

Disclosing sexual abuse: child-friendly environment works best

Sexual abuse is one of the worst forms of violence against children. One in five children under the age of 18 is a victim of sexual violence, and in 70 to 85% of reported cases the perpetrator is a family member or another person the child trusts, such as a family friend, sports trainer or faith leader.

Unfortunately, most of the cases of abuse are not reported to the police. And in the rare situations when a child comes forward with an accusation of sexual abuse, the investigation and the court proceedings can traumatize him/her anew, especially if the child is obliged to repeat – and relive – the story several times, and/or to face the suspected perpetrator.

To prevent re-traumatisation, but at the same time to produce valid evidence for judicial proceedings by eliciting the child's disclosure, as well as provide support to the child, including medical and therapeutic assistance, the **Barnahus (Children's House)** model was created. Its goal is to establish a child-friendly environment bringing under one roof all relevant services (the judge, the prosecutor, the police, psychologists, medical doctors, social workers) to obtain from the child the necessary information for investigation and court proceedings, and to help the child.

The first Barnahus was set up 20 years ago, in 1998, in Iceland, followed by other Nordic countries (Sweden in 2005, Norway in 2007, and Denmark in 2013, with Greenland having adopted the model in 2011). Since then, similar services have been established in more than 10 countries, including in the Baltic sea States and South-East Europe, for example in Estonia, Bulgaria, and Croatia. The practice is spreading across Europe with developments in Cyprus, Ireland, Malta and the UK.

What is a Barnahus (Children's House)?

- A safe place for a child who is a victim and /or witness of violent crime to receive assistance and to disclose the crime, which is set up in such a way to exclude any contact between the victim and alleged offender;
- A tool which serves the best interests of the child and ensures the due process of law by enabling authorities to coordinate parallel criminal investigations and child welfare assessments in a child-friendly manner;
- A place where the prosecution, the social services, the police, medical

professionals (forensic medicine, paediatrics and child and adolescent psychiatry) meet, collaborate and share their information during the investigations; such collaboration should be governed by specific procedures and formal inter-agency agreements;

- A facility often described as having four “rooms” to perform its key functions: criminal investigation, medical examination, child protection assessment and mental health/therapy assessment;
- The premises are usually situated in a detached building, in an environment familiar to children, accessible by public transportation, and are equipped for children with special needs, as well as with separate, soundproof and private areas;
- Forensic interviews are carried out according to a specific protocol;
- Medical evaluation to ensure the child’s physical well-being and recovery, as well as for forensic investigative purposes is available;
- Psychological support and short-term therapeutic services for healing trauma are available to the child and non-offending family members/caretakers;
- Assessment of the protection needs of the child and other potential victims, e.g. his/her siblings, is made;
- Formally, Children Houses are part of the national or local government structures such as the child protection services or a part of the law enforcement/ judicial/national health system.

How are the forensic interviews conducted?

There are two types of forensic interviews :

- **Court testimonies** :a specialist conducts the interview upon request by a court judge and under observation of the defence, the prosecution, the police, the local child protection services and the child’s lawyer;
- **Exploratory interviews**: a specialist tries to clarify the information received from the child if it is ambiguous or lacking; and obtains the child’s testimony in cases where the suspected offender is below the age of criminal responsibility.

Some Children’s Houses only perform with court testimonies, while others conduct both types of the interviews.

Standards of conducting forensic interviews with children:

- Such interviews are **carried out by one single professional** specialised in conducting forensic interviews (e.g. police, mental health professional) in a child-friendly interview room in the Barnahus premises and using a specific protocol;
- The interview is **led by a court judge** who can communicate directly with the interviewer through an ear-piece or other technological device;
- Members of the **inter-agency team**, including the court judge, the prosecutor, the defence lawyer, the defendant, the social worker, the medical staff, and the Barnahus therapist and coordinator, **observe the interview** live from an adjacent room (“a listening-in room”). Non-offending family members and caregivers are not allowed to observe the interview; The **number of interviews is limited to the minimum** necessary for the criminal investigation; if more than one interview is necessary, the same professional conducts all the interviews;
- The interview is **adapted** to the child’s age, development and culture;
- Interviews are **audio-visually recorded** to avoid repeated interviewing.

What assistance do children receive?

- **Medical examinations** are carried out by specialised staff in the Barnahus premises, unless hospital setting is required in special cases;
- Assessment of **mental health** by professionals is made available for child victims and witnesses;
- Permanent staff member in place provide short-term therapy and offer **crisis counselling and support** for the child and non-offending family members/caregivers;
- An assessment of acute risk and protection needs is made by the local child protection services in collaboration with the Barnahus team.

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