



Practical guidance for national authorities on how to design and implement a reform to apply the Barnahus model

Building on lessons learned and experiences from joint EU and Council of Europe projects on Barnahus model implemented through Technical Support Instrument

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LIST OF ABBREVIATIONS

CoE	Council of Europe
CoE Guidelines on Child-friendly Justice	Guidelines of the Committee of Ministers of the Council of Europe on Child-friendly Justice
EU	European Union
EU Strategy on the Rights of the Child (2021)	European Union Strategy on the Rights of the Child (2021)
CoE Strategy for the Rights of the Child	Council of Europe Strategy for the Rights of the Child (2022-2027)
Council of Europe HELP	Council of Europe e-learning platform - Human Rights Education for Legal Professionals
Lanzarote Committee	Committee of the Parties to the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Violence
Lanzarote Convention	Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Violence
MDIA	Multidisciplinary and Interagency
NICHD Protocol	National Institute of Child Health and Human Development Protocol
ToT Model	Training of Trainers Model
TSI	Technical Support Instrument
UN	United Nations

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This document was prepared by **Ivana Celio Cega**, Independent Human Rights Expert, drawing on a desk research and consultations with professionals experienced in researching, implementing and operating the Barnahus model across five EU and CoE Member States that benefited from the TSI projects implemented by the SG REFORM and the CoE. An expert peer review was also carried out for the purposes of quality assurance.

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PART I. STRATEGIC FOUNDATIONS

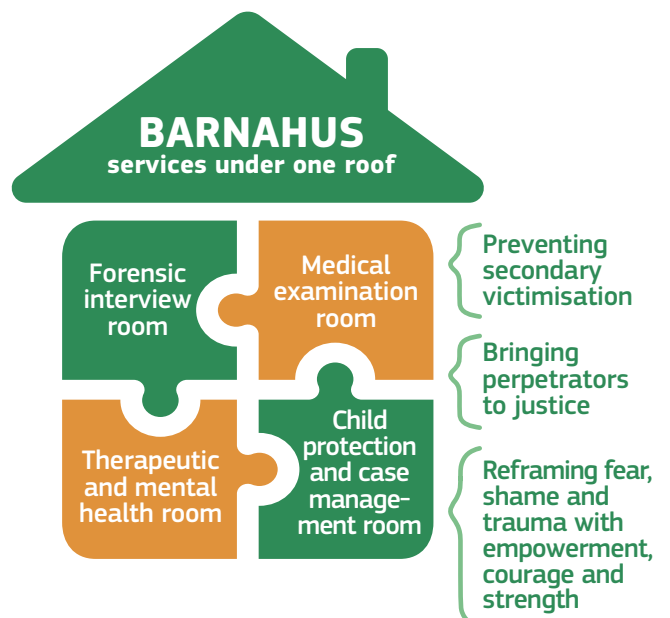
UNDERSTANDING THE IMPORTANCE OF THE BARNAHUS AND IMPLEMENTATION FACTORS

Part I focuses on providing national authorities the conceptual, legal, and strategic grounding necessary to understand, commit to, and prepare for implementing the Barnahus model in alignment with international standards and experiences and lessons learned from TSI projects implemented by the SG REFORM and the CoE.

At the heart of the Barnahus model lies a fundamental paradigm shift in how agencies engage with child victims: the best interests of the child are placed at the centre of all procedures. Rather than leaving child victims to navigate a bureaucratic and institutional treadmill, Barnahus provides a child-focused approach that helps children heal, fosters trust, and supports fair delivery of justice. This profound change in perspectives extends beyond Barnahus itself: the child-centred attitude has the power to inspire and positively influence other services and sectors that come into contact with children and families.

INTRODUCTION: SUPPORTING THE BARNAHUS JOURNEY IN EUROPE

- Protecting children from all forms of violence, including sexual violence, is a fundamental objective and shared priority of the EU and the CoE. Anchored in their respective mandates and policy frameworks, both institutions have taken a leading role in promoting and facilitating **child-friendly justice reforms** across Europe. Through development of policy standards, strategic guidance, targeted financial support, and capacity-building initiatives, the EU and the CoE empower national authorities to strengthen their child protection systems, and to uphold the best interests of the child. This collective commitment reflects Europe's determination to ensure that no child is left unprotected or unheard.
- A key instrument in this endeavour is the **Barnahus model (Children's House)**, a child-friendly, multidisciplinary, and interagency response model for the co-ordination of criminal and child welfare investigations in cases of violence against children, in particular, sexual violence. It is rooted in an integrated approach bringing under one roof all relevant professionals by fostering co-operation between justice, health and social support services with a view to preventing secondary victimisation of the child during investigation and court proceedings, increasing evidential validity of the child's testimony and creating a safe child-friendly environment for recovery. The Barnahus model **operationalises core principles** enshrined in the [UN Convention on the Rights of the Child](#), the [Lanzarote Convention](#), the [CoE Guidelines on Child-friendly Justice](#), the [EU Agenda for the Rights of the Child](#), the [EU Strategy for a more effective fight against child sexual abuse](#), and the [CoE Strategy for the Rights of the Child \(2022-2027\)](#).
- Originally adapted to the European context by Iceland in 1998, following the model of the National Children's Advocacy Center in the United States, Barnahus has since catalysed legal and institutional reforms throughout Europe. It has evolved into a recognised **standard of excellence** for MDIA child protection responses. The Lanzarote Committee in its [1st implementation report](#) from 2015, recognised Barnahus as a promising practice exemplifying a child-friendly and co-ordinated approach to cases of sexual violence against children. Furthermore, the [EU Strategy on the Rights of the Child \(2021\)](#) and the [CoE Strategy for the Rights of the Child \(2022-2027\)](#) both promote Barnahus model expansion



among their Member States. In addition, the [European Commission Recommendation on Developing and Strengthening Integrated Child Protection Systems in the Best Interests of the Child](#) calls for EU Member States to dedicate specific funding to provide for a targeted, multi-agency co-operation approach for children victims of sexual violence through establishment of the Barnahus model. Moreover, the Directive on combating violence against women and domestic violence acknowledges the importance of providing the protection and specialist support services for victims – including children – at the same premises (Article 25(4)).¹

- ▶ Turning to practical considerations in 2019, the [Barnahus Network](#) (formerly PROMISE Barnahus Network funded by the European Commission) was set up serving as a European platform for promoting and supporting the implementation of the Barnahus model. It facilitates knowledge exchange, peer learning, and capacity building among professionals and institutions involved in child protection, justice, health, and social services. **The Barnahus Quality Standards** represent the cornerstone of the Network's activities developed

in synergy with national stakeholders, and experts. The Barnahus Network aims at envisaging minimum requirements for establishing and operating the Barnahus model and contributing to the harmonisation of the Barnahus model, while leaving sufficient flexibility to intricacies of national frameworks and needs. The Barnahus Quality Standards are expert standards and not inter-governmentally adopted ones.

- ▶ In addition, in 2025, the European Union Agency for Fundamental Rights ("FRA") published a report *Towards integrated child protection systems – Challenges, promising practices and ways forward*, emerging from the 2023 mapping of child protection systems in the 27 EU Member States.² It serves as an evidence-based and good governance document aimed at, *inter alia*, assisting Member States in strengthening their national child protection systems. It also encourages Member States to take necessary measures to address shortcomings in their national justice system's capacity regarding children's needs and facilitate the effective exercise of their rights.

"A big house with many rooms and children's pictures. To prevent children thinking about it."... "In a way a child would feel safe like home"... "They have to take you seriously"... "They should have to be patient, calm."... "They said that you should tell someone"... "That it is not your fault"... "That no one will judge you"

– *Children's perspective on the Barnahus model*³

- ▶ Charting the way forward, the European Commission is currently carrying out a revision of the Victims' Rights Directive ("VRD") as one of its key actions set out in the EU Strategy on victims' rights (2020-2025), aimed at ensuring, *inter alia*, an improved access to specialist support for vulnerable victims. Along these lines, the current proposal for amending the VRD highlights the Barnahus model as the most advanced example of a child-friendly approach to justice at the moment. The revision builds on the Barnahus model principles by requiring in a new Article 9a, that Member States provide for a targeted, multi-agency approach to support and protect all child victims in need on the same premises.⁴
- ▶ Moreover, in 2025, the CoE set up the Committee of Experts on access to child-friendly justice through multidisciplinary and interagency services (ENF-JUS) tasked to prepare a Draft Recommendation on multidisciplinary and interagency services for child-friendly justice, including operational guidelines, with the aim of promoting and supporting the establishment of standardised and high-quality multidisciplinary and interagency services to ensure children's right to co-ordinated, safe services and access to child-friendly justice. Its work is guided by relevant international and European standards and good practices, as well as experiences and lessons learned from joint EU and CoE Barnahus TSI projects and evidence-based research compiled in the Mapping study described in the subsequent Chapter.

1 Directive (EU) 2024/1385 of the European Parliament and of the Council of 14 May 2024 on combating violence against women and domestic violence: <https://eur-lex.europa.eu/eli/dir/2024/1385/oj/eng>

2 European Union Agency for Fundamental Rights: *Mapping Child Protection Systems in the EU – Update 2023*

3 Extracted from the „Qualitative study on child sexual exploitation and abuse in Slovenia“, pp. 29, 33, 35, prepared under the framework of the joint EU and CoE TSI project „Supporting the implementation of Barnahus in Slovenia – Phase II“ and published by the CoE

4 Proposal for a Directive amending Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA: <https://eur-lex.europa.eu/legal-content/EN/TX/?uri=CELEX%3A52023PC0424>



“The Barnahus model represents a recognition that children’s needs in legal processes span multiple disciplines and require coordinated expertise. It encourages Member States to systematically examine aspects that help ensure these multidisciplinary needs are addressed while maintaining legal standards. In my experience, working with this framework has brought a more complete approach to our child abuse investigation work”

– Liisa Järvilehto, Clinical Psychologist at Forensic Psychology Centre for Children and Adolescents (HUS), Helsinki University Hospital, and member of the Barnahus Network Steering Group

JOINT EU AND COE BARNAHUS TSI PROJECTS: BRINGING JUSTICE CLOSER TO THE CHILD

- ▶ The above-mentioned policy interventions paved the way for close co-operation between the European Commission, Reform and Investment Task Force (SG REFORM) and the CoE Children’s Rights Division to **implement TSI projects on Barnahus in five EU and CoE Member States**. The projects aimed at facilitating the rollout and scale-up of the Barnahus model across Europe. National authorities were provided with multifaceted assistance within the framework of targeted Barnahus projects focusing on standard alignment, capacity building, and systemic reform rooted in the best interests of the child and the MDIA approach.
 - comprehensive review of national legislative, policy, and institutional frameworks;
 - development of strategic actionable deliverables, such as national roadmaps, strategies, protocols, and action plans;
 - strengthening of MDIA co-operation, formalised through interagency agreements and memoranda of understanding;
 - capacity building and professional training for specific groups of professionals involved in MDIA services, and frontline and decision-making professionals in the justice, health, social welfare, and law enforcement sectors;
 - awareness raising among stakeholders and the broader public, including children;
 - facilitation of peer learning and cross-border exchange, through study visits, joint workshops, and expert collaboration.
- ▶ While each Barnahus project implemented through the TSI responded to the specific needs and context of its respective Member State, all projects shared a set of common objectives:
 - strengthening national and regional systems for responding to child victims and witnesses of violence, including sexual violence in a co-ordinated, child-sensitive, and trauma-informed manner;
 - ▶ Collectively, these Barnahus projects implemented through the TSI contributed to:

- harmonising national practices with international and European child protection standards;
- enhancing institutional and operational readiness for full-scale implementation of the Barnahus model;
- promoting sustainable reforms through the adoption of long-term strategies and costed implementation plans;
- fostering regional and EU-wide coherence in how countries address violence against children, including sexual violence through MDIA co-operation;
- creating replicable models that can enhance future Barnahus rollouts in other EU and CoE Member States.

► In **Slovenia**, the Phase I “[Feasibility Study for setting up Barnahus](#)” (2018-2019) of the TSI project aimed at probing the level of readiness of the national system to implement the Barnahus model, while Phase II “[Supporting the implementation of Barnahus in Slovenia](#)” (2019-2022) focused on reviewing relevant laws and policies, developing MDIA strategies, tools and procedures, training professionals working with children and raising public awareness of sexual violence against children.



COUNTRY-SPECIFIC FEATURES

- Civil law model and a centralised state organisation
- state-led and centrally co-ordinated Barnahus model implementation
- strategic and systemic implementation (from national implementation strategies and roadmaps to dedicated Barnahus legislation)
- actionable implementation steps envisaging timeframes, leading actors and collaboration partners
- Barnahus funding embedded in a national agency and sustainable budgetary forecasting and cost analysis envisaged
- clearly established stakeholders’ responsibilities and roles
- robust legislative framework including a dedicated Barnahus law as an output of the project

► In **Finland**, the TSI project “[Barnahus in Finland – Ensuring child-friendly justice through the effective operation of the Barnahus-units in Finland](#)” (2021-2024) was implemented around five university hospital units specialising in forensic psychology/psychiatry (Barnahus-units) to build on lessons learned from almost 20 years of experience in operating the Barnahus and to further strengthen the identified legal, policy and training gaps with special emphasis on reducing significant existing delays in the pre-trial and judicial processes involving children.



COUNTRY-SPECIFIC FEATURES

- Nordic legal model: focus on functional adaptability and pragmatic solutions over rigid legislation approaches
- nationally guided Barnahus implementation model (Finnish Institute for Health and Welfare) and regionally implemented through five university hospitals
- 20-year track record in operating the Barnahus model
- action-oriented Barnahus engagement, acknowledging that frameworks can be refined through practice
- budget and information sharing rooted in dedicated Barnahus legislation
- MDIA Barnahus engagement from grassroots practitioners to policy makers
- Barnahus units’ dual role: forensic interview and statement veracity assessment

► In **Spain**, prior to launching the TSI project “[Barnahus in Spain – Strengthening child-friendly justice among Barnahus-type services in Spanish regions](#)”, a pilot Barnahus unit in Tarragona was rolled out as a first step towards implementing the Barnahus model. The TSI project has been subsequently carried out in two phases. Phase I (2022-2024) focused on gathering experiences from the pilot Barnahus unit, ensuring a broad stakeholder buy-in, analysing the current services already existing in the different regions (*mapping study*) and developing national and regional roadmaps for concrete action. Phase II (2024-2027) aims at continuing implementing the Barnahus model at national level and providing tailored

assistance to the Spanish regions to adapt the legal and policy framework, in line with the findings from Phase I. This Phase also aims to strengthen the collaboration of justice operators and other services for child victims of sexual violence.



COUNTRY-SPECIFIC FEATURES

- High level of administrative and political decentralisation (17 autonomous regions and 2 autonomous cities) with different levels of regional powers
- collaborative governance Barnahus implementation model (advocated for by civil society organisations, supported by the central Government and put in place by regions)
- robust legal and policy frameworks, from national strategies to dedicated legislation to combat violence against children
- variety of practices among different regions, many of them with Barnahus-type services
- regional rollout strategy
- pilot court on violence against children as a promising practice in the Canary Islands, and other specialised courts to be deployed in the coming years
- effective implementation relies on the active engagement and co-operation of regional authorities

- The **Irish** TSI project “[Support the implementation of the Barnahus project in Ireland](#)” (2022-2025) placed emphasis on gathering experiences from the pilot Barnahus West and reviewing the existing regulatory and policy framework to be used as a basis for putting in place a dedicated strategy focused on scaling up interagency protocols and enhancing data governance procedures as well as establishing additional Barnahus units to ensure nation-wide coverage. Phase II of the project (2025-2028) aims at scaling up the model nationally, ensuring consistent service standards, and building professional capacity to address child sexual abuse effectively.



COUNTRY-SPECIFIC FEATURES

- Common law model: adversarial legal system in which forensic interviews are not automatically admissible at Irish courts
- strong high-level endorsement of and commitment to Barnahus implementation from the beginning



- substantial rural geographical distribution bridged by implementing the Barnahus model regionally
- nationally guided Barnahus implementation model (Department for Children, Disability and Equality) and regionally implemented through Barnahus West, South and East
- Barnahus model centred on child participation and trauma-informed practice, balancing the protection of children's rights with data protection
- structured Barnahus MDIA collaboration with clear roles and timeframes
- integrated gender-based preferences into Barnahus forensic interviews: respecting the right of the child victim to choose the gender of the child interviewer

- The purpose of the **Croatian** TSI project “[Implementing the Barnahus Model in Croatia](#)” (2023-2026) is to analyse the legal, policy and institutional framework as well as training needs to put in place a dedicated roadmap, regulate MDIA co-operation and provide tailored trainings to stakeholders to strengthen the national mechanism against sexual violence against children by putting in place the Barnahus model.



COUNTRY-SPECIFIC FEATURES

- Civil law model: rooted in continental European tradition
- state-led and centrally co-ordinated Barnahus model implementation
- well-established Barnahus type services: specialised judges/prosecutors/police officers for minors, court appointed expert assistants conducting forensic interviews, audio-video recording of forensic interviews
- an existing by-law regulating the code of conduct of professionals in sexual violence cases
- implementation of the Barnahus model anchored in a dedicated national strategy
- preparation of a Memorandum of Understanding as a high-level commitment document of stakeholders competent for implementing the Barnahus model
- development of a Roadmap and Cost Structure Analysis for the implementation of the Barnahus model

- ▶ Anchoring the Barnahus model in the framework of the EU and the CoE policy setting and carrying out targeted TSI projects that enhance the geographical reach of Barnahus units in Europe, resulted in strengthening the **political will** of European national stakeholders to bring into life the Barnahus model and to tailor its implementation to each country-specific context. A broader overview of the distribution of the Barnahus model and Barnahus-type services in Europe can be found in the “[Mapping study on multidisciplinary and interagency child-friendly justice models responding to violence against children in Council of Europe member states](#)”, published in 2023 by the CoE. The study indicates a high interest among national authorities to implement the Barnahus model and attests to its efficiency (relevant results presented in the Highlight Box 1 below). The study

HIGHLIGHT BOX 1: DISTRIBUTION OF THE BARNAHUS MODEL AND BARNAHUS-TYPE SERVICES IN EUROPE

- 22 CoE Member States including 14 EU Member States established the Barnahus model
- 10 CoE Member States including 9 EU Member States operate Barnahus-type services
- 5 CoE Member States including 1 EU Member State are in the process of setting up the Barnahus model or Barnahus-type services
- 4 CoE Member States including 1 EU Member State indicated Government intention to implement Barnahus/Barnahus type-services
- 11 CoE Member States including 2 EU Member States operate other MDIA services

is in the process of being updated to include the progress at European level during the last few years.⁵

- ▶ In addition, pursuant to the [13th edition of the EU Justice Scoreboard](#) published on 1 July 2025 (Figure 29 and 30) all EU Member States have some specific arrangements for child-friendly justice and proceedings, both as regards civil and criminal justice matters as shown in the Highlight Box 2 below.

HIGHLIGHT BOX 2: CHILD-FRIENDLY ARRANGEMENTS IN EU MEMBER STATES IN CIVIL AND CRIMINAL PROCEEDINGS

- 27 EU Member States: children are heard in child-friendly specialised rooms
- 25 EU Member States: a multidisciplinary approach is applied in child interviews to prevent their multiplication and avoid secondary victimisation
- 27 EU Member States: specific measures are in place to provide for audio-visual questioning of child victims, or other distance communication hearing of children
- 20 EU Member States: criminal proceedings involving children as victims are treated as a matter of urgency
- 27 EU Member States: information is provided to child victims on their rights and on proceedings in a child-friendly manner
- 24 EU Member States: judges, prosecutors and other legal professionals in contact with children receive specialised training
- 18 EU Member States: child-friendly designed websites and helplines are put in place to provide information on the justice systems



⁵ The data collection for the study was done in 2022 through desk research and information provided by CoE Member States directly, and is mainly based on self-assessments.



- ▶ The Barnahus model has therefore evolved into a widely endorsed **European standard** for effective child-protection systems and implementation efforts of national authorities have resulted in building more coherent, efficient, and child-sensitive national justice systems.
- ▶ While significant progress has been made by national authorities at European level to combat violence against children, including sexual violence, ensuring effective child-protection systems remains a **challenge** in many aspects, ranging from putting in place an adequate legal framework and its effective and comprehensive application in practice, to fostering MDIA co-operation and maintaining competency building. The CoE estimates that one in five children in Europe is a victim of sexual violence.⁶ In addition, out of the eighteen EU Member States for which data was available, in seven EU Member States under 5% of women had experienced sexual violence before the age of 15, compared with 5% to 10% in seven EU Member States, and over 10% percent in four EU Member States.⁷ According to Eurostat, up to 13.7% of adult women reported at national level to have experienced sexual violence in childhood.⁸ Of even greater concern are the unreported cases of sexual violence against children that are often referred to as the “dark figure” which persist due to fear, shame, dependency, social silence, institutional shortcomings, and systemic mistrust, preventing many victims from ever coming forward.
- ▶ To support the EU and the CoE Member States in addressing these challenges by putting in place or strengthening the internationally recognised Barnahus model for a comprehensive child protection mechanism in cases of violence against children, including sexual violence, the SG REFORM and the CoE have developed this document (hereinafter the “Practical Guidance”) **drawing on lessons learned, experiences, good practices, and reform processes supported through TSI projects implemented by the SG REFORM and the CoE**. It offers a **strategic and operative roadmap for national implementation**. It seeks to promote a harmonised approach to Barnahus across Europe, grounded in international standards and minimum quality requirements, while allowing for flexible adaptation to national legal, policy and institutional frameworks. It is intended to be used as a **practical guide** for policymakers, practitioners, and reform leaders engaged in strengthening child protection and justice systems across EU and CoE Member States.

FROM EUROPEAN COLLABORATION TO NATIONAL IMPACT: WHY FOLLOW THE PRACTICAL GUIDANCE TO IMPLEMENT THE BARNAHUS MODEL?

- ▶ The Barnahus model acts as a **key mechanism** for ensuring an effective response to violence against children, including sexual violence, closing the implementation gaps between law and practice, and fulfilling international commitments to provide every child with protection, and justice. While the Barnahus model represents the leading model of child-friendly, multi-agency response to violence against children, it must be emphasised that it is always only the second-best option. The first and best option is prevention through ensuring that violence never occurs in the first place. Barnahus comes into play only when prevention has failed. Therefore, it should always be

⁶ <https://human-rights-channel.coe.int/asset-the-lake-en.html>

⁷ https://unece.org/sites/default/files/2024-02/5Violence%20EU-FRA_ENG.pdf

⁸ Eurostat, EU Survey on gender-based violence against women and other forms of inter-personal violence (EU-GBV), 2022

implemented alongside robust preventive measures, such as early detection, awareness-raising, and support for families and communities.

- For national authorities, the model provides a **systemic solution** to long-standing gaps in MDIA co-operation, and to institutional fragmentation. It supports **early intervention, timely case resolution, and comprehensive care**, thereby improving outcomes for child victims and wit-

nesses and contributing to more effective prosecution and prevention of violence. Moreover, implementing Barnahus reinforces the credibility and accountability of State institutions, contributes to restoring public trust in child protection and justice systems, and creates a **replicable and a sustainable model** for broader structural reform. It also contributes to an increase in case reporting due to greater trust in the public system.

HIGHLIGHT BOX 3: WHY FOLLOW THE PRACTICAL GUIDANCE TO IMPLEMENT THE BARNAHUS MODEL?

- **Promotes National Ownership and Tailored Implementation**
Rather than a one-size-fits-all model, it supports context-specific adaptation, empowering authorities to design reforms that respect national legal, institutional and policy frameworks while meeting core European and international standards on Barnahus.
- **Enhances Compliance with the EU and the CoE Obligations**
By following the Guidance, EU and CoE Member States reinforce their commitment to child-friendly justice, integrated child protection systems, and prevent secondary victimisation, as called for by the relevant EU and CoE documents on child protection.
- **Supports Sustainable Systemic Change**
It encourages authorities to embed the Barnahus model within broader child protection reforms, promoting long-term institutionalisation, resource mobilisation, and capacity development.
- **Accelerates Reform through Practical Tools**
It includes operative plans, dashboards, checklists, and key success criteria to guide decision-makers through each phase of Barnahus setup from stakeholder mobilisation to legislative alignment and service delivery.
- **Reduces Implementation Risks and Avoids Common Pitfalls**
By drawing on lessons learned from TSI projects implemented by the SG REFORM and the CoE, it helps governments anticipate obstacles, mitigate risks, and benefit from tested solutions.
- **Enables Evidence-based, Child-friendly Reform**
It emphasises the importance of introducing clear rules on conducting interviews so that they are audio-video recorded and admitted as evidence and that they ensure due process is respected and the rights of the defendant upheld.
- **Strengthens MDIA Co-ordination and Professional Capacities**
It supports the establishment of formal co-operation protocols, training schemes, and governance models to ensure that law enforcement, justice, child protection, and health services work coherently and effectively under one roof.

“Barnahus has further strengthened Finland’s investigation of suspected child abuse, building on existing multidisciplinary foundations to create a more unified response. By coordinating diverse expertise and enabling more efficient information flow between agencies, we ensure that the child’s best interests are systematically prioritised rather than considered in isolation. The result is a more child-centred investigative process where specialised knowledge is integrated into every case.”

– Tom Pakkanen, PhD, Forensic Psychologist at Forensic Psychology Centre for Children and Adolescents (HUS), Helsinki University Hospital

- The Practical Guidance serves as a **reform companion** to inspire, inform, and support national and regional authorities in building co-ordinated child-friendly justice systems that place the best interests of the child at the core of all responses

to violence against children, including sexual violence. It envisages an integrated implementation approach to child protection, pulling together and strengthening the already existing legislation and practice.

“Barnahus model will enhance the effectiveness of protection of child victims, primarily of child sexual abuse victims, including effectiveness of prosecution in such criminal proceedings and adaptation of criminal proceedings to children’s needs in order to avoid their secondary victimisation”

– Ministry of Justice, Public Administration and Digital Transformation of the Republic of Croatia

- Its **purpose** is to provide a structured, strategic, and actionable roadmap to support the EU and the CoE Member States in designing and carrying out reforms aimed at establishing or strengthening the Barnahus model in line with their national contexts. It is based on lessons learned and experiences from TSI projects implemented by the SG REFORM and the CoE and bridges concept and practice from political will to service delivery. The Practical Guidance functions as a **pick and choose document** to be applied to the country-specific context, bearing in mind the existence of the Barnahus model or Barnahus-type services in the country, specific needs of the child protection system, level of (de) centralisation as well as distinct administrative, social and historic factors. By synthesising tested practices, innovations, and challenges it supports fragmented national child protection systems in building unified, child-friendly responses based on the MDIA approach and focusing on the child’s best interests.
- The Practical Guidance therefore enables national authorities to **lead their own Barnahus reform processes** building a Barnahus model that is legally sound, operationally feasible, and centred on the rights and needs of the child and ultimately ensures more effective protection, justice, and support services for child victims of violence, including sexual violence.

PEER LEARNING OPPORTUNITY AS PART OF A BARNAHUS COMMUNITY

To facilitate the peer-to-peer support, national authorities can request the TSI opportunity via the Public Administration Cooperation Exchange (PACE) initiative⁹, which allows civil servant exchanges between the public administrations of the EU Member States. This provides an opportunity to promote direct, one-to-one dialogues and allow different stakeholders to learn from each other and share knowledge.

CORE OBJECTIVES OF PRACTICAL GUIDANCE



EMPOWER NATIONAL STAKEHOLDERS

Provide a resource to support policymakers, practitioners, and system leaders in their independent reform journeys with access to tested methodologies, implementation phases and practical steps for action.



TRANSLATE CHILD PROTECTION STANDARDS INTO NATIONAL PRACTICES

Help implement key UN, EU and CoE principles and Barnahus Quality Standards based on lessons learned from TSI projects carried out by the SG REFORM and the CoE.



PROMOTE A HARMONISED AND YET FLEXIBLE APPROACH

Offer minimum quality standards and core requirements for Barnahus implementation, while adapting to the country-specific framework and practice.



SUPPORT MDIA RESPONSE AND CHILD-SENSITIVE JUSTICE REFORMS

Provide clear steps for integrating law enforcement, the judiciary, social services, and health perspectives into a co-ordinated, trauma-informed response under one roof, while ensuring respect for due process.



MITIGATE RISKS AND BUILD SUSTAINABLE NATIONAL SYSTEMS

Guide authorities through reform phases, highlighting risk factors, institutional bottlenecks, and success factors for long-term sustainability.

⁹ https://reform-support.ec.europa.eu/what-we-do/public-administration-and-governance/public-administration-cooperation-exchange-2023_en?prefLang=et

KEY PILLARS: IMPLEMENTING THE BARNAHUS MODEL IN LINE WITH ESSENTIAL STEERING CRITERIA

- ▶ This section proposes key pillars for implementing the Barnahus model which operationalise the best interests of the child as the legal and ethical imperative. They assist national authorities to **move** from fragmented and dispersed responses to safe, child-friendly, and co-ordinated models of care and justice. In doing so, they embody the values behind core international and European child protection frameworks and rely on the **Barnahus Quality Standards**. These standards

are of vital importance for national authorities implementing the Barnahus model, as they provide a comprehensive, rights-based framework for ensuring the effectiveness, consistency, and legitimacy of their efforts. They are not just technical tools but strategic enablers of child-friendly justice reform. These standards equip national authorities with the clarity, credibility, and coherence needed to build Barnahus units that truly serve the best interests of every child.

“Barnahus, when properly structured and implemented, proves that the notion of ‘child participation versus child protection’ is a false dichotomy. It stands as the best model we have for safeguarding children while upholding their rights to be heard and treated with respect.”

– Dr Susanna Greijer (PhD), Research, Legal and Policy Consultant, Children's rights and protection of children from violence

- ▶ Building on the Barnahus Quality Standards, key pillars for implementing the Barnahus model are developed in line with lessons learned and experiences gathered through **TSI projects implemented by the SG REFORM and the CoE** to ensure that they stem from and can be

applied in real-world settings with sufficient level of universal applicability coupled with the possibility of tailoring them to the national context. They are divided into three thematic groups: (i) general, (ii) operational, and (iii) quality specific.

GENERAL: FOUNDATIONAL VALUES ROOTED IN CHILD RIGHTS AND JUSTICE

The child's best interests as a primary consideration: Guiding principle in all decisions and actions.

Legally compliant framework: Aligned with international and European child rights and child protection standards.

Child participation: The child's right to be heard, to express views freely and to timely receive information adapted to the child's age and level of understanding.

Prompt access to justice: Children are supported in navigating judicial processes without undue delays.

MDIA co-operation: Co-operation protocols and work procedures are set up and implemented throughout the entire Barnahus experience.

Service equality: Inclusive access regardless of gender, ethnicity, disability, or migration status. Non-offending parents/caregivers and siblings as secondary beneficiaries.

Trauma-informed services: Designed to create safe, trustworthy and inclusive environments and reduce fear, shame, and re-traumatisation.

OPERATIONAL: FUNCTIONAL BUILDING BLOCKS FOR SUSTAINABLE OPERATION

“Under one roof” approach: All services operate from one location to avoid transfers between agencies and prevent re-traumatisation.

Child-friendly interior and exterior environment: Accessible by public transport, preferably in a detached building. Child-friendly interior design adapted to children of all ages.

Forensic interviews: Audio-video recorded at Barnahus premises pursuant to evidence-based protocols and by one specialised staff member with the possibility of other professionals to observe and/or intervene in an adjacent room or online. Child victims entitled to indicate their preference for the gender of the child interviewer, where feasible.

4-rooms principle: Each service is allocated a dedicated space at Barnahus premises (forensic interview room, medical evaluation and treatment room, psychosocial support and therapy room, child protection and case management room).

Clear roles and responsibilities for all actors: Avoids overlap and ensures accountability.

MDIA planning and case management: Defined co-ordination, timelines and responsibilities. All agencies present at assessment and review meetings. One person assigned to each child to provide support during their Barnahus experience. Barnahus manager to supervise the MDIA response.

Effective referral systems: Streamlined pathways from detection to recovery.

Medical examination/treatment assurance: Done at Barnahus premises unless hospital settings are required in special cases. The possibility of child victims to exercise their right to choose the gender of the medical examiner, where feasible.

Mental health examination/treatment assurance: Routinely made available. Short/mid/long term support planning in place.

Emergency response and crisis intervention readiness: Capacity for immediate action in urgent child protection cases ensured.

Data sharing, security, protection and governance: Rigorous data sharing protocols in place. Maintained integrity and privacy in all records and communications.

QUALITY SPECIFIC: STANDARDS OF CONSISTENCY, EXCELLENCE, AND ACCOUNTABILITY

Sustainable funding and political commitment: Long-term resource planning and multi-agency ownership.

Adaptability to national and regional contexts: Ensures relevance and respect for legal, policy and administrative differences.

Integrated in existing national child protection systems: Embedded in broader child welfare and justice reforms.

Equal provision of services: No child is disadvantaged due to where they live.

Child feedback and participation in service improvement: Children's input is used to refine practice.

Evidence-based interventions: Services are developed through research, data, and evolving best practices.

Initial, continuous, specialised, MDIA training of professionals: Ensures professionals develop and maintain relevant skills and can effectively provide child-friendly services.

Regular, independent monitoring and evaluation: Maintains standards and accountability, and builds trust in the system.

Professional supervision and support mechanisms: Prevents burnout and ensures quality care for staff.

Quality assurance embedded in institutional culture through regular evaluation: A continuous improvement mindset is integrated into operations, staff development, and service delivery.

SEE ANNEX 1: CHECKLIST - ARE WE ALIGNED WITH KEY PILLARS?

SUCCESS FACTORS: CRITICAL FACTORS FOR AN EFFECTIVE BARNAHUS MODEL

- The purpose of success factors is to define the critical conditions, mechanisms, and enablers that must be in place to ensure effective, sustainable, and rights-based implementation of the Barnahus model. These factors reflect the minimum enabling conditions and strategic priorities that are proposed to be in place to ensure the Barnahus model's alignment with child rights standards and its successful operationalisation within national systems. By drawing on the experiences of countries that have implemented Barnahus within TSI projects implemented by the SG REFORM and the CoE, success factors consolidate key lessons learned, promising practices, and structural prerequisites for replicable impact. Integrating success factors into the Barnahus implementation ensures that the model is not only established, but embedded as a permanent, effective, and **child-rights compliant mechanism** for responding to violence against children, including sexual violence. They are essential for transforming principles into practice, and vision into tangible outcomes for child victims and witnesses.

1. CHILD-FRIENDLY AND TRAUMA-INFORMED APPROACH

- The child's best interests must be the guiding principle in design and practice.
- Trauma impact is acknowledged, and practices are responsive to the needs and experiences of trauma survivors.
- Premises are adapted to children's needs (safe, inclusive and engaging).

2. TIMELY IDENTIFICATION OF RELEVANT STAKEHOLDERS WORKING WITH AND FOR CHILDREN VICTIMS

- Initial engagement of all key stakeholders ensures an MDIA approach from the get-go and promotes their input and mutual understanding of the scope of their competencies and responsibilities, enabling them to start collaborating from the start.

3. DUE PROCESS AND EVIDENTIAL VALIDITY OF CHILD'S TESTIMONY

- Barnahus case management processes should be conducted in line with due process as regulated in each EU and CoE Member State.
- High-level of evidential validity of child's testimony is essential in the justice process to ensure high quality evidence and indictments by the prosecution.

4. STRONG POLITICAL AND INSTITUTIONAL COMMITMENT

- High-level endorsement from competent agencies is essential to ensure both the initial implementation and continuous development and long-term commitment.
- Institutional anchoring ensures sustainability beyond the pilot phase.
- Appointment of a central co-ordinating authority enables operational longevity.

5. ADAPTATION TO NATIONAL CONTEXT WHILE UPHOLDING CORE STANDARDS

- Adaptation to legal and institutional frameworks without compromising core principles.
- Scale-up of already existing national Barnahus-type services or other MDIA services for children, avoiding duplication and focusing on national needs.

6. SUSTAINABLE FUNDING AND RESOURCE ALLOCATION

- Ensuring stable funding for personnel, infrastructure, and training is vital.
- Reliance on project-based funding risks creating implementation gaps once donor support ends.

7. PUBLIC AWARENESS AND STAKEHOLDER ENGAGEMENT

- Communication strategies to raise awareness among the public, professionals, and decision-makers.

8. CLEAR LEGAL AND POLICY FRAMEWORK

- Legal alignment with international standards ensuring protection against violence against children, including sexual violence is a prerequisite.
- Memoranda of understanding, interagency protocols and dedicated pieces of legislation facilitate case handling under one roof; however, they should be tailored to the level of national (de)centralisation.

9. INTEGRATED MDIA CO-OPERATION

- Structured MDIA protocols for co-ordination between police, prosecutors, judges, child protection, health, and therapeutic services.

10. CAPACITY BUILDING AND SPECIALISED TRAINING

- Recruitment of professionals is based on child-sensitive selection criteria and clear on-boarding procedures are introduced.
- Continuous MDIA trainings for professionals working in and around Barnahus to ensure up-to-date know-how enabling them to understand each other's responsibilities and restrictions and exchange experiences.

11. CHILD PARTICIPATION AND INCLUSIVE PRACTICE

- Inclusion of children's voices in service design and feedback loops.

12. MONITORING, EVALUATION, AND DATA COLLECTION

- Implementation should be guided by clear indicators, quality benchmarks, and continuous monitoring.
- External evaluation is envisaged to ensure objective service assessment.

"It really was a true honour to have visited Barnahus...Upon my arrival to Barnahus on Tuesday, I was feeling a bit anxious, however my nerves quickly settled when I was met with all the wonderful friendly faces of the staff. You have no idea how much that meant to me. It was the one thing I never experienced as a child after my own traumatic abuse... Every detail was mind blowing, from the colour scheme, the artwork, the star signs on the doors, the examination rooms, the interview rooms, the support services for evidence in relation to the courts, the multisensory spaces and the multidisciplinary team who works there...It is so positively a stark contrast and it was like walking through the wardrobe into Narnia...For the first time in my life I feel I am being heard. The guilt and the shame I have had hanging around my neck like a rusty old anchor is starting to dissipate slowly..."

– Survivor of childhood sexual abuse from Ireland

KEY RISKS AND MITIGATING STRATEGIES: POSSIBLE IMPLEMENTATION PITFALLS AND RISK REDUCTION PLANS

- ▶ The purpose of identifying key risks and mitigation strategies is to help national authorities anticipate, manage, and overcome obstacles that could undermine the successful implementation of the Barnahus model. This approach enables evidence-based planning, strengthens institutional **resilience**, and ensures that the model is implemented in a way that is both sustainable and child-rights compliant.
- ▶ The risks outlined below serve as indicative examples stemming from stakeholder experiences in TSI projects implemented by the SG REFORM and the CoE and should be regarded as part of a non-exhaustive catalogue of potential implementation challenges rather than a fixed and conclusive list of implementation gaps.

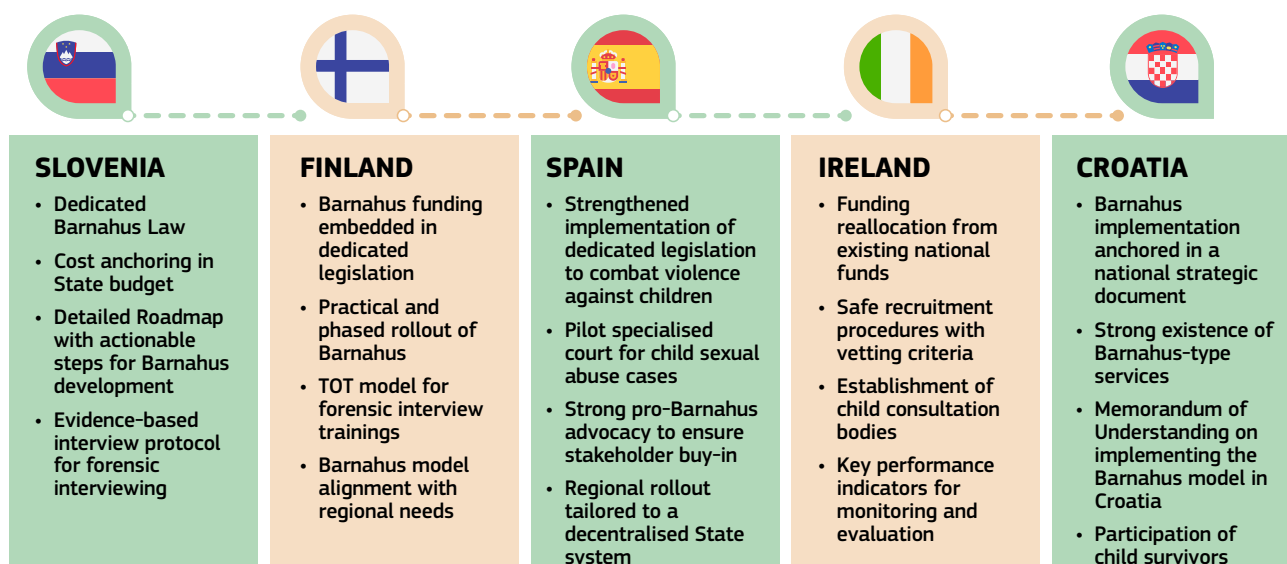
HIGHLIGHT BOX 4: RISKS VS. MITIGATION STRATEGY MATRIX

RISK TYPE	MITIGATION STRATEGY
Absence of an initial legal basis for Barnahus model set-up.	Anchor implementation of the Barnahus model in national policy or legal framework to ensure sustainability and high-level support from the start.
Incompatibility with national system and specificities. Losing focus on tailoring the Barnahus model to country-specific needs.	Build on existing Barnahus-type or other MDIA services and introduce reforms by aligning national systems with international standards, while respecting national intricacies. Prepare recommendations in early stages of the process based on comprehensive reviews of the applicable legal, policy, institutional framework and training needs analysis.
Absence of political will or fragmented institutional support. Reluctance to shift from traditional procedures to a reformed model.	Transmit information on added value and importance of the Barnahus model for child victims and witnesses of violence and for national systems to policymakers and agency professionals during the whole implementation process through high-level and interagency activities (knowledge sharing events, follow up meetings). Focus on a MDIA approach from the beginning. Organise study visits to other countries to learn from their experiences. The study visits should be multidisciplinary, so each group of professionals meets their counterparts in the host country to explore in more detail how their working methods have been adapted to the Barnahus functioning and what was the added value.
Short-term implementation planning. No plan to scale beyond pilot phase.	Prepare a national strategy/roadmap with key performance indicators to ensure continuity and link it with budget forecasting and cost analysis.
Unclear co-ordination and leadership at national level.	Appoint a central agency to co-ordinate and encourage active engagement of stakeholders.
Lack of sustainable funding.	Embed Barnahus in national budgets through budget forecasting and cost analysis. Ensure actual allocation of the part of the State budget to the Barnahus.

HIGHLIGHT BOX 4: RISKS VS. MITIGATION STRATEGY MATRIX

RISK TYPE	MITIGATION STRATEGY
Fragmented MDIA co-operation and fragile communication between agencies. Child re-traumatisation through feeble procedures.	Prepare MDIA protocols identifying stakeholders' responsibilities and collaboration channels to ensure timely information flow and data sharing that are rooted in the best interests of the child and a trauma-informed approach.
Lack of child participation.	Envisage a child consultation body or a participatory process to include children's perspectives on how the Barnahus model should be adapted to their needs.
Poor understanding of child-friendly environment based on adult perception.	Include children's views on how premises should look like (interior and exterior) and how the services should be provided.
Inadequate training of professionals or lack of buy-in.	Develop national Barnahus training standards anchored in a cross-sectoral approach, international standards and comparative practices to ensure initial and continuous professional development and quality services. Organise regular online and offline exchanges between professionals to exchange on difficulties, promising practices and success stories from their daily work. At European level, such exchanges can also create broader synergies and make professionals feel part of a bigger network contributing to the well-being of children globally.
Lack of monitoring, evaluation, and accountability mechanisms.	Introduce quality assurance tools to measure outcomes and track implementation progress and ensure evidence-based development. Such quality assurance tools should be an integral part of the actual structure of the Barnahus model, e.g. by explicitly regulating periodic external evaluations/audits in law or policy instruments.

TSI BARNAHUS PROJECTS IMPLEMENTED BY THE SG REFORM AND THE COE: KEY MILESTONES





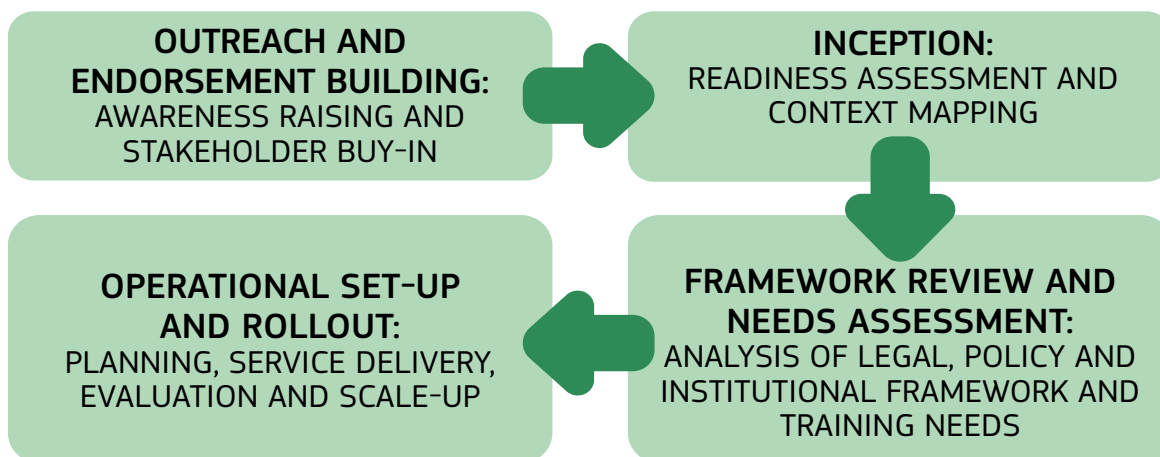
PART II. IMPLEMENTATION PATHWAY

OPERATIONAL JOURNEY FROM ENDORSEMENT TO DELIVERY AND EVALUATION

The purpose of Part II is to guide national authorities through step-by-step operationalisation of the Barnahus model starting from political outreach to service delivery and evaluation and ensuring a co-ordinated, measurable, and child-sensitive implementation process. It aims to enable structured, phased, and accountable implementation, aligned with key pillars and tailored to national child protection objectives. The implementation pathway includes a tentative description of steps and activities within each phase, built on implementation journeys from TSI projects implemented by the SG REFORM and the CoE. It is therefore proposed to tailor the phases and their activities to country-specific contexts and existing Barnahus-type or MDIA services to prevent duplication and ensure a tailored approach.

FIGURE 1: OVERVIEW OF THE IMPLEMENTATION PATHWAY

IMPLEMENTATION PATHWAY FROM VISION TO OPERATION



***Practical support tool:** Implementation dashboard - Timeline for establishing a well-functioning Barnahus model

This illustration visually structures the implementation process by providing a clear overview of how the Barnahus model can be established, helping stakeholders understand the chronological flow of actions from outreach to full rollout. It can also be used to present the Barnahus model to decision-makers, professionals, and public in a digestible format, reinforcing the rationale and structured nature of the reform. The Overview shows the actionable steps necessary to implement the Barnahus model while a more detailed explanation of each implementation step is presented below.

"A Children's House is not a courtroom – it's a safe space where a child speaks only once, but their testimony counts twice. The professional interview takes place in a child-friendly environment and is conducted by trained experts. This way, we protect the child and, at the same time, secure evidence that holds full probative value in court. The child comes first. And their story matters."

– Mija Cankar, Director ad interim at Children's House ("Hiša za otroke") in Slovenia

OUTREACH AND ENDORSEMENT BUILDING: AWARENESS-RAISING AND STAKEHOLDER BUY-IN

Outreach and endorsement building is the foundational step where strategic political, institutional, and societal support for the Barnahus model is initiated and cultivated. This phase seeks to raise awareness about the model's purpose aimed

at ensuring child-friendly justice in cases of violence against children, including sexual violence and securing the necessary political will to **drive reform**. Drawing on the TSI projects implemented by the SG REFORM and the CoE, this step typically begins with

high-level advocacy targeting agencies competent for carrying out activities aimed at responding to violence against children. Creating a **national vision for Barnahus** further strengthens buy-in. The goal is not only to obtain a green light but to foster an enabling environment for long-term reform. Outreach is not limited to State or regional agencies, it extends to civil society, and the general public. Strategic messaging highlights the Barnahus model's capacity to reduce the risk of re-traumatisation of

children, to ensure high evidential validity of child's testimony, and to streamline MDIA responses.

- Outreach and endorsement building is not a mere preliminary step, but a **strategic investment** in the longevity and integrity of the Barnahus model. When done effectively, it secures reform leadership, builds institutional trust, and anchors the model within national systems by setting the stage for sustainable implementation.

OBJECTIVE

To generate a sustainable broad-based political, institutional, and professional commitment to the Barnahus model, ensuring that its establishment is embedded within national priorities, supported by key actors, and understood by the professionals and the public as an alternative child-friendly justice model, and child rights-based, trauma-informed response to violence against children.

STAKEHOLDER ENGAGEMENT

- High-level policy makers at national and regional levels engaged through evidence-based advocacy and clear explanations of the added value of the Barnahus model for the national system as a practical measure for implementing international obligations and providing a comprehensive protection mechanism in cases of violence against children, including sexual violence.
- Different professionals working for and with children (judges, prosecutors, police, social workers, healthcare professionals) included and mobilised from the beginning to ensure their support and assessment of existing Barnahus-type services and implementation bottlenecks.
- Training institutions (schools for judges, prosecutors and public servants, professional associations) enable initial and continuous development of expertise and professional skills and provide quality service assurance.
- Academic institutions, national human rights organisations and civil society organisations reinforce the legitimacy of the reform by ensuring evidence-based empirical research and strengthen transparency.
- Children and survivors of violence, including sexual violence during childhood, where appropriate and ethically sound, are invited to contribute to shaping the national Barnahus vision by grounding it in lived experience. Survivors are empowered to reframe shame and fear with courage and bravery and motivate others to speak up and report violence.

KEY ACTIONS

- Conduct strategic stakeholder buy-in by ensuring that all competent agencies are included from the start. Raise awareness on Barnahus added value to explain to policymakers and competent professionals the benefits of implementing the Barnahus model.
- Present successful experiences from TSI projects implemented by the SG REFORM and the CoE to illustrate Barnahus impact on the national system.
- Engage civil society, academia, media, and survivor networks to build public trust and momentum.
- Identify institutional ambassadors to lead and sustain reform advocacy.

METHODS

- Engagement activities: high-level meetings with policy makers, roundtables and thematic gatherings with professionals and experts.
- Strategic communication campaigns tailored to local contexts that demystify the model and emphasise its added value for both children and institutions.
- Experience exchange events: knowledge-sharing sessions with the EU and the CoE representatives from TSI projects implemented by the SG REFORM and the CoE, representatives from agencies in EU and CoE Member States that implemented the Barnahus model, international experts and professionals with experience in Barnahus reforms to present first-hand results and learning curves to national counterparts, study visits to countries that already established Barnahus.
- Framing the model within national policy reform narratives, such as judicial modernisation, strengthening access to justice, or institutional trust-building, to increase resonance and facilitate endorsement.

DELIVERABLES AND OUTCOMES

- Public and professional buy-in, measured through preliminary consultations or endorsements from professionals and authorities.
- Development of a shared national narrative around Barnahus as a child-sensitive, MDIA, and rights-based solution.
- Formal expression of political will, which may take the form of a signed declaration, an inter-ministerial agreement, or inclusion in national strategic documents or action plans.
- Identification of a lead co-ordinating authority to ensure coherent advancement of the Barnahus reform.

- **Experiences from TSI projects implemented by the SG REFORM and the CoE on endorsement building¹⁰:** In Slovenia, stakeholder outreach and support were embedded in the “Decision to establish Barnahus/Children’s House” rooted in the Barnahus Quality Standards and signed by competent authorities. In **Spain**, partnership with civil society enhanced legitimacy and ensured synergies with national and regional authorities through dedicated roundtables, meetings and events. In **Ireland**, high-level policy-makers initiated the implementation of the Barnahus

model as the best suited model for a comprehensive response to violence against children, including sexual violence after researching possible models to reform the national child protection system. In **Croatia**, initial high-level endorsement was secured through anchoring the implementation of the Barnahus model in the “National Plan for Combating Sexual Violence and Sexual Harassment for the Period Until 2027” envisaging performance indicators, a timeline and the appointment of a co-ordinating authority.

“First something else. They shouldn’t start with the conversation on that experience....” “Everything should change slowly.”... “They have to take you seriously.”... “They would have to be patient, calm”

– Children’s proposals on the Barnahus process¹¹

INCEPTION: READINESS ASSESSMENT AND CONTEXT MAPPING

- The inception phase of the implementation of the Barnahus model provides a structured process for mapping the national mechanism for protection of children against violence, including sexual violence to understand the national context, cultural norms and inherited practices. It also aims at identifying existing Barnahus-type and other MDIA services to prevent overlap, to gather views and

perspectives of national experts working with and for children within existing child protection mechanisms, and to determine gaps and challenges to focus on the national reform needs. This phase enables national authorities to probe the system and assess the level of readiness and needs for implementing the Barnahus model in line with relevant international and European standards.

OBJECTIVE

To identify existing child protection services and co-ordination mechanisms that can be adapted or scaled, to understand the legal, institutional, and policy environment to conduct reform strategies, to anticipate potential challenges, capacity gaps, and funding needs early in the process.

KEY ACTIONS

- Stakeholder mapping and inclusion: map all relevant actors involved in child protection, justice, and service provision and verify whether all necessary stakeholders are included, also at regional and local levels.
- Stakeholder engagement: assess the level of support and readiness of stakeholders and identify and address areas of resistance or low engagement through targeted dialogue and awareness-building efforts.
- Barnahus-type services identification and gap determination: identify existing Barnahus-type services or other child-friendly service models to leverage existing resources, evaluate the current state of MDIA co-operation, identify bottlenecks and training needs.
- Strategic structuring: define national reform priorities in alignment with the best interests of the child and trauma-informed principles and commence the exploration of sustainable funding options (national budget allocations, international grants).

METHODS

- Inclusive stakeholder consultations (focus groups, roundtables, bilateral interviews).
- Desk review of the applicable national framework.
- Initial budget forecasting.
- Child participation (where feasible and ethical), including feedback mechanisms and advisory child/youth panels.
- Awareness and advocacy actions, such as ministerial briefings, public statements, and stakeholder launch event.

¹⁰ Finland was not indicated since the Barnahus TSI project did not include implementation but further strengthening of the Barnahus model after 20 years of functioning.

¹¹ Extracted from the „Qualitative study on child sexual exploitation and abuse in Slovenia“, prepared under the framework of the joint EU and CoE TSI project „Supporting the implementation of Barnahus in Slovenia - Phase II“ and published by the CoE.

➔ DELIVERABLES AND OUTCOMES

- Map of all relevant stakeholders, their roles, levels of engagement, and influence.
- Understanding of interagency co-operation status, strengths, and weaknesses.
- Identification of reform bottlenecks (e.g. legislative, mindset, financial and human resources).
- Identification of opportunities to build on.
- Overview of training gaps and needs.
- Establishment of a formal national co-ordination mechanism for the implementation of the Barnahus model (e.g., Interagency Advisory Group or high-level Steering Committee).
- Development of a shared national Barnahus vision document outlining scope, values, and implementation direction.
- Initial budgetary overview.
- Preparation of an inception report with main findings that can feed into the next phase.
- Preparation of a mapping document with an overview of established key elements.

► **Experiences from TSI projects implemented by the SG REFORM and the CoE:** the inception phases carried out in **Finland, Spain, Ireland, and Croatia** aimed at gathering views from competent professionals on the current state of play of the national system activated in cases of sexual violence

against children and identifying key issues and challenges to tailor the national Barnahus journey to the national landscape. The main deliverables were inception reports and mapping studies.

SEE ANNEX 2: STAKEHOLDER MAPPING MATRIX

FRAMEWORK REVIEW AND NEEDS ASSESSMENT: ANALYSIS OF LEGAL, POLICY AND INSTITUTIONAL FRAMEWORK AND TRAINING NEEDS

► This particular implementation phase thoroughly examines the existing legal, policy, and institutional landscape and analyses the existing national training concept regarding protection of children against violence, including sexual violence. It enables decision makers to make informed decisions on how to best fit the Barnahus model to the country-specific

concept and to focus on strengthening the already existing promising practices and bridge challenges in line with international standards and insights gained from the TSI projects implemented by the SG REFORM and the CoE. It further helps shape the operational rollout with clear, evidence-based priorities rooted in the national context.

🎯 OBJECTIVE

To establish a comprehensive understanding of the national context for implementing the Barnahus model by reviewing the legal, policy, and institutional environment, assessing the needs and capacities of professionals, identifying systemic gaps and opportunities, and ensuring alignment with international CoE and EU standards.

📋 KEY ACTIONS

- Legal, policy and institutional review: analyse national and regional legislation, policies, and institutional frameworks relevant to child protection. Identify stakeholders' competencies (justice, police, health, and social services). Identify areas of fragmentation, overlap or inconsistency that may hinder MDIA co-ordination or child-sensitive responses. Take into account gender perspectives and children in situations of vulnerability, such as children with disabilities to ensure a rights-based approach. A mapping study can be conducted in de-centralised countries.
- Alignment with international, CoE and EU standards and policy document: assess the extent to which national frameworks are harmonised with the Lanzarote Convention, the CoE Guidelines on Child-friendly Justice, the EU Strategy on the Rights of the Child (2021), the Barnahus Quality Standards, and other relevant frameworks.
- Review of MDIA co-operation: evaluate existing co-ordination mechanisms, protocols, and referral pathways among child protection services, law enforcement, judiciary, health, and psychosocial services. Examine how responsibilities are shared and where duplication or gaps exist.
- Needs assessment of professionals: identify training needs, capacity gaps, and workload pressures of professionals who would operate or collaborate with the Barnahus. Map available expertise and resources at national, and regional level to build on their know-how.
- Data analysis: review statistics on violence against children, including sexual violence (disaggregated by age, gender, geography, etc.) to identify patterns and identify service needs. Assess regional and rural disparities in access to child protection and child-friendly justice services.
- Child participation: ensure that voices of children are included in the assessment through age-appropriate participatory methods. Gather insights from children with lived experience (if possible) in the system to guide design and reform.
- Comparative review: consult experts and stakeholders from countries where the model is operational.

METHODS

- Desk review of the applicable national framework and international standards' harmonisation.
- Stakeholder interviews and expert consultations.
- MDIA roundtables and workshops.
- Professional surveys and self-assessment tools.
- Data collection from national statistical bodies and relevant agencies.
- Child consultation sessions (interviews, drawing, storytelling, group dialogue).
- SWOT analysis.
- Cross-country peer learning.

➡ DELIVERABLES AND OUTCOMES

- Framework review report summarising findings from legal, policy, and institutional analysis.
- Needs assessment report detailing professional capacity, training gaps, and service coverage.
- Comparative analysis brief of Barnahus implementation in peer countries.
- Recommendations with targeted proposals for the operational rollout, including:
 - legislative and policy amendments (if needed)
 - MDIA co-operation mechanisms
 - budget projections and funding sources
 - election criteria for Barnahus venue and equipment
 - required staffing and professional profiles
 - training programme design.

Experiences from TSI projects implemented by the SG REFORM and the CoE: In **Slovenia**, a Feasibility study for setting up Barnahus was carried out to assess the national Barnahus needs. **Finland** drafted a Legal review analysis of Finnish legislation concerning child sexual exploitation and abuse cases and an Analysis of current practices and identification of training gaps and needs of target groups. **Spain** prepared a Mapping study on the implementation of Barnahus together with a Training gap analysis for professionals working in Barnahus. This document, together with the [19 annexed regional factsheets](#), was considered a key piece of work that allowed both national and regional authorities to understand the “state of play” and main challenges and to put

in place new measures to implement the Barnahus model in each territory, according to the recommendations included in the report. In addition, **Ireland** prepared an Analysis of the legal, regulatory, and policy framework concerning child sexual abuse in Ireland with a focus on interagency information and data sharing processes as well as a Training needs analysis and Mapping of therapeutic services for children affected by sexual abuse in Ireland. As regards **Croatia**, an Analysis of the legislative, policy and institutional framework regarding protection of children and procedures for cases on violence against children, including sexual violence in Croatia was drafted along with a Training gap analysis.

SEE ANNEX 3: SWOT ANALYSIS OF NATIONAL FRAMEWORK AND NEEDS



OPERATIONAL SET-UP AND ROLLOUT: PLANNING, SERVICE DELIVERY, EVALUATION AND SCALE-UP

- ▶ The operational set-up and rollout translates outcomes of outreach and endorsement, inception, framework review and needs assessment phases into concrete service delivery. Building on the insights, priorities, and recommendations identified in earlier phases, this stage focuses on framing the Barnahus model in real-life settings, whether through a single pilot or a broader rollout. It requires co-ordinated decisions, comprehensive planning, interagency mobilisation, capacity building, and sustained political and financial commitment. The operational rollout is presented thematically, highlighting operational building blocks, implementa-

tion enablers, methods and tools, deliverables and outcomes from lessons learned and experiences from TSI projects implemented by the SG REFORM and the CoE so that policy makers and stakeholders can tailor the steps to their country needs. It should therefore be used as a planning compass rather than a set-in-stone binding roadmap.

- ▶ The operational building blocks presented below represent the essential structures, processes, and resources required to establish, deliver, and sustain MDIA services under one roof in a child-friendly, trauma-informed, and rights-based manner through the operative plan.

"Barnahus is a beautiful, safe space that provides support to children and families after sexual abuse; enabling them to have their voice heard in the justice process, access restorative medical and therapeutic care, and advocating for their rights throughout the process."

– Emma Harewood, International Barnahus Expert and Lighthouse Co-founder

OPERATIONAL BUILDING BLOCKS

1. STRATEGIC DECISION-MAKING

Define core implementation choices, including legislation, funding, rollout strategy, scope of beneficiaries, service, staffing, and governance to shape the national vision and operational structure of the Barnahus model.



3. BUDGETARY ALLOCATION

Conduct cost analysis to secure funding from national budgets and external grants with both short-term and long-term financial planning for the Barnahus.



5. TRAINING KICK-OFF

Design a national training strategy tailored to country-specific needs by including initial and ongoing multidisciplinary training involving national and international expertise.



7. INITIAL EVALUATION

Conduct an external evaluation of the pilot unit to assess impact, identify gaps, and guide future improvements and model expansion.



2. OPERATIVE PLAN

Develop a clear, step-by-step operative plan/roadmap with timelines, responsibilities, and risk management in a user-friendly way aligned with national needs and get relevant approvals from legislation to evaluation.



4. VENUE AND RESOURCES

Establish child-friendly Barnahus premises with appropriate equipment and infrastructure. Allocate human and material resources, including recruitment and management of staff.



6. BARNAHUS UNIT LAUNCH

Operationalise the Barnahus premises once all functional, staffing, and procedural elements are in place. Ensure coordination and readiness for service delivery.



8. FULL ROLL OUT

Scale up the Barnahus model nationwide based on lessons learned, ensuring consistency with quality standards and adapting to national needs.



- ▶ The operative plan outline presented below gives an overview of implementation enablers aimed at breaking down the operational building blocks. These implementation enablers are conducive to preparing a dedicated **operative plan** with actionable steps tailored to the country-specific needs and governance. It is proposed to draft the operative plan as a sequenced implementation document that includes the following: (i) a clear and user-friendly flowchart of implementation phases/activities, (ii) a timeline with milestones, (iii) a breakdown of activities (description, lead authority, implementing

partners, timeframe), (iv) a thematic description of activities, including legislative requirements, MDIA collaboration, beneficiaries, services, trainings, venue and equipment, budget, cost analysis, evaluation, (v) stakeholder responsibilities, (vi) risk assessment and contingency plans.

- ▶ It is highlighted that the overview of implementation enablers is of a **tentative nature** to be tailored to national frameworks. It reflects the Barnahus Quality Standards and stems from experiences gathered through TSI projects implemented by the SG REFORM and the CoE.

OPERATIVE PLAN OUTLINE – OVERVIEW OF IMPLEMENTATION ENABLERS

LEGAL AND POLICY FOUNDATIONS

- Envisage a declaration of intent or a memorandum of understanding or similar to ensure high-level commitment as an initial legal document regulating the implementation process
- Decide on the legal base for the functioning of the Barnahus model: centralised (dedicated Barnahus piece of legislation) or integrated into the existing legal or policy framework
- Envisage steps to eliminate identified legal and policy fragmentation
- Set up a dedicated inter-agency working group bringing together all professionals working with and for children at national and regional level to steer the implementation of the Barnahus model in line with the national and regional framework

Joint EU and CoE Barnahus TSI project experiences

Slovenia enacted a dedicated law regulating the functioning of the Barnahus model covering relevant operational steps and stakeholders' co-operation. Ireland prepared an Inter-Agency Agreement outlining responsibilities and codes of conduct of relevant agencies. Croatia prepared a Memorandum of Understanding as the initial legal document expressing national authorities' commitment to implement the Barnahus model and carry out steps within their competencies to ensure the reform.

STEERING BODY

- Set up a dedicated inter-agency body bringing together relevant professionals working with and for children at national and regional level to steer the implementation of the Barnahus model in line with the national and regional framework and international standards
- Envisage regular meetings to exchange information on steps implemented and planned as well as on possible bottlenecks to ensure continuous support and motivation to implement the Barnahus model

Joint EU and CoE Barnahus TSI project experiences

Finland, Spain, Ireland and Croatia set up advisory groups composed of relevant national/regional agencies, representatives of academia and civil society organisations and other professionals working for children, while Slovenia established the Interagency Working Party to co-ordinate and streamline the TSI projects implemented by the SG REFORM and the CoE. Spain organised inter-regional working meetings where regional authorities shared lessons learned and discussed draft project deliverables in the spirit of co-governance to encourage implementation of the Barnahus model nationwide.

BUDGET

- Develop a cost structure analysis
- Consider shifting available budgetary lines to a dedicated Barnahus line
- Make use of grants
- Re-purpose existing State-owned venues to Barnahus unit(s)
- Envisage short and long-term budgeting plans and anchor the Barnahus funding in the national budget

Joint EU and CoE Barnahus TSI project experiences

Slovenia embedded the necessary funding in the budget of the Ministry of Justice while Spain made use of the National Fund for Violence against Women. Ireland applied a twin-track financing model tailored to States with a higher level of decentralised governance whereby TUSLA covers the costs of management and each respective agency operating the Barnahus ensures financing of their respective services.

FORMAL STATUS OF THE BARNAHUS MODEL

- Embed the Barnahus model in the national system either as an independent institution or within the existing competent authority (social or child protection services, law enforcement, judiciary, health system)

Joint EU and CoE Barnahus TSI project experiences

In Slovenia, the Barnahus operates as an independent public institute while in Finland it functions around five university hospital units. In Spain, the Barnahus units operate regionally under the authority of autonomous regions. In Ireland, each of the three regional Barnahus units functions independently under the management of TUSLA.

ROLLOUT STRATEGY

- Decide on the number of Barnahus units depending on national and regional needs bearing in mind adequate distribution of Barnahus units and regional competencies and disparities and the need to ensure national coverage: 1 Barnahus unit or several regional units
- Envisage a phased or a simultaneous launch: start with a pilot Barnahus unit and expand based on lessons learned or launch all envisaged units (if there are several) in one go
- Explore the number of territories interested in implementing the Barnahus model and provide specific tailored assistance through a regional roadmap

Joint EU and CoE Barnahus TSI project experiences

In Slovenia there is one Barnahus unit in Ljubljana with the intention of developing satellites in other parts of the country. In Finland there are 5 university hospital units known as Barnahus units with 2 additional satellites. Spain houses 14 Barnahus units in Catalonia and in Ireland there are 3: Barnahus West, East and North.

FACILITY AND INFRASTRUCTURE PLANNING

- Setting-up child-friendly Barnahus premises by:
 - Acquisition or designation of Barnahus premises based on accessibility, regional needs, and proximity to public transport; Barnahus premises should balance ease of access with need for discretion
 - Ensuring that the interior design of Barnahus premises is age-appropriate and child-friendly
 - 2-door set up: one entrance for the child and the other for the defendant to ensure that possible contact between the child and the defendant or any other external person with a child victim is avoided at all times
 - Procurement of necessary audio-video and other technical equipment to carry out forensic interviews, medical examinations and management of official documentation
 - Envisaging a 4-room approach: division of Barnahus premises into a forensic interview room, a medical examination and treatment room, a therapeutic and mental health room, and a child protection and case management room

Joint EU and CoE Barnahus TSI project experiences

All five countries that benefited from TSI projects implemented by the SG REFORM and the CoE ensured that Barnahus premises are equipped with furniture adapted to children and child-sensitive materials, and that they are designed to prevent contact with the defendant. In the Irish Barnahus West there are also well-equipped rooms for medical examination and treatment.

BARNAHUS TEAM STRUCTURE AND STAFFING

- Develop a staffing plan by:
 - Envisaging necessary budget allocation
 - Prescribing recruitment criteria and vetting procedures
 - Building on existing professionals' expertise
 - Envisaging permanent (core) and ad hoc staff members
 - Ensuring supervision and support to Barnahus staff members
 - Appointing a Barnahus manager
 - Designating a Barnahus support person to each child victim/witness



Joint EU and CoE Barnahus TSI project experiences

Ireland envisaged safe-recruitment procedures including interview guidance, vetting and induction with checklists. All Barnahus units that were implemented or strengthened through TSI projects implemented by the SG REFORM and the CoE envisage appointing a Barnahus manager and one person to support the child. In Croatia, the implementation of the Barnahus model will build on existing experiences from court appointed expert assistants already acting as child interviewers.

SERVICE DELIVERY PLANNING AND BARNAHUS BENEFICIARIES

- Primary beneficiaries: child victims/witnesses of sexual violence or broader scope including child victims/witnesses of other types of violence, or criminal and misdemeanour offences
- Secondary beneficiaries: non-offending parents/caregivers and siblings
- Decision on type and scope of services to be delivered in the Barnahus: forensic interview, medical examination and treatment, therapeutic and mental health treatment, child protection and case management



Joint EU and CoE Barnahus TSI project experiences

Slovenia, Finland, Spain and Ireland envisaged starting with provision of services to child victims/witnesses of sexual abuse solely to prevent overflowing the system and then tailored the expansion to other child victims/beneficiaries depending on capacities and national needs.

MDIA COLLABORATION

- Envisage protocols with
 - Identified stakeholders and the scope of their competencies and responsibilities
 - Manner of co-operation and case management
 - Data protection governance regarding procurement, exchange, and storage of data
 - Guarantees ensuring access to relevant data between agencies
 - MDIA case review procedures



Joint EU and CoE Barnahus TSI project experiences

Spain and Ireland prepared an Inter-Agency Protocol regulating the co-operation modalities between agencies, while Slovenia regulated the MDIA collaboration through the dedicated Barnahus law and a subsequent by-law. Ireland envisaged the data protection code of conduct. In Finland, the National Institute for Health and Welfare and partners developed the LASTA model to ensure co-ordinated information gathering and exchange through a dedicated LASTA template based on empirical research and indicators of sexual violence.

REFERRAL PATHWAY

- Envisage mandatory referral procedures and training to ensure that the child is interviewed in the Barnahus and receives other necessary services



Joint EU and CoE Barnahus TSI project experiences

Finland prepared Guidelines with recommendations for the police on how to effectively investigate crimes against children and how to trigger the Barnahus mechanism, and designed the LASTA screening model to ensure that children are referred to Barnahus units when appropriate. The Slovenian dedicated Barnahus Act envisages referral to the Barnahus on the basis of a court order following an expert opinion of Barnahus professionals.

FORENSIC INTERVIEW

- Envisage use of forensic interview protocols that are evidence-based, child-centred and trauma-informed
- Ensure that forensic interviews are carried out at the Barnahus premises and audio-visually recorded to avoid repeated interviewing
- Enable forensic interviews to be carried out by one trained staff member and observed by other relevant stakeholders from another room, who may intervene via the interviewer if relevant
- Enable child victims to choose the gender of the child interviewer, where feasible

“Since I’m a girl, and after experiencing something like this, it’s most comfortable to talk to a woman; I think it would be great if most of the professionals were women; if a boy experienced abuse, it might be easier for him to talk to a man...it’s great that every child can choose whether it’s easier to talk to a man or a woman”

– Reflections of a child victim of sexual abuse from Croatia on how the Barnahus model should function¹³



Joint EU and CoE Barnahus TSI project experiences

Finland, Spain, Ireland and Slovenia envisaged the conduct of audio-video recorded forensic interviews in the Barnahus by a specially trained staff member. In this respect, they set up two rooms for interviewing purposes, one for the child and the forensic interviewer and the other for approved observers (e.g. judge, defence, other professionals, depending on the country). Slovenia put in place a dedicated protocol for forensic interviewing of children in Barnahus, rooted in, inter alia, the NICHD or similar protocols.

MEDICAL EVALUATION AND TREATMENT

- Ensure necessary medical equipment is tailored to needs of both female and male child victims
- Enable child victims to choose the gender of the medical examiner, where feasible
- Enable carrying out medical evaluations and treatments routinely in the Barnahus, unless hospital settings are warranted in specific situations



Joint EU and CoE Barnahus TSI project experiences

In Finland, nesting the Barnahus in university hospital units enables quick and available medical treatment and examination. In Catalonia, Spain, the medical team comes to the Barnahus units on a need’s basis. In Ireland, Barnahus West, two rooms are allocated for the medical team.

¹³ Extracted from the „Analysis of the legislative, policy and institutional framework regarding protection of children and procedures for cases on violence against children, including sexual violence in Croatia“, p. 30, prepared under the joint EU and CoE TSI project „Implementing the Barnahus Model in Croatia“ and published by the CoE.

MENTAL HEALTH EVALUATION AND TREATMENT

- Ensure that mental health evaluation and treatment is provided in the Barnahus by specialised staff
- Ensure clear organisational procedures for crisis intervention
- Provide for well-trained professionals to ensure treatments are tailored to child's needs (e.g. children with disabilities, gender perspectives, minorities, migrant children)

Joint EU and CoE Barnahus TSI project experiences

Slovenia adopted a by-law on training for Barnahus staff with procedures and criteria for the certification of medical professionals and to provide sensitisation training of health care professionals in this area. Ireland carried out a Mapping of therapeutic services for children affected by sexual abuse with recommendations on the therapy scope, on how to include available professionals and organisation in provision of therapy services and on trainings for therapists.

CAPACITY BUILDING AND TRAINING

- Implement a national training strategy covering:
 - Forensic interviewing of children
 - Trauma-informed approaches
 - MDIA casework
 - Gender- and age-sensitive communication
- Tailor the national training strategy to identified training challenges and gaps and root it in relevant international standards
- Establish mechanisms for ongoing supervision and peer exchange at national and international level
- Design a ToT programme
- Make use of available CoE HELP trainings

Joint EU and CoE Barnahus TSI project experiences

Spain developed the national training strategy with the support of the Judicial Council. Finland prepared a ToT module on forensic interviewing. Slovenia produced a by-law on training for Barnahus staff with procedures and criteria for the certification of medical professionals and sensitisation of health care professionals.

CHILD PARTICIPATION

- Ensure consultations with children to gather their perspectives on the Barnahus model
- Empower survivors of childhood sexual violence to share their experiences and reframe trauma with healing and resilience

Joint EU and CoE Barnahus TSI project experiences

Croatia carried out a survey among the Network of Young Advisors within the office of the Ombudsperson for Children and among child survivors to assess their understanding of child sexual abuse and experiences from the child protection system and to gather their recommendations for the Barnahus model. Ireland and Slovenia designated a child consultation body to participate in the establishment and development of their Barnahus units.

DATA, MONITORING AND EVALUATION

- Set up secure systems for data collection and information sharing
- Develop indicators to monitor access, timeliness, satisfaction, and service performance
- Include child participation in evaluation mechanisms through feedback tools
- Conduct an independent external evaluation



Joint EU and CoE Barnahus TSI project experiences

Slovenia carried out an initial evaluation of the pilot phase while Ireland envisaged an external evaluation of one of its Barnahus units by an international Barnahus expert. In Spain, an external evaluation is envisaged by a dedicated civil society organisation (Save the Children Spain) and a university. Ireland envisages periodical evaluations of Barnahus units according to key performance indicators.

COMMUNICATION AND AWARENESS

- Launch a national awareness campaign to increase visibility and strengthen trust in the Barnahus
- Develop a communication strategy for both internal co-ordination and external stakeholder engagement
- Conduct a national survey on public perceptions of violence against children, including sexual violence, and available services



Joint EU and CoE Barnahus TSI project experiences

Slovenia, Finland, and Croatia carried out national surveys on public perceptions of sexual violence against children. Finland and Ireland prepared a Communication Strategy and an Action Plan on how to effectively engage with the Barnahus stakeholder base and the wider audience. Ireland carried out consultations with children regarding the Barnahus logo during which they really appreciated that the small Barnahus jigsaw logo at the top of the page moves, comes apart and back together like a jigsaw. They felt it showed how Barnahus brings the elements together. Ireland prepared a video about Barnahus Galway (long and short versions) and Finland a video to raise awareness about Barnahus services in Finland (long and short versions).

CHANGE MANAGEMENT AND SCALING UP

- Prepare a change management plan addressing institutional shifts, roles, and cultural transformation
- Document good practices and challenges from early implementation to guide evidence-based expansion



Joint EU and CoE Barnahus TSI project experiences

Croatia prepared a change management plan to support sustainable rollout of the Barnahus, and to coordinate spatial, procedural, and organisational dimensions of the Barnahus.

► Envisaged **methods and tools** for the preparation of the operative plan:

- stakeholder co-ordination meetings and working groups
- legislative drafting teams and legal consultations
- architectural design guidelines for Barnahus premises
- training manuals and e-learning modules
- case management and child safeguarding protocols
- budget templates and cost-structure analysis
- evaluation and feedback forms for children, parents, and professionals
- visual communication materials (infographics, awareness videos)
- digital data tracking systems and dashboards.

“Getting the Barnahus child abuse investigation and recovery services right so that we don’t have secondary trauma means we need to keep the children and their families at the centre of our planning. We are hearing from children, and we need to build on this to give children more opportunities to contribute and tell us what they need.”

– Gerard Brophy, Chief Social Worker at TUSLA

► Suggested **deliverables and outcomes** of the operative plan:

- roadmap with timeline and milestones
- legal instruments (Memorandum of Understanding, Declaration of Intent, legislative amendments)
- national training strategy and training curriculum
- operational Barnahus facility or pilot unit
- service protocols for forensic interviews, medical, psychosocial, and child protection interventions
- national co-ordination mechanism (designated body or authority)
- monitoring and evaluation plan
- communication and awareness strategy
- child participation toolkit for ongoing feedback and engagement

► **Experiences from TSI projects implemented by the SG REFORM and the CoE regarding operative plans:** **Slovenia** and **Croatia** prepared dedicated roadmaps entailing key operative elements for a Barnahus rollout while **Spain** drafted two roadmaps to include both the national and regional level bearing in mind the high level of de-centralisation. **Ireland** prepared a Strategy for scaling up the Barnahus model with a pertaining action plan.

“The Barnahus model in Ireland has brought about a change in mindset for the professionals working with child victims of sexual abuse. Professionals have experienced the value of interagency information sharing and coordinated approach at the earliest point. The outcome being that children and their families experience a seamless, informed and coordinated service which reduces trauma and promotes recovery. Recovery doesn’t just start when therapy starts, its starts at the front door of Barnahus.” – Niamh O’Loughlin, Interim Barnahus West Manager, Barnahus (TUSLA)”

– Niamh O’Loughlin, Interim Barnahus West Manager, Barnahus (TUSLA)

SEE ANNEX 4: ROADMAP TEMPLATE

IMPLEMENTATION DASHBOARD: TIMELINE FOR ESTABLISHING A WELL-FUNCTIONING BARNAHUS MODEL

► The implementation dashboard envisages a timeline with key phases, and deliverables for implementing the Barnahus model. It is based on lessons learned from TSI projects implemented by the SG REFORM and the CoE. According to the experiences gathered, the average time for implementing the Barnahus model from the

outreach to the rollout and provision of services amounts to 6-7 years. This time span depends on the readiness of the national system to launch the Barnahus model, the political endorsement and efficiency of national and regional agencies to adapt their respective frameworks to Barnahus requirements.

PHASE	DELIVERABLES	IMPLEMENTATION PERIOD
Outreach and Endorsement Building	Joint Strategic Vision / Commitment	1 year
Inception	Inception Report	6 months
Framework Review	Legal, Policy, Institutional and Training Needs Analysis with Recommendations	6-12 months
Decisions on Key Operative Aspects and Planning	Barnahus Operative Plan / Roadmap	6-12 months
Infrastructure	Operational Unit(s)	1 year
Training	Initial Training for Professionals and ToT	6 months
Rollout	Barnahus Launch and Service Delivery	1 and a half year
Initial Evaluation	Functioning Barnahus with Recommendations for Further Development	6 months



LIST OF ANNEXES

ANNEX 1: ARE WE ALLIGNED WITH KEY PILLARS?

GENERAL		
REQUIREMENT	STATUS	NOTES
Child's best interests as a primary consideration		
Legally compliant framework		
Child participation		
Prompt access to justice		
MDIA co-operation		
Service equality		
Trauma-informed services		
OPERATIONAL		
REQUIREMENT	STATUS	NOTES
"Under one roof" approach		
Child-friendly interior and exterior environment		
Forensic interviews		
4-rooms principle		
Clear roles and responsibilities for all actors		
MDIA planning and case management		
Effective referral systems		
Medical examination/treatment assurance		
Mental health examination/treatment assurance		
Emergency response and crisis intervention readiness		
Data security, protection and governance		
QUALITY SPECIFIC		
REQUIREMENT	STATUS	NOTES
Sustainable funding and political commitment		
Adaptability to national and regional contexts		
Integrated in existing national child protection systems		
Consistency across regions		
Child feedback and participation in service improvement		
Evidence-based interventions		
Initial, continuous, specialised, MDIA training of professionals		
Regular, independent monitoring and evaluation		
Professional supervision and support mechanisms		
Quality assurance embedded in institutional culture		

ANNEX 2: STAKEHOLDER MAPPING MATRIX

The Stakeholder mapping matrix is of an illustrative nature and serves as a general reference tool for identifying key actors in the design and implementation of the Barnahus model. It outlines potential stakeholder groups, while enabling national authorities to describe their potential role in the Barnahus model implementation. It should be adapted and tailored to reflect the specific institutional arrangements, practices, and contexts of each country.

STAKEHOLDER GROUP	LEVEL OF INFLUENCE*	LEVEL OF INTEREST**	POTENTIAL ROLE IN BARNAHUS IMPLEMENTATION***
Justice Authorities			
Social Policy/ Family Affairs			
Child Protection Services			
Health Sector			
Education Sector			
Law Enforcement			
Prosecutors and Judiciary			
Civil Society			
Children and Young People			
Parents and Caregivers			
National Human Rights Organizations			
Local Authorities			
Media and Public			
International Organizations			
Academic and Research Institutions			

*Level of influence: high, medium or low, **Level of interest: high, medium or low, ***To be filled out by national authorities

ANNEX 3: SWOT ANALYSIS OF NATIONAL FRAMEWORK AND NEEDS

The SWOT analysis of national frameworks and needs should be adapted and, where necessary, amended to reflect the specific country context. Additional space has been provided under each section of the table to allow countries to insert their own national particularities.

STRENGTHS	WEAKNESSES
Strong political will and stakeholder endorsement.	Fragmentation in existing legislation and institutional mandates.
Availability of international standards (Barnahus Quality Standards) as guiding references.	Limited or outdated data on child victims and service access, especially in rural areas.
Presence of experienced professionals and multisectoral actors with relevant knowledge.	Gaps in training, preparedness, and understanding of integrated service models.
Potential for leveraging previous comparative experiences and networks.	Lack of structured mechanisms for child participation in system reviews.

OPPORTUNITIES	THREATS
Peer learning from EU and CoE Member States with functioning Barnahus units.	Resistance to reform due to entrenched siloed practices.
Engaging children and frontline professionals in shaping the reform through participatory tools.	Budgetary constraints and competing political priorities.
Aligning national frameworks with international strategic priorities (e.g. Lanzarote Convention, EU Child Rights Strategy).	Risk of superficial compliance without structural transformation if assessments are rushed.
Identifying and bridging regional disparities in access to justice and support services.	Limited MDIA cooperation at the local/regional level may hinder effective implementation.

ANNEX 4: ROADMAP TEMPLATE

This roadmap template should be adapted to national legal frameworks, decentralisation levels, and available resources. Incorporate regular stakeholder consultations to ensure legitimacy and child-centeredness throughout implementation.

1. STRATEGIC COMMITMENT AND LEGAL FOUNDATIONS

Timeline:

Responsible Actors:

Activities:

- Adopt a formal document to signal political will and define MDIA cooperation.
- Decide on the legal framework: centralised law or integration into existing frameworks.
- Identify and address legal/policy fragmentation.

2. BUDGET AND FINANCING STRATEGY

Timeline:

Responsible Actors:

Activities:

- Conduct a cost structure analysis (operational, staffing, infrastructure).
- Secure short and long-term funding, including national budget lines and grants.
- Explore cost-efficiency strategies: repurpose existing venues, shared services.

3. INSTITUTIONAL INTEGRATION AND STATUS OF BARNAHUS

Timeline:

Responsible Actors:

Activities:

- Define Barnahus as an independent institute or nested within a competent authority.
- Align with national governance structures.

4. ROLLOUT STRATEGY AND GEOGRAPHICAL PLANNING

Timeline:

Responsible Actors:

Activities:

- Decide on the number and locations of units (regional, central).
- Determine launch strategy: phased (pilot model) or simultaneous (multi-site).
- Use regional needs analysis for distribution.

5. INFRASTRUCTURE AND PREMISES SETUP

Timeline:

Responsible Actors:

Activities:

- Procure or repurpose venues ensuring accessibility and proximity.
- Ensure child-friendly design: age-appropriate, safe, warm, separate entry points.
- Install necessary technical equipment and adopt a 4-room layout.

6. HUMAN RESOURCES AND STAFFING

Timeline:

Responsible Actors:

Activities:

- Develop a staffing plan with safe recruitment and vetting procedures.
- Define roles: Barnahus manager, child support person, permanent/ad hoc staff.
- Provide staff supervision and resilience support.

7. SERVICE SCOPE AND BENEFICIARIES

Timeline:

Responsible Actors:

Activities:

- Define primary and secondary beneficiaries.
- Establish scope of services: forensic interview, medical exam, therapy, casework.
- Apply phased service expansion (starting with CSA cases).

8. MDIA PROTOCOLS AND COOPERATION

Timeline:

Responsible Actors:

Activities:

- Draft interagency protocols (roles, data sharing, case management).
- Establish data protection mechanisms and shared review procedures.

9. REFERRAL PATHWAYS AND ACCESS

Timeline:

Responsible Actors:

Activities:

- Define mandatory referral mechanisms to ensure cases reach Barnahus.
- Standardise referral triggers and documentation.

10. FORENSIC INTERVIEW SYSTEM SETUP

Timeline:

Responsible Actors:

Activities:

- Develop interview protocols.
- Ensure audio-visual recording and dedicated observation room.

11. MEDICAL AND MENTAL HEALTH SERVICES

Timeline:

Responsible Actors:

Activities:

- Equip medical rooms for gender-sensitive care.
- Define on-site or mobile medical service models.
- Establish crisis intervention and routine mental health treatment.

12. CAPACITY BUILDING AND TRAINING STRATEGY

Timeline:

Responsible Actors:

Activities:

- Implement national training strategy.
- Use ToT modules, peer exchange, and CoE HELP platform.
- Certify professionals and adopt supervision structures.

13. CHILD PARTICIPATION MECHANISMS

Timeline:

Responsible Actors:

Activities:

- Consult children in Barnahus design and service delivery.
- Establish child advisory groups and integrate feedback mechanisms.

14. MONITORING, EVALUATION, AND DATA SYSTEMS

Timeline:

Responsible Actors:

Activities:

- Develop key performance indicators and feedback tools (child satisfaction, access, efficiency).
- Conduct independent evaluations (pilot and full implementation).
- Enable secure data management and information systems.

15. AWARENESS AND COMMUNICATION STRATEGY

Timeline:

Responsible Actors:

Activities:

- Launch national awareness campaigns.
- Develop internal and external communication strategies.
- Conduct public surveys to measure perception and trust.

16. CHANGE MANAGEMENT AND SCALING-UP PLAN

Timeline:

Responsible Actors:

Activities:

- Draft a change management plan to address system transformation.
- Document and integrate good practices and challenges.
- Guide scalable through evidence and lessons learned.