



Barnahus Estonia

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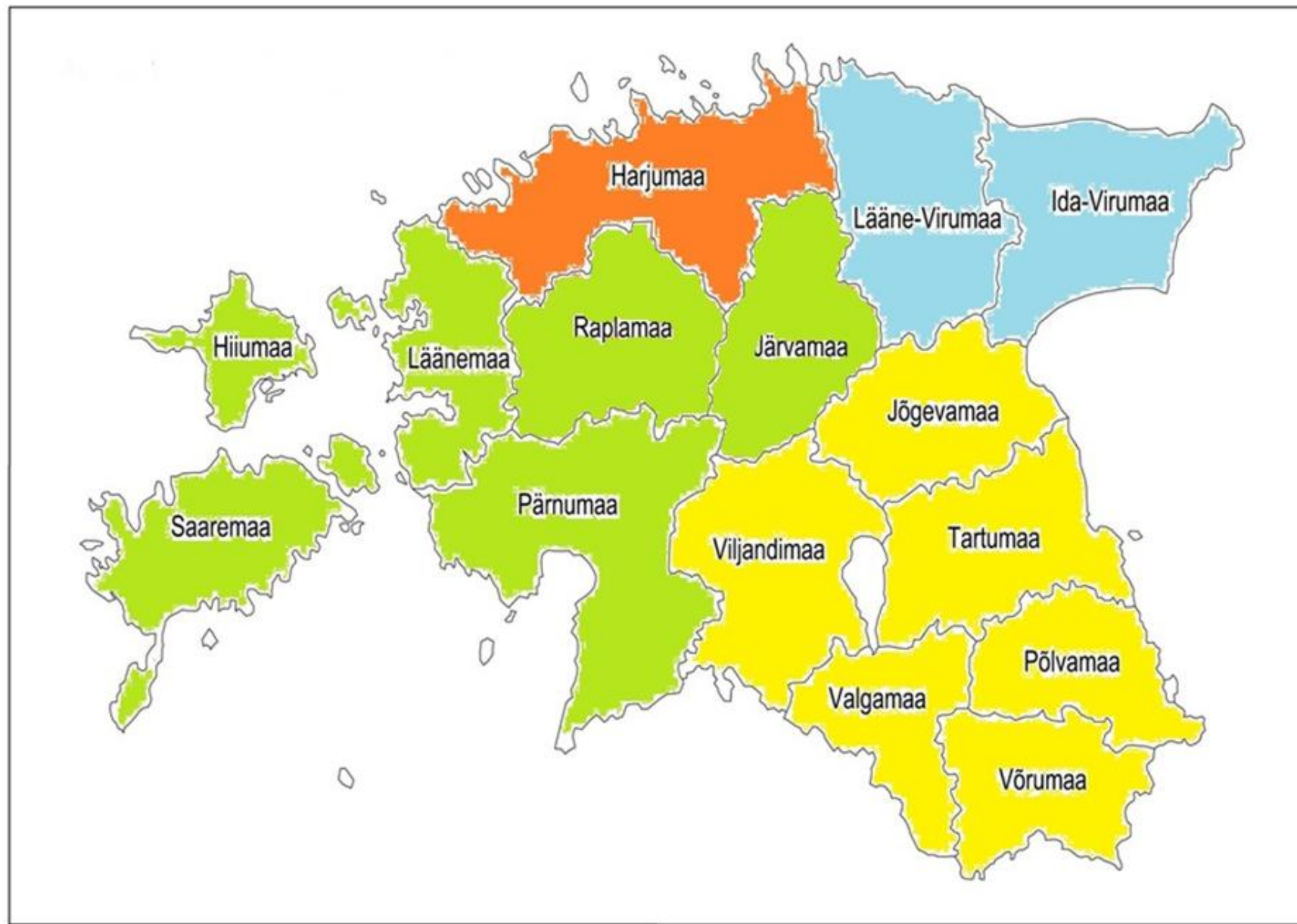


Estonia

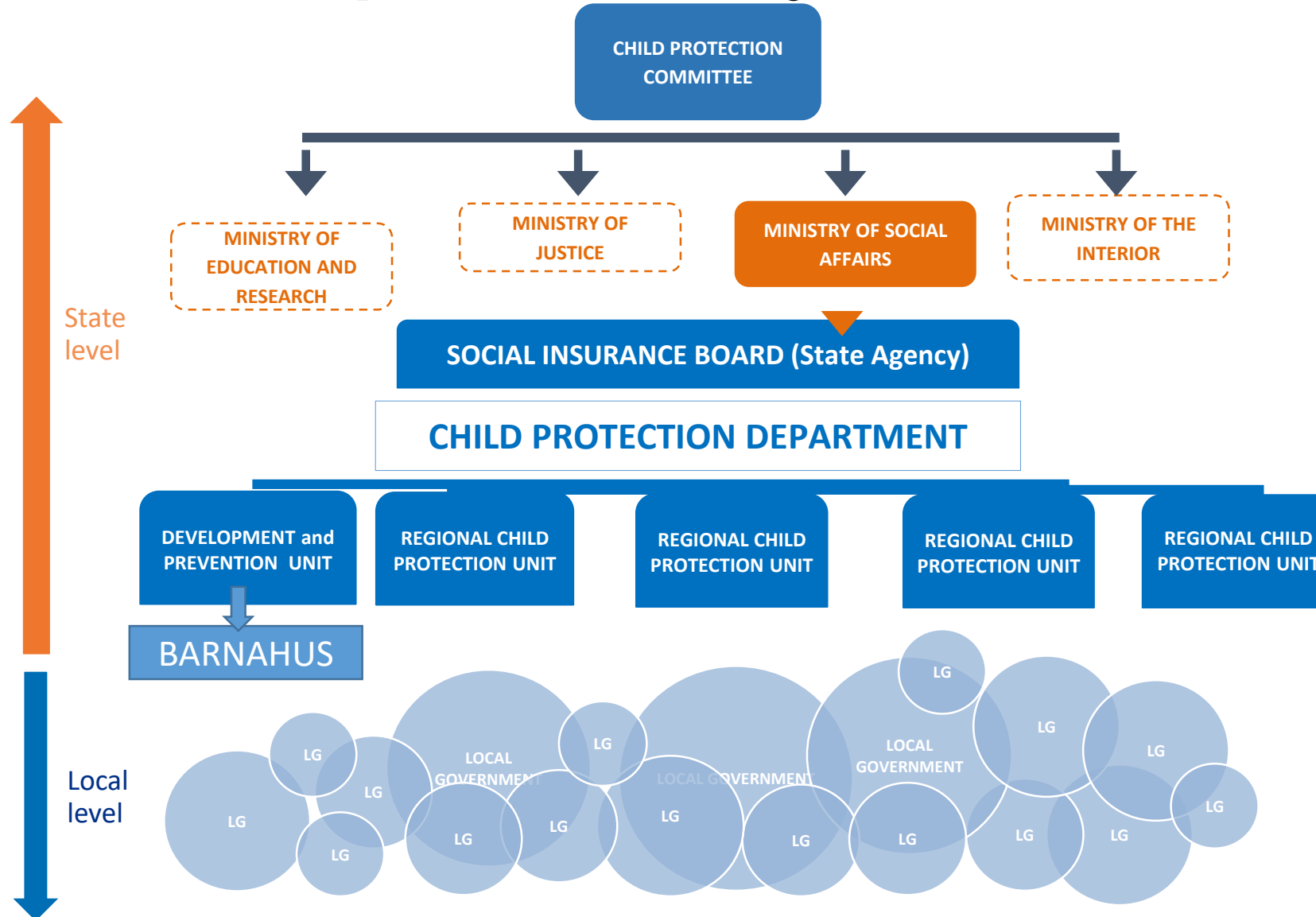
- **1 323 824** people living in Estonia (2019)
- **278 650** children living in Estonia
- About **598 059** people live in northern part of Estonia

Ethnic groups (2019)

- 68.5% Estonians
- 24.8% Russians
- 1.8% Ukrainians



Estonian child protection system



Barnahus Estonia is a service for sexually abused children,
which puts the rights of the child first
and bring together professionals,
whose common goal is to restore the well-being and safety of the child.

Convention on the rights of the child (30y)

Article 3.1

- “In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interest of the child shall be a primary consideration”
- The goal is to identify child-friendly strategies and practices to ensure: The „best interests of the child“ without compromising the human right principle: to have fair trial.

Child Protection Act (Estonia, new 2016)

§ 5. Principles of ensuring rights and well-being of children

Upon ensuring the rights and well-being of children, the following principles provided for in the convention shall be based on:

(3) in all action concerning children, the best interests of the child shall be a primary consideration.

§ 8. Cooperation

(1) In order to ensure the child's rights and well-being, state and local government agencies and the officials thereof, legal persons in public and private law shall cooperate with each other upon the planning, financing and application of all measures targeted to children by involving the children, parents, persons raising children, interest groups and the public therein.

§ 21. Setting best interests of child as primary consideration

(1) choosing between different options upon planning a decision (hereinafter deciding together), the best interests of the child shall be ascertained and they shall be based on as the primary consideration upon the making of decisions.

Child welfare, Child protector



Welfare

Education

Health

Justice

A change of perspective

- Change of perspective from «my or even our goal» to what is in the child's best interest.
- How do you define «your job, not my job»?
- Need for clear legislation, but legislation is not enough
 - Values of people
 - Varying practices between offices
 - The rules are interpreted differently at the different offices
 - Bad experiences also influence willingness to adhere to the rules
 - How do we talk about our cooperating partners?
 - Us and them - we are good, they are not

Multidisciplinary work

- Can we ensure the child's best interest without multidisciplinary work?
- Bring perspectives together, discussing
- When so much information is gathered in one place we owe it to the child, to society, to ourselves to put this information to good use. It is in everyone's best interest.
- How we treat our children will determine our future
- In the multi- and interdisciplinary work the connection between adverse childhood experience and childhood trauma can be discussed, to find the right help for children and families.
- «Society failed me, why should I care about society»...?
- Children need adults to cooperate!

Wich diciplines?

- Barnahus stuff – coordinator of cace
- Police
- Childrens welfare/ social services (municipality, state level)
- Prosecutor
- Health – doctor/forensic doctor
- Education
- Family
- Other specialist if needed

Barnahus professionals

- Give guidance and advice to the police in advance, during and after the forensic interview
- Meet with children (and their guardians) and ensure they feel safe when they come to the Children's House
- Participate in the meeting and discussion before and in breaks, as well as be present during forensic interviews
- Assess treatment requirements, either short term at the Children's House or long term in Child Guidance Clinics
- Takes care of the children and adolescents in breaks during the interview
- Provides guidance and advice to the child's caretakers
- The staff is recruited from both child welfare, health and police and they are well educated and experienced

Barnahus in Estonia



Counselling
and support for
carer(s) and
children

Coordination
and
consultation

Child listening,
Preliminary
Interviews,
Police interviews

Medical/forensic
examination and
evaluation

Evaluation of child

Therapy and/or
transfer to local
support services

Competence center

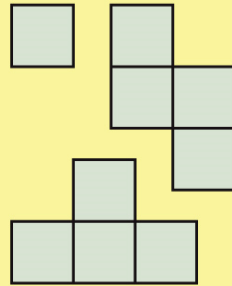
Eduvation,
trainings,
development and
guidance for
professional staff

LASTEMAJA

MÄNGU- JA TERAAPIATUBA

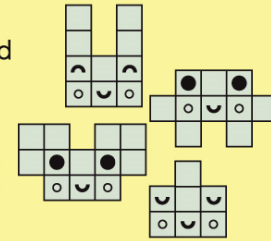
Laps kohaneb lastemajaga ning talle selgitatakse, mis toimuma hakkab.

Siin toimuvad kohtumised psühholoogiga.



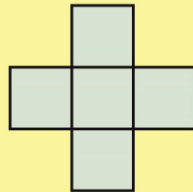
KOOSOLEKUTUBA

Erinevad juhtumiga seotud spetsialistid (sh politseiuurija, lastekaitse-spetsialist, kohtuarst, psühholoog jne) kohtuvad ning lepivad kokku edasised juhised.



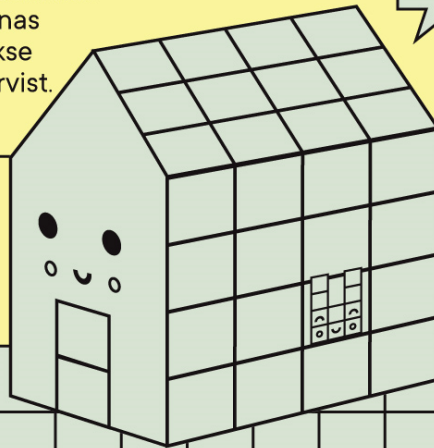
TERVISETUBA

Lapsesõbralikus keskkonnas hinnatakse lapse tervist.



VESTLUS- TUBA

Vestluse viib lapsega läbi lastemaja töötaja või politseiuurija.



Multidisciplinary work



The process starts before the interview

Background information from the police report and/or from CPS.



Consultating meeting – participants:

Police, children's welfare, forensic interviewer, lawyers and counselor/psychologist from the Barnahus



Cooperation/planning with the child's trusted person (care giver)

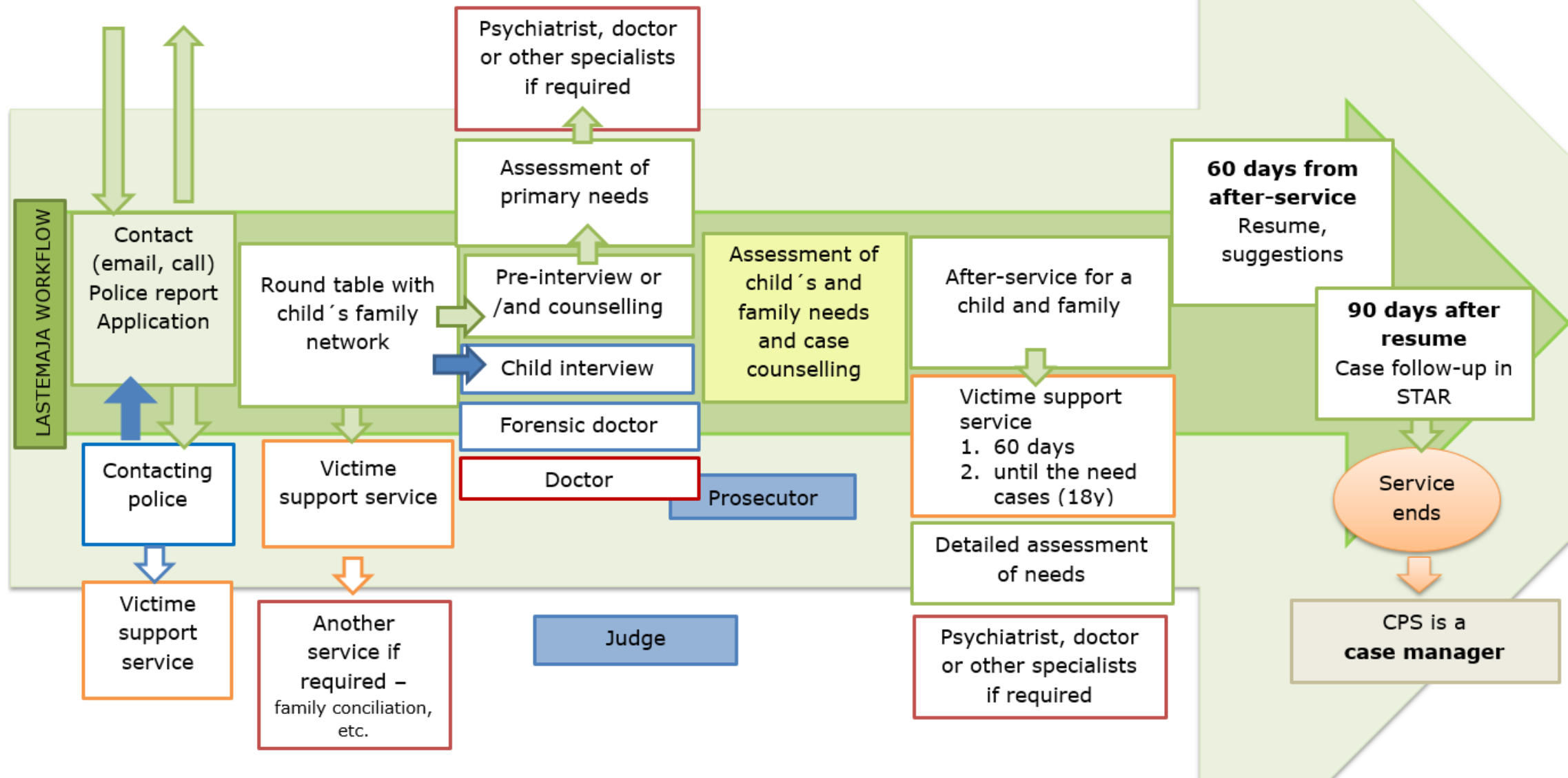


The forensic interview – day; Observation and information.



Follow-up and consultating meeting 2, 3, 4...

CPS (Child Protection Specialist) is a **case manager**



What are the goals with the follow-up?

- Mitigate negative consequences of forensic interview
- Help the child/ family answer any unanswered questions
- Assess the current level of symptoms and functioning
- Give the child a voice
- Assess need for care and level of care
- Prevent future negative effects of adverse experiences
- Prevent future negative experiences

Medical examination

By Standard

- The medical examinations are mostly done on the same day of the forensic interview, taking into account the best interests of the child and ensuring that there is proper input to child protection and risk assessment.
- In urgent cases, the medical examination is carried out on the same day when Barnahus receives the report about the case.

Standard 7: Medical examination

- Medical examinations and treatment are routinely carried out on the premises of the medical and/or forensic doctor (unless urgent or complicated cases require special interventions or equipment at a hospital setting).
- Medical assessments are, as far as possible, carried out at the same day as the forensic interview.
- The medical examination is carried out by specialized staff who are trained on recognizing indicators of physical, sexual, and emotional abuse as well as child neglect (teeth).

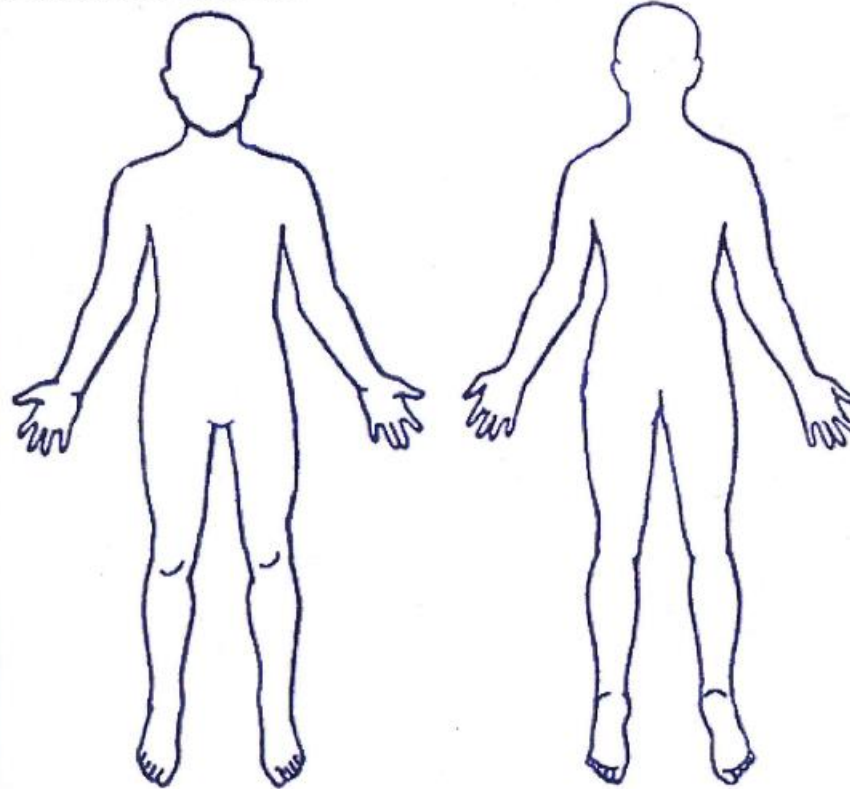
Standard 7: Medical examination

- Case review and planning: Medical staff is present in case review and planning meetings as appropriate.
- Information and child participation: Children and family/caregivers receive adequate information regarding available and necessary treatments and can influence the timing, location and set up of interventions

Medical examinations

- Before or after interview?
- Room is made with the specialists who use it
- A child friendly examination room, people!
- Done by Forensic doctor + doctor (experienced gynecologists)
- At the request of the Police, the CPS, the Child or the Parents
- The use of “video-colposcope”
- Taking examples (who analyzes? – forensic or medical?)
- Forensic/Medical examinations are kept to a minimum
- Acute forensic/medical examinations performed at hospital

Tervisekahjustuste paiknemine



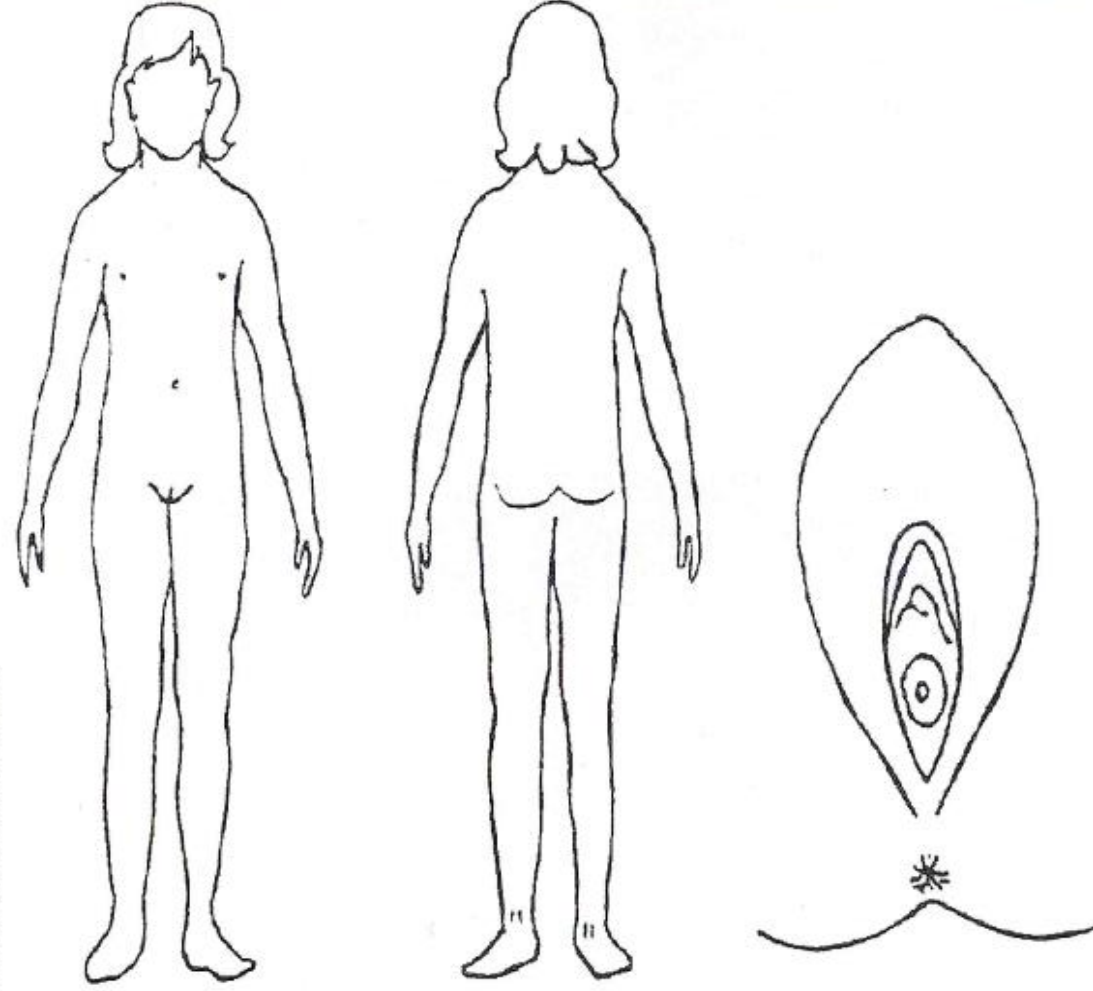
Kohtuarst-eksperti märkused:

Läbivaadatava märkused:

Protokolliga tutvunud:

(läbivaadatava allkiri)

Tervisekahjustuste paiknemine



Kohtuarst-eksperti märkused:

Läbivaadatava märkused:







Barnahus Estonia video

- https://www.youtube.com/watch?v=e9brW_a0ZeE&t=46s

Rehabilitation / After-care / Therapy

In Barnahus

- The child and the non-offending parent(s) receive counselling immediately after the investigative interview
- Victim therapy can start soon after
- The videotaped child's disclosure or report is used for initial assessment and treatment plan
- The therapists are required to submit reports and sometimes testify in court proceedings

Where therapy is delivered

- The majority of therapy is done outside of Barnahus, but it is also offered at the Barnahus
- School psychologist, child- and family centres, children's social services, counselors, specialized health care, primary physician and more
- Exchange of information: Important to gather the helpers but maintain patient rights (crypted)
- The child/ parent consent to exchange of information, dilemmas...

Assessment and evaluating child's situation and well-being

- The Barnahus can be in a good position to assess the child's need for help!
- The child's own descriptions of his or her situation in the listening/forensic interview can be an important start for further assessment
- The Barnahus can contribute to referring, for example, by assisting parents or child welfare with survey and referral to other services
- The child's and families involvement and motivation are important in order to initiate therapy, and where this should happen

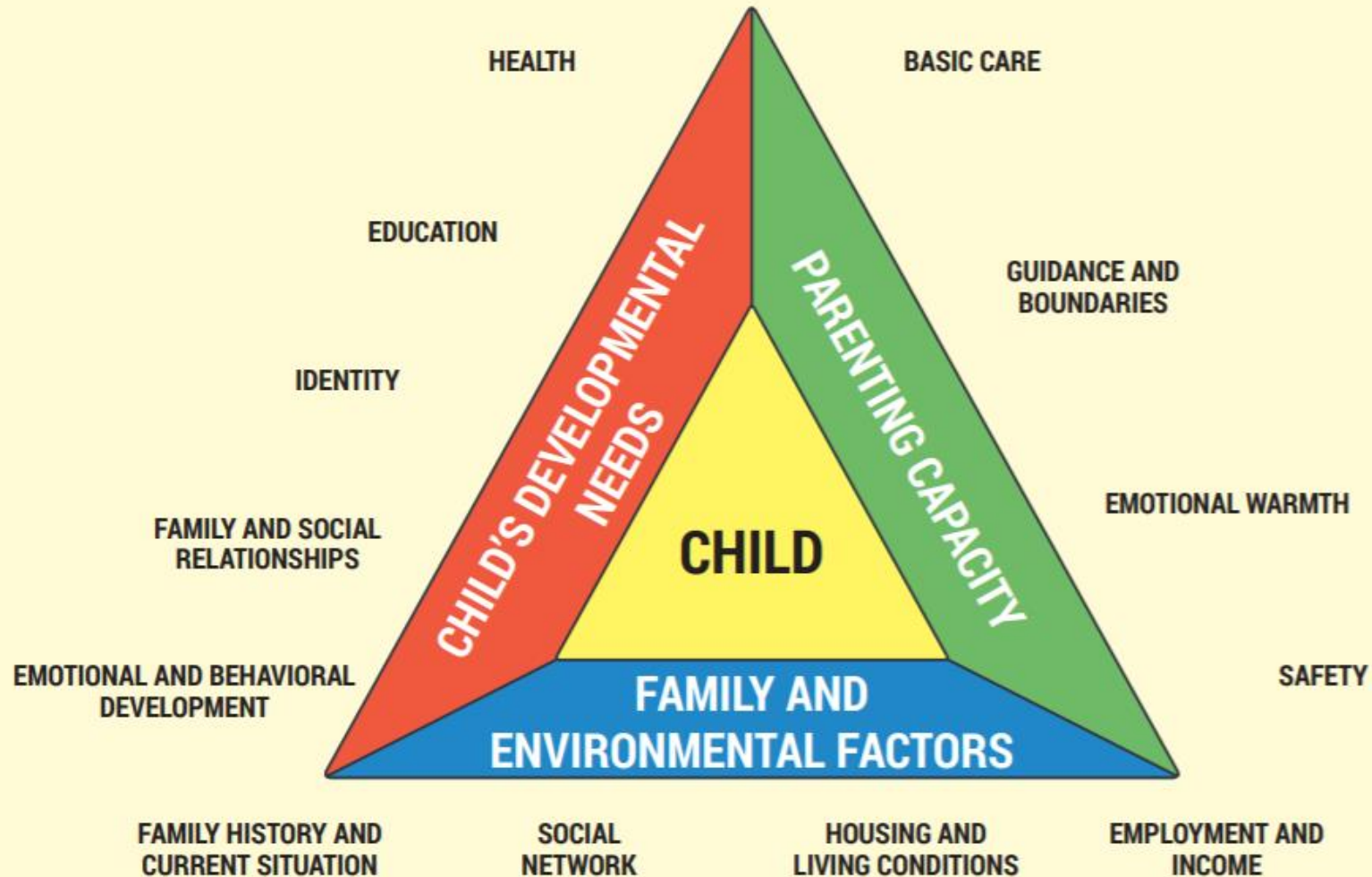
Assessment framework for children and families in need

- BBIC (Children's needs in focus, Barns behov i centrum) is a comprehensive development work based on an English system that has been run as a project by the National Board of Health and Welfare.
- The BBIC is a framework for assessment, planning and reviewing in child welfare. It provides a structure for systematically collecting information and documenting children's and young people's need of services.
- Child Protection Department [adjusted BBIC framework to the needs of Estonias' child protection officials](#). Available in Estonian since December 2017



REPUBLIC OF ESTONIA
SOCIAL INSURANCE BOARD

CHILD WELFARE TRIANGLE





The approach of child welfare assessment must be child centred – the child must be seen and kept in focus throughout the assessment.

The child welfare triangle has three interrelated domains with several dimensions in each. The interaction or the influence of each dimension must be thoroughly explored and carefully assessed to understand how they affect the situation and the welfare of the child and the family.

CHILD WELFARE ASSESSMENT PROCESS SHOULD INVOLVE THE CHILD AND FAMILY AS WELL AS ALL THE PROFESSIONALS WHO ARE WORKING WITH THEM.

Child's developmental needs

CHILD'S DEVELOPMENTAL NEEDS	Health	The child's physical and mental wellbeing, growth and development. The parents' capability to ensure the child's healthy wellbeing.
	Education	The child's capability to cope in learning environment, possibilities to promote their intellectual development and learning. The parents capability to support the child's educational wellbeing.
	Identity	The child's self-image, self care skills, growing sense of self as a separate and valued person. The parents' capability to support and empower the child's positive self-reliance and individual development.
	Family and social relationships	The child's social relationships with family and other people involved in their life. The parents capability to ensure a supportive environment for the child's development and positive relationships.
	Emotional and behavioral development	The child's emotional development, appropriateness of the child's actions and feelings in different situations and environment. The parents capability to support the child in their emotional and behavioral development.

Parenting capacity

PARENTING CAPACITY	Basic care	The parents' capability of providing the child's basic needs inc. the physical needs of the child, appropriate medical and dental care.
	Guidance and boundaries	The parents' capability to offer guidance and set boundaries, to guide the child appropriately and to support the child's skill development.
	Emotional warmth	The parents' capability to ensure that the child's emotional needs are met and to offer the child stability and security in relationships with significant people in their life.
	Safety	The parents' capacity to ensure a safe environment for the child and to protect the child from harm and danger.

Family and environmental factors

FAMILY AND ENVIRONMENTAL FACTORS	Family history and current situation	The impact of past and present experiences of the family members on the wellbeing and the current situation of the child.
	Social network	The family's social network (inc. relatives, neighbours and community), availability of community resources and the importance attached to them.
	Housing and living conditions	The family's living situation and conditions and their appropriateness to the needs and wellbeing of the child.
	Employment and income	The economic situation of the family, the employment of the adults in the household and its effect on the child's welfare.

THE CHOICE OF PSYCHOTHERAPEUT

The minimum level of basic education shall be a Master's degree in:

- Psychology (in Estonia 5 years of Europsy is required academic psychology study according to an accredited curriculum for which plus 1 year of supervised practice);
- Medicine (6 years academic medical education accredited curriculum followed by residency, preferably in psychiatry);
- (Clinical) Social Work (5 years academic social work study accredited curriculum);
- Mental Health Nursing (3.5 + 1.5 years professional higher education in mental health) accredited in Health Nursing).

Quality of psychological help

- Psychotherapist uses a clinical interview to assess problems besides customized and standardized thematic measuring instruments and other suitable assessment instruments, whereby: shares the results with the client in a developmentally appropriate way.
- Therapy is active, that is to say, change-oriented - it includes both purposefully changing thoughts as behaviors (it's not just problems talking and therapist giving advice).
- The therapist will work with you and other professionals and help you have to support your child.
- Therapy is as planned, ie setting a goal for each session, for which they are working.
- During the therapy session, new ones are learned and practiced with the therapist and the therapist encourages them to practice as well between sessions.
- The therapist encourages the child to talk about what has happened to him or her.
- The therapist is trained in trauma work (you can ask for documents to see) and participates in regular supervision.

Featured psychotherapy schools and methods for trauma work

- Cognitive - behavioral
- EMDR (Eye Movement Desensitization and Reprocessing) (certificates issued by EMDR Europe ; in Estonia, contact: Trauma Therapy and Training Center OÜ)
- Psychodynamic therapy (and its further developments); Phase-based intervention in the treatment of complex PTSH (mentioned above within schools; in addition, integrated therapies such as Schema Therapy;
- Family therapy when applied trauma - centered (Estonian Family Therapy Association)
- Affection-based interventions and parenting skills programs
- Play and creative therapies when applied trauma-centered or in parallel with trauma-centered psychotherapy
- Other psychological support methods such as psychological counseling, existential therapy, gestalt therapy , psychodrama as a method to support trauma-centered psychotherapy ; or if first-line interventions are unsuitable for the client.

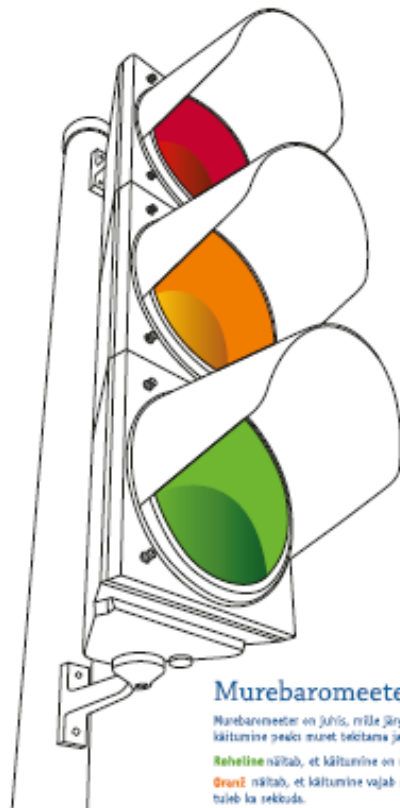
Prevention

MINU KEHA JA TURVALISUS

TEADMISED, OSKUSED JA HOIAKUD

KEHAOSKUSED	KEHAOSKUSED	KEHAOSKUSED
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veebiliitne.fi/lapsi/aseksuaalsus



Murebaromeeter

Murebaromeeter on juhis, mille järgi otsustada, kas lapse või teismelise käitumine peaks muutetama ja millal sekkuda.

Reheline näitab, et käitumine on normaalne ja eakohane.

Oranž näitab, et käitumine vajab suuremat tähelepanu ja võib-olla tuleb ka sekkuda.



JanusCentret

Lasteabi.ee
116 111

Lisateave aadressil www.lasteabi.ee või telefonil 116 111 (24h/7)

Lasteabitelefoni 116111 teenuse eesmärgiks on võimaldada kõigil teada ahtvaja lastest, tagada saadud info edastamise vastavate spetsialistide ning pakkuja lastele ja lastega seotud teemadel osavalt sekkumist.

Hüdeohas olevast lapsest tuleb viivitamata teada hõdaabirumbril 112

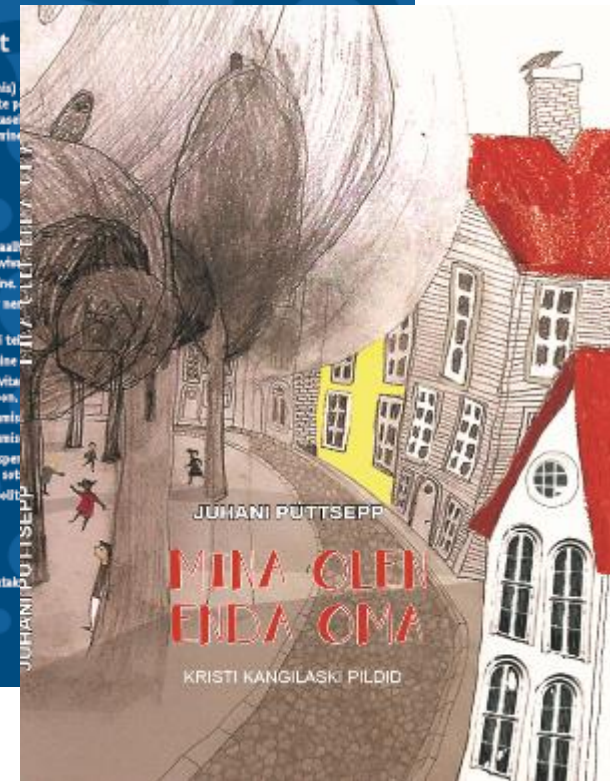
JanusCentret

JanusCentret eesmärgiks (Taand) sekkumist laste ja teismeliste püüdnud ravilaste 4-18aastase või kahjustava seksuaalkäitumise lastega kokku puutuvad.

JanusCentret teenused

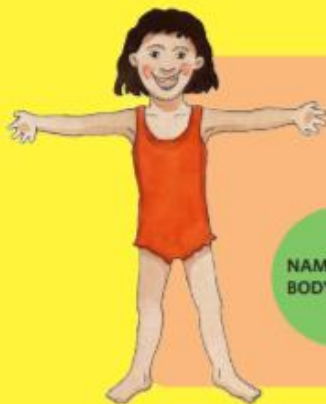
- Psühholoogiline ja seksuaalne ja vaband, et hinnata ravilaste
- Retseptsiooniriski hindamine
- Laste ja teismeliste ning nende rühmadele
- Olulisi ja sügavalt, samuti te
- Keostöö ja kehtestamine
- Teisi seksuaalset kaitset
- Kahjustava seksuaalkäitumise
- Kahjustava seksuaalkäitumise
- Lastele ja teismelisele teadmiste
- Seminarid, loengud ja koolit

Lapsed ja teismelised suunatakse



SAFETY SKILLS AND YOUR BODY

KNOWLEDGE, SKILLS, AND ATTITUDE



NAMES OF BODY PARTS

WHAT A CHILD SHOULD KNOW

Tell the child about all parts of the human body.

Teach the child the names of various body parts.

Help the child get familiar with the human body by various means: by looking at pictures, by drawing, by playing.

WHAT A CHILD SHOULD BE ABLE TO DO

The child knows that it is all right to talk about all body parts, with grown-ups and with other children.

The child is able to talk about his or her own body.

The child can use appropriate and acceptable words about body parts.

HOW A CHILD SHOULD FEEL ABOUT THE HUMAN BODY

All parts of the human body are equally good.

It is important that you appreciate your body and take care of your body.

All kinds of bodies are equally good.

It is a good thing that there are different kinds of bodies.



THE SWIMSUIT RULE

WHAT A CHILD SHOULD KNOW

Tell the child that the body parts under the swimsuit are private things.

Only the child may decide about them.

Nobody may touch the body parts under the swimsuit or look at them or talk about them if the child does not want to.

Help the child get familiar with the Swimsuit Rule by various means: by looking at pictures, by drawing, by playing.

WHAT A CHILD SHOULD BE ABLE TO DO

The child knows which body parts are private and that they should not be shown to anyone if the child does not want to.

The child knows that looking and exploring things under a friend's swimsuit is all right only if both of you feel it's all right and comfortable.

The child knows the Swimsuit Rule and can say no if someone tries to break the rule.

HOW A CHILD SHOULD FEEL ABOUT THE HUMAN BODY

There are different body parts. Some of them are special, private, and valuable.

You may and you should protect them.

You don't let everyone see them, even if they are good and valuable.



WHAT A CHILD SHOULD KNOW

Tell the child about various ways you can touch others.

WHAT A CHILD SHOULD BE ABLE TO DO

The child learns that before touching someone else it is best to ask if it is

HOW A CHILD SHOULD FEEL ABOUT THE HUMAN BODY

The child can decide who may touch the child's body.

1.

5y

Girl

Teacher called
Girl is touching boys penis
in toiletroom

2.

16

Girl

She called
Was raped 2h ago by
stepfather

3.

14y

Girl

Friend called
She was raped 2y ago by
grandfather who is dead now

4.

12y

Boy

Mother called
Sexvideo making with 8y brother

5.

13y

Boy

Mother called
Boy is using Tinder and had sex
with srtange man at his home

Child friendly environment

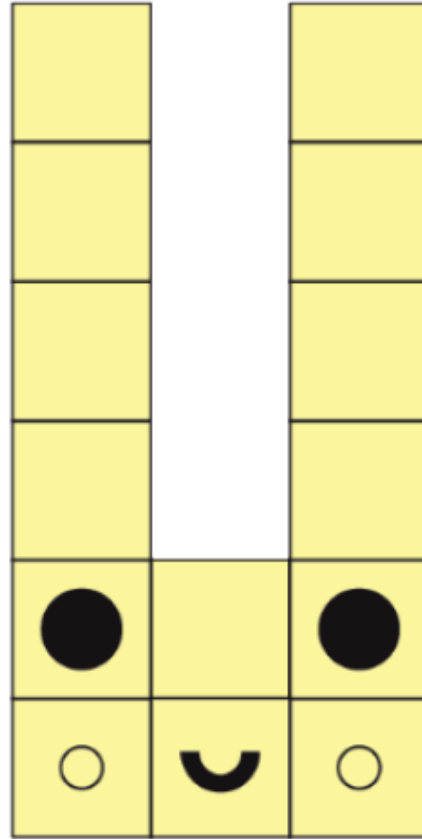
Child friendly environment

BH Q-Standard 4: Child friendly environment

- The location is set up in a safe, child-friendly and age-appropriate way, considering:
 - furnishing of the waiting- and interview room
 - materials (for example age-appropriate toys, reading and activities)
 - private and soundproof rooms
- Contact between victim and alleged offender is avoided at all times.
- The services are (physically) accessible to all children regardless of place of residence, (this includes children with disabilities and/or special needs).

Child friendly environment

- „Clients“ are Children but „users“ are partners
- Involving partners and Children, families
- Values in Barnahus what we all carry – soft talk, slippers ect.
- Childfriendly people in Barnahus! (police, doctors ect)
- Homely but not like home
- Cultural context



Assignment - Barnahus

Social Security Board Central Square 1, Jõhvi office space
partially adjusted to meet the needs of the Barnahus

5.1.1. WORKING ON THE LEFT WING OF THE FIRST FLOOR (corresponding figure inside red line "CONSTRUCTION WORK 1")

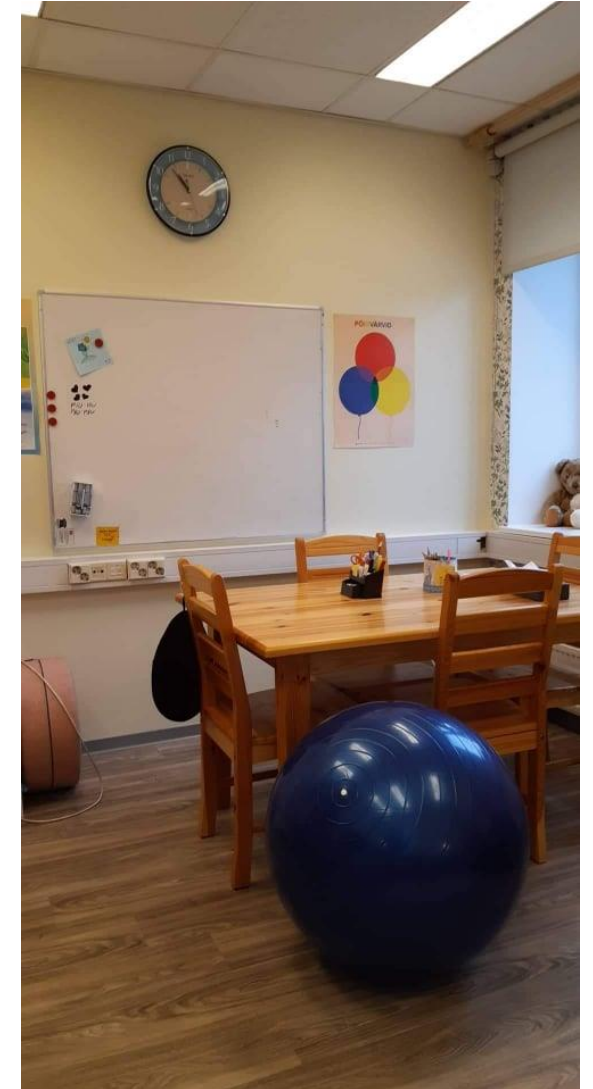
Space symbol	Work to be done	Amount	Unit	Notes
112	Dismantle the existing glass partition and mount it 3 mm further.	1	pcs	The purpose is to increase the surface area of the corridor for the complex under construction.
	Install a new closure and lock on the glass partition door.	1	pcs	The locking system shall operate with a passage system.
	Install a passage system on the door.	1	pcs	The passage system is existing and necessary to be relocated from the adjacent door (toilet) in cooperation with the operator.
	Remove the existing ceramic tile from the floor (with the ceramic tile skirting).	15.5	m ²	Up to the metal floor.
	Clean and level the floor - Prepare for installation of LVT vinyl parquet.			
	Install LVT vinyl parquet.	15.5	m ²	LVT model according to concept or equivalent.
	At the back of the corridor, build a 10 cm high podium. Cover the frame with OSB board (min. 22mm thickness).	5.4	m ²	
	Podium covered with carpet.	5.4	m ²	Model according to concept or equivalent.
	Ceiling and ceiling cornice to paint.	28th	m ²	The shade is white. Min degree of gloss 3.

TEST PERIOD with children, parents and partners





Welcome room and therapy



Thank you!

Questions, please!