of Children in all *raions*.
- Launch informational campaigns on primary and secondary prevention services so that citizens know where to report concerns and how to improve their own parenting and relational skills.

Vision Monitoring and Knowing Success

This vision for specialised child protection services for child victims of abuse, neglect and violence is put forward in support of the National Strategy for Child Protection and its National Action Plan. Both of which have the objective of preventing abuse, neglect and exploitation of children, as well as combatting violence against children and promoting non-violence in child rearing and education. The National Action Plan outlines indicators that will help the MoLSPF and partners know if the activities, including the new services outlined in this vision, are having the desired impact and ultimately better protecting children. Close monitoring of the implementation will increase accountability of all with responsibility for the safety and care of children, including parents.

⁴² *Ibid.* Ministry of Health of the Republic of Moldova. (2014).

Ultimately, the monitoring process leads to new learning, which in turn, when coordinated, helps to achieve continuous improvement in the delivery of the child protection system.

Key Monitoring Actions:

- The MoLSPF will take the lead in collecting data for monitoring based on the National Action Plan Indicators.
- Establish management information systems to collect data on the situation of child abuse and neglect in Moldova.
- Use lessons learned for further action planning on: policy improvements, development of new services, placement of specialized services, recruitment, training and supervision of various protection cadre, resourcing and future awareness campaigns.
- Establish partnerships with other line ministries, UNICEF, donors and NGOs to support the monitoring and improvement process.

This vision for specialised child protection services in the Republic of Moldova celebrates ten years of work in reforming the child protection system, recognising the many services that have been developed bringing increasing protection to children. Further development of specialised services targeted to children who have been abused, are being neglected, or who have witnessed violence in their homes and communities, will only ensure that each and every child is safe, protected and raised in a family that is strong and resilient. We will only know success when no child is left behind.

Annexes

Annex A: Terms of Reference

Terms of Reference

for international consultancy to develop a vision for child protection services in the Republic of Moldova within the project “Children in Moldova are cared for in safe and secure families” supported by USAID and the project “For a violence free life for children in Moldova” supported by Oak Foundation.

Job title: Consultant to develop a vision for child protection services in the Republic of Moldova

Period: March - June 2016

Reporting to: Task Manager – Svetlana Rijicova

Date: Negotiable

1. The Scope of the Work

Partnerships for Every Child Moldova is looking for an international consultant to carry out: (1) an assessment of the state of the child protection services development in the Republic of Moldova; (2) to identify services which need to be developed in the short and medium term in the country in order to meet the needs of children victims and witnesses of child abuse neglect and exploitation in protection, rehabilitation and care; and (3) develop, in collaboration with national stakeholders a vision for child protection specialized services in Moldova.

The work consist of an analysis of the existing services for child victims or witnesses of abuse; services which are included as development priorities the recent national policy documents as well as in the strategies of different development agencies, i.e. donors, international and national NGOs, etc.; and review of global best practices in services for child victims/witnesses of abuse. The main output of the work is to develop a common vision on the system of specialized child protection services in Moldova including the full variety of specialized services which will be need to be strengthened and/or replicated if in existence or developed gradually in order to form an integrated and coherent system to meet the complex needs of children victims and witnesses of child abuse and neglect.

3. Purpose of the Work

To explore the following questions:

- What are the elements of a child protection system developed in western countries? What does evidence tell us about best practices around the world in protection of child victims of abuse?
- What has been the progress so far in terms of development of specialized services for children victims and witnesses of abuse and neglect in Moldova? How sustainable are these services? What are the potential threats to sustainability?
- What are the services planned to be developed by different national and international stakeholders? What challenges, obstacles are identified for the implementation process?
- What is the common vision for the future of the system of the specialized services for children victims or witnesses of child abuse and neglect? What services should be developed in the short and medium-term? What strategies, mechanisms, and processes need to be developed in order to develop an integrated and coherent system of services? How to ensure stakeholders’ involvement in the development and delivery of the specialized services?
- Propose a model of a rehabilitation, prevention and support services for children victims of abuse which can be developed at district (*raion*) or regional level (shared between 2-3 *raions*).

4. Methodology:

- Desk review of the international literature and country policy and legal documents.
- Interviews with different stakeholders – the list will be provided to the consultant and meetings will be facilitated.

- Visits to existing services for children victims of abuse and neglect.
- Facilitated workshop to develop and validate common vision.

5. Duties and Responsibilities

The consultant will have the following duties and responsibilities:

- Lead and manage the work process and maintain collaboration with P4EC and its NGO partners
- Design the detailed methodology (including the methods for data collection and analysis) ensuring that stakeholders are meaningfully involved in both the review and (vision, service) design stages
- Work with stakeholders to complete a review of existing services in Moldova and plans for development of additional services (via interviews and service visits)
- Work with key stakeholders to develop a vision for the system and rehabilitation services for children in Moldova by sharing global best practices, reviewing existing and future planned services in Moldova (data from in-country research) and facilitating a vision development workshop,
- Develop, validate with stakeholders and finalize the review report taking into account comments and feedback from stakeholders, P4EC project staff, and the project implementing agency/partners
- Comply with the requirements of the technical assignment stated in these Terms of Reference on time and to a high standard

6. Timeframe and payment

The work will involve a maximum of 20 days work between March and June 2016, and the final report should be submitted no later than the end of June 2016.

All reasonable expenses will be covered as long as they are accompanied by receipts. Payment will be made in 2 stages: 20% on submission of the agreed MTR work plan and 80% on approval of the final report.

7. Lines of reporting

The consultant will be task managed by Svetlana Rijicova, training manager or the Partnership for Every Child, but will be ultimately responsible to Daniela Mamaliga, the Director. The review process, work plan and final report will be agreed through a consultative process with the P4EC and MLSPF team.

8. Outputs

3 key outputs are expected: A workplan, a draft report and a final report.

The final report should be clear and simply written and free of jargon. The main body of the report should not exceed 30 pages plus annexes.

9. Competencies

Essential

The selected external consultant(s) must:

- Have demonstrable experience in child protection, experience of developing strategic documents in child protection field
- Have strong analytical skills
- Have demonstrable experience of preparing quality reports in English
- Spoken and/or written Romanian or Russian for interviews and reviewing documents
- A background in social science or related subject
- Be willing to be police-checked to assess eligibility to work with children

Desirable

- Previous experience/knowledge of child welfare system in Moldova

Annex B: Document Reference List

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Annex C: Consultation List

Name	Organization	Date of interview
National Government		
Stela Grigoras	Minister, Ministry of Labour, Social Protection and Family	4/1
Viorica Dumbraveanu	Deputy Minister, Ministry of Labour, Social Protection and Family	3/28
Rodica Moraru	Head, Department of Child Protection, Ministry of Labour, Social Protection and Family	3/28
Rodica Josanu	Head of Legal Unit, Ministry of Education	3/28
Viorica Mart	Ministry of Education	3/29
Galina Morari	Ministry of Health	3/28
Daniela Buzatu	Ministry of Internal Affairs	3/28
Local Government – Level II & I		
Elisaveta Iurcu	Deputy Head, Directorate of Social Protection and Family, Orhei	4/1
Silvia Tocari	Section Head, Child and Family Protection Unit, Directorate of Social Protection and Family, Orhei	4/1
Silvia Mustovici	Head Directorate of Education, Youth and Sport, Orhei	4/1
Ane Ivanov	SAP, Orhei	4/1
Guler Nineli	Deputy Head, Health Centre 1, Orhei	4/1
Mihail Turcan	Police Officer, Orhei	4/1
Viorica Mudrea	Police Unit, Child Protection Section, Orhei	4/1
Lucia Codreanu	Director, Pro Generation Centre, Orhei	4/1
Svetlana Taras	Director, Youth Friendly Clinic/PANDA, Orhei	4/1
Valeriu Muduc	Vice President, <i>Raion</i> Council, Falesti	3/31
Violeta Ciuperca	Deputy Director, Directorate of Social Protection and Family, Falesti	3/31
Maria Gonza	Unit Head Social Worker, Directorate of Social Protection and Family, Falesti	3/31
Irina Olari	Director, Casa Speranta Directorate of Social Protection and Family, Falesti	3/31
Svetlana Chiperi	Social Worker, Casa Speranta Directorate of Social Protection and Family, Falesti	3/31
Iona Obreja	Community Social Worker, Panzareni Mayor's Office, Falesti	3/31
Raisa Cojocari	Mayor, Panzareni, Falesti	3/31
Mr. Mosoreti	Mayor, Risiheni, Falesti	3/31

Emil Coliban	Radio Falesti	3/31
Elena Cumurciuc	Doctor, Member of Commission for Children in Difficulty, Falesti	3/31
Silvia Noroc-Matasi	Head, Directorate of Education, Youth and Sport, Falesti	3/31
Maria Sargu	Specialist, Directorate of Education, Youth and Sport, Falesti	3/31
Elena Spinu	Specialist, Directorate of Health	3/31
Nicolae Gurduza	Police Unit, Falesti	3/31
Silvia Matase	Director, SAP Falesti	3/31
Liliana Nani	Deputy Director, SAP Falesti	3/31
Elena Vodeanu	Speech Therapist, SAP Falesti	3/31
Liliana Lungu	Psychologist, SAP Falesti	3/31
Mihaela Vrinceanu	Pedagogic Specialist, SAP Falesti	3/31
Nina Covaliuc	Social Worker, Nufaruf Centre, Falesti	3/31
Maria Vacarciuc	Director, Nufaruf Centre, Falesti	3/31
Tamara Calugazu	Director, Directorate of Social Protection and Family, Hincesti	3/30
Marina Godniuc	Community Social Worker, Hincesti	3/30
Alexandru Todoseiciuc	Mayor, Town A, Hincesti	3/30
Irina Jospodinov	Special Boarding School Director, Hincesti	3/30
Linaida Plesca	Social Worker, Directorate of Social Protection and Family, Hincesti	3/30
Natalia Ursuleac	Community Social Worker, Hincesti	3/30
Anastasia Chistol	Director, Credo Centre, Hincesti	3/30
Nina Negru	Director, Day Centre Viitorul, Hincesti	3/30
Zinaida Organ	Directorate of Social Protection and Family, Hincesti	3/30
Elena Pruteanu	Director, Day Centre Perspectiva, Hincesti	3/30
Gheorghe Grigoras	Mayor, Town B, Hincesti	3/30
Natalia Saharov	Family Doctor, Hincesti	3/30
Lihisme Buza	Director, Maternal Centre, Hincesti	3/30
Nina Cotanu	Director, Pasarea Albastra Centre, Hincesti	3/30
Violeta Julan	Psychologist, Pasarea Albastra Centre, Hincesti	3/30
Larisa Dragomir	Director, Brindusa Centre, Hincesti	3/30
Lara Rusen	Police, Hincesti	3/30

Non-Governmental		
Daniela Mămăligă	Interim Director, Partnerships for Every Child	3/28
Tatiana Dnestreanu	Program Coordinator, Partnerships for Every Child	3/30
Teodora Rebeja	Project Coordinator, Terre des hommes	3/30
Daniela Sîmboteanu	President, National Centre for Child Abuse Prevention	3/29
Ana Revenco	President, International Centre "La Strada" Child Line Hotline	3/29
Ludmila Popovici	Rehabilitation Centre for Torture Victims "Memoria"	3/29
Svetlana Visanu	Psychotherapist, Rehabilitation Centre for Torture Victims "Memoria"	3/30
Svetlana Curilov	National Centre for Psycho-Pedagogic Assessment	3/29
Veronica Danciu	Social Worker, CCF Moldova	3/30
Valentina Ghenciu	Deinstitutionalization Manager, Lumos	3/30
Nicolae Ciocan	Deputy Director, Keystone Human Services International	3/30
Sergiu Rusanovski	Program Officer, UNICEF	4/1
Iuzie Perevoznic	Legal Expert, Formerly General Prosecutor's Office	4/1

Present at visioning workshop, May 16, 2016

Anna Teodorescu	Principle Specialist SSC, DGSP, IGP
Ion Radu	Director, DASPF, Orhei
Tatiana Buiarinca	Psychologist, "La Strada" Centre, Chisinau
Marina Croitoru	Section Director, DASPF, Ungheni
Andrei Chiorescu	Psychologist, DASPF, Ungheni
Teodora Rebeja	Project Coordinator, Terre des hommes
Natalia Cojocaru	Keystone Moldova
Ludmila Nacomerinco	Ministry of Health
Eugenia Veverita	Independent Expert, CNPAC
Daniela Simboteanu	President, CNPAC
Svetlana Moisa	"La Strada" Centre, Chisinau
Violeta Ciuperca	Deputy Director, DASPF, Falesti
Rodica Moraru	Section Director, Ministry of Labour, Social Protection and Family
Antonina Ceserzan	Program Coordinator, Lumos Foundation
Tatiana Dnestreanu	Project Manager, Partnerships for Every Child
Ala Scalschi	Consultant, Partnerships for Every Child
Constantin Cojocaru	Consultant, Partnerships for Every Child
Tatiana Cocias	Communications, Partnerships for Every Child

Annex D: Assessment Questions

Consultancy: To support the development of a common vision on the system of specialized child protection services in Moldova including the full variety of specialized services which will be need to be strengthened and/or replicated or developed in order to form an integrated and coherent system to meet the complex needs of child victims and witnesses of child abuse and neglect.

Objectives covered by the assessment phase:

Objective 1: Complete an assessment of the state of the child protection services development in the Republic of Moldova; and

Objective 2: Identify services (protection, rehabilitation and care) which need to be developed in the short and medium term in the country in order to meet the needs of children victims and witnesses of child abuse neglect and exploitation.

Methodology: Key informant interviews, focus group discussions and project site visits

Key Informants: National & *Raion* level government, NGOs & service providers, allied professions (police, school/early childhood, health), family members

Questions & Sub-Questions

What has been the progress so far in terms of development of specialized services for children victims and witnesses of abuse and neglect in Moldova?

1. What is the national or regional policy framework that supports victims and witnesses of abuse and neglect? (probe for Prevention, Intervention, Treatment)
 - a. Are there any gaps in policy?
 - b. Are the protection policies integrated with other system policies (criminal justice, social protection, health, education)?
 - c. How is cross-sector work coordinated and monitored?
 - d. What services for child abuse prevention, intervention and treatment exist in Moldova? (Prevention, intervention, treatment)
 - e. Who is providing these services? b. Who coordinates these services?
 - f. How holistic/comprehensive are they?
 - g. Are services evaluated? Who evaluates and how often?
 - h. Are they felt to be effective? Why or why not?
 - i. Are there innovations in services that can or should be highlighted?
 - j. Are services child- and family-friendly? How could they be more so?
 - k. How is child participation children's voice, mechanisms for children's opinions and direct access to services for children?
2. Who are the workforce cadre responsible for child abuse/neglect? (statutory, non-statutory, formal, informal)
 - a. What kind of training does workforce providing specialized services receive?
 - b. How else is the workforce prepared to provide specialized services?
 - c. Are they adequately prepared?
 - d. How can the workforce be further strengthened?

3. How sustainable are these services? What are the potential threats to sustainability?
 - a. What public / private resources are available for abuse/neglect services?
 - b. Are specialized services foreseen in future strategy / action planning?

What are the services planned to be developed by different national and international stakeholders?

1. What gaps in services exist?
 - a. Are there abuse victims who are not be reached by existing services? (geographical gaps, types of abuse, gender differences, socio-economic, minority/cultural, etc.)
 - b. What services should be developed in the short and medium-term? (probe for prevention, intervention, treatment)
 - c. How could services be made more effective? More child-friendly?
2. What challenges, obstacles are identified for the implementation process?
 - a. Are there policy obstacles that need to be addressed?
 - b. Are there sufficient resources for implementation (financial, human, technical)?
 - c. Is the system integrated across sectors to ensure holistic approaches?
 - d. Is system / service coordination adequate?
3. What opportunities exist to improve upon child abuse/neglect services for prevention, intervention and treatment?
4. What strategies, mechanisms, and processes need to be developed in order to develop an integrated and coherent system of services?

Annex E: Agenda Visioning Workshop

Vision for Specialised Child Protection Services in Republic of Moldova

The Ministry of Labour, Social Protection, in partnership with Family, Partnerships for Every Child and with support from Oak Foundation and USAID

Vision is...

... a review of where we are today and a direction for the future based on certain values and framed within the reality of the resources and opportunities available.

... a shared view that supports strategic action planning and decision-making.

Time	MAY 16, 201
10:00	Arrival & coffee
	Welcome from MoLSPF & partners
10:15	Introductions & Overview of the Day
10:15 – 12:15	Celebration of Success
	Current Services
	Remaining Needs
12:30 – 13:00	Lunch
13:00 – 14:00	Visioning the Future

Annex F: International Practices Table

Region	Category	Practice Strategy	Country	Reference
Europe	Prevention	<p><u>Program to prevent children from being separated from their families</u> by Hopes and Homes for Children Romania (HHCR). Provide prevention services for children who are at investable risk of being separated from their families and that have been referred to by local social services or county child protection authorities. (pg.93)</p>	Romania	Williams, A. (2012). <i>Compendium of Inspiring Practices on Early Intervention and Prevention</i> . Retrieved from http://resourcecentre.savethechildren.se/sites/default/files/documents/6768.pdf
		<p><u>Parenting Shop</u>, innovative prevention model based on partnerships between service providers to offer a coordinated and integrated package (providing one point of entry to a variety of services) that is accessible to parents in 24 locations across Belgium.</p> <p>-Services are centre based and have branches in locations where there's a lot of influx of parents such as nurseries, community centres, local city buildings. Parents/Guardians or those involved in the child's upbringing have face to face contact with the parenting shop staff and can also participate in group based activities that take place in other locations (schools, community centres)</p>	Belgium	
		<p><u>Family Centres</u> - Acts as a "hub" for a network of family and child welfare services by linking up existing local family support services. They aim to offer support to parents and children throughout all phases of life. Services are centre based but families who are hard to reach receive home visits by the centres staff. Off site services are also offered by partner agencies and aim to be accessible (maximum walking distance of 1.5 km). (pg.27-34)</p>	Germany	
		<p><u>Good Parent, Good Start Program</u>, an interdisciplinary program that began by the National Child Foundation (NCF) in Warsaw and is being scaled out to rural areas that focuses on preventing abuse of children under age 6 and promoting positive parenting. Referred to as the "system for prevention of abuse among young children" (LSP in Polish) it operates on several levels that range from prevention to intervention in cases of child abuse.</p> <p>- Services are mostly centre-based in NCF's facilities; however there are several home-based services provided by volunteer parents and online and telephone consultations are also available.</p> <p>-LSP works in 4 levels: Level1: Broad information about the program to all parents of young children (through partners), Level 2: Identification of vulnerable families (through partners), Level 3: Provision of direct support to vulnerable families (partners and NCF) and Level 4: Intervention in cases of abuse (partners and NCF)</p> <p>-Services are provided by NCF staff but partners from local welfare centres and local health centres are involved in the planning and implementation. Additional stakeholders such as day care nurseries, probation officers, police, psychological/pedagogical centres and other NGOs also provide services. Program is supported financially and technically by the Warsaw City Hall and district authorities. (pg. 45-53)</p>	Poland	
		<p><u>Family Action Support Team (FAST)</u> is a unique service that provides a full range of preventive family support services for children, young people and families on behalf of the local authority. It was launched in October 2011, following a review of the local authority's family support strategy, when service users identified the need</p>	United Kingdom	

		for a more rapid and focused service response. It is an ‘outcome-based’ service delivered in a ‘Results Based Accountability TM’ framework. It aims to prevent family breakdown and promote the reunification of families by supporting referred parents to achieve acceptable standards of care for their children.		
Europe	Intervention	<p><u>Parent House</u>: program that provides parenting and family support services. The ‘Parents House’ is a new type of educative support for families in and around the city of Brest in North-West France. Launched in 2009, it is open to all parents in need of help, support or someone to listen to them, including those living in the most precarious situations. Professionals provide a practical framework for parenthood aimed at enabling parents to provide satisfactory living conditions and stimulation for their children (pg.55)</p>	France	Williams, A.(2012). <i>Compendium of Inspiring Practices on Early Intervention and Prevention</i> . Retrieved from http://resourcecentre.savethechildren.se/sites/default/files/documents/6768.pdf
		<p><u>Upholding birth</u>: is an early intervention and prevention program that targets newborn babies and their mothers. The project is targeted at ‘mother-child’ family units, resident in Rome, at high risk of social or psychological distress during the first year of the child’s life. It aims to identify families ‘at risk’ as early as possible, at the moment of the child’s birth. It offers programmed intervention in the home to promote secure attachment in the mother-child relationship and to include the family unit in a network of services and resources available in the area. (pg.65)</p>	Italy	
		<p><u>Family Support Hubs</u>: are multi-agency networks of statutory, voluntary and community organizations that aim to improve access to early intervention Family Support services by matching the needs of referred families to service providers. Hubs were initiated in 2011 within the framework of the Children’s Services Planning process. They are an innovative response to Northern Ireland’s strategic intent of ensuring better coordination of services to vulnerable families and less wasteful duplication of service provision. They are ‘virtual’ organizations, concerned with linking together existing services rather than creating new services. The model is being adopted across Northern Ireland. (pg.83)</p>	Ireland	
Europe	Treatment	<p><u>Children’s House model at the Barncentrum in Stockholm</u> (Children’s Advocacy Centre in Stockholm) is a joint responsibility of the City of Stockholm Social Services Administration, the police, the public prosecutors, the Stockholm County Council paediatric medicine service, the Stockholm forensic medicine and the child- and youth psychiatry in Stockholm. The Children’s House is a “one stop shop” where professionals providing different services meet at one place in a child friendly environment. The centre offers crisis interventions for children who have experienced domestic violence, physical abuse sexual abuse, and to adults accompanying the child victim to the investigative interview (pg.27)</p>	Sweden	Crime Victim Compensation and Support Authority-Sweden. (2010). <i>Child victims in the Union - Rights and Empowerment A report of the CURE project 2009-2010</i> . Retrieved from: http://www.brottsoffermyndigheten.se/Filer/B%C3%B6cker/Child%20victims%20in%20the%20Union,%20CURE.pdf
		<p>The <u>Tallinn Family Centre in Estonia</u> was established as an initiative of three NGOs offering different services to avoid sending children to institutions. In order to streamline services the Tallinn City government decided to establish a new organization (financed by the Tallinn city budget) to link and co-ordinate the services provided by NGOs with the child protection offices in Tallinn. The police and the child protection offices refer children who need support in conjunction with investigative interviews to the Tallinn Family Centre. The Tallinn Child Support Centre, which operates in the same location as the Family Centre, is still an existing NGO and deals</p>	Estonia	

with issues not covered by Tallinn Family Centre work. (pg.118)

Tartu Child Support Centre in Estonia was the first centre of its kind in Estonia to offer a multidisciplinary team to work with abused children. The Centre provides consultations and therapy sessions that are confidential and free of charge, as well as psychological, social and medical counselling and assistance in emergency cases to child victims of violent crime and their family members. Specialists from the Centre work together with the police in interviewing child victims. (pg.118)

Estonia

The CARI Foundation in Ireland provide a professional, child centred therapy and counselling services to children, families and groups who have been affected by child sexual abuse. CARI provides therapy to child victims who have been affected by sexual abuse and offers practical support to non-abusing caretakers/parents of victims. It has a Court Accompaniment Support Service (CASS) for children who are summoned to witness in criminal courts (pg.118)

Ireland

National Society for the Prevention of Cruelty to Children (NSPCC) works in partnership with Victim Support Northern Ireland and provides a range of services to children and young people who are at risk of being abused or who have been abused. A Young Witness Service is operated, which provides support before, during and after trial to children and young people who are called as witnesses in criminal trials. Since the majority of the child victims in Northern Ireland give evidence by live television link, the NSPCC supporter accompanies the witness in the TV link room and is usually the only person in the room. The NSPCC also provides post abuse treatment and recovery services for children and young people.” (pg.119)

Northern Ireland

Childhood without abuse in Eastern Europe is a project co-financed by the Oak Foundation and coordinated by the Nobody’s Children Foundation in Poland. It’s objective is to support child victims and their families through access to free legal counsel, as well as psychological and mental health treatment. The project is a collaborative initiative of NGOs in 6 countries: Bulgaria, Latvia, Lithuania, Poland, Moldova (National Centre for Child Abuse Prevention) and Ukraine. (pg.126-128)

Bulgaria, Latvia, Lithuania, Poland, Moldova, Ukraine

Children’s House (Barnahus) was modelled on the US Children’s Advocacy Centres. Barnahus was developed to address the re-victimization of the child. Iceland re-organized it’s procedures to respond to child sexual abuse cases so services could be provided based on the child’s best interest.

Iceland

Parent Education Programs: “Improving parents’ capacity to meet the developmental and emotional needs of their children has long been viewed as an effective strategy for preventing child abuse and neglect (Helfer, 1982; Kempe, 1976). Parenting education programs designed to increase knowledge of child development, enhance care, promote positive parent-child interaction and emotional sensitivity, and address child discipline and behaviour management are considered a strong theoretical and practical approach to reducing risk and strengthening protective factors (Barth et al., 2005; Johnson et al., 2008).” (pg.258)

The Incredible Years, a multifaceted and developmentally based curriculum for parents, teachers, and children delivered in both primary school and early education settings, demonstrated more positive affective responses and a corresponding decrease in the use of harsh discipline, reduced parental depression, and improved self-confidence and better communication and problem solving within the family. Significant aspects of the model include group-based training in parenting skills; classroom management training for teachers; and peer support groups for parents, children, and teachers. (pg.258)

Triple P, another well established and well-researched parent management training program. It consists of a series of integrated or scaled interventions “designed to provide a common set of information and parenting practices to parents who face varying degrees of difficulty or challenges in caring for their children.” (pg.259)

Public Education and Awareness campaigns are a consistent feature of child abuse and neglect prevention programming. One of the most thoroughly examined public education and awareness campaigns addressing child abuse has been the effort to prevent shaken baby syndrome, now termed abusive head trauma.

Professional Practice Reforms: The medical field has consistently struggled with how to address child development and child maltreatment within clinical settings. Doctors frequently lack the training to recognize key warning signs and do not have access to comprehensive screening tools. In order to address this, existing service delivery systems that interact with families regularly are being used to address the potential for abuse and neglect. (pg.262)

The Healthy Steps program, an evidence-based model that places child development specialists within selected paediatric practices, was initially created in 1994 to address this issue. Today, Healthy Steps is available in 17 states and has demonstrated consistent impacts on child health, child development and school readiness, and positive parenting practices...”

The Safe Environment for Every Kid (SEEK) program was created to help health professionals address risk factors for child abuse and neglect through a training course, the introduction of a Parent Screening Questionnaire, and the addition of an in-house social worker team to work with families.” (pg.262)

Community prevention: “...A focus on the community as an appropriate prevention target is supported by findings of public health surveillance efforts and research on the effects of neighbourhood contexts”

These programs can mobilize volunteers and engage diverse sectors within the community, including first responders, the faith community, local businesses, and civic groups. Programs are known to create supportive

Institute of Medicine and National Research Council. (2014). 6 Interventions and Service Delivery Systems. *New Directions in Child Abuse and Neglect Research*. Washington, DC: The National Academies Press Retrieved from: <http://www.nap.edu/read/18331/chapter/8#265>

U.S. Department of Health and Human Services. (2011). *Child Maltreatment Prevention: Past, Present, and Future*. Retrieved from

	<p>residential communities where neighbours share a belief in collective responsibility to protect children from harm and where professionals work to expand services and support for parents.</p> <p>Family resource centres are community-based flexible, family-focused, and culturally sensitive facilities that provide programs and services based on the needs of the families. Family resource centres, sometimes called family support centres, family centres, parent-child resource centres, family resource schools, or parent education centres, serve diverse populations and are located in a variety of community settings, including churches, school buildings, hospitals, housing projects, restored buildings, or new structures. Family resource centres promote both the strengthening of families through formal and informal support and the restoration of a strong sense of community</p> <p><u>Families and Communities Together (FaCT)</u> Orange County is a collective initiative that works to strengthen prevention and intervention services designed to reduce the risk of child abuse and neglect. Core services include counselling, parent education, Family Support Services, Domestic Violence Personal Empowerment Program, Information & Referral Services, Comprehensive Case Management Team Services, Out of School Time Youth Programs, Time-Limited Family Reunification Family Fun Activities, Adoption & Promotion Services.</p>	<p>https://www.childwelfare.gov/pubPDFs/cm_prevention.pdf</p> <p>Family Resource Centres - Child Welfare Information Gateway. (n.d.). Retrieved from https://www.childwelfare.gov/topics/preventing/programs/familyresource/#state</p> <p>FaCToc.org. (n.d.). Retrieved from http://factoc.org/family-resource-centers/services/</p>
<p>United States</p>	<p>Intervention</p> <p>Home Visiting Programs: offer a variety of family focused services to expectant parents and families with new babies and young children. Most programs address positive parenting practices, maternal and child health, safe home environments and access to services</p> <p><u>Parents as Teachers</u>, is to provide parents with the information, support, and encouragement they need to help their children develop optimally during the crucial early years of life. Parents as Teachers supports two programs: Born to Learn, a four-part intervention model for home visits and developmental screenings; and Meld, a model for facilitated parent education and support groups. The Parents as Teachers model is currently being delivered in six countries: Australia, Canada, Germany, New Zealand, Switzerland and the United Kingdom. The concept of the model was developed in the 1970's and since 1985 has had a presence in 50 states.</p> <p><u>Healthy Families America (HFA)</u>, a national initiative launched in 1992 by Prevent Child Abuse America and modelled after Hawaii's Healthy Start, links expectant and new mothers to trained staff who provide home visits and referrals to community services. Families participate voluntarily in the program. HFA currently has home visitation programs in more than 420 communities in the United States and Canada.</p>	<p>Child Welfare Information Gateway. (n.d.). Home Visiting Retrieved from https://www.childwelfare.gov/topics/preventing/programs/homevisit/</p> <p>Parents as Teachers. (n.d.). Retrieved from http://www.parentsasteachers.org/</p> <p>Healthy Families - Child Welfare Information Gateway. (n.d.). Retrieved from https://www.childwelfare.gov/topics/preventing/programs/homevisit/homevisitprog/healthyfamilies/</p>

Trauma focused cognitive-behavioural therapy (TF-CBT) is an evidence-based treatment approach for children, adolescents and caregivers overcome trauma-related issues. The treatment—based on learning and cognitive theories—addresses distorted beliefs and attributions related to the abuse and provides a supportive environment in which children are encouraged to talk about their traumatic experience. TF-CBT also helps parents who were not abusive to cope effectively with their own emotional distress and develop skills that support their children. “TF-CBT has been widely disseminated throughout the United States, and there are well-established training models for the program” (pg.252)

Parent-child interaction therapy (PCIT)- promotes parent-child relationships to address behavioural problems in abused or neglected children. PCIT is effective with abusive or neglectful parents (Timmer et al., 2005), as well as with foster parents (Timmer et al., 2006), when children have behavioural problems.

The program Incredible Years (Herman et al., 2011; Webster-Stratton et al., 2011a,b) has been tested extensively with low-income Head Start families, many of which are at high risk for abuse or neglect or have been involved in the child welfare system.” (pg.249)

The Parent Management Training Oregon (PMTO) model is one of the earliest and most well established interventions for behaviour problems. It is the basis for two interventions that have been used in child welfare populations.” (pg.249)

Treatment for Traumatized Children, Youth, and Families - Child Welfare Information Gateway. (n.d.). Retrieved from <https://www.childwelfare.gov/topics/responding/trauma/treatment/#children>

Institute of Medicine and National Research Council. (2014). 6 Interventions and Service Delivery Systems. *New Directions in Child Abuse and Neglect Research*. Washington, DC: The National Academies Press Retrieved from: <http://www.nap.edu/read/18331/chapter/8#265>