



The Government of the Republic of Croatia

PROTOCOL ON THE PROCEDURE IN CASE OF
ABUSE AND NEGLECT OF CHILDREN

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I. INTRODUCTION

By acceding to the Convention on the Rights of the Child (Decision on publication of multilateral international agreements to which the Republic of Croatia is a party based on the notification on succession, Official Gazette No 12/93), the Republic of Croatia is obliged to ensure the protection of children from all forms of violence in the family, institutions and the wider social environment.

The provisions of the Convention refer to the protection of the child from:

- physical and psychological violence, abuse and neglect (Article 19);
- all forms of sexual exploitation and sexual abuse (Article 34);
- abduction of and traffic in children (Article 35);
- all other forms of exploitation prejudicial to any other aspect of the child's welfare (Article 36);
- inhuman and humiliating treatment or punishment (Article 37).

Furthermore, the provision of Article 39 of the Convention lays down the obligation of the state to ensure the measures in support of the physical and psychological recovery of a child/victim of violence and their social reintegration.

In order to exercise the rights of the child to the protection from abuse and neglect, it is necessary to establish a system for preventive action with regard to preventing child abuse and neglect, and to enable, at the same time, a rapid and coordinated procedure to be initiated in situations of child abuse and neglect to protect the child from further abuse and neglect, and to provide an appropriate intervention for the recovery and further safe development of the child.

Effective protection of children requires clearly defined steps in the process of child protection, as well as clearly defined roles among the participants in that process, including the establishment of a good cooperation between experts from all systems working with children (health, education, social care, police, justice, etc.).

In order for the cross-sectoral approach in the field of child protection to function well it is necessary that all participants:

- have clearly defined tasks and prescribed procedures for the common goal in the child protection process;
- know the role of their system very well, the basic roles of other systems, as well as their professional obligations with regard to those roles – rules, restrictions, means of action;
- know the means of information sharing and consultation within and between systems, accompanied by appropriate written documents and feedback.

This Protocol should contribute to the development and expansion of the network of multidisciplinary teams for the protection of children in the local community, and to the application of a unified model of all teams on the county level throughout the Republic of Croatia.

The terms used herein, regardless of the gender specifically used, shall be construed to include both the masculine and feminine gender equally.

1.1. BASIC PRINCIPLES AND OBJECTIVES

1.1.1. Basic principles

The following basic principles of the Convention on the Rights of the Child are enshrined in the Protocol:

1. The right of the child to life, survival and development,
2. non-discrimination,
3. the best interests of the child,
4. the right of the child to participate.

The state authorities falling within this Protocol shall act in accordance with the Constitution of the Republic of Croatia, conventions, applicable laws and regulatory requirements, the Protocol, and the professional rules and methods of professional work.

The treatment of children, as well as the exercise of their rights, shall be ensured without discrimination on any grounds, such as gender, race, colour or ethnicity, age, language, religion, political or other opinion, national or social origin, property, their parents' status, sexual orientation, gender identity or other status.

The Protocol refers to all children whose welfare is jeopardised, or children in immediate danger or danger to life, children who are (proven or suspected to be) the victims of abuse and neglect, and children considered to be at risk from possible abuse and neglect.

The Protocol refers to children in all situations:

- in their family (biological, foster or adoptive family),
- outside their family, i.e. in institutions where children reside temporarily or permanently (schools, pre-school institutions, tourist resorts, day care institutions, children's homes and other social care institutions etc.)

The protection of the best interests of the child means that the best interests of the child must have priority in all matters the child is involved in or which affect them, and that they must have priority over the interests of the parents or foster parents, institution or community in situations when they differ from the interests of the child.

Child participation is ensured by informing the child of their rights in an appropriate manner, ensuring access to justice in an appropriate manner, consulting the child or give them the opportunity to express their wishes, views and opinions on all matters concerning them in all phases of the protection process, appropriate to their age and understanding of the situation, and to take their opinion into account in accordance with the protection of their best interests. Child participation must be voluntary, organised in a supportive environment, and led by educated experts. The child involved in the proceedings must be treated with care, sensitivity, respect and equitably throughout the proceedings, with special consideration to their personal situation, well-being and specific needs, and with full respect for their physical and psychological integrity (Guidelines of the Committee of Ministers of the Council of Europe on Child-Friendly Justice, 2011).

It is also important to ensure that the parent, foster parent or person caring for the child is timely provided with all the necessary information on the rights of the child and procedures that follow so that they could take care of the child and provide them with adequate help.

1.1.2. Objectives of the Protocol

The basic objectives of the Protocol are the following:

- improving the well-being of children by preventing abuse and neglect,
- ensuring that all actions taken and decisions reached are timely and in the best interests of the child,
- a long-term impact on the reduction of abuse and neglect of children.

The specific objectives of the Protocol are the following:

- informing experts who work with and for children, as well as the wider public, including children and their parents or foster parents and persons caring for them of how to act in case of suspicion that the child is an actual or potential victim of abuse or neglect,
- establishment of an effective and operative procedure that will ensure a rapid and coordinated procedure of protecting the child from further abuse and neglect, and which will provide the child with appropriate help,
- ensuring timely protection, care and emotional support to the child who is a victim of abuse and neglect,
- establishing the necessary cooperation between experts from all systems with the aim of child protection,
- achieving the common level of understanding of the basic principles and objectives of protection,
- producing statistics for the purpose of monitoring the situation and trends in child abuse and neglect.

The Protocol contains:

- the obligations of the competent authorities and others participating in the discovery and combating of child abuse and neglect, and providing help and protection to children exposed to abuse and neglect;
- the forms, means and contents of the cooperation between the competent authorities and others participating in the discovery and combating sexual violence, and providing help and protection to children exposed to abuse and neglect;
- final provisions describing the procedures in accordance with the activities of this Protocol.

The state authorities falling within this Protocol shall take all the measures necessary to ensure the structure, organisation, equipment and sufficient number of specialised experts dealing, in accordance with their prescribed competence, with the issues of child abuse and neglect, with sufficient funds earmarked in the line ministries by the State Budget of the Republic of Croatia.

1.2. DEFINITIONS

A child means every human being below the age of eighteen years, in accordance with the Convention on the Rights of the Child.

Abuse is every form of physical and/or emotional ill-treatment, sexual abuse, neglect and negligent behaviour or exploitation, resulting in an actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power (World Health Organisation, 2006, according to: Bilić, Buljan Flander, Hrpka, 2012).

Neglect is failure to fulfil the needs of the child insofar as it affects the child's physical and psychological growth significantly. It is not always intentional, and the line of neglect is now always completely clear (Čorić and Bačan, 2006, according to: Bilić, Buljan Flander, Hrpka, 2012).

1.2.1. Types of abuse

1) Physical abuse

Definition

Physical abuse of a child means frequent or non-recurring rough and intentional infliction of pain and physical injury, as well as irresponsible behaviour of the parents and other persons

that includes a potential risk of physical injury, the consequences of which may or may not be visible (World Health Organisation, 2006; Pećnik, 2003; McCoy, Keen, 2009, according to: Bilić, Buljan Flander, Hrpka, 2012).

Manifestations: slapping, hitting with objects (a stick, paddle, rod, belt, baton, etc.), violent shaking, forceful pushing, punching or kicking, severe beating, biting, stabbing, tying up, squeezing, leaving children alone in a vehicle etc.

Recognising physically abused children:

Physical indicators: bruises in different stages of healing (in unusual places, such as face, thighs, shins, back, stomach, back of the head, etc.), burns, bone fractures, cuts, scrapes, bites, torn-out hair, internal injuries and concussion, death of the child (Buljan Flander, Kocijan Hercigonja, 2003).

Compared to other forms, the indicators of physical abuse are the most obvious ones. The assessment whether the injuries were caused accidentally or intentionally requires a serious approach and responsibility, and often the help of other experts as well, primarily physicians.

Therefore it is necessary to focus the attention on differentiating between injuries possibly resulting from abuse, and usual children's injuries. Special attention should be paid to the location, nature and severity of the injuries. The explanations provided by the child and their friends regarding the origin of the injuries can reveal much about their causes (Bilić, Buljan, Flander, Hrpka, 2012).

Apart from the physical indicators, the child may exhibit *behavioural* (they can be unusually hesitant in contact with adults, prone to obliging their authorities excessively, shy, withdrawn or hyperactive, truant), *social* ones (inability to establish friendly relationships with their peers, suspicion towards peers, poor social skills, poor cognitive and language skills, tendency to resolve problems with aggression) and *emotional indicators* (anger, hostility, inability to express feelings) as a consequence of physical abuse. Adolescents may also exhibit some other indicators in the form of lying, stealing, fighting, bouts of anger, aggressive behaviour towards others, running from their home and from the school, gang involvement, auto-destructive behaviour, addictive substance abuse (according to: Bilić, Buljan Flander, Hrpka, 2012).

2) *Emotional abuse*

Definition

Emotional abuse is continuous hostile and/or indifferent behaviour of the parents and others who are in a position of power, based on which the child may conclude that they are worthless, unloved or inadequate, which damages their emotional stability and psychological capacity, and negatively affects their development and well-being in the short and/or long term (Evans,

2002; Iwaniec, 2006; Tomison, Tucci, 1997; Bilić, 2008, according to: Bilić, Buljan Flander, Hrpka, 2012).

Manifestations:

- Brushing aside the child's needs (belittling, derision, criticising, insulting, impeding the growth of the child's autonomy, preventing the development of attachment to other persons, subordinating the child's needs to the needs of adults, ridicule, etc.).
- Terrorising the child or continuous verbal abuse creating an atmosphere of fear, tension and uncertainty (e.g. threatening the child with a weapon, suicide, murder; continuous emphasis on the child's guilt, use of bizarre disciplinary methods, instilling fear with inappropriate punishment, forcing the child to play or engage in activities they are afraid of, exposure to family violence, etc.).
- Ignoring and degrading the child, which includes an absence of positive stimulation (lack of stimulation and non-responsiveness to the child's needs, the parents behaving "as if the child did not exist", not touching or looking at the child, ignoring the child's presence, not showing any emotions towards the child, etc.).
- Manipulating the child for the purpose of fulfilling one's own needs contrary to the child's needs (including activities in which adults use the child in order to achieve some of their goals, disregarding the child's needs, feelings and interests). Isolation (preventing the child from contacting other family members, peers, participation in family, social or school activities, etc.).
- Constant sarcasm, humiliation, belittling (continuous verbal attacks directed at the child, criticising the child in front of others, calling names, particularly in the presence of others, never praising the child). Supporting the child's inadequate behaviour, bribing, verbal attacks and pressuring the child to grow up faster (Buljan Flander, Kocijan Hercigonja, 2003).

Recognising emotionally abused children:

Physical indicators: health problems without a physiological basis, sleep and eating disorders.

Behavioural indicators: withdrawal, loneliness, low self-confidence, excessive passivity, as well as hyperactivity and behaviour inappropriate to the child's age in some cases.

Emotional indicators: emotional instability, sadness, fear, anxiety, bouts of depression, not showing happiness or pleasure, a negative or empty attitude towards persons in the child's environment.

Cognitive indicators: failure at school and disinterest.

Social indicators: difficulties in forming relationships with peers, teachers and others; insecurity, low social competences, decreased adaptation ability, reluctance to join activities (according to: Bilić, Buljan Flander, Hrpka, 2012).

3) *Sexual abuse*

Definition

Sexual abuse means participation in sexual activities with a child below the legal age for sexual activities, and participation in sexual activities with the child using coercion, force or threats, or abuse of a position of trust, authority or influence over the child (within or outside the family), or abuse of a particularly vulnerable situation of the child. Apart from sexual abuse, sexual violence includes other forms of sexual violence as well, a series of acts connected with child prostitution and child pornography, child participation in pornographic performances, luring children for sexual purposes, and aiding and abetting any of the aforementioned acts.

Physical indicators: genital infections; injuries on the breasts, nipples and groin; injuries in the genital and anal area, haemorrhages and bruises, bladder problems, painful urination, frequent throat infections with swallowing difficulties and feelings of suffocation, frequent psychosomatic difficulties (headaches, stomach aches), pregnancy, menstrual problems, sudden weight loss or gain, frequent showers, defensive body language, covering, hiding, efforts to be unseen, layered clothing both during the day and night, crumpled clothes at school, and revealing clothing.

Emotional indicators: anger, anxiety, helplessness, fear of returning home after school, fear of the dark and bedtime; fear of closed doors, bathroom, shower and rooms with only one door; isolation, shame, guilt; fear of physical contact, particularly in the genital area; crying, depression, confusion and feeling of betrayal.

Social behaviour: confusion regarding family roles, refusal or pleading not to stay with a certain person, bed wetting, baby talk, thumb sucking (regressive behaviour), wish to learn what is going to happen next, constant "good behaviour", perfectionism, obedience, very controlled behaviour, reticence or hyperactivity, and nightmares.

Sexual behaviour: unusual interest for one's own and others' genitals, frequent masturbation, use of "dirty words", fear of removing clothes during physical education classes, drawings with pronounced sexualised details, drawings showing genitals, inserting objects into the vagina or rectum, promiscuity and prostitution.

Self-destructive behaviour: drugs, alcohol, suicide attempts, eating very little or too much, self-harm, involvement in problematic situations, as if seeking punishment, running away from home.

Behaviour at school: attention deficit, daydreaming, easy to distract, truancy, frequent mention of taboo or sexualised topics in school essays or discussions, and difficulties in expressing one's own opinion (according to: Bilić, Buljan Flander, Hrpka, 2012).

1.2.2. Types of neglect

1) *Physical neglect of children* is defined as not meeting the minimum physical needs of the child, such as a diverse diet, adequate and safe accommodation, appropriate clothes, and protection from injuries (Dubowitz, Pitts and Black, 2004, according to: Bilić, Buljan Flander, Hrpka, 2012).

Physical child neglect indicators: malnutrition, poor personal hygiene, inadequate clothes with regard to the weather, dirty and torn clothes and footwear, being always home alone and feeling lonely, drowsiness, poor living conditions (humidity, mould on walls, too cold during the winter months, no electricity or water, fire hazard).

These indicators must be recorded multiple times and continuously to assume child neglect, not isolated rare incidents. However, some of the indicators are potentially so harmful for the life of the child that it is necessary to act immediately in order to protect the child (Bilić, Buljan Flander, Hrpka, 2012).

2) *Emotional child neglect* is defined as not meeting the minimum emotional needs of the child. The most common occurrences are the parents ignoring the child's emotional needs and not helping the child when this is required of them, which makes the child feel rejected (Dubowitz, Pitts and Black, 2004, according to: Bilić, Buljan Flander, Hrpka, 2012).

It is important to underline here that it is very difficult to demarcate between emotional abuse and neglect.

Manifestations of emotional child neglect: insufficient care, attention and love; not responding to the child's emotional needs, isolation – forbidding the child to socialise with their peers or adults outside of home; for adolescents – allowing and encouraging the abuse of drugs and alcohol by the parents or foster parents, and not addressing socially unacceptable behaviour, such as delinquency.

Indicators of emotional child neglect: reticence, shyness, low self-confidence, the child's statements that they are feeling lonely, abandoned; aggression, theft, insubordination in class, delinquency, etc.

Educational child neglect includes an absence of help, support and encouragement during schooling. It also includes an absence of study help, lack of the necessary equipment for school, not attending parent-teacher meetings, etc. (Dubowitz, Pitts and Black, 2004, according to: Bilić, Buljan Flander, Hrpka, 2012).

Indicators of educational emotional child neglect: unauthorised absence from school for at least five days in a month, of which the parents have been notified but failed to take action; the child's absence from school for at least a month on the parents' insistence due to unjustified reasons, such as watching over younger siblings; failure to provide help to children with certain learning problems after the parents have been notified thereof, but failed to take action.

Medical child neglect includes an absence of concern about the child's health protection, needs for medical counsel in case of diseases and/or injuries, routine vaccinations and physical examinations; not bringing the child to a clinic for necessary medical treatments, neglecting regular monitoring of the use of medicines, not bringing the child to a physician to be examined, etc.

Indicators of medical child neglect: possible untreated illnesses and disorders (chronic inflammations, untreated fractures, infections, etc.).

This type of neglect can first be suspected by health workers in primary health care.

This Protocol also refers to cases of illegal labour and economic child exploitation, as well as forced child begging. Those are activities jeopardising the child's physical or mental health, education, and moral or socio-emotional development.

The actions to be taken in case of other forms of abuse, such as exposure to family violence, peer violence, electronic violence, and abusing children for commerce are laid down in separate protocols and guidelines.

1.3. TRAINING OF EXPERTS FOR THE APPLICATION OF THE PROTOCOL

The training of experts should enable the development and maintenance of their specific competences in the area of the protection of children from abuse and neglect, i.e. their training for a good understanding of the phenomenon, adequate procedures and management of the procedures for protecting children from abuse and neglect.

The training should be continuous and involve different phases:

- ***the basic training*** should involve persons employed at institutions and other organisations for children so that they can acquire the minimum knowledge and skills necessary for the prevention, recognition, assessment and reaction to child abuse and neglect, the communication skills for talking with the child, and so that they can acquaint themselves with the procedure which forms an integral part of this Protocol,
- ***the higher level of training*** should involve experts (teams of experts) dealing directly with child protection in individual systems, ensuring that they learn the details of the procedures in the area of child protection, including abuse recognition, discovery, notification, investigation and evidence finding; the readiness for specific interventions and prevention of abuse and neglect, and means of sharing information and mutual cooperation,

- *the specialised education* should involve a certain number of experts in the fields of health, education, social care, justice and police in order for them to acquire the specific knowledge, skills and competences for working with children.

II. OBLIGATIONS OF THE COMPETENT AUTHORITIES IN HANDLING CHILD ABUSE OR NEGLECT

All competent authorities shall act urgently in cases of child abuse and neglect.

2.1. POLICE

Upon learning of any form of child abuse or neglect, the police shall urgently, and, in cases of ongoing abuse, immediately and without delay, provide the child with help and protection, establish the elements of a criminal offence or misdemeanour, locate the perpetrator and prevent them from any continued illegal action, gather all the evidence on the offence, and deliver all the collected findings and evidence to the competent justice authorities as soon as possible.

2.1.1. When contacted / upon report

Upon learning of child abuse or neglect, the police shall, without delay, gather as much relevant data as possible for the purpose of establishing a criminal offence.

Upon being notified or learning of an ongoing child abuse or neglect, the police shall, for the purpose of verifying the claims, send police officers to the scene without delay, and notify the youth police officer, who shall take over further action and/or manage the overall investigation.

If there is a suspicion that the child has suffered serious abuse or sexual abuse, the intervening police officer shall ask only the necessary, basic questions required for further action for the protection of the child's safety and the identification of the perpetrator to be taken, while the interview with the victim shall be conducted by the youth police officer.

The youth police officer shall ensure that the interview with the child is conducted in the presence of the parent, foster parent or other caregiver in order to protect the rights and interests of the child and to provide support to the child. If the aforementioned persons are unavailable and unable to attend in a reasonable period of time, or if their presence is not judged to be in the best interests

of the child (suspicion that those persons are the perpetrators of violence or might interfere with police work, etc.), the youth police officer shall ensure the presence of an expert from the social care centre.

Where violence has been committed in an educational institution, and the parents are unavailable, the interview with the child may be conducted, with the child's consent, in the presence of a professional employee of the educational institution.

2.1.2. Collecting information from the victim

After having provided help and protection to the assumed child victim, the youth police officer shall collect information from the child, i.e. conduct an interview with the child, ensuring that the child can talk without pressure and fear.

When interacting with the child, the police and investigator shall treat the child victim with particular consideration, having regard to the child's age, personality and other circumstances in order to avoid any harmful effects for the child's education and development, and shall protect the child's privacy.

Police officers shall take measures to protect the child from secondary victimisation resulting from unnecessary multiple interviews with the child. In an interview, the child must not be exposed to inappropriate reactions by the police officer, including disbelief, consternation, accusation, critique or condemnation of the behaviour of the perpetrator or victim.

When taking their first action, the police officer and investigator shall adequately inform the child or their legal representative of the legal rights of the victim or aggrieved party, and of the options for their realisation.

If the police was informed of the child abuse or neglect subsequently (notification by the social care centre, health institution, educational institution, or other institution, legal or natural person), the youth police officer shall collect all the available evidence of the event, as well as the relevant documentation, followed by a detailed interview with the child victim.

2.1.3. Evidence collection

The police officer shall conduct an investigation of the criminal offence persecuted *ex officio* and of the misdemeanour, and shall, in accordance with the law, take all the measures and steps with the goal of ensuring the discovery and keeping of evidence, collection of data and establishment of the facts that may contribute to the establishment of facts in the proceedings.

Upon arrival to the scene of the criminal offence and upon establishment of the situation, the police officer shall take all measures of immediate protection and provision of assistance (notifying the ambulance and providing other forms of assistance) to the child, and of preventing any continued illegal behaviour by the perpetrator, having regard to the establishment of the conditions for ensuring tracks that may serve as evidence in the proceedings. It is necessary to maintain control of the scene so that it remains intact in order to facilitate investigation. Depending on the decision of the competent State Attorney, the police officer shall, where there are legal grounds, carry out the following investigative actions in the manner prescribed by the law: investigation (at the scene, of the victim and suspect), search (of the domicile and other premises, means of transportation and other movable property belonging to the person), confiscation of items, identification (of persons and objects), sampling of biological materials or ordering of expertise of the suspect, collecting documentary and photographic evidence and/or carry out other investigative actions, and shall notify the competent State Attorney thereof immediately after completion. Where the abuse or neglect was discovered after a certain period of time and/or in case of the continuous abuse or neglect, the police officers shall, in cooperation with other competent authorities, collect all the necessary findings for the establishment of the criminal offence or misdemeanour of the perpetrator, and for the protection of the child.

2.1.4. Collecting evidence from other persons

In order to establish all the circumstances, the police officers shall conduct interviews with all persons who might provide information significant for the explanation of the circumstances of the criminal offence of misdemeanour against the child (witnesses, physicians and other health workers if necessary, experts and/or employees from the educational institution, family members, friends and other persons who might have useful information), and shall draft an official report thereof and notify the competent State Attorney.

If the competent State Attorney issues a warrant, the police investigator shall conduct interviews with the witnesses.

2.1.5. Procedure in connection with the perpetrator

If there is suspicion that a criminal offence or misdemeanour has been committed against the child, the police officers shall take immediate actions to identify and locate the perpetrator. After they locate the perpetrator, the police officer shall arrest them if there are legal grounds, read them their rights and, if the State Attorney issues a warrant to the police investigator, question them as a suspect, having read their rights to them.

If that person is suspected to be the perpetrator of the criminal offence, the police officers shall file criminal charges against them. If there are legal grounds for detention, the suspect shall be brought before the detention supervisor or misdemeanour judge with a prior notification to the competent State Attorney.

2.2. SOCIAL CARE CENTRE

The objective of the Protocol with regard to the actions of the social care centre is the prevention of child abuse and neglect, and protection of the rights and well-being of children exposed to abuse and neglect. The prevention of child abuse and neglect includes meeting the basic standards of living of the family, and providing appropriate services to families at risk.

The social care centre shall manage the procedures for the protection of the rights of the child:

- a) *ex officio* whenever child abuse or neglect is suspected in any procedure underway at the social care centre,
- b) upon notification by other authorities and institutions, family members, the child and/or citizens.

In *ex officio* procedures, the social care centre shall:

- a) intervene without delay to protect the child:
- b) immediately notify the police in case of suspicion of criminal offence of child abuse and/or neglect,
- c) conduct an interview with the parents and, where necessary, other family members, create a record thereof, and conduct an interview with the child and create a record thereof,
- d) perform a house visit and record the residential, social and other conditions relevant for an appropriate child care,
- e) where necessary, gather all the relevant information from the pre-school institution or school in which the child is enrolled, physician (paediatrician or general practitioner), and from other services and experts,
- f) gather all the relevant information on the family members and family situation, estimate the threats to or safety of the child, based on which it can adopt a team conclusion whereby an appropriate measure for the protection of the child is taken or proposed,
- g) appoint a special foster caregiver or legal representative for the child where the interests of the parent or foster parent are judged to be contrary to the interests of the child.

The measures to be taken by the social care centre based on the established overall family situation and estimation of the threats to the child shall be the following:

- a) provide counselling and help to the parents regarding their parental obligations, responsibilities, and appropriate parental care,
- b) refer the parent to another appropriate counsellor or appropriate provider of help and/or involve the child in appropriate forms of psycho-social help, rehabilitation programmes and other types of professional help and support provided in the community,
- c) approve financial support from the social care system based on the established financial standing of the family, or inform the parents and assist them in exercising their rights and obtaining help from other authorities, local or regional self-government, humanitarian organisations and non-governmental organisations,
- d) adopt an appropriate measure of family protection within its purview,
- e) where an immediate danger for the child's life and health has been established, immediately separate the child from the family, ensure that they receive appropriate care, and propose that the court urgently adopts an appropriate measure for the protection of the child,
- f) comprehensively assess the family for the purpose of adopting/proposing further measures for the protection of the child.

The social care centre shall take the following measures in procedures following a notification by other authorities and institutions, family members, the child or citizens:

- a) upon request by the police and judicial authorities, deliver the requested information on the established facts, with all the relevant documentation,
- b) notify in writing the authority from which it received the notification on the child abuse or neglect, as well as the actions taken within its purview,
- c) where necessary, notify a physician (paediatrician or general practitioner) in writing on the neglect of the child's health, and the need for a medical intervention, and/or refer the child to appropriate expertise,
- d) notify the experts of the educational institution (school, kindergarten, boarding home) for the purpose of providing appropriate support, help and treatment to the child victim of abuse or neglect,
- e) monitor the results of the services provided and measures taken within its purview, as well as the aforementioned services provided by other providers of counselling and other expert services, and create a record thereof,
- f) take appropriate legal measures against parents who refuse to cooperate with the social care centre.

The social care centre is obliged to provide information to the parent or legal representative and, in an appropriate manner, to the child, on the ongoing proceedings, planned activities and any consequences they might have, the rights of the child; allow the child to express their opinion, inform them of the possible consequences of taking their opinion into consideration, and take the opinion of the child into consideration with regard to the child's age, maturity, and protection of the child's best interests. The aforementioned actions shall be appropriate to the age and maturity of the child, taken in the manner that will not traumatise the child.

In the implementation of the aforementioned measures, the social care centre shall cooperate with other authorities that participate in the protection of the child's welfare (the police, judicial authorities, educational institutions, health institutions and social service providers) and, where necessary, in order to protect the child's best interests, hold consultation meetings for the purpose of agreeing on a coordinated response in order to provide appropriate help, support and treatment to the child, and to protect the child from additional trauma, as well as to prevent multiple interviews or examinations.

2.3. JUDICIAL AUTHORITIES

The aim of the Protocol with regard to the actions taken by the judicial authorities is to take advantage of all the legal options laid down by the laws of the Republic of Croatia as efficiently as possible, with the aim of establishing, as soon as possible, a cooperation between the competent authorities and other persons participating in the discovery and eradication of child abuse and neglect.

Once the perpetrator has been accused of the criminal offence of child abuse and neglect, where there is reasonable suspicion that a criminal offence has been committed that warrants a fine or a sentence of up to five years, there existing no legal obstacles for a criminal prosecution of the perpetrator, the State Attorney shall carry out or order the investigator to carry out evidence gathering which is relevant for the decision on whether to file charges.

The criminal offence inquiries and proceedings against the perpetrator of child abuse and neglect shall be secret.

If there is reasonable suspicion that the defendant has committed a criminal offence that warrants a sentence of more than 15 years or long-term imprisonment, and if there is reasonable suspicion that the perpetrator was temporarily insane when he or she committed the illegal act, the State Attorney shall conduct an investigation.

The investigation shall be carried out by the State Attorney, with a mandatory interview with the defendant prior to the conclusion of the investigation. For criminal offences within the purview of the municipal court, the State Attorney may delegate the interview with the defendant to the investigator, while for criminal offences within the purview of the county court, the interview with the defendant shall be conducted exclusively by the State Attorney.

If the State Attorney has examined the defendant prior to adopting the decision on the investigation, the State Attorney shall decide on whether to launch an investigation within 48 hours from the interview.

Upon adoption of the decision on the investigation, the State Attorney may submit to the investigative judge a justified proposal to subject the defendant to an investigative detention or to take other measures necessary for an efficient criminal proceedings and protection of persons.

The decision on the investigation shall be delivered to the defendant no later than eight days from the day of the adoption of the decision, together with an instruction on legal remedy.

If the competent State Attorney concludes the investigation by means of a decision, the decision shall be delivered to the victim and the defendant, with an instruction to the victim that they can file charges or continue with the criminal proceedings, an instruction on what measures they can take to exercise that right. The State Attorney shall also enable the victim to examine the file.

Upon notification by the police that a criminal offence has been committed against the child, the competent juvenile State Attorney shall, no later than three days after the entry of the criminal charges into the criminal register for criminal offences against sexual freedom, criminal offences of child abuse and neglect, and criminal offences against marriage, family and children, file a motion to the juvenile investigative judge to conduct an evidentiary hearing in order to question the child as a witness.

If the investigative judge accepts the motion for conducting an evidentiary hearing, he shall issue an order within 48 hours in which he: determines the time and place of the evidentiary hearing; summons the State Attorney, the defendant and his defence counsel, the injured party and other persons; orders obtaining of objects and secures conducting the actions.

If he does not accept the motion on conducting an evidentiary hearing, the investigating judge shall reject the motion by a ruling within 48 hours. The person who filed the motion shall have the right to appeal against such ruling within 24 hours. The panel shall decide upon the appeal within 48 hours.

If the publication of data may impede the proceedings, the investigative judge may decide that the evidentiary hearing is a secret.

The interview with the child victim/witness shall always be conducted by the investigative judge with the aid of an expert (an extra-legal expert – social pedagogue, social worker or psychologist). The duties of an expert associate in court in criminal cases against adult perpetrators who committed a criminal offence against children shall be the following: the questioning of a child witness or victim by means of an audio-video device pursuant to the judge's order; providing professional assistance to the judge when questioning a child witness by preparing the child for the questioning, giving a professional opinion of the child's willingness and readiness to be questions, means of questioning and participation in the questioning; collecting information on the personal and family circumstances of the child witness for the purpose of giving a professional opinion on further action to be taken with regard to the circumstances that contributed to or that had an impact on the criminal offence against the child, and submitting that information to the social care centre; and providing the basic information about the course of the criminal proceedings against the adult perpetrators who committed a criminal offence against children to the parents or foster caregivers of the child witnesses.

Except where it is contrary to the interests of the proceedings or the child, the interview shall be carried out in the presence of the parent or foster caregiver. The parties may examine the child witness only with an approval of the investigative judge and via an expert.

A person whom the child trusts may be present at the interview. The interview shall be recorded with an audio-video device. Instead of in court, the child may be examined in their home or other premises with special equipment, by means of an audio-video device operated by an expert. The child may only be examined again in extraordinary circumstances, in the same manner.

The provisions on arrests, fines and prison sentences for a refusal to testify shall not apply to children. The summons to the child to testify shall be served through their parents.

If he does not accept the motion on conducting an evidentiary hearing filed by the State Attorney, the injured party as the prosecutor, or the defendant, the investigating judge shall reject the motion by a ruling within 48 hours. The person who filed the motion shall have the right to appeal against such ruling within 24 hours. The panel shall decide upon the appeal within 48 hours.

During the proceedings, child victim of abuse and neglect or the child as the injured party shall be informed of their rights.

If the juvenile investigative judge, or president of the council for youth, determines that it is necessary to appoint an attorney-in-fact in order to protect the rights and interests of a child as an injured party or child victim of a criminal offence, he shall submit a proposal thereof to the president of the court, who shall appoint the attorney-in-fact. The attorney-in-fact shall be a lawyer with a pronounced sensitivity for the education, needs and well-being of youth, and shall possess the basic knowledge in the fields of criminology, social pedagogy, juvenile psychology and juvenile social work. No legal trainee may deputise for the appointed lawyer.

The child victim of a criminal offence shall be provided with help and support in the proceedings by an expert associate of the county or municipal court in the place where the county court is based. In extraordinary circumstances, that help and support may be provided by another expert paid from the state budget if the county or municipal court does not employ such an expert associate in the place where the county court is based. It is also necessary to enable that a person whom the child trusts be present during the proceedings.

During the proceedings it is necessary to inform the parent who is not the abuser of the importance of their support to the child, which is crucial for the child's successful adaptation to normal life.

Juvenile courts and State Attorney's offices shall notify the social care centre if there are certain facts and circumstances in the criminal proceedings that indicate the need to take measures to protect the rights and well-being of the child.

The State Attorney shall ask the social care centre to initiate extra-judicial proceedings against parents who abuse or grossly violate their parental responsibilities, obligations and rights in order to deprive them of parental rights or the rights to live with the child, if such facts are established in the course of the criminal proceedings.

2.4. HEALTH CARE

The aim of the Protocol with regard to the procedures in the health system is to provide the child victim of abuse and/or neglect with overall health care with the aim of preserving their physical and psychological integrity, as well as treating any injuries and psychological trauma.

The child victim of abuse or neglect shall be examined in a hospital or clinic (hereinafter referred to as: "health institution").

Following an examination and provision of emergency medical assistance on the level of the primary health care, the physician shall refer the child to a health institution if he suspects abuse and neglect.

The health institutions shall provide urgent and comprehensive health care to the child victim of abuse or neglect in order to protect their physical and psychological integrity in accordance with the contemporary standards and practices.

2.4.1. The medical protocol

The child victim of abuse or neglect may arrive to the health institution accompanied by a parent or legal representative, the police, alone or in the presence of a trusted person. If the child arrives unaccompanied by the police, the health workers shall call the police without delay; if the child arrives unaccompanied by a parent or legal representative, the parents or legal representatives or social care workers shall be notified. If there is suspicion that the parent or legal representative has sexually abused the child, the social care centre shall be notified instead of the parent.

During the office hours, the social care centre responsible for the victim's place of residence shall be called; outside the office hours the social care worker on duty shall be called.

When examining the child, the parent or legal representative or social care worker shall be present; however, the child victim may refuse their presence in accordance with the Convention on the Rights of the Child. The police officer shall wait in front of the examination room during the examination of the child.

The child shall be examined by a specialist physician on duty (the examination shall be conducted by a senior service, i.e. specialist), preferably two physicians.

It is necessary to determine the causes and origins of the injuries or psychological trauma, to conduct a whole medical examination and disease prophylaxis.

2.4.2. The victim's informed consent to the whole treatment

The health worker shall talk to the child with particular care, and shall ask the child to confide in them with regard to the existence of neglect or abuse in order to learn as much as possible about the circumstances connected with the injuries or psychological trauma and the overall medical condition.

The specialist physician on duty shall explain to the child why the examination is necessary and what it entails. The examination shall be conducted with the child's consent. If the child refuses to be examined, and there are no grounds for an urgent examination (e.g. an injury, infection), the examination may be postponed until such time as the child is ready for it.

The parent or legal representative shall be interviewed separately. During the interview, the child victim shall be supervised by a health worker and/or the persons accompanying them.

2.4.3. Taking a medical history, and the examination

A full physical examination is necessary in order to discover possible injuries.

The established medical condition of the child shall be entered into their medical history, which shall include:

- the information about the child,
- the date and time of the examination,
- the date and time when the injury occurred,
- duration of the abuse and/or neglect,
- injury record (a detailed description, position on a drawing of the body, photographs), any acute or chronic diseases or specific conditions that may affect the examination and consequences.

Based on the established medical condition (physical and psychological), the child may, where necessary, be referred to another specialist (e.g. paediatrician, surgeon, gynaecologist) or mental health expert (psychologist, child psychiatrist).

If abuse or neglect is suspected, the health workers shall take the following actions:

- a) write the finding and opinion (medical history, medical record),
- b) complete the report form and submit it to the police,
- c) complete the injury/disease report form and deliver it to the branch office of the Croatian Health Insurance Fund responsible for the child's place of residence.

2.4.4. Basic health care provision

In order to protect the child and their health, and to provide support, it is necessary:

- a) to prescribe a therapy according to the medical indication,
- b) to prescribe post-coital contraceptives according to the medical indication,
- c) to arrange for another examination of the child within 7-14 days, and earlier where necessary,
- d) where necessary, to refer the child, accompanied by the parent or legal representative and health worker, to the mental health protection ward or child protection clinic in order to provide support to the victim and alleviate the impact of the traumatic event,
- e) to recommend to the parent or legal representative to visit their chosen general practitioner for further treatment and any prescriptions, referrals, etc.,
- f) to talk to the parent or legal representative and the child about the options to resolve the problem, to counsel them and acquaint them with the existence of institutional and extra-institutional organisations for help and support (social care centres, specialised non-governmental organisations providing help to abused and neglected children, etc.), and to acquaint them with the rights of the child;
- g) if the child has no health insurance, the health institution shall act in accordance with the regulations governing health care and health insurance in the Republic of Croatia.

2.4.5. Responsibility of health institutions

Health institutions shall:

- a) ensure the presence of trained and qualified staff for the examination in case of child abuse and neglect for 24 hours a day,
- b) ensure an immediate availability of the prophylaxis for sexually transmitted diseases and pregnancy and other medical indication,
- c) continuously carry out specialised training of their professional staff on child abuse and neglect,
- d) appoint a person or persons for the coordination of protection and help for child victims of abuse and neglect,
- e) ensure the proper forms for the examination of the victims of abuse or neglect where the examination is being carried out,

- f) ensure the cooperation and implementation of multidisciplinary teamwork (paediatrician, general practitioner, gynaecologist, psychologist, social service, police, etc.) in order to avoid additional trauma to the child caused by a repetition of the traumatic event,
- g) the parent or legal representative shall be entitled to a copy of the entire medical documentation, which should be made available to them upon their request in accordance with the regulations in effect.

Health institutions shall report any child abuse or neglect to the police or social care centre.

Health institutions shall remain in constant contact with the competent social care centre and police, and shall attend consultation meetings upon their request.

Upon the request of the police, State Attorney or court, health institutions shall immediately submit the entire medical documentation necessary to explain and prove a criminal offence.

2.5. EDUCATIONAL INSTITUTIONS

The Protocol on the Procedure in Case of Child Abuse and Neglect aims to provide important information on the preventive actions taken by educational institutions, and actions in case of child abuse and neglect.

Educational institutions shall ensure that the rights of the child are exercised in cases of all forms of violence, sexual abuse, neglect, educational neglect, negligent behaviour, abuse and exploitation.

All educational institutions shall implement the existing preventive and intervention programmes, as well as to develop new ones where necessary.

Teachers and associates of educational institutions shall become acquainted with the provisions of the regulations governing the rights of the child/pupils.

2.5.1. Procedures regarding protection measures in case of an infringement of the rights of the child

Where there are grounds to suspect child abuse or neglect, teachers shall, in accordance with this Protocol, urgently initiate a procedure to protect the rights of the child in accordance with the competent authorities and institutions. Teachers shall notify any action harmful to the child to the principal or expert associate.

The educational institution shall notify the competent institutions and authorities, and the competent institutions and authorities shall give feedback on the procedure for the comprehensive approach to the protection of the child's rights and interests.

In cases of violence towards a pupil, employees of the educational institution shall take immediate action to stop the violence, and to provide help in accordance with their competence. If the pupil is hurt to the extent that they require medical assistance, particularly urgent medical assistance, the teacher or principal shall call the physician or ambulance immediately, and act according to the recommendations. The education institution shall, where necessary, immediately call the police, or notify the incident to the police and the social care centre.

In case of a particularly severe form or intensity of violence that caused or may cause trauma in the child victim or other pupils, the education institution shall notify the ministry competent for educational affairs and, where necessary, other ministries, and will be able to request appropriate professional psychological or social/pedagogical help for the pupils of the education institution.

Where a criminal offence is suspected, the teachers shall secure the tracks and evidence of the criminal offence inside the educational institution until the arrival of the police, and prevent them from being destroyed, concealed, altered or removed from the scene. Upon the request of the police, the principal and teachers shall make the documentation available to them and provide information on the infringement of the rights of the pupil.

The teachers shall keep official record of their observations and of all activities and measures taken to protect the rights of the pupils, which they shall present to the principal in writing, as well as to other competent authorities upon request (the police, State Attorney, court). The expert associate or other teachers responsible for reporting violence in the educational institution shall, in the case of peer violence (except in confrontations lacking elements of violence) or suspected family violence, complete the form of the violence report as soon as possible and no later than seven days after the incident. The form shall be available on the website of the ministry responsible for education. Educational institutions (kindergartens, primary schools, secondary schools and boarding homes) shall have in place preventive programmes which are a part of the annual plan and programme of the educational institution, and shall appoint a preventive programme manager. Educational institutions shall implement comprehensive preventive programmes. All employees of the educational institution shall be involved in the implementation of the preventive measures and activities.

The Education and Teacher Training Agency shall organise professional training for teachers and expert associates in educational institutions.

It is recommended that educational institutions create safety and prevention programmes that would contribute to the safety of the pupils and to the clarification of the role of all teachers in accordance with this Protocol.

III. THE FORMS, METHODS AND CONTENTS OF THE COOPERATION BETWEEN THE COMPETENT AUTHORITIES

All authorities and experts responsible for child protection shall act in a partnership to establish efficient means of cooperation and exchange of relevant data. In case of a reported or notified violence, they shall: make available to the competent authority the relevant data on the case and procedure in order to enable a complete insight into the measures taken for the comprehensive protection of the child; establish a cooperation with other persons that may help in that concrete case or protect the child; and, where necessary, hold consultation meetings to harmonise their actions and plan long-term measures to meet the child's needs. In particularly urgent cases, the exchange of information should be effected immediately in a direct contact so that the necessary measures and actions can be taken immediately and in coordination.

The exchange of personal data shall be carried out in accordance with the provisions of the law governing the protection of personal data. The competent ministries shall be authorised to make the personal data of the victims and perpetrators available to other bodies upon their request or *ex officio*, where necessary for the purpose of taking measures falling within the activities laid down by the law. The written request shall contain the purpose and legal grounds for the use of the personal data, as well as the type of the personal data requested. In case of a need to take immediate action to protect the health and life of the child, the data may also be exchanged after receiving a telephone request.

Submitting personal data to non-governmental organisations is permissible only upon a written request of a concrete organisation, containing the purpose and legal grounds for the disclosure of the data in accordance with the law governing the protection of personal data.

IV. FINAL PROVISIONS

1. Each national authority participating in the protection of children from abuse and neglect shall act in accordance with the activities laid down in this Protocol.
2. Upon the adoption of this Protocol, all line ministries shall acquaint the authorities and institutions within their purview with this Protocol, ensure the availability of this Protocol, ensure the training and supervision of experts, and take the necessary measures for this Protocol to be implemented consistently.
3. The line ministries shall monitor the status and trends of child abuse and neglect, and shall produce statistics thereof.