Guidelines on Data Collection and Monitoring Systems on Child Abuse
ChildONEurope Series 1
Guidelines
on Data Collection
and Monitoring
Systems
on Child Abuse
Many people have contributed in the research and preparation of materials, the discussion of the contents and the analysis of the documents for the development of the Guidelines. They have given generously their time and expertise.

The work has been coordinated for the ChildONEurope Secretariat by Donata Bianchi and Roberta Ruggiero.

The ChildONEurope group of experts was composed of: Françoise Mulkay (French community of Belgium), Andra Reinomagi (Estonia), Paul Durning and Juliette Halifax (France), Maria Orthofer (Austria), Donata Bianchi, Federico Brogi, Loredana Ceccacci, Adriana Ciampa, Cinzia Grassi, Roberto Ricciotti and Roberta Ruggiero (Italy), Annita Koni (Cyprus), Anniki Tikerpuu (Estonia), Isabelle Craig and Jenny Gray (United Kingdom), José Luis Castellanos, Miguel A. Ruiz Díaz (Spain), Petra Denzic, Lea Javornik Novak and Ljudika Šalinger (Slovenia), Mill Majerus and Monique Borsemberger (Luxemburg), Magdalena Dąbrowska (Poland), Rosa Clemente (Portugal), Asta Sidlauskienė (Lithuania), Ninetta Lambrini Zoi (Greece).

The text has been drafted by: Françoise Mulkay (French community of Belgium), Juliette Halifax (France), Donata Bianchi, Federico Brogi, Loredana Ceccacci, Adriana Ciampa, Cinzia Grassi, Roberto Ricciotti and Roberta Ruggiero (Italy), Asta Sidlauskienė (Lithuania), Annita Koni (Cyprus), Anniki Tikerpuu (Estonia), Isabelle Craig and Jenny Gray (United Kingdom), Miguel A. Ruiz Díaz (Spain), Lea Javornik Novak and Ljudika Šalinger (Slovenia), Monique Borsemberger (Luxemburg), Magdalena Dąbrowska (Poland), Ninetta Lambrini Zoi (Greece).

A scientific revision of the draft of the document was provided by Dr. John Fluke, Director of the Child Protection Research Center of The American Humane Association, USA Colorado and expert of the International Society for Prevention of Child Abuse and Neglect (ISPCAN) Working Group on National Child Maltreatment Data Program.

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Preface

The United Nations Secretary-General’s Study on violence against children\(^1\) underlines the alarming increase in the reported forms of abuse and violence against children around the world. Special attention is attached in the report to the issue of child maltreatment by parents and other family members, with the report recommending that States take effective action to combat this phenomenon. The 1989 Convention on the Rights of the Child (CRC) make these recommendations compulsory as State Parties are legally bound to tackle the phenomenon of child abuse and maltreatment by means of a comprehensive approach. This is stated clearly in Article 19, Section 1, of the CRC: “States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child”. Article 19 implicitly assumes that the maltreatment of children is a preventable phenomenon and it is a State’s responsibility to address this child phenomenon through a comprehensive approach: preventive and protective care for children and legal action to identify, intervene and follow up known cases of child abuse, implement data collection systems and monitor the phenomenon.

ChildONEurope has been sensitive to this issue, and it was the focus of specific research activity. The aim of this research was to review the existing national statistical and monitoring systems for child abuse in the member States. Drawing on the results of ChildONEurope’s review and the conclusions of the European seminar on “Child abuse: which kind of data for monitoring?”, held in Florence on 18 January, the ChildONEurope’s Assembly of 19 January 2007 proposed to continue the activities of the working group on this issue. It was decided that the main task of the working group would be to identify approaches and methodologies useful to improve the collection of data on child abuse, to monitor trends and changes in the phenomenon, and to evaluate child abuse programmes and policies.

The members of ChildONEurope are fully aware that, in this field, the countries of Europe are facing five major challenges:

1. to develop child-focused statistics and monitoring systems
2. to improve the data items collected in existing statistical systems
3. to develop new areas of research and data collection
4. to promote evidence-based plans of action and programmes
5. to arrive at common definitions of types of child maltreatment and also process and outcome indicators for evaluations based on international norms and research.

Given the increasing interdependency among countries with regard to policies and actions against specific forms of violence on children, there is also a growing interest in comparing data between countries. But, as has widely been stated by researchers, the ability to compare data across countries and cultures in order to set priorities and design, implement and monitor appropriate strategies of intervention is hampered by the lack of accepted standards. It is in this transnational dimension that the need for common criteria in definitions and methodologies becomes clear. From a European perspective, the use and analysis of qualitative and quantitative information should contextualise the data since cultural and linguistic differences affect the ability to collect comparable data. This is highlighted in the second section of the document, which contains an analysis of the critical aspects linked to the definition of the phenomenon.

In order to be able to make a comparison between countries, it is essential to provide a complete set of information about:

- the concepts and definitions used in categorising each case
- the organisation that provides the data
- the way data are collected

• the law in force in each country
• the limits for each set of data
• documentation on the comparability of the data.

There are different situations in Europe, but many countries can offer their own contribution on specific aspects of the issue in order to find possible solutions: from how to face institutional problems in planning the implementation of a national system to how to handle more technical topics concerning the methodologies for data collection and management, or the choice of technological support. Solidarity and cooperation are required in order to fill existing gaps.

This document does not claim to provide all the answers to these questions, but it does present, standards, definitions, criteria and experiences that can help to develop child abuse data collection and monitoring systems and create operational instruments, in line with each national situation and national priorities, in order to improve the data on reported cases of child abuse.

The document then examines methodological and technical issues, which naturally come to the attention of researchers and policy makers when implementing a data collection and monitoring systems. The document is divided up into four sections, which correspond to the four basic dimensions of such a process. These dimensions correspond to specific structural questions:

1. the institutional dimension: e.g. international and national legal frameworks call for data collection, but is there a strong legal recognition for data collection? How do we legitimise it within the framework of good governance and prevention policies?
2. the cultural dimension: e.g. how do we define abuse? Who is a child? What are the most relevant characteristics of the events? What are the relevant units of observation?
3. the organisational dimension: e.g. what are the sources of data? How do we organise the flows of data that are to be analysed? And how should the data be processed? Should survey or administrative data be used?
4. the methodological dimension: how are the data to be collected? How are they to be investigated? Can changes and correlations be explained? Should we prepare a report and share the results with the main stakeholders?

For whom is this document intended?
The perspective being put forward in this document is that of the objectives of national or regional governments. This is a perspective in which the data collection and monitoring may respond to public policies, planners’ operational goals and informational needs. The contents of the document can support policy makers and planners at a national or sub-national level, but it is possible to find ideas and elements that also satisfy the interests of researchers and professionals.
0. Introduction

As was explained in the first section of this document, data collection and monitoring on child abuse are functions required of States due to binding, international legal acts. They are tools that contribute to the promotion and implementation of general and specific policies and action plans for children. Then, for both central and regional governments, and also local authorities, there are specific interests related to improving the quality of data collection systems and the monitoring of child abuse:

1. assessing and monitoring the conditions, circumstances and trends of well-being and the social impact of public expenditure and policies for childhood and adolescence;
2. knowing how many children are victims of child abuse (incidence), the characteristics of the violence they suffered, the conditions in which they live, the characteristics of their family, the characteristics of the perpetrators, with a view to:
   • describing the magnitude and impact of violence;
   • understanding the factors that increase the risk of violence being perpetrated;
   • identifying protective factors that enhance protective parenting and resilience in children;
   • organising services for populations in need
   • organising staff to improve skills in order to face changes in the phenomenon and in the needs of the victims;
3. verifying what kind of services are made available to the child victims of abuse (and perhaps to perpetrators) in order to improve:
   • the assistance for abused/ill-treated children
   • the help for children at risk of abuse and their families
   • implementation of legislation
   • knowledge of what types of violence prevention programmes are effective and how to best implement them
   • knowledge of what happens in a case and what sort of treatments/interventions are provided
   • knowledge of what works and use this information as the starting point;
4. comparing the phenomenon and policies over time to see how they have changed and monitoring the impact of specific actions (this is the longitudinal dimension of analysis and monitoring);
5. evaluating the economic and social costs and returns of primary, secondary and tertiary prevention.

The uses of the data on child abuse can then be divided into three broad, interdependent areas:

1. Administration: to determine whether the goals and objectives are being accomplished in a timely and orderly fashion, whether the resources are being used efficiently and effectively, and which kinds of responses are or should be given to children and families in terms of services and resources. Information on effectiveness and efficiency in preventing child abuse is demanded by international organisations, governments, representatives of the public interest and professionals.

2. Planning: political evaluation of plans and a ‘rational’ choice of methods to solve specific problems are typical tasks of policy makers, planners and administrators, which need to be based on data and significant indicators. Other activities requiring data are strategic planning and institutional methods of political negotiation and preliminary evaluation connected to the approval of national plans or acts.

3. Research, policy research and analysis: data are necessary for the development of scientific knowledge on the issue, to determine the effects of changes in policy, laws or procedures, and to develop strategies in the light of these anticipated effects.
0.1. Data collection and monitoring: two interdependent activities

Before proceeding with the presentation of this topic, it is essential to define the meaning of the two concepts/functions at the centre of this document: data collection and monitoring.

When dealing with a process of data collection and monitoring, the first step is to examine existing sources of data and typologies of data to determine whether they fit the variables chosen as the core of the system in order to collect proper information and recognise what the informational needs are (Wolfe, Yuan, 2001). Generally, the system will be based on:

- variables (data) already collected systematically, organised and disseminated
- variables (data) collected, but which are not yet organised
- variables (data) already collected, but which need to be revised
- new variables (data) to be collected.

Obviously, different types of variables are needed for different purposes. Potential sources of the various types of information include:

- individuals;
- agency or institutional records;
- local programmes;
- community and government records;
- population-based and other surveys;
- special studies.

Monitoring the phenomenon of child abuse is different from collecting data on the phenomenon in that it is possible to collect data without monitoring, but not to monitor without collecting data. This will now be explained in greater detail.

Data collection is the process of gathering data. In our domain, data collection to produce quantitative and qualitative information on child abuse means:

1. to identify information that is collected and produced at a local or central level as a result of administrative activities, or as the outcome of specific research or surveys;
2. to organise information collected in order to produce data that can be meaningfully summarised (this is the statistical processing of data, i.e. the processes of manipulating and/or classifying data into various categories with the object of producing statistics).

As is illustrated in the fourth section on the methodological dimension, data can be collected through ad hoc surveys or as the output of administrative activities, i.e. as administrative data. These kinds of data are the raw material for administrative and operational purposes.

If we choose a survey, we can build our data and choose which professionals or practitioners will be the source of the data. In this case, there are typical research and methodological problems related to the extent of the survey, e.g. a census or sample, and organisational problems, as the survey cannot take up too much of the data collectors’ time in their daily work unless they are dedicated personnel or researchers. This organisational problem also influences the choice of administrative data if it is necessary to modify the set of information usually collected or the working instruments or methods. If changes have to be made to the previous modus operandi, training must also be planned to support the implementation of a new data collection and monitoring system. The role of training is also important in improving working procedures as the quality of the data obtained from the operational system reflects the quality of the operational system and its administrative records.

There are also different financial considerations with regard to the two approaches. Administrative data are collected routinely and so the major onus should be to train staff and “create space” in regular working agendas, thereby reducing possible extra costs. Surveys, on the other hand, require special budgets to carry out the collecting of data, which can be very expensive and is likely to suffer cuts in the case of financial restrictions, thereby interrupting data collection.

Nevertheless, the two methods can serve complementary aims: ad hoc surveys make it possible to analyse in detail specific aspects of the events, which are routinely counted, at the same time, as input of administrative data collections.
The monitoring is structured around the regular collection of data concerning new events (e.g. children referred each year to child protection services or the police as victims of child abuse) and, possibly, on the results of ad hoc surveys and research investigating specific features of the problem. Monitoring requires continuity and should be based on administrative and/or survey, individual and/or aggregated data, collected with continuity, at certain intervals. It is not an end in itself and should be undertaken to achieve specific goals. Monitoring can identify trends and discriminate between different types of changes and the origins of the changes. The data should be disseminated to those people who collected the data and also to key stakeholders in order to share the results of monitoring, check trends in the phenomenon and correlated events, and take action (Thacker, Berkelman, 1988).

Monitoring can also be considered as being synonymous with surveillance, which is defined as the ongoing systematic collection, analysis, and interpretation of outcome-specific data for use in the planning, implementation, and evaluation of public health and social practice.

It is normal to distinguish between two types of surveillance (monitoring):

- **Active surveillance**, structured around ad hoc data collection to identify individual cases in order to investigate the incidence of the problem through interviews and surveys based on the various sources that can furnish relevant information: police, judicial, social and health services, schools and leisure time organisations.

- **Passive surveillance**, based on the output of data through current activities and existing data collection forms, which are adapted to the aims of the surveillance. This is a low cost model and does not require expensive, resource demanding changes in the work of the professionals whose activity has been identified as the source of data.

A hybrid model is also possible, in which professionals are used as active detectors in their everyday work, identifying potential cases and reporting them as an additional output of their work in ad hoc reporting scheme.\(^1\)

Child maltreatment surveillance systems rely on a variety of data sources, for example, hospital inpatient records, emergency department records, police and homicide reports, child death review findings, and medical examiner and coroner reports. There are two main approaches to surveillance on child abuse: Hospital-based surveillance systems and Community-based surveillance.

*Hospital-based surveillance* systems suffer from a number of shortcomings, not least of which is the fact that they tend to underestimate the incidence of child abuse. Deaths due to injury that occur outside the hospital environment will not be covered by such systems. They also fail to capture those injuries that do not receive hospital attention (either because the injury was not severe enough to warrant medical treatment, because help was sought elsewhere, or because the injury was not “physical” but emotional).

*Community-based surveillance*, on the other hand, has the potential to collect detailed information on all types of violence. Community-based surveillance denotes a system that derives its data from social services, health services and, possibly, other agencies. The system can be based on census data, e.g. all the children reported to social services or child protection agencies, or on sample surveys (WHO, ISPCAN, 2006).

Generally, the monitoring of a phenomenon implies the development of an information framework within which the phenomenon can be analysed in connection with data on correlated events or conditions. Besides the core on child abuse, the system can be fed with background data, which can support the interpretation of the changes, e.g.

- data and information on demographic characteristics
- health conditions of children and their risky behaviour

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\(^1\) In Spain, it is mandatory for physicians to report severe injuries involving children to the police. Police have to record any formal complaints of cases at the police station (some police stations even have special units to question children). In both cases, the information collected can be considered as the output of passive systems. In both cases, additional reporting leaflets have been created in order to report cases to social services immediately. These leaflets are in fact surveys, which could be considered an active system since they are not usually considered part of everyday work and are subject to error (since not everybody uses them).
• at-risk behaviour in the general population
• social and income status
• education
• access to resources and services
• criminality.

The broader the system, the more important it is to establish a collaborative partnership with the representatives of all the sectors involved, with a view to sharing the system’s objectives, the variables to be added and the data to be collected.

The sustainability of a data collection and monitoring system on child abuse can be helped by (Lass, Reusswig, 2002):
• inter- and trans-disciplinary cooperation and joint research activities in order to define variables, identify pertinent data and integrate several sources of information;
• using both quantitative and qualitative research methods in order to improve understanding of the trends and specific aspects;
• orientation towards strategic solutions of the most relevant problems instead of purely contemplative interest;
• cooperation and dialogue between policy makers, researchers, professionals and social stakeholders in order to update the system’s structure (e.g. to avoid useless or repetitive data collection), capture new changes and share understanding of the data.

Figure 1. Data collection and monitoring: the relationship

As recommended (Wolfe, Yuan, 2001; Boyle et al., 2001), the aim of responding to the operational objectives, which are closely related to government functions, should not undermine the fundamental quality attributes of a surveillance system, which are:
• Usefulness, the system must improve knowledge and the effectiveness of policies and action plans
• Simplicity, with regard to both its ease of use and the structure of information flows
• Flexibility, it must be adaptable to changes in information needs or operating conditions


• **Acceptability**, it must be accepted and its objectives understood by people outside, e.g. those people involved in collecting the data

• **Sensitivity**, it must detect the majority of cases reported in the community

• **Specificity**, referring to the system’s ability to identify pertinent cases

• **Representativeness**, it represents the most important aspects of events and of the phenomenon as a whole

• **Timeliness**, the rapidity of the system in capturing, processing and disseminating data

• **Resource equipped**, the system is not cost neutral, and requires human and financial resources, so sufficient funds should be allocated for its implementation and development.

### 0.2. The definition of the phenomenon to be detected and analysed

In order to monitor a phenomenon, the starting point is the identification of the semantic realm in which policy makers, researchers and professionals move. As is highlighted in the second section, it is essential to reach agreement on the recognition and definition of the events to be detected and recorded, and then counted and evaluated.

Every day one comes across different definitions of the phenomenon of child abuse, which are adopted by different organisations, countries and professionals in order to satisfy different needs. Until now the concept of “child abuse” has been used with the assumption that there is a common understanding of the facts that lie behind these words, but this is not true. Moreover, the very term “abuse”, according to some cultures and professional approaches, could be considered ambiguous as a concept since, if the Latin root of the term is taken into account, it means the “wrong use” or “exaggerated use” of a child as opposed to the correct use. This implies that words are not neutral and linked to a single domain, so their choice is important as they will influence which kind of events will be counted and monitored. In the document, international definitions and standards will be discussed, together with more operational definitions, that is, specific descriptions of behaviours and attitudes which identify each type of child abuse.

To give an example of the problems arising from differences in conceptualising child abuse, it is worth mentioning a study cited in the 2004 edition of ISPCAN's World Perspectives on Child Abuse. In a survey on the various ways in which child maltreatment is defined, involving ISPCAN members from a total of 72 countries, participants were asked to indicate whether a series of parental or caretaker forms of behaviour and social or institutional conditions were considered to be child abuse and neglect in their country. The most common forms of behaviour considered as child abuse and neglect were sexual abuse and physical abuse by parents or caretakers. Other forms of behaviour also frequently mentioned as abusive included children living on the street, child prostitution, abuse or neglect within foster care, and abandonment by parents or caretakers. The survey highlighted considerable regional variation in what is viewed as child abuse behaviour for several specific items: failure to secure medical care based on religious beliefs, female circumcision and physical discipline. The behaviour least mentioned by respondents as being considered child abuse in their countries was physical discipline.

With regard to the European respondents, from 27 countries, the results confirmed the differences of varying degrees of importance that influence recognition of the phenomenon, and also that there was only general agreement on sexual abuse and physical ill-treatment.

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5 European respondents: Bulgaria, England, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Italy, Netherlands, Poland, Portugal, Romania, Scotland, Slovak Republic, Spain, Sweden. Albania, Belarus, Bosnia and Herzegovina, Iceland, Montenegro, Russian Federation, Serbia, Switzerland, Turkey.
Table 1. Behaviour generally viewed as child abuse and neglect

<table>
<thead>
<tr>
<th>Behaviour</th>
<th>European (27 countries)</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of respondents recognizing the event as child abuse</td>
<td></td>
</tr>
<tr>
<td>Sexual abuse (including pornography)</td>
<td>100</td>
</tr>
<tr>
<td>Physical abuse</td>
<td>100</td>
</tr>
<tr>
<td>Failure to provide adequate food, clothing or shelter (material neglect)</td>
<td>92</td>
</tr>
<tr>
<td>Abandonment by parents or caregivers</td>
<td>92</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>88</td>
</tr>
<tr>
<td>Failure to secure medical care for child based on religious beliefs</td>
<td>84</td>
</tr>
<tr>
<td>Psychological neglect (e.g. failure to provide emotional support)</td>
<td>79</td>
</tr>
<tr>
<td>Parental substance abuse</td>
<td>88</td>
</tr>
<tr>
<td>Witnessing domestic violence</td>
<td>76</td>
</tr>
<tr>
<td>Parental mental illness</td>
<td>64</td>
</tr>
<tr>
<td>Physical abuse for discipline</td>
<td>60</td>
</tr>
<tr>
<td>Non-organic failure to thrive</td>
<td>56</td>
</tr>
</tbody>
</table>

The ChildONEurope Review on National Systems of Statistics and Registration on Child Abuse (2007) tends to confirm the existing qualitative and quantitative discrepancies in European statistics on child abuse, as have been highlighted by the Council of Europe and the European Union on several occasions. In the study sixteen out of the twenty countries responded that there were some forms of national statistics on child abuse. The results highlighted that the typologies of units of observation and their descriptions vary significantly. The elements for describing the events vary according to the type of abuse and to the Sector producing the data. The information deriving from the social services is, generally, the most well detailed in terms of types of child abuse which are recorded.

0.3. A multidisciplinary approach

To set up and manage a data collection and monitoring system on child abuse is not just a statistical problem (for more information see the third section). It can require (or be the result of) changes in the procedures for the detection and protection of children by the social services; it calls for a combination of technical knowledge and judicial, clinical and sociological knowledge regarding the “contents”, i.e. familiarity with statistical methodology and information technologies and familiarity with the various aspects of actual cases, which are to be documented through the system. It is also important to involve different professionals to achieve a multidisciplinary approach, i.e. sociologists, policy planners, statisticians, information technology experts, health experts and law enforcement professionals.

Their different perspectives enable the information gathered to be better understood. For example, after the implementation of an oriented and topic-focused system, the statistics on child abuse may show an increase because more situations are reported and not because child abuse itself has increased. The changes in the number of cases could then be better understood as an enhanced recognition of the events and not as a real increase in the magnitude of the violence against children.

0.4. A child sensitive system

From the point of view of the CRC, an integrated system of monitoring on child abuse could be created using a rights-based approach to monitoring the state of children, i.e. the data collected should also support the analysis of answers to the problem in terms of justice and the prevention of such crimes, and as support services for children and families at risk of abuse. Changes in the phenomena can be better understood if researchers and policy makers have an idea about the services provided to people in need. It could then be helpful to periodically monitor the different types of services available.
and the way they are organised, e.g. counselling centres, multiprofessional teams etc, and their features, e.g. the professionals employed, the specific activities provided, the targets, their public or private status, accessibility etc.

Moreover, a rights-based approach clearly highlights some aspects linked to the five ethical dimensions of data collection (Melton 2003; ASA 1999) regarding the protection of a child’s integrity:

1. Respect for people’s dignity – the data collection and measures should respect the dignity of the children and the other subjects involved;
2. Acknowledgement of and respect for children’s personhood and their views;
3. The right to personal security, with regard to both the respecting of privacy and the receiving of support, as well as the need to investigate all the intra-personal, intra-familial and community wide factors that play a role;
4. Responsibility towards research subjects, i.e. the need to protect the interests of the objects of the research not only during data collection, but also during the analysis, interpretation and publication of the final results.

Then there are other general principles that are part of the code of conduct in the field of statistics. Eurostat has fixed in the European Statistics Code Of Practice the 15 basic quality principles covering the institutional environment, the statistical processes and the outputs of statistical activities. They were conceived primarily for co-operation on statistics at a European level, but they are also relevant to national or sub-national levels and represent an important framework for the process presented here.

In general, the participation of children in the research protocol has an ethical dimension which is both sensitive and complex, and should receive particular attention in order to avoid any misuses of data on the child and the violation of his/her privacy (Christensen and James 2000). They also have the right, especially in the case of ad hoc surveys based on questionnaires or interviews which imply direct contact with them, to be presented with sufficient information on the purpose of the research, the procedures, the risks, the benefits, and any other details necessary to enable them to give informed consent to their participation. Parental consent is required when a child is incapable of understanding the implications of taking part in a study or where the child is regarded as incompetent to give his/her consent.

Any systematic investigation and data collection based on the analysis of issues related to children should consider their particular vulnerability, which is in due largely to their reduced and limited ability to protect their own interests.

An ethics review committee could guarantee a periodical assessment of the ethical dimension of the data collection and monitoring system, addressing possible critical aspects and difficulties: confidentiality and anonymity – the anonymity of the data must be assured by removing names and any identifying information.

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Chapter I. International legal and institutional context

1.1. The obligation to collect data as part of the international commitment to implement children’s rights

The availability of reliable, shareable and comparable data on childhood is a crucial and urgent problem, which is constantly being highlighted at a European and international level. The lack of coordinated and adequate data on child abuse is often a symptom of a more general weakness in the collection of data on children, and for the monitoring of the programmes and policies affecting them.

The need to develop systems for monitoring and data collection on child abuse emerges directly from the requests made by the Committee on the Rights of the Child. If this issue is considered within the framework of the Convention on the Rights of the Child (CRC), it is clear that data collection is a tool for implementing the CRC, in particular to put into practice the principle of the best interests of the child, which must be a primary consideration in all actions concerning children (Art. 3). The CRC calls for the condition of children to be monitored and child abuse is one of the conditions to be monitored (Art. 44). It is evident that if all public and private bodies and administrative authorities are required to consider the impact of actions on children in order to ensure that their best interests are properly considered, then basic data on the juvenile population and specific data on vulnerable groups, critical problems and special needs constitute the fundamental basis on which the impact should be properly evaluated. The UN Committee on the implementation of the CRC is constantly underlining this issue.

The Committee recently faced the issue in the General Comment No. 5 (2005) on the CRC general measures of implementation. In the document the Committee underlined that “Collection of sufficient and reliable data on children, disaggregated to enable identification of discrimination and/or disparities in the realization of rights, is an essential part of implementation”. The Committee also considers data collection as a tool for the monitoring and evaluation of the progress made and the assessment of the impact of policies with regard to children. In particular, the Committee deems that the availability of statistical data is essential in order to identify and combat specific dramatic issues affecting children’s lives, such as violence, exploitation and discrimination.

The Committee reminded States parties that data collection needs to extend over the whole period of childhood, up to the age of 18. It also needs to be coordinated throughout the jurisdiction, ensuring nationally applicable indicators. In the General Comment No. 5, the Committee also underlined that “States should collaborate with appropriate research institutes and aim to build up a complete picture of progress towards implementation, with qualitative as well as quantitative studies. The reporting guidelines for periodic reports call for detailed disaggregated statistical and other information covering all areas of the Convention. It is essential not merely to establish effective systems for data collection, but to ensure that the
data collected are evaluated and used to assess progress in implementation, to identify problems and to inform all policy development for children. Evaluation of a phenomenon requires the development of indicators related to all rights guaranteed by the Convention”.

As the recent ChildONEurope’s Survey of the Committee’s concluding observations on the last EU countries’ reports shows, the issues of data collection and of the definition of indicators on childhood and related issues have been widely discussed by the Committee with all the EU Countries. The issues have been discussed by the Committee with all the 29 European Countries analysed (27 EU Member States and 2 Accession / Candidate Countries). The importance of collecting data was highlighted by the Committee in its concluding remarks – stressed that having relevant data collected is crucial to evaluating the impact of policies concerning children. In particular, the Committee considered that the availability of statistical data is essential to identify and combat direct and indirect discrimination, as well as to devise and implement targeted positive action programmes and put in place measures to monitor the progress made.

Several EU Countries have achieved positive results, but only a few countries have established specific instruments, programmes or bodies to deal with the collection of statistical data on children (5 EU Member Countries and 1 EU Acceding / Candidate Country). The most frequent concern of the Committee was the insufficient (or totally lacking) disaggregation of data in a comprehensive way, i.e. on age, gender, children belonging to minority groups and children in need of special protection.

The availability of data on childhood is also an important step towards the integration and cohesion of EU policies at a national level for this target population. Even if there is no comparable information, it is at least necessary to have information that is good enough to represent the situation of each country in order to promote the role of the European Union as a dimension that can bring added value to the field of children’s rights and identify the main priorities for future action: an objective clearly stated in the Communication of the Commission Towards an EU Strategy on the Rights of the Child (COM(2006) 367 final).

Institutional obligations also derive from the signing and the ratification of other international legal instruments, such as:

- The European Convention on the Exercise of Children’s Rights, 1996 (Art. 12);
- The Optional Protocol to the CRC on the sale of children, child prostitution and child pornography, 2001 (Art. 12);
- The Council of Europe Convention on Cybercrime, 2001 (Art. 31);
- The Council of Europe Convention on Action against Trafficking in Human Beings, 2005 (Art. 36-38);

All of these legal instruments include rules or provisions requiring States to monitor their implementation using data on the relevant phenomena which is at the centre of each Convention and information on the process of law enforcement originating from their ratification.

1.2. Data collection and monitoring of child abuse as good, recommended practice

Several international non-binding acts and studies recommend, as good practice, having child abuse data collection systems in place. These documents are important points of reference for governments and have influenced both national and international strategies.

Recommendations formulated at an international level are found in non-binding acts, such as:

- The Declaration and Agenda for Action, adopted at the end of the first World Congress against Commercial Sexual Exploitation of Children, Stockholm, 1996;
- The Commitment and Plan of Action, adopted by the participants from Europe and Central Asia at the conference “Protection of children against sexual exploitation”, Budapest, 2001;
- The Yokohama Global Commitment 2001, adopted at the end of the second World Congress against Sexual Exploitation of Children, Yokohama, 2001;
The Commitment expressed in the 12 policy principles adopted in Oslo (the so-called 'Oslo principles'), at the end of the ad hoc Council of Europe conference of European ministers responsible for the prevention of violence in everyday life, 2004;

• The Council of Europe Programme Building a Europe for and with children, 2008;

• The final declaration of the Third World Congress against Commercial Sexual Exploitation, Río de Janeiro, 2008.

The WHO Report Violence and Health (2002) identified eight strategies to be pursued in order to implement more effective action against violence, three of which refer to data collection as good practice or prerequisite:

• Recommendation 1. Create, implement and monitor a national action plan for violence prevention. The development of a multisectoral national action plan is considered as a key element for sustained violence prevention efforts. But the action plan must be evidence based for evaluating and monitoring the achievement of its objectives.

• Recommendation 2. Enhance capacity for collecting data on violence. The national capacity to collect and analyse data must be enhanced for understanding the scope, causes and consequences of violence. The data are necessary in order to set priorities, guide programme design, and monitor the progress of the action plan.

• Recommendation 3. Define priorities for, and support research on, the causes, consequences, costs and prevention of violence at the national level, as well as at a local level since data collection at the local level is an important component in the larger research and data collection effort required to tackle violence on a global scale. WHO recommends that for maximum benefit, local authorities should be actively involved, and also all the potential stakeholders and final users of data.

In the recent UN Study on Violence against Children (2006), the independent expert Sergio Pineiro concludes the final Report recommending that States improve data collection and information systems in order to identify vulnerable subgroups, and inform policy and programming at all levels. Moreover, the Report stresses the value of using national indicators based on internationally agreed standards, and of ensuring that data are compiled, analysed and disseminated to monitor progress over time. As a basic requirement, the Report asserts that data should be disaggregated by sex, age, urban/rural, household and family characteristics, education and ethnicity, with particular attention paid to vulnerable groups of girls and boys.

The European Union has also emphasised the importance of improving data collection systems on the various forms of child abuse since the fight against violence should be placed within the context of the protection of fundamental rights, as recognised by the European Union’s Charter of Fundamental Rights.

The availability of data is clearly requested in the lines of action within several editions of the EU’s Daphne programme. One of the priorities of this programme remains the study of child abuse and its impact on both victims and society as a whole, including the health-care, social and economic costs, in order to address the root causes of violence at all levels in society.

The Council of Europe’s Committee of Ministers has also often addressed the issue of monitoring the violence against children, approving several Recommendations, some of which are more generic, while others deal more specifically with child abuse, and the data collection and monitoring of the phenomenon. These issues have also been addressed on several occasions by the Parliamentary Assembly of the COE.

The objectives of these activities are very often to promote a truly European model for the action to be taken and make the various national experiences comparable. This is why the texts often contain indications and guidelines for the States to develop uniform actions for the prevention of and the fight against child abuse.

The Council of Europe has dealt with the issues of child abuse, violence and maltreatment not only by drawing up Conventions, Recommendations and Resolutions, but also through acts with no legal status, such as programmes and action plans aimed at devising a common strategy to prevent and combat these phenomena in all its Member States. Two recent initiatives are: the adoption of the
Convention on the protection of children against sexual exploitation and sexual abuse, which was opened for signature on 25 October 2007 in Lanzarote; and the launching of the programme “Building a Europe for and with children”, which is being implemented further to the Third Summit of Heads of State and Government of the Council of Europe (Warsaw 2005). The programme wants to guarantee an integrated approach to promoting children’s rights, covering the social, legal, educational and health dimensions relevant to protecting children from various forms of violence. As part of the programme, the COE decided to draw up a set of Guidelines and Recommendations (European Policy Guidelines for Integrated Strategies against Violence) for its Member States concerning strategies for the prevention of violence, which also mention the issue of data collection and monitoring as a crucial task for each member State.

1.3. Child abuse as part of the analysis of child well-being

The issue of child abuse is also relevant due to its links with the analysis of more general social conditions affecting children, such as education, health, general crimes, unemployment etc. In particular, data on child abuse can be considered as a component of a more general information system on child well-being. The promotion and assessment of child well-being are topics of increasing concern to researchers, policy makers and the public at large: the United Nations Convention on the Rights of the Child provides a decisive stimulus.

There is a growing awareness of the fact that the lack of adequate data on the well-being of children, and the quality and conditions of the environment in which they grow up, makes it impossible to develop and implement effective policies, and decide efficiently on resource allocation. A child’s well-being depends upon the availability of both material and non-material resources, such as relational and emotional resources and abilities, including appropriate social and emotional functioning, cognitive growth, and physical health and development, all domains that may be damaged in a battered child.

In England, the Green Paper Every Child Matters (2003)\(^1\) set out five outcomes for all children in England:

- being healthy: enjoying good physical and mental health and living a healthy lifestyle
- staying safe: being protected from harm and neglect, and growing up able to look after themselves
- enjoying and achieving: getting the most out of life and developing broad skills for adulthood
- making a positive contribution: to the community and to society and not engaging in anti-social or offensive behaviour
- economic well-being: overcoming socio-economic disadvantages to achieve full potential in life.

In such an approach, positive and negative outcomes connected to the quality of parenting and the life of children at home are important components, and information related to situations at risk and child abuse are part of the framework. The approach adopted makes it possible to specify the links between outcomes, policies and programmes related to outcomes (support services) and targets associated with outcomes (e.g. families at risk, young parents, immigrant children etc).

The recent Unicef IRC Report, Report Card 7 An overview of child well-being in rich countries (2007)\(^2\), attempts to measure and compare child well-being under six different headings or dimensions: material well-being, health and safety, education, peer and family relationships, behaviours and risks, and young people’s own subjective sense of well-being. Under the dimension “Behaviours and risks”, researchers also try to evaluate the impact deriving from being exposed to violence, but there is a lack of data and common definitions for the subject (“Unfortunately, exposure to violence is difficult to define and the available indicators are inadequate to the task of reflecting either present misery or future..."

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consequence”). They therefore rely on “few data on what children themselves have to say about this issue” in relation to ‘bullying’ and ‘fighting’. But, as the researchers openly argue, both ‘fighting’ and ‘bullying’ are inadequate indicators to represent children’s experience of violence “What is needed is more information on children’s exposure to violence of all kinds in the home”.

There are also variables related to child abuse and situations which put a child at risk in the EU approach to the analysis of child well-being. Until recently the attention to negative factors was focused mainly on conditions related to child poverty and the risk of social exclusion, evaluated as conditions which may affect a child’s health, cognitive and psychological development, and social well-being (Hoelscher 2004). In recent years, however, as the EU’s conceptualisation of child well-being reveals, a multi-dimensional approach is now being adopted and child well-being is now more often correlated to children’s rights as outlined in the UN CRC (Bradshaw 2007).

The recent Report Child Poverty and Well-Being in the EU – Current status and way forward (2008), edited by the EU Task-Force on Child Poverty and Child Well-Being within the Social Protection Committee, presents an overview of existing indicators used to monitor child poverty and well-being in the context of policy making at country level (national and/or sub-national levels). It confirms the desire to include violence against children as a dimension that should be investigated in order to correctly assess the level of well-being, but, at the same time, the Report also corroborates all the limits resulting from the lack of data or reliable data.

The dimensions of well-being studied are economic security and material situation, housing, local environment, health, education, social participation and family environment, exposure to risk and risk behaviour. With regard to the last dimension, the indicators in use are generally related to the exposure of children to dangerous situations that are different from child abuse, such as school truancy or drug addiction. The data on exposure to different kinds of violence are among the least collected in all countries. The report suggests a set of concrete recommendations for a common framework to analyse and monitor child poverty and child well-being at EU, national and sub-national levels. One of the recommendations (Recommendation 10) refers to Reinforcing statistical capacity also in the domain of collecting specific data on children in vulnerable situations, e.g. children in institutions or foster care, children with chronic health problems or disabilities, abused children, street children etc. The editors conclude that these situations should be monitored by developing specific information systems based on administrative/register data or surveys on children in vulnerable situations.

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1 P. Hoelscher, A thematic study using transnational comparisons to analyse and identify what combination of policy responses are most successful in preventing and reducing high levels of child poverty, European Commission, DG, Employment and Social Affairs, 2004.

Chapter II. Identification of the issue

Section A. The general international definitions

Despite the apparent need to address this problem collectively, even at a transnational level, there is still a lack of consensus on what actions and conditions constitute child abuse. Nowadays, the emphasis is placed on those definitions developed for use in a cross-cultural context because a cross-cultural framework is a crucial requirement for international cooperation, and for practices and data to be compared and exchanged.

Child abuse occurs across all socio-economic, religious and ethnic groups. No one single source can be identified (Finkelhor and Korbin 1988). And, different types of child abuse have different features: the circumstances surrounding the sexual abuse of children, for instance, may be quite different from those surrounding cases of neglect or physical abuse. Korbin (1987) suggests that in cross-cultural research, instead of labelling specific conduct as “abuse”, it would be more helpful to ask to what extent the conduct violated family roles/status, was coercive, was non-consensual, was secret, and/or involved age discrepancy. Korbin notes that even these criteria are not absolute determinants of whether the behaviour was abusive in a particular culture, but they are helpful guidelines. Finkelhor and Korbin state that an acceptable international definition should help in distinguishing child abuse from other social, economic and health problems affecting the lives of children, and it should be flexible enough to be used in different social and cultural contexts.

The most widely used definitions of events have been formulated in the judicial, social or health sectors – the fields to which the professionals most closely involved in the detection of the problem belong.

From the ChildONEurope Review it emerges that in the majority of respondent countries nationwide statistics are the output of the judicial and social sectors, which are the main collectors and producers of data on violence against children. Their relevance is understandable because they are the two spheres of services immediately involved when there is suspicion of child abuse. The professionals working in these two sectors have the greatest responsibility for detecting cases, and also in the management of court proceedings.

The general overview contained in the ChildONEurope Review shows that most of the available statistics refer to sexual abuse. It is far less usual to find nationwide statistics concerning other relevant forms of child abuse.
Table 3. Sources of data and type of child abuse

<table>
<thead>
<tr>
<th>Type of Child Abuse</th>
<th>Sector Producing Official Statistics on the Topic</th>
<th>No. of respondent countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Abuse</td>
<td>Judicial</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>1</td>
</tr>
<tr>
<td>Sexual Exploitation</td>
<td>Judicial</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Neglect</td>
<td>Judicial</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>1</td>
</tr>
<tr>
<td>Psychological Ill-Treatment</td>
<td>Judicial</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>1</td>
</tr>
<tr>
<td>Witnessing Violence</td>
<td>Judicial</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Trafficking</td>
<td>Judicial</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Physical Violence</td>
<td>Judicial</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>Judicial</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>1</td>
</tr>
</tbody>
</table>

ChildONEurope 2007

The judicial sector is the main source of data for at least four categories of child abuse: sexual abuse, sexual exploitation, trafficking and physical violence. Neglect and psychological ill-treatment, on the other hand, turned out to be “problems” of the social sector. This result could be explained by the different approaches taken to managing these types of cases. The ChildONEurope Secretariat did not manage to obtain a complete picture concerning the legal definitions and procedures relating to these kinds of child abuse. It could be, however, that protection agencies are mainly involved in civil proceedings and the cases are heard in Family or Juvenile Courts rather than Criminal Courts, as seems to happen for the other types of abuse, such as sexual exploitation and trafficking. The data on these types of abuse are collected essentially at a national level, as a result of judicial administrative activity. Witnessing violence is a kind of child abuse that seems to remain completely unknown, even though it is a common experience which has a serious impact on the psychological, cognitive and behavioural development of a child.

2.A.1. How different contexts produce different approach to the issue

2.A.1.1. The judicial perspective

Where child abuse is conceived of as a judicial matter, the legal or juridical definitions identify child abuse as crimes (the basic interest is to identify illegal behaviour in order to sanction the
perpetrator) or as at-risk situations and involve civil procedures (mainly in Juvenile Courts) for the protection of the child and possibly the supporting parents.

Abusive behaviours are seen, by a given society at a given time, as forms of behaviour that are unacceptable towards children. So these types of behaviour such as sexual violence against children or hard physical violence are prosecuted and punished by law. The abuse is regarded (by the law) as a forbidden act carried out against a child. Evidence to the court is important. Without the necessary evidence, it is more difficult to protect children.

To prosecute perpetrators, evidence is essential. The terms and procedures to protect children depend on the national legislation and the rules of the judicial systems (e.g. an adversarial system or an inquisitorial system).

The types of behaviour that are prosecuted demonstrate how a society views its children. For example, there is an important discussion in our society about corporal punishment. Some people and NGOs want to forbid this form of punishment and prosecute parents who use corporal punishment, because it is a physical and psychological violence against children. Other people think that corporal punishment is not a violent form of behaviour. They hold that it is a method of educating children on how to behave well and may therefore be used by parents as a form of punishment for their children.

Juridical definitions may offer a more straightforward representation of the problem, as events which require public action and political choices. The data collected using this approach offer basic information and criteria for the reduction of criminality.

However, some forms of child abuse are not often considered as crimes, e.g. psychological ill-treatment, the witnessing of domestic violence and also some forms of physical ill-treatment, therefore they will never be reported or recorded as relevant acts. Clinicians know, on the other hand, that children who are subjected to these kinds of behaviour are ill-treated and need help. Judicial sources of data therefore underestimate the scale of abuse against children.

2.A.1.2. The health perspective

In the health sector the main interest is to detect signs of harm, mainly physical, but also psychological. The approach which is based on the medical aspects of the events – looking at child abuse as a health problem – focuses on a more clinical description of the effects of the acts, in which child abuse is understood in terms of different forms of injuries that provoke specific signs on the body of the victim. Since most forms of child abuse do not cause physical signs, this strictly medical approach is far too narrow as an epistemological paradigm for a comprehensive knowledge of the events that cause a trauma or severely harm a child's development. The health sector data therefore also underestimate the phenomenon.

2.A.1.3. The social perspective

If we look at child abuse as social problem, abusive behaviours are seen as forms of behaviour that hinder child development (social, psychological and physical development), where the needs of children are not satisfied, such as their need for psychological security or love. The consequences of the acts are considered as important in this case, more than the acts themselves. In this case, the professionals are also interested in the early prevention and detection of the situation. The social definitions move along a wide spectrum of situations, from at-risk situations to different forms of child abuse, which can vary in terms of severity, depending on the type of violence, duration and co-occurrence of multiple forms.

For the professionals working in the social and psychological services who deal directly with these cases, the social-clinical perspective, which focuses more on the impact of the abuse on the

1 The Injuries and Violence Prevention Department of the World Health Organization (WHO) has collaborated with agencies from all continents to develop the tools needed to collect data on injuries. The first product of this collaboration is the International Classification of External Causes of Injuries (ICECI), a detailed classification scheme for injuries that complements the existing International Classification of Diseases (ICD). It provides guidance, to both dedicated researchers and practitioners in the field, on how to classify and code data on injuries according to agreed international standards.
child’s development, it allows a deeper, more complete understanding of the dynamics of the events. This type of approach includes, for example, the short-medium term psychological and social effects, the characteristics of the victim, the perpetrator, the family context, and the risk and protective factors. From this point of view, it is easier to take into account the risk of maltreatment and prevent it – professionals should not wait for maltreatment to start before protecting children.

The behaviours that are seen by psychologists or social workers as maltreatment change over time, e.g. witnessing violence is a form of maltreatment which has been recently defined as such. This resulted from professionals observing the health and psychological condition of the children of battered women hosted in shelters. Nowadays, psychologists and social workers think that it is bad for children to witness domestic violence as it has been proven that this has negative consequences on the psychological development of the children. It would therefore appear that the social data could offer a better estimation of the phenomenon.

2.A.2. Current legal definitions at an international level

The following paragraphs provide a general overview of the international system of legal and non-legal instruments dealing with the different forms of child abuse defined as crimes, and attempt to outline the common elements when describing the common criminal offences. This overview clearly highlights that all the most relevant international legal definitions deal with the various forms of sexual exploitation of children and trafficking. There are no international legal definitions of neglect, psychological ill-treatment or physical abuse, and few texts contain explanations of what kinds of behaviour should be considered as sexual abuse.

2.A.2.1 United Nations

The United Nations has played an important role in improving legal standards for the protection of children’s health and the promotion of their rights. In this paragraph there is a review of the most important definitions concerning child abuse contained in the main Acts approved by the United Nations Assembly.


The CRC is the first international instruments devoted purely to the protection and promotion of childhood. It recognises the child as fully-fledged holder of rights and obliges the ratifying States to provide under-age people with full equal opportunities of development and formal and substantial citizenship guarantees. For quite some time the CRC was the only treaty at an international level in which it was expressly mentioned that children have the right to be protected “from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child” (Art. 19.1). However, in the CRC there are no kind of additional specifications in relation to violence or maltreatment against children. For this reason, an Additional Protocol was added to the CRC in 2000 on the sale of children, child prostitution and child pornography (OPSC).


This protocol is the first instrument of international law to provide a definition of these terms: sale of children, child pornography and child prostitution. In particular, the sale of children is considered to be any act or transaction whereby a child is transferred by a person or group of persons to another for remuneration or any other consideration (Art. 2-a); child prostitution is defined as the use of a child in sexual activities for remuneration or any other form of consideration (Art. 2-b); while child pornography means any representation, by whatever means, of a child engaged in real or simulated explicit sexual activities or any representation of the sexual parts of a child for primarily sexual purposes (Art. 2-c). This protocol protects children up to the age of 18 by
treat the actions of exploiters as criminal acts that merit serious punishment. The main intention of the OPSC is twofold: on the one hand, it OPSC criminalises the above-mentioned phenomena, obliging States Parties to prohibit the perpetration of these three events (Art. 1); and, on the other hand, it calls for States Parties to provide victims with counselling and rehabilitation (Art. 8).

It is possible to say that the OPSC also promotes international law enforcement cooperation with dispositions covering such assorted problems as:

1. jurisdiction and extradition: the Protocol outlines measures that States Parties must take to set up their jurisdiction in a way that assists prosecution, whether the offence is committed (on land, sea or in the air) by locals or foreign nationals, against its citizens wherever they may be. It also provides for extradition of suspects in nearly all possible circumstances;
2. asset confiscation: the OPSC requires States Parties to provide legislation for the confiscation of goods and assets used in the commission of these offences against children and the profits derived from such offences, as well as the temporary or permanent closure of the locations/sites used to commit these offences;
3. mutual legal assistance: the OPSC obliges States Parties to take all necessary steps to strengthen international cooperation by multilateral, regional and bilateral arrangements for the prevention, detection, investigation, prosecution and punishment of those responsible for acts involving the sale of children, child prostitution, child pornography and child sex tourism (Art. 10).


For the purposes of the Protocol, the term “Trafficking in persons” includes in the definition “by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation”. While “child” is defined as “any person under eighteen years of age”.

d. ILO Convention Concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour No. 182 – 1999

Article 3 of the International Labour Organisation Convention concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour (1999) includes “the use, procuring or offering of a child for prostitution, for the production of pornography or for pornographic performances” in the definition of the worst forms of child labour.

2.A.2.2 European Union

After the adoption of the Maastricht Treaty in 1993, the need to harmonise national criminal legislation dealing with the different forms of child exploitation came to the attention of the international community. Then, following the adoption of the Amsterdam Treaty in 1997, the creation of the common space of freedom, security and justice became one of the main objectives of the European Union. One purpose of this common space was to enable the EU to intervene in the prevention and combating of criminal phenomena, such as corruption, certain forms of organised crime, terrorism, arms and drugs trafficking, trafficking in human beings, and crimes against children. Further progress towards greater harmonisation of national criminal legislation dealing with crimes against human beings, above all children, was made with the Conclusions of the Tampere European Council. The Conclusions called for closer definitions of sex crimes against children in domestic criminal legal frameworks, and the Vienna Action Plan and Tampere European Council called for additional provisions to further regulate certain aspects of criminal law and criminal procedure. The increasing intervention of the European Union in the field of trafficking in human beings and the sexual exploitation of children since 1997 has triggered the development of a number of actions at both national and regional levels.
Moreover, in December 2000, at the signing conference in Palermo, Antonio Vitorino, a Member of the Commission acting on behalf of the Community, signed the United Nations Convention against Transnational Organised Crime and the two Protocols against trafficking in persons and the smuggling of migrants by land, air and sea.


In order to provide a better response to the above-mentioned priorities and in particular to those stated by the Vienna Action Plan and the Tampere European Council, the Commission intends, through these Framework Decisions, to complement the existing instruments used to combat trafficking in human beings. The starting point is the assumption that trafficking in human beings is a crime against the person with a view to the exploitation and humiliation of that person.

The Framework Decision was not the EU’s first attempt to achieve this, but given the timing of its adoption it is possible to say that the signing of the Palermo Optional Protocol to the United Nations Convention against Transnational Organised Crime and the two Protocols against trafficking in persons and the smuggling of migrants by land, air and sea by Antonio Vitorino, a Member of the Commission acting on behalf of the Community on occasion of the signing conference held in Palermo (Italy) in December 2000, strengthened the EU’s efforts in this field. Indeed, analysing the wording of this document, it is first of all possible to note that there is, likely in the Palermo Protocol, a specific article on the definition of the crime of human trafficking:

Article 1 defines the concept of trafficking in human beings for the purpose of labour or sexual exploitation, stating that Member States must punish any form of recruitment, transportation, transfer, harbouring and subsequent reception of a person, including exchange or transfer of control over that person, where:

a) use is made of coercion, force or threat, including abduction, or
(b) use is made of deceit or fraud, or
(c) there is an abuse of authority or of a position of vulnerability, which is such that the person has no real and acceptable alternative but to submit to the abuse involved, or
(d) payments or benefits are given or received to achieve the consent of a person having control over another person.

On the basis of this provision, all criminal conduct that implies the use of fraudulent means or abuse and takes advantage of the physical or mental vulnerability of a person will be punishable.

The above-mentioned offences are only punishable, however, in relation to two types of exploitation: for the exploitation of a person’s labour or services, including at least forced or compulsory labour or services; or, for the prostitution of a person or other forms of sexual exploitation or practices similar to slavery or servitude.

It must be highlighted that the term “sexual exploitation” is not clearly defined in the Framework Decision and the only attempt to better identify it includes at least prostitution and pornography in sexual exploitation. Moreover, the Framework Decision does not explicitly include among the purposes of trafficking marriage, begging or illicit activities. The provision could be interpreted in a broader manner to cover “other forms of sexual exploitation” and “labour exploitation”, including trafficking for other purposes, such as adoption or organ extraction and trafficking.


The consent of the victims is considered irrelevant in those cases in which the conduct of the offenders involves the fraudulent means mentioned above, such as: the use of coercion, force or threats, including abduction; the use of deceit or fraud; the abuse of authority or influence or the exercising of pressure; and the offer of payments. When the conduct described involves a child, it will be a punishable trafficking offence “even if none of the means set forth in paragraph 1 have been used”. In this way the framework decision reflects the special vulnerability of children in the face of trafficking networks along the lines of the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children.

Moreover, the Framework Decision introduces the concept of criminal and civil liability of legal persons in parallel with that of ordinary citizens. Thus, legal persons will be held liable for offences committed for their benefit by any person acting either individually or as part of the organ of the legal person, or who exercises power of decision.

It must be stressed, however, that the Framework Decision on trafficking in human beings is primarily concerned with the criminal law of Member States. It does not include any sections on prevention and only includes minimal provisions for the assistance and protection of victims.4


This Framework Decision aims at identifying minimum common measures necessary to guarantee the harmonisation of the legislation among EU Member States to better combat the crimes of sexual exploitation of children and child pornography. The Framework Decision is not the EU’s first attempt to do this5. When analysing the wording of this document, like in the OPSC, there is a specific article on the definition of the crime of child pornography, which is formulated as follow:

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“child pornography” shall mean pornographic material that visually depicts or represents:
I. a real child involved or engaged in sexually explicit conduct, including lascivious exhibition of the genitals or the pubic area of a child; or
II. a real person appearing to be a child involved or engaged in the conduct mentioned in (i); or
III. realistic images of a non-existent child involved or engaged in the conduct mentioned in (i).
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It is a very detailed definition in which two additional and innovative elements are included: first, point II refers to any kind of representation of a person appearing to be a child (s/he could be an adult); and point III refers to the artificial representation of a non-existent child involved in sex activities, so long as it seems real (here, the person involved in the sex action is an image rather than being a real person).

Another innovation about the perpetrators which was introduced by the Framework Decision is the inclusion of the crime of sexual exploitation of the people involved in the sexual activities with the child using coercion, force or threats, or giving money or other forms of remuneration or

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consideration as payment, or abuse is made of a recognised position of trust, authority, or influence over the child (Art. 2).

The Framework Decision with this provision urged Member States to draw up in advance effective sanctions for all conduct intended, directly or indirectly, to gain profit of any nature from the sexual exploitation of children.

Moreover, once more with the intention to combat the phenomenon, Article 3 identifies some specific intentional forms of conduct that, when committed without right, need to be criminalized and punished, whether they involve a computer system or not:

(a) production of child pornography;
(b) distribution, dissemination or transmission of child pornography;
(c) supplying or making available of child pornography;
(d) acquisition or possession of child pornography.

Like the Optional Protocol to the CRC on the sale of children, child prostitution and child pornography, the Framework Decision invites all Member States to criminalise and punish the aiding and abetting and attempting of the crimes listed. The Decision introduces the “instigation” for each one of the listed offences. Unlike the OPSC, the Framework Decision also identifies a number of aggravating circumstances for the above-mentioned crimes in Article 5:
- the victim is a child below the age of sexual consent under national law;
- the offender has deliberately or by recklessness endangered the child’s life;
- the offences involve serious violence or caused serious harm to the child;
- the offences are committed within the framework of a criminal organisation within the meaning of Joint Action 98/733/JHA.

The Framework Decisions requires that every single crime (including those generally considered less serious, such as the possession of pornographic material) be punished with effective, proportionate and dissuasive penalties. In particular, it requires that prison sentences for offences defined by Articles 2, 3 and 4 must be at a minimum one to three years, while for certain aggravated offences the sentences must be between five and ten years. The latter sentences must be applied for offences considered more serious, such as those including the:
- forcing of a child into prostitution or the production of pornographic performances;
- participation in sex activities with a child using coercion, force or threat;
- gaining of profit from or the exploiting of the prostitution of a child, or inducing a child into prostitution; the gaining of profit from or the exploiting of the child for pornography performances, or inducing the child to produce pornographic material, participate in sex activities involving forms of remuneration or consideration given as payment in exchange for the child performances or abuse of a position of power, authority or trust:
  - the victim is a child below the "age of sex consent" as identified by domestic legislation;
  - the author of the crime has deliberately or through negligence endangered the life of the child;
  - the crime is committed using harsh violence or caused grave prejudice to the child victim;
  - the crime is committed by a criminal organisation.

In conclusion, the Framework Decision states that extra-territorial jurisdiction shall be put in place by virtue of the principle of "aut dedere aut judicare", and that the victims shall be considered particularly vulnerable in the criminal proceedings (with reference to the EU Framework Decision on the standing of victims in criminal proceedings).

2.A.2.3 Council of Europe

In recent years, the Council of Europe has repeatedly felt the need to act and to provide States with guidelines on how to protect children from different forms of violence. This was due both to
the alarming development of some phenomena – related in particular to the use of new technologies – and to the increased awareness of such issues and the need to adopt a holistic approach providing for new sanctions as well as for a stronger and more effective promotion of children’s rights in general.

With regard to the more specific acts of the COE dealing with different types of child abuse, the following shall be mentioned:

• The Convention on cybercrime
• The Convention on action against trafficking in human beings
• The Convention on the protection of children against sexual exploitation and sexual abuse

a. The Convention on cybercrime, November 2001

The Convention on cybercrime, which was opened for signature on 23 November 2001 and which came into force on 1 July 2004, was drawn up in response to the worries expressed by the COE Member States concerning the risk that computer networks and electronic information may also be used for committing criminal offences and that evidence related to such offences may be stored and transferred by these networks.

With regard to the elaboration of specific legal definitions of violence against children, Art. 9 sets out a list of conducts which States Parties to the Convention should establish as criminal offences under their domestic law:

• producing child pornography for the purpose of its distribution through a computer system
• offering or making available child pornography through a computer system
• distributing or transmitting child pornography through a computer system
• procuring child pornography through a computer system for oneself or for another person
• possessing child pornography in a computer system or on a computer-data storage medium.

The same article also defines child pornography as pornographic material that visually depicts:

• a minor engaged in sexually explicit conduct
• a person appearing to be a minor engaged in sexually explicit conduct
• realistic images representing a minor engaged in sexually explicit conduct.

The Council of the European Union drew on this definition, albeit with some integrations, in its Framework Decision 2004/68/JHA.

b. The Convention on action against trafficking in human beings, May 2005

On 16 May 2005 the Council of Europe approved the Convention on action against trafficking in human beings. This Convention, which came into force on 1 February 2008, applies to all forms of trafficking; whether national or transnational, whether or not related to organised crime. It applies whoever the victims are – women, men or children – and whatever the form of exploitation – sexual exploitation, forced labour or services etc. It devotes specific attention to minors who are victims of trafficking.

With regard to the definition of trafficking provided by the Convention, it is possible to highlight how the definition is in line with the one formulated in the Palermo Protocol to complement and develop the United Nations document, which emphasises the crime prevention aspect of trafficking. The Council of Europe Convention, on the other hand, defines trafficking as being first and foremost a violation of human rights and draws attention to the protection aspect of the victims of trafficking. The final aim is therefore to improve the protection afforded by the Palermo Protocol and to build on the standards contained therein.

Art. 4 of the Convention, which provides the definitions of the main concepts referred to in the document, defines “trafficking in human beings” as “the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation”.

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The article also specifies that the term “exploitation” shall at least include the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs. It states, moreover, that the recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in human beings” even if this does not involve any of the forms of coercion described above. Finally, the article establishes that the term “child” refers to any individual under eighteen years of age and that the term “victim” indicates any person who is subject to trafficking as defined in the article itself.


The Convention on the protection of children against sexual exploitation and sexual abuse, opened for signature on 25 October 2007, is specifically intended to represent a concrete added value in the set of international instruments for the fight against sex crimes against minors.

This Convention too includes a specific article laying down the definitions of the concepts used in the text. Here too, the “child” is defined as any person under the age of eighteen. The definitions of the crimes provided for by the Convention, concerning in particular the “sexual exploitation and sexual abuse of children”, are given in Art. 18-24. Any time the word “victim” is used in the Convention, it refers to a child subject to sexual exploitation or sexual abuse. It is important to note that the Explanatory Report highlights that the facts of the sexual exploitation or abuse do not have to be established before a child is to be considered a victim. This clarification becomes particularly important in the light of the need to activate the whole system of child protection from the very beginning, even before it has been established by the judicial authorities the crime has actually been committed.

Sexual abuse is defined in a specific article (Art. 18), which defines it as the intentional conduct of an individual:

- engaging in sexual activities with a child who, according to the relevant provisions of national law, has not reached the legal age for sexual activities;
- engaging in sexual activities with a child where:
  - use is made of coercion, force or threats;
  - abuse is made of a recognised position of trust, authority or influence over the child, including within the family;
  - abuse is made of a particularly vulnerable situation of the child, notably because of a mental or physical disability or a situation of dependence.

It should also be highlighted that the expression “sexual activities” is not defined in any article. The negotiators chose to leave the States free to define this concept. The article specifies that the Convention does not refer to consensual sexual intercourse between minors. Indeed, the treaty does not want to criminalise sexual intercourse between adolescents in the context of a normal development of sexuality.

Under the category of “sexual exploitation” the Convention includes the following criminal conducts:

- Child prostitution
- Child pornography
- Participation of a child in pornographic performances
- Corruption of children
- Solicitation of children for sexual purposes.

The term “child prostitution” is defined in Art. 19 as the fact of “using a child for sexual activities where money or any other form of remuneration or consideration is given or promised as payment, regardless if this payment, promise or consideration is made to the child or to a third person”.

With regard to “child pornography”, the definition derives from the one given in the Optional Protocol to the UN Convention on the Rights of the Child on the sale of children, child prostitution and child pornography. The Convention defines child pornography as any representation, by whatever means, of a child engaged in real or simulated explicit sexual activities
or any representation of the sexual parts of a child for primarily sexual purposes. No further definition of the concept of “explicit sexual activities” is given and the States are left free to specify it more in detail. However, the Explanatory Report contains a minimum list of behaviours which must fall within this category.

The activities linked to child pornography described in the Convention derive instead from the ones listed in the Council of Europe Convention on cybercrime, which came into force on 1 March 2004. The States Parties are required to take the necessary legislative or other measures to ensure that the following intentional conduct, when committed without right, is criminalised:

- producing child pornography;
- offering or making available child pornography;
- distributing or transmitting child pornography;
- procuring child pornography for oneself or for another person;
- possessing child pornography;
- knowingly obtaining access, through information and communication technologies, to child pornography.

An interesting innovation introduced by the Convention is the crime of “knowingly obtaining access, through information and communication technologies, to child pornography”. The States shall prosecute those people who view child images on line by accessing child pornography sites without downloading and who cannot therefore be charged under the offence of procuring or possessing child pornography. In the Explanatory Report, it is explained that the intentional nature of the offence may notably be deduced from the fact that it is recurrent or that the offences were committed via a service in return for payment.

Another remarkable innovation introduced, in comparison with the other international instruments, is the fact of “procuring child pornography for oneself or for another person”. This definition applies for instance to people downloading or buying child pornography from the Internet, even to sell it later to a third party.

With regard to sexual exploitation, the Convention describes the crime of “participation of a child in pornographic performances”, regarding individuals who:

a. recruit a child into participating in pornographic performances or cause a child to participate in such performances;

b. coerce a child into participating in pornographic performances or profit from or otherwise exploit a child for such purposes;

c. knowingly attend pornographic performances involving the participation of children.

As in the other international instruments criminalising pornographic performances involving children, the Lanzarote Convention gives no definition of such performances, even if the Explanatory Report does highlight that these shall include organised live performances. Furthermore, the Explanatory Report specifies that, depending on the States, the provision in Point c. may also cover the situation of persons who are spectators of pornographic performances involving the participation of children through such means of communication as webcams or other technological tools. The Convention permits States to reserve the right to limit the application of point a. to cases in which the children involved in the pornographic performances have been recruited or coerced into such performances.

A total innovation in comparison with the other international instruments is the introduction of the crime of “corruption of children”. States are required to criminalise the intentional causing, for sexual purposes, of a child who has not reached the legal age for sexual activities to witness sexual abuse or sexual activities, even without having to participate. This conduct may indeed turn out to be detrimental to the child’s psychological health, as it may generate a distorted vision of sex.

Another new element introduced by the Convention is the request to criminalise the “solicitation of children for sexual purposes”. The States Parties are required to take the necessary legislative or other measures to criminalise the intentional proposal, through information and communication technologies, of an adult to meet a child who has not reached the legal age for sexual activities, for the purpose of perpetrating sexual abuse or of producing child pornography. This proposal must be in any case followed by material acts leading to such a meeting. With this
choice, the negotiators clearly showed how worried they were about the widespread phenomenon of the sexual soliciting of minors, occurring especially in chat rooms. The fight is against the so-called “grooming”, i.e. the strategy used by offenders to gradually approach children and to draw them into discussing intimate matters in order to reduce resistance or inhibitions about sex. In such circumstances, the child may for instance be persuaded to send compromising material, such as personal photos taken with a digital camera, web-cam, etc., and later threatened with their being made public. The negotiators defined this offence in such a way as not to criminalise individuals who simply get in touch with a child and chat about sex with him/her. In other words, the “purpose” of proposing to meet the child to commit any of the specified offences needs to be established before criminal responsibility is incurred.

Lastly, within the framework of the broader action plan aimed at eradicating all forms of violence against children, the COE has recently launched an awareness campaign against corporal punishment, an issue on which the Council of Europe is focusing very closely. This is a very controversial topic, given that several States Parties do not criminalise these practices, because they are in line with traditional and commonly accepted discipline of children. The Council of Europe adopts a definition for corporal punishment which echoes the statement by the Committee on the Rights of the Child in the General Comment No. 8, i.e. corporal punishment is a form of violence, defined as any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light, to a child.

2.A.3. Professional definitions of child abuse at an international level

2.A.3.1 Classification of violence against children

International definitions are important as a common framework. From a non-legal perspective, we find that definitions are devised mainly in the social and health sectors. There are some framework definitions that represent the background of common knowledge, making it easier to overcome cultural gaps and promote co-operation in professional fields.

Acts of violence can be defined (WHO 1996) as the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.

Three broad categories of acts can then be recognised, depending on the context in which they are committed and the characteristics of the relationship between the victim and the perpetrator (WHO, 2002):

- **Self-directed violence** refers to violence where the perpetrator and the victim are the same person. It is subdivided into self-abuse and suicide.
- **Interpersonal violence** refers to violence between individuals. The category is subdivided into family and intimate partner violence, and community violence. The former includes child abuse, intimate partner violence and elder abuse. Community violence is broken down into violence by acquaintances and violence by strangers. It covers youth violence, assault by strangers, violence related to property crimes, and violence in workplaces and other institutions.
- **Collective violence** refers to violence committed by larger groups of people and can be subdivided into social, political and economic violence.

In each category it is possible to identify specific typologies depending on the nature of the behaviour and acts:

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The children are victims of abusive behaviours which are included in all the three general categories.

The numerous bodily examinations carried out by Henry Kempe and his colleagues on children brought to emergency Paediatric Hospital by their caregivers resulted in the so-called Battered Child Syndrome (1962), a kind of historical, professional definition of events resulting in a harm for a child. The Battered Child Syndrome characterises a clinical condition in which children, usually younger than three years of age, have suffered from serious physical abuse. These children typically reveal fractures, subdural haematomas, a failure to thrive, and multiple soft tissue injuries. Skeletal injuries in several locations in different stages of healing are key diagnostic criteria for the battered-child syndrome. Kempe and his colleagues’ work resulted in a fundamental improvement in the acknowledgement of the existence and extent of the abuse of children, especially physical abuse, and medical practitioners were challenged to recognise the incidence of the phenomenon. Since then, researchers have made important progress towards a more analytical identification and understanding of the events, and the building up of shared knowledge. During the 1980s, the focus shifted to child sexual assault when physically abused and neglected children began to reveal that they were often the victims of sexual abuse as well (Finkelhor 1986).

On the occasion of the Council of Europe’s Fourth Criminological Colloquium (1979) on the criminological aspects of the ill-treatment of children in the family, researchers provided another significant definition of violence against children as “all those acts and omissions which negatively affect the child, damaging his/her physical integrity and physical, emotional, cognitive and moral development, and whose expressions are: neglect and/or physical and/or psychological and/or sexual violence by a parent or other caregivers”.

The innovative aspect of this definition is the emphasis placed on the multidimensional aspects of child abuse, although it still recognised the issue as being mainly a problem within the family context and between an adult and a child, ignoring events happening outside the family environment and those committed by a minor against a peer or a younger child.

A well-known, widely cited psycho-social definition of child abuse was formulated during the 1999 WHO Consultation on Child Abuse Prevention, and then updated in the World report on violence and health. It identifies child abuse or maltreatment as “all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power”.

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Krug et al., 2002

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This definition covers a broad spectrum of abuse and captures a wide range of behaviour that can damage, in both the short and the long term, the social, psychological, cognitive and physical development of a child, and leaves out any considerations regarding the presence or not of intentionality in the behaviour. The definition includes attitudes and behaviours which have an active or omissive/neglecting nature, and can occur within or outside of the family. Moreover, it also deals with acts of violence committed by one minor against another minor. In addition to physical abuse, sexual abuse, emotional or psychological maltreatment and neglect, there is also exploitation, including commercial exploitation. Fatal events are also included even though many child deaths are not properly investigated and post-mortem examinations are not carried out. It appears difficult therefore to establish the precise causes and number of fatalities caused by acts of child abuse. In this domain, each country has a system for recording cases, but frequently there is an insufficient investigation to correlate deaths with abuse.

### Fatal events

In the analysis phase, policy makers and professionals must compare data on ill-treatment events which did not lead to the death of the child with the number of fatal events due, on the one hand, to ill-treatment and, on the other hand, to accidental neglect, such as not keeping out of children’s reach medicines or poisonous substances. National data on the numbers of children who die each year as a result of abuse derived from death registration or mortality data. Even if there are few cases where children die as a result of maltreatment, it is important to record these cases and include them in the general data on the national reported cases of child abuse. An investigation each death can identify the presence of specific risk factors, such as the fact that in some countries ill-treatment is likely to occur within the first year of a child’s life.

“Despite the apparent widespread misclassification, there is general agreement that fatalities from child abuse are far more frequent than official records suggest in every country where studies of infant deaths have been undertaken. Among the fatalities attributed to child abuse, the most common cause of death is injury to the head, followed by injury to the abdomen. Intentional suffocation has also been extensively reported as a cause of death” (WHO, 2002).

A number of issues affecting the accuracy and consistency of child fatality data from year to year have been identified and include:

- Variations in reporting requirements and definitions of child abuse and neglect.
- Variations in State child fatality review processes.
- The time (as long as a year in some cases) it may take a fatality review team to declare abuse or neglect as the cause of death.
- Miscoding of death certificates.

“Many researchers and practitioners believe child fatalities due to abuse and neglect are underreported. States’ definitions of key terms such as ‘child homicide’, ‘abuse’, and ‘neglect’ vary (and so, therefore, do the numbers and the types of child fatalities they report). In addition, some deaths officially labelled as accidents, child homicides, and/or Sudden Infant Death Syndrome (SIDS) might be attributed to child abuse or neglect if more comprehensive investigations were conducted or if there were more consensus in the coding of abuse on death certificates” (NAIC, 2004). Studies in Colorado and North Carolina have estimated as many as 50 to 60 percent of deaths resulting from abuse or neglect are not recorded (Crume, DiGuiseppi, Byers, Sirotnak, Garrett 2002; Herman-Giddens, Brown, Verbiest, Carlson, Hooten et al. 1999). These studies indicate that neglect is the most underrecorded form of fatal maltreatment.

As has been just noted, the WHO definition points out that perpetrators are not only parents, but also include a lot of other people (minors or adults) who may be in contact with children. The “relationship of responsibility, trust or power” is one of the main aspects characterising child abuse, because child abuse is also an abuse of confidence.
The enlargement of the semantic domain in order to recognise the phenomenon makes it important to identify the context in which it happens. In literature we find a primary typology, dividing violence into:

- **Intra-familial abuse**, i.e. abuse perpetrated by close family members, relatives, persons known to the child because they are part of the family’s relationships (friend, neighbour etc.). Harmful traditional practices are part of this class as they are generally imposed on children at the insistence of their parents or other close family members;
- **Violence happening outside the family**, as was recently re-proposed in the UN Study on violence. We can distinguish between:
  - Violence at school.
  - Violence in residential facilities (children’s homes, emergency shelters, detention centres for children etc.).
  - Violence in the community (generally it covers three main subcategories: violence against children during organised leisure activities; violence against children in the wider community; violence against children in the workplace).

And in all these settings we can find:

- **Acts of commission**, actions that cause harm, potential harm, or the threat of harm to a child. Acts of commission are deliberate and intentional; however, harm to a child may or may not be the intended consequence of the act.
- **Acts of omission**, i.e. the failure to provide for a child’s basic physical, emotional and educational needs, or to protect a child from harm or potential harm. Like acts of commission, harm to a child may or may not be the intended consequence.

### 2.A.3.2 Defining violence from the experience of the children themselves

Anyway, as stated by the UN Committee for the implementation for the CRC, in conceptualising violence, it is recommended that the critical starting point and frame of reference be the experience of children themselves, as implementation, of the art. 12 of the Convention.

“…in conceptualising violence, the critical starting point and frame of reference must be the experience of children themselves. Therefore children and young people must be meaningfully involved in promoting and strategising action on violence against children” (Committee on the Rights of the Child, recommendations adopted following the day of general discussion on Violence against Children in the Family and Schools, 2001). Children and young people should therefore be involved in research aimed at checking how meaningful the legal and professional definitions used are.

The Committee’s request could be met by promoting research on children’s experiences of child abuse during the preliminary phase of the implementation of a new or updated data collection and monitoring system on child abuse. Another possibility could be to integrate data currently collected with ad hoc surveys on children’s experiences. The approach based on child abuse as medical problem, as previously explained, describes the phenomenon in terms of different types of injuries\(^8\) which provoke specific signs on the body of the victim. In this domain a starting point is the WHO’s definition\(^9\) of injuries:

\(^8\) The Injuries and Violence Prevention Department of the World Health Organization has collaborated with agencies from all continents to develop the tools need to collect data on injuries. The first product of this collaboration is the International Classification of External Causes of Injuries (ICECI), a detailed classification scheme for injuries that complements the existing International Classification of Diseases (ICD). It provides guidance, for both dedicated researchers and practitioners in the field, on how to classify and code data on injuries according to agreed international standards.

An injury is the physical damage that results when a human body is suddenly or briefly subjected to intolerable levels of energy. It can be a bodily lesion resulting from acute exposure to energy in amounts that exceed the threshold of physiological tolerance, or it can be an impairment of function resulting from a lack of one or more vital elements (i.e. air, water, warmth), as in drowning, strangulation or freezing. The time between exposure to the energy and the appearance of an injury is short. [...] for most analysis purposes and for identifying intervention opportunities, it is especially useful to categorize injuries according to whether or not they were deliberately inflicted and by whom. Commonly used categories are:

- unintentional (i.e. accidental);
- intentional (i.e. deliberate);
- interpersonal (e.g. assault and homicide)
- self-harm (e.g. abuse of drugs and alcohol, self-mutilation, suicide)
- legal intervention (e.g. action by police or other law enforcement personnel)
- war, civil insurrection and disturbances (e.g. demonstrations and riots);
- undetermined intent.

(from Holder et al., 2001)

From a health perspective, to prove the link between child maltreatment, health-risk behaviours and certain chronic diseases is one of the most important scientific developments in the investigation of the effects of various forms of child abuse on the individual. The concept of Adverse Childhood Experiences (ACE) is the product of recent research on the correlation between trauma and people’s health. Felitti and colleagues (1998) undertook the so-called Adverse Childhood Experiences (ACE) Study in a primary care setting to describe the long-term relationship between childhood experiences and some important medical and public health problems. The ACE Study assesses, retrospectively and prospectively, the long-term impact of abuse and household dysfunction during childhood on the following outcomes in adults: disease risk factors and incidence, quality of life, health care utilisation, and mortality.

The Adverse Childhood Experiences are harmful and traumatic situations, such as child abuse, severe chronic health diseases, or substance abuse by one or both caregivers, which negatively influence a child’s social, cognitive and emotional development because they transform the child’s environment into an unsafe and unstable setting.

Researchers found a strong, graded relationship between what happened in childhood and some diseases, such as hepatitis, heart disease, cancer, chronic lung fractures, diabetes, obesity, alcoholism, irritable bowel syndrome and fibromyalgia.

These studies and the concept of Adverse Childhood Experiences are relevant for monitoring child abuse as a social and health problem because these experiences are common and have shown a strong long-term association with adult health risk behaviours, health status, and diseases. They require increased attention to primary, secondary, and tertiary prevention strategies. It means that, for monitoring purposes, it is important to detect and count the so-called at-risk situations. At-risk situations are when a child is exposed to unsafe and uncertain living conditions which are not usually defined as violent actions, nor considered to be crimes, but which, nevertheless, must demand protective measures from the child protection agencies and/or Juvenile Courts due to their actual or potential harm to children.

Child abuse is a complex phenomenon, as can be seen from the general definitions presented above. It can be better explained through the use of a typology of its main types, but it is important to highlight that the different forms of child maltreatment are very rarely found separately, occurring more often in combination.

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The traditional typology includes: fatal events due to abuse, physical ill-treatment (which also includes corporal punishment), neglect, psychological ill-treatment, sexual abuse and witnessing violence. Other types of child abuse are also emerging in all European countries and they require special attention: interpersonal violence inflicted by siblings and peers, sexual exploitation in prostitution or for the production of images of sexual abuse, early and forced marriage, children victims of trafficking for various purposes, genital mutilation.

In the next chapter a more operational classification will be discussed.

An example


The National Programme for the Prevention of Violence against Children and Support for them for 2005–2007 (Programme) was developed by a resolution of the Government of the Republic of Lithuania (Official Gazette, 2005, No. 58 – 2021). The main task of the Programme is to establish complex measures to support children who have experienced different forms of violence, to ensure accessibility of services for victims of abuse, to develop multi-disciplinary and inter-institutional cooperation, and to continue awareness-raising campaigns and the education of society in order to make it sensitive to child abuse and adopt a zero tolerant approach towards it.

Priorities of the programme include:

- improving the legal framework for the elimination of violence against children;
- analysing the situation of domestic violence against children all over Lithuania;
- providing comprehensive aid to the victims of domestic violence;
- effective prevention of domestic violence against children;
- building of institutional capacities.

Violence against children is the most concealed form of violence. Only a small percentage of all cases of domestic violence against children are officially recorded in Lithuania. Most cases of violence are not covered by the official crime statistics as victims of violence often do not approach law enforcement bodies or non-governmental organisations. Children avoid speaking about violence; usually people keep silent about these issues, except when injuries sustained by a child are noticed by other people.

In the National Programme, there is an effort to classify the types of violence against children, which are relevant for the actions promoted by the Programme:

- Violence against children – all forms of sexual violence, neglect or neglectful care of the child, other exploitation, bad physical and/or emotional behaviour causing factual or potential harm to the child’s health, survival, development or dignity.

- Physical violence against children – actions causing factual or potential physical damage to the child’s health in the course of interaction (or absence thereof) with the child (according to the World Health Organization, hereafter referred to as the WHO). The nature of the acts of physical violence may vary: hitting, beating, causing injury to and other impact on the external surface and internal organs of the child’s body using physical force, cold steel, firearms or other objects, liquids, substances, etc.

- Emotional violence against children – depreciation, debasement, humiliation, slander, threats, intimidation, isolation, fooling or other non-physical contact hostile behavioural models, actions restricting freedom of movement which cause or create conditions damaging the child’s physical, emotional, mental, spiritual, moral or social and health development (according to the WHO). Forms of emotional violence may vary: continuous criticism, shouting, bullying, neglect of feelings, humiliation and others.

- Sexual violence against children – involvement of developmentally dependent children in sexual activities for which they are not mature, which they do not understand, which they cannot adequately respond to, which violate social taboos and by which the molesters seek to satisfy their own sexual needs and/or gain profit from these activities. Forms of sexual violence: sexual intercourse with penetration
(vaginal, anal and oral intercourse); insertion of objects in genitals; forcing the child to masturbate or to stroke the adult's genitals; stroking, masturbating or kissing the child with the purpose of sexual satisfaction; demonstration of genitals to the child; having sexual conversations with the child and demonstration of indecent gestures.

- Violator - a person using sexual or physical violence against children and/or causing the child to experience physical pain, heavy psychological experiences.

- Neglect of the child - continuous failure to meet the child’s physical and mental needs, thereby threatening the full development of the child: failure to take care of the child’s nutrition, dressing, physical security and health; failure to meet the child’s mental needs, failure to take care of the child’s socialisation and education, abandonment, loss of the child, turning the child out of home.

- Trafficking in children - an offer to purchase or otherwise acquire a child, or the sale, purchase or other transfer or acquisition of the child, recruitment, transportation of the child or keeping the child in confinement, knowing that the child will be involved in prostitution or exploited by gaining profit from the child’s involvement in prostitution or being used for pornography or forced labour, or seeking to do that.

- Prevention – activities aimed at reducing the risk of criminal behaviour by introducing measures to raise public awareness to prevent violence against children.

- Intervention - a range of active therapeutic and other complex support measures for children who have suffered different forms of violence, for their family members and other relatives (friends, classmates etc.) and for violators in order to bring them back to normal life.

- Post-intervention - a range of complex support measures for children who have suffered different forms of violence, for their family members and other relatives (friends, classmates etc.) and for violators in order to protect them from chronic anxiety, to reduce the risk that they would be victim of familiy or extrafamily violence and to bring them back to normal life as soon as possible.
Chapter II. Identification of the issue

Section B. Operational issues

In order to build a good child protection data collection system it is necessary to understand the legal and social frameworks of each country, since it is important that each country creates its system in line with its own legislation. Certain forms of abuse are considered crimes in all Member States, such as sexual exploitation and sexual abuse, while others are not. In addition there is variation which can be explained by cultural beliefs.

Starting from common general international definitions, in both the legal and professional domain, the initial question could be: “In my country, which is the most effective and appropriate way to define this form of maltreatment in line with my country's legal and social framework?”. Every country should strive to answer this question at a very practical level, as this will make it possible to collect the data and answer such questions as:

- What data exist already?
- Are these data available?
- Is it possible to collect these data (in practice)?

Often we think too much about the definitions and not enough about the availability of data. It is important to bear in mind that in order to create a data collection system on child abuse, it is crucial to shift backwards and forwards between definitions and data.

In practical terms, there are some preliminary, basic questions to be answered in the analysis of the existing set of information in order to develop improvements or a new system:

1. In the country, is child abuse defined in laws, binding acts or national guidelines in use? If so, what is defined and how is it defined?
2. What connections exist between the national definitions used, and the international and operational ones (do the former conform to the latter)?
3. Which terms (words) or which categories are there in the national legislation?
   - In criminal legislation against adult perpetrators?
   - In child protection legislation?
4. What kind of data are currently available?
   - Who produces them?
   - How reliable are they?
5. Are there data on the categories of maltreatment choosen to adopt (legal categories, psycho-social categories, others)?
6. Who produces the data that will be of interest? (e.g. the legal system, social workers in the field)
   - How reliable are they?
   - Who can produce these data?

The answers to these questions will provide the raw material to evaluate the status quo and identify the major issues that will need to be managed during the implementation process in order to achieved the desired outcomes.

It is important to recognise that in order to operate a national monitoring and data collection system it is necessary to have more precise definitions than the international ones, i.e. the so-called operational definitions of child abuse are necessary.
2.B.1. From general categories to operational definitions for professionals in the social and health sectors

An operational definition includes a precise description of a value for an event or a characteristic that has to be measured to help the data collectors who measure the characteristics. Their purpose is to eliminate or reduce the risk of ambiguity, and therefore ensure that all data collectors have the same understanding and record the same events.

These kinds of definitions specify what a professional should be looking for and are a tool to decide whether or not a case should be recorded as a case of child abuse. They also help to arrive at a clearer description of events and thereby overcome the risk of ambiguity, while at an operative level they help caseworkers assess a situation and decide what to do.

2.B.1.1 Operational definitions for child abuse

In the following paragraphs operational definitions for the most relevant forms of child abuse are described. The categories considered here include active and passive abuse, i.e. between “commission of injury” and “omission of care”, and they are the most common categories in the existing data collection system based on reported cases of child abuse in the health and social sectors: sexual abuse, physical ill-treatment, psychological ill-treatment, neglect and the witnessing of violence (exposure to domestic violence). The unequal power that adults have in relation to children in our society, above all adults who are in care-giving positions, is an important factor in conceptualising child abuse.

The examples proposed are taken from international and national experiences:

1. the guide on the implementation of preventive strategies, edited jointly by the WHO and the International Society for Prevention of Child Abuse and Neglect (ISPCAN)\(^1\);

2. in England there is a national data collection for children who become the subject of a Child Protection Plan in local authorities in England. The four major categories of abuse and neglect are physical, sexual, emotional, and neglect. Each category is described in the government’s statutory guidance *Working Together to Safeguard Children* (2006). (This guidance also sets out the government’s guidance on how professionals and agencies should respond to child abuse and neglect.) The same national data collection has been repeated annually since 1988 enabling comparisons over time. The key legislation on child welfare, the Children Act 1989, includes statutory provision for systematically collecting information on children in need, including those who have been abused or are in the care of the local authority. Local authorities keep electronic records of social workers’ work with individual children and families. Specific anonymised items of this information are collected centrally by a government ministry (the Department for Children, Schools and Families) and are published in an aggregated form at both local authority and national levels;

3. the classification used in the framework of the National Child Abuse and Neglect Data Systems\(^2\) (NCANDS) in the United States. The NCANDS data collection programme in the United States was begun in 1988, with the first NCANDS report published in 1990. NCANDS data are collected from child protective service (CPS) agencies in all 50 states, the District of Columbia and Puerto Rico. These data, collected annually, cover October 1 to September 30. These data consist of aggregate state-wide and child-specific case level information. The NCANDS aggregate data includes state-wide data collected through a survey referred to as the agency file. Data includes information on funding sources, the number of referrals, including those screened out, and the number of fatalities not reported as

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case data. NCANDS case-level data consist of CPS investigation events at the child level. Only reports that receive an investigation or assessment response from a CPS agency are included. Each record in the data file is referred to as a report-child pair, which indicates that there is a record for each child in each report who receives an investigation or assessment. Each report has a unique ID and more than one child can share the same report ID. Each child also has a unique ID, so the report-child pair is uniquely identified by the combination of the report’s and child’s IDs. The NCANDS addresses five major categories (neglect, medical neglect, physical abuse, sexual abuse, and emotional abuse), plus three additional categorisation for “No alleged maltreatment”, “Other” and “Unknown or missing”;

4. the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS), which is the Canadian nation-wide survey that examines the incidence of reported child maltreatment and the characteristics of the children and families investigated by Canadian child welfare services. In this initiative, data are collected every five years on child maltreatment reported to and investigated by child welfare agencies in Canada. The CIS is a collaborative effort of many partners: the federal, provincial and territorial governments; child welfare services; university-based researchers; the First Nations Child & Family Caring Society; and child advocacy groups. The CIS is a national child health surveillance initiative of the Public Health Agency of Canada. It complements national surveillance programmes with regard, among other things, to unintentional injury, perinatal health and infectious diseases. The CIS addresses the five forms of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence. The study collects information pertaining to reports of the services, using a standard data collection tool completed by child welfare workers. The CIS-2003 definitions of child maltreatment include 5 categories and 25 forms of maltreatment.

2.8.1.1.1 Sexual abuse (including exploitation)

A first general categorisation (Russell, 1984; Finkelhor, 1991) distinguishes between contact and non-contact sexual abuse as follows.

Contact sexual abuse is the touching of the sexual portions of the child’s body (genitals or anus) or the touching of the breasts of pubescent females, or the child’s touching the sexual portions of a partner’s body. Two types of contact abuse can be identified:

- Penetration, which includes penile, digital, and object penetration of the vagina, mouth, or anus.
- Non-penetration, which includes fondling of sexual portions of the child’s body, sexual kissing, or the child’s touching the sexual parts of a partner’s body.

Non-contact sexual abuse includes exhibitionism, voyeurism, and the involvement of the child in the making of pornography; verbal sexual propositions or harassment (such as making lewd comments about the child’s body) are included as well.

There is an on-going debate as to what constitutes sexual abuse and what does not. As remarked by several scholars, this indicates a lack of consensus with regard to some characterising elements, such as: the role of culture in determining whether a particular action constitutes sexual abuse; how to define community norms and standards and the extent to which they should determine in any given situation what constitutes sexual abuse or not; whether behaviour (both intentional and unintentional) that is not aimed at sexual arousal should constitute sexual abuse, such as appearing

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naked before a young child; the flexibility of existing typologies, which must be able to cover new forms as well, such as sexual harassments through new technologies (grooming).

Descriptions of Sexual Abuse

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<tbody>
<tr>
<td>The involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared, or else that violates the laws or social taboos of society. Children can be sexually abused by both adults and other children who are – by virtue of their age or stage of development – in a position of responsibility, trust or power over the victim.</td>
<td>Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.</td>
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<tbody>
<tr>
<td>Penetration: penile, digital or object penetration in vagina or anus</td>
<td>A type of maltreatment that refers to the involvement of the child in sexual activity to provide sexual gratification or financial benefit to the perpetrator, including contacts for sexual purposes, molestation, statutory rape, prostitution, pornography, exposure, incest, or other sexually exploitative activities.</td>
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<tr>
<td>Attempted penetration</td>
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<td>Oral sex: oral contact with genitals by either perpetrator or by the child</td>
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<tr>
<td>Fondling: touching or fondling of genitals for sexual purpose</td>
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<tr>
<td>Sex talk: verbal or written proposition, encouragement, or suggestion of a sexual nature (includes face to face, phone, written and internet contact, as well as exposing the child to pornographic material)</td>
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<tr>
<td>Voyeurism: includes activities where the alleged perpetrator observes the child for the perpetrator’s sexual gratification</td>
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<tr>
<td>Exhibitionism: includes activities where the perpetrator is alleged to have exhibited himself/herself for his/her own sexual gratification</td>
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<tr>
<td>Exploitation: includes situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.</td>
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</table>

From the examples above, it is evident that the professional operational definitions are usually more analytical than the legal, for example those examined in the previous chapter. The descriptions indicate that there are at least four key characteristics for the acts detected as sexual abuse against children:

1. contact or non-contact acts for explicit or non-sexual purposes
2. events happening between a child and an adult and also between minors
3. they do not require evidence of force or coercion
4. they can happen as exploitation, e.g. in prostitution or for the production of child abuse images.

2.8.1.1.2 Physical abuse

Physical abuse includes a wide range of actions and non-actions (e.g. a caretaker creates situations, or allows them to be created, whereby a child is likely to be in risk of danger), which deliberately result in harm or illness for a child.
### Descriptions of Physical Abuse

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<tr>
<td>Physical abuse of a child is defined as the intentional use of physical force against a child that results in – or has a high likelihood of resulting in – harm for the child’s health, survival, development or dignity. This includes hitting, beating, kicking, shaking, biting, strangling, scalding, burning, poisoning and suffocating.</td>
<td>Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.</td>
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<tbody>
<tr>
<td>- Shake, push, grab or throw: includes pulling or dragging a child as well as shaking an infant</td>
<td>Type of maltreatment that refers to physical acts that caused or could have caused physical injury to the child.</td>
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<tr>
<td>- Hit with hand: includes slapping and spanking but not punching</td>
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<tr>
<td>- Punch, kick or bite: also includes hitting with other parts of the body</td>
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<tr>
<td>- Hit with an object: includes hitting with a stick, a belt or other object, throwing an object at a child, but does not include stabbing with a knife</td>
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<tr>
<td>- Other physical abuse: any other form of physical abuse including choking, strangling, stabbing, burning, shooting, poisoning, and the abusive use of restraints</td>
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</table>

The key features of the behaviours described above are:
1. the intentional use of physical force against a child and also behaviour or choices that cause harm to the child, such as fabricated or induced illnesses (Munchausen Syndrome by Proxy);
2. acts that can be justified as discipline or education (i.e. corporal punishment).

It is worth noting that only the WHO and ISPCAN definitions state that the harm caused by physical abuse should be understood not only physically, but also as harm against the child’s survival, development and dignity.

### 2.8.1.1.3 Neglect

Neglect is one of the most widespread forms of child abuse. In the CIS-2003 the results indicated that in 2003 neglect was the most common form of substantiated maltreatment in Canada. Nearly one third (30%) of all cases in which maltreatment was substantiated involved neglect as the primary category of maltreatment. For the year ending 31 March 2008, in England neglect is the most frequently used category of abuse or neglect, accounting for 44% (check) of children becoming the subject of a Child Protection Plan during 2007-08. A similar incidence is observed in specific surveys and other nationwide experiences. In the United States, for example, the data collected via the National Child Abuse and Neglect Data System showed that for the fiscal year 2005, out of the estimated 899,000 children who were deemed to be victims of abuse or neglect, 62.8 % experienced neglect. These data reveal the need for a well-defined description of behaviour that should be recognised as neglect. The task is not easy, however, due to the strong influence of cultural and historical factors.

The descriptions of the events distinguish primarily between two main categories of neglect: physical and emotional/psychological. Each has various levels of specification in the ongoing experiences.
### Descriptions of Neglect

**WHO and IPSASHINGTON guide (2006)**

Neglect includes both isolated incidents, as well as a pattern of failure over time on the part of a parent or other family member to provide for the development and well-being of the child — where the parent is in a position to do so — in one or more of the following areas: health, education, emotional development, nutrition, shelter and safe living conditions.

**Working Together to Safeguard Children (2006)**

The persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development.

Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate care-givers)
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

### CIS-2003

Situations in which children have suffered harm, or their safety or development has been endangered as a result of the caregiver’s failure to provide for or protect them.

The category comprises 8 forms of neglect.

- **Failure to supervise-physical harm**: the child suffered or was at substantial risk of suffering physical harm because of the caregiver’s failure to supervise and protect the child adequately including situations that are the result of a caregiver’s actions (“drunk with a child, or engaging in dangerous criminal activities with a child”).
- **Failure to supervise-sexual abuse**: the child has been or was at substantial risk of being sexually molested or sexually exploited, and the caregiver knew or should have known of the possibility of sexual molestation and failed to protect the child adequately.
- **Physical neglect**: the child has suffered or was at substantial risk of suffering physical harm caused by the caregiver(s)’ failure to care or provide for the child adequately. This includes inadequate nutrition/clothing, and unhygienic or dangerous living conditions. There must be evidence or suspicion that the caregiver is at least partially responsible for the situation.
- **Medical neglect**: the child required medical treatment to cure, prevent or alleviate physical harm or suffering, and the child’s caregiver did not provide, refused or was unavailable or unable to consent to the treatment, including dental services.
- **Failure to provide psychological / psychiatric treatment**: the child was at substantial risk of suffering from emotional harm as demonstrated by severe anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or a mental, emotional or developmental condition that could seriously impair the child’s development. The caregiver did not provide, or refused, or was unavailable or unable to consent to treatment to remedy or alleviate the harm. This category can include failing to provide treatment for school-related problems such as learning and behavior problems, as well as treatment for infant development problems such as non-organic failure to thrive.
- **Permitting criminal behaviour**: the child committed a criminal offence with the encouragement of the child’s caregiver or because of the caregiver’s failure or inability to supervise the child adequately.
- **Abandonment**: the child’s parent died or was unable to exercise custodial rights and did not make adequate provisions for care and custody, or the child was in placement and the caregiver refused or was unable to take custody.
- **Educational neglect**: the caregiver allowed truancy, kept the child at home, failed to enrol him.

### NCANDS (2005)

1. **Neglect** — A type of maltreatment that refers to the failure by the caregiver to provide needed age-appropriate care although financially able to do so, or offered financial or other means to do so.
2. **Medical Neglect** — A type of maltreatment caused by failure by the caregiver to provide for the appropriate health care of the child although financially able to do so, or offered financial or other means to do so.
Briefly, almost all the descriptions above suggest a wide range of behaviours and attitudes on the part of the caregiver that can have an actual or potentially negative effect on a child. Failure with regard to physical and/or emotional care may be unintentional as well as intentional. It can be the result of behavioural problems of the caregiver, which are not immediately directed against the child (e.g. alcohol dependence), or of his/her incapacities or inabilities (e.g. a parent with a psychiatric illness).

Some forms of neglect can be considered part of the so-called “situations at risk of ill-treatment”, where the living conditions (e.g. extreme poverty, proximity to criminal contexts such as prostitution etc) and the caregiver’s behaviour cannot be assessed as a specific form of actual ill-treatment, nor as a crime, but which are such that there is considerable risk of ill-treatment of a child. In these cases, the statutory services responsible for the protection of children are asked to intervene, generally through administrative or civil provisions and measures.

2.8.1.1.4 Emotional/psychological abuse

Another type of child abuse, which rarely has a judicial definition, is emotional/psychological abuse. As noted by CIS researchers, it is also a difficult category to document “because often it does not involve a specific incident or a visible injury. In addition, the effects of emotional maltreatment, although often severe, tend to become apparent over time”. In this type of abuse, too, it is important for the definition to cover both abuse perpetrated by an adult and abuse perpetrated by another minor. In the background documents considered here, we find the following definitions:

<table>
<thead>
<tr>
<th>Description of emotional/psychological abuse</th>
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<tbody>
<tr>
<td><strong>WHO and IPSCAN guide (2006)</strong></td>
</tr>
<tr>
<td>Emotional and psychological abuse involves both isolated incidents, as well as a pattern of failure over time on the part of a parent or a caregiver to provide a developmentally appropriate and supportive environment. … Abuse of this type includes: the restriction of movement; pattern of belittling, blaming, threatening, frightening, discriminating against or ridiculing; and other non-physical forms of rejection or hostile treatment.</td>
</tr>
<tr>
<td><strong>Working Together to Safeguard Children (2006)</strong></td>
</tr>
<tr>
<td>The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.</td>
</tr>
</tbody>
</table>

| **CIS (2003)** |
| − “Emotional abuse: the child has suffered or was at substantial risk of suffering from mental, emotional or developmental problems caused by overtly hostile, punitive treatment or habitual or extreme verbal abuse. |
| − “Non-failure to thrive: a child under 3 has suffered a marked retardation or cessation of growth for which non-organic reasons can be identified.” If the problem was inadequate nutrition, then it is physical maltreatment. |
| − “Emotional neglect: the child has suffered or was at substantial risk from mental, emotional or developmental problems caused by inadequate nurturance/affection. If treatment was offered, but caregivers were not cooperative, cases were classified under failure to provide treatment as well”. |
| − Exposure to non-intimate violence (between adults other than caregivers). |

| **NCANDS (2005)** |
| − Type of maltreatment that refers to acts or omissions, other than physical abuse or sexual abuse, that caused, or could have caused, conduct, cognitive, affective, or other mental disorders. Includes emotional neglect, psychological abuse, mental injury, etc. Frequently occurs as verbal abuse or excessive demands on a child’s performance and may cause the child to have a negative self-image and disturbed behaviour. |
2.B.1.5 Witnessing violence

Only the CIS-2003 data collection considers situations in which a child witnesses violence against a caregiver or a relative (minor or adult) among the main categories. It defines this type of child abuse as exposure to domestic violence. The researchers noted that although exposure to domestic violence is often categorised as a form of emotional maltreatment, most Canadian jurisdictions have developed policies and practices specifically for exposure to domestic violence. The description formulated is as follows:

“Exposed to domestic violence: a child has been a witness to violence occurring between the caregivers. This would include situations where the child indirectly witnessed the violence (e.g. saw the physical injuries on his/her caregiver the next day or overheard the violence)”.

A few countries recognise witnessing violence as a specific type of abuse (for example, Cyprus and Italy), but only as a reason for the adoption of specific protective measures and not as a crime itself.

In England, seeing or hearing the ill-treatment of another, i.e. in domestic violence, is legally defined as harm to a child, however, the national statistics classify it as emotional abuse if there is no actual physical abuse of the child involved.

2.B.1.2 The WHO International Classification of Diseases and Related Health Problems (ICD)

The ICD is the global standard to report and categorise diseases, health-related conditions and external causes of disease and injury in order to compile useful health information related to deaths, illness and injury (mortality and morbidity). The purpose of ICD is to permit the systematic recording, analysis, interpretation and comparison of mortality and morbidity data collected in different countries or areas and at different times. The ICD is used to monitor the incidence and prevalence of child maltreatment and to assess its association with other variables. Many countries use guidelines for coding and reporting, based on the ICD in either its 9th or 10th revision.

In the ICD the short and long term effects of maltreatment are documented. The data are used to monitor the incidence and prevalence of child maltreatment and to assess its association with other variables, including the characteristics and circumstances of the children and the families affected. The two main components of an ICD classification concern the nature of the condition (for instance, traumatic subdural haemorrhage) and its external cause. Information is also included about the relationship of the perpetrator to the victim, where this is known.

The use of ICD is limited for use as a general monitoring system on child abuse. It can only cover part of the possible observations because the assignment of ICD codes to a case is done after medical assessment of the child’s situation. The classification considers several different types of injuries and traditional forms of maltreatment as follows:

- **T74 Maltreatment syndromes**
  - T74.0 Neglect or abandonment
  - T74.1 Physical abuse
    - Battered:
      - baby or child syndrome
      - spouse syndrome
  - T74.2 Sexual abuse
  - T74.3 Psychological abuse
  - T74.8 Other maltreatment syndromes
    - Mixed forms
  - T74.9 Maltreatment syndrome, unspecified
    - Effects of:
      - abuse of adult NOS
      - child abuse NOS.

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5 28 Under the auspices of the International Paediatric Association, the British Paediatric Association has published an application of ICD – 10 for paediatrics. This follows similar applications prepared by the BPA for past versions.
With regard to injuries, the ICD also supports the assessment of the level of severity of an injury, measured using the ICD Injury Severity Score (ICISS).

### 2.8.1.2.1 Reporting in the health sector

It is worth mentioning that in some countries (at national or a more decentralised level) some health services (General Hospital, Emergency or Paediatric Hospital) have adopted specific registration or notification forms to report to the police or social services all the cases of validated or suspected ill-treatment or sexual abuse against a child (see Annexes for some examples of registration forms).

Most of them contain items with the general typology of possible or confirmed child abuse (e.g. neglect, physical ill-treatment etc) and a correlated list of signs on the state of the child (e.g. lack of hygiene) or which are observed clinically on the body of the child (e.g. bruises, bone fractures, venereal diseases etc).

<table>
<thead>
<tr>
<th>The French-speaking community of Belgium's SOS-Children's classification. The risk of maltreatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>If maltreatment of children is viewed as a social problem and country’s wish to emphasise its prevention, it is important to record situations in which there is a risk of maltreatment.</td>
</tr>
<tr>
<td>Risk of maltreatment means:</td>
</tr>
<tr>
<td>1. the likelihood that maltreatment might occur;</td>
</tr>
<tr>
<td>2. the likelihood that maltreatment might reoccur in the future.</td>
</tr>
<tr>
<td>In the first category the maltreatment has not been substantiated, but a professional identifies a set of conditions related to the parent(s), family or child that support the hypothesis that the child needs help to prevent possible maltreatment.</td>
</tr>
<tr>
<td>In the French-speaking community of Belgium, the SOS-Children teams collect data about maltreated children they take care of, including children at risk of maltreatment.</td>
</tr>
<tr>
<td>The second category refers to situations that a professional has already substantiated child abuse and for whom there is a danger that the child abuse could reoccur and be reported again to services. Here, the variable is recording over time all new referrals of the child to the local protection agency.</td>
</tr>
<tr>
<td><strong>Child at risk of maltreatment</strong> (when the child is exposed to)</td>
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<tr>
<td>Conjugual conflict</td>
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<td>Domestic violence</td>
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<td>Alcohol abuse</td>
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<tr>
<td>Mental illness</td>
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<tr>
<td>Medical pathology</td>
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<tr>
<td>Economic poverty</td>
</tr>
<tr>
<td>Parental immaturity</td>
</tr>
<tr>
<td>Lack of sociability</td>
</tr>
<tr>
<td>In the SOS classification, actual harm is:</td>
</tr>
<tr>
<td><strong>Physical maltreatment</strong></td>
</tr>
<tr>
<td>Hitting, pinching, scratching</td>
</tr>
<tr>
<td>Biting</td>
</tr>
<tr>
<td>Strangling (or trying to strangle)</td>
</tr>
<tr>
<td>Torturing</td>
</tr>
<tr>
<td>Burning</td>
</tr>
<tr>
<td>Giving bad substances (Munchausen syndrome)</td>
</tr>
<tr>
<td>Shaken baby syndrome</td>
</tr>
<tr>
<td>Other physical maltreatment</td>
</tr>
</tbody>
</table>
2.B.1.3 Other technical issues for defining the events to be counted and monitored

2.B.1.3.1 Which measurements can be estimated and which cases can be detected

When researchers analyse the phenomenon of child abuse, they usually distinguish between the incidence and the prevalence of child abuse as measurements to be estimated. Incidence is a measure of the amount of new cases in a specific period of time. It answers the question: how many children are known to have been neglected, physically ill-treated or sexually abused in the country during a specific year? Changes in the figures related to the new cases do not necessarily mean that the actual incidence of child abuse and neglect has increased over time, but they do show that the reporting of cases to child protection services and authorities has increased.

Prevalence is usually an estimate referring to the possible percentage of individuals that have suffered one or multiple forms of child abuse in a given population. One central question could be: how many people (children and/or adults) have been physically ill-treated (neglected or sexually abused) during their childhood? We must ask the children and/or adults about their experiences in childhood.

From a theoretical perspective, a surveillance system should be based on routine data collection on new cases and population-based surveys to collect information and assess the following aspects (ISPCAN and WHO 2006):

- the prevalence of child maltreatment, e.g. through surveys using probability samples of children who report their ongoing experiences; parents who will be questioned about their attitudes and behaviour towards their children (e.g. using the Parent-Child Conflict Tactics Scale (Straus, et al., 1996) or ISPCAN Child Abuse Screening Tools (2006)), or a sample of women and men among the general population to gather information about their experiences during childhood (e.g. retrospective research using the Adverse Childhood Experiences questionnaires);
- the association between past maltreatment and high-risk behaviour;
- the association between past maltreatment, high-risk behaviour and current health status (e.g. the ACE study).

The incidence of new cases can also be usefully calculated for specific subgroups of children to monitor the level of safety of those children. These data can help to establish national quality or safety standards linked to the incidence of child abuse or neglect within the specific subgroup. For example, it can be undertaken with children in foster care because governments and local authorities have the power to control the quality of such services. In the USA, the Children’s Bureau established a Federal standard for the absence of maltreatment in foster care, defined as the Absence of Maltreatment in Foster Care, a parameter responding to the question: of all children in foster care during the reporting period, what percent were not victims of a substantiated or indicated maltreatment by foster parents or facility staff members? The USA standard requires that at least 99.68 % of all children in foster care must not be the victims of child abuse by staff or foster parents. According to the most recent data collection, the

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number of States in compliance has increased from 16 States that met this standard in the year 2004 to 19 States for 2006.

France: the longitudinal monitoring system for children “in danger” (Système d’observation longitudinale des enfants en danger – SOLED)*

The French Observatoire national de l’enfance en danger, created in 2004 by Act No. 2004-1 of 2 January 2004 on the care and protection of children, which established the National Monitoring Centre for At-risk Children (the main objectives of the ONED are to support Public Administrations in introducing policies for the protection of children, to collect qualitative and quantitative data on children at risk and victim of abuse, and to produce reports and research) is in the process of developing a longitudinal monitoring system for children “in danger” (Système d’observation longitudinale des enfants en danger – SOLED). Such a system will make it possible to integrate the data collected on children and their families by various child protection authorities using a panel of French departments. As part of the proposed monitoring system, the population of at-risk or abused children is defined as minors aged 18 or under for whom child welfare measures are in place or for whom a legal decision to initiate a child assistance procedure has been made.¹

This project is based on data collected by child protection authorities (general councils, family courts, public prosecutors, departmental juvenile justice authorities). Its purpose is to analyse the population of children identified by these institutions as being “in danger”, following an assessment of their situation. The risk situation assessed prior to each decision will be determined with the aid of a question designed to provide information on the author of the presumed risk, as well as a series of six questions designed to characterise the “danger”:

1- Suspicion of sexual violence against a child
   - yes
   - no
   - don’t know

2- Suspicion of physical violence against a child
   - yes
   - no
   - don’t know

3- Suspicion of serious neglect of a child
   - yes
   - no
   - don’t know

4- Suspicion of psychological violence against a child
   - yes
   - no
   - don’t know

5- Suspicion of inadequate parenting without obvious abuse
   (can only be checked if “yes” has not been checked for 1-2-3-4)
   - yes
   - no
   - don’t know

6- Suspicion of risk resulting from the child’s own behaviour
   - yes
   - no
   - don’t know

A child is assumed to be at risk if the presumed author of the suspected maltreatment or deficient parenting is a figure of parental authority (within the family and, more generally, a person with authority over the child) and if at least one of the six questions on the different forms of “danger” is answered in the affirmative.

In order to achieve the study’s objectives, the data on children collected at the institutional level will need to be individual, anonymised, longitudinal and centralised within the various departments.

In order to reconstitute individual trajectories and to be exhaustive, ONED has urged the departments included in the panel and, indeed, all those who would wish to have such information at their disposal, to centralise the data within each department. Ensuring that the data are dated and regularly providing ONED with individual, anonymised data extracted from departmental databases will make it possible to input the data according to their date of arrival and to carry out a longitudinal study of the trajectory of children in care.

¹ Decision of the judge for children pursuant to section 375 of the Civil Code.
The individual data relate to each child and situate that child in his or her family and social environment. These data characterise the child on an individual basis (for example, sex, age and education), as the child of two parents (for example, parents’ conjugal situation, number of brothers and sisters, parents’ professions), in his or her social and family environment in the case of children who have not been placed (for example, number of persons in the child’s residence(s) of reference, living conditions, nature of the conjugal bond between the adults in the household...).

A longitudinal approach will make it possible to characterise the child at the time of each “child protection event” (i.e. when a disclosure of concern is received, when the situation has been assessed by a professional but before an intake decision has been made, when changes in care arrangements are made).


2.8.1.3.2 Incidence analysis: the unit of observation

Under the generic word “case”, the authorities and professionals involved in the implementation of a data collection and monitoring system will face the need to choose the core-unit of the system. In existing experiences, there are two main options in the social-health sector:
to count the children reported
to count the child investigations completed by professionals in the source-service (it does not matter whether they are on the same child or the number of children involved).

Which are the pertinent cases?
The total universe of relevant cases for the data collection system includes:

A. Reported cases
B. Unreported cases (events which are also known to a third person, but not referred to anyone)
C. Unknown cases (i.e. those which are known only to the victim and the perpetrator).

The cases reported to agencies can be further differentiated into four categories:

1. Cases substantiated by an investigation that concludes that the allegation of maltreatment or risk of maltreatment was supported or founded according to State law or administrative measures and State policy.
2. Cases suspected as child abuse, but for which there is insufficient evidence.
3. Cases not substantiated after investigation. The investigation determines that there is insufficient evidence under State law or policy to conclude that the child has been maltreated or is at risk of being maltreated.
4. Not relevant: cases screened out before an investigation starts because they are evaluated as not relevant.

From a legal perspective, the situation must be substantiated in order to prosecute the perpetrator, while, from a psycho-social point of view, it is sufficient that the maltreatment is suspected in order to act to protect the child. In some national protection systems, such as in Italy, although cases may not be substantiated during criminal proceedings, protection agencies can continue to take care of the child, especially if s/he continues to show painful feelings or abnormal behaviour. The caseworkers can handle these cases as situations in which the entire family needs support and supervision through decisions adopted autonomously by the protection agency or decided on by the Juvenile/Family Courts.
It is also possible to have several groups of units to assess as relevant cases:

- **Child**: Reported (relevant and not relevant), Not Substantiated, Suspected (not substantiated, but the situation remains in charge), Substantiated;
- **Investigation**: Reported (relevant and not relevant), Not Substantiated, Suspected (not substantiated, but the situation remains in charge), and Substantiated.

Obviously, the number of cases vary according to the definitions adopted. Each category, and changes over time, highlight different types of information: variations in the total number of reported cases could be illustrative of the level of awareness and sensitivity concerning child abuse or neglect or provide information on the effects of alarmist reactions. An analysis of the various categories also provides information on the effects of changes in policies, administrative rules or procedures, or in the attitude of professionals: for example, a cut in financial and human resources for children in need and social services could lead to a reduction in the substantiated situations.

### The ratio between substantiated and unsubstantiated cases

In 2003, the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003) tracked 14,200 child maltreatment investigations conducted in a representative sample of 63 child welfare service areas across Canada. It was estimated that in 2003, there were 235,315 child investigations across Canada, a rate of 38.33 investigations per 1,000 children. Forty-seven percent of these investigations were substantiated, involving an estimated 103,298 child investigations, an incidence rate of 21.71 substantiated investigations per 1,000 children.

Comparing these findings with those of the 1998 CIS Study, the rate of substantiated maltreatment in Canada, excluding Quebec, increased by 125%, from 9.64 substantiated cases per thousand children in 1998 to 21.71 in 2003. The researchers explain this increase in documented maltreatment by improvements in reporting and investigation procedures, such as: changes in case substantiation practices; more systematic identification of victimised siblings, and greater awareness of emotional maltreatment and exposure to domestic violence.

While the number of cases of substantiated maltreatment increased dramatically, it is important to note that many of these children came to the attention of child welfare authorities for preventive intervention before they had been severely harmed. Physical harm was noted in 10% of cases of substantiated maltreatment. In 3% of cases, physical harm was severe enough to require medical intervention. Emotional harm was noted in 20% of substantiated cases.
Overall, in 13% of investigations it was not possible to determine whether or not maltreatment had occurred. The rate of suspected maltreatment was fairly consistent across most forms of maltreatment, with the highest rates in cases involving emotional maltreatment or multiple forms of maltreatment.

Rates of substantiation vary from 20.3% for child sexual abuse to a 75.9% in cases of exposure to domestic violence. The unusually high substantiation rate in cases involving exposure to domestic violence appears to be partially due to important conceptual differences in the basis for substantiation. It may be that the occurrence of domestic violence rather than child maltreatment due to exposure is being substantiated. Physical abuse, neglect and emotional maltreatment were substantiated at similar rates, 37%, 40% and 44% respectively. Rates of substantiation were significantly higher in cases involving multiple forms of maltreatment (59%).

Sixty-one percent of substantiated investigations involved families known to have had previous contact with child welfare services.

The relationship between the characteristics of each case and the decision to substantiate maltreatment was examined in two stages: first, using a bivariate analysis, then introducing a Logistic Regression to examine the characteristics that were related to the likelihood that maltreatment would be substantiated rather than unfounded. Results from the logistic regression analysis showed that a number of referrals and family background characteristics were related to the decision to substantiate maltreatment. Referrals from other professional sources (health, mental health, community agencies) and the police were more likely to be substantiated, with police referrals being almost 4 times more likely to be substantiated than referrals from any other source. Housing risk had a dramatic effect on substantiation status, with the odds of substantiation being more than 3 times higher in cases involving two or more risk factors (overcrowding, safety problems, multiple moves, public housing or shelter).


Another crucial subgroup of cases are those reported multiple times to services and authorities, i.e. the rate of recurrence. The concept of recurrence depends upon the time span considered as sufficient for assessing new information on abuse as a re-referral on the same case and not as a new case. The rate of recurrence, defined as a second substantiated or reported maltreatment, will be more likely the longer the time span chosen as the period for re-occurrence (e.g. the likelihood of re-occurrence will be less likely within a 6-month period than within a one-year period).

A recent review of sixteen cohort studies (Hindley, Ramchandani, Jones, 2006) investigating factors associated with substantiated maltreatment recurrence in children found that four factors were most consistently identified as predicting future maltreatment: number of previous episodes of maltreatment; neglect (as opposed to other forms of maltreatment); parental conflict; and parental mental health problems. Children maltreated previously were approximately six times more likely to experience recurrent maltreatment than children who had not previously been maltreated. The risk of recurrence was highest in the period soon after the index episode of maltreatment (within 30 days), and diminished thereafter.

2.B.1.4 The fundamental variables

As was anticipated in the previous section, a complete representation of child abuse requires data concerning:

- Socio-demographic characteristics of child victim
- Socio-demographic characteristics of author
- Characteristics of child abuse perpetrated and in which setting
- Information on the intervention taken (e.g. professionals or services involved, measures taken etc).

This set of information is essential:

- to formulate primary, secondary and tertiary prevention programmes;
- to determine the level of selective vulnerability according to subgroups of children;

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• to identify risk and protective factors and to evaluate their incidence;
• to monitor and assess the effectiveness of policies and intervention;
• to carry out a follow-up.

From the literature and ongoing experiences, the minimum set of variables that should be recorded in substantiated and suspected cases of child maltreatment are related to five macro-items, each one of which is measured by means of typical variables: characteristics of the child; circumstances of the abuse or of the risk; characteristics of the alleged perpetrator or perpetrators; characteristics of the caregiver; characteristics of the household.

The main typifying variables of each macro-item are:

a. Characteristics of the child
   - Age
   - Sex
   - Nationality
   - Housing status
   - Educational status
   - Previous reports of maltreatment
   - Physical or developmental disabilities

b. Circumstances of the abuse or of the risk
   - Source of reporting
   - Form(s) of child abuse
   - Settings where it happens
   - Status of report (for example, “suspected” or “substantiated”)
   - Severity of harm
   - Duration of child abuse
   - Investigating agencies
   - Intervention taken

c. Characteristics of alleged perpetrator or perpetrators
   - Age
   - Sex
   - Level of education
   - Marital status
   - Relationship to child
   - Employment status
   - Nationality
   - Previous allegations of similar offences
   - Specific social or health problems (e.g. drug or alcohol addiction)

d. Characteristics of caregiver
   - Age
   - Sex
   - Level of education
   - Marital status
   - Relationship to child
   - Employment status
   - Nationality
   - Previous allegations of similar offences
   - Specific social or health problems (e.g. drug or alcohol addiction)

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e. Characteristics of household

Household income
Number of people in household
Presence of other children in household and their relationship to child
Housing accommodation
Previous reports of maltreatment
Presence of domestic violence

2.B.1.4.1 The child and his/her conditions

To monitor the trends of the phenomenon and its impact it is important to identify clearly who is a child victim and a simple set of variables that make it possible to discriminate individual characteristics, such as at least gender and age. The UN Committee for the implementation of CRC recommended that several countries collect data to enable these aspects to be evaluated as well since in most countries the statistics are not age and gender sensitive. 

According to the Convention on the Rights of the Child, children are defined as being those up to 18 years of age.

In national legislation some crimes, or aggravating circumstances or penalties, vary according to different age limits. It could therefore be useful to collect data for each age in order to maintain the possibility to make different aggregations for different research aims.

Demographic statistics often tend to aggregate minors and young into groups. In order to have age groups that are meaningful for the problem of the detection of child abuse, it is essential to pay attention to the upper limit of the final age group, which should be 17 in order to distinguish age groups related to all minors up to the age of eighteen. Moreover, the aggregation in groups could be coherent with the corresponding children’s distribution according to their age in schools, i.e. the first age group could refer to children in educational facilities before they enrol in primary school, the second to the age of children in primary school etc. These kinds of aggregation, especially if there is also data on the role of (who is) the person reporting the case to police or social services or hospital, can also provide some information on the propensity or ability to detect situations in different school contexts.

In this field, a shift from a gender blind to a gender sensitive approach is also needed. It is important to differentiate between:
Gender-sensitive data collection, which explores what gender roles are and allows data to reflect the different experiences of boys and girls (for example, different rates of exposure to victimisation according to different types of violence). Gender sensitive data monitoring implies the possibility of collecting a different range of variables according to gender in order to investigate all aspects of a particular condition experienced by a boy or a girl.
Sex-disaggregated data collection, which involves collecting the same data for girls and boys, distinguishing them by gender.

Another dimension that the CRC Committee has recommended should be investigated and recorded with regard to children is the one that indicates the social vulnerability of certain groups:

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10 The need for sex-disaggregated data has been stressed in numerous international conventions and declarations, including the 1979 Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the 1993 Declaration on the Elimination of Violence against Women, the 1995 Platform for Action of the Fourth UN World Conference on Women in Beijing. And more recently, Resolution on Trafficking in women and girls adopted by the General Assembly [on the report of the Third Committee (A/61/438)] 81st plenary meeting, 19 December 2006.
Article 2: the obligation of States to respect and ensure the rights set forth in the Convention to each child within their jurisdiction without discrimination of any kind. This non-discrimination obligation requires States actively to identify individual children and groups of children the recognition and realization of whose rights may demand special measures. For example, the Committee highlights, in particular, the need for data collection to be disaggregated to enable discrimination or potential discrimination to be identified...

(COMMITTEE ON THE RIGHTS OF THE CHILD, Thirty-fourth session, 19 September-3 October 2003, GENERAL COMMENT No. 5 (2003), General measures of implementation of the Convention on the Rights of the Child (Art. 4, 42 and 44, para. 6))

The data must then be further qualified according to specific individual characteristics of the child. Firstly: if the child has a disability or s/he belongs to some specific ethnic or social group, for example, the child is a Roma, an unaccompanied minor, or in care. When a data collection reflects that children belong to a specific vulnerable group, it satisfies, at least tentatively, the principle of inclusiveness: if “vulnerable” groups are invisible at the data collection stage, they are likely to be so in the planning stage. Furthermore, the identification and categorisation of specific characteristics of the child, caregivers or living context will also make it possible, as will be described later, to assess the specific risk or protective factors influencing the effect of actions and policies.

Lastly, wherever possible, national statistics on the state of children should also be disaggregated by: socio-economic group, national and/or regional origin, and geographical coverage.

2.B.1.4.2 The relationship between child and perpetrator

In order to improve the quality of data collection and monitoring of child abuse it is important to collect information on the relationship between the perpetrator and the child, i.e. the classification of the perpetrator according to some specific categories, such as: biological or adoptive or foster parent, other family members, siblings, caregivers (such as babysitters, teachers, health care workers etc), guardian or others in authority (police officers, clergy etc), strangers.

The perpetrators may be subdivided into three general categories according to the socio-legal nature of the relationship they have with the child:

1. Person responsible for a child’s health, welfare or care means:
   - the child’s parent, guardian, foster parent, an employee of a public or private residential home, agency or institution, or other person legally responsible under State law for the child’s welfare in a residential setting; or any staff person providing out-of-home care, including centre-based child day care, family day care, or group day care;
   - a school employee who holds a certificate, permit or authorisation issued by the State Board of Education; or a staff member of a private school.
2. Person given access to a child is a person who is given access to a child by the person responsible for the child’s health, welfare or care, or by a person entrusted with the care of a child.
3. Person entrusted with the care of a child is a person who is given access to a child by a person responsible for the health, welfare or care of a child for the purpose of providing education, child care, counselling, spiritual guidance, coaching, training, instruction, tutoring or mentoring.

It is important to maintain the link between the victim and the perpetrator in order to have a correct representation of the events and to take adequate preventive and protective measures.

Given the increase in the number of cases related to bullying by peers or violence between siblings, it is important for data collections to distinguish between cases of violence against minors due to aggressive behaviour of an adult and those committed by youngsters or minors against peers or children.

2.B.1.4.2.1 Definition of the different settings in which violence can occur

As the United Nation’s Study on violence against children highlights, it is essential to identify the contexts in which child abuse occurs, since each one requires different, specific lines of action to

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11 See, for example, Connecticut Department of Children and Families, 2003, Operational Definitions of Child Abuse and Neglect.
counteract the violence against children. The UN Study distinguishes between: violence in the family, violence in school (violence between children, for example, bullying, but also violence by teachers against children), violence in the community, and violence in residential placements (including institutional violence). The identification of the settings in which violence occurs is relevant because the events happening in different settings are interlinked and they are mutually reinforcing.

Professionals should ensure that the concept of family is included in a broad definition that encompasses all the new types of families existing in our society, such as the typical nuclear family, child-headed households, single-parent households, heterosexual or homosexual families or polygamous families. Conceptually, therefore, it is preferable to refer to “families” instead of “family” and a more multifaceted approach should also be used also for the school environment, as suggested by the UN Committee on the CRC:

701. The Committee urges that references to “family” and “school” not be understood as narrowly defined. The references to “family” (or to “parents”) must be understood within the local context and may mean not only the “nuclear” family, but also the extended family or even broader communal definitions including grandparents, siblings, other relatives, guardians or care providers, neighbours, etc. Similarly, all references to “school” (or to “teachers”) should be understood to include schools, teaching institutions, and other formal and non-formal learning environments.

(Violence against Children, Within the Family and in Schools, Excerpted from CRC/C/111, 28th Session, 28 September 2001.)

The term ‘community’ refers to situations, spaces and times that a child spends outside his/her home, school or residential institution (United Nation,s Study on Violence): violence in out-of-school settings for leisure, such as during faith-based and sports activities; violence in the wider community, including on the streets, by law enforcement measures and actions; and finally violence in different ‘work situations’,12 where children may be exposed to exploitation, hazards, and the worst forms of child labour, such as forced labour and trafficking. It is potentially an environment where the child can spend time without appropriate supervision and protection.

Nowadays, it is also crucial to evaluate the incidence of violence that happens in contexts outside the family, where children are supposed to be safe, such as social services or children’s homes. These kinds of events are usually defined as institutional violence.

Protection and legal proceedings as a potential source of abuse

The involvement of the child in protection and legal proceedings may lead him/her to experience situations of emotional neglect or psychological maltreatment due to: the length of the procedures; incoherence between, or in, the measures adopted by the protection agencies and the decisions of the Courts; the adult-focused features of the procedures; the stressful situations created by the defence lawyers of the perpetrators, and so on.

The harmful effects of such a situation generate a new form of victimisation of the child: in the identification of the variable to be recorded, it is possible to, partially, take into account this dimension, for example including time variables to identify when the first protection measure was taken, if the child was heard with the support of a psychologist or social worker, when s/he received the first treatment, and so on.

2.8.1.4.3 Source of reporting

Collecting information on the role of the people or services who report cases of abuse or neglect is very useful as it can enable researchers and administrators to know which professionals and agencies working with children and families report the most or the least numbers of children. These data also provide information to inform: specific training needs to improve detection capabilities; the
opportunity to adopt agreements or protocols to facilitate cooperation and reporting (e.g. between social services, protection agencies and police). This information also describes the nature and characteristics of the network of agencies collaborating with the authorities (protection agencies or police): the broader the network, the more developed the level of awareness and social responsibility in the local community is.

If the report to the police or services is mandatory for some professionals, the data can offer an interesting insight into the effectiveness of this requirement. In this case, the classification of possible sources could be organised on two levels: firstly, sectors (health, school, social etc), and, secondly, professionals/agencies, distinguishing between the professionals/agencies with mandatory reporting (e.g. family doctors, teachers, hospital doctors etc) and those without. This could help to understand whether mandatory reporting is a factor in triggering the reporting of a case.

2.B.1.4.4 Action taken

The collection of data on the types of action taken for the child, family and perpetrators makes it possible to discover:

- If and how the protection and legal systems respond to the needs of the victim and to the community’s requirement to be protected from crimes;
- The level of implementation of measures introduced by laws and plans of action;
- The types of action taken in the short and long term to combat the crimes and protect victims.

There are three main categories of actions or measures:
1. Judicial action against the perpetrator and to protect the child
2. Social protective measures for the victims
3. Treatment for the child, caregivers and perpetrators.

It is useful to identify the main types of action for each general category in order to estimate their frequency. In the social and health sectors it is possible that the percentage of use of each type of action could suggest which of them are considered essential and which, instead, are valued as important, but not essential, in order to satisfy the basic needs of protection and care for the child victims. The results may also, however, be ambiguous. It is possible, for example, that therapy with violent families or the child victim may only be used in a small percentage of cases, not because it is considered a waste of time, but because it is a resource-intensive practice, which is less used in order to reduce costs; there may, on the other hand, be a high percentage of educational support for the child victim because it is less expensive, due to the lower qualification of the professionals involved (sometimes they are volunteers).

Moreover, identifying actions taken which depend on the different types of abuse could highlight that there are differences in the set of measurements assumed. Sometimes the difference is due to the different type of child abuse (e.g. neglect versus intra-family sexual abuse); other times, however, the difference could be linked to cultural factors, such as minimising or stigmatising approaches. A study by Irwin, Waugh and Wilkinson (2002), for example, noted that in the case of children exposed to domestic violence, referrals concerning them were less likely to result in an investigation. Where investigations occurred, they were more likely to result in referral or closure, and there was little follow-up of cases referred to other agencies.

The meaning of this kind of information depends on the types of services (resources) available in each country, and in each region or local area of a country. If in some areas there is a paucity of available social services, it is clear that the data will describe a poor response in terms of social resources. These data must be supported by an analysis of the types of services available at a local level in order to evaluate possible divisions and imbalances between different areas. This background information on the types of services available will also help in understanding possible national differences in the number of reported cases because it is possible that the number could be higher in areas where there are specialised services or where there is a greater number of child protection agencies.

From this perspective, collecting data on the structure and nature of the existing protection system improves an evaluation of the system itself. This kind of variable can therefore be used as part of a more general information system to assess progress in implementing protection and welfare policies.
for children and informing policy development for children, as requested several times by the Committee on the Rights of the Child:

[...] F. Data collection and analysis and development of indicators

48. Collection of sufficient and reliable data on children, disaggregated to enable identification of discrimination and/or disparities in the realization of rights, is an essential part of implementation. The Committee reminds States parties that data collection needs to extend over the whole period of childhood, up to the age of 18 years. It also needs to be coordinated throughout the jurisdiction, ensuring nationally applicable indicators. States should collaborate with appropriate research institutes and aim to build up a complete picture of progress towards implementation, with qualitative as well as quantitative studies. The reporting guidelines for periodic reports call for detailed disaggregated statistical and other information covering all areas of the Convention. It is essential not merely to establish effective systems for data collection, but to ensure that the data collected are evaluated and used to assess progress in implementation, to identify problems and to inform all policy development for children. Evaluation requires the development of indicators related to all rights guaranteed by the Convention.

(Committee on the Rights of the Child, Thirty-fourth session, 19 September-3 October 2003, General Comment No. 5 (2003), General measures of implementation of the Convention on the Rights of the Child (arts. 4, 42 and 44, para. 6))

Data and action processes

If the system makes it possible to follow a case – a child – along all the administrative and judicial procedures involving him/her, each case “recorded” can be considered as a process: it enters the system and will possibly exit it at a certain point in time, but it can also re-enter it. The set of variables should therefore be organised in such a way as to capture the different phases at specific points in time. In particular, it should make it possible to record a quality and a structural variable, such as the re-referral (or re-registration) of the same child.

Re-referrals provide information on the number of children who have been re-reported to the services for suspected or substantiated ill-treatment. As an outcome indicator, this number should be low because any increase can be considered as the sign of deficiencies in both the assessment of the child’s situation and the effectiveness of the protective measures taken by the protection agencies (particularly if the first report was closed as a negative case). Some researchers consider that the length of time between the first and subsequent referrals is crucial when evaluating the severity of the situation (or of distortions in the services’ intervention). In international literature, for example, we find between 1% and 3% of children are reported after three months from the first referral or the case’s closure. It is important, with regard to this indicator, to distinguish between a new report after the closure of the case and new information on new violence when the child is an open case to social services – the latter is the most difficult situation to detect.

Another indicator of the degree of effectiveness of the system to detect and protect is to calculate the re-substantiation rate, i.e. the proportion of children who were the subject of substantiation in a given year and who are the subject of a re-substantiation within a given time, e.g. three/six/twelve months. In general, re-substantiation within 12 months would be expected to be proportionately greater than re-substantiation within 3 months (AIHW, 2002). Moreover, the values may differ depending on the type of abuse or neglect because an acute abusive incident is more likely to be recorded than something that is part of an ongoing pattern.

It is interesting to note that these measurements usually differ according to the type of child abuse, the kind of action taken regarding the child and family, and the various targets of children. In a study of 1994–95 data from ten US states the researchers (Fluke, Yuan & Edwards 1999) observed different re-abuse patterns and dynamics: neglect is the most likely form of harm to recur; re-abuse is more likely with younger children; and re-abuse is associated more with the provision of follow-up services because an agency providing follow-up is more likely to detect re-abuse than an agency that moves to rapid case closure.

For each action taken by the services, it is also important to indicate when the action was taken as this can help in evaluating the timeliness of the responses. The time variable is also important as a
measurement of the duration of the intervention: for how many months or years does a child stay out of his/her home as a protection measure? How many days, months or years pass before the child receives medical or psychological treatment? After how many days or weeks or months does the professional meet the child or the family or the “source” of reporting in order to get to know the case better?

In conclusion, in order to evaluate the conditions of children and young people at risk of abuse or neglect, it is particularly interesting to look in detail at the characteristics of the actions taken by the child protection system, the rates of substantiated abuse and neglect, the rates of re-substantiation, and the use of particular protection measures, e.g. protection orders or out-of-home care. These issues introduce the topic of building indicators with collected data, which is discussed in the final chapter.

**Risk factors and protective factors**

For monitoring and programming purposes, policy makers, planners and researchers could benefit from a knowledge of the specific factors that can affect the quality of life of children and their safety, individually and as a group. Researchers have selected certain behaviours and factors that can harm a child’s development in order to evaluate possible dangers or critical issues, as well as to assess a specific child’s situation, above all the existence of elements of risk of harm to the child. At the same time, a dynamic, multifactorial approach to the analysis of the responses of children to traumatic events has also indicated to the clinicians and researchers the importance of considering the so-called protective factors.

The **risk factors** are behaviours and conditions that increase the likelihood of child maltreatment occurring or the negative effects of actual events; the **protective factors** are behaviours and conditions that reduce such risks – they are material and “immaterial” resources that mediate or serve as a “buffer” against specific risk factors or against the negative effects of maltreatment experiences.

There are three main categories of risk and protective factors:

- Risk or protective factors related to the child’s characteristics
- Risk or protective factors related to the characteristics of each parent or caregiver
- Risk or protective factors related to the characteristics of the household.

In addition to the above mentioned factors, researchers have also determined community risk and protective factors. As yet, there has been very little systematic research on these kinds of protective factors and they are not well understood. Research has focused mainly on resilience factors, i.e. factors that lessen the impact of child maltreatment on a victim (WHO, ISPCAN, 2006).

Most of the risk and protective factors are circumstances and aspects of individual or family status that the caseworker can record when s/he collects information on the parents, the child and the household. They refer to a set of information that the professional collects when completing the initial assessment of the child in order to decide on the action to be taken, or later during the implementation of the protection and treatment programme for the child.

*Some common risk factors related to child abuse Is there a ref to this list?*

*a. Related to the child*
- Premature birth, birth anomalies, low birth weight, exposure to toxins in uterus
- Temperament: difficult or slow to warm up
- Physical/cognitive/emotional disability, chronic or serious illness
- Childhood trauma
- Anti-social peer group
- Age
- Child aggression, behaviour problems, attention deficits

*b. Related to the caregiver*
- Personality factors (poor impulse control, depression/anxiety etc)
- Childhood history of abuse
- High parental conflict, domestic violence
- Parental psychopathology
- Substance abuse
Separation/divorce, especially high conflict divorce
- Age
- High general stress level
- Poor parent-child interaction, negative attitudes and attributions about the child's behaviour
- Inaccurate knowledge and expectations about child development
c. Related to the family and community
- Family structure - single parent with lack of support, high number of children in the household
- Social isolation, lack of support
- Gender roles and roles in intimate relationships, including marriage, that are disrespectful of one or more persons in the household
- Lack of a support network to assist with stressful or difficult situations, breakdown of support in child rearing from the extended family
- Discrimination against the family because of ethnicity, nationality, religion, gender, age, sexual orientation, disability or lifestyle
- Involvement in criminal or violent activities in the community.

Some common protective factors
a. Related to the child
- Good health, history of adequate development
- Above-average intelligence
- Hobbies, interests, practising sports
- Good peer relationships
- Personality factors, such as easy temperament, positive disposition, active coping style, good social skills
b. Related to the caregiver
- Positive and warm parent-child relationship
- Supportive family environment
- Household rules/structure; parental monitoring of child
- Extended family support and involvement, including caregiving help
- Stable relationship with parents
- Parental education
c. Related to the family and community
- Access to health care and social services
- Consistent parental employment
- Adequate housing
- Supportive adults outside of the family who serve as role models/mentors to the child.

Understanding the risk and protective factors will make it possible to improve prevention and protection strategies, and determine which conditions (factors) must be checked and compensated for by means of specific programmes (e.g. home visiting programme) and action.

A particular group at risk: children with disabilities

Researchers and international bodies, such as the Committee on the Rights of the Child, have highlighted the urgent need to pay particular attention to the extent to which the rights of children with disabilities are violated, and to the development of indicators to measure the performance of governments in implementing the provisions of the Convention, including through legislation, policy and practice to give effect to those provisions.

The Committee of Ministers of Council of Europe also discussed this subject recently, stressing that the failure to promote the rights of people with disabilities and ensure their equivalent protection

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13 Council of Europe, Committee of Ministers, Resolution ResAP(2005)1 on safeguarding adults and children with disabilities against abuse (Adopted by the Committee of Ministers on 2 February 2005 at the 913th meeting of the Ministers’ Deputies); Recommendation Rec(2006)5 on the Council of Europe Action Plan to promote the
in law is a violation of human dignity. The Committee asked Member States to increase public awareness, promote open discussion, develop knowledge, and improve education and professional training in order to find measures to prevent abuse, to improve the detection and reporting of abuse, and to support the victims.

Widespread efforts are continuously being made to increase awareness and provide education regarding risk factors of child abuse and neglect. Children with disabilities must be recognised as a specific population that is also at risk in relation to intra- and extra-familial child abuse. The maltreatment of children, including those with disabilities, is a critical public health issue that must be addressed\(^\text{14}\). In this population, the need for the early recognition and intervention on the child disabilities can facilitate the prevention and early detection of the risk of child maltreatment.

In data collection and monitoring, a major problem cited by literature with regard to this specific children’s group is the definition of disabilities. There is no universal definition of what constitutes a disability. It can be recognised as a physical or mental impairment that substantially limits one or more of the major life activities of an individual (e.g. physical disabilities, cognitive or learning disabilities, motor and sensory dysfunctions, mental illness, or any other kind of physical, mental, or emotional impairment). But there are also contextual disabilities, e.g. children at risk at birth, whose condition may result in disability if they do not receive adequate resources and services. In this domain the lack of reliable data is very serious and research efforts have been hindered by the different definitions of terms, non comparable methods and a lack of uniform data collection.

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**Articles 17 and 18 of the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities (adopted by the United Nations General Assembly, forty-eighth session, resolution 48/96, annex, of 20 December 1993)** define disability as the interaction between a person’s impairment and their environment. The United Nations document refers to a range of impairments including “physical, intellectual or sensory impairment, medical conditions or mental illness. Such impairments, conditions or illnesses may be permanent or transitory in nature”.

The Council of Europe’s Report "Safeguarding adults and children with disabilities against abuse” (Council of Europe, ed. Brown, 2002) refers to all people with disabilities, whether adults or children, including:

- people with physical and sensory impairments;
- people with intellectual disabilities and autism;
- mentally ill people;
- people who have drug or alcohol problems;
- people with hidden disabilities and medical conditions, such as epilepsy, rheumatism, diabetes and other chronic conditions;
- people with chronic illnesses, which may or may not be terminal, including dementia and Aids-related illnesses.

It should be noted that specific policies in Member States do not necessarily identify all these people as disabled persons.

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It is worth noting that focusing on the special vulnerability of the children with disabilities also influences the semantic dimension of the phenomenon because more specific conditions of abuse could be considered, and there may be a “gap between an ‘academic’ definition of abuse and the complex realities that characterize the lives of people with disabilities and those who care for them” (Brown, 2002). In a recent Council of Europe Committee of Ministers Resolution on this issue, the abuse of children (and adults) with disabilities is defined, using a very broad, innovative approach, as:

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Any act, or failure to act, which results in a breach of a vulnerable person’s human rights, civil liberties, physical and mental integrity, dignity or general well-being, whether intended or through negligence, including sexual relationships or financial transactions to which the person does not or cannot validly consent, or which are deliberately exploitative. At a basic level abuse may take a variety of forms:

a. physical violence, including corporal punishment, incarceration – including being locked in one’s home or not allowed out –, over- or misuse of medication, medical experimentation or involvement in invasive research without consent, and unlawful detention of psychiatric patients;

b. sexual abuse and exploitation, including rape, sexual aggression, indecent assault, indecent exposure, forced involvement in pornography and prostitution;

c. psychological threats and harm, usually consisting of verbal abuse, constraints, isolation, rejection, intimidation, harassment, humiliation or threats of punishment or abandonment, emotional blackmail, arbitrariness, denial of adult status and infantilising disabled persons, and the denial of individuality, sexuality, education and training, leisure and sport;

d. interventions which violate the integrity of the person, including certain educational, therapeutic and behavioral programmes;

e. financial abuse, including fraud and theft of personal belongings, money or property;

f. neglect, abandonment and deprivation, whether physical or emotional, in particular an often cumulative lack of health care or negligent risk-taking, of food or drink or of other daily necessities, including in the context of educational or behavioural programmes;

g. institutional violence with regard to the place, the level of hygiene, the space, the rigidity of the system, the staff, the programme, the visits, the holidays.

The document correctly specifies that abuse may be perpetrated by any person (including other people with disabilities), but it is of special concern for children with disabilities when it takes place within a relationship characterised by positions of power based on:

- the legal, professional or authority status of the perpetrator;
- his/her physical, psychological, economic or social power;
- the fact that s/he is responsible for the person’s day-to-day assistance;
- any inequalities based on gender, race, religion or sexual orientation.

In this context the term “abuse” refers to matters across a wide spectrum, which includes criminal acts, breaches of professional ethics, practices falling outside agreed guidelines or seriously inadequate care. As a consequence, measures to prevent and respond to abuse suffered by disabled children involve a broad range of authorities and actors, who should become partners in the system of monitoring.

2.B.2. Child abuse as a legal problem: from general to operational definitions

2.B.2.1 Advantages and disadvantages of common definitions

All the international legal instruments analysed, demonstrate that efforts are being made to identify common and shared definitions of the different kinds of crimes with the intention of having a common minimum understanding between State Parties. Some of the added value related to the presence of a common definition can be:

- the perpetrators have no advantages in perpetrating the crimes abroad;
- the presence of common definitions outlaws the crime in any possible State;
- shared definitions can assist research and promote comparability of data at national and regional levels, making it easier to obtain an overall picture of the crime;
- international co-operation, in particular extradition and mutual legal assistance, is facilitated.

From a procedural point of view, the presence of common definitions does not, of course, prevent State Parties from adopting tougher penalties. However, it should be remembered that the presence of shared minimum elements ensures the banning of the phenomenon and a minimum level of common standards regarding prosecution in every single State.
An analysis of the measures adopted internationally reveals that a process of harmonisation is under way. It is aimed at creating a common and effective system of protection for children and establishing a shared prosecution system with tougher penalties for the perpetrators than there were in the past.

Looking at when these dispositions were drawn up and adopted, it is also possible to say that we are speaking about a process that is changing rapidly. Its efficacy is directly related to the promptness of the State in effectively implementing the dispositions contained in the international documents.

There are still various areas which still require the harmonisation of legal provisions, above all there is the need to reach an agreement on a common definition of the age of consent to have sexual intercourse.

The harmonisation of legal provisions, as it has been already discussed, represents a real improvement also to the statistical realm as different judicial systems would use the same definitions to record crimes, thereby allowing the data to be compared. But there are additional critical points for data collection and monitoring in the judicial sector, which are crucial in order to understand effectively which are the characteristics of the crimes, and need to be harmonised, e.g. the level of disaggregation of data to identify specific crimes against children and denote them according to the characteristics of the victims and perpetrators.

2.B.2.2 Judicial data

The ChildONEurope Review on National Systems of Statistics and Registration on Child Abuse showed that reported crimes are the main data produced in the judicial sector and that the Ministry of Justice or the Ministry of Interior (for the police forces) usually has the task of managing the data collection system.

A critical problem in this sector is the identification of the most relevant unit of observation since it is possible to identify different units depending on the various stages of the judicial process: reporting of a crime, offenders, charges, suspected crimes, substantiated crimes, victims, persons charged, convictions, sentences, and inmates. Each of them can be relevant, but it is necessary to distinguish between the different stages of the process and to avoid multiple counting, e.g. the reporting of a crime can include one or several offenders who are charged, and one or several crimes committed against one or more victims. With a view to monitoring reported child abuse, it could be useful, at least for the relevant offences, to focus the data on the victims or to link all the different records that each offence produces in the system in order to follow a case from the police stage to the Court stage (a person-based analysis). The latter means it must be possible to access personal data or have an agreement on methods of codifying (“person identifier”).

Generally, data produced by the administrative activities of the justice and police systems makes it possible to know:
1. the criminality, i.e. the magnitude and type of crime for which the judicial authorities started legal action and some information on the characteristics of the perpetrators.
2. the number of crimes reported to the police and judicial authorities;
3. the workload of the system (arrests, measures taken, offenders under supervisions etc);
4. some characteristics of the offenders and the case moving through the system;
5. administrative and civil law measures adopted by the Civil and Juvenile Courts (protection measures for the child, intervention on parent’s responsibility etc.).

The most basic unit of observation in the criminal justice statistics system are (UN, 2003): the “criminal act”, the “offender”, and the “victim”:

1. the criminal act – to monitor, assess and deal with fundamental government concerns it is necessary to know the extent of particular types of offences and where they happen (e.g. urban or rural areas). Available data on criminal acts capture only those offences officially known and recorded by the police. Then, there is the issue of how these data give an index or a measure of the real level of criminality. Another critical issue is the comparability between the data related to the police record of events, and the data on the actual charges and the court’s dispositions. There is a
problem of sharing common definitions and recording procedures through the adoption of common classification schemes: it is possible that during the investigations the first code attributed to an event in the initial recording by police (e.g. sexual act) could change (e.g. in molestation). The use of the penal code would not help to overcome the problem. Furthermore, as the police records may involve more than one criminal event, it is essential to count each event separately. As explained in the U.N. Manual for the Development of A System of Criminal Justice Statistics (2003), some countries have adopted a hierarchical classification based, firstly, on a general classification scheme that distinguishes on the basis of broad characteristics of the events, e.g. violent and non-violent offences, personal and property offences, and, then, on a more specific criminal code, which is more likely to vary from the police stage to the judicial one.

2. **The offender** – basic individual information that should be collected are sex, age, nationality, geographical area of residence and the number of offences for each one. At an aggregated level, it is useful to know the proportion of offenders among the population for specified periods, including their classifications per type of offence. The amount of information on the offender changes depending on the data source. For example: police records often include suspects and persons charged; Court records include people appearing in court, convicted, and sentenced, and Prison records include inmates. “Each data source has its own strengths and limitations. For example, prison records usually provide more detailed and accurate information on individual offenders than police records, but prison records provide an even more biased sample of offenders than police records since offenders sentenced to prison tend to be those involved in more severe crimes. The further along in the offender processing system offender statistics are gathered, the more likely they are to be accurate and more detailed, but the less likely they are to be representative of all offenders” (U.N. 2003).

3. **The victim** – interest in the victims is a recent acquisition in this sector, and few national systems record and codify data on victims as a habitual activity. The most relevant elements to know are the age and sex of the victim, and also the relationship between the victim and the perpetrator, a variable which at present is hardly ever investigated or recorded in the judicial statistics.

Also the information on the actions taken is important in order to know the procedures and the results of the judicial activities, e.g. the judicial measures adopted during investigation and the types of penalties.

A critical issue for these kinds of data is that a person can commit more than one offence at the same time, the question then is: how many offences are recorded in the statistics?

In many countries, only the most serious offence (the one with the highest penalty) is counted for statistical purposes. The result is that incidence statistics are deflated and the proportion of serious to non-serious incidents are inflated. In the case of abuse against a child, it can be difficult to distinguish which behaviour is the most serious due to both ethical and clinical evaluations. This is because the impact of the abuse also depends on the duration of the abuse and it is crucial to assess the presence of multiple abuses. Usually, only the most serious event is reported, and other minor ill-treatments are not included in the record. This is why specific recording systems are needed.

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**An Italian experience: the data bank on sexual abuse and exploitation of children**

Law 38/2006 created an Observatory for the fight against paedophilia and child pornography, within the Presidency of the Council of Ministers, under the Ministry for Equal Opportunities.

This Observatory will acquire and analyse data on the crimes of sexual abuse and sexual exploitation, with the support of the relevant Administrations and the National Documentation and Analysis Centre for Childhood and Adolescence. The Observatory was set up in order to overcome the fragmentation of available information by placing all the information in a more coordinated system.

The approach followed by the Observatory in the construction of the database has three stages:

- collection of data;
- processing of the available data;
- discussion with all the professionals dealing with the phenomenon.

The Observatory has been authorised to create a database to collect all the information necessary to monitor the phenomenon. In order to strengthen the commitment for the creation of this database, appropriate agreements were signed by the Administrations involved in this project.

Ministers are now committed to taking the necessary steps to design, set up and run the databank. Once operational it will be an authoritative source, with a scientifically reliable format, of comparable data deriving from the police and judicial sectors.

The innovative characteristic of the project is that the data will be focused on the child victims and the protection measures adopted.

The objective is to follow cases from the first detection by the police to the conclusions of the legal proceedings, while respecting privacy and the protection of the so-called “sensitive data”.

The data bank will then integrate flows of data arriving from the databanks of the police, the criminal Courts, and the Juvenile criminal and Civil Courts.
Chapter III. The organizational dimension

3.1. Developing and implementing a new national data collection system to monitor child abuse

The previous chapters have repeatedly highlighted that the development of a national system of data collection is a complex process, requiring the co-operation of different organisations or bodies which are representative of all the sources of qualitative and quantitative information input to the system. In the following paragraphs we will examine the whole process, pointing out the most crucial stages. The focus is primarily on appropriate procedures for a data collection and monitoring system based on information collected through child protection agencies because the main European experiences in this field refer to the social sector (for example England, Ireland, Belgium, Spain).

In particular, if a country decides to develop a new child protection data collection system, the analysis of the following steps (adapted from the WHO and CDC’s\(^1\) *Injury Surveillance Guidelines*) can provide a useful framework for planning such a project.

**Step 1: Identify key stakeholders**

- Who intends to monitor child abuse?
- Who are the potential stakeholders?
- Who should be involved in this process?
- Who may be interested in collecting and using data?

Any agency or individual concerned about child abuse may have an interest in collecting child protection data, and can be considered as a potential stakeholder. Stakeholders are not only those who participate in the collecting of data but also those who are potential users of it (sometimes these groups overlap). The involvement of stakeholders has three main objectives:

- **Avoiding conflict**: collaborative efforts through negotiation, mediation and collaborative learning, aimed at engaging stakeholders in a process of finding shared solutions to the conceptual and organizational problems encountered during the planning, designing and implementation of the system;
- **Developing a “shared vision”**: collaborative efforts to assist stakeholders in coming up with a common definition of the data items to be collected and their characteristics;
- **Formulating creative solutions**: since the process is complex and many difficulties may be encountered – for example those relating to the collection of “personal data” – the most effective solutions may not necessarily emerge from traditional models and rules.

**Step 2: Define the objectives of the system**

- Why is a monitoring system required?
- What is/are the purpose(s) of this monitoring system?
- How will the data collected relate to national legislative requirements and policies?
- Should the monitoring system be comprehensive (i.e. cover all types of maltreatment) and/or should it focus on particular forms of maltreatment?
- Will the system collect information on a multi-agency or single agency basis?

This is a crucial step, because the answers to these questions and the choices made will determine the degrees of impartiality and neutrality of the data collection system, and finally, its accountability to the public.

\(^1\) Y. Holder et al. (2001), *Injury Surveillance Guidelines*, WHO & CDC.
In defining the fields of interest and agreeing the purposes of the data collection and analysis, planners will have to prioritise since it will be impossible to collect all the information that might be considered desirable by the different stakeholders. Planners are likely to have to select various objectives, content and variables in order to ensure that the system is sustainable and acceptable to those who will be required to complete the data returns. It is also possible that not all the stakeholders will be satisfied with all the selected typologies of child abuse.

The planners should decide which aspects of child abuse they will focus on, i.e. how comprehensive the system should be. Should it include only family violence or also violence occurring in other contexts?

Planners could be asked to decide whether they need to collect data on other related areas, for example on domestic violence against women, or rape.

**Step 3: Define "a case". What is child maltreatment?**

- In accordance with the objectives of the monitoring system, what is a case?

As was discussed at length in the previous chapter, the definition of the case is an important step because it determines the "universe of analysis". Add ref to this term 'universe of analysis'

In Step 2, if planners decide to use a very broad definition, for example, the CRC definition of child violence as described in Article 19, they will need to agree more precisely on the data to be included in the system.

One crucial decision relates to the sector(s) from which the case-based data will be collected: health, social or judicial, or all three?

The characteristics of child abuse that it will be possible to report on will depend on which sector(s) is/are chosen.

Moreover, as will be shown, the way in which a case is defined also determines the number of child abuse cases it will be possible to include in a data collection: there will be a significant difference in numbers of cases if planners define a unit of analysis as a "reported" child abuse case rather than "validated" (or substantiated) ones.

**Step 4: Identify data sources**

- What are the actual or potential data sources?
- How can these data sources be accessed?
- Will data be collected from both the child welfare and criminal justice fields in a way that enables each case to be tracked simultaneously in both systems? Or will the data be held separately for each professional area?

The fourth step involves clearer identification of the specific sources of the data, the types of professionals involved and the rules governing each different sector (for example, in the judicial sector planners may face difficulties when collecting data because of the need to protect the identity of the victim or perpetrator). The system should be designed to be as flexible as possible in order to support the development of interrelated modules over time. Some sources can be included at the beginning of a project, even if they are not yet operative or statistically acceptable at the time of the initial implementation; for example, in the future a central administrative body could offer support through use of a database which is being planned but is not yet operative. Other resources may only become available over time.

In developing or updating a child protection data collection system, it is important to involve all those who will be expected to collect data in the field, and to ensure that they understand why they are being asked to collect these data items and that they have a ‘fit for purpose’ database for collecting the required information. In order to maintain their co-operation and compliance with the data collection task, it is also important that the outputs are presented in ways that are useful to them in their day-to-day work.
Staff should also participate in finalising the specification for a new data collection system prior to it being commissioned.

In building a new database it is important to test a prototype with staff (i.e. those who will be entering data to it), to ensure it works effectively and is user-friendly. The implementation of any new system will take time and require intensive training and ongoing support so that staff understand how the system works and feel confident about using it.

### 3.2. Legislative powers to collect statistics on children

Legislation should permit the collection of data on children who are in the child protection system so that they can be legitimately collected at both local and national levels. The provisions in legislation should set out clearly what information can be collected, by whom, the purposes for which it can be collected and who is able to supply it to whom. The institutional legitimization of the project is also a key issue to guaranteeing permanent funding and resources for a system. In some existing experiences, the data collection and monitoring system can be a permanent support for evaluating the implementation of a new law on the protection of children who are at risk of or have been abused, and/or it could be implemented as part of a more general statistical information system used for analysing the state of children’s lives.

In a federal state, the passing of regional legislation could ensure that there is enhanced coordination between national and regional levels in collecting the data and organizing how it is transferred from operational sources to a centralised data bank before the data returns are made available to professionals.

The ways in which data are collected must ensure that the identity of the child remains confidential. The same principle holds irrespective of whether the data are collected at an individual child or an aggregate level. It is very important that the data collected are useful both to those professionals who are providing the information and to those who are responsible for publishing the statistics. Child protection data can be used to monitor trends over time at local and national levels; they can tell an agency or government what is happening in its system at different points in time; whether policies and procedures are working; and they can inform decisions about the planning and allocation of resources.

The legal basis of data collection in England

The Secretary of State for the Department for Children, Schools and Families has the statutory power to collect information for research on Local Authority functions under the Children Act 1989 through Section 83 of that Act. This includes provision for children looked after by Local Authorities (i.e. the State) or children for whom there are child protection concerns. These children are all considered to be “children in need” under the Children Act 1989 (i.e. those who require services from the Local Authority to achieve or maintain a reasonable standard of health or development or who are disabled). The various statistical returns for Children Looked After (known as the SSDA903 return) as well as those on Children In Need (CIN) and subject to child protection plans (the CPR3 return), are covered by this power (Department for Children, Schools and Families, 2006; Department for Children, Schools and Families, 2008).

The following text is reproduced from the Children Act 1989 which governs the welfare of children in England and Wales.

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Research and returns of information:

83.—(1) The Secretary of State may conduct, or assist other persons in conducting, research into any matter connected with—

(a) his functions, or the functions of local authorities, under the enactments mentioned in subsection (9);

(b) the adoption of children; or

(c) the accommodation of children in a residential care home, nursing home or mental nursing home.
(2) Any local authority may conduct, or assist other persons in conducting, research into any matter connected with—
(a) their functions under the enactments mentioned in subsection (9);
(b) the adoption of children; or
(c) the accommodation of children in a residential care home, nursing home or mental nursing home.

(3) Every local authority shall, at such times and in such form as the Secretary of State may direct, transmit to him such particulars as he may require with respect to—
(a) the performance by the local authority of all or any of their functions—
(i) under the enactments mentioned in subsection (9); or
(ii) in connection with the accommodation of children in a residential care home, nursing home or mental nursing home; and
(b) the children in relation to whom the authority have exercised those functions.

(4) Every voluntary organisation shall, at such times and in such form as the Secretary of State may direct, transmit to him such particulars as he may require with respect to children accommodated by them or on their behalf.

(5) The Secretary of State may direct the clerk of each magistrates’ court to which the direction is expressed to relate to transmit—
(a) to such person as may be specified in the direction; and
(b) at such times and in such form as he may direct, such particulars as he may require with respect to proceedings of the court which relate to children.

(6) The Secretary of State shall in each year lay before Parliament a consolidated and classified abstract of the information transmitted to him under subsections (3) to (5).

(7) The Secretary of State may institute research designed to provide information on which requests for information under this section may be based.

(8) The Secretary of State shall keep under review the adequacy of the provision of child care training and for that purpose shall receive and consider any information from or representations made by—
(a) the Central Council for Education and Training in Social Work;
(b) such representatives of local authorities as appear to him to be appropriate; or
(c) such other persons or organisations as appear to him to be appropriate, concerning the provision of such training.

(9) The enactments are
(a) this Act;
(b) the Children and Young Persons Acts 1933 to 1969;
(c) section 116 of the [1983 c. 20.] Mental Health Act 1983 (so far as it relates to children looked after by local authorities);
(d) section 10 of the [1984 c. 36.] Mental Health (Scotland) Act 1984 (so far as it relates to children for whom local authorities have responsibility).

3.3. Principles underpinning the collection of data

It is also important to have legislation that governs the principles underpinning the collection of data. This legislation provides a framework within which agencies and professionals collect and store data. It can also establish the level of aggregation applied by each agency; because it is possible that some will store individual data and others aggregate data. The criteria established for the aggregation of data are also crucial to verifying the degree to which the system protects the identity of victims: it should be noted that partial blinding of cases (such as using initials and dates of birth) is not always effective when cases of small communities (or groups of people) are reported, since this will still allow individuals to be identified.
Legislation also supports agency policies as to the length of time information should be retained before being destroyed; with whom it can be shared; and in responding to complaints about the way in which an individual's data were collected and stored.

The rules can be established under a specific law regarding the issue of child abuse, or under the principles and obligations of general laws on data collection and/or protection, which govern any kind of individual-related data gathering.

For example, in England, the Data Protection Act 1998 is based on the following eight principles:

**Principles 1-2**

Personal data must:
- be processed fairly and lawfully, subject to conditions of processing;
- be held only for one or more specified and lawful purposes, which must be notified to the Information Commissioner in line with the provisions of the Act, and not be further processed in any manner incompatible with that purpose or those purposes.

**Principles 3, 4, 5 and 6**

In relation to that purpose or purposes, it must:
- be adequate, relevant and not excessive;
- be accurate and kept up to date;
- not be kept longer than necessary (what is a necessary retention period is for the data controller to judge, but there should be a documented policy to refer to in case of challenge); and
- be processed in accordance with the rights of data subjects under the Act.

**Principle 7**

Security: appropriate technical and organisational measures must be taken against unauthorised or unlawful processing of personal data and against its accidental loss or destruction, or damage to it.

**Principle 8**

Personal data must not be transferred to a country or countries outside the European Economic Area unless that country ensures an adequate level of protection for the rights and freedoms of data subjects in relation to the processing of personal data. Greater stress is placed on fair processing, on security of personal data and on appropriate conditions for the transfer of data abroad.

**3.3.1. Monitoring the implementation of the principles**

A person with a statutory role could be named as responsible for providing local authorities and agencies with advice on whether their processing of data is in line with the laws and the rules governing the data collection system. In addition, at a national level a specific body or a figure independent of government could provide general advice on national data protection and information sharing issues.

**3.4. A centralised approach to data collection**

In taking forward the development of a system for collecting data about individual children who have been abused, and in some instances about their families and the perpetrators of abuse, decisions will need to be made about whether such a system will be centralised or not.

The key features of a centralised approach to data collection are:
- Legislation legitimates the collection of data
- Data items are agreed at national level
- All local authorities or their equivalent supply the same data in the same format
- Data can be analysed and presented at local, regional and national levels
- Stable data collection, allowing an analysis of changes over time
• The monitoring of service provision at local, regional and national levels can be supported by these data collections
• Data can be used to identify outliers, but qualitative analysis is also required to understand why the agency/team is an outlier.

3.4.1 Issues to be addressed when developing a centralised system

The data that are chosen to be collected centrally must be relevant to the work undertaken with children and families; otherwise there is no purpose to their collection. This means that individual data requirements are likely to be country-specific in line with national legislation and may, therefore, change over time. Agreement is required between any national agency and its constituent local agencies about which data items to collect. In order to obtain quality data, local agencies should make a commitment to comply with central data requests (this commitment can be enshrined in legislation making it a statutory requirement). Ideally government policy officials and statisticians should work together to agree the data sets; both officials and statisticians also need to work collaboratively with local stakeholders to ensure these data sets will be useful to all key stakeholders at national and local levels. The involvement of policy officials should ensure that the statistical collection relates to relevant legislation and government guidance; statistics can then be used as a way of monitoring the impact of policy changes over time.

If the statistical department is located within a government ministry, it needs to bid to secure funds to undertake its work programme. This enables the department to carry out its planned work in a structured and constant manner. A down side of being within a government department is that an already-agreed budget can be used as an additional source of funds if there is a political crisis and funds are required for another purpose.

Decisions are required as to whether data will be collected on an aggregated or an individual child level. The latter requires careful management to ensure that data about each individual is anonymised. Below is an illustration of how this is achieved in England for a specific group of children who are looked after by Local Authorities. Most of these children are placed with foster parents; the remaining children are placed in institutions or are living with their parents whilst still the subjects of a statutory care order.

<table>
<thead>
<tr>
<th>National example</th>
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<tbody>
<tr>
<td>Data collection on individual children looked after by local authorities in England</td>
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</table>

The Department for Children, Schools and Families (DCSF) collects child level information on children who are looked after by Local Authorities (LAs) in the SSDA903 return. There are 150 Local Authorities in England responsible for about 90,000 children in any year out of a total child population of some 11 million. The following security measures and legislation apply to this statistical collection.

Access to data

Data are returned to the Department by each LA every year via a secure web based system. Each LA is given a username and password which allows nominated people access to the webpage. They then upload their data to the system and go through a validation process (to correct any data errors) before signing off the final data. LAs only have access to data on the children for whom they have statutory responsibility and only designated people within each LA have access to the data.

Within DCSF two teams of analysts have access to the data, in order to assist in the validation process and analyse the final data. Data can be shared with other teams and researchers on receipt of a signed confidentiality agreement which specifies the ways in which data will be used, details of people accessing the data, and procedures for destroying data on completion of the work. Before providing the data, child records are anonymised. This means that any identifiers (IDs) are stripped out and replaced with random IDs and any other items which could potentially allow identification of children (e.g. dates of birth) are removed from the file.
3.4.2 Ethical issues for statisticians employed within a government ministry

It is important for government statisticians to be to be impartial and hence independent of political influence. They should be able to publish statistics free of political interference. From a policy perspective, policy officials could be asked to comment on the analysis by statisticians, but they should not be allowed to change the data. To assure the quality and correctness of data, the rule could put an embargo on disclosing the data until after they have been published. In some countries, e.g. the U.K., there are civil service ‘rules’ for officials about when statistics can be published, for example: not during the run up to an election or in order to support a particular political policy announcement. To maintain political impartiality, statistics are published on set dates in the year. It is, therefore, important when employed within a government ministry, for the statistical department to work to ethical principles agreed with government ministers in order to avoid political interference.

3.4.3 Centralised independent agency or national statistics office

Another option is for an independent agency or national statistics office to collect national statistical information rather than a government department. There are several advantages to such an arrangement. Firstly, the organisation is independent from government and therefore should be free from political interference. It can, therefore, agree its own scope and definitions without referring to politicians. And secondly, it should be able to employ a dedicated staff group with the necessary statistical and analytical expertise.

Such arrangements are, however, dependant on being able to obtain the necessary funding to undertake such work. Often it is only governments that are in a financial position to be able to provide this level of funding, the provision of which may in turn compromise the organisation’s independent status. It is also important that such an organisation be recognized nationally as having expertise in this area and holding the necessary authority or status. This authority is required both in order to access the data from local or national service organizations and to make an impact through the resultant statistical publications. Having the confidence of central government is necessary so that the organisation’s statistical publications are taken seriously and therefore have an impact on future government legislation or policies. Some communication with policy makers is likely to be necessary to ensure that the data being collected has national relevance, and implications for legislation or policy are framed in such way that they will make the intended impact on politicians and policy makers.

An independent agency or statistical office will have to be able to collect data from the relevant individual agencies or sectors. As with a government agency, legislation is likely to be required to enable the supplying of information to an independent statistical body.
3.5. A decentralized approach within a country

A decentralised approach means that local agencies decide to collect and process their own data. They may do this on a single agency basis or in collaboration across sectors such as social services, health and criminal justice. They may be part of a network which operates across state or provincial boundaries. Decentralised agencies may be committed to working with a central administration or they may have decided to set up their own systems in the absence of central leadership.

The advantages of having a decentralised approach are that local agencies can:

- collect information that is tailored to their needs and specific local data requirements;
- agree their own data set and its definitions – they are not dependent on reaching agreement with the government or other agencies, and therefore do not have to compromise on their ideals;
- more easily obtain local, as opposed to national, agreement across sectors about relevant data.

The disadvantages of this approach are that it may be difficult to:

- secure funding to undertake the work;
- attain buy-in from relevant sector staff, especially if there is no legal requirement to provide the data;
- secure people with the necessary expertise to set up and continue the collection and analysis of data.

3.5.1. The Spanish experience

Spain started building a national monitoring system in 1992. At that time, no working system was available but the need for reliable first-hand data on child abuse was obvious, at least in the social services field. A decision was made to set up primary sources of information using those professionals in regular contact with children as informants.

In Spain, administrative data were available on the number of child victims who had suffered the most severe types of abuse: those which required police-judicial intervention and those under social services protective measures. These figures, however, were thought to be too low, biased and not to reflect the true picture.

In 1997, the Spanish Observatory on Childhood developed a specific data collection form for the detection and reporting of child abuse cases. The aim of this tool was to facilitate communication between professionals in order to speed up intervention in cases of possible abuse against children or in situations where children were at risk of abuse.

The basic model consists of a data collection form with proxies especially selected for the particular professional field in which people are employed. The form consists of three copies. If a professional suspects child abuse, a form is filled in: one copy is attached to the child’s personal record; one copy is sent to a civil servant for further case investigation and assessment; and the third copy is sent to the regional database. The data collection system is, then, primarily an informative reporting system.

Several lessons were learnt in developing this model:

- It is important to develop short, easy-to-use forms, which can be filled in during everyday practice;
- Detection and reporting forms should be specific to each professional field;
- As there has to be a trade-off between reliability and usability, it is more important to favour professional reporting of cases than to promote an exhaustive description of each case;
- The form is more than a questionnaire to gather information. It also guides the exploration process and reminds professionals of key areas in which to ask questions to aid proper detection;
- Professionals should be trained in the use of the detection and reporting forms. Furthermore, training sessions should also be used to increase professionals’ sensitivity towards child abuse prevention.
At the end of the 1990s, several different detection forms were available in most Spanish regions. In 2004, research carried out by the Universidad Autónoma de Madrid and sponsored by the Ministry of Social Services, aimed to identify all the available tools, compare them and build working databases to collect all the information obtained via these tools.

A total of 15 regional sources of information were identified (including autonomous regions and other regional entities). Four relevant professional fields were recognized:

- Health
- Social services
- Education
- Police

(It should be noted that additional fields are now involved: judicial, leisure and free-time and children’s helplines.)

In 2004, research showed that 68% of the regional sources had developed from 1 to 5 field-specific forms, but 38% had no detection and reporting tools available. The most active area was Social Services (77%), followed by Health (46%) and Education (39%).

Although some open-answer formats were found, most of the detection and reporting tools used a closed format for item completion.

Remarkable agreement was found between the items used by all regional sources within each professional field. In fact, common proxies were present in 89-100% of the forms. This finding supported the validity of the proxies that were selected by most regions.

The main typologies (categories) into which the proxies could be grouped were: physical abuse (83%), psychological abuse (83%), neglect (83%), sexual offences (100%). Other categories were identified but seldom used, such as family environment proxies (17%) and child daily behaviours (17%).

Nevertheless, even though most regional corporations had tools available, the research found little effort was going into their deployment and use in practice.

While developing the databases for cumulative case-gathering, several other lessons were learnt, some of them characterising the possible difficulties and exigencies that may be present in a decentralized system:

- As personal information is contained in databases, legal security norms must be followed by those institutions responsible for data recording and storage;
- There are significant differences between regions in terms of types of hardware available; and software was usually not the most recent release;
- In those regions where social service units had developed a specialized system for case assessment and follow-up, the need for field-specific detection and reporting tools was not fully appreciated, and ad-hoc databases conflicted with the existing system;
- It is important to customize databases in order to meet each region’s needs and existing obligations according to laws, with special emphasis on their usability and instant summary reporting capabilities;
- It is important to attain a minimum level of homogeneity between databases in order to allow comparisons between regions and allow the collection of national data;
- Proxies which use a grading format for completion (e.g. severity levels) are used less competently by professionals than those with a dichotomous (presence/absence) coding;
- Online systems could be easier to update and maintain, and internet-based applications could even out regional differences;
- Only the main typologies can be summarized in statistical reports which add up data from different professional fields, i.e. proxies are too field-specific;
- Case profiles reported by each professional field are quite different;
- The success of child abuse monitoring systems may be dependent on them being accompanied by awareness campaigns directed at both professionals and the general population. There is
also an urgent need for continuous professional training and development of inter-office intervention protocols.

- Individual-level data are needed in order to ensure case matching between different sources, and to avoid multiple counting of the same cases.

### Best practices in Spain

#### A. Murcia Region

The Experimental Program "Detection, Notification and Registry of Cases of Child Maltreatment" was developed during the period 2003-08 by the Autonomous Community of Murcia, through the Department for the Family and Minors in collaboration with the Ministry of Education, Social Politics and Sport. In particular, it included:

- The training of professionals who work in contact with children and adolescents (about 1300 health workers, 600 police, 60 education and 60 social services professionals);
- The completion of epidemiological studies on the incidence and prevalence of child maltreatment (analyzing data contributed by specialized social services, health and police sectors, see Memory 2007 of the Department for the Family and Minors in [http://www.carm.es/ctra/memoriafamilia/](http://www.carm.es/ctra/memoriafamilia/));
- The development of functional and homogenous action protocols when faced with cases of child maltreatment (published in 5200 manuals and 5300 guides for the various professional sectors, see [http://www.carm.es/ctra/cendoc/publicaciones/list_memoriafamilia.asp](http://www.carm.es/ctra/cendoc/publicaciones/list_memoriafamilia.asp));
- The prevention of cases of child maltreatment by means of early identification (published in 6600 copies of notification and 400 folders for the various professional sectors, see [http://www.carm.es/ctra/contenido.asp?id=2109](http://www.carm.es/ctra/contenido.asp?id=2109));
- Murcia’s Experimental Program has taken responsibility for co-ordination between all professionals and workers in public and private institutions focusing on childhood as far as detection, intervention and prevention of child maltreatment are concerned.

#### B. Madrid Region

**CHILD ABUSE AWARENESS PROGRAMME.** Since 1988, in the Region of Madrid (Madrid), several activities on child abuse prevention have taken place, and various programmes and publications have been developed, including:

- **Guide for health professionals' attention on child abuse by the**. Madrid: Health Department. 1993
- **Child abuse prevention, attention and treatment program in the Autonomous Region of Madrid. Social Integration Department 1993**
- **Precocious Early detection of social risk in neonatology program. 1994** (Madrid Institute for Childhood and Family. 1999)
- **Child abuse: prevention, diagnostic and attention by the health environment. Health Department. 1995, 1996.**

The child abuse attention program was set up in 1997 because of:

- The need for common training for professionals
- The need for unifying criteria for detection and notification of cases

and in order to:

- Establish common protocols and coordination in the intervention
- Develop a system for recording detected cases of child abuse.
The National Childhood Observatory has been developing a proposal for a joint action protocol on child abuse based on the joint perspective of all actors involved in the identification and protection of and assistance to child victims of any abuse. This proposal covers the judicial procedures from the point at which a case is identified until it arrives in court. It also analyzes the challenges faced by education, health, judicial and social systems in avoiding the secondary victimization of children and makes recommendations for all actors involved in the key protection measures to be implemented in order to guarantee the rights and welfare of child victims throughout the process. This protocol was developed by a working group of the National Childhood Observatory which included representatives of the regional communities’ child protection, police and judicial systems, NGOs and relevant National Ministries, coordinated by the Social Welfare Ministry and Save the Children.

3.6. Criteria for evaluating centralized or decentralized organizational options

The following criteria can be used to evaluate the various organizational options and choose which to follow:

a. Institutional and political consensus
   - Is the central government willing to take on the role of collecting child protection data?
   - Will it ensure that it is free from political interference, for example, by setting it up as an independent entity?
   - Where does the statistical expertise lie?
   - Is there stakeholder commitment to the job?

b. Available resources
   - If the government is willing to take on this role, will it fund and staff the work?
   - Are sufficient trained personnel available?

c. Organizational issues
   - Has the government got the capacity to undertake this role?
   - Would an independent body be best placed to carry out this work?
   - Would the development of new data collection systems be more successful if undertaken at a local rather than central level?

d. Statistical issues
   - What data are required?
   - What definitions are to be used for collecting the data?
   - Will data on suspected or at-risk-of, as well as substantiated, maltreatment be collected?
   - Will data be collected at an individual child level or at an aggregated population level?
   - Will the data include extra-familial and institutional as well as intra-familial maltreatment?
   - Which agencies will supply the data and in particular, will social welfare and criminal justice agencies supply information that relates to individual children or cases?

e. Co-ordination with information provided by NGOs and other organisations that collect data
   - Which, if any, other organisations collect child abuse data?
   - Will they be agreeable to supplying information to a national collection agency?
   - How practicable is it for this information to be supplied?

f. Economic and financial issues
   - What will it cost to collect, analyse and publish the data?

h. Uses of the data collection
   - Will the data provide a national and local understanding of child abuse?
   - How will the data be reported and disseminated?
   - How will it be used to inform legislation, policies and practice?
   - How can it be used for comparisons between countries?
How will the data be used together with other statistics, for example on poverty or domestic violence?

3.7. Mandatory Reporting of child abuse and neglect as a tool for improving data collection and monitoring on child abuse

Despite greater social awareness of child abuse and neglect, the topic continues to be a complex one for professionals and the lay community alike. To prevent abuse and combat violence against children, some countries, for example Cyprus, have instituted mandatory reporting of child abuse referrals/cases not only by professionals who work in public services but also those working in the private sector. In addition, mandatory reporting may apply to members of the public. In the following paragraph the issue concerning the likelihood that mandatory reporting may support data collection and monitoring the extent of the phenomenon, at least at a reporting level, is discussed.

Mandatory reporting requires professionals such as doctors, social workers, psychologists and teachers to report any suspected case of child abuse or neglect against a child to a designated authority. This obligation is set out in law or is part of administrative regulations, making it a mandatory requirement.

Ideally, the decision about whether a country will introduce mandatory reporting of child abuse should draw on the expertise of a multi-disciplinary group. A national committee or a working group could be set up to examine:

- the objectives of mandatory reporting;
- the different arguments for and against it;
- the advantages and disadvantages of each argument; and
- submit recommendations to the government.

Membership of such a committee should comprise not only a range of professionals who work within the field of child abuse i.e. practitioners, policy makers, advocates of children’s rights, service providers, etc but also external professionals, from both the public and the non-public sector.

The objectives of mandatory reporting could be to:

- protect the victim by reducing the chances of the victim continuing to be victimised through the closing of the criminal case when it is not simultaneously referred to social services, or from a very quick criminal procedure which does not give protection to the victim;
- prevent child abuse by referring cases not recommended for criminal procedures to social services so that the family can be helped to solve their problems in non-violent ways;
- monitor the extent of the problem though the creation of a central register which collects and analyses data available through the mandatory reporting processes (for example, profiles of the abusers). These data can contribute to the formulation of policy and program design relating to the prevention and combating of violence against children.

3.7.1. The advantages and disadvantages of mandatory reporting

The advantages of mandatory reporting are as follows:

- protection of children. More children could be protected as there would be more professional and public commitment to child protection;
- paramount consideration. A compulsory reporting law or administrative regulation emphasizes that the paramount consideration is the safety of the child;
- overcoming reluctance. Without mandatory reporting, at least for professionals, a large number of children would never be identified and provided with the services they need;
- breaking the silence. Abuse is often an ongoing activity and even at the cost of the parent blaming the child, the silence should be broken as there may be a real possibility of interrupting the cycle of violence and providing support services;
- early detection of the abuse may prevent further abuse by holding the abuser accountable for it and providing support to the family;
• prosecution of the perpetrators is likely to be facilitated;
• data collection and analysis on officially reported cases can be enhanced; they are useful for identifying the extent of the problem based on cases reported to the authorities;
• mandatory reporting is not a punitive service but rather one of social support and public health.

The disadvantages are as follows. It:
• could deter children and adults from revealing the abuse and as a consequence they would not receive help - possible reasons include fear of retaliation from the abuser, fear of a family separation or mistrust of the legal system;
• may damage the confidentiality of the therapeutic relationship between professionals and their clients;
• may discourage children and adults from disclosing abuse if they know that there are no structures for providing protection, support and treatment for children and families;
• may discourage individuals from disclosing abuse when the procedures and the legal system require complex procedures; and
• would add to an already heavy workload.

The Cyprus experience

Basic administrative data on child abuse in Cyprus dates back to 1994 when the first law against family violence was enacted. Since then each state agency has collected its own data for its own purposes.

In 1998 mandatory reporting was introduced and since then all relevant State agencies (police, social welfare services, education, health) report all referrals where there is a suspicion or evidence of violence against children within the family to the office of the Attorney General.

Mandatory reporting by all citizens of violence against children is also included in the latest amendment (2004) of the family violence law.

In order to measure the extent of the problem from reported cases, to study the profile of the victim and the perpetrator and to develop the services needed for preventing and handling the problem, the Advisory Committee for the Prevention and Combat of Violence in the Family has taken the initiative, with the cooperation of the office of the Attorney General, of establishing a database on family violence.

This database will derive statistical information from the administrative data collected through the mandatory reporting process. The aim is to create a systematic method of recording and accumulating cross-departmental statistics. To succeed in this, the Advisory Committee is discussing with the representatives of the various statutory agencies (a network of professionals involved in the field) the possibility of adopting a unified reporting form to include variables such as the different forms of violence, the characteristics of the victim and the perpetrator, the relationship between the victim and the perpetrator and further measures relating to the case.

Note: the Advisory Committee for the Prevention and Combat of violence in the Family is a multidisciplinary body established by the 1994 Law Violence in the Family (Prevention and Protection of Victims) and is comprised of experts on the subject from the state agencies and NGOs.

3.7.2. Implications of mandatory reporting

If mandatory reporting is chosen, consideration must be given to:
• establishing which public authority will receive the report;
identifying which cases are going to be reported;
• making the data collection system user-friendly, non-complex and, if possible, integrated with the paperwork already being completed by professionals;
• establishing protocols and very clear guidelines - procedures between the ministries and NGOs which deal with violence against children to guarantee the protection of the child;
• agreeing the use of standardised forms for the registration of each case so that practitioners can respond effectively when they are working with individual cases;
• establishing a monitoring mechanism to evaluate the progress of the system.

Attention to the aspect of mandatory reporting is clearly strictly connected to the process for the implementation of a new and more developed system of data collection and monitoring on child abuse. But mandatory reporting is not the only support for effective functioning of the system: a more general sensitization of all the providers of raw statistical data is required and also heightened awareness of the phenomenon in the community at large, especially, among all those who could possibly detect cases.

All these potential actors could be targeted by information campaigns, training activities to enhance their knowledge and capacity to detect child abuse cases, issue of specific protocols for assessing cases and on how to act, etc.

3.8. The contextual requirements for establishing and maintaining a data collection system

The implementation of a data collection and monitoring system requires a plan as to how to manage and overcome difficulties which may be encountered in relation to: the organization of the different structures involved in the data collection process; co-ordination between the bodies responsible for it and representatives of the institutions providing data; updating technological structures; changes in working methods and tools; and the involvement of personnel from different areas.

The following are some key issues for consideration:
• the availability of the financial and human resources required to carry out the necessary adaptations to the system
• the investment in training and communicating with those involved in the project, in order to support the processes of change
• the availability of time and resources for a thorough assessment of the initial output in order to identify errors
• encouraging stakeholders to participate in the evaluation of results and the using data for their working activities.

3.8.1. Training activities

No matter how well a statistical system has been designed, data collection will not be enhanced if the professionals responsible for gathering it do not understand the rationale behind it: if they do not see direct advantages in their daily work deriving from the data; or if they do not know how to use the data to meet their various needs and interests.

Training is essential to achieve the following four data collection objectives:
• legitimization of the project
• understanding the scope of the system
• learning to use new technologies and instruments
• understanding the new epistemological paradigm for an old phenomenon

Training can help legitimate the system to senior managers of institutions involved in the production of data and to the professionals asked to be data collectors or sources. Training has not only an operational aim, but it serves also to change people’s culture and sensitize them to child protection issues through data, and to encourage the use of data. Many of those involved will not, as a matter of habit, be analysing information in order to produce statistics or using data to monitor their work or inform them about certain aspects of it.
The production of joint information on the features of data collected by all the services and institutions involved (e.g. justice system, social services or police) can facilitate an understanding of different perspectives on child abuse, and endorse the understanding of the aims of the project.

Wide-ranging training on the organization, technological aspects and content of the data collection system can support decisions and implementation related to the:

- technological model of organization and data sharing;
- individuation of relationships and data exchange rules;
- definition of the rules governing access to data;
- dissemination of data;
- procedures for the updating and managing of the system.

Obviously a key step is also technical training to learn the logic and understand the conceptual framework behind the choice of variables and their codification. It is imperative to provide clear documentation on the rules and procedures, as well as formal training of personnel on how to record and edit data.

It is important to invest in training in the initial stage to avoid systematic, erroneous behaviours which could influence the quality and reliability of data. The more innovative the planned changes and the technological requirements, the more important it is to plan a complete and comprehensive process of familiarising staff with the system.

The burden and extent of the training activity obviously also depends on the characteristics of the system, i.e. is it centralized or decentralized? The former implies substantial responsibility for central government in terms of expenditure and direct actions whereas in the latter option, a national bureau usually has less responsibility for training and quality control of the data.

Moreover, the type of training also depends on the type of data collection chosen: administrative data may incur high initial costs to change old procedures, but the marginal costs should decrease over time, whereas the investment required tends to remain constant in surveys.

3.8.2. Procedures for co-ordination and co-operation

To support the implementation of a new data collection and monitoring system, the rules of co-operation between the different actors need to be defined, after consulting all relevant stakeholders. The establishing of a permanent committee with representatives from all the agencies and bodies involved could facilitate decision-making on the updating, ongoing development and monitoring of the system.

This co-ordination would be useful not only during the data collection phase but also at the data validating and analysing stage, in particular during the initial phase, when assessment of data coherence is vital.

The development of a national system for collecting and monitoring data on reported child abuse is a complex process, which requires the participation and co-operation of many parts of the system in order to achieve a successfully functioning, sustainable system.

Continued co-operation and communication on the project will facilitate the engagement and ongoing commitment of stakeholders.

Mechanisms for achieving this co-ordination and co-operation will be chosen according to the model of organization. A prerequisite for effectiveness in co-ordinating the different agencies (if there is not one sole agency responsible) is having a technical co-ordinator to maintain the network: schedule meetings, circulation of information and documents, etc.

3.8.3. Disseminating and using data

Different stakeholders will have differing views of the importance of disseminating and using data depending on their levels of governing i.e. national, regional or local and their experiences of using data. For each, it is possible that different aggregate data or aspects of it will be interesting. Data must be useful for those gathering it as well as for its potential users, including: policymakers, professionals, NGOs, national authorities, international organizations and researchers.
The dissemination and use of data will be influenced by the rules and the organization of the system, but there are internationally accepted quality requirements and it is important that they are taken into consideration when dissemination and data usage modalities are considered, and this task should be addressed in the course of the very earliest strategic implementation planning. Dissemination can be promoted through specific agreements for the return of analysed data to those who collect data and upload them to the system (the producers), and by making it available to the general public, through publication on a web site, in published reports and on CD Rom. To enable users to interpret the statistics correctly, an explanation of the methods used in the collection, processing and analysis of the data, as well as its limitations, if any, should be included with the data (U.N. 2003). Good dissemination processes and promotion of data usage serve also to promote the data collection system and its future development as the results (outputs) become visible.

Good analysis and interpretation of the data gathered – both population- and case-based – and appropriate presentation and dissemination of the results are necessary for action to prevent child maltreatment to be effective. It could be valuable also for data on child abuse to be presented in focused reports on child maltreatment, using simple language and clear charts and tables. This information should also be made readily available to the media and civil society organizations.

There are several strategies for disseminating data:

- regularly produce public reports, research papers and fact sheets
- organize training sessions on the methodologies used for improving data collection in bordering sectors or on linked subjects
- use the news media and the Internet to share findings with national and international audiences
- organize meetings with specific groups of stakeholders and users to share evaluations, discussing results and methodologies
- involve local authorities, data collectors and intermediate organizations in the dissemination of findings at a local level

The European Statistics Code of Practice sets out 15 key principles for the production and dissemination of European official statistics and the institutional environment under which national and community statistical authorities operate (Quality framework for European Statistics). With the adoption of the European Statistics Code of Practice, Eurostat and the statistical authorities of the EU-Member States have committed themselves to an encompassing approach towards high quality statistics. The fifteenth principle is related to dissemination, in particular to accessibility and clarity:

“European statistics should be presented in a clear and understandable form, disseminated in a suitable and convenient manner, available and accessible on an impartial basis with supporting metadata and guidance”. The Code of practice also sets out indicators, that should be used to assess the real commitment to adhering to the principles. For accessibility and clarity the indicators are:

- Statistics are presented in a form that facilitates proper interpretation and meaningful comparisons
- Dissemination services use modern information and communication technology and, if appropriate, traditional hard copy
- Custom-designed analyses are provided when feasible and are made public
- Access to microdata can be allowed for research purposes. This access is subject to strict protocols
- Metadata are documented according to standardised metadata systems
- Users are kept informed on the methodology of statistical processes and the quality of statistical outputs with respect to the European Statistical System (ESS) quality criteria.
Chapter IV. The methodological dimension

4.1. Issues relating to data collection and the derivation of statistical data from administrative activities

The following paragraphs will consider some technical and quality issues in the execution of statistical analysis derived from data collection and from administrative data.

4.1.1. Data collection and administrative data: concepts and definition

Data collection is any process whose purpose is to acquire or assist in the acquisition of data. Collection is achieved by requesting and obtaining pertinent data from individuals or organisations via an appropriate vehicle. Data capture refers to any process that converts the information provided by a respondent into electronic format suitable for use in subsequent processes. Sometimes data are captured as part of the collection process in surveys using instruments such as CAPI and CATI.

The method of data collection and capture operations has a very high impact on the quality of the final data.

Some general factors have to be considered with regard to data collection:
- the funds available for statistical development are often limited. It is necessary to define, as accurately as possible, the likely cost of collecting such data,
- the current state of statistical development,
- the availability of in-house expertise,
- the availability of information technology.

Administrative records are data collected for the purpose of carrying out various non-statistical programmes. However they can become sources to be used for statistical analyses.

When using administrative data for statistical purposes, as has already been explained, it is important to understand the context in which the administrative organisation created the data (e.g. legislation, business objectives). This has a profound impact on the data coverage and content, the concepts and definitions used, the frequency of collection, the quality of the recorded information, and its stability over time.

One must bear in mind the fundamental reason for the existence of these administrative records: they are the result of an administrative programme that was put in place for administrative reasons. Often the statistical uses of these records were unknown when the programme was implemented and the statistical agency invariably has limited impact on the development of the programme. For that reason, any decisions related to the use of administrative records must be preceded by an assessment of such records in terms of their coverage, content, concepts and definitions, the quality assurance and control procedures put in place by the administrative programme to ensure their quality, the frequency of the data, the timeliness in receiving the data from the statistical agency and the stability of the programme over time.

Obviously, the cost of obtaining the administrative records is also a key factor in deciding whether to use such records.

Administrative records present a number of advantages for a statistical agency and for analysts. Demand for statistics on all aspects of our lives, our society, our economy etc continues to grow. Statistical uses of administrative records include:

(i) use for survey frames, directly as the frame or to supplement an existing frame;
(ii) replacement of data collection;
(iii) use in editing and imputation;
(iv) direct tabulation;
(v) indirect use in estimation (e.g. as auxiliary information in calibration estimation, benchmarking), and
(vi) survey evaluation, including data quality assurance (e.g. comparison of survey estimates with estimates from a related administrative programme).

It is good practice to use administrative records whenever they present a cost-effective alternative to direct data collection. As with any data acquisition programme, consideration of the use of administrative records for statistical purposes is a matter of balancing the costs and benefits. Administrative records start with the huge advantage that they avoid further data collection costs and respondent burden, provided the coverage and the conceptual framework of the administrative data are compatible with the target population. Depending on the use, it is often valuable to combine an administrative source with another source of information.

The use of administrative data may require the statistical agency to implement a number, usually only a few, of the survey steps. This is because many of the survey steps (e.g. direct collection and data capture) are performed by the administrative organisation. As a result, guidelines are required to suggest ways to compensate for any differences in the quality goals of the source organisation (e.g. to compensate for the outgoing quality from the data capture, which is often uncontrolled).

4.1.2. Principal types of surveys

The term survey is used here generically to cover any activity that collects or acquires statistical data. Included are:

- censuses, which attempt to collect data from all members of a population;
- sample surveys, in which data are collected from a (usually random) sample of population members;
- collection of data from administrative records, in which data are derived from records originally kept for non-statistical purposes (frequently used to monitor cases attended to by the service or institution);
- derived statistical activities, in which data are estimated, modelled, or otherwise derived from existing statistical data sources.

The first technique is difficult to apply to this kind of research because of the problems in the identification of our statistical population. Moreover, although from a theoretical point of view a census survey can produce good estimates, in practice carrying one out can be very problematic: the huge cost of the survey, the quality of the data collected and the impossibility to reach all the units suggest a restricted use of this type of investigation for the basic theme in this context.

Census surveys may not be the best choice in every situation. For example, if statistical planners are only interested in estimates of the national incidence of some phenomenon, sampling may be a cheaper and quicker approach than a census. Precision is not always necessary in order to answer some types of questions. The major point to be made is that the choice between census and sample approaches represents a trade-off. Both approaches are subject to error, both demand quality control techniques and both can be useful depending on the level of precision and detail needed.

Some of the typical ambiguity in cost-benefit analyses can be reduced through an approach that makes extensive use of various pre-tests and studies, including the following:

- **Feasibility studies** to determine whether necessary information is easily retrievable from existing records;
- **Pre-tests** to determine whether particular forms or survey questions provide the information needed;
- **Pilot studies** to test the value of large-scale series or surveys by first testing the implementation of small regional or local prototypes;
- **Methodological studies** where some investment is made explicitly to design and test cost-effective data-collection procedures.
4.1.2.1. Census administrative data: advantages and disadvantages

As already mentioned in the introductory section, administrative data represent the primary source for the collection of data on the phenomenon of abuse and maltreatment. The administrative aim for the collection of such data therefore characterises its nature.

We can analyse data to produce simple descriptive statistics, such as frequencies, percentages, rates and rates of change, that can answer many basic questions about size, characteristics and changes of the units of study.

Administrative data offer a large amount of information, at a low cost, for statistical purposes. However, limitations exist as to the use of this kind of data as their collection is designed and executed with different aims. In particular:

- the statistical target population may not coincide with the one registered in the administrative data. This is likely to happen for a phenomenon like maltreatment and child abuse as in many cases the abuse is hidden and so will not be captured by the administrative data, which only covers abuse known to authorities;
- problems of coverage can also occur if the administrative purposes of the collection have the potential to influence coverage. For example, if funding is allocated based on numbers of children reported as being abused, the administrative agency may be tempted to record more cases of abuse than are actually known;
- concepts, definitions and classifications adopted in the collection of administrative data may not coincide with the researcher’s needs. For example, a different classification among typologies of abuse would not permit a comparison between different levels of data;
- the quality of data collected with administrative aims may not be sufficient for the statistical needs; particularly for variables that are not fundamental to the execution of administrative processes;
- the collection of data in time for statistical information may not be guaranteed.

In general, a wider use of administrative data can be favourable for many important sectors in order to increase the availability of statistical information and a sensible reduction in costs. Administrative data can be used together with data coming from surveys to obtain indirect estimations, for example of hidden abuse. It is a very frequent procedure to cross-validate cases from different administrative sources in order to estimate the size of the hidden population. This has been done, for example, in the estimation of illegal drug consumption, comparing cases reported by hospitals, the judicial system and jails.

If possible, it is very helpful to influence the development of the information system. If it is set up in a way that permits the collection of administrative data for statistical aims, it would increase the use of this kind of data and facilitate the statistical analysis.

As discussed in Chapter 3, it is important that data are collected and used legally. Statistical Acts provide statistical agencies with the authority to access administrative records for statistical purposes. This is important as this use may not have been foreseen by the original suppliers of information. Moreover, protocols should be prepared to explain and justify the public value and innocuous nature of this secondary use of the data.

Some other key points can help to ensure the data collection system is of an acceptable quality:

- Collaboration between the statistical agency and the designers of new or redesigned administrative systems. This can help in building statistical requirements into administrative systems from the start. Such opportunities are rare, but when they happen, the eventual statistical value of the statistical agency’s participation can far exceed the time expended on the exercise.
- Maintaining continuing liaison with the providers of administrative records. Liaison with the provider is necessary at the beginning of the use of administrative records. However, it is even more important to keep in close contact with the supplier at all times so that the statistical agency is not surprised by any impending changes, and can even influence them. Feedback to the supplier of statistical information, such as weaknesses found in the data, can be of value to the supplier, leading to an improvement in the administrative source.
• Bear in mind that the longevity of the source of administrative data and its continued scope is usually entirely in the hands of the administrative organisation. The administrative considerations that originally dictated the concepts, definitions, coverage, frequency, timeliness and other attributes of the administrative programme may, over time, undergo changes that distort time series derived from the administrative source. Be aware of such changes, and deal with their impact on the statistical programme.

• Implement continuous or periodic assessments of the quality of the incoming data. Assurance that data quality is being maintained is important because the statistical agency does not control the data collection process. This assessment may consist of implementing additional safeguards and controls (e.g. the use of statistical quality control methods and procedures, edit rules) when receiving the data, comparisons with other sources or sample follow-up studies.

4.1.2.2. Sample data: advantages and disadvantages

In sample surveys only a small part of the population is selected and analysed. This reduces the cost of the survey and allows concentration on the improvement of data quality, but the selection of a part of the population reduces the precision of the results.

Generally, the type of data affects the conclusions that can be drawn from the data. For example, census administrative data show the trials carried out on behalf of children who have been abused, but may not show the actual prevalence of abuse as some instances may be hidden. Conversely, a survey of adults asked about their experiences of abuse as a child should provide prevalence, but it will be very dated. It is very difficult to ask children about their experiences of abuse for various reasons. Special sampling methods are used when trying to estimate the size of a hidden population. Snow ball and capture-recapture procedures are two examples.

There are several approaches to sampling:

Simple random sampling

In a simple random sample, all elements of the sample frame are treated equally and have equal opportunity of being selected. The population is not subdivided or partitioned. Sampling is usually undergone without replacement (i.e. a subject can only be selected once).

Stratified sampling

Where the population embraces a number of distinct categories, the frame can be organised by these categories into separate strata. A sample is then selected from each stratum separately, producing a stratified sample. The two main reasons for using a stratified sampling design are to ensure that particular groups within a population are adequately represented in the sample, and to improve efficiency by gaining greater control of the composition of the sample. In the second case, major gains in efficiency (either lower sample sizes or higher precision) can be achieved by varying the sampling fraction from stratum to stratum. The sample size is usually proportional to the relative size of the strata. However, if variances differ significantly across strata, sample sizes should be made proportional to the stratum standard deviation. Disproportionate stratification can provide better precision than proportionate stratification. Typically, strata should be chosen to:
- have means which differ substantially from one another,
- minimise variance within strata and maximise variance between strata.

Cluster sampling

Sometimes it is cheaper to ‘cluster’ the sample in some way, e.g. by selecting respondents from certain areas only or certain time-periods only (nearly all samples are in some sense ‘clustered’ in time although this is rarely taken into account in the analysis). Once the cluster is defined, the different units within a cluster (a type, e.g. cities of similar population size) are considered exchangeable and a simple random sample of them is selected.

Cluster sampling is an example of ‘two-stage sampling’ or ‘multistage sampling’: in the first stage a sample of areas is chosen; in the second stage a sample of respondents within those areas is selected.

This can reduce travel and other administrative costs. It also means that one does not need a sampling frame for the entire population, but only for the selected clusters.
Cluster sampling generally increases the variability of sample estimates above that of simple random sampling, depending on how the clusters differ between themselves, as compared with the within-cluster variation.

Quota sampling

In quota sampling, the population is first segmented into mutually exclusive sub-groups, as in stratified sampling. Then judgment is used to select the subjects or units from each segment based on a specified proportion. Similar size quotas are usually established in order to ensure the capture of all types of respondents and equal representation (e.g. gender and age quotas).

It is this second step which makes the technique one of non-probability sampling. In quota sampling the selection of the sample is non-random. For example, interviewers might be tempted to interview those people who look most helpful. The problem is that these samples may be biased because not everyone gets a chance of selection. This random element is its greatest weakness and quota versus probability has been a matter of controversy for many years.

4.1.2.2.1. Sampling method

Within any of the types of frame identified above, a variety of sampling methods can be employed, individually or in combination.

Random sampling

In random sampling, also known as probability sampling, every combination of items from the frame, or stratum, has a known probability of occurring, but these probabilities are not necessarily equal. With any form of sampling there is a risk that the sample may not adequately represent the population, but with random sampling there is a large body of statistical theory which quantifies the risk and thus enables an appropriate sample size to be chosen. Furthermore, once the sample has been taken, the sampling error associated with the measured results can be computed. With non-random sampling there is no measure of the associated sampling error. While such methods may be cheaper, this is largely meaningless since there is no measure of quality. There are several forms of random sampling. For example, in simple random sampling, each element has an equal probability of being selected. Other examples of probability sampling include stratified sampling and multistage sampling.

Matched random sampling

A method of assigning participants to groups in which pairs of participants are first matched on some characteristic and then individually assigned randomly to groups. The procedure for matched random sampling can be briefed with the following contexts,

a) Two samples in which the members are clearly paired, or are matched explicitly by the researcher. For example, IQ measurements on pairs of identical twins.

b) Those samples in which the same attribute, or variable, is measured twice on each subject, under different circumstances. Commonly called repeated measures. Examples include the times of a group of athletes for 1500m before and after a week of special training.

Systematic sampling

Selecting every 10th name from the telephone directory is called an every 10th sample, which is an example of systematic sampling. It is a type of nonprobability sampling unless the directory itself is randomised. It is easy to implement and the stratification induced can make it efficient, but it is especially vulnerable to periodicities in the list. If periodicity is present and the period is a multiple of 10, then bias will result. It is important that the first name chosen is not simply the first in the list, but is chosen to be the nth, where n is a random integer in the range 1 ...10-1. Every 10th sampling is especially useful for efficient sampling from databases.

Convenience sampling

Sometimes called grab or opportunity sampling, this is the method of choosing items arbitrarily and in an unstructured manner from the frame, for example, the first 5 patients demanding attention at a clinical setting. Though almost impossible to treat rigorously, it is the method most commonly
employed in many practical situations. In social science research, snowball sampling is a similar technique, where existing study subjects are used to recruit more subjects into the sample.

4.1.3. Aggregate and unit record approaches to data collection

The term “aggregate data” refers to data that summarise the attributes of a given population according to a predefined set of indicators. As such, collecting aggregate data involves defining a limited set of information categories and then counting the number of cases that fall into each category over the course of a given time period. Information provided by such a collection scheme is limited to the specific categories defined in the instrument. It is not possible to manipulate or reprocess the data to answer questions involving categories more detailed than those defined, or to do cross-tabulations not predetermined by the instrument.

Aggregate data collection has often been used in situations where data volumes are very large, or where information requirements have been narrowly defined or are not subject to change in the short or medium term. In these situations, the potential for lower costs (often associated with aggregate data collection) outweighs the inherent loss of analytical flexibility.

The major advantages of collecting aggregate data compared with unit record data are that the amount of information received by the statistical agency is reduced and that the analysis requirements are reduced because the data are received at the same level of aggregation as that in which they will be reported, usually in tabular form. Another advantage is that aggregate data can sometimes be less expensive to collect and easier to process, especially in a non-computerised environment.

In aggregate data collection, the choice of level of aggregation is crucial and depends on several considerations, including:

(a) The level of detail required in the analysis and results;
(b) The type of database being constructed;
(c) The data handling capabilities in the statistical agency;
(d) The capabilities of the data contributors;
(e) The data collection system, whether centralised, decentralised, or some combination of the two.

Unit record data collection, on the other hand, collects a predefined set of variables for each member of a specified population. As this method of data collection stores a separate record for each case, as well as information about each variable for each case, it can be cross tabulated or otherwise manipulated to analyse and answer questions relating to any of the variables it collects. The inherent ability to answer ad hoc questions at the individual case level offers considerable flexibility and utility.

In situations where complex processes are being described or where data volumes are relatively low, unit record data collection has a distinct advantage. In low data volume environments, moreover, aggregate data collection may not always result in a meaningful reduction in costs. Unit record data collection has the further advantage of facilitating data verification and data quality assessment. This is an important consideration for ensuring the reliability of statistics. Experience gained in the collection of data from many jurisdictions shows that data suppliers and users must have a high level of confidence in the data. The best mechanism to promote confidence is to facilitate data verification and analysis at the most detailed level possible.

However, unit record data have several major advantages compared to aggregate data. The level of detail in unit record data is much greater, significantly increasing flexibility in data analysis. Since they permit the cross-tabulation of any combination of variables, unit record data can answer a wide range of ad hoc questions that often cannot be answered with the aggregate data collection approach. In addition, unit record data greatly enhance the system’s capability to verify data quality through validation rules and procedures. With access to each record, it is possible to identify and correct a wide range of data quality problems. When resources permit, the unit record approach to data collection should take precedence over the aggregate data approach.

The first consideration, the level of detail needed for analysis, is perhaps the most crucial. If those planning the data collection prepare detailed outlines of the tabulations they intend to produce, they are far less likely to make mistakes in their determination of the appropriate levels of aggregation. The scope of aggregation varies depending on the intended uses of the statistics, but two dimensions are
almost universally employed: a time frame and classifications based on jurisdiction, bureaucracy or geography. The time frame in an operational system is the time or date associated with specific events, such as the crime, arrest or sentencing.

Both aggregate and unit record data collection require a base level of administrative support. Generally, the smaller the data volume, the smaller the differences in administrative support between the two approaches. Thus, in many cases, the potential savings realised through aggregate data collection may not outweigh the potential loss in data flexibility and utility.

In a statistical system, time is an aggregation criterion, such as the number of maltreatments reported or the number of offenders committed to prison in a given calendar year. For example, unit record data may be centrally collected from local contributors by a provincial or state bureau, while aggregate data are sent from the provincial or state bureau to a national repository for use in the publication of national statistics.

4.1.3.1 Record linkage

When data from more than one administrative source are combined, additional attention is paid to reconcile potential differences in their concepts, definitions, reference dates, coverage, and the data quality standards applied at each data source. Examples are education data sources, health and crime reports, and registries of births, marriages, licenses, and registered vehicles, which are provided by various organisations and government agencies.

Record linkage is used in creating a frame, removing duplicates from files, or combining files so that relationships between two or more data elements from separate files can be studied. Much of the record linkage work in the past was done manually or via elementary but ad hoc rules. Nowadays, computer-matching techniques are based on formal mathematical models subject to testing via statistical and other accepted methods.

Privacy concerns that may arise when a single administrative record source is used are multiplied when linkage is made to other sources. In such cases, the subjects may not be aware that information supplied on two separate occasions is being combined. The Policy on Record Linkage is designed to ensure that the public value of each record linkage truly outweighs any intrusion on privacy that it represents. It is not always easy to combine an administrative source with another source of information. This is especially true when a common matching key for both sources is not available and record linkage techniques are used. In this case, the type of linkage methodology (i.e. exact matching or statistical matching) should be selected in accordance with the objectives of the statistical programme. When the purpose is frame creation and maintenance, edit and imputation or weighting, exact matching is appropriate. When the sources are linked for performing some data analyses that are impossible otherwise, statistical matching can be considered, i.e. matching of records with similar statistical properties.

4.1.4. Issues relating to the use of data
4.1.4.1. General guidelines on quality in data collection systems

The information quality of statistical outputs is defined on some general elements, which indicate how usable the information is for the clients. These dimensions of quality are interrelated although there is no effective model to bring all of these characteristics of quality into a single indicator. Every dimension has to be adequately managed if information is to be fit for use; failure in any one dimension will impair or destroy the usefulness of the information. These criteria are explained as follows:
Dimensions of Information Quality

**Relevance**

The relevance of statistical information reflects the degree to which it meets the real needs of clients. It is concerned with whether the available information sheds light on the issues of most importance to users. Assessing relevance is a subjective matter dependent upon the varying needs of users. The Agency's challenge is to weigh and balance the conflicting needs of current and potential users to produce a programme that goes as far as possible in satisfying the most important needs within given resource constraints.

**Accuracy**

The accuracy of statistical information is the degree to which the information correctly describes the phenomena it was designed to measure. It is usually characterized in terms of error in statistical estimates and is traditionally decomposed into bias (systematic error) and variance (random error) components. It may also be described in terms of the major sources of error that potentially cause inaccuracy (e.g. coverage, sampling, nonresponse, response).

**Timeliness**

The timeliness of statistical information refers to the delay between the reference point (or the end of the reference period) to which the information pertains, and the date on which the information becomes available. It is typically involved in a trade-off against accuracy. The timeliness of information will influence its relevance.

**Accessibility**

The accessibility of statistical information refers to the ease with which it can be obtained from the Agency. This includes the ease with which the existence of information can be ascertained, as well as the suitability of the form or medium through which the information can be accessed. The cost of the information may also be an aspect of accessibility for some users.

**Interpretability**

The interpretability of statistical information reflects the availability of the supplementary information and metadata necessary to interpret and utilise it appropriately. This information normally covers the underlying concepts, variables and classifications used, the methodology of data collection and processing, and indications of the accuracy of the statistical information.

**Coherence**

The coherence of statistical information reflects the degree to which it can be successfully brought together with other statistical information within a broad analytic framework and over time. The use of standard concepts, classifications and target populations promotes coherence, as does the use of common methodology across surveys. Coherence does not necessarily imply full numerical consistency.

**Statistics Canada Quality Guidelines**

The quality of derived statistical activities is also largely determined by the quality of the component parts: data collection, capture, elaboration, samples, receiving and recording data and so on. In the execution of any data collection there are some standard technical operations for collecting data that need to be carried out at the appropriate stage of the process and some of these are shown below (Source: Statistics Canada):

In designing data collection processes, especially editing and coding, make sure that the procedures are applied to all units of study as consistently and in as error-free a manner as possible. Automation is desirable. Enable the staff or systems to refer difficult cases to a small number of knowledgeable experts. Centralise the processing in order to reduce costs and make it simpler to take advantage of available expert knowledge. Given that there can be unexpected results in the collected information, use processes that can be adapted to make appropriate changes if found necessary from the point of view of efficiency.

Monitor the frequency of edit rejects, the number and type of corrections applied by stratum, collection mode, processing type, data item and language of the collection. This will help in evaluating the quality of the data and the efficiency of the editing function.

Establish appropriate sample control procedures for all data collection operations. Such procedures track the status of sampled units from the beginning through the completion of data collection so that data collection managers and interviewers can assess progress at any point in time. Sample control procedures and feedback from them are also used to ensure that every sampled unit is processed through all data collection and capture steps, with a final status being recorded.

Exploit available technology to improve the efficiency and quality of data collection and capture processes. Advances in communications and computing technology offer opportunities to greatly reduce the costs and risks associated with these processes. For example, computer-assisted survey interviewing (e.g. CAPI and CATI) and electronic data reporting (EDR) via the Internet, automated data entry (using ICR) and automated coding by text recognition (ACTR) are approaches that take advantage of available technologies.
Control paper questionnaire delivery operations in mail surveys to ensure that each unit that has been selected to be in the survey receives the appropriate questionnaire. Once the questionnaire is returned, verify the accuracy of the coverage information and the quality of the data provided. Follow-up interviews may be needed in some cases. When no questionnaire is received, follow-up activities are necessary to establish the status of the unit and to obtain the missing information. Through all these steps, put in place a system to report on the completion status of each unit.

Interviewers and data capture operators are critical to the success of most data collection and capture operations. Ensure that they have appropriate training and tools.

Ensure that the respondent or the appropriate person within the responding household or organisation is contacted at the appropriate time so that the information is readily available. Allow respondents to provide the data in a method and format that is convenient to them or their organisation. This will help increase response rates and improve the quality of the information obtained from the respondents.

Institute effective control systems to ensure the security of data capture, transmission and handling. Prevent loss of information and the resulting loss in quality due to system failures or human errors.

Manual data capture from paper questionnaires or scanned images is subject to keying errors. Incorporate on-line edits for error conditions that the data capture operator can correct (i.e. edits that will identify keying errors). Record these cases for later review and analysis.

Implement verification procedures to assess how well operators are meeting the pre-established levels of keying error rates.

Use statistical quality control methods to assess and improve the quality of collection and capture operations. Collect and analyse quality control measures and results in a manner that would help identify the major root causes of error. Provide feedback reports to managers, staff, subject-matter specialists and methodologists. These reports should contain information on frequencies and sources of error. Various software tools are available to help in this regard.

Use measures of quality and productivity to provide feedback at the interviewer or operator level, as well as to identify error-causing elements in the design of the collection vehicle or its processing procedures.

Use subsequent survey processes to gather useful information regarding quality that can serve as signals that collection and capture procedures and tools may require changes for future survey cycles. For example, the editing or data analysis stages may suggest the possibility of response bias or other collection-related problems.

4.1.4.2. Balancing relevance of data and respondent burden

Statistical agencies also share with many respondents a growing concern over the mounting burden of response to surveys. Respondents may also react negatively if they feel they have already provided similar information (e.g. revenue) to administrative programmes or other surveys. Administrative records, as they already exist, do not require the cost of direct data collection, nor do they impose a further burden on respondents. It is important to note that the technology revolution has also enabled statistical agencies to overcome the limitations caused by the processing of large datasets. For all these reasons, administrative records are becoming increasingly usable and are being used for statistical purposes.

The statistics produced by a data collection instrument must be as relevant as possible to data users. This is vital because data collection and reporting require the participation and support of a wide range of personnel. If the information collected by the data collection instrument is not relevant, the burden on the public administration will be greater than the benefit received, and critical support for the effort will not be sustained. Consequently, decision makers must be sensitive to the fact that collecting data places a real burden on respondents. Every effort must be made to minimise the size of the burden and to ensure that the information that is collected is of the highest possible value to the greatest number of users. Only by balancing respondent burden with data relevance can a statistical programme succeed in the long term.

Respondents, or data suppliers, especially individuals and organisations who complete questionnaires, invariably without payment, are a survey-taking organisation’s most valuable resource. To ensure continuing cooperation, it is essential to minimise the burden on respondents. Gaps or
inconsistencies in the data are best corrected by consulting respondents themselves during data collection or very soon afterwards. Given the high impact of data collection and capture operations on data quality, use of appropriate quality and performance measurement tools to manage these processes and provide objective measurements to supervisors and clients is highly recommended. Throughout the process, appropriate steps must be taken to preserve the confidentiality of the information collected.

Like data collected by means of a survey, administrative data are also subject to partial and total nonresponse. In some instances, the lack of timeliness in obtaining all administrative data introduces greater nonresponse. Unless nonrespondents can be followed up and responses obtained, it will be necessary to develop an imputation or weight-adjustment procedure to deal with this nonresponse. Administrative sources are sometimes outdated. Therefore, as part of the imputation process, special attention must be paid towards the identification of active and/or inactive units. Some imputation or transformation may also be required in cases where some of the units report the data at a different frequency (e.g. weekly or quarterly) than the one desired (e.g. monthly).

Bear in mind that if the information they provide to the administrative source can cause gains or losses to individuals, there may be biases in the information supplied. Special studies may be needed in order to assess and understand these sources of error. In this field the biases can derive from the personal attitudes and beliefs of the professionals (worker bias), which influence the observation and interpretation of the events, loss or exclusion of cases (underreporting bias or false negatives), overrepresentation of cases (over-reporting bias or false positive) errors in reporting (reporting bias).

Expenditure, performance and quality measurements gathered during the data collection operation enable the survey manager to make decisions regarding the need to modify or redesign the process. Track actual costs of postage, telephone calls, computing, and person-day consumption. Important quality measures include response rates, processing error rates, follow-up rates and counts of nonresponse by reason. When these measurements are available at all levels at which estimates are produced and at various stages of the process, they can serve both as performance measures and measures of data quality.

4.2. Technical considerations relating to records and operational information systems

Regardless of how data are collected, a processing system is required. A well-planned and efficient system of data processing is essential for timely tabulation and analysis. The development of a data processing system requires consideration of processing steps and procedures; personnel and training requirements; equipment and facilities requirements; timetables for each operation; and fiscal resources and requirements. Decisions concerning specific steps and procedures should be based on the kinds of analysis intended for the data. If, for example, proposed tabulations are precisely defined before data are processed, the processing can be planned specifically to meet these needs.

One of the most pressing questions in the area of data processing concerns the role of computers, including microcomputer technology. First, the major processes and steps for data processing will be reviewed, including receiving and recording; securing and storing; editing; and analysing the data.

4.2.1. Receiving and recording data

Data can be received and recorded in various ways. As mentioned above, they can be received on unit record forms or pre-tallied on ledger sheets. In automated environments, machine-readable data may be transmitted directly to the receiving office. Data can be received daily, weekly, monthly, quarterly or in some other batch mode. They may be received in one mode, such as an investigative case summary, and converted into another mode for entry into the information system. They may be gathered by an agency and entered into its own information system or forwarded to another agency to be entered into that information system. Too often, the design of recording forms and the documentation of coding and classification rules are treated as trivial or technical matters. As mentioned in the previous chapters, decisions on what is recorded and how it is recorded are crucial. It
is important to provide clear documentation of the rules and procedures, as well as formal training of personnel on how to record and edit data.

4.2.2. Technologies for data storing

Software

The development of application programmes for use in the processing of criminal justice statistics requires a considerable amount of time and technical expertise. With the greatly increased availability of commercial software packages for various applications, an attractive alternative to the development of custom-made programmes is to use such readily available software. However, since it is rare that a package or packages will satisfy all the data processing requirements, some customisation and additional programming are almost always required. Nevertheless, the use of appropriate software can substantially reduce the development costs and programming burden, even when some customisation is required. Thus, the acquisition of packaged software for record-keeping, data editing and tabulation can be particularly beneficial in countries with a limited budget and a shortage of trained systems personnel. With the increasing number and diversity of packages, a major issue is the selection of the appropriate software. Mistakes in software selection can severely reduce the value of the results. Thus, it is important for the data processing staff to learn about and keep up-to-date, as far as possible, with available software packages prior to acquisition. Assessing the appropriateness of any package requires answers to four basic groups of questions:

(a) **Capabilities** Is the package designed to meet the specific needs in question? Has it been successfully used for the application in question? Is there documentation on the results of tests or other user responses? Are the package’s statistical and numerical capabilities adequate to deal with the amount of data in question?

(b) **Hardware requirements** Will the package work on existing equipment and configurations? Has the package been successfully used on comparable equipment?

(c) **Support** Does proper documentation exist for use by technical staff? Are training and instructional aids available? Is there ready, ongoing access to expertise on the package? Is the programme maintained by a reliable and accessible organisation?

(d) **Ease of use and cost** Is the programme easy to learn? Is it inexpensive to run?

Hardware

Chronologically, deciding on computer hardware and other equipment should be the last decision to be made. It is advisable to invest in hardware depending on the defined system functionality and security requirements\(^1\), not the reverse. The computing equipment depends to a large extent on the level of the statistical programme in question, on the amounts and kinds of data to be processed, and on the types of analyses required. The purchase and installation of a computer system can be an expensive and long-term process. If a bureau of statistics has no acceptable computer system, it might well, as a first step, explore the availability and appropriateness of computer facilities in other government agencies, as well as the possibility of renting time on university or commercial computers. As indicated, the centralisation of computing facilities has often been seen as a way of reducing costs and making efficient use of scarce human resources. In some ways, large, expensive mainframe computers make centralisation inevitable. The advent of powerful and relatively inexpensive microcomputers, together with the introduction of open platforms, has allowed greater flexibility in considering the degree of centralisation of operations. The choice of a computing system can now more easily reflect the organisation of the system of criminal justice statistics and its degree of centralisation. In a decentralised computing system, it is particularly important to ensure the compatibility of the hardware and software acquired. Incompatible equipment and software can hinder the ease of compiling comparable national data. If a new system is contemplated, the primary decision to be made is the choice of the computer system concept: centralised mainframe solutions, centralised client/server solutions, or decentralised solutions. In addition, many of the same kinds of questions asked about software packages equally apply. Among the major ones to be considered are the following:

\(^1\) Usually, the hardware storing the data base should be isolated from other computer networks.
(a) The system's capacity in relation to the specific needs in question;
(b) Compatibility with existing equipment;
(c) The manufacturer or vendor’s ability to provide service, technical support and training;
(d) The manufacturer’s global market share and presence in the country;
(e) The cost;
(f) The need to provide isolated data storage units to ensure record privacy.

4.2.3. Principles of data security and ethical issues

As illustrated in the previous chapters, much of the information held in the files about child abuse and maltreatment is sensitive, and this raises a number of issues concerning how best to secure the data from unauthorised access, and from tampering and abuse. Particularly in the area of criminal justice, procedures are necessary to safeguard the security and control of access to data to ensure the integrity of criminal justice statistics. It is therefore important that data are collected and stored such in a way that they cannot fall into the wrong hands, and also that people working on the data can be shown to be trustworthy.

The goal of disseminating statistical information often clashes with the traditional moral and legal duty to keep the privacy of the involved people. The definition of violation of privacy adopted by the national institutes of statistics is based on the concept of “identifiability of the statistical unit”, i.e. whether or not the data could be used to identify and potentially harm a data subject.

Techniques of data protection are principally applied to:
- the violation of discretion in the issuing of statistical tables;
- the violation of discretion in the issuing of elementary data;
- interrogation of on-line databases on internet.

4.3. Processing and analysing data

4.3.1. Processing and analysing data: general principles

Data processing is an essential component of summarising and interpreting data. The data must be processed in such a way that the necessary analysis can be carried out. To analyse data fully it may also be useful to link them with other contextual sources. For example, cases of maltreatment and abuse would be connected to the living conditions (health, education, poverty etc) of those abused.

To ensure data are processed in the best possible way, two fundamental points should be noted:
- at the earliest stages of any research, think about what analysis is needed – this will help to specify the types of data and the data items required, and the format in which the data are stored;
- the statistical analysis must be of a quantitative type and not of a social or political oriented and interpretative type; a team assisted by statistical experts must conduct these kinds of analysis.

Analysis refers to the broad range of ways in which the data in the system can be studied to determine their characteristics. This may involve procedures for arranging them in alphabetical or chronological order, summarising them through the use of frequencies, percentages, rates and ratios, or preparing more sophisticated cross-tabulations. In every case, proper analysis requires that an appropriate question, issue or problem be posed in order to give direction to the analysis; appropriate procedures, methods or logic must be used to conduct the analysis; and analysts with appropriate expertise must be given access to the appropriate data. It is important for administrators and policy makers to understand that simply amassing a database is not analysis. Well-framed questions, access to the appropriate data and staff trained in the subject matter are essential if appropriate analyses are to be performed.

The analyses that can be carried out on a set of data depend on how the data are stored. One of the crucial data processing decisions involves whether and how to computerise. While nearly all countries have access to computers, computer capacities vary considerably from country to country, and between different agencies within countries. Even when computer resources are available, there can be very different computer data packages in use that are not compatible with each other, so one agency may
not be easily able to share data with another. Despite the great potential of automated data processing, many countries still rely heavily or partially on manual clerical operations. Indeed, manual processing usually plays some role even in those countries with advanced data processing capabilities, such as in the preparation of simple hand-tallies to check the consistency of data on preliminary returns. The introduction of major administrative computerised systems into government agencies is a complex and costly process and may take several years to accomplish.

Evaluation, analysis and dissemination statistics are essential components of a study. The statistics produced will depend on the uses of the statistics and the target users of the data. Evaluation of the statistics and their dissemination can help to improve the quality of the data; evaluation can also encourage continuing development towards meeting the requirements of users with timely, valid and reliable statistics from this field of study.

4.4. Analysis of different data sources

The analysis that can be carried out on a set of data depend on the type and format of the data. For example, aggregate data can generally only be presented in the way they have been collected, or at an even more aggregated level, while unit level data can be partitioned in many different ways according to the variables included.

Similarly, sample data should be treated differently from census administrative data. Where analysis is based on a sample, there is uncertainty as to the accuracy of any results as potentially a different sample could produce a different result. The larger the sample, and the more carefully it is selected to reduce potential bias, the less this uncertainty; however, trained statisticians will use a range of techniques to estimate any errors. For example, a confidence interval should always be constructed around a result in order to give an estimated range of values for that result.

Further discussion on the advantages and disadvantages of different data sources was provided earlier in this chapter.

4.4.1. Descriptive statistics

The first analyses that should be carried out on data are simple descriptive statistics, such as frequencies, percentages, rates, rates of change, central tendency and dispersion measures. These simple statistics can answer many basic questions. If data are collected in aggregate form, these descriptive statistics have in effect already been calculated; for example, the major output of criminal justice statistics is often a simple unit count (e.g. of abuse) and the classification of these units. If data are collected at unit level, some descriptive statistics should be calculated to give a picture of the data (e.g. calculating the number of children of different ages experiencing abuse), before carrying out any more complex analyses.

Percentages are often used in reporting crime data because they are simple to calculate and are useful for showing the relative proportions of each category within a given class. The calculation of percentages is only appropriate if the total number of cases is sufficiently large. To avoid misleading interpretation, the actual number of cases is also typically reported along with percentages.

Most programmes of criminal justice statistics have found the calculation of rates to be particularly valuable in describing unit of count data, as rates allow for an easy comparison of units across groups and over time. The most common rates in child protection use population data as their base.
Number of children reported as victims of child abuse

Incidence of = \frac{\text{Number of children reported as victims of child abuse}}{\text{Total population under 18}} \times 100,000

In judicial statistics a widely used rate is the crime rate:

\text{Crime rate} = \frac{\text{Number of crimes}}{\text{Total population}} \times 100,000

The calculation of rates makes it necessary to decide on which unit of count to use as the numerator and which to use as the denominator. There is also a choice of various denominators, such as total population, adult population, population at risk or convicted population. These decisions must be shaped by the intended uses of the data, but they are also constrained by the data that are available.

Calculations of rates of change are useful for monitoring the extent of change in crime and official responses to crime. The calculation is quite simple, but requires time series data or data for at least two periods in time (time t and time t-1).

\text{Rate of growth} = \frac{X_t - X_{t-1}}{X_{t-1}}

The range of values of a variable can also be described mathematically by their central tendency and their dispersion. Central tendency is a measure of the centre of the distribution – it is a single value that is meant to typify a list of values. The central tendency can be characterised by the average of the values or by the median, which is the value above and below which the number of outcomes is the same. Dispersion is a measure of how spread out the values of the variable are from their mean. It is characterised by the variance or standard deviation.

Other more sophisticated techniques of analysis, such as derived indices, concordance indexes for counts, correlation and regression, and estimation and weighting procedures for the analysis of sample data, may be necessary to answer some questions and to handle some kinds of data. These kinds of techniques require trained personnel in statistics in order to use such analytical software to create these types of statistical outputs. It is always important to understand the assumptions underlying these techniques and to ensure that the software is consistent with the design of the survey or data series. For sophisticated analyses, it may be more practical for a bureau to call upon external experts from such sources as national statistical services or universities.

4.4.2. Analysis of data on child abuse in relation to other child characteristic data

Cross-tabulations of two or more variables are among the most important outputs of analysis. These variables can be part of the dataset or linked from another dataset. Thought should be given to the types of contextual information that are of interest before data are collected in order to ensure that the desired analyses are possible.

When carrying out analysis of child abuse data, some of the key variables to consider are the following:

- the age, gender and religious and ethnic background of the children;
- the socio-economic status of the families (e.g. family income, parental occupation, marital status, housing);
- the health and education of the children

This is not to say that any of these factors are necessarily the causes of child abuse, but if the data indicate that certain characteristics are more predominant among abused children, policies to reduce child abuse can be directed towards children with these characteristics.
4.4.3. The contextualisation of national, regional and local data

It is often important when analysing data to put them in context with other data. The section above discusses using child characteristic data to contextualise, but for a general monitoring, as was explained in the introduction, it can also be useful to look at contextual factors outside the family, such as examining the characteristics of the area in which a child lives.

These characteristics will depend on the country and region being analysed, but some examples of variables are:

- the employment rate and wealth of the region;
- whether the area is rural or urban;
- principal occupations (jobs) in the region.

4.5. Data security

It was stated earlier in this chapter that data on child abuse and maltreatment are sensitive. For this reason great care should be taken when disseminating any child abuse statistics. Basic principles to be followed are that no data should be published that allow the identification of any child or could cause any possible harm to a child. Where numbers are small, it is recommended to suppress figures (e.g. to remove any figures of six or under and replace them with a note that the figures have been suppressed due to small numbers). It is also suggested to round counts of children (e.g. to the nearest five children). This can be particularly necessary when processing small area data where numbers of children are generally small.

4.6. From statistics to indicators

The protection of victims of child abuse involves a wide range of factors including social phenomena that are largely outside the control of the services system and professionals. This means that services such as law enforcement, treatment, planning, monitoring and evaluation often develop indicators to attempt to measure the aspects that can be controlled. In the international literature and practices we find different sets of indicators that are used to evaluate how the protection sector reaches its objectives.

These indicator can be a single measure (variable) or the combination of a group of measures (variables) that have a direct or indirect relation with the issue to be monitored, i.e. they can be variables or characteristics that directly represent the phenomenon, e.g. the number of minors reported for ill-treatment, or they can be a proxy of the phenomenon. The indicators measure variations and changes in relation to specific objectives and needs. At the same time they reflect the organisational, legislative and policy frameworks for the protection and care of children who are victims of violence.

On the issue of child protection the most relevant aspect is the performance of the system. It is then possible to identify four general categories of indicators:

- Demand for and accessibility of a service, e.g. the number of specialised multidisciplinary teams on child abuse out of the total of child services; the rate of children reported as experiencing child abuse; the number of abused children per social worker etc.
- Resources, e.g. the cost of treatment per child in care.
- Process, e.g. the length of time the child receives child protection services; the number of psychotherapist visits per child etc.
- Outcomes, e.g. the number of re-registrations; the number of children who are still at home six months after their return from care; outcomes of the Children’s Court Inquiries; and potentially measures of child wellbeing.

Generally, child protection indicators are defined in terms of exposure to risk, service accessibility, safety, permanency/stability, child and family well-being, customer satisfaction, quality of the system (Gain, Young, 1998; AIHW, 2002; Dawes, 2006). There follow some examples of qualitative and quantitative indicators:
Exposure to risk indicators

Children’s vulnerability to sexual crime, the proportion of children in a specific territory (national level or municipality) who are victims of sexual crimes per year, broken down by crime category and as a total across all crime categories;

Children’s vulnerability to violent crime, the proportion of children in a specific territory (national level or municipality) who are victims of any violent crime (by crime category and as a total across all crime categories) per year.

Child Abuse, subdivided per type of crime, incidence, e.g. the proportion of children in the nation or region or other reported to (or substantiated by) Child Protection services (or other agency) as having been sexually abused in a specific year. It could help if the information were disaggregated according to contact and non-contact abuse types and by gender, the value is calculated per 100 000 of the population within each age stratification.

Recidivism, the number of suspected abusers who commit new crimes against the same victims or other persons within a specific time span.

Accessibility indicators

Access to a 24-hour Child Protection Service, the proportion of services for children that have a 24-hour service.

Family Violence, Child Protection and Sexual Offences Units in high risk areas for violence to women and children, the number of protection agencies (social services, shelters etc) in high risk areas for violent crimes against women.

Extent to which children’s courts are accessible, child-friendly and adequately resourced for children in care, e.g. average waiting period for a Children’s Court Inquiry, in days, for the reporting year; percentage of presiding officers who have attended any form of training on childcare and development matters for the reporting year; percentage of children’s courts with appropriate spaces for child hearings.

Extent of service provider contact with the family of origin of a child in care, the number of contacts between the family of origin and the social worker or provider of specialist remedial or therapeutic services per month per child in care.

Safety indicators

Number or rate of re-substantiation or re-referral

Safe return home, the number (or percentage) of children who were the subject of abuse and placed in out-of-home care within 6 months of the abuse and who subsequently returned home, the proportion for whom there was no further abuse within a specified time period;

Prevention of home removal, the number of children who were helped to stay at home by providing services to the family that ensured the children’s safety while remaining at home.

Permanency/stability indicators

Permanent care, the proportion of children who were on a finalised court order and placed in out-of-home care who were either (a) permanently reunited with their family, (b) permanently placed with extended family or (c) permanently placed in family-based care, within a specified time period;

Response time to complete investigation, time taken from the receipt of a child protection notification for an investigation to be completed and an investigation outcome recorded;

Stability of placement, the number of different placements by length of time in out-of-home care for children who stayed in out-of-home care during the year;

Placement with siblings, the proportion of children who are on finalised orders and in out-of-home care at 30 June who have siblings who are also in out-of-home care, who are placed with (a) at least one of their siblings, and (b) with all of their siblings.

Child and family social well-being indicators

Autonomy of client, the number of families who can end financial support from the social services; the number of single mothers who find a job after separation;

Access to therapeutic services for abused children, the number of abused children in the region who received psychological treatment out of the total of children reported, and the length of time between the initial request and the first treatment;
Children receive appropriate support to meet their educational and leisure needs, the number of children receiving educational support after school, the number of children participating in leisure activities.

Customer satisfaction indicators
Perceived capacity of the system to meet the customer’s needs, the number of children, parents or case reporters who express a positive appreciation about the response received by the system.

Quality indicators
Monitoring and evaluation system, the number of services for child victims of violence which have systematic and standardised data collection and use the data to evaluate the activities, adoption of guidelines and standardised procedures;
Training and supervision, the number and frequency of professional and specialist courses promoted by the services for their workers, yearly hours of supervision per service;
Legal representation for professionals, existence of a legal advice team for professionals involved in child protection proceedings, the number of consultations given, the number of professionals defended in Courts against accusations made by parents whose children were removed from home or/and who were reported for violence against them.
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